Preparing Emergent Counselors to Work With Spiritually Diverse Clients: Implications for Supervision

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Clinical internships are the culminating experience for beginning counselors before they are credentialed with degrees that allow them to practice independently. Imperative to this process is the supervisee’s level of cognitive complexity, cognitive development, and personal experiences (Bernard & Goodyear, 2009). By the time supervisees have completed their clinical requirements, it is expected that these experiences have fostered the counselor’s ability to effectively conceptualize and analyze a given case. This is a process necessary for synthesizing previously learned information, considering treatment options, and constructing a case plan for effective intervention (Granello, 2000). Challenging cases serve as tests for emergent counselors regarding their developmental understanding and ability to adapt and deliver needed services to clients while having the benefit of supervisors to guide them toward best practices. While these experiences provide excellent preparation, other competencies, such as speaking with clients about their spiritual beliefs, are often minimized or excluded from the supervision process.

Inherent to supervision is the idea that supervisees’ experiences formulate their worldview and are inextricably linked to how they conceptualize the needs of clients. Personal experiences include individuals’ culture, gender, age, and spiritual beliefs, all of which contribute to worldview (Curry & Simpson, 2010). However, while the counseling community has become increasingly more diligent and comfortable discussing issues of diversity and differences in culture, gender, and age, spiritual beliefs remain a taboo subject for many. The separation of church and state, and ultimately, the separation of religion and education, led to the deliberate omission of spirituality and religion from graduate programs in counselor preparation (Allen & Coy, 2004; Hall, Dixon, & Mauzey; 2004; Powers, 2005; Walker, Gorschuch, & Tan, 2004). Within the auspices of this article, references to spirituality are not meant to be interpreted as adherence to a specific religious doctrine or paradigm. Rather, spirituality refers to individuals’ beliefs, values, practices, and meaning-making processes that indicate a connection with something greater than oneself.

Positive dimensions of spirituality can include a sense of purpose, the development of empathy and altruistic caring, compassion, forgiveness (Pargament, Smith, Koenig, & Perez, 1998), and transcendent beliefs. Some individuals do this through adhering to a specific religious belief system while others may not. Counselors need to understand how spirituality can impact how clients make decisions, understand life stressors, and rely on spirituality to cope with obstacles (e.g., prayer, meditation; Bickel et al., 1998). Although the value of understanding client spirituality is supported in literature, many practitioners and counselor educators may not understand how to, or feel prepared to, integrate spirituality into counseling practice (Young, Cashwell, Wiggins-Frame, & Bélair, 2002).

Based on Census data from 2007, approximately 84% of Americans (approximately 207 million adults) identify as being a member of a specific religious denomination or as adhering to a spiritual belief system (U.S. Census Bureau, 2008). Given that so many individuals in the U.S. ascribe to religious or spiritual belief systems, it is imperative that supervisors work with counseling interns to explore their personal experiences and worldview regarding spiritual and religious beliefs. Supervisors should help counselors-in-training develop tools to examine, analyze, and plan interventions utilizing spirituality as a strength-based tool to assist clients. One framework supervisors can utilize to help supervisees understand how individuals’ spiritual development impacts their decision-making process is Fowler’s (1981) stage model of faith development.

**Stages of Faith Development**

Fowler’s (1981) stages of faith development are somewhat projected against Erikson’s stages of psychosocial development in order to provide a context for understanding how individuals’ faith can evolve over the lifespan. These stages are labeled as follows: (1) Undifferentiated Faith (infancy) is developed as caregivers attend to vulnerable infants’ needs, thereby beginning the ideas of love, faith, hope, and trust; (2) Intuitive-Projective Faith (early childhood) is marked by young children’s egocentric and imaginative visualization of faith stories, and the actions of important adults in their world, that leave lasting emotional impressions; (3) Mythical-Literal Faith (school years) allows children to begin to take ownership of the beliefs and rituals that will help them gain entrance into their community; beliefs and moral rules are interpreted literally; (4) Synthetic-Conventional Faith (adolescence) occurs as individuals begin to look beyond their family to peers and other influences for beginning individuation; at this point, a synthesis begins between values and information that will help to formulate identity; (5) Individuative-Reflective Faith (young adulthood) has a dual component where one is attempting to understand how one’s faith, without the influence of significant others, contributes to identity. Simultaneously, this new identity enables one to utilize his or her individuated worldview to interpret the actions of others within the same faith system. (6) Conjunctive Faith (mid-life and beyond) allows the individual to have an integration of individual faith identity and worldview in order to go beyond one’s personal faith doctrine to see the relativity and connectedness of faiths other than one’s own, as well as adapting one’s worldview to understand other’s experiences; and (7) Universalizing Faith (rare and not attained by many) a stage in which individuals understand the universality of humanity and are not bound to understand faith through societal conventions. These stages provide a guide that can help counselors understand...
some of the faith and value conflicts that clients encounter throughout the life-span. Just as with other developmental models, counselors need to be cognizant of the fact that their client’s life experiences and worldview cannot be singularly interpreted by examining development in terms of stages, rather it is the client’s description of his or her conflict and incongruency that gives life to the task of helping the client resolve issues. Utilizing parallel process, supervisors can work with supervisees to examine their level of faith stage development and explore how this understanding can be harnessed and utilized for positive, strength-based approaches to resolving incongruence in daily functioning.

**Using the Faith Development Model in Supervision**

Supervisors may want to first introduce Fowler’s model and explain each stage to the counseling intern. After introducing each stage, the supervisor may ask the intern, what are some thoughts or practices/behaviors you may see from a client in this stage of faith development? How might the client’s view of the problem be affected by his or her faith development at this stage? The supervisor may ask the intern to think of his or her caseload and identify the stage of each client using observations as evidence (e.g., what has the client said or done that indicates level of faith development?). If the supervisee/intern is unsure of the client’s faith development, the supervisor may want to ask, how could you find out your client’s level of faith development? Would it be important to know the client’s faith development given his or her presenting problem? If it is determined that integrating spiritual or faith based perspectives in the counseling process would be therapeutic, then the supervisor and supervisee may want to consider techniques for promoting spiritual and faith based discourse. For example, counselors may wish to use a variety of experiential or expressive techniques with clients such as spiritual timelines, poetry, storying, music, narrative, and bibliotherapy (Curry, 2009; Kirk-Duggan, 1997). The supervisor may assist the supervisee to develop goals for the client by asking, given the client’s stage of faith development, how might spiritual practices or beliefs be used as a coping strategy?

It is important that supervisees understand and acknowledge their own comfort level in addressing client spiritual issues. In order to become fully effective, it is first necessary that supervisees are aware of their own spiritual/religious/faith beliefs and how these beliefs impact their work with clients. Asking supervisees to think about their own faith development can promote this process. Supervisors may also want to review the American Counseling Association’s (2005) *Code of Ethics* in regard to making appropriate referrals if the counselor is uncomfortable addressing the client’s spiritual needs or concerns. Supervisors should also remind supervisees that attempts to influence or change the religious or faith perspectives of a client is unethical behavior (ACA, 2005).

**Conclusion**

Spirituality is an important part of life for many people. Counselors wishing to fully assess the needs and strengths of clients need to consider clients’ spiritual growth and development. Fowler’s (1981) stages of faith provide one framework for this type of assessment. However, there are numerous ways that faith and spirituality may be framed by both clients and counselors. Counselors-in-training and supervisors are encouraged to reflect on how spirituality develops and manifest over time, how client’s rely on their spiritual beliefs to contextualize problems and solutions, and how spiritual discourse may be beneficial to the counseling process.

**References**


