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The Creative Use of Spirituality to Enhance Psychotherapy

Paper based on a program presented at the 2010 American Mental Health Counselors Association Conference, July 15-17, 2010, Boston, MA.

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Until the last decade or so, discussion of religion and/or spirituality was considered outside the scope of the psychotherapy process. However, as spirituality has been introduced via the media (e.g., Oprah and others), and books on spirituality top the bestseller lists, more and more people are acknowledging the spiritual aspects of their lives. Therefore, it is not unusual for clients to talk openly about the subject. So what is the traditional psychotherapist to do with this new way of thinking?

The purpose of this article is to provide options and considerations as this new development continues to unfold. For those psychotherapists who decide to fully embrace religion and/or spirituality in their work, the task is relatively clear because books and articles are available to guide the process. For the other end of the spectrum, those psychotherapists who decide to not engage in any level of religious and/or spiritual discussion, referral is the logical option.

This article will focus primarily on those who are in the middle of the spectrum—those psychotherapists who are interested in using spiritual techniques to enhance the process of psychotherapy without fully embracing the religious and/or spiritual arena. Suggestions will be offered for further reading, as well as some of the contraindications that might need to be considered when making decisions about this subject.

Operational Definition

Spirituality, as used in the context of psychotherapy, is the perspective that one can have a personal relationship with a higher form of consciousness that exists outside the five senses. The experience is open to individual interpretation and can include a particular religious affiliation or a more generalized belief system.

The creative use of spirituality can enhance the process of psychotherapy; it does not replace it or become the higher framework. Spiritual direction is a different modality and is separate from psychotherapy; the focus in spiritual direction is the maintenance...
and well-being of a person’s spiritual practice and may include conversion, prayer, meditation, or contemplation (Sperry, 2001, p.10).

**Brief History**

Prior to the nineteenth century, “psychological healing had been linked with spirituality and religion” because issues of mental health were addressed by medicine men, priests and priestesses, prophets, soothsayers, and shamans (Cornett, 1998, p. 4). Over time, however, modern science became the accepted authority as the dominant worldview, and psychology and psychiatry evolved as “respected sciences” during the late 19th and early 20th centuries (Richards & Bergin, 1997, p. 23).

During that time, psychoanalysis and behaviorism were the most respected forms of psychotherapy, and their bias against religion and spirituality had a strong impact on the field. Several well-known leaders were considered to be atheists: Freud, Watson, Skinner, Hull, Wolpe, Bandura, and Rogers (Richards & Bergin, 1997, p. 27).

As science has evolved, however, the view of a mechanistic and deterministic world has been questioned. Many scientists now believe that the concept of God and spiritual realities can be “within the realm of rational plausibility” (Richards & Bergin, 1997, p. 37).

Psychological views have also evolved. In the 1950s and 1960s, a “third force” in psychology gained credence. The humanistic-existential tradition of Rogers and Maslow focused on the fact that humans can “transcend their circumstances” and actualize their potential (Richards & Bergin, 1997, p. 43). In the 1970s, cognitive and systemic philosophies gained strength, along with transpersonal or spiritual psychology.

As “civil rights and feminist movements challenged” the stereotypes of the psychotherapy profession, the professional associations responded with guidelines for diversity training (Richards & Bergin, 1997, p. 45). Religious and spiritual diversity have also gained respect: In 1994, the DSM-IV included V62.89 Religious or Spiritual Problem in the section under “Other Conditions That May Be a Focus of Clinical Attention” (p. 685).

**Increased Acceptance of Spirituality in Mainstream America**

As previously stated, spirituality has been introduced to the public via popular media which has featured interviews with authors of spiritual material. The response has been overwhelming. Televised programs of religious services range from the orthodox to the new age. Presentations of psychological and motivational material frequently include spiritual ideas. Many books on the subject have become bestsellers. Spiritual websites abound. To a great extent, therefore, spiritual conversations have become mainstream.

However, the decision of a psychotherapist to discuss spirituality with a client is still a complex issue. Even if the client brings up the topic, it is still potentially a sensitive subject. Many beliefs are intertwined with family values or organizational frameworks that object to exploration of the topic of religion or spirituality. Therefore it is imperative that the psychotherapist differentiate between “spiritual direction” and discussion of spirituality within the framework of psychotherapy.
Comfort Level of the Psychotherapist

Before broaching the subject of spirituality in a session, the psychotherapist may benefit from searching his or her own comfort level. Following are some ideas to consider.

1. Clarification of values and beliefs held by the psychotherapist:
   a. Does the psychotherapist have a strong affiliation with a religion or spiritual group? Are there strong beliefs in place regarding the “right” way to live?
   b. On the other hand, does the psychotherapist have a bias against any particular belief system?
   c. Does the psychotherapist think religious and/or spiritual beliefs should be public, private, or somewhere in between?

2. Flexibility of the psychotherapist:
   a. Can the psychotherapist easily change the direction of a session?
   b. Can the psychotherapist tolerate working with mystery, with the unknowable as it becomes a topic to discuss? For example, who or what is God; what is the purpose of life, of suffering or death.

3. To what degree does the psychotherapist identify with the following:
   a. Religious – organized religion of any kind
   b. Spiritual - beliefs about a higher form of consciousness that exists outside the five senses, but not necessarily part of organized religion and not necessarily called God.
   c. Atheistic - the definite belief that God does not exist.
   d. Agnostic - the label for people who do not have a belief about God; maybe there is a God and maybe there is not.

4. Interest level of the psychotherapist:
   a. Does the psychotherapist want to proceed with this work?
   b. Is he or she willing to undergo more training in this area?

5. Decisions about working in this area:
   a. One option is to work within a particular religious or spiritual framework. There are textbooks that address these types of concerns (see appendix for a partial listing). Since the role of the psychotherapist is separate from the role of a religious leader or spiritual director, boundaries are established and referrals are made when necessary to avoid dual relationships.
   b. A second option is to take the traditional stance and simply refer all discussions of a religious or spiritual nature to the appropriate consultant.
   c. The third option is to address spirituality as part of the psychotherapy process, for example as one component of the body-mind-emotional-spiritual connection. (This option will be the focus of the remainder of this article, stressing the idea of working within the comfort zone of the psychotherapist, including ethics and boundary issues.)
6. Decisions regarding Continuum of Intervention Levels:
   a. None: Refer to others anything related to religion and/or spirituality.
   b. Minimal: Listening but with little input.
   c. Full: Listening for and addressing spiritual content that may underlie mental health issues.

7. Caveats:
   a. Remember that working with spirituality within the context of psychotherapy is a complex issue and may bring up feelings that are culturally sensitive.
   b. The spiritual vocabulary may contain words that are used differently by different people. Periodically double check for individual meaning.
   c. The spiritual realm contains the full spectrum of phenomena, from the realms of unconditional love to the realms of fear (sometimes even terror). These may also be referred to as God and the devil. Familiarity with the concept of “spiritual emergency” (briefly discussed later) may be helpful with understanding some experiences that may be shared by clients. Again, it is important to stay within one’s own level of comfort and expertise.

Selected Perspectives on Spirituality in Psychotherapy

Following will be a brief discussion of some of the research in this area. For those who are interested, it is recommended that further reading be pursued. In some cases, full training in a subject may be required.

**Theistic, Spiritual Strategy** (Richards & Bergin, 1997). In their groundbreaking book, *A Spiritual Strategy for Counseling and Psychotherapy*, the authors present a comprehensive strategy that is a good beginning for those religions that believe in God: Judaism, Christianity, Islam, Sikhism, and Zoroastrianism. Their assumptions are:

God exists, that human beings are the creations of God, and that there are unseen spiritual processes by which the link between God and humanity is maintained. (Richards & Bergin, 1997, p. 11)

This resource discusses the use of prayer, contemplation and meditation, reading sacred writings, forgiveness and repentance, worship and ritual, fellowship and service, referrals for spiritual direction, and moral instruction.

**Spiritually-Attuned Psychotherapy and Counseling** (Sperry, 2001). This perspective incorporates the spiritual dimension in psychotherapy and counseling, including spiritual practices and interventions as well as psychotherapeutic techniques. Of particular note is the need for differential diagnosis, especially in the following two main areas: 1) differentiating psychosis from “mystical voices and visions” and other “spiritual emergencies”; and 2) differentiating clinical depression from the “dark night of the soul” (Sperry, 2001, p. 85).


**Transpersonal Theory** (Cortright, 1997). In this theoretical framework, psychotherapy is viewed as work within a larger framework of spiritual unfolding. Various models are reviewed.
New Age Spirituality (Maziarek, 2002). Spirituality Simplified is an overview of what many people are talking about in mainstream America and what they may talk about in the psychotherapy session.

Spiritual Emergence Versus Spiritual Emergency. As people begin to work on a spiritual path, the new energies can be frightening or overwhelming. In the past, a spiritual path would usually be undertaken with a spiritual leader who would know about these things. However, in this new age of mainstream spirituality and self-help information, the likelihood of a spiritual emergency is increased. A particular concern could be too much intensity too soon, such as long meditations or intensive weekend experiences. It is important for the psychotherapist to have an overview of this subject, because it may be difficult to differentiate between a psychotic episode and spiritual emergence. For Differential Diagnoses and Treatment, see Cortright (1997, pp 169-179). Sperry (2001, p. 82) also addresses this issue.

Examples of Techniques – Further Training May Be Required

The creative use of spirituality could be simply a religious or spiritual slant to regular psychotherapy, to be used sparingly when appropriate. Following are some examples.

Attitudinal Change of Focus. Sometimes a client’s circumstances seem beyond the scope of what psychology and/or psychiatry alone can treat. Then it may be helpful to ask him or her to take the problem higher. Could there be another way to conceptualize the problem from a broader perspective, perhaps from a spiritual realm?

Another example would be to encourage the client to search for meaning regarding a particular problem or condition. Existential psychotherapy may provide ideas in this regard (Yalom, 1980). Following is a quote from a book by Viktor Frankl who survived three years in concentration camps: “When we are no longer able to change a situation—just think of an incurable disease, say, an inoperable cancer—we are challenged to change ourselves” (1978, p. 43).

Inner Guidance/Intuition. One way to take the problem to a higher level would be to use guided imagery to access an “inner guide” or that part of oneself that knows more about a particular issue. The guide could be called whatever the client finds relevant, for example, God or angel or simply a higher self. This may be especially useful in a deep hypnotic trance state.

Even outside a trance, many people can learn to access their intuition or —gut reaction” in order to process their feelings about issues. The experiential focusing method (see below) can be particularly helpful in this regard.

Experiential Focusing Method (Hinterkopf, 1998). This technique uses the body’s felt sense for inner guidance. Hinterkopf’s book details the use of the experiential focusing method for spiritual issues in psychotherapy.

Person-Centered Listening and Empathy Styles. When the psychotherapist listens from a nonjudgmental, respectful level of deep intensity, there is a feeling of connection that can be very healing. The connection would not necessarily be called —spiritual,” yet it seems beyond the scope of regular listening.

Mindfulness (Germer, Siegel, & Fulton, 2005). Although mindfulness may be considered a meditation technique, it can also be useful in psychotherapy.
Journal Writing. Journal writing is widely used in many psychotherapy sessions. It could also be used to explore the client's inner sense of the spiritual. This could be done in a variety of ways, including dialoguing with the higher self or one's concept of God.

Meditation. In the past, meditation was usually connected to spirituality in one form or another. At that time, meditation training was primarily taught by spiritual leaders. In the present time, meditation is also used for stress reduction or relaxation training. Many self-help books and CD's are available to use for this process.

However, the psychotherapist may wish to address the possibility that too much meditation without understanding could possibly lead to a spiritual emergency that could be overwhelming. Further, the psychotherapist may consider whether he or she is sufficiently trained to teach meditation and whether it is advisable for the psychotherapist to also meditate in session, especially since the focus of attention may drift away from the client.

Prayer. Prayer is, of course, related to spirituality. It could be used creatively in many ways as part of the psychotherapy process. However, it may be advisable to consider possible negative and unintentional consequences of using the power of prayer, as delineated in the book, Be Careful What You Pray For ... You Just Might Get It: What We Can Do About the Unintentional Effects of Our Thoughts, Prayers, and Wishes (Dossey, 1997). Although this is a controversial subject, Larry Dossey presents a compelling viewpoint which includes ways to protect oneself from possible negative consequences.

It is also advisable to consider the role of the psychotherapist regarding prayer. For example, is it appropriate for the psychotherapist to pray during the psychotherapy session?

Inspirational Reading. Homework suggestions of inspirational reading may well enhance the work of spirituality in the psychotherapy process. It may be helpful to point out to clients that some of the spiritual information may be difficult to absorb if they are speedreading. Discussion of the readings may help facilitate the process.

Boundaries and Ethical Issues

Ethics and boundary issues have been addressed throughout this article. The reader is also encouraged to focus on ethical issues delineated in the recommended readings. Following are some highlighted issues if you plan to incorporate spirituality into the psychotherapy session.

A. Assessment of religious/spiritual beliefs: In the initial interview, the question could be asked about the religious or spiritual beliefs of the client. Discuss the reason for asking the question and clarify any misunderstandings.

B. Respect for individual belief systems: Clarify the belief system before using spiritual techniques. Sometimes people change their opinions about particular issues.
C. Spirituality within context of psychotherapy practices: Keep in mind that psychotherapy is the context; spirituality is simply a part of the body-mind-emotions-spirit framework.

D. Contraindications:
   1. Without client consent,
   2. Delusional or psychotic symptoms,
   3. When spiritual issues are irrelevant to the presenting problems,
   4. Minors must have permission from parents to discuss these issues.

Conclusion and Recommendations

Because the subject of spirituality is now widely discussed in the mainstream population, it is probable that these issues will arise in the psychotherapy process. Therefore it is important that the psychotherapist at least have a general overview of the subject and some idea about the role he or she wishes to play so that appropriate boundaries can be in place. Additional training or reading on the subject is highly recommended. In conclusion:

A. Remember that addressing spirituality in psychotherapy is a complex issue.
B. Use the comfort level and the training level of the psychotherapist for decision-making.
C. Use a tentative approach; question rather than interpret.
D. Recognize that spirituality is based on faith and perspective; there are no specific rights and wrongs.
E. Respect the courage to ask unanswerable questions. For example: What is the soul? What is the higher self? What is spirit? Are they the same or different? What is reincarnation really? – How does it work?
F. Keep everything in balance; stay grounded.

References


Note: This paper is part of the annual VISTAS project sponsored by the American Counseling Association. Find more information on the project at: http://counselingoutfitters.com/vistas/VISTAS_Home.htm
Appendix: Spirituality in Psychotherapy. References and Recommended Reading
(July 2010, Revised November 2010)


Handout: Spirituality in Psychotherapy: Suggestions for Psychotherapists
July 2010

How to get started:
I. Know your spiritual context
   A. Your spiritual history
      1. During childhood and adolescence, what were you taught about religion and/or spirituality?
      2. Have your beliefs changed since then? If so, how and why?
   B. Family history: What do you know about the religious and/or spiritual beliefs of your family? (parents, siblings, grandparents, aunts, uncles, cousins, etc.)
   C. Broader context: Neighborhood, friends, cultural background, country of origin (yours and your parents).
   D. Your comfort zone: How tolerant are you of the beliefs of others? What are your prejudices?

II. Gather information about how to integrate spirituality into psychotherapy.
   A. Read about the subject. Notice that there are varying points of view. Notice that religious direction is usually considered to be a separate profession.
   B. Stay with psychotherapy techniques as the primary treatment strategy. Use spiritual techniques sparingly as adjuncts to the regular treatment process.
   C. Assess the level of interest that each client might have regarding this subject. How important to them is their faith or spiritual practice? Make notes regarding their answers so you can respect their wishes.
   D. Knowledge of various religions may be helpful, but remember that each client will have their own perspective even within a specific religion. Ask questions rather than assume.

III. Selected Strategies
   A. Hypnosis or guided imagery: Use of spiritual icons relevant to client’s beliefs, e.g., protectors, teachers, healers.
   B. Meditation: For relaxation, quieting the mind, etc. Caution: Too much meditation may be problematic.
   C. Spiritual or broader perspective: May be helpful when client is unable to resolve issues on the psychological level.
   D. Prayer: Relevant but controversial issue. Recommendation: Read Larry Dossey’s book Be careful what you pray for ... You just might get it: What we can do about the unintentional effects of our thoughts, prayers, and wishes.
   E. Journal writing: May be useful for some people to explore feelings and thoughts about conflicts, values, beliefs, and attitudes. May be a useful adjunct for use between psychotherapy sessions. Caution: Some clients may not be ready to cope with feelings when they are alone.

IV. Ethical Issues:
   A. Consent of client.
   B. Boundaries.
   C. Training and experience commensurate with practice.