

**Psychotherapy and Spirituality – practical issues ...**  
**A paper presented at the PACFA Inaugural Conference by Phil Henry**

**Abstract:**

*Wellbeing and health must embrace the whole person. Each person is driven by a range of hierarchical meaningful needs - survival, security, self-esteem, love, self-expression, intellectual and spiritual fulfillment. Spirituality is the growth of the individual in the search for a deeper source of wisdom and guidance for fulfillment. Spirituality also considers values, beliefs and guiding principles by which we live. This paper will explore the integration of spirituality and psychotherapy. It will also consider the ethical and practical implications of such integration, and its impact upon our definition of training.*

**Introduction:**

As the twenty-first century moves forward, we are beginning to see an intersection in the areas of psychotherapy and spirituality. Beck (2003) states that: "psychotherapy professions are engaged in an impressive effort to humanize their work more broadly by paying unprecedented attention to spirituality and in some cases to religion" (p 24). Becvar (1998) also sees the surge of spiritual interest amongst the traditional mental health professionals as relating to the flourishing alternative and complementary medicine movement.

As psychotherapists and counsellors, we are trained to work with what is really happening within the lives of our clients. As we move further into our work, we are more able to tell what is real for our clients. We begin to develop a sixth sense, something that is intuitive – a gut feeling. Our spirituality is not something that is purely confined to the inner person. Rather, it is the way in which we holistically respond to our life and the context in which we live. Spirituality is about restoration, about peace of mind, about courage and purpose, and about unity with the Transcendent.

There is no doubt that our worldview helps make sense of life, assists in the choice of values, establishes absolutes, determines what is right or wrong, and makes decisions on lifestyle and plans towards a destiny - the future. With this broad statement in mind, to raise the issue of spirituality within contemporary Australian society is to open a veritable Pandora's Box. It is to walk carefully along an obscure pathway, like a pilgrim journeying to the unknown. It is to heighten the awareness of a people who have buried their dreams and beliefs, trading them for the immediate and the superficial.

In approaching holistic health the whole person must be embraced. One theoretical approach is that each person is driven by a range of hierarchical meaningful needs - survival, security, self-esteem, love, self-expression, intellectual and spiritual fulfillment. Spirituality is the growth of the individual in the search for a deeper source of wisdom and guidance for fulfillment. Spirituality also considers values, beliefs and guiding principles by which we live. Spiritual and psychological aspects of human functioning are inextricably related. They require careful reflection. Benner (1988) asks a challenging question: "Is psychotherapy a medical act or does it belong within some other framework?" Baldwin's Dictionary of Philosophy and Psychology notes that this early use of the term implied that the goal of psychotherapy was changes in bodily states; only the method was psychological" (p 12). Allan Bergin's (1979) definition agrees that "psychotherapy is any of a variety of psychological means used to modify mental, emotional and behavioural disorders" (p 886). Therefore, it is important that consideration be given to obtaining a clearer understanding of the overlaps that exist between psychology and spirituality. A clearer understanding of these overlaps could certainly reduce areas of mistrust and resolve matters of identity.

This paper has significant limitations. These limitations lie within each of us as individuals, and where we stand with the entire question of spirituality within our practice of psychotherapy. These limitations lie also in the realities we face. Tacey (2003) states that we are "stuck between a secular system we have outgrown and a religious system we cannot fully embrace" (p 2). Tacey also confirms that: "the fields of public health, social work and psychology are now facing a crisis situation, when secular-trained

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therapists are no longer sure how to respond to this new and urgent cry for spiritual meaning" (p 3).

**a. Spirituality:**

Spirituality is multifaceted and encompassing. Tacey proposes that "spirituality seeks to bring spirit and body, sacredness and sexuality together through a redemptive experience of the totality and mystery of life" (2003, p 36). Shea acknowledges that "spiritualities are composed of belief, stories, and practices that focus on the spiritual dimension and its subtle interactions with physical, psychological and social dimensions. These beliefs, stories and practices are not ends within themselves. They are in service to spiritual consciousness. They are meant to bring awareness into the soul's space, the deepest center of consciousness, and to facilitate seeing and acting from that space" (2003, p 119).

The spirituality of the person also pertains to a sense of meaning, relatedness to nature, all humanity and the Transcendent. Meaning includes the things that shape experience and create attributes of hope, authenticity, trust, courage, perseverance and other ways of being in the world. It is of vital importance to the inward journey towards transformation and what it is to be a person. De Mello (1990) states, that spirituality means waking up, and sometimes waking up is unpleasant. The first step in waking up is about being honest with one's self (p 5,9). Shamy (1977) states that: "the word spiritual embraces the essence of what it means to be human. When we touch those aspects of people's (and our own) lives that contain reality, we are touching the potential for the sacred". We live in a materialistic culture; however, the soul stirs within (Moran & Kelly, 1990). The sacred is concerned with 'right relatedness' and includes those experiences in life which transcend sensory phenomena, being brought about through vulnerability. It is concerned with personhood, beliefs, identity and the meaning of life. The person theoretically brings a spiritual background and their implicit faith to human situations. Potentially, however, there is a 'gap' which the therapist fills with their 'explored tested values'. These values can present strengths and limitations dependant upon the value stance from which they come. (Edwards, 1980, p 31).

**b. Psychotherapy:**

The helping relationship of the psychotherapist and the person begins within the experience of confusion about the person's behaviour, mental processes, moods, and inability to cope and relate in work and / or relationships. The goals of psychotherapy relate to awareness, the reduction of conflict, integration within, increased ability, a willingness to function in love and work, and an increase in normality and ego control. The attitude of the psychotherapist is to heal or cure, to comprehend and solve mystery, and to help the person to find peace and personal fulfillment. The therapeutic relationship will require the therapist to be a sensitive listener, authentic, willing to enter the person's world with empathy and respect for the person's uniqueness. It will require a motivation of what Carl Rogers calls 'unconditional positive regard'. With many therapists now coming to value the need for transcendence, if not a sense of the 'sacred', and the necessity of living by more than ego, it is not surprising to find some blurring in the areas of psychotherapy and spirituality.

**Practical considerations:**

In this paper, three practical considerations will be explored. These considerations relate to the implications of integration, ethical issues and the impact upon our definition of training.

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**1. Implications of integration:**

The integration of spirituality and psychotherapy commences with the person. What does it mean to be a person? To be a person is to have a certain status, to be worthy of respect. May (1982) notes significant aspects within his definition of personhood. These are the care context, stabilization, and the continuing change of environmental conditions. The spiritual integrates and holds together the physical, psychological and social dimensions of life. "The spiritual integrates these three dimensions into an individual person who is more than the sum of his or her parts" (p 55).

Elkins (1999) relates the following personal reflection: "during that first therapy session 20 years ago he listened to me as no one had ever listened before. I told my story, the one I had rehearsed, but he heard the truth anyway. Near the end of the session, he said gently, "You are spiritually hungry." I began to cry. Me, a grown 31-year-old man. Because somewhere, deep inside, I knew he was right. For the next two years, under the guise of psychotherapy, I was taught how to care for and feed my soul. The psychologist gave me the skills I needed to build a life of passion and depth. Today, as a clinical psychologist and university professor, I share this wisdom with clients and students, because I believe spirituality is essential to human happiness and mental health" (p 45).

Benner (1988) cites Doran (1979) in reviewing the relationship between psychology and spirituality. He quotes Doran's challenge on extreme positions that must be avoided. Doran states: "The first is the reduction of spirituality to psychology, wherein spiritual experience is nothing but some psychological mechanism. The second error is to divorce spirituality from psychology so completely that spirituality becomes a separate realm of human activity that is not integrated with psychological reality" (p 858). Integration simply refers to the process which incorporates and brings together two different disciplines, namely psychotherapy and spirituality.

The issues of integration must be considered and appropriately addressed by the therapist. Initially, these relate to the therapist's worldview, behaviour, training, practice and ethics. Tacey (2003) confirms that: "it is our secular society realizing that it has been running on empty, and has to restore itself at a deep, primal source, a source which is beyond humanity and yet paradoxically at the very core of our existence" (p 1). Tacey challenges us further: "to revise our concepts of life, society and progress, while preserving the advantages that technology and science have given us. The spiritual life is no longer a specialist concern, confined to the interests of a religious group. Spirituality is now the concern of everyone, religious or secular, young or old, atheist or believer, educated or otherwise, because we inhabit a different world in which spirit is making new and quite extraordinary demands" (2003, p 1).

The individual's worldview is a constructed model of reality that is eventually taken as reality itself – it becomes the individual's truth. It is a set of working assumptions that are unquestioned because they are taken for granted. Within this context, the therapist should be aware of practical issues, arising from:

- neutrality
- inaccurate diagnosis
- misuse of power,
- inadequate limit-setting
- discomfort with religious and spiritual material
- therapist arrogance
- failure to recognize the benefits of the spiritual dimensions of life, and
- the lack of education and training in the area of spirituality.

La Torre (2002) states that "many therapists are now beginning to consider the healing opportunities available when incorporating a more holistic view of mind, body and spirit." There is, she states, "a shift in thinking from separation to integration" (p 108).

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**2. Ethical considerations:**

Tacey (2003) states that our lives are not rational, and as such, we are challenged by the reality of the sacred whether we acknowledge it or not. Spirituality and fundamentalism are at differing ends of the cultural spectrum. Spirituality looks toward the contemplative, sensitive and transformation with the sacred - dealing with uncertainty. However, fundamentalism looks for certainty, providing answers and absolutism.

Every aspect of healthcare must be approached from an ethical perspective. There are ethical reflections and guidelines which surround procedures, clients' rights, business conduct, and organizational issues. In review of PACFA's ethical guidelines for members, there are six key ethical principles. These are:

- to respect and value the person, their humanity, worth and dignity
- to recognize and respect diversity among people, opposing discrimination and oppressive behaviour
- to respect the privacy of the client, preserving confidentiality
- to protect the rights of the client
- to maintain and develop competence within their professional lives, and
- to abide by the laws of the society in which they practice.

Somewhere on this continuum is the need to think ethically about the issues and new initiatives of spirituality. Shea (2000) sees that ethics must enter the spirituality arena as spirituality can "shape decision making and how decisions will be carried out" (p 62). From the perspective of spirituality, ethical consideration must also be given to principle, consequence, the character of the person and the feelings associated with the action. Shea (2000) also refers to the concept of 'everyday ethics' - that is, the ability to consistently act on deeper values, perceptions, motivations and the sense of identity of the person. Alternatively, Kelly (1995) sees that the unethical influence on values eliminates or reduces the freedom of clients to choose their own values. Kelly states four specific ways in which values can be reduced or eliminated. These are:

- the imposition of counsellor values
- counsellor judgments on moralism
- the counsellor promoting limited value options, and
- selective reinforcement of counsellor acceptable values.

The counsellor's response to spiritual issues is susceptible to the unconscious influences which are rooted within the counsellor's own developmentally shaped attitudes toward spirituality. Walsh (1999) acknowledges that there is a barrier separating psychotherapy and spirituality which concerns the potential abuse of power in the therapeutic relationship. This can occur if the therapist either actively or subtly influences the client to adopt his or her own perspective or views on spirituality.

For thousands of years people have debated whether what is right and wrong is a matter of objective moral truth, or a matter of opinion. That is whether, when we make a judgment on another's behaviour we are:

- describing factual aspects of their behaviour
- expressing our feelings about that person's behaviour, or
- reporting social conventions about it.

Barnes (2001) makes the point that ethics are concerned with and aims towards the best outcomes as well as carrying out specific duties (p 8). There is a need to challenge the boundaries in which our therapy is conducted. These challenges exist "between public and private, political and personal, external and internal, being and doing, extraversion and introversion, politics and psychotherapy, psychotherapy and spirituality, and spirituality and politics" (Samuels in Barnes 2001, p 205).

**Psychotherapy and Spirituality – *practical issues* ...**  
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**3. The impact upon our definition of training:**

La Torre (2002) and Becvar (1998) agree that religious traditions are frequently seen as being incompatible with the sciences. In fact psychotherapy and spirituality have a long history of mutual skepticism, if not antagonism. However, Tacey (2003) states that: "the rise of interest in spirituality in school, college and university students has placed the state educational authority (with its 'free, secular and compulsory' system) in a difficult and curious situation". He states further: "the contemporary humanities and social sciences have no intellectual understanding of spirit, even though the term might be used in casual expressions or various discursive contexts ... mostly spirit in these contexts refers to the human spirit or to a generalized feeling generated by human activities, but spirit in the sacred context, with reference to a universal or cosmic power, is too religious or theological for the secular academy to deal with" (p 58). Reality shows that the interest in the transformational (the sacred), rather than the informational (educational) could be met by current processes of psychotherapeutic endeavour.

It would seem that the majority of psychotherapists are ill-prepared to work in the spiritual areas of their client's lives (Becvar 1998, p 27). As the therapist's view in dealing with the spiritual dimension can be either an asset or a potential obstacle, some would clearly see that support of integration would be a positive step ahead. Others, to the contrary, have concern for the appropriateness of this development. Griffith & Griffith (2002) conclude that "spirituality loosed from the container of religious tradition also can do harm." Comparative religions scholar Huston Smith (2000) in Griffith & Griffith (2002) proposes that "spirituality needs the 'traction of religious tradition' to keep it accountable to a community. Otherwise, spirituality risks becoming a self-centered quest for personal growth" (p 18). Therapists certainly have values ingrained from their respective professions and orientations to therapy. Therefore, as clinicians and therapists attending to the spiritual needs and personal struggles of clients, there needs to be an awareness of the spiritual environment that can be present and treated within therapeutic process. The problem, from an academic perspective may well be, that dialogue about spirit is 'both backward looking and regressive' (Tacey 2003, p 95), when in fact we urgently need models to be established that are capable of moving us forward spiritually.

**Future considerations / conclusion:**

Spirituality is a powerful dimension of human experience, with growing importance and diversity in today's changing world. To revisit the limitations of this paper is to challenge the way ahead for each of us, in both our individual journey and within the contemporary dialogue of spirituality.

The challenge for understanding, acceptance and review is in the personal, the academic and broadly, within the community. This review calls for an urgent overhaul incorporating the broadest spiritual perspectives of outgrown systems. Is it possible to find an appropriate response to the barrier that separates psychotherapy and spirituality? How are we to find ways in which our spiritual competency can be increased or transformed while acknowledging the challenges of integration?

**In what way are we called to respond?**

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