DOCTORAL THESIS

An Exploration into the Meaning of Spirituality and Spiritual Experience for Counselling Psychologists, and Implications for their Practice

Mueller, Joy

Award date: 2013

Awarding institution: University of Roehampton

General rights
Copyright and moral rights for the publications made accessible in the public portal are retained by the authors and/or other copyright owners and it is a condition of accessing publications that users recognise and abide by the legal requirements associated with these rights.

- Users may download and print one copy of any publication from the public portal for the purpose of private study or research.
- You may not further distribute the material or use it for any profit-making activity or commercial gain.
- You may freely distribute the URL identifying the publication in the public portal.

Take down policy
If you believe that this document breaches copyright please contact us providing details, and we will remove access to the work immediately and investigate your claim.

Download date: 09. Mar. 2020
An Exploration into the Meaning of Spirituality and Spiritual Experience for Counselling Psychologists, and Implications for their Practice

By

Joy Mueller BSc

A thesis submitted in partial fulfilment of the requirements for the degree of PsychD

Department of Psychology
University of Roehampton

2012
Abstract

The purpose of this study was to examine the meaning of spirituality and spiritual experience to counselling psychologists, in order to address the lack of research into the psychologist’s spiritual belief systems. Interpretative phenomenological analysis was used to explore what six experienced counselling psychologists understood by spirituality and spiritual experience. The research also investigated what impact, if any, these experiences might have on their professional and clinical practices. Four super-ordinate themes were determined after analysing the interviews, based on material gained from the semi-structured interviews. These were: Development of spiritual identity; Spiritual beliefs within personal life contexts vs spiritual beliefs and professional practice; Understanding, learning and uses of spiritual experience; and finally, Disclosure within a professional capacity.

The participants placed great importance on their spiritual beliefs, which formed a fundamental part of their identity, informed their personal and professional value system, and guided them in some decisions made in sustaining difficult situations when working with substantial client suffering. This study concluded spirituality to be a deeply personal construct shaped and guided by the individual which is drawn upon in all aspects of life. Results revealed that participants are conscious of the value of spirituality and religious beliefs for their clients. Importantly, all of the counselling psychologists have what they consider to be subtle or profound spiritual experiences within their lives and with two of the participants, in their therapeutic encounters. Furthermore, in the often absent professional exploration in their training institutions and most work contexts, including supervision they draw on their personal experiences when spiritual issues arise in their work with clients. Implications for training and future research in this under-examined field are briefly discussed.
ACKNOWLEDGEMENTS

I would like to thank Anne-Marie Salm and Richard House for their invaluable advice, assistance and encouragement throughout the entire process of supervising this research. Additionally, I extend my gratitude to my colleagues on the course whose constant support in incalculable ways has been unfailing, particularly Mary, Aimee, Lucy and Maxine.

Many thanks to all of my friends who were willing to discuss their ideas and beliefs with me and, more importantly, lend a listening ear throughout the years of study. I would like to say many thanks to my family, particularly, to my son Justin, who has been an inspiration to me throughout the entire process. Thank you for your love, sacrifice and support. I love you. Finally, I am extremely blessed to have the support of my partner Peter who has never doubted my ability to succeed, and supplied me with endless support, encouragement and patience. Thank you.
## Table of Contents

1 Preface

1.1 About the Researcher 8

1.2 Introduction of the Research 10

1.3 Rationale and Purpose for Research 10

1.4 Defining ‘Spirituality’ 11
  1.4.1 Definitions of spirituality and religion 11

2 Literature Review

2.1 Literature Search and Review 15
  2.1.1 Setting the context with spiritual paradigms 15
  2.1.2 How have spiritual beliefs and experiences been addressed within psychological frameworks? 16
  2.1.3 Explanations of spiritual experience 23

2.2 Spiritual Belief – How It Relates to Counselling Psychology 25

2.3 Review of Person-centred, Psychodynamic and Cognitive Behaviour Approaches 29

2.4 Spirituality in Person-centred, Cognitive Behaviour (CBT) and Psychodynamic Contexts 31

2.5 Research into Therapists’ Beliefs in Relation to Practice 34

2.6 Spirituality in Training 39

2.7 The Problem of Language 41

2.8 Why Do This Research? 44

2.9 The Researcher’s Position in Relation to the Literature 45
  2.9.1 Conclusion 45

2.10 Research Questions 46

3 Methodology

3.1 Introduction 47
  3.1.1 Epistemological Position of the Research 47
  3.1.2 Objectivity 48
  3.1.3 Reliability and Validity 49

3.2 IPA and other methodologies 50
3.3 Interpretative Phenomenological Analysis (IPA) and Theoretical Underpinnings

3.3.1 Phenomenology
3.3.2 Hermeneutic
3.3.3 Idiography

3.4 Rational for the use of IPA

4 Method

4.1 The Research Process
4.1.2 Homogeneous participants (sample)
4.1.3 Data collection and IPA

4.2 Interview Design and Schedule
4.2.1 Interview questions

4.3 Ethics

4.4 Procedure
4.4.1 Identification and selection of participants
4.4.2 Recruitment
4.4.3 Participant details
4.4.4 Interview process, collection and follow-up

4.5 Reflexivity
4.5.1 Reflexivity Box 1

5 Results

5.1 Analysis and Results
5.1.1 Analysis of data from interviews

Table 5.1.2: Table of themes

5.2 Introduction to the Super-ordinate themes

5.3 Super-ordinate Theme: Development of Spiritual Identity
5.3.1 Introduction
5.3.2 Early perceptions of the spiritual self
5.3.3 Belonging vs not belonging
5.3.4 Searching for a spiritual fit
5.3.5 Ongoing spiritual development
5.3.6 Summary
5.4 Super-ordinate Theme – Life Contexts vs Professional Practice in Relation to Spiritual Beliefs
   5.4.1 Introduction
   5.4.2 Spiritual belief as support
   5.4.3 Differences in contexts
   5.4.4 Evidence-based models and ‘working in the unknown’
   5.4.5 Integration of spiritual self and professional self
   5.4.6 Summary

5.5 Super-ordinate Theme: Understanding, learning and Uses of Spiritual experiences
   5.5.1 Introduction
   5.5.2 Changing states of consciousness
   5.5.3 Connecting with the self, God, nature and others
   5.5.4 Phenomena considered to be spiritual
   5.5.5 Spiritual Experience induced changes in self-concept
   5.5.6 Summary

5.6 Disclosure: Issues in Practitioners’ Professional Capacity
   5.6.1 Trust vs fear of judgement
   5.6.2 Confusion (limitations) in training
   5.6.3 Issues of power in the therapeutic context
   5.6.4 Boundaries
   5.7 Summary
   5.7.1 Reflexivity Box 2

6 Discussion
   6.1 Research Aims
   6.2 Development of Spiritual Identity
   6.3 Spiritual Beliefs within Personal and Professional Contexts
   6.4 Understanding, Learning and Uses of Spiritual Experience
   6.5 Disclosure within Professional Capacity
     6.6.1 The problem of language
7. Conclusion

7.1 Using IPA
7.2 Critical evaluation
7.3 Selection of participants
7.4 Interview Design
7.5 Validity
7.6 Contribution and implications for training, Supervision and practice

7.7 Further research
7.8 Final comments

References

APPENDICES

Appendix One: Recruitment Letter for Participants
Appendix Two: Participant Consent Form
Appendix Three: Debriefing Information
Appendix Four: Emergent Themes No. 5
Appendix Five: Transcript No. 5

Tables and Figures

Table 1. Participant demographics
4.5.1. Reflexivity Box 1
5.1.2 Table of Themes
5.7.1 Reflexivity Box 2

Figure 1. Model of implications for training and practice.
Chapter 1

Preface

1.1 About the Researcher

I am a mid-life African American/British woman who has lived in Britain for over 17 years. I have worked as a couples’ counsellor for 15 of those years in a widely recognised charity for relationship counselling. Though I received my early education from a faith/denominational school, I did not find it a belief system that resonated with me or that I saw widely reflected in the external culture that I was raised in, so religious beliefs played no conscious role in my younger life.

During the time I worked as a relationship counsellor, I witnessed the intimacies in peoples’ lives when they were at their most vulnerable. My ongoing amazement at their ability to trust something about the process of counselling and, in many cases, life itself awakened the notion of a spiritual sensibility in me, and led me on my own search. I often felt that there was what could be termed, a ‘spiritual’ component present during our therapy sessions. Although in my relationship counselling training, the work drew heavily on humanistic, psychodynamic, person-centred and systemic ideas, a concept of ‘the spiritual’ was never discussed, either in individual or group supervision. Therefore, I never spoke about my own spiritual development.

After working for five years as a relationship counsellor, I decided that I wanted to work at more depth with people in a therapeutic capacity. Subsequently, I completed an undergraduate degree in counselling and psychology. This then led me to the PsychD counselling psychology programme. Surprisingly, throughout all of this work and training with various NHS placements, studying, and so on, in the case of both the lecturers and supervisors I encountered resistance to open discussion of personal growth in the area of spirituality. Exploration of spiritual beliefs and practices of the trainee therapist never seemed to come up in classroom or supervision discussions. Interestingly, the one placement that fostered exploration and open discussion of how therapists might encounter
spiritual/religious difference that included explorations of the therapist’s background experiences in this area occurred at a large university supplying therapy to both its students and employees.

The existential and transpersonal traditions were explored as part of the curriculum in the post-graduate course from a theoretical position that did seem to encourage personal reflection. Some of my fellow students would whisper encounters that they had with spiritual phenomena, like prophetic dreams about themselves or what Totton (2007) refers to as ‘numinous experiences’ with clients. These and other spiritual phenomena would be spoken about in the canteen, the bathroom, the hallway on the way to and from classes, in the pub – but never out loud in the classroom or when it could be seen to be pertinent to a topic in psychology or counselling. It is through this personal experience that the researcher’s research question came to be developed.

In terms of my reflective position in this study, Lennie and West (2010) highlight how undertaking research can foster personal development. To this end, as this research reflects my own interests and examines personal lived experience of spirituality, I have taken a necessarily qualitative stance in acknowledging my being intrinsic to the research. As such I have wherever possible attempted to offer a transparent view of my own processes as a result of developing and attending to my ‘internal supervisor’ (Casement, 1985), as distinct and separate from the participant’s processes (West, 2004; Smith, et al., 2009). Throughout conducting this research, I kept a reflective journal, observing changes in my own beliefs or noticing my reactions to the interviews. Additionally, doing this research has helped to develop my reflective thinking in terms of both my own personal development, and professional practice with regard to how I approach issues of a spiritual/religious nature. Thus, ‘although actual (prereflective) lived experience can never be fully grasped in its immediate manifestation, with reflexive analysis, the researcher is aware of experiencing a world and moves back and forth in a kind of dialectic between experience and awareness’ (Finlay, 2009: 533). Whilst I acknowledge my necessarily subjective position within this research, in order to help facilitate my movement from the participant’s processes to mine, I will now refer to myself as the researcher throughout. This is in an attempt to remain engaged with the material throughout the hermeneutic process of conducting this research, but not entangled with it.
Additionally, Finlay (2003) suggests that hermeneutic reflection is apposite because reflexive researchers must constantly reflect on the interpretations that are being made based on their experience of the phenomena being studied. This is done to help the researcher be made aware of their investment in producing particular research outcomes. For that reason I have also chosen to use reflexive boxes in parts of this research to further illuminate my reflexive process that is demonstrated in the main text.

1.2 Introduction of the Research

There is currently a vast body of literature which examines how various psychotherapeutic domains approach the subject of spirituality and religion. These bodies of literature discuss issues related to how therapists deal with spiritual and religious issues in ways that do not thwart the therapeutic process (Coyle, 2010). This research is investigating the phenomenon of spiritual beliefs and spiritual experience as it may be perceived from some counselling psychologists’ perspectives.

1.3 Rationale and Purpose for Research

The research was conducted in order to gain insight into what the researcher and others maintain is the under-researched area of how counselling psychologists understand the phenomena of spiritual beliefs, practices and experiences. The specific aim of this research, then, is to investigate the place of spirituality and spiritual experience within Counselling Psychology by interviewing counselling psychologists and exploring any beliefs that emerge, and how any such held beliefs might impact on counselling psychologists’ practice. The secondary goal would therefore be to discover what counselling psychologists understand by ‘spirituality’ and ‘spiritual experience’, whether they consider themselves to be spiritual, and how, if at all, they notice and make sense of spiritual moments/instances or experiences in their practice. The meaning (concept) of ‘spirituality’ is complex and diverse, and it is not possible to make broad generalisations, nor perhaps helpful to offer a narrow procedural definition. Moreover, spirituality and religion have been said to be a ‘human issue’ (Crossley & Salter, 2005), and some writers have said that speaking about spirituality is the last taboo, as sex once was (Lines, 2006). Therefore it is
important to research into how therapists’ understanding and experience of these questions (in relation to the spectrum of belief that ranges from their personal spiritual beliefs to no personal spiritual beliefs) might get worked out in or influence their therapeutic relationships. It is posited that as a result of failing to consider spiritual issues, counselling psychologists might not be being as effective as they could be in their work and not least, with clients who themselves adhere to a spiritual belief system.

There are many definitions of all of the concepts presented in this research. One consistent difficulty in tackling this issue in therapeutic, research and training contexts is that spirituality is particularly difficult to define ‘without lapsing into clumsiness, banality and failing to convey its potentially numinous, sublime qualities’ (Coyle, 2010: 263). O’Donohue (1997) maintained that typically, attempts to discuss spirituality within the psychological domain are ‘doomed’ to failure, as they are modernist, ‘scientific’ and inappropriate for something better expressed in poetic, symbolic, metaphorical and or/mystical language (cited in Coyle, 2010: 263). It is suggested that concrete definitions are inadequate to the task of defining this phenomenon (Worthington & Sandage, 2001). However, spiritual beliefs are purported to share certain common elements, which will be highlighted in this review of the literature.

**1.4 Defining ‘Spirituality’**

Self transcendence and personal growth are connected to spirituality (Collicut, 2011). However, some research expresses concern about the increasing Western focus on spirituality being separated from its religious roots (Collicut, 2011), because critical components of spirituality provided by religion could be lost, leading to more conflict and misunderstanding around these terms.

Three examples of working definitions of spirituality are provided below from which to consider concepts as they manifest within this research.

**1.4.1 Definitions of spirituality and religion**

2. **Spirituality** can be understood as that aspect of human existence which relates to structures of significance that give meaning and direction to a person’s life and helps them deal with the vicissitudes of existence. It is associated with the human quest for meaning, purpose, self-transcending knowledge, meaningful relationships, love and a sense of the holy. It may, or may not, be associated with a specific religious system (Swinton & Pattison, 2001: 24–5).

3. **Religion**

   encompasses many aspects encompassed in the description of spirituality, usually in the context of belief in a transcendent being or beings, and with a meta-narrative which seeks to explain the origins of the world and those living in it and the questions which face human beings around life, suffering, death and re-awakening in this world or another. This can be acted out in narrative, doctrine, symbols, rites, rituals, sacraments and gatherings; and the promotion of ties of mutual obligation (Coyte, Gilbert & Nicholls, 2007: 25).

There is ongoing debate amongst researchers, therapists and policy makers about what constitutes evidence in support of therapeutic interventions. Randomised control trials (RCTs) are seen by some as the most superior scientific method for establishing the efficacy of treatment (National Institute for Health and Clinical Excellence (NICE) Guidelines, 2009). However, the research conducted here provides additional and novel information to inform the debate on spirituality, which is a phenomenon that impacts not only the therapeutic relationship, but quite possibly therapeutic outcome as well. This research seeks to elucidate how counselling psychologists who take a pluralistic approach, and who regard the therapeutic relationship as central to their work, experience their own beliefs regarding spirituality and spiritual experience, and how that might impact on clients’ spiritual/therapeutic needs. Additionally, this research also intends to investigate whether counselling psychologists cultivate an atmosphere of openness in their therapeutic relationships regarding spirituality, and what impact they believe it has on their work with clients.

The researcher believes that any findings will help to inform ways of working with clients by highlighting how the therapist’s personal belief system intersects
with the therapeutic process. The findings will also aim to throw light on the impact on a therapist of keeping silent about their fundamental belief system as something that arguably needs to be more fully examined and discussed on training programmes. As there is very little research on supervision in this area from the therapist’s perspective, this research will also open up this area to further research possibilities.

A significant aspect of Counselling Psychology training involves self-awareness work through personal therapy and experiential groups. An essential aspect of this is concerned with bringing to consciousness personal ‘material’, including deeply held beliefs that might have been repressed or unexamined. Embedded in the literature and in the foundation of Counselling Psychology training is the assumption that developing awareness of how we manage difference, cultural or otherwise, is necessary to effectively utilise the healing value of the therapeutic relationship (Strawbridge & Woolfe, 2003). One premise of Counselling Psychology is to recognise the increasingly multicultural nature of society, and it advocates examining and challenging any existing stereotypes that may arise within the therapeutic context. It asserts the ethical necessity of such examining in cross-cultural counselling where religious and spiritual beliefs are currently located (Woolfe, et al, 2010).

Counselling Psychology works from the view that the process of therapy is an ‘interactive alternative that emphasises the subjective experience of clients and the need for helpers to engage with them as collaborators, seeking to understand their inner worlds and constructions of reality’ (Woolfe et al., 2003:11), rather than viewing their functioning as an illness, ‘pathology’ or disorder (Strawbridge, Woolfe & Dryden , (2003). As such, there is necessarily an investment in having an interactive ongoing dialogue with counselling psychologists about human phenomena like religious faith which, according to some writers, are purported to have the qualities of an attitudinal stance, i.e. to have cognitive, behavioural and emotional components (Argyle, 2002). While there is much attention focussed on researching the psychology of religion, it is mainly based in the United States.

However, the AHRC/ESRC ‘Religion and Society Programme’ in Britain (2007) supports interdisciplinary research in the arts, humanities and social sciences
aimed at better understanding the complexities of interaction between belief, culture and society, with a view to informing social policy in this area; however, it has been reported to barely have funded research investigating spirituality in the field of psychology (Collicut, 2011). In the main, any funding for research has yielded mainly quantitative studies, which illustrates a notable lack of qualitative studies investigating this area.

Currently the preponderance of existing literature seems to focus on examining issues concerning spiritual/religious beliefs held by the client, and how issues related to this may present within the therapeutic context. The researcher has sought to review a wide range of existing literature on spirituality, as opposed to religion within the context of therapy, i.e. clinical practice.

In the next chapter the literature review for the research project is presented.
Chapter 2

2.1 Literature Search and Review

The issue of counselling psychologists’ engagement with the psychological (detrimental and beneficial) elements of possessing spiritual beliefs, or having spiritual experiences within the context of their clinical work, is not new. However, traditionally the focus has been on the client’s ‘pathology’ in terms of an arguably medicalised, reductionist (DSM-IV / DSM-V) view of psychological disturbance (House, 2001), or on the social or psychological benefits of client religious belief.

Despite the vast amount of existing writings on the spiritual, for the purposes of this study the literature will be presented with an attempt to represent a broad variety of perspectives on how spiritual issues are constructed within current counselling and psychological discourses. Additionally, more recent research that investigates the brain and asserts the relevance of a neurobiological framework for spirituality and spiritual experience will be briefly discussed.

In an attempt to organise this chapter so that it presents a concise yet comprehensive review and summary of the literature, highlighting the salient issues and areas of interest, the literature review begins with a consideration of issues to do with some constructs of spirituality, including neurobiological understandings of the spiritual; research into how spirituality is drawn on in psychological functioning including the construct of beliefs; how spirituality is currently dealt with in training and in the therapeutic context; and the role of identity development concerning the spiritual. The chapter finishes with a brief review of the role of language in conveying spiritual concepts and experiences. The terms ‘counselling psychologists’ and ‘therapists’ will be used throughout interchangeably.

2.1.1 Setting the context with spiritual paradigms

A brief overview of the current way in which spirituality and or religion functions in present-day society is offered here, as spirituality can be considered within
current narratives to be located within either the old paradigm or the new paradigm.

The old paradigm: The old paradigm in Britain can be said to be rooted in the Western world’s concepts of traditional Christian writings dictated to selected others as ‘God’ found within the bible or in other cultures being dictated by ‘Gods’ or multiple Gods’ (Lines, 2002).

The new paradigm: As a way of contextualising the discussion, writers often signify that religion and spirituality are located within a postmodern framework. According to House (2010: 361), the term ‘postmodern’ signifies ways of perceiving, experiencing and acting which relax and challenge the taken-for-granted assumptions that dominate the Cartesian Enlightenment thinking of ‘modernity’ in the West. This new paradigm eschews the notion of a single absolute truth. Spirituality, as suggested by Lines (2002: 105), is often seen to be defined in either other-worldly transcendence or in this-worldly immanence, i.e. an experience in connecting with natural phenomena or in connecting with others. Lines (2002) then maintains that both kinds of experience, i.e. either other-worldly transcendent or immanent this-worldly, can be encountered through connecting with people or with nature (Lines, 2002), which implies that this type of phenomenon can be understood as an inter-relational phenomena (ibid.).

West (2004: 16) describes Britain as being a culture that is no longer a Christian society but which still ‘privileges a Christian narrative’, while the majority of people locate themselves within a (broadly defined) ‘New Age’ paradigm, or consider themselves to be unaligned to any faith. This chapter will review in a condensed yet comprehensive form some of the narratives offered by the Western societal new paradigm of spirituality within a counselling therapeutic context.

2.1.2 How have spiritual beliefs and experiences been addressed within psychological frameworks?

There have been some signs of a more open attitude developing towards looking at the impact of religiosity and spirituality in human functioning. Pargament and Saunders (2007) attribute this change to an increased exploration of other
recently emergent paradigms, such as Positive Psychology (Seligman, 2002) and Eastern psychology (Friedman, 2010).

Historically, spirituality had first been separated out of the field of Psychology as a result of William James’s (1902) research, which sought to understand human behaviour and its relationship to learning and behaviour. James argued that it is as a result of religious experience that one identifies the true self within the transcendent (Lines, 2002). There are those within the broad field of psychological therapy, such as Freud (1913), who sought to maintain the separation between spirituality and the field of psychology by asserting that religious belief could be an expression of psychological pathology, and others such as Jung who said that ‘the God-concept is not only an image, but an elemental force’ (Jung, 1952: 57). Jung described it as a God archetype that resides in us all, and which can be, and is, drawn upon in life.

Jung’s (1912) work pioneered the idea that human beings operate from biological, psychic and spiritual forces. In discussing instinctual drives and the Unconscious, he wrote that

> except when motivated by external necessity, the will to suppress or repress the natural instincts, or rather to overcome their predominance (superbia) and lack of co-ordination (concupiscentia), derives from a spiritual source; in other words, the determining factor is the numinous primordial images. (Jung, 1956: 157)

Alternatively, Freud saw religious or spiritual beliefs to be used as an ‘enormously exalted father’ (1930: 74, cited in Simmonds, 2004: 952); and he saw the use of religion as a defence against anxiety. Freud and Jung have produced dominant and enduring concepts, which have shaped the history of Psychology. Their conceptual differences in theory and psychotherapeutic approaches have been well documented. This difference of opinion famously led to their acrimonious split (Glover, 1990). Interestingly, it is the researcher’s view that current discourses in counselling and psychology similarly reflect strong tensions in how factors such as the unconscious, the importance of religious experience and the validity of parapsychological phenomenon are understood. These two views illustrate the complexity of ascertaining not only what these experiences are but they could be suggested to epitomise the difficulty that Counselling Psychology professionals face in validating either view
when presented with the religious or spiritual experiences of their clients.

Further, it could be argued that Counselling Psychology, with its focus located within the scientist-practitioner concept (Sauer, 2006) has reflected the conceptual split in how the field of Psychology as a whole has historically interacted with religion and spirituality, by either ignoring it as a viable topic or by engaging with the topic of spirituality as a part of the transpersonal elements that may appear in therapeutic work (Rowan, 2005).

John Rowan’s (2005) seminal work outlined the transpersonal as both a ‘dimension of therapy’ which incorporated an understanding of the transpersonal as having the effect of presenting everyday ‘opening up’ experiences and the development of a transpersonal model of working within the higher realm of spiritual experiences. In that work he made a distinction between the terms ‘spirituality’ and ‘transpersonal’. Rowan (2005:11) posited that the word ‘spirituality’ is so commonly used that it ‘obscures vital distinctions between different types of spiritual experiences.’ In fact, he argued that some experiences that are described as being spiritual are indeed parapsychological. He used Assagioli’s (1991) understanding of three types of spiritual experience to enlighten both the clinician and the client to these distinctions. He described these three types of experience as: prepersonal (experiences based in fear and traditional beliefs); personal (those often based in religious beliefs; and finally, transpersonal experiences (spiritual experiences which ‘open us up and leading us on’ (p.11).

Furthermore, critical in this research is Rowan’s (2005) view that ‘everyday spiritual experiences’ involve three different levels of a conscious awareness that is available to everyone and can be developed. A very brief overview is offered here. He described the following three types of inner voices which represent each level of consciousness that each person can have: (i) voices that come from a part of the fragmented self; (ii) voices that offer information that leads to guidance and growth; and finally (iii) voices that relate information from a ‘higher self’ that has been accessed. He maintains that only the second two types of inner voices are a transpersonal experience. His second type of conscious awareness comes from two types of intuition: (i) the child self; this is a type of intuition that comes from the child’s fantasy world and the ‘real’ world
which also develops in stages and can even be accessed by the adult self by accessing a childlike state of being, and (ii) the magical self; this type of intuition exists to relieve the self from the fear and anxiety caused by the sense of separateness and isolation. This is done by creating a state of connection and communion with others with the use of techniques and rituals. These rituals are enacted at group level as they involve meeting the needs of groups such as tribes or families. Other types of intuition Rowan (2005) highlighted involve ‘the role-playing self’; this is where intuition is used to get social rewards and can involve problem solving. There are also levels of creative intuition which can be drawn on and developed to support the self and life. Finally, he outlines several types of peak experiences. Rowan’s (2005) concept of the transpersonal and the levels of development, which happen in stages, attempted to make ‘the ineffable’ accessible to the practitioner and the client. He assumed that the wider realm of what he calls ‘shallow mysticism’, a deepening of the self, is a level of deep consciousness which every person can experience.

The transpersonal model inherently addresses the spiritual needs of the client and exists as a speciality within the available therapeutic modalities (ibid.). It specifically deals with spiritual or mystical behavioural phenomena, (Hartelius et al, 2007) which generate two distinct psychologies: one psychology to deal with ‘ego and its pathologies (and) one for what lies beyond’ (Hartelius et al, 2007: 8). West (2004) maintains that while specialism is important, it may be very difficult when working with clients as holistic human beings to determine whether spiritual issues may feature in their problems. He also argues that many courses do not address religion or spiritual concepts either at all, or do so in a limited way which may indicate what some refer to as therapists’ continuing discomfort (Harborne, 2012) around those topics.

West (2004: 6) deliberately addresses the separation of the psychological from the spiritual by actively ‘working with clients’ spirituality in the psychotherapeutic encounter’ and using the term ‘psychospiritual’ for this kind of work. West (2004) also maintains that there are a number of therapists working with these issues who call themselves ‘psychospiritual therapists’, as opposed to ‘transpersonal therapists’.
Transpersonal theorists have made significant contributions to current Western understandings of consciousness. Consciousness, in terms of increasing elevated levels of awareness, is often understood to connect to the spiritual. Wilber (1980), a major writer and contributor to theories of consciousness representing the transpersonal perspective, has developed a sophisticated evolutionary model of spirituality and consciousness. He posited that there are spiritual drives which are a subset of motivational drives, and which aim at becoming one with a higher order, which he termed ‘the Absolute’. Wilber maintained that there are several psycho-spiritual stages of consciousness through which one progresses in order to achieve that higher order (Wilber, 1980). Some writers (Kremer, 1998) have criticised this evolutionary model by noting the absence of the voice and contributions of the indigenous ‘mind’. These critics say that by Wilber speaking of a ‘primitive’ mind, it reflects the dominant anthropologists’ Westernised narrative of the 19th and 20th centuries.

Whereas the focus of some research remains on the psychological aspects of having a faith and some kind of spiritual or religious practice, there has been increased research suggesting a connection between religious/spiritual belief and experiences, and a neurodevelopmental and biological component to processing human experience through an awareness of some kind of greater Being (Chopra, 2000). There is an increasing call by the field of Psychology to recognise neuroscience within the realm of psychological functioning (Newberg, 2010). Whilst this is arguably important, it could lead to further compartmentalisation which excludes recognition of the spiritual element and, therefore, generate further polarisation. Sperry (2010) calls for a specifically spiritually sensitive approach to therapy, and criticises the increasing ‘psychologisation’ (a word coined by Cortright, 1997, cited in Sperry, 2010) and biologisation of spirituality. Sperry (2010) argued that there is a tendency for spirituality either to be filtered through reductionistic psychological constructs of spirituality or reduced to neurological and biochemical processes.

Evidence of such biologisation can be seen in the plethora of public discussions around religion, in the context of the call to atheism led by writers who suggest that the brain is a sensitively evolved ‘computer’ which effectively constructs simulated experiences, which people then mistake or misspecify as spiritual or mystical experience (e.g. Dawkins, 2006). Dawkins’s (2006) theory suggests
that Memes, referring to a small unit of culture that replicates itself through imitation, constitute a viable way to understand the enduring and non-rational way that humans continue to engage in religious beliefs and practices. He argues that a crucial element and function of Memes is to spread cultural beliefs. Memes are emotionally driven, and it is the emotional component that drives people to spread their beliefs to others.

Other theorists offer newer evolutionary concepts of the ongoing need for people to believe, practise and share religious/spiritual ideologies. The psychologist Bering (2011), for example, proposes a biological/psychological and cognitive evolutionary explanation for the durability of people drawing on notions of God, even for atheists such as himself. He argues that a

‘private perception of being intelligently designed, monitored, and known about by a God who actively punished and rewarded our intentions and behaviours would have helped stomp out the frequency and intensity of our ancestors’ immoral predilections, and would foster natural selection to ensure the survival of humanity’. (p. 7)

Bering went on to argue that the development of language was a crucial element of the evolution of the cognitive bias that offers subjective, illusory ‘God’-related experiences. These developed as a way to socially control behaviour in order to survive. He argued that this evolutionary process reflects the ongoing need for people to connect, make sense of and speak to others about human experience. It is notable that the qualities listed above incorporate many of those offered in descriptions of the spiritual, and offer ways of meeting needs to belong, feel connected and provide meaning for living.

Whilst the separation of psychology and spirituality is a theme that emerges when reviewing the literature on spirituality and religion, Coyle (2010: 260) argues that Counselling Psychology advocates the need to adhere to the values of holism and egalitarianism. This stance necessarily includes engaging with the client’s meaning-making systems in a way that is open, considered and with an inclusionary perspective. Some of the literature indicates a wide range of responses to client’s religious/spiritual beliefs, ranging from a secure sense of self, optimism about the future, existential certainty and satisfying relationships, to the negative, which involves guilt, shame, anxiety, obsessiveness and other
difficult psychological disturbance and behaviours (Coyle, 2010). This disparity in possible effects on the individual by their beliefs makes it relevant to determine and examine what contributions both therapists’ and clients’ spiritual and religious beliefs have in the therapeutic undertaking.

In the main, the most recent research on all the areas previously mentioned takes place outside of Britain. Coyle (2010) suggests that in Britain the empirical rationale given for counselling psychologists’ general lack of including any assessment of the client’s spiritual life (Hathaway et al., 2004 cited in Crossley & Salter, 2005) is symptomatic of the acknowledged research-related methodological limitations. Meanwhile, in other countries like Canada and the United States, counselling psychologists actively engage in researching into this area. Moreover, this occurs despite the obvious methodological limitations and struggles with the ensuing political and social agendas that are thought to influence where the funds are directed to support researched topics.

Robertson (2007) explains the ‘modernisation thesis’ in terms of increased levels of religiosity occurring in the USA which results from increased governmental and private funding. This flow of funds to investigate religious beliefs leads to competition which, she argues, creates superior and more commercial religious goods. This, in turn, attracts more believers. However, in Western Europe and Britain, the modernisation thesis does not hold. A continued secularisation, and the decline in religious belief, are thought to constitute a generational one attributed to sociological variations (Voas & Crockett, 2005). Declining religious belief is said to no longer be transmitted from adults to their children (ibid.).

To explicate this further, the European Values Study, the 1999 poll undertaken by Opinion Research Business, the *Soul of Britain* polls of 1987 and 2000 and a News 24 survey (in Coyte et al. 2007:26) – all paradoxically point to a decline in the sense of a specific personal, Christian God; with an overwhelming percentage of respondents still wishing to claim some form of religious affiliation or spiritual dimension; and showing a growth in allegiance to a number of other religious groupings (see, for example, Brown 2001; Davie 1994; Harries 2002: pp. ix–x; Hunt, 2002, in Coyte et al. 2007:26). Grace Davie, who surveyed religion in Britain after 1945, writes of a separation of belief and belonging. She asserts that there is still a widespread belief in a spiritual dimension or a
spiritual force, but it is often not expressed through institutional allegiance (Coyte, Gilbert & Nicholls, 2006). This was recently corroborated by the Office of National Statistics (2003), which identified that 75 per cent of the population in Britain hold either religious or spiritual beliefs.

The recent national census of inpatients in mental institutions in mental health hospitals and facilities in England and Wales (CHAI/CSIP/Mental Health Act Commission/NIMHE, November 2005, cited in Coyte et al., 2006: 26) showed that only 20.4 per cent were unaffiliated to a religious grouping, and just 1.9 per cent declared themselves to be either agnostic or atheist. The patients considered their affiliation to the grouping as a part of their identity, and correspondingly therefore, 80 per cent of the inpatients researched had some kind of religious or spiritual belief.

Some views within Counselling Psychology, Clarkson (1995) for example, assert that the spiritual element in the relationship between the therapist and the client is arguably just as vital to the therapeutic encounter as the therapeutic alliance (Clarkson, 1995; Thorne, 2002; West, 2004). The studies summarised indicate that the depth and breadth of ways of relating to any religious or spiritual beliefs and practices in human life are wide-reaching and profound. These beliefs and practices have an impact on individuals that range from the psychological to the biological, and have strong societal/cultural influences. What appears evident from the literature search and review is that there is still disagreement within various schools of thought in the therapeutic community about the existence and role of the spiritual in both the practitioner’s and in clients’ lives. Many therapists assert that models of therapy directly reflect the needs of the current society (Lines, 2002; West, 2004). If this is so, then one must ask how counselling psychologists might or might not be meeting the needs of their service users/clients. Investigating the needs and beliefs of the population is important for counselling psychologists because working in a multicultural society necessarily means working with a diversity of people with diverse beliefs, including spiritual and religious ones.

2.1.3 Explanations of spiritual experience

Throughout time people say they have been guided or informed by their beliefs, and spiritual or mystical experiences. It is worth noting that in this literature
review below, spiritual or mystical experience is examined with a variety of therapist participants. The studies discussed in this literature review do not focus on participants with solely religious beliefs. The researchers indicated that they focused on the phenomena of the experience. None have mentioned the influence that any religious beliefs may have had on those having the experiences. Some researchers, such as Zohar and Marshall (2000), who cite the work of Persinger and Ramachandran, have related mystical or spiritual experience to the development of a part of the brain that is termed ‘the God spot’. Zohar and Marshall (2000) attempted to explain the enduring phenomena by conducting studies investigating madness and creativity. They have located spiritual experience in the temporal lobe or limbic area, which is illuminated when stimulated by meditation or prayer. More recently, other researchers, like Missouri University researcher Brick Johnstone (Johnstone, 2012), who studied 20 people with brain injuries in the right parietal lobe, refute the proposition that spiritual experience can be restricted to one area of the brain, arguing that these experiences are complex and involve lobes across the brain. What it might, or might not, mean to be able to identify neurological correlates of spiritual or religious experiences is a profoundly complex philosophical issue (falling within the realm of the Philosophy of Mind) which is beyond the scope of this study.

There are other writers who examine related but different aspects of what could be defined as spiritual experience. They introduce the idea of a fourth dimension which includes experiences which fall into the category of the numinous or, indeed, the paranormal. For instance, Jung (1963: 416, cited in Schlamm, 2007) describes the numinous as ‘a unique experience that is inexpressible, mysterious, terrifying, and pertaining only to the divinity’. Schlamm maintains that there are experiences which could be identified as spiritual in the individuation process of the unknown in the unconscious. He argues that these experiences should not go unexamined, and that their place should be acknowledged in terms of its importance to epistemology.

Others have researched into the area of spiritual/mystical phenomena in order to determine the qualities of these experiences, and to differentiate between helpful and non-helpful experiences (Post & Wade, 2009; Shafranske, 2001; Pargament, 1997). These researchers argue that the main difference between ‘normal’ peoples’ experiences and those experiences of patients labelled as
psychotic or schizophrenic was that the ill patients seemed to have negative, disturbing and bizarre experiences. The much-debated phenomena of hearing voices and/or having visions have long been associated in Western society with the medicalised view of mental ill health. Eigen (1998 and Moore and Purton (2006) maintain that the difference between a pathological and a non-pathological experience seems to be the quality of the experience and the feelings that accompany them. These feelings are either euphoric or disturbing. They can even be terrifying. As both types of experiences may present in therapeutic encounters, the increasing research involving learning about the bearing these beliefs, practices and experiences have on the brain, and arguably upon behaviour, seems relevant to counseling psychologists both as scientist-practitioners and as individuals in terms of their own personal development.

2.2 Spiritual Belief – how it relates to Counselling Psychology

In order to gain an understanding of counselling psychologists’ perception of the importance of spiritual or religious beliefs of the individual, it is important to review some of the existing research on these beliefs, which has in the main been overwhelmingly focused upon the client. The magnitude of research done over time indicates that individuals who possess religious or spiritual beliefs are in possession of a helpful psychological resource. Many studies have shown that people tend to draw upon their own religious/spiritual beliefs in particular at times of extreme crises or loss, in order to help them make meaning and therefore process the difficulty. Maronne (1999), who researched participants’ religious/spiritual experience, maintains that this spiritual/religious experience involves cognitive functioning. It is the process of re-assigning meaning making that is done during difficult times that is the important factor, as opposed to identifying whether or not it constitutes a spiritual/religious experience.

Interestingly, the current review of the literature yielded very little research investigating therapists’ beliefs, or even what they are. Worthington and Sandage (2001) called this a ‘surprising lack of research’ (p. 387), given that therapists generally seem to value spirituality as opposed to religion, both in therapy and in their personal lives (Worthing & Sandage, 2001). Furthermore, some mental health professionals attribute the lack of exploration of therapists’
beliefs to the view that religious beliefs and behaviour are symptomatic of the presence of some psychological ‘disorder’ (Shafranske & Gorsuch, 1984).

Historically, research has indicated that therapists/practitioners possess fewer religious beliefs, and engage in fewer associated practices, than clients (Shafranske, 2001; Pargarment & Saunders, 2007). However, several studies have indicated that religion does play an important role in the lives of many psychotherapists, particularly if defined in terms of ‘spiritual’ values and experience (Smith, David & Orlinsky, 2004). Critically, the research reveals the main focus to be on therapists’ sense of the spiritual rather than on church attendance and the like (Shafranske & Malone, 1990). Shafranske (1996) investigated the religious beliefs of clinical psychologists in the USA and noted that the psychologists who eschewed religious belief as adults were raised in the same general religious/spiritual population as their clients. How the change of beliefs comes about remains unexplored and points to some unanswered questions about the importance of psychologists’ historical religious or spiritual experiences in relation to their adult professional practices when they encounter the religious or the spiritual. It may reflect current, perhaps scientifically orientated training, where the area remains unexplored or deemed as irrelevant and ‘unscientific’ (West, 2004).

The considerable number of studies which came to light in the literature search of recognised academic online journal sites indicates an ongoing interest in spiritual and religious matters within both Counselling and Psychology. More and more theorists are calling for therapists to be aware of their own beliefs and biases regarding religion/spirituality in order to help prevent imposing one’s own values on to their clients (Post & Wade, 2009; West, 2004), and to become more self aware of such issues in order to enhance their work with clients (Bartoli, 2007).

Moreover, Morrison and Borgen (2010) assert that the counsellor’s spiritual beliefs may be a positive or negative part of what he or she brings to the therapeutic relationship. This assumption is a natural follow-on from quantitative research, which has established that a relationship exists between what these beliefs are and how these may impact on the therapeutic relationship (Orlinsky, 2004, West, 1998, Grimm, 1994, Shafranske et al, 1990), but, crucially, no
qualitative research could be found that ‘examines the nature or mechanisms of this connection’ (Morrison & Borgen, 2010: 27). Beutler et al, (2004) discussed how the dearth of research examining therapist’s beliefs prevents counsellors from obtaining an understanding of the ways religious influences, as they might present from clients in the consulting room, may reflect societal changes. This suggests that therapy as a helping profession may not have sufficient awareness of the kinds of help that clients might need. This would seem to be important, given the growing body of literature on theory and technique in this area in recent years (Miller, 1999; Richards & Bergin, 2000a; Shafranske, & Sperry, 2005).

In order to address the lack of current research investigating societal changes in how clients present with either religious or spiritual beliefs, Richards & Bergin (2005) produced a detailed investigation into creating what they named ‘a spiritual strategy’. They argued that, ‘there is a spiritual reality that is linked with divine intelligence or the Spirit of Truth’ (p.149) in human experience and, as such, there are inherent implicit and explicit issues that must be dealt with in effective therapy. Their work was aimed at facilitating the practitioner’s deeper understanding of working with spiritual and religious issues as they may be researched, taught in clinical and therapeutic environments and practised with clients. One way that they attempt to bridge the aforementioned ‘split’ between science and religion is by urging therapists in training to incorporate a basic working understanding of a variety of religious practices including faiths like Christian Judaism, Christianity, Islam, Paganism, and Buddhism amongst others.

Particularly, the existence of a ‘religiosity gap’ was demonstrated in that conservative Christians and practitioners of other faiths were identified to have fears, sometimes extreme fears, of being harshly judged by therapists and the medical profession. It was suggested that these fears actively prevent them from going to secular therapists (Bergin, 1980a, 1983, 1991 cited in Richards & Bergin, 2005). Richards & Bergin (2005) argue that in order to address the confusion, fear and lack of clarity which lead to reluctance in addressing spiritual issues, therapists not only need to have a general knowledge of the basics of various religions currently in practice, but need to actively facilitate an openness to the discussion of spiritual and religious issues. Importantly, the relationship
which is of utmost concern in the field of counselling psychology can be used to create an open and trusting therapeutic alliance. To enable this process, they suggest including assessing clients’ interest in pursuing spiritual issues using specific questionnaires, informing clients of their willingness to discuss such issues in a sensitive, non-judgemental way, and seeking to avoid openly displaying religious symbols, pictures, or dress relaying their religious beliefs or practices.

Further to therapists’ reluctance to speak about such matters, Graetz-Simmonds’ (2004) qualitative study explored psychoanalysts’ and psychoanalytic psychotherapists’ ways of dealing with spiritual issues, including theirs and their clients conceptualisation of spiritual issues and experiences within their clinical work. The clinicians indicated that the language available for describing subtle spiritual experiences could leave these experiences open to being interpreted as infantile and pathological as indicated in the Richards & Bergin (2005) investigations. In turn, concerns for this type of judgement would influence whether or not they would discuss such phenomena in their own psychoanalysis.

This qualitative research was conducted with psychoanalysts and psychoanalytic psychotherapists from London, Sydney and Melbourne, and themes of comfort and challenge emerged. Comfort involved therapists being met with an inclusive sense of inter-relatedness, with challenge involving ‘a heightened sense of the unknown and a greater degree of uncertainty’ (Graetz-Simmonds: 2004:951). It also found that participants considered spiritual concerns the ‘blind spot’ in psychoanalysis, and considered their clients to want what they had wanted in their own analysis, which was to explore spiritual issues in a non-judgemental way.

These studies (Graetz-Simmonds, 2004, Gubi, 2007) could be said to reveal the level of anxiety that still exists around examining difference or ‘unusual’ experience, or encountering difference of some depth in terms of personal religious and spiritual beliefs. Gubi (2007) states that spirituality is sometimes avoided because of fears of being judged for embracing such beliefs and associated behaviours, like praying. Additionally, the research seems unclear on specifying the difference between religious and spiritual beliefs. This difficulty
seems to continue the sense of taboo that appears to exist in practitioners speaking about their spiritual beliefs when in a professional role.

2.3 Review of the Stance of the Person-centred, Psychodynamic and Cognitive Behaviour Models on Spirituality and Spiritual Experience

Lines (2002) maintained that there are some ways in which a postmodern concept of spirituality, which rejects the notion of a single truth, can be represented within the different therapeutic approaches. He posits there to be three healing elements involved in counselling, and he has integrated these in three popular models:

1. The counselling relationship (person-centred);
2. The dynamic counselling process (psychodynamic); and
3. Techniques and interventions adopted in cognitive behaviour therapy which link to spiritual practices

Lines suggests that within the new spiritual paradigm, the counselling relationship is a form of ‘enquirer-with-enquirer rather than teacher to teacher’ (p. 109). As the above-mentioned models are taught on many Counselling Psychology courses, this section will begin with a brief review of some basic principles of Counselling Psychology as a clinical and academic discipline.

Counselling Psychology’s holistic focus on the individual contributes a distinct aspect of working with psychological and emotional suffering. This is arguably particularly so, when working in Increased Access to Psychological Therapies (IAPT) programmes, with their focus on the ‘treatment’ of conditions found in diagnostic categories listed in the DSM-IV/DSM-V. While for Counselling Psychology diagnostic labels can be considered, they are not the primary consideration (Cooper, 2009). Cooper (2009: 122), for example, posits that counselling psychologists should be able to ‘hold labels lightly and meet people, first and foremost, as people’.

Further to this, Strawbridge and Woolfe (2009) suggest that the success of therapy relies primarily on the quality of the relationship rather than on an unremitting focus on diagnostics and the treatment of specific problems (Horvath & Luborsky, 1993). De Young (2003: 1) defines relational as ‘self-with-
other’, a way of working with clients where the relationship between client and therapist is central to the work, where relationships are considered central to the client’s experiences, and with priority being given to the client’s way of understanding themselves and of relating to others.

Considerations of the relational aspect of therapy are a key factor, with counselling psychologists being able to position themselves – and necessarily their responses to clients’ religious and spiritual material – within various theoretical approaches. Coyle (2010) argues that when counselling psychologists encounter this type of client material, their chosen model may inform their therapeutic responses.

Sperry (2010) argues that five relational stances can be found within psychological and spiritual theories. Each of the five stances represents two different domains, and is explained as either a spiritual or psychological theory having dominance over the other. An example of a wholly reductionist view would be either where psychology is dominant over the spiritual such as in purist Freudian psychoanalysis or the opposite, as in Jungian psychotherapy where spirituality has primacy. A fourth holistic view would be that of Carl Rogers’ (1954) Person-Centred approach, which would look at the individual as a whole organism. Sperry argues for his fifth stance which is as follows: psychology and spirituality are essentially different, with neither having primacy nor being reducible to the other. Sperry’s suggested holistic orientation of therapy (Sperry & Mansager, 2004, in Sperry, 2010: 48) involves the therapeutic work being dictated by the client concerns. If the client requires a problem or set of symptoms being dealt with, then psychotherapeutic strategies are drawn upon, and when the client concern involves dealing with the ultimate questions of life, spiritually oriented strategies are drawn on. Sperry (2010) identifies the first four orientations as being reductionist with the fifth as holistic – that is, non-reductionist.

It could be said that in Sperry’s view, all but the above-mentioned stances reflect a tendency for some therapeutic modalities to separate out spiritual concerns or avoid them because they uncomfortable topics to address. This de-selection process may occur when clients bring in their interpretations of spiritual material, e.g. in terms of experience and/or guidance.
Sperry’s answer to the theoretical approaches’ use of compartmentalisation strategies of subordinating spirituality in addressing human psychological/spiritual suffering was to develop a model of ‘spiritually sensitive developmental psychotherapy’, with the therapists offering a particular kind of listening. This listening reflects the counselling psychologist’s ethos, which involves being open to all areas of exploration, including being ‘receptive to the meanings of psychological difficulties within a broad and transcendent context’ (Shafranske & Sperry, 2005: 25, quoted in Sperry, 2010: 48, italics mine).

Sperry’s (2010) work promotes therapists’ active participation in listening out for and encouraging clients to bring their spiritual selves to the therapeutic relationship. However, this stance presumes that the ‘holistic’ approach will reduce the limitations of the current situation where therapists avoid bringing in spiritual issues because they are aware that they may not have had appropriate training, continued professional development in that area or sufficient personal exposure to spiritual or religious concerns. However, while this researcher would not go so far as to assume, as some critics do, that the ‘clergy are in the best position to manage spiritual and religious issues’ (Sloan et al., 2001), it is argued that attempting to practise holistically in integrating Sperry’s notion of a ‘spiritually oriented therapy’ opens a Pandora’s box of ethical concerns. These must be carefully addressed at policy and training level before the move to integration can begin on a widespread basis. Plante (2007) raised several issues of ethical concern and asks ‘since the vast majority of graduate and postgraduate training programs currently ignore spirituality and religious integration in professional training, how can a mental health professional competently provide the much-needed services of integration?’ (p. 895). One such issue he raised related to integrity, such as the danger in practitioners having dual relationships with their clients. Plante (2007) argued that many professionals who do feel able to deal with issues integrating spiritual and psychological issues perform roles in either spiritual direction, clergy or have experience in their personal faith.

2.4 Spiritual Attitudes and Spiritual Experience in Person-centred, Cognitive Behaviour (CBT) and Psychodynamic Contexts
Within the field of Counselling Psychology therapeutic work is usually conceptualised as focusing on the relational dimension that is co-created by the therapist and their client, with the hoped-for outcome of effecting useful change. With this in mind, the following review broadly presents spiritual attitudes and beliefs as represented in three main approaches of therapy. Rogers, in his person-centred approach (1959, cited in Kirschenbaum & Henderson, 1989), spoke of the importance of the relationship to aid in healing. He suggested that maintaining an intention to be fully present and close to what he termed ‘the intuitive self’ allowed an elevation of the relationship to something akin to the spiritual (Rogers, 1961; Thorne, 2002). What we might call this ‘transcendent energy’, it is argued, can then become a vehicle for profound growth. Other writers in the person-centred therapeutic approach have indicated that what can be defined as ‘spiritual experience’ is able to be experienced by those who work relationally with others (Thorne, 2002). It is thought that by holding certain attitudes towards the person in the work rather than holding specific religious beliefs, one is open to transcendent experience.

Thorne (1998: 78) crucially gave his concept of the spiritual within the self as the ultimate creative source. This is critical to counselling psychologists, as they are commonly trained to work within the person-centred approach (amongst other approaches) (although it should be cautioned that Thorne’s reading of the person-centred approach is not necessarily accepted by all person-centred theorists and practitioners). Thus, some person-centred views suggest that therapy is, in and of itself, a spiritual endeavour, as it regards the development of self to be of utmost importance (Thorne, 2002). Thorne (2002) considers the notion that both priest and therapist ‘are in the business of relating in depth and of accompanying others into the unknown where pain and joy are likely to be present in equal measure’ (p. 30). He goes on to write that for the therapist not to be willing to enter into the mysterious unknown is to make a mockery of the profession. This strong statement could be interpreted to mean that everyone who works in the therapeutic field must, as a matter of ethics, be willing to enter into a relationship which stretches the practitioner to actively engage with what the concept of spirituality means to them, with or without any associations with specific (religious) faiths.
Currently, mindfulness-based practice, based on Buddhist belief, is often included in cognitive behaviour (CBT) work by clinical and counselling psychologists (Law, 2011). It is seen as being empirically valid and is included in the NICE guidelines as evidence-based practice. Law (2011: 335) writes that ‘too often what is actually conveyed in the name of “mindfulness” is quite trivial’. He points to the complexity of those types of practices, and the need for fundamental understanding of the backgrounds from which they are taken. Lancaster (Law, 2011) has advised that counselling psychologists need to consider the effect of parcelling out aspects of some spiritual traditions like mindfulness, and using it as a technique without understanding its true nature or intention.

Totton (2007) argues that there are instances of therapists and clients being acutely and explicitly aware of the unsaid between them, and he ascribes these phenomena to spiritual experience. He uses Freud’s term, the Uncanny, to describe phenomena such as synchronicity, telepathy and subtle energy that occur between the therapist and the client. Additionally, Totton (2007) considers these terms to be different, according to which therapeutic approach is attempting to categorise them, ‘communicative counter-transference for psychotherapy, parallel processes, the energy in the room for humanistic approaches and others’ (ibid.: 393). This is interesting for current purposes because it begs the question as to how therapists handle these experiences when they occur, and how these events affect their development as therapists.

There are other issues related to the spiritual that emerge under investigation by researchers. In particular, Vaughan (1991) argued that spiritual issues are ‘inextricably interwoven with psychological health’ and, by inference, psychological ill-health. He illustrates some problematic spiritual issues that can emerge in the work, such as spiritual addictions that occur when spirituality is used as an escape or avoidance from the difficulties in life or in the self. Vaughan (1991) cited spiritual ambition as another problem with how spirituality can be used to avoid or escape painful issues. When spiritual ambition acts as a replacement to worldly ambitions, it can be just as hazardous as losing oneself to worldly pursuits to the exclusion of anything else. Other problematic uses of spirituality cited by Vaughan (1991) are excessively seeking spiritual experiences; denial of one’s shadow self; and he also cites spiritual groups who
see themselves as ‘unique in their dedication to truth and righteousness’ (p.107) as examples of misuses of spirituality.

Earlier theorists, such as psychoanalyst W.R. Bion, actively engaged in the spiritual, describing himself as a mystic and making use of religious/spiritual metaphors to explain and describe the emotional impact that therapist and client have on each other in the therapeutic encounter, including cataclysmic and destructive emotions when they encounter ‘O’, the unknowable in the therapeutic work (Eigan, 1998).

In considering the current survey of the literature it seems that while there are varied descriptions of what could be described as being legitimately spiritual as opposed to arising from illness or ‘psychopathology’, all contain some qualities in common, involving connection and personal growth. Worthington and Sandage (2001) assert that according to Ferrer’s (2001) assumption, there are three participatory elements to spirituality that must be considered. These are that spirituality involves connection with others; that spiritual knowing is active and transpersonal; and finally, that this knowing is a transformative process that, when encountered in the therapeutic relationship, is not only different to religiosity but hopefully facilitates changes in both the therapist and the client.

2.5 Research into Therapists’ Beliefs in Relation to Practice

Research into this area involves looking at concepts of the spiritual as they involve the relationship that is constructed within the therapeutic dyad between therapist and client. While some research explores the type of beliefs therapists have (e.g. Richards, et al, 1995, West, 1998), it largely avoids examining what these beliefs mean to the therapist. As will be shown below, the focus seems to be in the main on how subtle or overt information regarding spiritual or religious content is transferred and handled, or how this material or experiences influence the relationship and its efficacy.

Blackstone (2006) conducted one investigation into non-duality and intersubjectivity (taken from psychoanalytic Intersubjectivity Theory) and its possible effects on the therapeutic relationship.¹ The notion of ‘non-dualism’

¹ Non-dual consciousness refers to the Eastern philosophy of Advaita taken from the Upanishads. This means to be at one with the Spirit, as opposed to Cartesian dualism which argues that mind, body and spirit are
relates to non-dual consciousness. Blackstone (2006) describes the relational field created specifically in the psychotherapeutic encounter as a place where both parties in the dyad are open to unconstructed, non-dual experience. She suggested that spiritual experiences are not only in some sense ‘real’ phenomena, but they deepen the relationship and encourage change in the client. Blackstone’s research also suggests that such phenomena are possibly reproducible, as they occur as a result of the therapist’s capacity for ‘deep empathy’ (Hart, 1999) and attention in the moment, thereby creating the necessary environment. It has also been suggested that there are parallels or similarities between stages of spiritual development and stages in the counselling process (Lefebure & Schauder, 1990). In considering these stages of spiritual development Blackstone’s (2006) study is limited in two fundamental ways. A level of ‘controllability’ of consciousness is inferred which may be harmful for both therapist and client. Firstly, it suggests that these states of non-duality are reproducible but it does not take into account the consequences of what happens once this environment is created, for example, if the therapist is changed by the non-dual encounter within therapy and the client is more crucially, not affected. Secondly, it is questionable how to assess the therapist’s level of conscious development, and therefore their capacity to manage the ‘unknown’ that may occur in an open unconstructed therapeutic environment. In line with this, Rowan (2005) suggests that conscious awareness of the spiritual self occurs in developmental stages and that one cannot reach the next incremental stage of development without having negotiated the previous one. Importantly, Rowan (2005) asserts that psychospiritual capacities such as intuition (which communicates the spiritual ‘inner voice’), especially in the earlier stages tend to be ‘a chancy thing’ (p.16) and cannot be summoned at will.

Orlinsky (2004:144) studied religious and spiritual experience among psychotherapists to assess the meaning that psychotherapists give the notion of religion, and ‘whether the meanings vary according the therapists’ stated religious affiliation, gender, age and profession’. The research concluded that the religiosity of therapists is complex and cannot be distinguished between secular and religious orientations.
A contribution to the Orlinsky 2004 study was presented at a British Association for Counselling and Psychotherapy (BACP) convention in 2008 which was conducted by Davis (2007), and which looked at any possible connections between therapists’ religious and spiritual beliefs and influence on their practice. A mixed study was conducted using both quantitative and qualitative methods. The quantitative portion was discussed and there was no connection found, but the qualitative study results indicated that there was a connection between therapists’ personal beliefs and their practice in many ways. While this study shows the value of qualitative research approaches in this area, the ways in which these connections exist were not, however, revealed or explored.

Alternatively, Walker, Gorsuch and Tan (2004) have carried out a meta-analysis of 26 studies conducted with 5,759 therapists. These studies examined the therapists’ integration of spirituality in counselling. In their meta-analysis, Walker et al. (2004) investigated several aspects of what can be ascribed to spirituality, and how it is dealt with within the counselling relationship. They examined how therapists’ beliefs differ from those of their clients, how to approach differences when they occur, the difficulty in agreeing on what, exactly, spirituality is (including its experiential nature), and finally, how to define those experiences. Walker et al. imply that therapists both implicitly and explicitly integrate spirituality and religious values, should they possess them. Eighty per cent of the therapists in these studies said that they had never discussed spiritual issues in training. Walker et al. (2004) conclude that as most therapists are not officially trained in dealing with these issues and have never discussed religious or spiritual issues in their clinical training, they are left to find their own ways of integrating these issues in their practice. Additionally, Walker et al. found that there are certain implicit ways in which therapists might integrate their own beliefs by, for example, silently praying for a client during a session. These therapists have also explicitly talked about their private beliefs during client sessions, when deemed appropriate, thus raising interesting questions about spiritual beliefs and therapist self-disclosure.

Another example of research investigating therapists’ beliefs and practices that has been conducted into prayer and the counselling room is by Gubi (2002, 2004, 2009). In Gubi’s 2002 paper he argues that prayer in mainstream counselling and psychotherapy was largely treated with suspicion, despite the
many investigations into the health benefits of such practices. He found that some therapists had prayed for their clients before but felt too embarrassed to talk about it with their supervisors, for fear of what might be said. Several recently published studies (e.g. Gubi, 2007; Gubi & Kingsley, 2008) investigate secular therapists who use prayer within a therapeutic context, which indicate that this topic is not adequately dealt with within training institutions, or indeed within therapists’ supervision. In 2002 Gubi’s study with mainstream counsellors found that 59 per cent of the respondents had used prayer covertly with clients, 12 per cent prayed overtly with Christian clients, and only 24 per cent discussed this in supervision. In Gubi’s (2007) qualitative study with 19 mainstream counsellors accredited with the British Association for Counselling and Psychotherapy (BACP) and the Churches’ Ministerial Counselling Service (CMCS) counsellors who use prayer do not feel free to discuss this practice in supervision for fear of being judged, criticised, fear of exposure through the supervision, fear of losing respect and credibility, and a myriad of other ‘negative’ associations with disclosure. Gubi argues for a more open and inclusionary atmosphere to be provided within supervision so that counsellors feel more able, and are encouraged, to explore these issues with their supervisors.

Morrison and Borgen (2010) conducted a grounded theory study of 12 counsellors who acknowledge holding Christian beliefs, investigating whether their beliefs help or hinder their ability to be empathic towards their clients. This study found that there were 14 categories, which indicated that the therapists’ religious beliefs helped them find and maintain empathy towards their clients. They found three categories where therapists’ beliefs hindered their ability to be empathic. Such hindering categories include counsellor blind spots, different expectations with a shared religion, and negative reactions contrary to the counsellor’s belief systems. These hindering categories indicate that it is the counsellor’s blind spots, the counsellor’s expectations and the counsellor’s negative reactions to clients’ behaviour, when the latter is contrary to counsellors’ belief systems that were revealed as problematic for counsellors to provide what they considered to be adequate empathy for their clients. These types of findings certainly bear further investigation with larger numbers of counsellors in order to ascertain the prevalence of the types of hindrances to the qualities that could be argued to enhance therapy efficacy.
Moreover, Worthington and Sandage (2001) highlight the lack of research, which actively investigates outcomes of therapy for therapists, and clients who are well matched or indeed mis-matched with religious/spiritual beliefs. This leaves the impact on the therapeutic outcome of such therapeutic pairings unknown. Crucially, they note the existence of a considerable literature that has examined and discovered that in most forms of successful therapy, clients converge towards the therapist’s values.

West (2004) asserts that our values underpin our work as counsellors. Sollard (1978, cited in Moore & Purton, 2006: 190–1) has written about how much Freud owes to Judaism; Carl Rogers’ early Protestant upbringing can be discerned in the Person-Centred approach; and Gerry Egan’s Catholic and Jesuit upbringing can be found in his skilled-helper model (Egan, 1990). Moore and Purton (2006) maintain that much of Western therapy is explicitly Christian in values. They go on to assert that there is a strong pseudo-scientific, professionalised, evidence-based approach, which scorns that which cannot be measured and which seems trapped in a nineteenth-century modernist and anti-religious viewpoint, endlessly re-fighting the science vs religion debate. West (2004: 42) maintains that therapy is ‘not a value free activity’, and goes on to assert that our values as therapists are not neutral, and have a profound impact on our work. West (2004; 151–2) suggests that when considering the question of spirituality in the client/therapist dyad, a good ‘fit’ in terms of ‘shared values between therapist and client is important. He said that one key feature of a good fit is ‘attitude, explicitly and implicitly’ to spirituality.

In research conducted by Keeling et al. (2010) into marriage and family therapists’ and their clients’ spirituality, they argue that therapists’ spirituality influences the therapy (whether beliefs are similar or different), and that managing spiritual difference, similarity and otherwise is a complex matter that must be examined in training programmes. Keeling et al. (2010) highlight the complexity in the interplay between therapists and clients in four case studies, which revealed four areas of concern: 1) degrees of similarity and difference, both real and perceived, between clients’ and therapists’ spiritual beliefs and practices; 2) degrees of spiritual disclosure, 3) characteristics of the therapeutic relationship; and 4) geographic and cultural differences. Crucially in relation to this research, they call for training programmes to aid training therapists in
developing increased spiritual self-awareness and offer respectful explorations which require and build on therapists’ knowledge of distinct belief systems, spiritual self-awareness, and each client’s unique spirituality. All of the aforementioned investigations highlight the fluidity of value systems and, importantly, the tendency for client and therapist to perhaps be influenced by each other’s values.

Klein (2003) discusses W.R. Bion’s theory of ‘O’ as an ineffable mental process where the analyst and the analysand meet and experience something greater than them both. They meet in this place of ‘Ultimate Reality and Ultimate Truth’ (Bion, 1995). Jung explains these encounters by suggesting that we share a Collective Unconscious. He said that ineffable experience arise as a result of the I meeting the non-I: ‘...psychic processes seem to be balances of energy flowing between spirit and instinct, though the question of whether a process is to be described as spiritual or instinctual remains shrouded in darkness’ (Jung, 1954: 139).

Buber (1937) wrote of human relatedness in terms of connecting with the ‘I’–‘Thou’, e.g. a type of deep connection involving mental and emotional states that arise as a result of deep meeting experiences with the self, others or nature (Klein, 2003). He argued that people often draw on I–It ways of relating with whatever one is encountering in an ‘objectifying and monological’ way (Kramer, 2003). Buber termed I–Thou (Ich–Du) meetings as genuine ways of relating, proposing that all real living is genuinely meeting the other (this includes relating with nature and spirit; Kramer, 2003). Klein (2003) explores the ineffable ways of meeting that can happen in healing therapeutic relationships, and termed ‘meeting in the intersect’ as the occurrences where both therapist and client have created a healing space where both genuinely meet each other in ways that deepen and bond.

2.6 Spirituality and Current Training

Woolfe and Dryden (1996) have highlighted the importance of continuing the further development of the scientist-practitioner model of understanding, and dealing with human distress by emphasising ‘the value of programmatic research to inform and discern helpful intervention strategies, and investigating client and therapist variables as influences on counselling psychology processes and
outcomes’ (p. 14). Woolfe and Dryden (1996) emphasise the importance of ‘research to use scientific method to evaluate their practices’ (p. 14).

Some argue that Counselling Psychology has many characteristics that are integral to the profession: specifically, these are pluralism, relational ways of understanding the world, the understanding of distress, research and enquiry, ethics and the therapeutic relationship (Milton, 2010). Milton goes on to suggest that these aspects deal in phenomena that are ‘rather ethereal, complex domains, requiring open, ongoing and curious engagement’ (p. 2).

Within secular Psychology and counselling training institutions, spiritual and religious issues typically fall under the ‘cultural diversity’ label, as these issues are often more prominent in increasingly diverse culture where such values are central to some cultural identities (e.g. Constantine, 1999; Evans, 2003; Fukuyama, 2003; Fukuyama & Sevig, 1999; Myers et al., 2005; Richards & Bergin, 2000a, cited in Bartoli 2007). It is therefore argued that there needs to be a recognition that these issues are important to address within various approaches (Hoffman, 2008).

Coyte, Gilbert and Nicholls (2007) suggest that a newly developed approach called ‘values-based practice’ is used as a basis for working with complex and conflicting multidisciplinary organisations, in policy and in training and service developments in mental health and social care across the UK. A values-based practice starts from the principle of respect for differences in values (Fulford, 2004).

Schaffner and Dixon (2003) argue that in many institutions where counselling is taught, there are few or no course components dealing with the myriad of expressions of spiritual/religious beliefs or issues, as they appear in the counselling relationship. LaTorre (2002) suggests that therapists need to become more than traditional therapists in order to effectively deal with clients’ changing attitudes towards both spirituality and religion.

As discussed above, Schultz-Ross and Guthell (1997, cited in LaTorre, 2002) highlight the fact that some therapists’ educators actually avoid confronting spiritual issues. Pargament and Saunders (2007) have maintained that
therapists are ill-equipped to discuss these issues, and may just change the subject when the topic is mentioned. Psychotherapy clients would like to discuss religious or spiritual issues with therapists, but therapists feel poorly prepared to do so (Pargarment & Saunders, 2007).

This may be because of the historical and present-day associations of spirituality being equated with spiritualism and institutionalised religion (West, 2004). These both seem to have negative connotations, which could begin to be clarified by initiating discussions in all therapeutic training institutions, not just some.

There are difficulties with opening up the discussion, however, because of the challenge of defining the concepts, which can lead to polarisation which can, in turn, precipitate conflict. In the polarised view, religion can be seen as morally or intellectually bad because of its focus on an individual’s faith, and spirituality can be seen as good because of its looser construct and tendency towards being more acceptable to be expressed within a social context (Hill & Pargament, 2003, cited in Russell & Yarhouse, 2006).

2.7 The Problem of Language

The theme that recurs in current psychological discourse exploring what makes addressing spirituality problematic is the lack of or shortcomings with language in adequately capturing and conveying spiritual beliefs and experience, without trivialising or pathologising them. It is argued that the language that is available for naming and describing such spiritual experience, or, indeed, the felt experiences that occur during the meeting of the therapist and client, is necessarily limited (Kavar, 2012; West, 2004), as some human experience is arguably beyond the scope of linguistic-symbolic articulation (e.g. Pinker, 2007). It seems that it is the elusive quality that sustains the struggle for theorists and writers to find an acceptable working definition of ineffable human experience. This is cited consistently as a central difficulty in addressing the therapist’s own spirituality, including attitudes, beliefs and practices within professional training and working environments.

West (2004) maintains that many influential theorists have had to develop a language to incorporate the experiences which occurred between client and therapist in the therapeutic experience because what occurs is often in an
altered state of consciousness, as suggested by Wilber (1979a and Thorne 2002, cited in West, 2004). West maintains that this language is often inadequate to encompass comprehensively the full import of what may be occurring.

This is further illustrated by the Crossley and Salter (2005), who explore how clinical psychologists address spiritual issues in therapy. Eight clinical psychologists participated in a grounded theory study, and by using semi-structured interviews, two categories revealed that they found the issue of spirituality to be an elusive one in two ways. First, the concept of it was confusing in that the meanings that were given to spirituality were diverse and overlapped with each other, rendering these concepts contradictory and sometimes confusing. Critically, Crossley and Salter cited that the field of Clinical Psychology did not actively engage with this topic for the following reasons: the language available was limited; there was discomfort associated with discussing the topic; and lastly, factors related to their personal backgrounds prevented them from including it as an area of concern.

Indeed, one can ask, is it possible to convey deep human experience with the use of normative language? Smith (1998) argues that language is used to describe and convey intention and actions, and the hearer as a function of intention necessarily alters that what is heard. He maintains that ‘I cannot so much as live among neighbours without influencing their intentions’ (p. 113). He goes so far as to argue that it is unavoidable that the language that we use, either to others or to ourselves, changes things.

In what is essentially a materialist view of human consciousness, the evolutionary psychologist Berings (2011: 173) proposes that it is with the development of a Theory of Mind (the ability to gauge other’s mental states and emotions) (Dennett, 1978) that God was created and drawn upon in human life. He maintains that the function of biological and cognitive processes within the individual was intrinsically bound up with the development of language. He argues that the function of thinking and being aware of one’s thinking is crucial to the ingrained nature of religious/spiritual beliefs. Berings argues that as our forebears became aware of their own behaviour and intentions, it would have been seen as difficult or uncomfortable, but not detrimental to existence. But the development of the function of theory of mind meant that once our ancestors
became aware that there could be even one witness to one’s life, one is in some way threatened because others could be told of any social wrong-doing. There could then be dire consequences to communicating and symbolically encoding others’ mental states, events and concepts. Crucially, ‘theory of mind’ functions in self and others could lead to destruction in order to sustain order. So on this view, God, in effect, is a functional social behaviour monitor, which acts rather like Freud’s concept of the superego controlled by what can be thought about, shared or surmised by others. Whether or not one accepts the explanatory completeness of this kind of argument will, of course, significantly turn on whether one adheres to a materialist (sometimes reductionist) metaphysics and cosmology (Bering and Shackelford, 2004).

Klein (2003) suggests that psychotherapists do not have the language at present to allow for clarity and precise articulation of certain experiences, but argues that the quality of these experiences are less accessible to conscious thought and are communicated through intonation, body language, colour or sounds – or indeed in ‘non-local’ ways that materialist/empiricist science does not understand. It is perhaps primarily because of this that qualitative research is necessary in order to explore the nature of therapists’ views on these experiences. Thus, while the data can in fact only be delivered in an admittedly (and unavoidably) inadequate language, it is hoped that the phenomenological dedication to describing phenomena may help in conveying the participating counselling psychologists’ attitudes, beliefs and experiences that they consider to be of a spiritual nature, and how they encounter this in their therapeutic practice.

Finally, metaphor as exhibited through poetry is one way of expressing symbolically felt experiences, and there has been some attention to this within psychotherapy and counselling. It is said that people actually think in metaphors (Pinker, 2007), and Lackoff and Johnson (1981) suggest that metaphorical concepts govern everyday functioning. They maintain that ‘the way we think, what we experience and what we do every day is very much a matter of metaphor’ (p. 103). House (2008) explores philosophical and therapeutic discourse, which suggests that poetry allows access to understanding: ‘Perhaps poetry (or whatever the transformative process for which it acts as a vehicle)
has (or is) a way of revealing levels of truth that rational, conscious attempts at articulation rarely if ever enable us to be open to’ (ibid.: 347–8).

2.8 Why Do This Research?

According to West (2004), therapists are often competent in their handling of the client’s spiritual needs but their competence differs according to their training. This infers that there is no way of regulating what is actually being offered to the client in terms of competency. Schaeffner, Angela and Dixon (2003) studied university students to ascertain whether those who purported to have a religious faith would prefer their therapists to use religious interventions or even religious language. They also hypothesised that women, who have, according to conducted research, historically reported higher levels of religiosity (Levin et al., 1994; Miller & Hoffman, 1995, in Schaeffner, et al 2003) would prefer the use of religious language, and found that the results supported that such clients would prefer the use of religious interventions. Kuczewski (2007) suggests that there is a gulf between those who essentially speak this language and those who do not. That leads us to ask where this leaves the client who does not wish to embark upon a specifically spiritual/religious type of counselling, but also does not want to exclude this very important part of their lives.

Schaffner and Dixon (2003) argue that in many institutions where counselling is taught, there are few or no course components dealing with the myriad of expressions of spiritual/religious beliefs or issues as they appear in the counselling relationship. These issues are currently being handled as a type of cultural spiritual/religious competency (Bartoli, 2007), and it is therefore suggested that they should be accounted for in graduate training, as are other cultural areas of difference. The present research, then, will seek to contribute to enhancing the training of counselling psychologists.

Given the limited scope of this research project it has been necessary to concentrate the attention on certain elements of the topic as it relates to what is being researched. It is believed that this has been done in a manner that is sensitive to, and representative of, the research topic. In particular, as the research is concerned with counselling psychologists’ perception, understanding
and experience of spirituality and their spiritual experience in their client work, the literature has included spirituality as it has been researched within the counselling field in the last ten years. Spirituality in counselling is considered and dealt with in the theoretical context of psychodynamic, humanistic and cognitive behaviour approaches, as they are approaches that are taught on Counselling Psychology courses.

This research will also consider the epistemological and ontological questions around what constitutes legitimate knowledge, and what is knowable and can be investigated; and concomitantly, what might be essentially and intrinsically beyond words – along with the methodological implications that flow from these considerations. The chosen methodology will be critiqued in terms of its validity.

2.9 The Researcher’s Position in Relation to the Literature

West (2004) specifically calls for researchers to situate themselves in terms of their position in regards to spirituality when conducting studies on this topic. The researcher has sought to remain aware of her responses, and how they have influenced the interpretation of the material chosen to be addressed in this research, and also how it has been represented. The researcher aimed to remain transparent in how those influences impact the research. It is however acknowledged that the processing of the material was done through the researcher’s gender as a woman (Denzin, 1989, in West 2004), and through the experience of having lived life solely in secular Western societies. As such, cultural issues are filtered through the lens of her cultural difference.

2.9.1 Conclusion

In line with many significant writers in the field of Psychology and counselling, key findings of this literature review reveal that ‘religion and spiritual issues are relevant to clinical practice’ (Schulte, Skinner & Claibon, 2002; 131), and it appears that spirituality can be, and often is, fundamental to people’s personal identity and sense of self (Schafer, Handal, Brawer & Ubinger, 2009). Additionally, some researchers (Hill and Pargament, 2003) have carried out extensive research into clients’ spiritual and religious beliefs, and have made definite links between religiousness spirituality and general psychological health.
However, researching spiritual beliefs and experiences for the population in general and therapists in particular in the Western world has proven a difficult enterprise for researchers. Miller and Thorenson (2003) have explored the predictable relationship between health and religious beliefs including spirituality, and discuss difficulties with methodological concerns, including: defining the terms, approaches to statistical controls, and defining the criteria used to judge the validity of findings. Of all of the difficulties mentioned, defining spirituality has been shown in both qualitative and quantitative studies (Crossley and Salter, 2005) to be a stubborn issue, particularly for therapists. This has diminished clarity in discussing and investigating spiritual beliefs, phenomena and experiences, and has necessarily impacted on therapeutic work with the therapists and clients with whom they work.

Moreover, researchers both in the United States and United Kingdom have consistently asked for more research into this area (Orlinsky, 2004, Carlson et al, 2002). Post and Wade (2009) review empirical research on religion and spirituality in psychotherapy to elucidate ways to incorporate the spiritual realm in their clinical work in therapists and clients including interventions used in therapy sessions. They concluded that therapists would like to evaluate their own stance on religion and welcome the inclusion of religion and spirituality into therapy. However, this lack continues to persist. One possible reason for this continued omission in investigating this area could be found in how training institutions currently engage with this topic.

2.10 Research Questions

The current research explored the following research questions:

- *How do counselling psychologists/therapists understand spirituality?*
- *How do counselling psychologists/therapists make sense of ‘spiritual experience’?*
- *How do these views and experiences impact professional practice?*

I now go on to explore in detail the methodological approach adopted in this research in Chapter 3.
Chapter 3
Methodology

3.1 Introduction

Spiritually themed research is most often conducted within a realist framework using quantitative methods (Smith, 2004). West (2004) maintained that the researcher has the dilemma of conducting the research in a systematic way whilst not detracting from the essence of the experience in an individual’s life. For that reason, Interpretative Phenomenological Analysis (IPA) (Smith et al, 2009) was used as a suitable methodology for exploring ‘flexibly and in detail, (this) area of concern’ (Smith and Osborn, 2003:53). Furthermore, through using existing theoretical constructs as part of the interpretative process, the research aims to gain knowledge about how counselling psychologists experience and manage any spiritual beliefs or experiences, i.e. either their own or those of the client when encountered in the therapeutic process. This exploration promises to deepen and expand our understanding of the reportedly under-researched area of therapists’ spiritual beliefs.

3.1.1 Epistemological Position of the Research

Research methodology concerns itself with questions that answer epistemological and ontological assumptions about the world. Qualitative and quantitative methodologies are the two broad approaches which are commonly underpinned by fundamentally different philosophical positions and assumptions in regard to the true nature of reality and knowledge. Generally, it is thought that qualitative models do not ascribe to the concept that ‘true fixes on reality can be obtained separately from particular ways of looking at it’ (Silverman, 2000:176).

Qualitative methods seek to elicit answers to questions about reality and knowledge that quantitative methods, with their focus on quantification, random sampling, probability testing and the use of other methods producing a
controlled environment (Camic et al., 2003), do not. It is argued that using quantitative methods for this type of research is inappropriate in that it employs questionnaire based, self-report measures where themes that are pre-determined by the researcher are used, thereby limiting the effective ‘capturing’ participants’ individual meanings of their spiritual experiences. Some also criticise the use of this perspective by recognising a current state of disillusionment (e.g. Pringle et al., 2011) with a ‘methodological fundamentalism’ that returns to a much-discredited model of empirical inquiry in which ‘only randomised experiments produce truth’ (House & Loewenthal, 2008:101). Critically, quantitative methods can ‘conceal as well as reveal basic social processes’ (Silverman, 2008:8) crucial for regarding ontological concerns of this research into the topic of spirituality, and how it is encountered in everyday life.

In looking at the ‘how we can know and what there is to be known about the nature of the world’ (Willig, 2001:3), the researcher must engage with a particular position in relation to their chosen approach (Willig, 2009). These positions range from a realist stance which asserts that the material gathered reveals knowledge about pure experience, to the relativist stance which asserts that there is no ‘pure experience’, but argues that ‘an exploration can be made into the cultural and verbal construction of experience, aiming to produce knowledge of those constructs’ (Willig, 2001:105, 2009).

3.1.2 Objectivity

Objectivity in quantitative methodologies assumes that in an orderly material world, the information gathered is independent of the researcher (McGrath & Johnson, 2003), whereas qualitative methods emphasise the hermeneutic focus on the methods and purposes of interpretation (Smith, Flowers & Larkin, 2009).

While qualitative methodologies are not homogeneous, qualitative researchers acknowledge the fact that it would not be possible to reach true objectivity within qualitative research (Morrow, 2007). Therefore, it is deemed necessary for qualitative practices to explain why it will not seek to answer the same questions demanded by quantitative research (Madhill et al., 2000). These questions relate
to what knowledge consists of, and how this knowledge is to be demonstrated as valid and reliable (Willig, 2001, 2008).

Quantitative approaches commonly take the position that objectivity and reliability are both necessary (Madhill, 2000:13) to ‘accredit’ what is identified as knowledge. Here, the researcher is not aiming to objectively measure knowledge, but to concentrate on the personal experience of individuals, which is sought through the analysis of information obtained from each participant. Indeed, Parker (1994c) argues that objectivity is actually dependent upon subjectivity as no knowledge can be the absolute truth and must be filtered through the lens of human interpretation. Prigogine & Stengers (1984) suggested that understanding the nature of reality and, subsequently, having knowledge of reality are connected to and constructed by our intellectual and sensory processes. In this view, therefore, any notion of objectivity cannot be inherently separated from us as persons because it is a part of our understanding and our being in relation to the world.

### 3.1.3 Reliability and Validity

Reliability in quantitative methodologies has been defined as ‘the extent to which results are consistent over time and can be reproduced’ (Joppe, 2000). In qualitative methodologies the problem of reliability arises in determining how the researcher goes about categorising the described activities or events found in the narrative, as the demand is on the researcher to provide consistency in recording the process of gathering, interpreting, describing and explaining the data (Silverman, 2000).

Madhill et al. (2000) argue that while some researchers transfer ‘notions of objectivity and reliability directly’ (p.3) from approaches to replicability found in quantitative research, this is only possible within a ‘naïve or scientific realist epistemology’ (p.3). This immersion of the researcher in the data reflects the philosophy of Heidegger, who said that individuals should be viewed as being an indissoluble part of reality (Larkin et al., 2006). As such, they are entities that are immersed, intertwined and embedded in the world which they inhabit (Larkin et al., 2006). There is an ‘inherent subjectivity in the production of knowledge’
(Madhill et al., 2000:3). Moreover, in choosing a qualitative method, the researcher must accept the limitations that come with using language to convey consciousness and experience, as is emphasised through the use of description and interpretation involved in the hermeneutic process (Moustakas, 1994).

Additionally, reliability and validity is to be understood in the qualitative paradigm used here in terms of ‘credibility, neutrality, or confirmability’ and transparency (Golafshani, 2003: 601), which can all aim to be demonstrated in the way outlined by (Findlay, 2003), by the use of research reflexivity throughout to highlight the limitations and strengths of the study. It is hoped that being transparent through judicious use of reflexivity, ‘the researcher can offer a self-critically reflexive analysis of the methodology used in the research’ (Finlay, 2006:4).

Here, the epistemological view, as informed by Merleau-Ponty, that the subject-body, as a vehicle through which the personal experience of life is shaped, is particularly important (Smith, Flowers & Larkin, 2009) in terms of the value of knowledge that can be gained through sensory experience. The paradigm that best describes the epistemological position of this research is an interpretative constructionist approach, whereby the researcher plays an active role in the process of the meaning-making activity (Smith, 2008).

3.2 IPA and other methodologies

While a qualitative method such as Grounded Theory could have been used as a method within an area of research such as this, the aim of the current research was not to generate new theory from the qualitative data but rather to focus on individual lived experiences of what counselling psychologists mean by spirituality and spiritual experience within their lives and professional practice. For example, while grounded theory would investigate the participants’ experiences of spirituality, it would as a methodology seek to ‘unravel the elements of experience’ (Moustaskas, 1994: 4), placing an emphasis on theory development (Corbin & Strauss, 1990). The researcher would pursue this particular method if she were wishing to build on the knowledge gained from the previous interviews in order to generate a theory of how counselling psychologist’s view spirituality. The current research aims to illustrate a construct of spirituality as it may be experienced by some counselling
psychologists through the use of a qualitative method because qualitative paradigms are similar to those of counselling psychology (Morrow, 2007). IPA was chosen because it allows ‘patterns and meanings to emerge’ (Smith, 2008:246) of the accessed views, thoughts, reactions and experiences of the participants.

3.3 Interpretative Phenomenological Analysis (IPA) and Theoretical Underpinnings

IPA was developed to interrogate subjective experience, personal accounts and the construction of meanings in a person’s social and personal worlds (Smith, 1996). This method also examines people’s lived meanings and symbolic interactions (Shinebourne & Smith, 2009). The epistemological framework and methodology are influenced by philosophical concepts of how knowledge can be accessed. These concepts are comprised of phenomenology, hermeneutics and idiography (Smith, Flowers & Larkin, 2009), which will be further outlined in the following section.

IPA draws on ideas put forth by Husserl, that one can and should step back from one’s natural attitude and adopt an attitude of immersion in the phenomena being researched (Shinebourne & Smith, 2009). Husserl posited that looking at the object being studied from different sides reveals different shapes, colours or other features of that object that might otherwise not be seen (Smith, 1994). This intentional shifting of focus aids and encourages the researcher to look at how the object appears to consciousness in the human lived world (Shinebourne & Smith, 2009).

It has been argued that IPA lacks a sound theoretical basis (Giorgi, 2010). Conversely, Finlay (2009) highlights the distinguishing features of interpretative phenomenology as drawing on the hermeneutic philosophers like Ricoeur, Gadamer and Heidegger, who argue that one is naturally ‘embedded in the world of language and social relationships’ (p. 10) – therefore, it is argued that interpretation is the route to understanding. Willig (2008) proposes that IPA is apposite precisely because it is not prescriptive. However, while not prescriptive, Smith (2010) suggests that IPA provides controls, such as supervision and ‘research steps’ to be adhered to (Smith 2010: 189).
Giorgi (2010: 196) has argued that IPA does not meet scientific criteria in that the steps do not have roots in contemporary phenomenological philosophy and does not have ‘the proper use of a method’. However, Smith (2010) maintains that IPA is not only underpinned by phenomenology and hermeneutics, but is also influenced by the phenomenological and existential perspectives of Heidegger, Merleau-Ponty and Sartre, which consider the person as embodied and embedded in the world, in a particular historical, social and cultural context. Smith et al. (2009) contend that

like Husserl, we see phenomenological research as systematically and attentively reflecting on everyday lived experience, and with Husserl we see that that everyday experience can be either first-order activity or second-order mental and affective responses to that activity – remembering, regretting, desiring, and so forth. (p. 33)

As established above, Smith et al. (2009) align their view with Husserl’s hierarchical categories of experience that sees ‘science as a second-order knowledge system, which ultimately depends upon first-order personal experience’ (p.15). Additionally, consistent with Heidegger’s views, IPA considers phenomenological inquiry as an interpretative process (Shinebourne & Smith, 2009).

Yardley (2000) and Angen (2000) have questioned the pertinence of research that draws on researcher interpretations to draw legitimate conclusions from qualitative studies. Stenner (1993) has also argued that there are issues to be considered in having power over others’ words. This includes questions of ethics in qualitative research (Haverkamp, 2005), such as the use of interviews, where a power imbalance may be present (Potter & Hepburn, 2005), and where the dialogic interaction between researcher and the participants increases the risk for exploitation and misrepresentation (Richards & Schwartz, 2002).

The IPA researcher’s intention is to immerse herself in the participant’s experiences. With this intention, she aims to reach the participant’s internal world in some way. The interpretations resulting from that immersion are based on how the participant is being understood. During this process, there will inevitably be internal influences stemming from the researcher on the processes of collection and interpretation of the data, and also during the interviews
themselves. It is argued that these influences are unavoidable; however, the researcher aims to continue to maintain an attitude that reflects her immersion in the participant’s data. An attempt is also made to offer the reader a way of understanding some of the meanings of spirituality to the counselling psychologists as they appear to emerge through the study of the material. From that, further implications of how these understandings may impact on the participant’s personal and professional lives will be investigated.

IPA can be seen to adopt a contextualist position because considerations such as time, place, situation, and accompanying particulars of the data collection, are an inextricable aspect of the research process itself, and are crucial to the context of the material gathered. Central to this are the researcher’s own context, including their own position, background, professional interests and knowledge and, importantly, biases and preferences (Willig, 2009). In this view, truth is a co-construction between researcher and participant, who are both necessarily situated and contextualised in ways that impact on the way the material is viewed.

As Smith et al. (2009) draw heavily upon phenomenology, hermeneutics and idiography to inform their epistemological position, and these philosophical points of view will now be briefly explored.

3.3.1 Phenomenology

Phenomenology is concerned with the examination and understanding of lived experience, and was founded by philosopher Edmund Husserl at the start of the twentieth century. Husserl posited that human beings engage in a process of self-deception through boundaries and ‘structures of thought’ that could become a replacement of the thing that the thought was initially referring to (Todres, 2007: 165). Because of this concern with how objects and events appeared to consciousness (Smith, 2008), Husserl made use of the term ‘intentionality’, which highlights human consciousness as always being conscious of something (Smith, 2009). Intentionality then, is a process that occurs in consciousness through which experience is relationally understood by the individual. Husserl proposed the notion of a ‘phenomenological attitude’, which involves methodical steps in a process of ‘phenomenological reduction’. This demands that thought be redirected from being unreflective and unexamined by the researcher, and
through the process of immersion, ‘the way in which the world manifests itself to us’ (Thompson & Zahavi, 2007: 69) can be examined. Through this awareness of one’s own intentionality as a researcher, phenomenological psychological research aims to capture, as closely as possible, the ways in which phenomena are experienced and lived by individuals within their context of their experiences (Smith, 2008).

Phenomenology seeks to search out meaning that may be hidden, and looks for the hidden meaning in the interpretation of a text (Shinebourne & Adams, 2008). Van Manen (1984) draws on Heidegger’s contribution of Dasein, ‘being in the world’, and linked hermeneutics with phenomenology by appropriating Heidegger’s (1962) assertion that the mission of phenomenology is ‘to let that which shows itself be seen from itself in the very way in which it shows itself from itself’ (ibid.: 58). Similarly, Merleau-Ponty (1964) highlights the importance of searching out the ‘invisible’ main essence of the thing that is visible or seen. Importantly, this process of revealing, and making manifest what may be hidden, necessarily involves interpretation (Shinebourne & Adams, 2008).

While Husserl, Heidegger and Merleau-Ponty all concerned themselves with philosophical problems of traditional phenomenology, they valued the non-dualistic aspect of Transpersonal Psychology and championed the notion of embracing ambiguity (Todres, 2007). However, there were divisions between the philosophers themselves, between teacher (Husserl) and student (Heidegger) on fundamental issues like consciousness. Heidegger criticised Husserl for ‘equating consciousness with individual consciousness’ (Todres, 2007: 166). Heidegger’s view was that consciousness is not centred in the self as a container but rather as a presence that is more fundamental than ego. This meant that for him, subjectivity arose from the already in existence ‘Being in the world’ lived world experience (Todres, 2007: 166). As such, non-dualism is a fundamental concept in the philosophy of phenomenology to be engaged with.

3.3.2 Hermeneutics

Hermeneutics is the second major theoretical underpinning of IPA influenced by major philosophical writers such as Heidegger (1927) and Gadamer (1960). Hermeneutics is concerned with the theory of interpretation. While Heidegger
acknowledges the pre-existence of the researcher’s ‘fore-conceptions’ and the obstacles this presents to the process of interpretation, he conceives that it is possible, nevertheless, to constantly assess these fore-conceptions, and separate them out from the phenomena at hand (Smith et al., 2009). Heidegger argued that in the complex relationship between the ‘interpreter and the interpreted’, one’s preconceptions only come to light in the interpretation process itself (Smith et al., 2009).

This research also draws on concepts of the hermeneutic circle, in that it is concerned with observing and engaging in the ‘dynamic relationship between the part and the whole’ (Smith et al., 2009: 28). Crucially, all parts are equally as important as the whole, and the whole is not more important than each part. In fact, they inform each other in the process of interpretation because they involve analytical and non-linear thinking, thereby allowing what is hidden to emerge. The IPA analysis process also involves a two-stage interpretation process through which the researcher tries to interpret the participant’s sense-making activity. This is described as a ‘double hermeneutic’ by Smith (2004). That is, the participant is trying to make sense of their experiences of a phenomenon, and the researcher is trying to make sense of the participant trying to make sense of their experiences, all while trying to make sense of their own process (Smith, 2004).

3.3.3 Idiography

‘Idiography is concerned with the particular’ (Smith et al., 2009: 29). The term ‘idiographic’ has been associated ‘with the study of “individual” persons in psychology’ (Larkin et al., 2006: 103). The study of a phenomenon is idiographic in that it produces knowledge about how individuals make meaning of their experiences (Larkin et al., 2006). The aim of IPA is to understand how experienced phenomena have been subjectively understood by particular people in particular contexts. Therefore, the focus lies in grasping the meaning of a phenomenon for an individual, with the idea that experience is at the same time both ‘uniquely embodied, situated and perspectival’ (even if shared by others) and ‘worldly and relational’ (Smith et al., 2009: 29). This draws on the concept of Dasein, which as a concept proposes that experience occurs in relation to something else, and as such is necessarily embedded in the world of things.
(Smith et al., 2009). In IPA analysis, a detailed examination of a particular case is achieved before moving on to the next case, after which, there is an attempt to conduct a cross-case analysis (Smith, 2004).

### 3.4 Rationale for the Use of IPA

Interpretative Phenomenological Analysis (IPA) aims to give a 'voice' to the experiences and concerns of individuals, and contextualises these concerns or lived experiences from a psychological perspective or standpoint (Larkin, Watts & Clifton, 2006). The aim of this research is to explore in detail participants’ lived experiences of the phenomenon of spiritual beliefs and experiences. It is for this reason that IPA was chosen specifically with an aim of getting close to the meaning given to spirituality by the participants in their lives.

The details of the method will now be explored in the following method section.
Chapter 4

Method

4.1 The Research Process

This research is conducted in partial fulfillment of the requirements for the degree of PsychD at the University of Roehampton in southwest London. An application was made to the university research degrees board in March 2009. An application for ethical approval was then submitted to the Ethics Committee of the then School of Human and Life Science, which was approved in January 2010. Following identification and selection of participants, the first interview was conducted in September 2010, and the final interview was conducted in January 2011.

4.1.2 Homogeneous participants (sample)

IPA requires that the participants’ experience be pertinent to the topic researched. Furthermore, the number of participants chosen must be relevant to the purposes and goals of the research. To ensure commitment to the subject matter of the research, homogeneity was sought in terms of the participants having trained and worked for some time as counselling psychologists in a therapeutic role. All but one of the target sample of practising participants gathered were practitioners registered with the British Psychological Society (BPS). One of the participants was not practising at the time of interview.

4.1.3 Data collection and IPA

Smith et al. indicate that there are several ways to collect data but suggest that using semi-structured interviews (Smith, 2004) can allow the researcher to gather information–rich data in a flexible, collaborative way. As indicated by Smith et al. (2009), the researcher is encouraged to take a non-directive approach, enabling the participant to guide the course of the interview, detailing topics of significance to them. It is to be born in mind that the
researcher aimed to facilitate a comfortable, relaxed approach with asking open-ended, expansive questions that intended to allow the participant to recount detailed descriptive episodes and experiences. The participants were informed that it was important to establish that whatever beliefs the participants had, whether spiritual/religious or not, was to be explored.

Smith et al. (2009) emphasise that there is ‘no right number for sample size’ (p.51). They maintain that it is important that the researcher commit to analysing and reporting the topic as fully as they would in a case study. Smith et al. (2009) suggest that students consider 3–6 participants to be a reasonable number for a detailed study. They argue that this is a more common number of participants not only for students but also, increasingly, for more experienced researchers because information from larger numbers of generated material can be lost. Smith (2010) states that analysing data from large numbers of participants does not allow for IPA’s commitment to the ideographic concerns of the particular detail. Smaller sample sizes allow the focus to be on interpretation rather than offering a simply descriptive analysis that is common in thematic methods (Hefferon & Gil-Rodriquez, 2011).

4.2. Interview Design and Schedule

The interview schedule was comprised of semi-structured interview questions as suggested by Smith (2009) (see Appendix 1). The open-ended nature of the questions provided participants with the opportunity to share detailed accounts of their lived experiences of spirituality, spiritual beliefs and spiritual experiences. The first question of the interview schedule was designed to help participants feel at ease by allowing them to talk about themselves in a more general sense, and to reflect upon experiences that have influenced who they are today in relation to any beliefs that they might have. The interview schedule was also closely examined, discussed and fine-tuned with the research supervisor and Director of Studies.

The researcher used the interview schedule as a guide for areas of exploration, ensuring that there was sufficient depth in the relevant areas. From the early twentieth century, interviews have been known as ‘a conversation with a
purpose’ (Bingham & Moore, 1931: 320). As far as possible the researcher adopted an essentially ‘non-directive’ counselling style in the interviewing process, with the researcher saying as little as possible. The researcher used minimal encouragement and rephrasing as tools to ensure clarity of participants’ perceptions and experience (Kvale, 1996). In addition to ensuring clarity in the ways mentioned above, the researcher summed up some of the lengthier and/or more complex comments with the participant aiming to remain true to the participant’s intended meaning, and to offer an opportunity for correction.

**4.2.1 Interview questions**

1. What does the term ‘spirituality’ mean to you, and how do you think this meaning or belief has come about for you?
2. Can you describe a particularly vivid experience from your non-professional life which is consistent with your understanding of what, for you, constitutes a spiritual experience?
3. Can you describe a particularly vivid experience in your professional CP work which relates to your view of what constitutes a spiritual experience?
4. Can you speak about any meaning you might have made of this, and if you feel you are or were changed by this/these experiences?

Whilst the interview questions were drawn from previous topics discussed in existing literature as highlighted in the literature review, the researcher was careful to avoid questioning the participant as far as possible, which might lead the participants in a particular direction, shaping the data into preconceived themes.

The researcher was mindful to allow time for the participants to reflect on what it might mean for their experiences. Again, any prompt questions were around feelings and thoughts present for the participants and some more tentatively interpretative questions to seek clarification.
4.3 Ethics

Ethical approval was sought for this research through the Ethics Committee required at the University of Roehampton in the design phase of the research, prior to any contact with participants. Ethically conducted research is committed to avoiding harming any of the participants. It is therefore important to continually, and in an ongoing fashion, evaluate any possible emotionally sensitive material which may damage the participant. Throughout the process it was important to ensure both researcher and participant safety. Ethical research is also a dynamic process, and needs to be monitored throughout the process (Smith et al., 2009).

The researcher was mindful that exploring spiritual/religious beliefs, or what participants considered to be spiritual/religious experience, had the potential for considerable discomfort and anxiety. Participants were advised of what to expect prior to the interviews, and were made aware that sensitive material arising from the interviews might be experienced as emotionally provoking and difficult. Support contact numbers were given to the participants in the event that interviews were too emotionally provoking, and participants had a de-briefing session after the interview. All participants were briefed and debriefed, obtaining informed consent (Appendix 2), and being reminded that they could withdraw from the research process at any time (Faden & Beauchamp, 1986).

Additionally, client anonymity was diligently guarded because of the sensitivity of the material being discussed. In the presentation of the research, all participants’ and their clients’ details were given pseudonymous names and numbers in order to protect and maintain their anonymity and the data.

Furthermore, the researcher was aware of the three types of problems that could adversely affect qualitative studies and raise ethical dilemmas, as outlined by Ramos (1989). These problems are: issues that can arise from the relationship of researcher and participant, faults in the design of the study, and how the researcher subjectively interprets the data. Power dynamics were also considered in that Finlay (2002a) suggests that the power differential be limited
by the researcher by co-opting ‘participants’ into the study as ‘co-researchers’ (Finlay, 2002a: 535).

The problem of having a previous relationship became known to the researcher during the interview which lasted over time. It could be argued that because the interviewee was previously known to the researcher in a collegial capacity and he let it be known that he has a profound interest in this topic along with the fact that the researcher was a novice interviewer, influenced the fact that the interview with him lasted as dictated by the participant, for an extensive amount of time longer than predicted. The interview schedule was used as a guide (Smith et al., 2009: 64) but often the topic shifted away from the researched area, which Smith et al. (2009: 67) say can be a part of the interviewing process. While the researcher struggled to find an appropriate ‘research persona’ (p.64), in the absence of any contra-indicating information being known, it seemed ethically fitting in terms of accommodating the power imbalance to allow the participant to dictate the rhythm and timing of the interview.

4.4 Procedure
4.4.1 Identification and selection of participants

Potential participants were contacted via three different methods: namely, referral, gatekeepers who had the opportunity to feedback to the researcher any possible interested parties, and snowballing, i.e. participants’ suggestion of other possibly interested participants (Smith et al., 2009). The researcher began by using professional contacts made through different counselling placements to identify counselling psychologists currently working in various contexts. Potential participants were contacted either personally by the researcher or by professional co-workers in the workplace to ask for expressions of interest in participating in the research. Participants who did express an interest were then emailed a letter with more detailed information about the research and a consent form.
4.4.2 Recruitment

Six participants between the ages of 42 and 68 who were professional contacts of the researcher volunteered to take part in the research. All had practised as counselling psychologists in both private practice or in various professional contexts for more than 10 years.

The participants were not chosen based on identification with certain spiritual or religious beliefs, as all views on the topic were open to examination. Any participant who met the criteria of professional qualification and length of practice was chosen as a participant. To ensure a wide selection of participants, it was made known in the recruitment letter that all perspectives on spirituality were welcome.

It was particularly important to select participants who had over five years of experience in order to explore the views on this topic of therapists who had had sufficient time to establish a professional identity as a counselling psychologist. It is more likely that this group of therapists would have not only different theoretical understandings of spirituality/religious beliefs in the client work, but would also have an experiential understanding of the terms, and it was therefore expected that these practitioners would provide sufficiently rich information for purposes of analysis.

Of the six participants, five were women and one a man. Three described themselves as British, one of whom was of mixed Asian-British race, and the two others were other white nationalities and long-term residents of Britain. All participants had a Counselling Psychology qualification, and two had additional qualifications in psychodynamic psychotherapy. One of them also worked in a life-coaching capacity.

Each interview was completed after the debriefing form was read, and the participant was asked to sign and date it (Appendix 3), ensuring that any discomfort or anxiety felt as a result of the material discussed was addressed, and where possible resolved, in line with ethical practice (Smith, 2006). Each participant was also asked for feedback on the interview process (Kvale, 1996).
All participants were sent the participant briefing document via email prior to the interview (Appendix 1). This document contained the following information:

- detailed information of the research area
- the purpose of the research
- expected duration of the interview (45–50 minutes)
- the right to withdraw at any time
- how information would be stored and how confidentiality and anonymity would be protected
- contact information of the Director of Studies for this research

All participants who agreed to participate were given the consent form (Appendix 2) and were asked to sign it.

4.4.3 Participant details

Table 1. Participant Demographics

<table>
<thead>
<tr>
<th>Place of work</th>
<th>Gender</th>
<th>Ethnicity</th>
<th>Age</th>
<th>Religious Background</th>
<th>Therapeutic Orientation</th>
</tr>
</thead>
<tbody>
<tr>
<td>NHS</td>
<td>Female</td>
<td>Asian-British</td>
<td>40’s</td>
<td>Christian</td>
<td>Integrative Psychodynamic</td>
</tr>
<tr>
<td>NHS</td>
<td>Female</td>
<td>White-British</td>
<td>40’s</td>
<td>Christian</td>
<td>Integrative Psychodynamic</td>
</tr>
<tr>
<td>NHS</td>
<td>Female</td>
<td>White-British</td>
<td>50’s</td>
<td>Christian</td>
<td>Integrative Psychodynamic</td>
</tr>
<tr>
<td>Private sector mental health</td>
<td>Female</td>
<td>White British</td>
<td>50’s</td>
<td>Christian</td>
<td>Integrative Psychodynamic</td>
</tr>
<tr>
<td>Private sector mental health</td>
<td>Female</td>
<td>White other</td>
<td>40’s</td>
<td>Christian</td>
<td>Integrative Psychodynamic</td>
</tr>
<tr>
<td>Non-practising</td>
<td>Male</td>
<td>White</td>
<td>60’s</td>
<td>Christian</td>
<td>N/A</td>
</tr>
</tbody>
</table>
Five participants were working at the time of the interview in a variety of settings, including private practice, educational institutions and the NHS service. The male participant had stopped practising as a counselling psychologist. Their experience ranged from 10 to over 20 years in practice post qualification.

4.4.4 Interview process, collection and follow-up

Each of the participants was briefed by the researcher before each interview began. The details of the briefing process were included in the briefing document (Appendix 1). Each of the participants was asked to sign the consent form before embarking on the interview process. Participants were reminded that their confidentiality and anonymity would be maintained, were asked to speak freely, and were assured that the confidentiality of any clients they might mention would also be adhered to. As is stated on the briefing form all participants were advised that they had the right to withdraw at any time during or after the interview and throughout the entire research project, in which eventuality all of their material would be deleted. The participants were reminded that the interviews would be taped and the interview would be transcribed. Participants were offered the opportunity to be sent their transcripts to look over.

At the start of each interview the researcher outlined the area of research and invited any questions or comments relating to the research from each participant. The researcher reiterated that the format of the interview would be semi-structured in nature, and the intention was for the participant to share any and all information that she/he felt was a part of their meaningful narrative (Smith et al., 2006).

All participants who requested a copy of the transcript were sent it securely via email. Participants were asked if they had any comments to add to the transcripts or further reflections. This procedure is in accordance with Smith (1996). One participant did make minor changes to the script.
4.5 Reflexivity

Issues surrounding reflexivity affect all qualitative approaches to research, and IPA often goes further than many other approaches in addressing these issues (Brocki & Wearden, 2006). It has been suggested that some attention to the researcher’s characteristics may be beneficial to the reader in their observations in the analysis; and presentation of some appropriate reflections on their role in the dynamic process of analysis is also helpful, particularly where it might have had a significant impact on the final account. As IPA explicitly acknowledges the interpretative characteristic of the approach (Smith, 1996), it is suggested that researchers utilizing this method are under a particular obligation to address this issue (Brocki & Wearden, 2006). It is also suggested that such acknowledgement of the researcher’s role generally be made prior to the analysis.

Finlay (2002a, 2002, 2009) points to the usefulness of using psychodynamic theory as one way of the researcher understanding and ‘owning’ their own process within the research. Moreover, Finlay (2002a) posited that ‘psychodynamic researchers remind us to explore how a conversation or text affects us and to reflect on what we bring to it ourselves’ (p.217). Particularly relevant here is that psychodynamic researchers see ‘unconscious needs and transferences as mutually structuring the relationship between researcher and participant’ (2002a:217). Furthermore, this highlights the need for researchers to think about how conversation or texts might touch or reveal unconscious needs and how transferences co-construct and influence how the story of the research is told to the researcher, and consequently re-told by the researcher (Finlay, 2009).

Researcher reflexivity makes the criteria of consistency, dependability and applicability or transferability (Golafshani, 2003: 601) explicit in establishing the quality of conducting and reporting this research. With this in mind, the researcher has outlined some pertinent reflections during the process, focusing specifically around personal beliefs and preconceptions through the use of reflexivity boxes.
Larkin et al. (2006) maintain that there are two types of reflexivity: personal reflexivity and epistemological reflexivity. I was challenged to consider ways that my own values, experiences and other socially acquired and embedded personal features may shape the research (Larkin et al., 2006:108). Crucially, Larkin et al. (2006) invite the researcher to think about and record how the research has changed the researcher. As a trainee counselling psychologist there is a requirement to complete a doctoral level piece of research which demonstrates academic acuity in critical thinking, the ability to engage with and question the prevailing psychological discourse, but perhaps above all else, to observe and question the self with a view to acquiring ontological and epistemological knowledge.

As the researcher, I faced dilemmas, times of serious self-doubt in my capabilities, a considerable challenge to manage and tolerate uncertainty, and finally, a prolonged and painful search for meaning in uncovering my own beliefs layer by layer. This journey can be said to be akin to the spiritual notion of the ‘dark night of the soul’. Engaging with the philosophical tenets of Husserl’s eidetic reduction aiming to access the essence of the thing being studied, Heidegger’s urge to get closer to truly unveiling knowledge by viewing the subject from all angles, and others who try to elucidate the interplay of a Greater Consciousness with the consciousness of the individual, proved more difficult than initially envisaged. Certainly, being an immigrant of a minority group, after having lived for a substantial amount of time in yet another different country with a Christian history helped me to relate to the participants’ largely Christian values. All but one of the participants had also adopted some ‘New Age’ and Eastern philosophies, as had I done. Coming to Britain as an adult may certainly have influenced how themes of belonging and connecting to others were heard and interpreted, and this influence was most certainly evident in the analysis. I consciously chose a qualitative method with the epistemological position of IPA, which has been said by Smith et al. (2009) to most often find itself concerned with issues related to identity. This could reflect an attempt to resolve my own internal anxieties related to belonging and attempt to answer
existential questions relating to meaning of life.

‘Epistemological reflexivity requires us to engage with questions such as: how has the research question defined and limited what can be found?’ (Larkin et al., 2006: 108). Certainly, delving into spiritual beliefs that each participant described as very personal felt at times intrusive (Smith et al., 2009). Throughout the interviewing process, I realised that perhaps I had myself an unconscious desire to heal old wounds from a disappointing Christian upbringing that had left some of my vital needs for spiritual sustenance unmet. This unmet need seemed to be reflected in some of the participant accounts. What this says about ontological spiritual concerns being a humanly shared concern, or simply a desire for me to reduce existential and societal uncertainties and dangers, is still being revealed. These previously uncovered realisations may certainly have influenced how the research question evolved throughout the course of the PsychD training, along with hearing the experiences with other members of the cohort, as has been mentioned in the preface.

However I believe that the limited teaching on spirituality and religious concerns in the various modules offered, despite the Counselling Psychology ethos to place emphasis on the therapeutic relationship, is questionable for both therapist and client. Furthermore, counselling psychologists registered with the BPS are required ‘to engage with subjective values and beliefs’ and to ‘respect the diversity of beliefs and values held within society and continually review their practice with due regard to changing societal norms’ (BPS, Professional Practice Guidelines, 2005). In the absence of much instruction in training as to how to go about this and no specific requirement for the trainee to explore their own spiritual or religious beliefs, these requirements seemed to reflect the epistemological and ontological tensions that Counselling Psychology continually grapples with. However, engaging with these struggles as to how to consider the philosophical tenets of the CBT, psychodynamic and person-centred models taught on the course has helped to add to practising with these issues from an ethical viewpoint.
Chapter 5

Chapter 5 will now discuss in detail the master themes, subthemes and associated findings which emerged from analysis of the participant’s data.

5.1 Analysis and Results

5.1.1 Analysis of data from interviews

The interview schedule set out in Appendix 1 was used as the basis of each interview. Each interviewee was asked the same question at the beginning of the interview; ‘What does the term “spirituality” mean to you, and how do you think this meaning or belief has come about for you?’

Each interview was recorded and transcribed by the researcher, and the resulting transcripts formed the raw data for analysis using IPA (Smith, 2004). When analysing the interviews the researcher repeatedly listened to the taped interviews to become acquainted with the data and idiosyncrasies of each transcript. Particular attention was paid to the participant’s tone of voice and pace of speech to indicate possible unspoken communications and meanings. The researcher also listened for any inflexions to provide additional data not evident on the face of the transcripts. The transcripts were read several times and what seemed to be important passages or phrases were annotated. The researcher also underlined particularly resonant passages and noted their interpretation of the text in the right-hand margin.

Next, the left-hand margin was used to note any initial emerging themes. The emerging themes were developed and organised around consistently appearing concepts in the reading of the data. The analysis involved colour-coding themes generated by the participants, which required a detailed reading of the transcripts. Repeatedly reading and making notations on the transcripts allowed the researcher to become intimate with the material over an extended period of time. This level of familiarity ensured that the analysis phase of the research was informed and comprehensive.

The researcher then refined the themes and sub-themes, rejecting interpretations which were less well supported by the rest of the data and
refining those that emerged most frequently. Once this process was completed, temporary phrases representing particular concepts were devised, which were noted on the left-hand hand margin of the transcript. These were then listed on a separate sheet in chronological order, from which the researcher was able to identify any overlap. Whilst the data yielded a wide range of ideas and concepts, master themes with supporting sub-themes were extracted, which were then re-checked to ensure they were illustrated in the verbatim transcript.

The process continued using the master theme list from the first interview to begin the analysis of the next transcript, searching for more instances of the themes already identified from the first interview but allowing for the identification of new themes as they arose. This process continued until all six transcripts had been exhaustively analysed. An interview transcript from the interview with participant number 5, with emerging master themes and sub-themes, is appended to this thesis as Appendices numbers 4 and 5.

The last stage involved producing a master list of coherently ordered overarching categories and associated master themes. These were marked to indicate where each theme could be found in the transcript. At this point in the process certain idiosyncratic themes were rejected. The resulting consolidated table of participants’ master themes is set out in section 5.1.1. From the analysis of interview data four master themes and 16 sub-themes were identified, which are summarised in Table 1 and presented in more detail below.
5.1.2 Table of themes

<table>
<thead>
<tr>
<th><strong>Super-ordinate Themes:</strong></th>
<th><strong>Sub Themes</strong></th>
</tr>
</thead>
</table>
| **DEVELOPMENT OF SPIRITUAL IDENTITY** | • Early perceptions of the spiritual self  
• Belonging vs not belonging  
• Searching for a spiritual fit  
• Ongoing spiritual development |
| **LIFE CONTEXTS VS PROFESSIONAL PRACTICE IN RELATION TO SPIRITUAL BELIEFS** | • Spiritual beliefs as support  
• Differences in contexts  
• Evidence-based models vs ‘working in the unknown’  
• Integration of spiritual self and professional self |
| **UNDERSTANDING, LEARNING AND USES OF SPIRITUAL EXPERIENCE** | • Changing states of consciousness  
• Connecting with Self, God, Nature and others  
• Phenomena considered spiritual  
• Spiritual experience induced changes in self concept |
| **DISCLOSURE IN PROFESSIONAL CAPACITY** | • Trust vs fear of judgement  
• Confusion in training  
• Boundaries (including issues of power in therapeutic context) |
5.2 Introduction to the Super-ordinate themes

The data revealed four broad interrelated and overlapping themes:

1. Development of spiritual identity
2. Spiritual beliefs within life contexts vs spiritual beliefs within professional practice
3. Understanding and uses of spiritual experience as a vehicle of adaptation and change within identity and
4. Disclosure within the professional capacity.

Each theme reflects sections of the question being researched regarding their personal meaning of spirituality, their spiritual experience and any possible implications for their professional practice as counselling psychologists. Within each broad theme, participants reflected on their lived experiences in detail, giving an account of how these experiences influenced their lives and, finally, how participants struggle to integrate their ongoing evolving spiritual identity development with their professional identities. Also, all participants spoke of as an existing spiritual self, whether they had a language for it or not. They spoke of it as a knowing and a felt sense of self.

5.3 Super-ordinate Theme: Development of Spiritual Identity

5.3.1 Introduction

The analysis identifies a number of recurrent themes across the data. ‘Development of Spiritual Identity’ has been divided into four sub-themes. These sub-themes illustrate how participants reflect on their lived experiences, indicating that the meaning of spirituality came about through the development of a spiritual identity in relation to their familial and societal environments. It also charts the process of developing their spiritual beliefs, which include identifying and describing the meaning of spiritual experience. The super-ordinate theme of developing their spiritual identity is an important section of the overall research project, aiming to capture participants’ experiences of events leading up to and maintaining their spiritual beliefs, and notions of
spiritual experience, including how these may influence their way of working within a Counselling Psychology capacity.

The sub-themes are linked in the way that they illustrate a sequence of events or experiences throughout one’s lifetime, contributing to the development of a stable sense of a spiritual self, which may have been influenced by life events or experiences attributed to the spiritual at different stages of development.

5.3.2 Early perceptions of the spiritual self

This sub-theme captures participant experiences such as constructions of early understandings of the spiritual and/or religious within family and societal systems (either intuitively/subliminally or actively), confusion or vagueness around the spiritual and developing awareness, and expressions of a spiritual self. This theme featured strongly across most participant accounts. It reflected on the participant’s significant formation of concepts of God and relationships formed with various expressions of the spiritual at different life stages.

The data suggests that a spiritual identity was either intuitively acted upon or consciously developed and acted upon by all of the participants. Both types of experiences however played a significant role in influencing ongoing relationships with God, the self and others. This also reflects that the possible role of spiritual and religious beliefs is to manage feelings, to foster feelings of safety and security in an uncertain world and to construct a meaning to life itself. Following are some accounts of reconstructions of critical events forming an early spiritual identity.

Sarah reflects on her experiences of her early confusion and alienation about the spiritual, which led to a sense of searching for spiritual expression, which she refers to throughout the interview:

Sarah:

I guess I grew up in an environment which was, for the main part of it catholic. But uhm...also with an atheist so I had.... there was a tug of war around religion about it as I was growing up. And so I had a sense of difference from a very early age.
Sarah talks about her parents letting her choose her own religion and in doing this, her own spirituality. She acknowledges the difficulty in growing up without having established a firm spiritual or religious identity providing a secure base from which to operate. Throughout the interview, she reflects on life experiences that were influenced by her earlier experiences of being in a family divided in religious and spiritual matters that gave her no spiritual structure.

Melanie talks about her early exposure to religious familial and societal practices and beliefs, which led to feelings of frustration and dissatisfaction with the faith as it was presented to her:

Melanie:

* I grew up a catholic in a very closed, small town where God was portrayed as judgmental and frightening and a lot of people lived very passive lives because of that religious belief, rather than active lives.

* My mother was very religious and she kind of suffered and endured rather than made a difference in her life, and I didn’t find that attractive. I wanted to have more agency ....

The above describes developing an active reaction to the lack of confidence in the ability to be positively influenced by faith at an early age that she saw in those around her. Melanie goes on to say that this experience led her to have a high regard for choosing to have an active sense of agency, and sees life as a gift from God that is to be honoured by the choices that one makes. The act of making this decision could reflect the presence of a ‘spiritual self’ independent of environmental influences. Throughout the interview Melanie draws on the concept of choice in responding to anything she is presented with in life (particularly loss) as this relates to her belief that God is a loving energy that requires of one a sense of responsibility, discipline and choice.

Anne talks about associations of objects and spiritual phenomena she’d seen as a child with developing an awareness of a spiritual self:
Anne:

As a child I remember looking at prayer books and things and seeing guardian angels and being made aware of that...that there is such a thing as.... I don’t know....something subjective and internal and special.

For Anne a stable sense of spiritual self began in childhood, and has continued as a valid and necessary part of the self, as she further explained throughout her interview. It seems the construction of her spiritual identity began as a way of naming the visual, auditory and felt experiences that she had as a child. She seems to also have become aware that these experiences and perspectives of what is spiritual are personal to the self.

5.3.3 Belonging vs not belonging

This sub-theme captures participants’ (Geoff, Sarah, Melanie, Anne) early and current experiences of either rejection of existing religious practices, not belonging and separateness, which was common across just over half of the participant accounts. or an early sense of belonging and meaning to life with religious belief which occurred for the others (Mary and Susan). The analysis revealed a pattern characterised by a feeling of needing to belong to something greater than the self. This feeling of belonging or not influenced the way they responded to others and how they viewed themselves. Regarding the spiritual – detachment, not belonging, rejection (dismissive) and separateness were influenced by witnessing patterns of relating to the religious/spiritual that they found unhelpful.

In participant, accounts relating to the sub-theme of belonging vs not belonging, belonging spiritually was revealed in some cases to be experienced as a vital need, even before participants had found a viable connection to their view of the spiritual. This is shown to have contributed to later searching for an individually appropriate expression of a spiritual self. Religious or spiritual belonging suggest that mechanisms of attachment may well be involved. Themes of attachment in relation to a relationship with others, religion and God were often associated with needs for spiritual expression that were not met. This left participants feeling unfulfilled in relying on a supportive appropriate representation of a
spiritual philosophy that adequately reflects the self. This latter will be further discussed in-depth in the sub-theme *Searching for a spiritual fit*.

Sarah talks about how her experiences at school helped her to form the view that religions were closed to others and fostered a sense of not belonging, as she had no formal religion practised by her family:

Sarah:

> And then I went to school where we had different assemblies for people who had different religions because it was a very large Jewish population in the school so they would have their own gatherings. Uhh... so generally thinking that religions were really quite closed, and with doctrines and very much with different spiritual beliefs as quite open. (p. 5)

Sarah’s experience of growing up with parents who held divided, un-harmonious religious views to which she could not relate led to her ‘not having a sense that there is something that holds her safe’ (p.5), to the point where she was inspired to seek an individualised spiritual belief to draw upon. She uses the words ‘quite closed’ to describe her sense of not being included in or a part of the community at school, as if to communicate an experience of ‘me’ and ‘them’.

Her use of the word ‘open’ describes a sense of being able to belong to something greater than the self or of being open to opportunities to be included, and a sense that she can benefit emotionally and spiritually. She reflects on her experiences of exploring different religious disciplines as an evolving process growing out of a need for ‘structure which I never grew up with’ or ‘something I can turn to that gives me strength’.

Themes of attachment emerge when Geoff talks about his experiences of a family with diverse beliefs which were mainly anti-religious. He indicated that for him, there were issues of separateness from the religious:

Geoff:

> I think I was very influenced in my childhood by two things... that led to a sense of the spiritual. One was my grandmother’s spirituality. I grew up in a family that was kind of liberal, atheistic sort of, against organised religion for very good reasons, and I certainly did not like any of the forms of organised religion that I was exposed to as a child.
They just seemed to me to be superficial, mad, and often quite nasty – and when not nasty, then benign, but benign in a kind of ineffectual way that seemed pointless.

Geoff goes on to speak about viewing his parents as un-grown up children in a family where the grandparents had the power, and more to offer in terms of believability and solidity. He indicates that he felt that he belonged in the family because of this connection to spiritual learning from his grandmother. Throughout the interview he talks about himself as an outsider throughout his life.

Susan directly links the type of attachment that she shared with her mother to her work with clients.

Susan:

Learning from my clients I think... and I think, you know, as a child I always had that with my mother, I was, I had a close relationship with my own mother and I think that has been helpful, and I think that is probably where that kind of...some people are perhaps more gifted than others. Perhaps it springs from some kind of close relationship or caring for somebody or being care for. Some sense of closeness and belonging, attachment that helps that kind of development.

Susan’s association of early parental relationships and the importance of attachment, along with a sense of belonging, together indicate that she, through these relationships, gained trust in a healing power which she attributes to the presence of a spiritual element. Throughout her interview, she mentions spirituality as a loving force that is ongoing, nurturing and the provider of learning experiences.

Susan speaks about transferring a sense of belonging that she received as a result of what she associated with a spiritual connection with her mother earlier in the interview with the ‘gift’ of being able to transfer that sense of belonging and attachment in her work with clients (p.4).

Mary talks about her spiritual identity as being connected to her religious faith, which is ultimately bound up in a familial religious identity to which she belongs.

Mary:
So I am a committed Christian and so for me that... is my experience of spirituality is as a Christian and as all the breadth and experience that brings. ....and that comes from, I guess, a combination of family context in that all my family are Christian, but also personal experience and yes, ongoing personal experience, I suppose.

Mary is a committed member of a church and the church choir. The church is an important source of social and creative expression. As such Mary gave a very strong sense of belonging to her religious community. While all of the participants said that spirituality incorporated their worldview as a whole and that ‘nothing that stood apart from the spiritual’, as a participant, Mary identified herself as a Catholic and described a life which centred around her faith, i.e. a religious practice and beliefs.

5.3.4 Searching for a spiritual fit

This sub-theme looks at participants’ experiences of searching for and finding as adults a connection to their expression and choice of the spiritual. Four of the six participants spoke about this search in terms of responding to something that was ‘missing’ in their lives. The element that was missing was described in terms of a relationship to the self and the ‘something greater than the self’, as opposed to physical relationships or material goods. This involved, when it was found, a sense of ‘rightness’ in the body. The language used in various participant accounts depicts a sense of safety, containment and an ongoing participation of the whole self which includes the cognitive, emotional, bodily and intellectual perception of a spiritual self when a fit is found. The analysis highlighted a pattern across participant accounts suggesting a connection to their spiritual beliefs as a way of coping with feelings and life events that threatened their sense of self. These spiritual beliefs seem to give life structure and meaning as well as organising the sense of self.

The Belonging vs not belonging sub-theme takes account of some examples of participants’ life experiences which led to feelings of longing, dissatisfaction and perhaps to a sense of not belonging. Therefore the searching for a spiritual fit by experimenting with different (ancient and New Age) traditions and the connection she made with a satisfactory practice of an appropriate tradition could be understood as a way she responded to an unconscious and conscious
internal need to build a functional compatible belief system within an existing internal sense of self. Paradoxically, participants spoke of how this connection initially addresses the longing for stability and containment, but ultimately led to an acknowledgment by most of the participants of continuing the searching for spiritual development as an off-shoot of an evolving conscious and unconscious sense of self. This suggests that religious and/or spiritual beliefs, once attained, are not static, as will be explored later in the sub-section *Ongoing spiritual development*.

Melanie describes a process of searching for and trying out different expressions of religious perspectives on Christianity that are more in line with her sense of integrity and value system. Exposure to other expressions of spirituality had been unsatisfactory to her because the experiential connection was missing:

Melanie:

But the xxxxxx stuff felt like you had to think your way to spiritual development. It just didn’t seem there was much heart in it. There wasn’t much love; it was all about techniques and practices.

But, they talked about him, (at the retreat) and I just by chance... I saw this poster in a church hall say that he was coming the following week and I felt I have got to do that retreat. And it was a week retreat. And it was just amazing! He talked about the love of God.....

It was interesting that Melanie felt drawn to continue to find an appropriate connection with Christianity presented and practised in a different way to her earlier experiences of ‘passive’ and ‘narrow’ beliefs associated with Christianity. She mentions the word ‘love’, and God as a source of that love, throughout her interview. She expressed discontent with exploring one type of religious expression as it delivered an intellectual understanding of the religious/spiritual which did not fit with the (role) that having faith is to have in her life. Perhaps Melanie’s reaction on seeing the poster indicates both the conscious and unconscious at work in the searching process.

First there was curiosity in hearing about a spiritual teacher whose philosophy or interpretation of Christianity led to her being drawn to hear more. Her experience then was a ‘felt’ one that moved her powerfully as evidenced in both
the words she used to describe the feeling state of ‘amazement’, linked with experiencing a teacher’s interpretation which resonated with her own beliefs about the expression and message of God as she understood it to be. It sounds like the connection was a coming home in the body, mind and spiritual aspects of the self. The connection was recognised as important because of the power of the emotions experienced.

Geoff reflects on his experiences of searching for a spiritual fit as an adult in his practice as a therapist when he indicates that he was feeling discontented with his career at the time and with the way his life was playing out, which might suggest the embracing of spirituality as a way of dealing with disappointment. His quotations illustrate the importance of ‘felt’ experience in making sense of and sustaining adult needs.

Geoff:

There was also a turning point in my life because of my relationship to (the job) and other things in my life, the way my life was going.... I became more and more aware of the need for adult spirituality.

And later:

....That this more adult dimension of spirituality which encompasses society and culture and the need of adults to be deeper people and to become more active in terms of what’s happening in the world, hit me very powerfully.

His use of the expression ‘need for’ suggests that there was a spiritual need left unmet in his own concept of self. His use of the word ‘adult’ could highlight a perception that an organised way of accommodating spiritual concerns, in a way that does not include associations to a powerful parental figure when referring to ‘God’, does not exist.. Throughout his interview he avoided using the word God in referring to his ideas of Spirit. He also mentioned his preference for understanding the spiritual in terms of a ‘Shamanic’ view.

Sarah’s narrative highlights difficulties associated with not having a coherent spiritual belief. Sarah indicates the powerful and lasting impact on her of the lack of a spiritual identity and sense of spiritual belonging she experienced during her time at school. She talks about becoming interested in looking for some kind of spiritual practice in this way:
Sarah:

I’d often felt that something was missing in my life so I guess that I set about looking for what’s this all about? And uhm, we had different religions presented to us at school but not something with a sense of the spiritual and then as I got older which was probably in the last six, seven years. So it’s been quite late in life, really, I started looking at other traditions.

She goes on to speak about investigating Buddhism and Sufism, and non-traditional practices like energy medicine and Indian notions of Chakra systems.

And later:

Uhm, I think I think what I’m trying to say is that people who feel that they have spiritual experience, I’ll say, rather than religious experience, ‘cause I think that that’s quite different in some ways – the idea is they feel connected to something other than them and that they’re a part of something that’s greater than they are, rather than disconnected and alienated. (p. 8)

This indicates the overlap with searching for a spiritual fit and the theme of belonging, perhaps not with groups of others but with a sense of belonging to the ‘greater than the self’ notion driving that searching.

5.3.5 Ongoing spiritual development

This sub-theme captures participant experiences of a sense of the need to continue finding a source of accurate expression of spiritual self. Over time the lack or impediments to finding spiritual expression led to them taking some practices and beliefs encountered along the way and integrating them into their existing identity. They seemed to be urged onwards to search for a satisfactory spiritual fit. There is a link between this sub-theme and the above three, in the sense that the experiences had an influence on their self perceptions in relation to others, the something greater than the self and the self. Attempts to resolve the difficulties in finding a spiritual fit led to further explorations to find a connection to their source of motivation and guidance in living, as well as providing meaning to life as an attempt to resolve personal and interpersonal dilemmas.

The initial purpose of finding a connection to their spiritual practices or beliefs was to perhaps reflect the purpose of providing a sense of order, purpose and
structure (guidelines) to expressing a true reflection of their personal moral selves, in addition to providing a sense of belonging and value. Geoff talks throughout the interview about early associations of experiences which he called spiritual which helped not only to guide him at that stage of life but added to his definition of the self as a spiritual self. It could be interpreted by the use of the words ‘very interested’ as strong indications of the power of the interest in developing important and developmental aspects of the self in comparing alternating his attention and behaviours with being absorbed with two areas of life governed by passion which shapes the identity.

Geoff:

...when I became a teenager I became very interested in sex. My two obsessions were sex and Buddhism, which I sort of alternated six monthly. So for quite a long time I did a lot of Buddhist meditation. When I was nineteen I had an experience in a Buddhist monastery which was a kind of huge spiritual experience that converted me to Christianity. So through Buddhism I became Christian, which was kind of odd, but that's how it happened.

And later:

To me, spiritual means something that has touched and changed your life. It is something that has dynamised your life, that has done so in a way which is mysterious and therefore I see the Spirit increasingly, as I have grown older as God’s secret agent.

All participants except Anne spoke about how they felt their spiritual beliefs continued to evolve. To do this they gave historical meaning by describing their earlier views of the spiritual with current views suggesting that there is an awareness of this ongoing development. All of the participants were in the mid-life stage. It could be seen that expanding on existing views of the spiritual and of attributing a spiritual meaning to one’s life is a part of the maturational process of living. Melanie offers an example of the developmental importance of ongoing spiritual exploration:

Melanie:
Okay so I suppose at this time in my life in my 50, mid-50’s, the spirituality in my life has become more important than it has been. Although it’s always been there and now I’ve got to the stage where it’s all about love and energy and discerning what kind of love and what kind of energy one wants to live in and invest in and be part of....

Susan talked about relating ongoing spiritual development to her professional life.

Susan:

So I think that my experience of life, my experience of bereavement... I think importantly helped me understand about spirituality, and then I think all these experiences have helped me, in a sense, in my professional world to open up more and more to the idea that people have extraordinary experiences that I may not know, or understand, even, but that I need to appreciate. So a kind of conglomerate, if that is the right word, a kind of amalgamation of experiences and I’m still learning. I don’t think that it is something that you ever achieve or get to a sort of end point with.

5.3.6 Summary

The data appears to indicate that early experiences had an influence in the development of a sense of self, and plays a strong part in the formation of identity. Participants reflected on the challenges in forming an ongoing sense of self or identity, which appeared to be influenced by difficulties in connecting in an organised way with a satisfactory expression of religious or spiritual practice. The data appears to show that early experiences of others perceived functional or dysfunctional relationship with religious or spiritual practices influenced how they formed personal ideas of what practices might suit or reflect personal integrity and values. The spiritual ‘fit’ was chosen based on the participants’ satisfactory spiritual experiences or practices.

Key relationships with others in all of the participant accounts proved to be an important influence upon whether the participants feel comfortable with an existing sense of the spiritual within the self. What emerged as surprising was the importance that the quality of that relationship has on the individual’s feeling at ease with their sense of spiritual identity.
Also, participants seemed to hold strong views on existing religions as either a positive or a negative influence, which may reflect current polarised views of religion in certain secular societies. Husserl (1970: 140) asserted that ‘pieces are independent parts of the whole that are subject to isolability in study, whereas “moments” are non-independent parts, which cannot be detached, presented, or studied apart from the whole’. As such, participants’ experiences of spiritual ‘moments’ are a fundamental part of their whole existence, and are spoken of in a way that is, it seems, attempting to describe the richness of the self within the context of being a part of their environment. The power of the emotion connected to their spiritual beliefs or religious faiths which occurred in the moments spoken of is highlighted in all participant accounts (Newberg, 2010). In short, certain events, experiences and relationships with others in the connections to spiritual beliefs influence, and to some degree shape, how life itself is processed and made sense of.

5.4 Super-ordinate Theme – Life Contexts vs Professional Practice in Relation to Spiritual Beliefs

5.4.1 Introduction
This section of the data analysis describes the process of internal managing and making sense of their chosen and existing spiritual selves. The analysis shows a number of recurrent themes across participant accounts which describe experiences which illustrate specific spiritual values. There is an overall spiritual identity that influences and impacts upon professional identity and practice. The sub-themes below are linked in the sense that they show transitions of beliefs throughout different contexts. The selection from the transcripts illustrates the conflict that is often present between personal life experiences and beliefs, and professional practices, which include training, ways of practising within evidence-based models, variations in work contexts, and the conflict of identity in work integrating cohesively with intrinsic concepts of self in life.

5.4.2 Spiritual belief as support
This theme aimed to capture participant experiences of the ongoing process of self-awareness of the spiritual which illustrate how associated spiritual beliefs
construct a framework of reality within the existing morals and values of the evolving identity. These choices are informed by preferred attitudes and behaviours in line with different contexts in life. Most of the contexts that have emerged are mainly revolving around crises, loss and times of uncertainty, and suggest drawing on spiritual beliefs as a major form of support. Across most participant accounts, self-awareness of the value of the spiritual was recognised once participants had started to recognise that life presents various difficult scenarios to which one must respond to things that are unknown. Choice is a strong construct in each transcript presented. Spiritual beliefs and faith providing structure in times of crises is also a strong theme throughout all participant accounts.

Mary:

God is always present and therefore God is present with my clients. Perhaps that gives me hope... that's slightly the wrong word. I feel I have to trust that God is using me with those people, even if I struggle to see any immediate effect of what I do or impact of what I do. (p. 25)

Melanie talks about a time when prayer offered her support during a time of crises:

Melanie:

Then my mother died and my father was going senile so I had to leave and get another job. I got another job just like that and I stayed with my dad for two years and that was really...a special time because I didn’t know how long it was going to go on for. But it was...I had a prayer life and I was really connected, I felt connected to something that was looking after me and that everything would be alright... (3)

Melanie describes what could be seen as devastating loss during a time when she had been pursuing her own important life goals, when losses which were unexpected and impossible to prepare for caused her to change direction in life. So in a sense, the prayer life could be said to have offered an element of control and connection in life scenarios of great loss and uncertainty. It could also be described as a way of holding on to one’s identity when crises could determine
that by necessity one must re-define oneself as one grows to meet the challenge.

Paradoxically, while Melanie talked about this painful time, her use of the word ‘special’ highlights the significance of the relationship with her father during his illness. It seems also important to highlight the context as a time in life that is uncertain in terms of duration and outcome that contributed to the ‘specialness’ of the connection to what she terms God and the relationship with her father. Melanie’s use of the phrases ‘something was looking after me’ and ‘that everything would be alright’, suggests that beliefs in faith and praying to communicate one’s faith, when it is felt as a knowing, strengthens one’s self-belief and could be said to further shape one’s self-concept.

Anne describes a sustaining experience which is incorporated into an existing construct of the self and reality which can lead to transformation of the self. She spoke about a time of crises during a serious health scare during which she thought that she was being faced with her own mortality:

Anne:

"Another kind of example I guess is when I nearly, when I thought I had a massive stroke and I decided that I didn’t want to be of this world and I kind of just sort of gave up... just.... ‘gave up’ is the wrong word... just kind of surrendered almost, and that was... and had a complete sense of peace. I’ve never had that experience again, and I didn’t want to come out of that. (p. 3)"

Anne’s use of the phrase ‘I decided that I didn’t want to be of this world’ suggests that there is a concept of self which not only exists outside of the body or the reality as she knows it but that there is another reality that could be accessed outside of ‘this world’ that she is ‘alive’ in. Also, the use of the word ‘decided’ refers to having an element of choice in how to face the unknown in that difficult situation. The resulting state of ‘peace’ seems to have been a powerful experience. Anne seemed to have shut down any further investigation of her following phrase, ‘on another level I could...’. This silence, more than anything, suggested that the level of privacy regarding this experience was to be specially guarded. In reflecting on this important area of disclosure, the researcher felt a strong sense of being given non-verbal clues in the body language to move on. The inter-relatedness of interviewing may be highlighted
here, as on reflection, perhaps some self-disclosure on the part of the researcher (Etherington, 2004) may have made further exploration possible. This very much felt like a failure on the researcher’s part on knowing how to encourage further ‘safe’ disclosure.

The data analysis fell within two sub-themes: ‘Evidence-based models’ and ‘Differences in contexts’. Difference in contexts refers to participant accounts of working with evidence-based models required by some organisations providing psychotherapy to the public. It illustrates the struggle participants can have when attempting to work within a specific model with client distress and encountering the unknown in their work settings. The unknown was spoken about to describe difficult times in the client work in either ‘not knowing what to do’ or withstanding the powerful negative emotions of client distress within the session.

5.4.3 Differences in contexts

This theme reflects on participant experiences of personal and professional contexts when one would be conscious of one’s spiritual beliefs. These times often occur during times of loss, frustration, fear or helplessness, and particularly when in periods of uncertainty in one’s of life. This also includes what five of the six participants described as ‘working in the unknown’. The theme of contexts includes: personal life contexts, different professional contexts when working with clients, and the type of model one is expected to work within a given setting. This often illustrates the overlap of evidence-based models and working in the unknown. As such, all of the sub-themes are interrelated. The context determined how the participants described the level of awareness of their spiritual beliefs and the conscious need to draw on them. This is relevant because it implies that the level of experience does not lessen the powerful impact and level of discomfort, or perhaps fear, when therapists find themselves in an emotionally difficult place for themselves or their clients.

_Geoff:_

The therapist can feel out of their depth, can feel challenged, can feel anxious, certainly can feel powerless, ‘what the hell can I do?’ and there’s a lot of pressure
coming from the client on the therapist, as everybody knows. No training can prepare you for the reality.

Geoff’s use of phrases indicating escalating distress serves to underscore how powerful the distressing feelings can be when facing client pain.

Mary speaks about confusion between spiritual self and professional self.

Mary:

When I’m with my client in a way that part of me isn’t in the forefront and probably should be in the forefront because when I’m with my clients I want to be fully there for them. (p. 10)

And later:

Which doesn’t mean that I don’t think my understanding of spirituality isn’t in the room because, you know, I would pray for clients or I would, I suppose, mostly pray for clients and trust that God would perhaps bring a thought to me or a picture or something that might be useful to somebody; and whether you want to say those are spiritual experiences or just how I am as a therapist, I am not sure I can distinguish... Does that make sense?

Mary’s difficulty in expressing her internal process of how she draws on her beliefs in therapy is interesting in that she stressed to the interviewer that she has never spoken about her beliefs to anyone in a professional capacity unless she could focus on the client’s religious or spiritual beliefs. The question ‘does that make sense?’ could indicate not only hesitancy in speaking about these personal practices but becoming aware of determining which aspects of the self are present in her role as therapist.

Sarah talks about how she draws on her spiritual beliefs and practices as a coping strategy while at work or when she is trying to manage the stress she feels from working outside of her spiritual value system when working with evidence-based models, which exclude drawing upon spiritual practices that she uses in other professional contexts. Her practice helps her cope with her view of her status as an outsider. Sarah speaks about the ongoing conflict with her spiritual and professional beliefs in a work setting (NHS) where she later describes feeling rejected and misunderstood by colleagues.
Sarah:

It’s about disengagement from routines, and man-made structures are what I’m disengaging from. Like being in a workplace where there’s a whole load of politics and I can just disengage from that and watch it going on. So it’s like ok... so that’s the game, but reality is something other than the goings on now and just pull back so that there’s no turbulence in that space. It’s completely peaceful..

Susan illustrates another conundrum presented to therapists who have experienced the benefits of the spiritual element of life both privately and professionally, and would like to incorporate this element in their way of working with others, in this case working as a supervisor with trainees. She speaks about how in the context of working with other counselling psychologists the experiential is not spoken about. Susan had learned these techniques when working in a service specialising in working with trauma.

Susan:

So I think it’s a good opening for, and I don’t know why it is not spoken about more. I mean, I have tried mindfulness techniques with... what are they called...skills or guided imagery and listening to your own self with supervisees, and it hasn’t always gone down very well. It does with patients and clients, and I am introducing that more and more into my work.

Susan recalls attempting to introduce mindfulness and visualisation techniques in her work as a supervisor working with two supervisees.

You know, they wanted to learn about their clients and talk about their client issues. It was as though it was something...I experienced it as though...and I felt quite...I felt I hadn’t got it right somehow. A sense that I don’t know a .... failure or shame. It was quite a powerful experience. (p. 8)

It is clear that Susan’s sense of being shamed by the supervisee’s response to her intervention is intense, and presumably resulted in her feeling de-skilled on that occasion.

5.4.4 Evidence-based models and ‘working in the unknown’

This sub-theme was reflected in half of the participant accounts. Participant accounts reveal ambivalence feelings about working with evidence-based
models, and feeling lost when they faced situations with clients that were uncertain and unknown. The participants’ accounts all reflect the earlier themes around drawing on spiritual beliefs as a framework for living. They also all talked about times when working with clients when their knowledge of models was not an adequate tool to aid the therapist or the therapy, and so they turned to their beliefs to help them. All of the counselling psychologists had many years of clinical experience. These unknown times seemed to occur at times of working in unfamiliar contexts, or with intense client pain. This may facilitate the ongoing drive and awareness for self reflection, and highlights areas needing further growth.

Sarah:

...people will often say that ...you know, just being...someone just sitting, not judging, not commenting at that moment, being still and being quiet with it but... and just letting it land in that space between them allows them to step into a different way of experiencing. Uhm, but liminal is not a place where most people want to be, that space in between where there isn’t the known and it’s... anything is possible, and that could be good, bad, neutral and everything else.

Geoff asks, ‘How do you survive people’s very powerful emotions that come out of very real disturbances? The client’s story of betrayal and abuse resulted in her using seduction with the therapist, which was difficult for the therapist to resist. He mentions having to intervene by asking her to do something that was very difficult for him to do. This request, he said, ‘added to her tremendous hatred’, to which he said sometimes as a therapist ‘you have to stick to your guns’.

If you keep in the therapeutic role in the proper sense of role, you are doing your duty, you are not giving way, you are not giving up but you are stepping into the difficult place with someone, not faking it because you don’t care about them enough or rate your safety too much. It’s like going into the dare where there are lots of mines buried and you can inadvertently step on a mine and that could blow up in your face and yet somehow, you proceed.

Earlier in the interview Geoff described an early encounter with the spiritual and the guidance offered when he was 5 years old. He had found himself in a dangerous unknown situation and said that he heard through his terror, a voice
calmly tell him to ‘proceed’. He mentions this way of ‘proceeding through
difficult times in life. He said that this mystical and unnamed ‘help’ was life-long, and he applied it to difficulties encountered in the therapeutic work: not in the way of hearing a voice speak to him, but: ‘No. It wasn’t a voice, but in therapy I used to pray sometimes; in the heat of the moment I would usually pray before and after.’ Praying then may have been a way of regulating his emotional response to the strain of working with this client, rather than, say, for the client, as Gubi (2008) asserts, ‘to underpin the therapeutic process’ (p.104: 35).

Mary talks about her work with the spiritual self with her clients in this way:
Mary:

Well I might do it in the room (pray)…. if you see again…. It’s very hard to separate out because I think that’s because my faith is so much a part of me I am, I’m not really sure what’s faith and what’s a part of me because in a way they are the same. So when I’m with my palliative care clients, I think there are often… there are times when I just might pray you, know… Help this person, Lord, or what can I say… I might send up those ‘emergency prayers’.

5.4.5 Integration of spiritual self and professional self

This sub-theme captures the participant experience of the spiritual concept of self first and how they then align this self to standards expected of them from the profession, and that they expect from themselves as a professional. All participants struggled to express how they conceive of the spiritual self and the professional self. Interestingly, all participants did not offer instances where they had been able to process the presentation of these ‘selves’ within a professional context. This will be further discussed in the section examining Disclosure in a professional capacity. This means that processing these parts of their identity remains internal.

Anne says in describing an experience that she felt was spiritual in a therapeutic relationship:
Anne:

But so even… I don’t even have the hooks because to kind of… because spirituality isn’t looked at, I don’t have the scientific hooks, really, to be able to
explain it, and it does kind of, you know, it doesn’t kind of... a bound..., boundary on then..., religion and so are religious experiences just psychological events that we describe as spiritual? No. I don’t think so because the experience comes before the label.

Anne’s quote illustrates the confusion in trying to understand and express her own internalised understanding of spirituality. This difficulty is compounded by not having adequate scientific language to describe these meaningful beliefs and experiences. Her use of the ‘just’ to question whether the experiences are psychological, indicate that labelling these types of personal experiences ‘psychological’ would be a minimisation of both the meaning and the experience and importantly, her sense of self in a non-pathological way.

Mary talks about how intertwined her personal faith is with her sense of self and her professional self in this way:

Mary:
But I think the first time I was a therapist I was so scared, you know, that I was forever praying and trying to...almost... ‘come on God, I need you to help me’. That sort of anxiety, sort of way, whereas now I’m more able to trust the process, the process by which in this conversation... I don’t just mean between me and the client, but also the process of God and me. That, you know, if there are things that God wants to somehow bring through me to this client, that will happen and I don’t need to force it. But you see, that’s also about trusting the process of therapy, isn’t it? I’m not sure I can split that from my growth and my trust in God helping me...

Anne:
So she would have...so the client would certainly have experienced it as that. But I don’t think it’s been... you know, does a person-centred approach involve looking at the role of spirituality? I’m not aware that it’s integrated in that way. The other thing is I think spirituality is connected with the word ‘miracle’ and, you know, we do heal people, so in a way perhaps its embedded in the work so much that no one even... that it would be arrogant or, you know, the implications of thinking that you did spiritual work or did miracles for people, that would change the domain entirely.
Using the word ‘miracle’ and relating the therapy ‘work’ to a notion of the miraculous and crucially, being able to perform healing seems to denote a powerful belief in the capabilities of not only a ‘power greater than the self’ but in the role of therapist itself. This leads to important questions of how words like ‘healing’, miracles,’ ‘therapy,’ and ‘therapist’ are understood. Some of these words like ‘healing’ and ‘miracles’ are loaded with both positive and negative historical meanings. However, these words strongly express Anne’s sense of identity and are linked to her spiritual beliefs.

5.4.6 Summary
The data indicate that spiritual beliefs offer guidelines of behaviour and also serve to direct one’s attention to areas of safety, and perhaps away from areas of threat. A process of the transition of the spiritual beliefs seems to happen across contexts of life and seems to offer a stable sense of spiritual self which provides fundamental support, meaning and understanding of how to approach life, but the transitions that happen in a professional context are often unacknowledged, difficult or go unprocessed, as there doesn’t appear to be in the participant accounts opportunity or awareness of a need to process this overlap of the spiritual and professional self within the field of counselling psychology, or indeed any conflict that might occur internally or in professional contexts.

5.5 Super-ordinate Theme: Understanding, Learning and Uses of Spiritual Experience

5.5.1 Introduction
This super-ordinate theme reflects the participants describing the process of moving towards a new identity, or a new way of ‘being’ precipitated by their experiences. These changes in some cases led to knowing that a transformation had been made. All sub-themes are interrelated, in that they overlap with experiences that contribute to bringing about changes in conscious states of awareness and learning, and changing of the self.

*Understanding and uses of spiritual experience* refers to the experiential process of maintaining a sense of self, finding a new purpose in life and continuing to
develop an ongoing spiritual identity, through the insight gained from said experiences. For participants, ‘experiential’ referred to becoming aware through the bodily sensations occurring and, through that, transmitted knowledge and changing behaviours in a way that was unfamiliar for them (Gendlin, 1964, 2001). This led to either a gradual or an immediate change in perception of reality (Merleau-Ponty, 1962).

The sub-themes link in the way that they all refer to an ongoing development of self-awareness, and an ability to reflect on previous ways of being and experiencing in the world. There is a sense of complete change and responding to things in a different way than before. This ability to reflect and identify learnings from this has been a gradual process for all participants that continued to develop over time. Importantly, personal experiences through which the participants learned something valuable about qualities or values that they labelled as personal spiritual experiences could be brought about through working with clients. Crucially, the changing agent is the power of the ‘felt’ experience to import knowledge through a shift in awareness or by perceived inspiration.

5.5.2 Changing states of consciousness

This sub-section incorporates descriptions of the research question asking what spirituality and spiritual experience means to counselling psychologists, and how that might impact on the professional work. It refers to an element of spirituality as a belief system which provides experiences that not only supports the individual in healthy ways in times of need that can be located in a plethora of current studies, but the relational stance to this belief system offers a way of accessing and drawing on internal sources of strength by bringing about a different state of consciousness whereby one can be helped. This suggests that this internal ‘calling out’ in times of immediate need to the spirit or God may be a way of gaining control of one’s internal state that is not accessible in other ways. This could be said to be a form of internal self management.

Geoff:

Yet there are times when the practitioner is really up against it and so there are times when you kind of cry out to the Spirit to help you. ....And so the Spirit can
come to help.... Not as a sort of external light, or a kind of revelation, but it comes as a more inward awareness.... It comes as perceived, and sometimes it gives you the help needed as inspiration.

Geoff use of the expression ‘cry out’ suggests a level of distress as a practitioner in working with clients which could be profound. This seemed to shift him to a state of consciousness which allowed him to continue in session. Psychodynamic constructs of counter-transference and transference indicate that powerful feelings are at times experienced by both the therapist and the client during therapy. Later on in his narrative Geoff describes other difficulties he had with practising as a therapist, including questioning whether he was in alignment with his notion of ‘therapist as healer’. He definition of the therapist as ‘ministering’ to those in need, suggesting that he draws heavily on Jungian concepts of universal archetypes in adhering to a self-defined identity.

Susan avoided using her own language, and best expressed her ideas of changing states of consciousness in therapy that occur in the supervision process as a spiritual, bodily experience by handing the researcher a poem to read aloud that she felt best described the process: ‘There is a kind of food not taken through the mouth. Bits of knowing that nourishes love, the body and human personality from the cup of love. Every time you meet someone something is poured in’ (Rumi, 1991)

Susan’s act of giving the book to the researcher and asking for the poem to be read seemed to symbolise the reverence indicated in the words ‘food not taken through the mouth’ that describes the act of intentionally being with, and hearing another person in the sacred form of therapy.. Importantly, ‘every time you meet’ indicates that the connection changes both parties through the process of meeting in love.

Melanie clearly describes the shift in states and the bodily communication of knowledge in the following excerpt:

Melanie:

Anyway I had flu. I was miserable. I was quite depressed. I was quite miserable at the time, I just felt this amazing warmth in my upper body. It wasn’t flu. It
was different. It was like a warm loving presence and I just knew I would survive. I would be okay.

Melanie had found herself in circumstances in terms of work and personal life that she clearly found very distressing. The visual image that she offered of ‘lying there’ ill suggests that she was perhaps feeling helpless and alone in her state of misery, both psychologically and physically. The starkness and power of the spiritual experience is indicated in her description of focusing on ‘having to do the job to get money’ to feeling a ‘loving presence’ with no words describing an awareness of a transitional state; this suggests not merely relief from the misery, but the sudden ‘knowing’ brought about a shift from a state of terrible hopelessness, indicated by her use of the word ‘survive’, to a state of connection and faith that she could and would transcend her difficult circumstances.

All of the participants struggled to describe not only discrete aspects of the process, but what actually happened at all. This suggests that the experiences may override cognitive, intellectual processes, but do somehow involve emotions that are not describable in a reliable representational way. This change in consciousness is often referred to as an awareness of something happening in the body which calls attention to the change in an internal state, involving a sense of knowing which transcends language.

Sarah best encapsulates the difficulty with describing the experience thus:

Sarah:

*I think most... I think powerful things that happened, I’m not entirely sure it’s about what I’m describing in terms of a... a feeling state or an experiencing state.*

Her use of the word ‘powerful’ and the word ‘things’, along with the word ‘happened’, suggests her recognition that something of import was happening outside of a normal state of awareness. Also, her struggle to articulate the power of the experience, and what it actually was, is indicated in the hesitations in her speech, her thoughtful tone of voice, and in her inability to determine whether it was a feeling or an experience. Further, she goes on to describe the sensations in her body when in that state that she is very much present to in this way:

Sarah:
It seems to mean that in that place there’s a steady hum of energy moving through my body. So there is no tension. I’m completely tension free, a very relaxed place to be. It also seems to be... there’s a theme that runs through everything that’s happening......so that’s what’s...uhm, just how much can I push my own limits?

This use of the phrase ‘just how much can I push my own limits?’ illustrates how this state of internal awareness allows for further and more fundamental changes in perceptions of the self.

5.5.3 Connecting with the self, God, nature and others

This sub-theme highlights the participants’ reflections throughout all of the interviews on religious practices or spiritual beliefs as a way of connecting to various aspects of life, including experiencing the self as a part of a universal whole (Rogers, 1961, in Moore and Purton, 2006). This could be said to reflect person-centred concepts of empathic presence as a healing force, or as something that influences the construction of the organism.

The act of being present to the self or to another is described by the participants as witnessing. The act of ‘witnessing’ could be seen to be the agent of change in both practitioner and client. It was used in descriptions of personal spiritual experiences involving the use of rituals and practices, and with equal importance in the role of acting as the witness of the person of the client when in the role of the therapist. The act of witnessing could therefore be seen as a choice that is being made to honour what is being lived out at that time. It seems there is an important theme reoccurring in that being a part of the happening in whatever context that is considered sacred can be considered a healing spiritual connection to a universal whole.

In speaking about engaging in rituals that have helped to irrevocably change her identity Sarah said this:

Sarah:

It felt like making a commitment to.... myself. But also in almost asking for... that... a Druid tradition is an animus to tradition, and so essentially everything has spirit and everything has life and everything has purpose and intention and everything is here for a reason. Uhm... so trees, rocks, birds; everything is sentient in some way. It has, it has so there is a sense of everything being witnessed, that you’re not just making it up. There a sense of these... you are being supported in nature. You know the intention. If you do it with other people
well then again there’s a witnessing, and that’s very important in therapy. There are witnesses and they may be completely silent, but they support.

The use of the Druid tradition’s assumption that everything in life has purpose and is a ‘witness’ to that existence may reflect the meeting of the need to belong spiritually that Sarah spoke about as being ‘missing’ in her early spiritual experience in school. Note that she did not speak of the witnessing by other participants in the ceremony. It seems that in this instance, the place is significant in providing the ‘support’ needed. The theme of connecting as part of a whole is reflected in her naming of ‘trees, rocks, birds’ in speaking about being ‘witnessed’ in nature. The theme continues in her speaking of the therapeutic work with the same reverence. The use of the language ‘that you’re not just making it up’ could indicate that the rituals help to lend the experience a reality that could otherwise be dismissed. The theme of witnessing as sacred is mentioned in reference to the process of therapy. This may indicate that she brings a similar attitude of the sacred to her therapeutic work.

Geoff:

It was part of the world, the rock could speak, the silence could speak, and the wind could speak. So these kind of things put you in a very different place, which I think actually is very important for spiritual experience—to go into a different place—and I had various encounters. Later, I took on board the idea of communion, or community, or relationship, or sharing the Spirit, but in those days it was more... I shared it with my grandmother.

Geoff’s observation of relating to his early environment is important in that he builds on his understanding of the spiritual with those early experiences of being with nature. Interestingly, his deep connection with his grandmother seemed to be reflected in his use of the term ‘shared it’ in a similar way to his deep connection with nature. He then builds on his spiritual relating with ever-increasing ranges of people and community. This may reflect the description of the phenomenology of the hermeneutic circle in action of relating with each encounter of the self, the spiritual, nature and others, and the ever-increasing knowledge gained.

Susan:

I looked at her and she gave me such a strange look. For once she didn’t keep talking, keep talking, keep talking. She looked at me and she said something like ‘wow’. And I said – you know. I didn’t weep. She could see that I had been very
affected and it was an absolute turning point in our relationship because she had never been seen. She had not thought that I would be affected, and it made her think and it changed... everything changed. She, we made a, some kind of a... and do you know that happened? She had been very ill for many, many years and she started to, it was, she started to heal physically, and she said, ‘I just can’t believe this is happening and I think it’s something to do with a human element of it... For me I looked back at her in my speechless moved state, and watched her actually connect with me. We sat kind of in silence for a little while realising something. Now if that isn’t a spiritual moment, I don’t know what is.

Susan’s consistent jumping from ‘I’ to ‘we’ reflects how the happening occurred for both of them, in the intersubjective, co-created realm. Her description of her ‘speechless, moved state’ indicates a level of awe, as a quality that accompanied what she considered to be a spiritual experience came about through the perceived connection. It is suggested that presence, the act of the therapist being fully present with another, can, of itself, bring about an experience that could be transformative in a healing or therapeutic way. Rogers highlighted the importance of ‘witnessing’. He maintained that change comes about for clients not through what is taught, but by how the client learns to symbolise their own ‘unified’ experience through a symbolic-linguistic expression of experience which must be encouraged and witnessed by the therapist (Rogers, 1961: 204).

5.5.4 Phenomena considered to be spiritual

This sub-theme reflects on participant experiences of being changed through the sensory experience of encountering what they considered to be spiritual phenomena. These phenomena seemed to be used in the descriptions to link relationally with the concept of spirit or with another person felt to be significant. Phenomena described as spiritual ranged from individual sightings of symbolic of the spiritual during everyday life, either when alone or with others that contained a certain quality which elevated the moment above what was seen, heard or experienced as a spiritual phenomena. This indicated that the spiritual is expressed individually to each person, occasion or setting, and is unexpected and sacred. As such, these experiences, while unexpected, were considered to be natural rather than pathological. These phenomena then become a part of a spiritual identity; a story of living that imbues the person’s life doing the experiencing with a deeper meaning specific to the self.
Susan:

It sounds kind of mad but it actually is not, it’s meaningful, and it’s purposeful and important and valuable. But when I said signs earlier talking about my father (deceased), it was like it would be a light. It would be in an actual light often coming through clouds. Or it would be signs... well it was a robin at one stage which came to the garden.... (p. 25)

Anne, in working with a client, describes what happened thus:

in my memory it was sort of, you know in December around Christmas time, and I induced a kind of a relaxation with her, where, like a what’s it called when you... guided imagery, guided imagery and she had... when we had finished she had a massive panic attack, and she was shaking and just kind of panicking; and eventually, when she calmed down, she said that during the ... during the guided imagery she actually saw an angel (p. 5).

Anne seemed not to question the notion of ‘angel’, and seemed to regard the seen ‘angel’, and the client’s expressing her resulting positive feelings by saying ‘this is better than any drug’ (10), as a rewarding spiritual experience within the work. This then changed when she tried the technique again with the same client, and the client experienced a powerful feeling of anger associated with the internal images and memories that were raised.

This was Anne’s response to that situation: ‘I was just so shocked and you know.... I was just so surprised that, that was... what emerged out of what seemed to be a very neutral situation.’ (8) She went on to say that: ‘It was like the dark side of spiritual experience’. When asked whether she had been able to speak about the ‘negative’ event with the client, she said that it had not been discussed. She also said that the client didn’t come back for a long time afterwards, suggesting that this experience frightened both of them; but perhaps this led Anne to feel de-skilled, as evidenced in her words, ‘I was just so shocked’, which was emphasised again in mentioning her being ‘so surprised’. Anne acknowledges her own subjectivity of the experience by saying: ‘So, yes. I guess it’s very different for different people. I’m not sure she [the client], would have described that as a spiritual experience. She then said that the client didn’t come back and it was never worked out. This contradiction indicated how difficult it might have been for Anne as a professional to talk about this experience.
5.5.5 Spiritual-experience induced changes in self-concept

This sub-theme aims to encapsulate how participants’ perceptions of spiritual experiences are involved in and incorporated into an evolving identity and in some cases included in becoming aware of a personal meaning in life. The experiences spoken about describe how numinous moments were mainly experienced with a sudden shift in perception. The implicit knowledge gained precipitate changes which are deeply impactful and long-lasting.

Melanie talks about how the experience which she termed spiritual gave her a different sense of self which enabled her to cope with difficult life transitions.

Melanie:

I woke up and there was this amazing light in the room. It wasn’t just morning sunlight... I just felt part of it, and there was a sense that everything was okay and that I was loved, and life was an amazing gift. One had to do what one could for the good and it only lasted a few seconds, I think, but I remember it still. [In speaking of the spiritual experience] It was kind of trans... it was like being filled with light and getting a kind of a window into another kind of level of existence that we don’t tune into... yeah. [Later] I came back and my mother was dying, and I went through her death and my father’s death. Which had been really painful, but now when I look back on it I feel it was a call to growth. (p. 4)

She goes on to recount a theme of challenging times, including the loss of hopes, relationships, and changes in direction in life. The internal knowledge (insight) that was gained from the above-mentioned experience of being elevated to another level of existence, along with the feeling of a loving presence being with her and guiding her, gave her meaning to life which changed her perception of self. The result was an ongoing personal development and incorporation of the experience into her concept of self and the meaning of her life.

Susan’s gave an account of her ongoing communication with her deceased father to be typified by seeing visual symbols like the feather spoken about in the subsection phenomena considered spiritual. She also saw visions of her father in fleeting moments. She was meaningfully changed by what she says that she learned about attachment and loss in relationships. This might be viewed as an
internal reconstruction of how to relate to the self and others which she draws on when dealing with a client’s issues of attachment and loss.

Susan:

But these were very important to me at the time and so I always knew that this was part of the kind of close learning experience that I was continuing with him and needed to. (p. 25) But it was very helpful and very wonderful and I learnt a lot, and I think it helped me understand about attachment and loss, yeah....

Susan also spoke about the therapist as the spiritual experience itself. She spoke about considering her own ‘spiritual sense of her therapist’ being with her and referred to the ‘feeling of what it is like to be with her therapist’ as the spiritual event.

Geoff referred to spiritual experience in the counselling room by understanding it as ‘getting into a different zone’ and being able to ‘combine opposites’ in a way that he is not able to do without that state of consciousness:

Geoff:

It’s slightly hard for me in counselling situations, but what those three have in common in my experience is that when you are aware of a spiritual presence and influence, it completely changes you. You do a bit of channelling in a way, you get into the zone, you cease to be self-conscious, you combine opposites in a way which are hard in everyday life quite easily like being cautious in the right way, but being bold at the same time in the right way, and I think that is felt by the people you work with. Spirituality transcends the intellectual. It transcends the emotional.

5.5.6 Summary

A prevailing theme throughout all of the sub-themes investigated above seems to suggest that understanding the spiritual experience involved a process of meaning-making about a concept of self during a particular stage of life or making sense of the meaning of life as an existential existence. The understanding is then incorporated into the existing identity and drawn on as a both implicit and an explicit learning. This suggests that identity is then changed, and could be the process of ongoing development of the person’s spiritual identity. As all participants said that their spiritual beliefs are based on experiences that contain emotions but transcend identifiable emotions. The concept of the spiritual encompasses every area of life and one could say that the fundamental identity is shaped by what the participants call spiritual events.
The data appears to indicate that lasting changes in the self-concept are made by these and other such experiences.

5.6 Disclosure: Issues in Practitioners’ Professional Capacity

The sub-theme attempts to highlight some of the obstacles to disclosure of spiritual beliefs and experiences within a (but not solely within a) professional context. Dueck and Reimer (2009) discuss the taboo of speaking about personal religious or spiritual beliefs in public. These writers discuss what they consider to be a currently polarised view of whether beliefs should be spoken about in public, stating that ‘in a multicultural society differences are accepted; until the moment the sacred values of a particular ethnic or religious community become public (to those who disagree with them) the toleration ends’ (p. 62). All of the participants talked about how their own spirituality is a part of everything that they do. This may best be expressed by Melanie who says:

Yeah, I want to bring it into every aspect of my life. Like what movies I watch, what people I hang out with, how I talk because you’ve got to embed it. It can’t be just in a part of your life that you do on Sunday. (p. 16).

This ‘I want to bring it into every aspect of life’ indicates a sense that all of the participants revealed, in that they want to but do not discuss this aspect of the self in a professional capacity. It is important to note that in the excerpts below some of the participants mention their own negative beliefs concerning others’ beliefs and practices. Another issue became apparent which makes disclosure difficult. It involves the difficulty in finding a common non-pejorative language to convey a close representative of the experience or belief.

5.6.1 Trust vs Fear of Judgement

The following quotes illustrate the variations of participant’s view’s on their need to have either trust (in other’s responses) when disclosing this ‘private’ aspect of their internal belief system or their fear of being judged by others if these beliefs are revealed. An internal dissonance arises when deciding whether or not to disclose. This is because participant’s face the dilemma of navigating the intersect between their own beliefs and their possible judgements about how others might view them should their beliefs come to light. Or they face what is perhaps more difficult, i.e. facing the judgements they may have about others
‘unacceptable’ belief systems. Additionally, they all cite the prejudice they feel in living and working within a secular society as a pressure to keep silent.

Melanie:

It just hasn’t come up. No. I mean, there are psychologists who are Christians. No. I haven’t. No, and I feel that maybe now that I’m back into it and getting more into it I should, but often some of these Christians can come across as kind of milk and water and, you think, God they couldn’t be bad... they’re almost impotent; and I’m more interested in people who are very potent – that could be bad, but choose to be really good. About myself... because it’s a very private area.

Melanie’s firm ‘no’ in saying she hasn’t yet spoken about it in a work context highlight the boundary that she has set to continue to keep this area of her life ‘private’. Her ‘milk and water’ description of how she perceives some other Christians may point to some difficult unresolved feelings remaining from her earlier past. As reflected in her sense they some Christians ‘are almost impotent’ resonant of how she spoke about her early life experience. This conflict shows itself when she says that it is a belief system that guides her behaviour and life is built upon and then contradicts herself when she says that she cannot speak about it in work or otherwise not only because it’s private but says this:

Because yeah...one... it’s counter-cultural in this secular culture. It’s kind of almost the truth that they dare not speak its name and the language for it is often... I mean, fundamentalist language is very off-putting. I have friends who talk in ways that really upset me because it’s so excluding, categorising, conditional in its prescriptive ways of constructing the love of God, basically, and I think it’s far more mysterious than that.

The fear of judgement and its connection to the type of work context continues as a theme with Sarah who illustrates the decision making process of whether or not to disclose in the following way:

Sarah:

Uhm, depends on the setting, really. There have been settings where I know the clinical supervisors are interested in these things or are very broad minded and have also got curiosity; so it would be looked at there and it might be brought in, especially if I’m working with a client with a particular spiritual practice or belief system.

And later:

In this current setting it’s about psychodynamic or it’s CBT, and there’s been a lot of confusion with regard to the use of methods.... I’ve been practising for 15 years or so and done masses of work on myself.... And as you know I’ve already got my
head above the parapet. I need to get the rest of me out there as well. It doesn’t feel particularly safe.

Sarah illustrates the difficulty of integrating complex personal growth that has happened over time with her initial learning and understanding of how to use different therapeutic models. Further to this, Susan’s view most concretely highlights what the participant’s all said was a lack of available ‘acceptable’ (to the self and others) language to make open exploration a ‘safe’ experience is apparent when she says:

Susan:

Well I think it is a subject that it is hard to put language to that is ....why .....Maybe this, we touched on this in the teaching. The language almost contains... or traps it in a way that doesn’t allow for the openness of it all.

Sarah highlights the powerful consequences of feeling unaccepted and judged in a work environment because of talking about her belief in what are considered to be conventional spiritual views and practices when she says:

Sarah:

With practitioners who are interested in esoteric subjects it’s very easy to have these kind of conversations. In the current work setting... I certainly would not, would not talk about it. That hasn’t been very welcoming here anyway.

Alternatively, Susan who felt that she had trust in her supervisor to discuss spiritual issues said of her experiences:

Susan:

Good, very good. Both as a supervisee and as a supervisor, how can I say? I think there is a kind of, there is a strong felt sense of the client and of the relationship of all the people involved in the room.

However, conversely, Susan says in speaking about her father: ‘It is a bit difficult to talk about because it always sounds like... off the wall.’ Use of the expression ‘off the wall’ suggests a fear of being judged by others, including the researcher, in discussing these private beliefs and interpretations of her experiences. Importantly, she said that she learned about themes of loss and
attachment through this experience which she draws on in her work with clients. However, how she does this was not specified.

Earlier in the interview she shared the following experience when introducing mindfulness techniques that she had learned when working in a trauma centre to help therapists cope with the intensity of the effect of vicarious trauma on the therapist:

> It was just this one set of, one set of supervisees who said, I got some feedback and they just said it was just a bit boring. It just wasn’t, really something a supervisor should do.

This feeling of being judged by her supervisee’s was powerful in the interview as everything about her affect changed when she spoke about it including her tone of voice and body language. She also moved away from this experience very quickly to speak about another (perhaps less painful?) aspect of talking about spiritual beliefs and experiences. All of the above quotes discuss the participants either trying to avoid or contain feelings of shame or exclusion if these beliefs and experiences are not met with openness and acceptance. This may lead the participants to have unacknowledged and unclear implications for how they manage their work with clients as indeed it had for Susan’s supervisee’s.

### 5.6.2 Confusion (limitations) in training

Training of how to work with spiritual issues was not a focus in this study. However, all of the participants briefly mentioned it in terms of its inability to prepare the practitioner to incorporate a ‘language’ appropriate to allow an adequate way to approach these issues with others in a professional context or to integrate these issues with existing taught models. Susan describes it this way:

Susan:

> They’re not categories [spiritual experiences in professional and private] to put into different files. They are all linked in my mind as I talk to you. So they are, I think maybe that is why it is difficult to teach.

> if you see psychology as an art as well as a science it can be incorporated, but I think it’s quite difficult to.
Limitations in ongoing professional development for those who have not been exposed to encountering spiritual concepts of the self and exploring others are also illustrated by Anne.

Anne:

There wasn't an integration, and these things were never looked at. Just given a rationale, not really....

5.6.3 Issues of power in the therapeutic context

Issues of power inevitably surface in the therapeutic relationship (e.g. Totton, 2006), and when describing working with clients, all participants were clear in their efforts to be aware not to impose their own spiritual beliefs by speaking about them to the client, except where they thought it appropriate.

Sarah:

I think it’s mainly about not imposing. Something to do with yielding, so again it’s respecting people’s edges...

Mary:

I think some therapists might shut that conversation down... I guess I would actively encourage them to reflect on anything that had spiritual significance to them because it means a lot to me.

Alternatively:

Melanie:

If they come in ...distress... I say .... do you have a belief in a God or anything, and if they say ‘yes’, then I would say, ‘me too’, and I find it really helps, and this is how you might draw on it to help you.

These views highlight the importance for the participant’s working in a way that is congruent to their highly valuing of the spiritual in their personal lives. They seem to draw on their own personal experience in their judgement of how to work ethically with spiritual issues as they arise with clients.

5.6.4 Boundaries

This sub-section refers to the boundaries that some of the participant’s mentioned as important guidelines to what would make exploring spiritual issues
possible and helpful. Importantly, the boundaries required seemed to need to be around confidentiality and openness to spiritual/religious cultural difference.

Mary:

I think with my supervisors I would feel able to take issues like that. I never have. Well actually, I did who used his religion as a defence. I might be more cautious with a work colleague because, I suppose, of confidentiality, partly because I wouldn’t be sure what they would do with that information. The supervisory relationship is very clear – why you are there and what the supervisor is there for, isn’t it?

Supervision has to be a very trusting relationship, and I have to be able to say, ‘I really messed up here’, or I... Also, I would be worried about what they might think of me.

And later still:

About colleagues, ‘safe’ would mean that it doesn’t leak out to anybody else. Also, yes, I would be treated.... I wouldn’t be judged or... it would come back to haunt me or used against me in some way.

Mary’s words echoed all of the participant’s use of the word ‘safe’. The participant’s referencing of the word ‘safe’ points to the huge level of personal risk that is involved in a therapist openly exploring their own spiritual beliefs. The fear of being judged or hurt in some way is ever present and powerful.

5.7 Summary

Disclosing spiritual beliefs and spiritual experiences involves overcoming obstacles to a natural tendency to protect one’s sense of self. The obstacles revealed by participant accounts include judgment by colleagues, injuring the client, damage to the professional reputation and fear of reprisal, and language that is inadequate to convey the power or significance of the spiritual. Some of the most painful feelings experienced and spoken about were shame, fear of being misunderstood and failure. Other feelings which seemed difficult to expose to others could be seen to be deemed precious, like awe, wonder and love. In this sub-section therapists revealed that trust was necessary in allowing these experiences and beliefs, and managing the feelings inherent in such to be explored. All except Mary and Susan said that they hadn’t spoken about these things in a professional capacity to anyone, including a supervisor, either
because it is too private an area or any attempts to open up a discussion were not encouraged.

The participants indicated that training was both confusing and insufficient to prepare them to address these issues in a professional capacity. This made speaking about and clarifying personal concepts of the spiritual very difficult. With these participants, a strategy of avoidance is employed to cope with these personal issues when they arise.

**5.7.1 Reflexivity Box. 2**

<table>
<thead>
<tr>
<th>Reflexivity</th>
</tr>
</thead>
<tbody>
<tr>
<td>In terms of the epistemological perspective of this research there is no one certain reality to be discovered through a prescribed methodology and ‘objectivity’ as a research aspiration is replaced with the notion that theories or understandings can be changed and developed through ‘encounters with observations’ (Stiles, 1993: 602). In quantum physics, the observer’s observing itself changes the observed phenomena (Kavar, 2012: 6), and clinicians are left to define the spiritual structure according to their experience. As this area of my life had also not been openly explored in a professional capacity, it is safe to say that the researcher ‘saw’ (at least in part) what had been as yet unrealised in her own experience throughout the analysis.</td>
</tr>
</tbody>
</table>

According to Smith et al. (2009), ‘research interviews must be viewed as interactions, and as partial in their scope’ (p. 66). Smith et al. (ibid.) also maintain that ‘disclosure from the interviewer needs to be handled carefully’ for ethical reasons, but here additionally, the aim is to enter into the participant’s life-world. This is a double-edged sword in that ‘such dynamics can facilitate a sense of rapport and the comparative dynamics can facilitate more detailed personal disclosure of shared experience or can set up competitive, or comparative, dynamics and even lead to a kind of response bias, i.e. being a “good diabetic”’ (p. 66). I struggled with how much of my own spiritual experience to disclose in order to facilitate further participant disclosure of working with clients. But because of the above-mentioned dilemma, I did not self-disclose. Looking at my inner conflict raised counter-transferential
questions about how it might feel for the participant to be listening to their clients spiritual beliefs and experiences and feeling helpless to encourage exploration without helpful knowledge to do so.

I found it more emotionally challenging than expected to conduct these interviews in the role of ‘co-constructor’ (Findlay, 2006). This may have been because as Dueck and Reimer (2009) assert, my own and the participant’s reticence of speaking about personal religious or spiritual beliefs in public is difficult to penetrate.
Chapter 6

6. Discussion

6.1 Research Aims

The purpose of this study was to explore the lived experience of what counselling psychologists consider to be spiritual attitudes and beliefs, which included uncovering any possible attendant professional implications. Analysing the data revealed four main themes: development of spiritual identity; spiritual beliefs within personal life contexts vs spiritual beliefs and professional practice; understanding, learning and uses of spiritual experience; and finally, disclosure in professional capacity. These categories were derived to encapsulate how counselling psychologists explain and experience spirituality.

The themes highlight spiritual beliefs that are complex and intrinsic to the participant’s identity. As such, they inform all aspects of their lives, including how they approach their work with clients. Critically, the findings indicate that these beliefs are based on deeply personal experiences which are often not spoken about. This lack of open exploration can create an internal dissonance with regard to navigating their professional environments, from the process of training through to working with clients, including discussions within the context of supervision. These findings will be discussed in detail below.

6.2 Development of Spiritual Identity

The results located within this master theme demonstrate what the participants spoke of as subtle and powerful spiritual or religious influences in their youth which were remembered as having built a foundation for ongoing spiritual growth. These events were also linked to the development of their core values and sense of identity. Some of the participants’ accounts reflect experiences of having developed a stable spiritual identity in relation to their early family experience, thereby being inclusive and belonging within the family identity system, whereas other participant accounts reflect earlier spiritual experiences as being distinctly separate from family and societal systems.

Melanie, Geoff and Sarah all spoke about having had disappointing early religious influences. Melanie used words like ‘judgemental and frightening’ (p. 122) to illustrate how God was portrayed to her. Geoff used words like
‘superficial, mad, and nasty’ to describe his early experience of organised religion. In contrast, Mary, Susan and Anne made positive religious references. Interestingly, Anne said she remembered seeing angels as a child, and ‘being made aware of…. something subjective and special’ (p. 122). Such experiences served to act as a springboard for other significant interpretations of events which are deemed to be spiritual.

This is in line with Van Dierendonck and Mohan (2006, cited in Gold, 2010), who assert that spiritual experiences and practices are significant in life, and ‘play an important part in establishing an integrated personality’ (p. 82). Sarah epitomised this when she said her early familial exposure to religion had led her to feel ‘torn’ or as if she were in a ‘war zone’ (p. 123), because there were conflicts surrounding spiritual and religious issues. Sarah spoke throughout her interview of exploring both ancient and New Age traditions as a needed and exciting psychological and emotional mainstay in her life. Throughout this research, the counselling psychologists referred to their sense and meaning of the spiritual in both their professional practice and their private lives, as seeming to closely resemble West’s (2004) explanation of Elkins et al.’s (1988: 10) definition of spirituality from a humanistic-phenomenological viewpoint. West described it thus: ‘They are talking about a way of being and experiencing, not a creed to be believed in but a life to be led’ (p. 4).

As such, the development of spiritual beliefs helped to provide a framework for living and a way of ‘being and experiencing’ to meet basic human needs. A powerful theme running through the findings was the connection between spiritual/religious beliefs and how well, or not well, the need to belong was and is met. An example of this was Sarah, who said that she had formed a sense of religions being ‘closed’ (p. 78) because she did not feel a part of her predominantly Jewish school assemblies. In addition, those participants who expressed dissatisfaction with earlier examples of religious or spiritual practices indicated that this early experience had been a loss of some kind, which set them on a search for an adequate spiritual expression of the self. An example of this is Melanie’s reference to the religious people in the community where she was raised, where ‘they lived quite passive lives’ (p. 82). She said that her reaction to that passivity was to decide to be proactive, not only with religious and spiritual beliefs but in how she lives her life currently.
What seemed particularly surprising was how prevalent it was for all of those interviewed to report that early experiences connected to their personal spirituality/religious beliefs and shaped a desire to either find an appropriate spiritual ‘fit’ of beliefs (as mentioned above) or to continue with their given religion. For those respondents looking to find this ‘fit’, and concurrent with the Graetz-Simmonds (2004) study discussed in the literature review, all except one of the respondents in the current study had a variety of beliefs in ‘a non-anthropomorphic, non image bound concept of God regardless of the faith that they practiced’ (p. 953). To counter the difficulty of historical connotations of the word ‘God’, these respondents used variations of the word ‘Spirit’ and ‘spirituality’ to convey what they believed to be a ‘dimension bigger’ than the self. Importantly, and in accord with Graetz-Simmonds (2004), ‘searching’ and ‘journey’ metaphors were used to describe a life-long process or ‘quest’ (p. 957) to reach a spiritual self-actualisation. These respondents all confirmed the importance of retaining an open-minded attitude to invite in spiritual experiences in all contexts, i.e. work, relationships, nature or music. Also consistent with Graetz-Simmonds (2004), existential issues like mortality and death of a loved one reawakened an interest in spiritual matters, regardless of age, and Melanie linked her interest in the spiritual to her approaching the mid-life stage. In contrast to these respondents’ accounts, Mary, whose familial religious experience yielded a profound source of strength in terms of identity, trust in the world and trust in the self, continued to be actively involved in the church of her earlier faith.

The participants aimed to draw on these early ineffable experiences to access the spiritual attitudes of acceptance and love that are in line with Rogers (1961) core conditions when they are with their clients. Additionally, Mary, Susan, Sarah and Geoff surprisingly used the term ‘attachment’ (Ainsworth and Bowlby, 1965) as a metaphor to closely describe how these qualities were learned from the bond they had formed with significant family members, rather than as a psychological concept. This reference by more than half the participant’s suggested that they may only have had psychological language to describe what they called these spiritual experiences. Susan related her ability to be with her clients to be a direct result of her close relationship with her mother, and described it as a gift. She said: ‘some people are perhaps more gifted than
Other significant research that was recently conducted also links counselling psychologists’ drawing upon personal experience (of attachment style) in their work with clients. Rizq and Target (2010) investigated the intersection of counselling psychologist’s attachment styles and reflective functioning abilities with various ways that they may draw on their experiences or learning from their own personal therapy in clinical work. Their results indicate that participants with so-called ‘secure’ attachment, or earned secure attachment styles and at least ordinary levels of reflective functioning managed their feelings with difficult or challenging clients by drawing on their personal experiences with therapy. As already established, the participants in the present research considered it important to draw upon their internalised personal experience and understanding of spirituality in the absence of theoretical knowledge. Importantly, some of the early attitudes towards religion and faith, whether positive or negative, seemed to be enduring, and continue to influence how religion or spiritual beliefs are perceived.

6.3 Spiritual Beliefs within Personal and Professional Contexts

This results section highlights how spiritual issues are perceived to be occurring in all aspects of the participants’ lives including the therapeutic practice. Consistent with Walker et al (2004) it is suggested by the researcher that in the absence of open discussion in their professional environments, along with the lack of research into useful therapist’s religious and spiritual interventions, they find their own ways to include it. Critically, in opposition to the Walker et al study, this research suggests that the participants draw upon their own personal experiences within work contexts when confronted with spiritual issues in therapy.

The professional contexts where the participants worked included NHS settings, private practice and other clinical locations. This master theme suggests that there is a tension between the relational ethos of Counselling Psychology with its focus on the unique individual along with the participants’ perception, understanding and experience of spirituality, and the professional demands of their work contexts. In line with other researchers discussed in the literature
review, the participants said that their values and morals underpin their professional practice with clients.

The participants spoke about drawing on their personal spiritual learning for support in therapeutic settings. For example, Melanie, Anne, Susan and Mary spoke of times in their personal lives when they were suffering periods of loss or self-doubt, and learned that prayer helped them to persevere. Melanie’s personal philosophy of ‘living an active life’ is practised in her example of how she approaches spirituality with her clients.

The results also indicate that different types of work contexts strongly influenced the level of tolerance the participants experienced of using and exploring techniques which might involve the transpersonal notion of the ‘subtle body’ (Schwartz-Salant, 1986; Wilbur, 1979a). Susan said she had once worked in a trauma service where treatment practices included guided imagery, relaxation and mindfulness exercises done in conjunction with CBT. There, she felt comfortable, openly drawing on her spiritual beliefs. However, she experienced a less than supportive work context when trying to incorporate this element in her role as supervisor with trainees. Susan described her trainees as being ‘bored’ and just wanting to ‘talk about their clients’.

The personal and professional impact of their beliefs ranged from seeing themselves as ‘healers doing the work of healers’ in an archetypal role as healer, to managing distressing or difficult emotional processes of the client where they may have felt at a loss with theoretical perspectives learned in training. Sarah, Geoff and Susan all mention times in their therapy work with clients ‘that one enters an unknown’ area that cannot be identified by any of the taught models. As a counselling psychologist Sarah was particularly drawn to using the psychodynamic model, and indicated that a specific type of person would not only tolerate but enjoy sitting in the ‘liminal spaces’, with a client watching out for and awaiting the unknown to emerge rather than drawing on ‘techniques’ to bring about change.

The participants’ desire to act in accordance with their ‘calling’ as healers could be akin to the Jungian concepts of the individuation of unconscious content.
Jung’s (1966) theory of archetypes, which was based on Buddhist and Hindu notions of karma, posited that archetypes are the content of the collective unconscious (in Zhu, 2009). Furthermore, going through this process leads to the realisation of the self (Zhu, 2009). However, there are criticisms that Jung’s equating of the Western ‘unconscious’ with states of higher consciousness in Eastern meditation practices was misplaced (Zhu, 2009).

Conversely, the present research has indicated that the participants have beliefs that are central to their worldview. This could be linked to Anne, Geoff, Susan and Sarah all using expressions like ‘calling’, or possessing a true ‘therapist identity’. Anne sees herself as a healer, and linked the therapeutic profession to a historical one on a par with ancient types of healers who use their pain as a route to understanding others pain (Kalweit, 2000, Merchant, 2011). Both Geoff and Anne used the name ‘Shaman’, which suggested that for these participants, the role of therapist is intrinsically linked to their spirituality. Geoff cited his inability to believe that he is a natural healer as being one of the reasons he gave up practising as a therapist.

The counselling psychologists’ spiritual beliefs proved to be a major source of mental health and resilience, as other studies of clients’ religious/spiritual beliefs have also shown (e.g. Kavar, 2012; Sperry, 2010, George et al., 2000, and so on). Geoff, Mary and Anne spoke of times in their role as therapist when they felt, in Geoff’s word, ‘powerless’ in the face of client distress, and used prayer to help them. Geoff used the words ‘cry out’ (p. 99) to indicate the level of fear and desperation he felt sitting with a client’s hatred directed towards him. Critically, it is suggested that this ‘crying out prayer’ was not born of compassion for the client (though it may have been present), but to cope with their own fear of the client’s intense emotional pain. Here, the purpose of the prayer may have been to preserve an integrated sense of professional self in order to cope with emotional intensity, and learn from it for other difficult times. Further to this, as outlined in the literature review, Gubi’s (2002) study with mainstream counsellors indicated that nearly 60 per cent of those interviewed had used prayer covertly with their clients. Significantly, less than half of those spoke about it in their supervision, for fear of being judged.
As mentioned in the literature review, the directives from some professional mental health bodies advocate raising awareness of spirituality in counselling settings. There is a wealth of recent research (discussed in the literature review) that has highlighted the importance of helpful spiritual/religious beliefs in assisting people to cope with difficulties in life. However, the current research reveals that counselling psychologists who responded reported that when working in GPs’ surgeries, or in other NHS organisations, they did not encounter any material addressing spiritual issues. Interestingly, Sarah, who uses her meditation and mindfulness practice as a support in surviving her workplace ‘politics’, is the only participant who criticised the absence of spiritual tools, such as questions on assessment forms to assess for client spiritual beliefs, as a source of support in the NHS setting where she worked. Spirituality did not come up in assessment questions, unless a patient mentioned it in relation to suffering. So while the professionals draw on these values, the processing of this remains largely internal.

6.4 Understanding, Learning and Uses of Spiritual Experience

The results suggest that spiritual experiences are understood to be meaningful events which lead to change in the participant’s level of conscious awareness. The participants seemed to highly value these events, and attributed deep internal changes in both their personal and professional lives to them. These experiences involved ‘felt’ experiences in the body, which are then learned from. For example, Susan spoke of an ongoing internal communication that she had with her father after he died. She had ‘fleeting’ moments of meeting, either by seeing a vision of him, or seeing a symbol such as a ‘feather’ that represented some kind of communication from him. She said that this loving connection taught her about ‘attachment and loss’, which she ‘uses’ in her work with her clients. Another example of a powerful ineffable learning experience is illustrated by Melanie, who spoke of experiencing a ‘light’ followed by a sense of ‘knowing that everything would be all right’ when she was in a very ‘dark’ emotional place.

These changes in the conscious awareness involved in such experiences are in line with Sperry (2010: 48), who defined consciousness as ‘an awareness of one’s existence, sensations, thoughts, and feelings’. Furthermore, he said that
from a post-materialist perspective, consciousness also includes having an attunement with, and receptivity to, the broader universe, suggesting, as the participants did, that it is the act of connecting to Self, Other, Nature and ‘God’ that provides the meaningful experience. All of these experiences involve a powerful internal awareness which McLean and Thorne (2003, in Gold, 2010) argue can yield insights that can be incorporated into, and change, identity.

Throughout the interview process, it became evident that regardless of actual religious or spiritual beliefs, there was an attitude that there is another source of intervention possible within therapy. Anne and Geoff actively used prayer to seek guidance with their clients. Geoff spoke throughout his interview of Spirit as a third entity which enters the therapeutic relationship and changes the therapist’s state of consciousness. He used words like: ‘perceived’, ‘help’ and ‘needed inspiration’ during difficult times in therapy. Although in the previous section Geoff, Anne and Melanie said that prayer was used at a frightening time in therapy, it was also often spoken of as a type of communication between the self and something greater. Prayer, in line with the Gubi (2007) studies, was used by the therapists as a way of communicating with this other source for guidance. This source of support and guidance was to be found located in the self, and located in the existence of a ‘Higher Being’. Anne spoke of times when she was extremely concerned for her clients in palliative care; she would ‘pray for guidance’, and felt she would somehow be able to intuit a way forward. Similarly, Geoff used the word ‘revelation’ to describe the knowledge that would ‘come as a more inward awareness’ as a result of asking for guidance.

Moreover, the relationship as a basic principle of Counselling Psychology (Strawbridge et al., 1998) was spoken about as the main vehicle of spiritual experience. The relationship in the therapeutic dyad was guided and informed by their personal value system shaped by Christian values; for example, Sarah said, ‘treat others as you would want to be treated’. For these participants, spirituality is practised with their clients as an attitudinal stance (Argyle, 2002) with the cognitive, behavioural and emotional qualities as referred to in the literature review. This is reflected not only in their concern for their clients, but seems to be in line with the emphasis that counselling psychologists place on the importance of the quality of the therapeutic relationship with each unique individual, rather than any specific theoretical approach (Clarkson, 1991a).
As West suggests (cited in Moore & Campbell, 2006) it is vital that in order for therapists – in this case, counselling psychologists – to best meet the needs of the client or the person of the client as is stated in the remit of counselling psychologists, they explore their own counter-transferential issues with regard to spiritual and religious issues. While this study yielded limited actual therapeutic instances of spiritual experience within the therapeutic context, some spoke of explicit spiritual experiences occurring in sessions, as indicated by Susan, Anne, and Sarah.

Anne spoke about what she termed to be both a ‘miraculous’ experience and ‘negative’ spiritual incident with the same client. In the first instance, she conducted a guided imagery exercise, and the client said that she saw an angel, and became very moved and said ‘it was like a drug’. Anne used expressions like ‘power’ and ‘felt changed’ when speaking of this session. Importantly, her experience was never able to be processed or learned from, as the response from the supervisor when she attempted to talk about it was an unhelpful ‘these things happen’. Anne herself was excited and moved. This was in line with the Graetz-Simmonds’ (2004) study, which found that participants had many types of spiritual experience that were often described as containing feelings such as awe and reverence. When the client came to another session very distressed, Anne used this technique again, this time with a different outcome. The client became very distressed. Ann used words like this – ‘neutral situation’ and then ‘dark’ to describe the resulting spiritual experience. She said she was ‘shocked’ at the client’s distress to her visualisation, but did not elaborate further on how she handled the session. However, she did say that the client never returned. She also said that after the supervisor’s previous response she avoided bringing these types of issues to supervision again, thereby blocking possible sources of learning and growth. Critically, both experiences were intense and were unexpected.

Furthermore in these results, the participant’s spoke of the therapeutic process itself as a spiritual experience. There were several different expressions of the nature and qualities of the spiritual occurring within sessions. Empathy seemed to be the vehicle through which these experiences would most commonly occur. The Morrison and Borgen (2010) qualitative study, referred to in the literature review, which explored how Christian spiritual and religious beliefs affect
counsellor empathy towards their clients, found that there were 14 helping and three hindering categories within their therapeutic work. The quality of the empathy provided in therapeutic sessions seems to relate to Blackstone’s (2006) study into non-duality and subjective experience. Blackstone’s study claims that deep empathy and presence draws on non-dual consciousness and can enable the therapeutic relationship to facilitate change. Rogers maintained that change comes about for clients not through what is taught, but by how the client learns to symbolise their own ‘unified’ experience through a symbolic-linguistic expression of experience which must be encouraged and witnessed by the therapist (Rogers, 1961: 204). Susan spoke of a session where she connected with her client and witnessed change coming about in the client while in a ‘speechless’ state, as she herself was changed. She used the word ‘wow’ to observe the internal recognition of something momentous happening.

Susan described these moments in the therapeutic work by offering the words of a poem – ‘bits of knowing that nourishes love’. These spiritual moments would occur as a felt sense in the body. Sarah used ‘witnessing’ as a metaphor to describe her ‘intention’ to be fully present in sessions. She drew on her experience of being witnessed by nature from her time practising Druid rituals, to apply being a ‘witness’ to the clients struggle. While Geoff did not offer a specific example of this in his work, he described the state of consciousness as ‘getting into the zone’ and doing ‘a bit of channelling’, and said, ‘you combine opposites in a way which are hard in everyday life quite easily, like being cautious in the right way but being bold at the same time in the right way’ – enabling the therapist to trust the use of themselves as an intervention.

A further example of this would be Sarah saying that she experiences a humming in the body where there is no tension and it is difficult to describe whether it is a feeling or an experiencing state. These experiences could be akin to Rowan’s (2005) understanding of Maslow’s peak experiences (Maslow, 1968). Rowan posits that we mostly spend our lives without being completely involved in them. When we completely attend to and involve ourselves in experience we can bring about a sense of awe or excitement in life. Suggesting that we fully ‘attend’ in therapy, a state of consciousness is reached by the therapist that itself impacts on the therapeutic process.
These experiences imparted another kind of knowledge of both reality and the self. Implying, as Husserl proposed, that the question of our separateness from reality is not bracketed out and brings up the question of what does one think about things in general (Bohm, 1980), as opposed to how things really are, when we are not actively thinking or intellectually processing our experience. This implies that this new happening of reality comes first, and the experience is then thought about and intellectually processed.

In line with this, Sperry (2010) argued that for true change to last and for people to handle distress and adversity, there must be an incorporation of self-conscious awareness, self acceptance, and an attunement to the broader universe. Anne said, ‘God is using me with those people’, even though she often ‘struggled’ to see any effect in her palliative care work – suggesting that in accordance with this view, the participants of this study were able to restore a sense of well-being by re-confirming the spiritual purpose of their chosen profession by using their beliefs to provide meaning for professional situations that offer no immediate reward.

The importance of the body in learning from experience is evidenced by Kavar (2012), who wrote about the embodied nature of human experience, and said that our ‘thoughts, actions, aspirations, and affections are experienced through our bodies’ (p. 19). The training of working with others in distress and theoretical constructs were felt throughout not to have prepared these counselling psychologists for what it is like to sit with and withstand immense human psychological suffering. Geoff said, ‘you get into tricky, twisted, confusing and of course very pained areas’ (with clients).

As such, it could be said that they were able to tolerate this distress by putting their focus on their professional growth and by their conceptualisation of the self acting within the role of the archetypal ‘healer’. Geoff was the only participant who gave up practising with clients, and part of the reason he gave for this was the following: he said, ‘So there were two issues that separated me from counselling, or made me question my own counselling practice (p. 28) …..and whether I’m a natural healer’. While Geoff named other issues included in his
decision to stop practising, it was clear that he could not align his internal concept of healer with how he was practising.

This research revealed participants’ processes that explained their experiences thus: spiritual experiences are seen as teaching and learning experiences. The changes are not described as always being consciously made. The unconscious seems involved by executing a fundamental change that cannot be explained consciously. Gendlin (1964) proposes that embodied experiencing is a consistent source of implicit knowledge that involves several overlapping processes (e.g. physiological, sensory-motor and importantly, relational, p.140). Further, an explanation could also be seen to be offered by some scientists in the field of Psychoneuroimmunology. The suggestion is that the body itself is the subconscious mind (Pert, 2004) – indicating that there may be constant interaction between the conscious and the unconscious understandings which, practitioners acknowledge, form their responses to their notions of the spiritual, not only in their private lives but also within their therapeutic practice.

With the exception of Ann’s second experience with her client, these learning experiences were not frightening or disabling in any way. Rather than being described as pathological, they seemed to encourage flexibility rather than fostering avoidance behaviours in relation to difficult life experiences. Counselling Psychology typically adopts a pluralistic, post-modern ideology. Given the ethos of Counselling Psychology with ‘relational being’ at its very centre, there is arguably a tension between what it aspires to be in its theoretical underpinnings and what actually happens in practice. This may indicate that the field itself struggles with where and how to locate the relationship of the practitioner-scientists with their personal beliefs.

6.5 Disclosure within Professional Capacity

6.6.1 The problem of language

Reticence about speaking of spiritual experiences often seemed to involve explanations that these were personal beliefs, fear of being judged and language difficulties where there is no language aside from psychological concepts or religious concepts to convey an experience’s meanings. The research results revealed a mixed view from the participants on their experiences of supervision.
Anne cited reasons of fear of being judged, lack of trust and fears of confidentiality being breached as reasons for not disclosing in supervision. All of the participants except one had spoken about experiencing difficulties with talking about spiritual issues in supervision at some point: i.e. the ‘it’s too personal to talk about, I’ve never spoken about this is this way before’ syndrome. In some ways, with their private areas of belief being researched and the power perhaps being seen to be held by the researcher asking the questions, this could have reminded participants of those experiences when it did not feel ‘safe’ enough to speak freely.

Mary, Sarah and Anne said that they worried about exposing themselves to others’ judgments in other professional contexts, should their own private beliefs be revealed. Anne’s narrative made a powerful statement in that while she said that she would feel confident bringing the clients concerns relating to religious or spiritual beliefs to supervision, she would feel far more worried about bringing her own beliefs to supervision for fear of being ‘judged’. Further to this, she worried that perhaps it might not remain strictly confidential. Anne and Mary also expressed concerns about colleague’s perceptions of them changing in a negative way, should their beliefs become known. Sarah’s powerful metaphor of saying that ‘she already had her head above the parapet and now she just needs to get the rest of her out there’ really highlights a powerful dissonance between living what she believes, and aligning it with her work persona.

It has been reported by other researchers that many counsellors in the United States have had positive experiences talking about their own and their clients’ spiritual issues and backgrounds (e.g. Caldwell-Miller, 2007), providing the supervisor–supervisee ‘fit’ was a good one. All participants were very conscious of the ethical issues involved in disclosing their own beliefs in clinical work with clients, as Pargarment et al. (2007) and others have found in their studies. As outlined in the literature review, existing research is clear in its finding that clinicians often avoid speaking about spiritual issues with clients because they are unaware of how to do this, and are frightened of crossing a boundary by talking about this private area, and fear imposing their own beliefs and so damage the therapeutic relationship (Hodson, 2008), and because of the lack of training, feel ill-equipped to do this ethically (Worthington et al., 2011; Bartoli, 2007; West, 2004). It could also be as located in the literature review that many
are competent to discuss these issues when they emerge, but feel uncomfortable because they are not trained in this area.

Concurrent with this representation in the literature, all of the participants expressed an awareness of possible breaches of power and boundaries, and were wary of imposing their own beliefs on to their clients. There did seem to be confusion around when and how to do this. For example, Melanie revealed that if her clients present as very distressed and she thinks it appropriate, she asks them if they have a spiritual belief or faith to draw upon. This form of spiritual (religious) self-disclosure may have both positive and negative ethical implications for any work with clients (Tillman, 1998). In fact, Hawkins and Bullock (1995) assert that it is an ethical necessity for the therapist to disclose their religious/spiritual stance, should the client ask for that information, in order to address cultural difference and empower the client in deciding whether to continue to work with the therapist or not.

The importance of context in speaking about spiritual issues was highlighted by some of the participants. Sarah talked about areas where she enjoyed, or felt comfortable talking about, exploring her own and others’ concepts of spirituality and spiritual experiences. She said that she could speak about spirituality with the researchers, and used the phrase ‘explorer’s mindset’ to describe her training as a scientist-practitioner. However, she followed this by saying that she needed to take a risk to expose this side of herself. She indicated just how frightening the prospect of this was by saying: ‘I need to get the rest of me out there as well. It doesn’t feel particularly safe.’

Additionally, Susan used words like ‘failure and shame’ to describe her feelings when she introduced mindfulness to her trainees. She said that they ‘seemed bored’. This suggests that Susan’s intense negative feelings arose as a result of the personal risk that she took in approaching the mysterious realm of the non-theoretical to students, whom she said were ‘looking for techniques’. Susan explained it by saying that counselling psychologists do not talk about the ‘experiential’ in their work with each other. Additionally, Sarah said that she does not talk about these practices or the philosophical importance to her in her NHS work setting because it doesn’t feel ‘safe’. As Sarah and Mary indicated in their interviews, in an employment context these areas may continue to not be
supported or open to exploration. Mary: ‘I think some therapists might shut that conversation down... I guess I would actively encourage them to reflect on anything that had spiritual significance to them because it means a lot to me.’

In this research, participants all struggled to identify language conveying spiritual experience consistent with their respective therapeutic models. This lack clearly influenced ways of conceptualising working with spiritual issues with clients in a way that is in line with both their professional and personal values. The lack of adequate language related to how to deal with their and others’ spirituality seemed to create a difficult-to-resolve internal dissonance, where it seems that strategies of avoidance are employed to cope in professional contexts. All of the participants expressed some kind of reticence about speaking about the development of their spiritual identity to the researcher. The participants in the Graetz-Simmonds study reported variations in whether they were able to bring their own spiritual beliefs and experiences to their analytic therapy. Many were reported to ‘test the waters’ with their analysts first, as the history of such beliefs being dismissed as ‘infantile and pathological’ was deeply felt and feared. These participants concurred with this study in that when the analysand feels that they cannot bring this deeply private and ‘delicate’ area of the self to analysis these areas go unexplored.

According to Reisetter et al. (2004), professional identity is the view of self as a professional, together with one’s competence as a professional, resulting in congruence between personal worldview and professional view. In this case it seems likely that separating out such essential parts of the self from a professional identity as researcher-scientist and, as many have said, a ‘calling’, can prevent the practitioner from growing both professionally and personally by not exploring spiritual beliefs and experiences. These developments represent a critical shift in the locus of power away from the professional autonomy of practitioners themselves (House, 2010) and towards fulfilling NHS requirements to provide CBT models of evidence-based practice where techniques are highly prized.
7.1 Using IPA

Reid et al. (2005) have suggested that IPA is making an impact on many areas, and amongst others, spirituality and bereavement. They reference the role of spirituality and religious beliefs on the bereavement process and bereavement therapy as cited by Goldworthy and Coyle (2001). Furthermore, Smith et al. (2009) have noted how frequently research done using IPA yields a concern with identity, and it was no different with this research. This may be because of its concern with idiography, i.e. understanding the particular details of a ‘experiential phenomena’ occurring to a particular person in a particular context (p. 29). Also important here is the focus on the ability of IPA to allow interpretation to openly be included as a part of the process of analysis, rather than the researcher simply describing what the participants said in the interviews (Hefferon & Gil-Rodriguez, 2011). It was precisely because of the dominant place of identity within the findings that IPA was demonstrated to be an appropriate method. As such, IPA offered a theoretical and philosophical frame to investigate attitudes, beliefs and experiences involving the spiritual life of these counselling psychologists’ professional identities.

Because of the researcher’s attempt to get at the actual beliefs and what is deemed ‘spiritual experience’, the questions asked were designed to try to highlight the most obvious features of the experiences as understood by the practitioners. This research thus avoided the problem of operationalising and pre-deciding the definition of ‘spirituality’ for both the practitioner and the client (Kavar, 2012). Importantly, this allowed the participants themselves to define their own concept of spirituality, as opposed to fitting in with an existing definition.

7.2 Critical Evaluation

The researcher argues that operationalising a definition of spirituality is not possible because it is personally constructed by each individual, as has been found with the participants in this study. Using IPA was helpful in identifying the role of spirituality in the participants’ lives and professional practice, i.e. acting as a framework containing values, ideals and providing sustenance under challenging circumstances. It also to some degree, allowed a glimpse at some of
the conscious and unconscious processes involved in how experiences perceived to be spiritual aid in the participants in what could be called personal growth. However, using IPA loses the opportunity to begin to generate a theory of how spirituality is constructed and drawn on by counselling psychologists in therapy situations. The participants found it difficult here, as in the Crossley and Salter (2005) study to grasp any language that conveys, in a concrete way, aspects and definitions of spirituality.

While using IPA was useful in identifying and engaging with the qualities of spirituality in such a way that theorists and training institutions could make the concept less elusive, it did not allow for a more in-depth uncovering of connections between private life experiences and professional experiences. This is in part due to limitations in the interview design and in part due to limitations inherent in IPA as a methodology. Importantly, this research did not yield enough material about the arguably ‘spiritual’ phenomena that happens in the room between the therapist and the client for two reasons. Firstly, the type of phenomenon like ‘telepathy’ or ‘syncronicity’ that may be encapsulated in therapeutic terms like ‘counter-transference, projective identification, unconscious communication’ (Totton, 2007;1) was not referred to any way by the participants. The latter terms are relevant to psychotherapeutic practices in that they attempt to identify and explain communications that occur between the therapist and client without language, but whose ‘true’ meanings are determined by the person doing the experiencing (Totton, 2007). Secondly, not only IPA but all methods that rely on language to adequately convey the ineffable are simply not able to meet this demand. This is because they can only communicate what is found in language which is an inadequate tool to do this. Also, the researcher acknowledges the findings being unavoidably limited as they are constructed by subjective researcher interpretation. The influence of the researcher on the information obtained is ubiquitous. First, in terms of the role in data gathering: the act of involving herself in the hermeneutic process of trying to make sense of the participants trying to make sense of their experience revealed some of her own unresolved issues regarding historical exposure to a Christian religion, and also the tendency to ‘not hear’ clients’ possible spiritual concerns in her own therapeutic work. Secondly, the approach to questioning the participants revealed personal anxieties in discussing this deeply personal
issue for the participants and the determination to do justice to the researcher’s privileged position necessarily impacted on the interview style as well. Additionally, the specific responses to the answers provided all have an impact on the data collected by the researcher. The researcher found some of the material difficult to hear specifically when it referred to notions of seeing spiritual phenomena like angels because it does not mesh with her own belief system. Finally, ‘the analytic process cannot ever achieve a genuinely first person account – the account is always constructed by participant and researcher’ (Larkin, Watts and Clifton, 2006: 104).

7.3 Selection of participants

The researcher has stated previously that all of the participants were self selected, as they expressed an interest in participating in the research. While, the counselling psychologists were identified as research practitioners, it is notable that only Susan spoke of her work in research and spirituality. Self-selection can have inherent limitations in terms of the wish to obtain a broad selection of participants. This has been indicated by the fact that all of the participants had a particular social and cultural background, i.e. Western, and they were all over 40 years of age. Two of the participants were raised in other countries and first came to England as adults, one of the participants was mixed race, (Asian/British, brought up in England) and one was male. As such, there were significant gender, race, age and cultural differences amongst the sample. These differences all contributed to bring the participants bringing widely different experiential perspectives than perhaps participant sample with similar ages, gender and cultural backgrounds would have done. However, self-selection of participants is known to be difficult to avoid in a small sample, as participants are likely to be people who are interested in the topic. Additionally, a younger sample may have revealed a completely different experience of their concepts of spirituality than their older colleagues. Also, counselling psychologists who either share or have non-Western beliefs, may certainly have contributed a different perspective on their spiritual experiences which could be learned from.
The researcher’s embodied position is also relevant in that it may have coloured her experience of being with the participants, which requires reflexive awareness. As noted in the reflexivity box in the results section, some of the interviews were particularly difficult to conduct. The researcher found it difficult to be in her role as a ‘trainee’ conducting interviews of such a personal nature with ‘professionals’ who had been previously known to the interviewer in a friendly but not personal in nature. This difference in professional hierarchy may have introduced confusion for the participant in terms of the power dynamics during the interview process and made them feel even more vulnerable than they may have done with another researcher. The researcher was aware that each participant voiced their experience of never having spoken about these private matters in this way before.

7.4 Interview Design

Several important limitations were revealed in this research. While the interview schedule contained questions related to the participant’s experience of spirituality in their professional practice, the interview had several specific and focused questions related to their earlier experiences with spirituality. One of the main limitations included in that specific focus was that it generated a lack of participant material relating to what actually happens in practice with the clients. This lack of material may lie in the fact that the research question may have tried to address too many questions for a study of this scope. This perhaps reflects the inexperience of the researcher in identifying a more focused question. It may be that had the question asked related solely to what the counselling psychologists understand spirituality to be in the therapeutic encounter, more pertinent material might have been forthcoming. Instead, the research question posed here was only partially answered.

Morrow and Smith (2000) suggest that the researcher be aware of any emerging findings during the interview and be flexible in terms of revising the questions to ensure data is complete, and results are rich and descriptive. However, the researcher found this difficult to do without jeopardising the power balance by being too directive, thereby perhaps influencing the participants to provide ‘expected’ responses, as referred to in the results section reflexivity box (p.108). It is also suggested that the researcher may have unknowingly had a special
interest in not pursuing other information during the interviews, as it did not ‘fit’ with her own strong interest in investigating links between the participants’ earlier shaping of spiritual identity and their practices.

Furthermore, the researcher did not explore what appeared to be the discrepancy the participants experienced between their ideals in the theories they learned and what seemed to occur within the therapeutic relationship when they found themselves to be at a loss as to how to respond to tricky therapeutic situations. This is in direct opposition to the counselling psychology ethos of placing primary importance on seeing each unique individual’s concerns, yet the participants themselves avoided speaking about the disparity between placing value on the client’s spirituality and not speaking about their own.

7.5 Validity

It has been said that validity is a ‘limit question’ of research, one that repeatedly resurfaces, and which can neither be avoided nor resolved – a fertile obsession, given its intractability (Fraser, 1989: 80, in Lather, 1994: 673). As validity cannot be assessed in the same way as in quantitative research, Yardley (2000) maintains that one way of ensuring validity in qualitative research is to establish sensitivity to context (Smith et al., 2009). She advises that this can be observed by being sensitive to the socio-cultural environment where the study takes place, paying attention to the relevant literature on the subject and particularly, careful handling of the participants’ material.

To address the issue of sensitivity to context, the researcher was aware that three of the interviews took place in participant’s place of employment and three took place in participant’s homes. Each of those environments had inherent privacy and safety concerns. It was especially vital for the rooms where the interviews took place to be confidential and in a place where the participants could not be overheard or disturbed. This was done to allow the participant to feel comfortable sharing the intimate details of their inner lives. This is especially the case for Anne, Mary and Sarah, who highlighted their current workplaces as being unwelcoming in exploring such issues. Finally, the participant material was handled, interpreted and reported with care.
However, because of the researcher’s immersion in the data, it is difficult to evaluate the accuracy of the interpretations of the material. In an effort ‘for interviewees to exert control and influence’ (Kvale, 1996, in Camic et al., 2003: 12) over their words and to increase validity, copies of the transcripts were offered to the participants in order to check for accuracy. Geoff and Melanie requested copies of the transcripts, and Geoff was the only participant who made changes to the transcript. The other participant’s said that they did not want to see the transcripts.

Lather (1994) asks the researcher to make decisions about ‘which discursive policy to follow, and which ‘regime of truth’ to locate one’s work within’ (p. 677). With this research, the intersubjective, postmodern nature of IPA acknowledges the effect that the necessarily biased lens of her experiences have had on the interpretation process, though efforts were made to minimise these issues by using the method of data triangulation (Guion, et al., 2011) to further increase validity and involved having two other counselling psychologists review the analysis. This was done to avoid prescribing a ‘singular true account’ (Yardley, 2000: 69) but to act as a reliability check with the aim of highlighting any pertinent information that may have been missed. The attempt here was to ‘not find the answer to what is real, but the richness within the different realities may provide us with a better answer’ (Camic, Rhodes & Yardley, 2003: 4).

In following suggested guidelines for commitment and rigour suggested by Yardley (2000), the researcher’s approach was to ground the interpretations as they emerged in the participants’ quoted experiences. Yardley (2000) also suggests that in order for transparency and coherence to be demonstrated, the researcher must accurately and thoroughly describe the research process. Moreover, the aim of IPA research is not to seek generalisations across the total population of counselling psychologists, but rather to ‘focus on the possible transferability of findings from group to group’ (Hefferon & Gil-Rodriguez, 2011: 757). However, three of the participants that they didn’t know what or how they could say what they believed, but found the experience in some ways valuable. For example, transferability was evidenced by Susan who spoke of how worried she had been about answering the questions because the language was entrapping (p. 103) but then said that she had found the experience of
participating in the research and talking about her spiritual experiences highly rewarding.

In addition, striving to adhere to this process, the researcher also made reflective notes following each of the interviews, and consulted these notes in writing up the reflective parts of the research. Finally, Yardley (2000) notes the principle of impact and importance being examined. This has been achieved in this research by demonstrating that the findings have implications for training and practice, should this research be disseminated to other Counselling Psychology professionals.

7.6 Contribution and implications for training, supervision and practice

Harborne (2012), considering the work of Hay and Hunt on adult spirituality, cites the latter’s findings that people participating in research will only often begin to speak about their spiritual intuitions late on in the research, once they feel that it is safe to do so. Harborne (2012) maintains that one of the fears involved in maintaining the taboo about speaking is a fear of being ‘laughed at’ (location 556, electronic book). The reasons discussed earlier in the literature review regarding all parties involved not talking about spiritual issues are manifold, and range from personal experiences which have been unresolved, confusion about how to speak about the theme, and cultural and societal influences. For these reasons, this research concurs with Caldwell-Miller (2007), who indicates the value of training institutes beginning to open up these discussions in a more direct and clear way.

This is particularly the case as all of the participants in this study said that they were confused about how to speak about spirituality in the approaches in which they are trained. The wealth of previous literature, as outlined earlier, has focused on the possibility of the strengthening effects that spiritual and religious beliefs and practices can have on clients’ lives. It seems that counselling psychologists also draw upon these beliefs and practices, regardless of adherence to religious traditions, in times of difficulty, and also in the therapy room itself. In West’s (2004) words, ‘why practise with one arm behind your back? If spirituality is healthy and important to your client, why not use it to
help their growth?’ (p. 152). The same could be said of practitioners themselves.

Given Counselling Psychology’s focus on the therapeutic relationship and on enhancing client self-determination (Cooper, 2009, 2012), the reluctance of participants to approach client spirituality in therapy and in supervision may well have implications for the discipline of Counselling Psychology as a whole, which need to be considered by the profession. The impact on client well-being and the well-being of the practitioner in having to separate out valuable aspects of the personal and professional self, thus failing to handle spiritual needs in a sensitive, open and enabling fashion, also has implications for mental health resources, which need to be considered by professionals and policy makers alike. In the current socio-political context, mental health agencies in services like Improving Access to Psychological Therapies (IAPT) seem to foster a drive towards using a brief CBT approach (Turpin et al., 2006) in the NHS which is geared to instrumental ends focusing predominantly on employability, which with justification could be said to have far less focus on the relational aspects of therapy and thus less room for the inclusion of the spiritual dimension.

Finally, the participants all indicated their ethical awareness by recognising their immersion in the power dynamics (Hook, 2003) in the therapy with their clients. They addressed the possible breaches of boundaries by seeming to be careful to avoid imposing their own beliefs on to their clients. The participants did appear to be cognisant of the powerful position inherited by therapists from institutional and socio-cultural contexts (Guilfoyle, 2003).

In addition, Schulte et al. (2002, in Hage, 2006) maintain in their study on clinical faculty and program leaders where they reported that integration of spiritual and religious themes were largely absent from their teaching criteria. Importantly, according to studies by, amongst others, Brawer et al. (2002, in Hage, 2006), these faculty and leaders reported that while receptive to classroom discussion and research in this area, the faculty felt minimally
competent in issues regarding spiritual and religious diversity and interventions. The literature review for this study has highlighted the obvious absence of adequate training on spiritual and religious issues in secular training institutions, which indicates a lack of institutions on both sides of the Atlantic Ocean taking responsibility for aiding students and faculty alike in what current research has deemed a very important issue in human functioning.

The above can be summarised diagrammatically as a suggested model for the implications in training and practice. See Figure 1.
Figure 1. Model of implications for training and practice.

It can be seen that participant’s experiences and their implications can be considered to be intertwining but also parallel processes. The salient issues as
outlined in this model represent the three most problematic concerns found in this study. These have been shown to be the blocks to adequately dealing with spiritual and religious issues in the field of counselling psychology. Figure 1 also features suggestions for ways that changes in policy could help improve therapeutic and training conditions.

7.7 Further research

This study has suggested some possible explanations for why practitioners do not speak out in this sensitive area. While in the main, research has focused on the influence on the client’s mental health of good spiritual/religious beliefs and practices (West, 2000, 2004), it is important to acknowledge its importance for the practitioner too, so that they do not have to ‘split off’ this aspect of the self from their professional lives. Future studies could usefully investigate more extensively the actual blocks that exist to practitioners speaking out in training, supervision and work contexts.

Further research could also directly investigate in more depth what actually happens in the room when spiritual events emerge and are used therapeutically. Further research could also look at the client experience when they feel that their spiritual needs are overlooked or ignored in the workforce, as the counselling psychologists themselves in this study have indicated. In addition, as suggested by Lennie and West (2010), further research could involve ‘careful qualitative work, backed up by a survey’ (p. 84). Such research could be carried out by using a mixed-method using narrative analysis (Polkinghorne, 2010), building on Orlinsky et al.’s (2004) study by using a version of the Development of Psychotherapists Common Core Questionnaire (DPCCQ) to collect information on the religiosity and professional characteristics of psychotherapists. A quantitative study could augment a qualitative method here in that it can help reveal different yet complimentary information about how, when and what happens regarding how therapists spiritual beliefs and experiences impact on therapeutic work covering larger groups of psychotherapists.

7.8 Final comments

Previous Research (with the exception of studies into the use of prayer) (refer to literature review) has indicated that while the how is unclear, psychologist’s and
therapist’s implicitly and explicitly include their beliefs in their professional work. This research has begun the discussion of how these beliefs are being included. In conclusion, the meaning that is given to spirituality and spiritual experience is attributed to both subtle and profound events that play an important part in shaping the participant’s concept of self and of life. These could be said to occur in embodied transpersonal events that in some way involve changes in consciousness and raise levels of awareness and a sense of aliveness (Rowan, 2003) to the situation that they are in. The meaning that is given to these experiences determines whether it is seen as a ‘spiritual’ experience as opposed to a psychological experience. In short, spirituality can be seen to be a way of making sense of the self, others, the world and one’s personal concept of ‘God’.

The problem of language enters when speaking about beliefs and events because as Ann says: ‘there are no hooks’ within theoretical language which adequately convey the personal meaning of the participant’s spiritual beliefs and experiences. The language available can closely but not accurately describe strictly internal events for each person is psychological or religious. The participant’s used language like: ‘being seen’, ‘witnessing’ and ‘attachment’ to describe their experiences. The psychological terms were seen by this researcher to be the metaphors closest to explaining the experience but not the meaning given it. This then seems to lead to Cortwright’s (1997) notion of the psychologisation of the experience which then can strip it of the meaning that has been given to it in terms of providing resilience and support in life or indeed in their work with clients, particularly when that work is difficult. This minimisation may be distressing even if the events are not pathologised and importantly, may jeopardise the healing and learning taken from the experience by the practitioner.

Critically, when the ‘spiritual’ experiences described by two of the participant’s involve spiritual phenomena, the change in consciousness and ‘knowing’ occur suddenly and with impact. The effect on the counselling psychologist can be powerful which can have an impact on the therapeutic process.

Finally, it is argued that the only place to make sense of these beliefs or experiences is in the privacy of one’s own head or inevitably in the therapeutic encounter. Integration is called for in that as Gibson, Dollarhide and Moss (2010)
have noted, ‘The therapeutic self creates frames of reference (professional contexts) for counselling roles and decisions, attitudes concerning responsibilities and ethics, modes of thinking, and patterns of problem solving. As such, further research in this area is indicated, and could enhance counselling psychologist’s knowledge in dealing with spiritual issues more effectively both in training and professional practice.
References


British Association for Counselling and Psychotherapy (BACP) (2008) www.bacp.co.uk.


CHAI/CSIP/Mental Health Act Commission/NIMHE, Nov 2005 Coyte, M.E., Gilbert, P. & Nicholls, V., (2007), Spirituality, Values and Mental Health: Jewels...


spiritual beliefs in therapy.’ *Psychology and Psychotherapy: Theory, Research and Practice*, 78 (3) pp.295–313.


Law, H., Dr. & Prof. L. Lancaster, (2011) 'What are the striking parallels between cognitive neuroscience and spiritual traditions? Or why counselling psychologists should embrace transpersonal psychology.' [Dr Ho Law in conversation with Professor Lancaster] Counselling Psychology Quarterly, 24 (4) pp.331-


Maslow, A. (1968), *Toward a Psychology of Being*, Canada: John Wiley & Sons


Moore, J. & Purton, C., Spirituality and Counselling: Experiential and Theoretical Perspectives, Ross-on-Wye: PCCS Books


Wilber, K., (1979a). ‘Eye to eye, the relationship between science, reason and religion and it’s effect on transpersonal psychology’, Revision, winter/spring, pp. 3-26.


Appendix 1

Recruitment Letter for Participants

Title: An exploration into the meaning of spirituality and spiritual experience for Counselling Psychologists, and implications for their professional practice.

Dear Participant:

I am currently pursuing a PsychD doctoral Counselling Psychology course of study at Roehampton University, where I am conducting a research study investigating the experience of, and meaning attributed to spirituality in the clinical practice and professional lives of Counselling Psychology practitioners. With your cooperation and involvement, I am therefore interested in exploring the meanings that you make of spiritual experience in your role as a Counselling Psychologist.

Currently, most material written on this topic focuses either on the client’s spiritual experience or on therapist competency. There are also models of therapy which maintain that the work itself is a spiritual endeavour. I would welcome the involvement of Counselling Psychologists who have more than three years of experience practising in the role of Counselling Psychologist, and who wish to contribute their experiences to this study by means of a research interview. The interview will last anywhere from forty-five minutes to one and one-half hours, exploring this very personal and meaningful subject. The interview will be conducted in entirely confidential circumstances, and will be treated with the utmost care. This could offer a unique opportunity to talk about such experiences in a way that might not normally be available or possible when in the role of Counselling Psychologist.

If you choose to participate in this study, you will be asked the following questions in a partially structured interview:

1. What does the term ‘spirituality’ mean to you, and how do you think this meaning or belief has come about for you?
2. Can you describe a particularly vivid experience from your non-professional life which is consistent with your understanding of what, for you, constitutes a spiritual experience?
3. Can you describe a particularly vivid experience in your professional CP work which relates to your view of what constitutes a spiritual experience?
4. Can you speak about any meaning you might have made of this, and if you feel you are or were changed by this/these experiences?
5. Do you consider these experiences as learnings (or otherwise), and draw upon them in your work? If so, in what way or ways?
6. Under what circumstances, if at all, might you discuss these beliefs or experiences with a supervisor, with members of your professional institute or with work colleagues?

The interview will be audio-taped and transcribed with personal details being coded or changed to ensure that the participant’s information is anonymous to others. The audio-tapes and other related material (e.g. verbatim transcripts) will be destroyed after it has been stored for at least 6 years, as is required for this research. You also have the right withdraw at any time without giving any reason.

The interview will be arranged at a time and place that is convenient for you. If this has piqued your interest and you would like to take part in this study, or if you have any further questions, please contact me by either the e-mail address or the telephone number listed below.

Many thanks for your interest.

Telephone Number: 0208 392 3650
Email: Muellej@roehampton.ac.uk
School of Human and Life Sciences
Roehampton University
Whitelands College
Holybourne Avenue
London
SW15 4JD

Yours truly,

Joy Mueller
PARTICIPANT CONSENT FORM

Title of Research Project: An exploration into the meaning of spirituality and spiritual experience for Counselling Psychologists, and the implications for their professional practice.

Brief Description of Research Project: This study explores what Counselling Psychologists understand by the term 'spirituality', and whether or not practitioners have experienced anything they would describe as 'spiritual' in their professional practice with clients. This research will also look at how Counselling Psychologists who do describe having spiritual experience(s) in their clinical practices, are able to speak about that experience, and whether it is communicated in any way in their work. Additionally, the research will investigate the possible impact that a practitioner’s personal beliefs in this area might have in their work with clients.

Investigator Contact Details:
Joy Mueller
School of Human and Life Sciences
Roehampton University
Whitelands College
Holybourne Avenue
London
SW15 4JD
Consent Statement:

I agree to take part in this research, and am aware that I am free to withdraw at any point without giving a reason during the interview and afterwards, by using the ID number which appears on the Debriefing Form. I understand that the information I provide will be treated in strictest confidence by the investigator, and that my identity will be protected in the publication of any research findings. I also understand that data which is in aggregate form may still be used/published.

Please sign below to acknowledge the following:

I have read the information about this research.

I am aware that I will be interviewed individually for approximately 45 minutes to 1 ½ hours.

I am aware that my interview will be audio-tape recorded, transcribed and analysed.

I am aware that I can terminate my interview at any time without giving a reason.

I am aware that my identity will remain anonymous and the information that I provide will be confidential to this researcher and her supervisor.

I am aware that a copy of the final research report will be made available to me upon request.

May I contact you again if I need to clarify something that we discussed? YES/NO
Please note: if you have a concern about any aspect of your participation or any other queries please raise this with the investigator. However if you would like to contact an independent party please contact the Dean of School (or if the researcher is a student, you can also contact the Director of Studies).

**Director of Studies Contact Details:**
Dr AnneMarie Salm  
School of Human and Life Sciences  
Roehampton University  
Whitelands College  
Holybourne Avenue  
London  
SW15 4JD  
0208 392 3615  
a.salm@roehampton.ac.uk

**Dean of School Contact Details:**
Michael Barham  
School of Human and Life Sciences  
Roehampton University  
Whitelands College  
Holybourne Avenue  
London  
SW15 4JD  
0208 392 3617  
m.barham@roehampton.ac.uk
Title: An exploration into the meaning of spirituality and spiritual experience for Counselling Psychologists, and implications for their professional practice.

This is a research study investigating the experience of, and meaning attributed to, spirituality in the clinical practice and professional lives of Counselling Psychology practitioners.

Thank you very much for your time in participating in this study. As you are aware the purpose of this study is to investigate the meaning that Counselling Psychologists accord to spirituality and spiritual experience in their professional practice. Your participation will contribute towards and extend current understanding of the implications for their practice of Counselling Psychologists’ personal beliefs and experiences in this realm.

As your own particular personal beliefs (or non-belief) regarding spirituality may have come about through difficult experiences, I’m aware that what we have spoken about could have brought back challenging or painful memories for you.

In the event of this having occurred, I would like to offer you some time to talk about anything that may have come up for you during this interview.
If you find that your participation in the interview has raised any painful issues that you need to discuss or explore further, please consider contacting either your own personal therapist or supervisor. You might also consider contacting the British Psychological Society (BPS) to find a suitable therapist, if appropriate. Their telephone number is supplied below:

British Psychological Society 0116 227 1314

You may also contact the Samaritans 24 hour telephone service. The telephone number is: 08457 90 90 90

Or you may contact The British Association for Counselling and Psychotherapy (BACP). The telephone number is: 01455 88 33 16

If you have any concerns regarding this study please contact either my Director of Studies or the Dean of School. The contact details are listed below.

**Director of Studies Contact Details:**

Dr Anne-Marie Salm
School of Human and Life Sciences
Roehampton University
Whitelands College
Holybourne Avenue
London
SW15 4JD
0208 392 3615
a.salm@roehampton.ac.uk

**Dean of School Contact Details:**

Michael Barham
School of Human and Life Sciences
Roehampton University
Whitelands College
Holybourne Avenue
London
SW15 4JD
0208 392 3617
m.barham@roehampton.ac.uk
This research is being conducted by:

Joy Mueller
School of Human & Life Sciences
Roehampton University
Whitelands College
Holybourne Avenue
London,
SW15 4JD
joyous2@ntlworld.com

and supervised by:

Dr Richard House
School of Human & Life Sciences
Roehampton University
Whitelands College
Holybourne Avenue
London,
SW15 4JD
0208 392 3650
r.house@roehampton.ac.uk

You have the right to withdraw at any time during the interview without giving any reason and you may withdraw after the interview by using the ID number supplied below. Data in aggregate form may still be used after you have withdrawn.

ID Number_____________
Declaration:

I confirm that the interview was conducted in an ethical and professional manner and that I am happy for the research to proceed using my material.

Name of participant: 
Signature:
Date:

Researcher name: 
Signature:
Date:
Appendix 4

Transcript No. 5.1 - Susan

Participant:

<table>
<thead>
<tr>
<th>Emergent Themes</th>
<th>Original Transcript</th>
<th>Exploratory Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>The struggle to articulate the lived meaning of the spiritual</td>
<td>Researcher: 1. Thank you so much for agreeing to 2. participate in this interview to 3. explore this subject and I suppose, I 4. guess I want to ask you just the first 5. question, and we can take it from 6. there and that question is, what 7. does the term spirituality mean to 8. you?</td>
<td></td>
</tr>
<tr>
<td>Frightening to engage with spiritual themes</td>
<td>Participant: 9. It’s a very broad question. I have 10. been trying to think about it for 11. some time before you arrived. 12. It made me consider how much 13. I’ve thought about spirituality in 14. my time as a therapist which is, I 15. suppose including my training, 16. fourteen years now and I think 17. when I started out I wasn’t very... 18. I, you know, thought of spirituality 19. as a rather slightly scary thing 20. something to do with... I must be 21. very religious and because my 22. family come from very diverse 23. religions. Some are Christian 24. some are Jewish some are other 25. religious leanings and faiths. I sort 26. of thought spirituality had to be 27. something religious... so I was a 28. bit... and then as time went on I 29. realised that I think I realised that I 30. have a great appreciation, a 31. natural appreciation of different 32. faiths and cultures. 33. But then I started to think about... 34. I think as early in my training 35. about counselling psychology as 36. something to do with something 37. that goes on beyond what is 38. known and</td>
<td>With her emphasis on “trying” I wonder whether she is finding the answer difficult to articulate or she simply doesn’t know how to answer it. In discussing how she has thought about the topic she begins to say what her process of spiritual identity/journey was, she begins with before therapy (scary). Early representations of religions throughout the family includes the major religions, i.e. Christian, Jewish and some “others”. Theme: Spirituality is different from religions.</td>
</tr>
<tr>
<td>Development of spiritual identity over time</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Spirituality the seems to be indistinguishable from religion</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Engaged with the concept of human need for faith</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Became aware of a spiritual self in CP training</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Awareness of the un-</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nameable connection that forms within the therapeutic dyad</td>
<td>The developing awareness of the spiritual that language cannot convey</td>
<td></td>
</tr>
<tr>
<td>----------------------------------------------------------</td>
<td>---------------------------------------------------------------</td>
<td></td>
</tr>
<tr>
<td><strong>Spirituality is inexplicable and can’t be described</strong></td>
<td>Some something greater than each participant.</td>
<td></td>
</tr>
<tr>
<td><strong>The intangible connection to the other</strong></td>
<td>Creating something out of the unknown between parties was an early part of her making sense of the therapeutic process. Also taking the stance of consciously not knowing opens to a spiritual experience to happen. Spirituality is not easy to define. Through training and experience with working with others, an awareness of certain experience without names/words is developed.</td>
<td></td>
</tr>
</tbody>
</table>

**Researcher:**

Because my second part of that question is: How did that come about for you, this, I guess hard to define concept of this term?

**Participant:**

A greater understanding hmm. Well I think right from the beginning when I started being a therapist I began to realise that there’s something that comes from the person that I liked to... I could somehow pick up, and that was the most important thing about the therapy. I mean you’re taught all the different models and skills and so on and so forth. But I think that sense of connection 80.that sense of... It’s very hard to... 81.imbeddedness

Trying to articulate to me what she was “picking up” (the phenomena) happening between self and other in the process of therapy. The therapist questions “what is therapy?”

Her interpretations of what happens in that...
| relationship of the therapeutic dyad | something that goes on. The relational side I suppose, is what makes it things spring from that that don’t in any other way and I think every model, every therapeutic relationship has that and it’s a bit like... I was thinking it is a bit like, you know, people for as long as we’ve ever had recorded have tried to describe what it is to fall in love and its outer planetary, it’s very hard to describe and many people have tried. It’s something that goes beyond us and so I think many people who come to therapy I think. If we talk about patients or clients have a need to find a sense of kind of belonging of being with of identifying with and I think those things go on in quite a spiritual way because... things go beyond the words spoken and they’re very rarely spoken about in the therapeutic relationship and sometimes in supervision I think it is spoken about but even there it is fairly rare. Can you remind me of the question again? How did I get to become aware of spirituality. |
| The sense of connection | No language to describe the happening. |
| The inability to describe the ineffable | Themes of belonging being met in a space of being with. In the space without words. |
| The belief that there is some greater force at work | Why did she drift off? Is it the difficulty of trying to verbally conceptualise and convey the experience? |
| The universal need to belong is spiritual | |
| The act of attempting to belong goes unspoken | |

---

**Researcher:**
113. As it stands for you today that concept.

**Participant:**
115. Learning from my clients I think... 116. and I think, you know, as a child I always had that with my mother, 118. I was, I had a close relationship with my own mother and I think that... 119. |

**Themes:**
Learning from the client. Relationship with the mother leads to thoughts about closeness and attachment to others as a gift of some kind.
<p>| Historical gathering of markers of spiritual identity | has been helpful and I think 121.that is probably where that kind 122.of... some people are perhaps 123.more gifted than others. 124.Perhaps it springs from some 125.kind of close relationship or 126.caring for somebody or being 127.cared for. Some sense of 128.closeness and belonging, 129.attachment that helps that kind 130.of development. | (Link to spiritual development?) |
|-----------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Spiritual qualities are closeness and belonging      | 131.I think people who come to 132.therapy want that and I think in 133.my own therapy experience, I 134.think I got that because I had a 135.sense of my therapist and I 136.having something that was my 137.own that helped me. You know, 138.she would be with me when she 139.wasn’t there and people who I’ve 140.interviewed about their 141.therapeutic experience in my 142.own research have said, You 143.know it really helped me after 144.therapy to have a kind of spiritual 145.sense of what it was like to be 146.with my therapist. That’s helped 147.me to keep doing the work and 148.keep healing’. | The therapist as an internalised parent. “Clients saying it helped to have a spiritual sense of what it was like to Be with my therapist (when she (therapist) wasn’t there).” The healing work is spiritual. |
| Feeling of closeness and belonging in therapy        |                                                                 |                                                                 |
| The therapy as the spiritual experience              |                                                                 |                                                                 |
| The therapist as the ongoing spiritual helper/healer |                                                                 |                                                                 |
| Therapist as a vocation                              |                                                                 |                                                                 |
| Emergent themes                                      |                                                                 |                                                                 |
| Bereavement linked to spiritual growth               | 149.So I think that my experience of 150.life, my experience or 151.bereavement. I think 152.importantly helped me 153.understand about spirituality and 154.then I think all these experiences 155.have helped me in a sense in my 156.professional world to open up 157.more and more to the idea that 158.people have extraordinary 159.experiences that I may not know 160.about or understand even, but 161.that I need to | Bereavement is an important element of her sense of spiritual development. All of these life experiences are integrated into a spiritual identity which has impacted on her ability to empathise with clients. |
| Collective life experiences viewed as ongoing spiritual development |                                                                 |                                                                 |
| Spiritual development                                |                                                                 |                                                                 |</p>
<table>
<thead>
<tr>
<th><strong>continues throughout life</strong></th>
<th>appreciate. So a 162.kind of conglomerate, if that is 163.the right word, a kind of 164.amalgamation of experiences 165.and I’m still learning. I don’t 166.think it is something that you 167.ever achieve or get to a sort of 168.end point with. I think it is 169.something that you grow, you 170.grow with or it develops it’s a 171.continual development I think.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Researcher:</strong> 172.You said that this experiential something so far as I have understood...</td>
<td></td>
</tr>
<tr>
<td><strong>Participant:</strong> 175.Yes...</td>
<td></td>
</tr>
<tr>
<td><strong>Researcher:</strong> 176....that it is rarely spoken about sometimes in supervision.</td>
<td></td>
</tr>
<tr>
<td><strong>Participant:</strong> 178.Hmmmm...</td>
<td></td>
</tr>
<tr>
<td><strong>Researcher:</strong> 179.I wondered if you could 180.elaborate on that a little.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Uncertainty about how to work with unconventional techniques with supervisees</strong></th>
<th>181.So I think it is a good opening for, 182.and I don’t know why it is not 183.spoken about more. I mean I 184.have tried mindfulness 185.techniques with... what are they 186.called... skills or guided imagery 187.and listening to your own self 188.with supervisees and it hasn’t 189.always gone down very well. It 190.does with</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Is she talking about the scientific aspect of psychology? She seems to be comparing and including other symbolic roles with those of a counselling psychologist, i.e. Shamans.</strong></td>
<td></td>
</tr>
<tr>
<td><strong>She notes the difference</strong></td>
<td></td>
</tr>
</tbody>
</table>
### Unconventional Techniques

The difficulty in testing mindfulness and guided imagery

Major theorists have attempted to apply language to give spiritual experiences

Patients and clients introduced that more mindfulness and guided imagery. I don’t know whether it’s people learning on a course trainees. Perhaps they feel they want knowledge that is written down and more knowing more. They can grasp hold of easily and then write about. I don’t know if that is the reason and it seems. I don’t think spirituality is necessarily very theory bound. People have tried to write about it. Rollo May, Jung, Patricia Clarkson. Lots of people I could think of. So it’s alluded to but I am not sure if there is enough specific to do with spirituality and the idea of faith.

### Negative Associations

212. Having said that about religion

213. there are some religions... you know, I could write an essay about religion being the opium of the masses where there are cultural things like... I have just been to the Middle East. Women are treated appallingly... it just brings out the feminist side of me and I just think, you know, I can’t agree with the way women and children are treated. So I think maybe even religion can be slightly, a kind of, off putting to the idea of spirituality and all that it might mean in general.

Religion as the opium of the masses seems to indicate a real disapproval of the construct of religion rather than spirituality as something good.

### Researcher

227. I just wondered if I could clarify a little bit, the bit that you said that you tried the mindfulness techniques and between hearing voices as a spiritual thing and hearing voices as something that is pathological.

Why talking about Shamans brings her to talking about what she doesn’t talk about with her supervisees. When she has experimented with talking about things that are not written down it was rejected. (How did this make her feel in her role as a supervisor? As she is talking about it her voice and the gaps between the words lets me know that she is working it out as she speaks.)

### Religion

Religion can encourage prejudice and mistreatment of women and children

Religion is very different to spirituality

Researcher:
<table>
<thead>
<tr>
<th>Guided imagery and suchlike with supervisees hasn’t gone down very well. I wondered how that looks when it doesn’t go down very well.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Researcher: 237. Can you..</td>
</tr>
<tr>
<td>Context in training where the spiritual can be spoken about</td>
</tr>
<tr>
<td>Therapists’ vicarious trauma</td>
</tr>
<tr>
<td>The powerful impact of being with the client’s negative feelings</td>
</tr>
<tr>
<td>Techniques to comfort/contain difficult experiences</td>
</tr>
<tr>
<td>Participant: 238. Because, I did trauma training and I worked with trauma for five 240. years and the thing about trauma 241. is it can affect a person in quite a 242. spiritual way. 243. So the trauma will occur and it can bring up all kinds of other traumas. I can remember with 246. one patient I came out of the 247. session and felt very, almost faint, and I think I’d picked up images, feelings as though I had 250. almost been there with him. 251. was a terrible case and, an unusual case, and I came and it 253. was to do with a murder and I 254. came out and I felt quite heady 255. and quite faint. I am not a fainter 256. and so there was a kind of a 257. whole dimension to this that I’d. 258. So in the training we have lots of 259. mindfulness training so that we 260. can, as therapists working with 261. trauma, learn how to offset some 262. of the kind of what you might call 263. the vicarious trauma that can 264. occur for the therapist. So for 265. years I learnt...</td>
</tr>
<tr>
<td>She describes a difficult client group and vicarious trauma for the therapist. Mindfulness training is categorised as a spiritual practice. I feel she’s conveying to me the powerful distress she has felt in working with certain conditions. (Themes of practices to help alleviate distress.)</td>
</tr>
<tr>
<td>Researcher:: 266. The depression... I don’t know what I mean and I’m glad that she</td>
</tr>
<tr>
<td>Feeling judged by incorporating unconventional techniques</td>
</tr>
<tr>
<td>-------------------------------------------------------------</td>
</tr>
<tr>
<td>Participant:: 267. Yes, anyway and they are very, 268. very useful and I am not sure I 269. am doing that more with patients 270. and clients and they can take 271. that out with them and use those 272. things as they see fit. Are you 273. asking what I made of it when 274. supervisees don’t like it.</td>
</tr>
<tr>
<td>The tension and dilemmas of being a supervisor and how much one reveals about the self through work practices.</td>
</tr>
<tr>
<td>Researcher: 275. Yes, how did they say, do they 276. say <em>I don’t like it</em>. You said it 277. didn’t go down very well so I 278. wasn’t very clear about what that 279. meant.</td>
</tr>
<tr>
<td>Professionals reject techniques</td>
</tr>
<tr>
<td>Anger with others simple interpretation of therapeutic interventions</td>
</tr>
<tr>
<td>Feeling judged and rejected by supervisees</td>
</tr>
<tr>
<td>Participant:: 280. It was just this one set of, one set 281. of supervisees who said, I got 282. some feedback and they just said 283. it was just a bit boring. It just 284. wasn’t really. You know they 285. wanted to learn about their 286. clients and talk about their client 287. issues. It was as though it was 288. something... I experienced it as 289. quite naive, was as though... and 290. I felt quite... I felt I hadn’t got it 291. right somehow. A sense that I 292. don’t know a failure or shame it 293. was quite a powerful 294. experience.... as though, that’s 295. rubbish that’s not really doing 296. what a supervisor should do. So 297. it was quite an interesting... 298. experience I had. That is the only 299. time.</td>
</tr>
<tr>
<td>The supervisees seemed to direct what they felt they wanted from supervision with her. She felt rejected and perhaps (angry) that they rejected what she had hoped to convey to them. Would she have felt as shamed or like a failure if what she wanted to teach them had been as she referred to earlier written down? As a supervisor Themes: judged about visualisations/meditations 2. Shame 3. Failure</td>
</tr>
<tr>
<td>Limitations in practice include disparate training</td>
</tr>
<tr>
<td>300. I think it showed me something 301. about training. I think different 302. trainings can be</td>
</tr>
<tr>
<td>There is a gap in her training perhaps in learning how to approach a subject like spirituality</td>
</tr>
</tbody>
</table>
Training lacks exploration of spiritual aspects of the person

Belief that working with different meanings of spirituality can be beneficial for client

Taboo in speaking about certain aspects of therapists' emotional experiences in the work

Drawing on past developmental relationships to make sense of the spiritual in therapeutic relationship

Spiritual connection is beyond language

Qualities of healing

very, quite 303.powerfully different and so some 304.will incorporate relational 305.aspects such as spirituality. 306.Actually there’s nothing without 307.spirituality you know it’s getting 308.the different meanings of 309.spirituality is very important in 310.supervision I think and it very 311.often spills, of course, the idea of 312.supervision is that it spills back to 313.the client in beneficial ways. So 314.it was very interesting that it felt 315.quite stuck at that moment. But 316.I have tried it with other 317.supervisees who have 318.incorporated it and have gone on 319.to learn not only about 320.themselves but take it to their 321.clients and fed back that it 322.seemed to be very useful very 323.helpful. I think it’s quite often to 324.do with a sense of, I think love in 325.the therapeutic relationship is an 326.area that’s very scary for some 327.people to talk about and yet you 328.know the spirituality, you know, 329.if it starts at birth then, if you 330.look at the research that 331.Travarthin and other people did 334.on the mother and child bonds 335.then it’s a gleam in a mother’s 336.eye. There is no language that we 337.learn to speak later. It’s all on a 338.spiritual level and it carries on 339.and I think that is what people 340.want in therapy very often.

341.It is very often not the actual 342.language but it is a kind of 344.something non verbal... very 345.everyday something very human. 346.That happens that is later 347.reported as being very healing.

 Researchers: 348.And that leads me onto this as she feels that nothing exists without it. There is a strong spiritual identity.

The stilted and disjointed way that she is speaking makes it hard for me to understand her meaning.

That sense of failure may also extend to the clients and not only the supervisees.

I wonder if she is reassuring herself that she has been able to successfully deal with the subject of spirituality in a way that was helpful.

She then moves on to what therapy is about for her which is the bonds formed without language which for her is relational and spiritual. (This is the connection to counselling psychology).

She places the importance of healing in therapy on what happens in the non verbal space. Themes: the non verbal communication is the healing quality.
<table>
<thead>
<tr>
<th>Idea: Can you describe for me a particularly vivid example of what you might call a spiritual experience... can you relay something that seems to stand out for you as that?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Spiritual experience occurs during a bereavement</strong></td>
</tr>
<tr>
<td><strong>Participant:</strong> Probably a very obvious one is after my father died. I felt that he was around somehow and he stayed around. I don’t want to cry. It’s very emotional for me. He stayed around for about a year or so and I knew that he’d gone and it was a very emotional time for me yes. I am very emotional about it. The personal loss of her father brings up sad emotions for her in the interview. It’s interesting that she doesn’t want to cry. There is a pull for me internally to go into therapist mode. A difficult time of loss with what seems to be considerable distress.</td>
</tr>
<tr>
<td><strong>Researcher:</strong> I think I understand Spiritual experience aids ongoing development</td>
</tr>
<tr>
<td><strong>Participant:</strong> But it was very helpful and very wonderful and I learnt a lot and I think it helped me understand about attachment and loss, yeah. Is she saying that she ‘felt’ her father or saw her father? Attachment and loss are experiential rather than theory based and therefore without words.</td>
</tr>
<tr>
<td><strong>Researcher:</strong> I guess I am wondering if you, I know it is hard to, I could see the emotional in you telling me about that but I guess I am wondering if maybe we could try to get a little closer to the experience with language and I don’t know whether that is possible at all. What it felt like? I ask for more clarity though I think I understand that she is saying that she ‘knew’ her father was still around for her. That those attachment bonds can never be broken.</td>
</tr>
<tr>
<td><strong>Spiritual experience involved having a vision</strong></td>
</tr>
<tr>
<td><strong>Participant:</strong> It felt, well I would talk to him and he would sign back somehow... She and her father would continue to communicate to each other. (What are the signs?)</td>
</tr>
</tbody>
</table>
**Researcher:**
382. So would you see a vision of him?

<table>
<thead>
<tr>
<th>Spiritual experience involved having an ongoing emotional connection with the deceased</th>
</tr>
</thead>
</table>
| **Participant:**
383. Yes, yes, yes. So there was an ongoing connection and... I knew more that it was there once it had gone. Because reflecting back on it I could see there was a period of time where it seemed that he was still alive. I absolutely knew that he had died in his body. I saw him and so on and so forth. But there was a... he had more to teach me really. So I felt there was a, and I had things I needed to understand better and so it was a whole process of, it was a time of great life really even though it was about loss and death.

390. Absolutely.

400. I can’t remember... I didn’t have actually letting go experience but there was a period of time where I knew that he could go and he was, we sort of gone through what we needed to do. Yeah.

<table>
<thead>
<tr>
<th>She would see her father (visions). This is her experience after his death. This seems to be saying more about the quality of their relationship when he was alive. These spiritual phenomena made life more meaningful. This making sense of the experience helped with the process of grieving, loss and death.</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>A purpose for the spiritual experience</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>The work as spiritual experience</th>
</tr>
</thead>
</table>
| **Researcher:**
407. Thank you for sharing that.

| Can you think of a particularly vivid experience in your professional life that you might call a spiritual experience?

**Participant:**
408. All the time everybody I see [laughter] but you would like something particular and I. Yeah.

<p>| She felt some connection to the patient and her pain. She welled up (non- |</p>
<table>
<thead>
<tr>
<th>Therapist training teaches how to be in the work</th>
<th>verbal communication of empathy).</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Spiritual experience as a moment of connecting emotionally</strong></td>
<td>This changed the way the patient demonstrated being experienced by this therapist at this moment. (Behaviour change).</td>
</tr>
<tr>
<td><strong>Emotional connection facilitates healing</strong></td>
<td>They became real people to each other. (The moment changed both of them).</td>
</tr>
<tr>
<td><strong>Spiritual experience is a profound emotional connection</strong></td>
<td>At that moment healing began. The recognised feeling seemed to do more than words could do. They seemed to be using words to acknowledge rather than explain that something momentous had happened.</td>
</tr>
<tr>
<td><strong>Awe at witnessing the healing in the client</strong></td>
<td>Something about the shared experience was healing in a therapeutic way which she feels was a spiritual experience.</td>
</tr>
<tr>
<td><strong>Deep empathy as the healing component</strong></td>
<td>The patient was astonished at the experience.</td>
</tr>
</tbody>
</table>
like, in the empathy 459.of it and the counter 460.transference of it. Something 461.that she had held but perhaps 462.denied and was coming into our 463.relationship and I think she was 464.really astonished somehow.

Researcher:
465.I know that you are talking about 466.what happened for her. I 467.wondered if something 468.happened for you as a result of 469.what happened with her.

Participant::
470.Yes, absolutely. For me I looked 471.back at her in my speechless 472.moved state and watched her 473.actually connect with me. We 474.sat kind of in silence for a little 475.while realising something. Now 476.if that isn’t a spiritual moment I 477.don’t know what is. That’s the 478.spiritual moment where 479.something occurs that is very 480.healing. So I kind of, I got the 481.evidence as we continued 482.through our therapeutic 483.relationship but at that moment I 484.had, I saw that she was somehow 485.going ‘oh my God’ and I just 486.watched it. I was with her. Yes 487.for me I think it was one of, I felt 488.a very, ‘Oh my God’ kind of 489.experience. It is very difficult to 490.explain.

Researcher::
491.I saw your eyes light up and you 492.got a bit moved and it felt like 493.you conveyed to me with your 494.body and reaction something 495.that I don’t know whether I 496.heard with the words. Would 497.you say that could be, because I 498.don’t want to pick up something 499.from you

The therapist was speechless in the moment. The phenomena was able to be witnessed by the therapist. (Speechless).

Themes:
Silence is a space of realising ‘something’ of consequence was happening in the moment that was changing them both. She considers this a spiritual experience.

Themes: Awe (Oh my God) amazement that can’t be explained.

The therapist’s body and way of being changed.

Themes: the patients eyes and her eyes watched
The physical manifestation of the connection

The spiritual connection is powerful and unexpected

The frustration of trying to convey the experience and not being able to

Trust in the process

Feelings in therapy are both joyful and painful

| Participant:: 500. Well I think the light up in the 501. eyes I think that is the spiritual 502. moment of connection. Her eyes 503. and my eyes were somehow 504. making some kind of her feelings 505. and my feelings were somehow 506. meeting in the atmosphere and 507. my hands were meaning that it 508. was a coming together of 509. something I think. That's 510. perhaps how I would explain it. I 511. think she wasn't expecting that 512. kind of connections. I think she 513. was expecting, like a lot of 514. people, may be to be suggested 515. what would be best to do, or 516. maybe to be given some kind of 517. structured method of dealing 518. with her life better. None of that 519. was occurring of course. So she 520. was talking away as though 521. trying to get, but that moment 522. that's very spiritual moment of 523. kind of... I can’t explain it! It's 524. frustrating. It was a meaningful 525. moment and I think she then 526. trusted that I was somebody who 527. would be with her and 528. understand enough that I would 529. appreciate her enough. That I 530. would be somebody trustworthy, 531. that I was a human being. You 532. know I don’t think often in this 533. profession people don’t often 534. expect us to be so human. 535. Hmmm. There are lots of 536. moments I think like that. Not 537. necessarily where I am moved to 538. that extent but where there is a 539. moment of light a moment of... 540. and it is not always joyful it’s 541. quite painful sometimes but it 542. can also be joyful Joy! (laughter) |

| Theme: What changed the relationship is a quality of being with the other. |

| There is a frustration of trying to explain in a way to me that lets her feel that I understand and perhaps that she is understood. (Not judged like she had been with the supervisees?) |

| “people don’t expect cp’s to be human” (have emotions?). |

| Theme of trust is necessary. |

| Feelings of the experiences in therapy are both sometimes joyful and painful. |

| Theme of trust is necessary. |
### The qualities of spiritual experience are similar in private life and professional life

The struggle to incorporate psychology and spirituality

Viewing psychology as an art makes it possible

Construction of human beings as spiritual beings

Frustration at inability to make understandings known

---

**Researcher:**
543. Can you speak about any meaning that you might have made about these things that have occurred in both your professional life and your private life because the examples that you have given are very different that fall into the headings of this concept of spirituality. I am wondering what meaning you made from these very different kinds of experiences.

**Participant:**
555. It’s interesting that you say they are so different because I don’t.

**Researcher:**
557. Okay.

**Participant:**
558. They’re not categories to put into different files they are all linked in my mind as I talk to you. So they are, I think maybe that is why it is difficult to teach. Maybe that is why, and you know if you see psychology as an art as well as a science it can be incorporated but I think it’s quite difficult to. Everything we learn in psychology is linked but it is put into separate teaching areas with spirituality it also needs to do that but it’s linked to all the other areas. So I don’t think there is anything that isn’t to do with spirituality.

**Researcher:**
575. Okay.

**Participant:**
576. I am a spiritual being and so are you and you know it’s... Yeah so I don’t see them as spirituality incorporates all of life in her...
<table>
<thead>
<tr>
<th>Frustrated at being asked the question</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Confusion/Stumped</td>
<td></td>
</tr>
<tr>
<td>How do I answer the question?</td>
<td></td>
</tr>
<tr>
<td>separate.</td>
<td>My question has confused her as if my hearing them (phenomena) as separate could be a more true interpretation than hers. Is this the unknown because each person’s construction is unique to themselves?</td>
</tr>
<tr>
<td>579.I think what you are asking me</td>
<td></td>
</tr>
<tr>
<td>580.for is you are seeing these</td>
<td></td>
</tr>
<tr>
<td>581.different experiences that I am</td>
<td></td>
</tr>
<tr>
<td>582.talking about from my patients</td>
<td></td>
</tr>
<tr>
<td>583.and from me with patients</td>
<td></td>
</tr>
<tr>
<td>584.my personal life and you want a</td>
<td></td>
</tr>
<tr>
<td>585.kind of umbrella for it. How 586.</td>
<td></td>
</tr>
<tr>
<td>would you describe the meaning 587.of</td>
<td></td>
</tr>
<tr>
<td>spirituality that incorporates 588.all, you know, if these are so 589.different experiences. Gosh I’d 590.have to go away and think about 591.that it’s very hard. That’s a very 592.difficult question. Now I am 593.stumped to find an answer for 594.that except that I think they are 595.all connected and linked.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Spirituality is everything being connected</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Researcher:</td>
<td>I don’t want my interpretation to alienate her so I try with words to communicate my understanding which is truly more intuited then analysed.</td>
</tr>
<tr>
<td>596.I think that’s a very powerful 597.answer from you because, I don’t 598.know, what I am hearing. Let me 599.know whether I am hearing this 600.in the right way. Is... in the 601.beginning of your answer you 602.said... actually I don’t see them 603.as different but they are not they 604.are all actually connected and 605.actually that is what makes it 606.difficult to teach because it 607.covers this humanness of being. I 608.am a spiritual being. You are a 609.spiritual being is what I heard 610.you say. You are a spiritual being 611.and I suppose it is like me asking 612.you: What is the meaning of life? 613.I am alive you are alive. Did I get 614.that right?</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Spirituality is life</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Participant::</td>
<td>I am alive – You are alive. One can’t separate out that aliveness.</td>
</tr>
<tr>
<td>615.Absolutely,</td>
<td></td>
</tr>
<tr>
<td>Researcher::</td>
<td></td>
</tr>
<tr>
<td>616.So that is a very powerful...</td>
<td></td>
</tr>
</tbody>
</table>

181
| Social constructions can hinder ways of relating | Participant: 617....so it’s about, it covers so many 618.areas you know, it’s. If you look 619.at social constructions if you look 620.at philosophy if you look at how 521.we’ve managed to devise so 622.many things in life. Religion 623.being one of them but also all 624.aspects of life really, different 625.socialisation processes make for 626.different, but we are all human 627.actually. So if you come back to 628.the we’re all human that gets 629.closer to what I am talking about 630.I think. So that’s it’s a rather idea 631.of mine that we are all born in 632.the same fold, in the same, we 633.are all born good actually. But 634.some people would not agree 635.with it all. | constructions, philosophy and creation. Religion is included but not the same thing. Socialisation processes make for difference but we are all human beings. |
| Humanity is universal | | |
| Personal values = Person-centred construction – all people are good | | |
| Unclear on the use of intuition? | Participant: 636.Thank you for that. Do you draw 637.on this sort of this meaning or 638.these learnings in any way in 639.your professional life that you 640.have just talked about. 641.All the time, I don’t know if I do it 642.in a very thinking sort of way. I 643.think I do it in a very intuitive 644.sort of way. So that would be... 645.these things that I have learned 646.and experienced and keep 647.learning and experiencing open 648.to new things all the time and I 649.think they kind of, they’re all 650-floating around in a less obvious 651.or conscious way.... Is that what 652.you are kind of asking?  

Researcher:: 653.Yes, how do you now, at this 654.particular snap shot moment in 655.time, think about, talk about how 656.you experience this Everything she does in life is done is drawn from these beliefs and drawn on in an intuitive way. Consciously and unconsciously. | This is the same in both her personal and professional life. |
<p>| Intuition associated with the spiritual and the unconscious | | |</p>
<table>
<thead>
<tr>
<th>Spiritual experience as an intuitive experience</th>
<th>stuff in your professional life?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Participant:: 658. It is just at a completely intuitive, 659. I feel it something it's something 660. that goes on at a very intuitive 661. level I think.</td>
<td></td>
</tr>
<tr>
<td>Researcher:: 662. So a felt...</td>
<td></td>
</tr>
<tr>
<td>Participant:: 663. Felt, yes.</td>
<td></td>
</tr>
<tr>
<td>664. It's not so bodily aware I don't think. With me it's a kind of, I don't know... It's an emotional life. It's a mixture of things I think. But it's very, I don't know what intuition is really, but whatever intuition is I think it comes quite close to it.</td>
<td></td>
</tr>
<tr>
<td>Everything is done in a felt way.</td>
<td></td>
</tr>
<tr>
<td>It's done in an emotional life.</td>
<td></td>
</tr>
<tr>
<td>Intuition comes close to expressing the spiritual.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Intuition is felt experience as opposed to intellectual</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Researcher: 672. Yes...</td>
<td></td>
</tr>
<tr>
<td>Participant:: 673. Whatever intuition means, again it is very hard to people have written about intuition it is a kind of felt sense.</td>
<td></td>
</tr>
<tr>
<td>Researcher:: 677. Can I just be clear I heard you in the beginning of your answer. It is not something I think about but I don't know what else I am drawing on, I would say it was intuition.</td>
<td></td>
</tr>
<tr>
<td>Participant:: 680. I suppose it must go through my brain.</td>
<td></td>
</tr>
<tr>
<td>681. I suppose it must go through quite frankly but sometimes, for example have you ever had the experience in supervision</td>
<td></td>
</tr>
<tr>
<td>Countertransference as a spiritual phenomena. How is the client somehow understood or conceived of in a realistic way without being there. Phenomena happens all</td>
<td></td>
</tr>
<tr>
<td>phenomenon in therapy</td>
<td>The body as the primary communicator of subconscious transmission of client material</td>
</tr>
<tr>
<td>-----------------------</td>
<td>-------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>where 685. the client’s spoken about it in a 686. way and it can be quite involved, 687. quite a deep level, quite a lot of 688. issues and it has never been 689. spoken about with the client and 690. either a supervisee or as 691. supervisor it transpires that the... 692. it is as though the patient has 693. been there in the supervision. So 694. there is something that has gone 695. on in the therapy prior to the 696. supervision without being 697. discussed, without words and 698. language that has evolved that 699. has been spoken about....</td>
<td></td>
</tr>
<tr>
<td>of the time without language but something is understood.</td>
<td></td>
</tr>
<tr>
<td>Principal belief that all natural life is connected on a spiritual basis</td>
<td>Explanation for the spiritual as different states of conscious awareness</td>
</tr>
<tr>
<td>700. So it is that kind of thing and I am 701. not exactly sure where that has 702. come from... something in tone, 703. something in body language it 704. could be in any number of things 705. so we work in quite a not 706. knowing kind of way. In ways 707. that are quite powerful and I 708. think that is at a spiritual level. 709. But that is why it is kind of 710. everywhere. Because you don’t 711. have anything in human 712. endeavour without that, actually 713. if you look at other species they 714. also have it. So that’s a whole other story.</td>
<td></td>
</tr>
<tr>
<td>This is how animals live.</td>
<td></td>
</tr>
<tr>
<td>715. I’m just quickly going to have a 716. look at this. I’ve thought states 717. of different states of conscious awareness. It’s different stages of conscious awareness is what I was 718. thinking and I think I appreciate that more and more.</td>
<td></td>
</tr>
</tbody>
</table>

Researcher: 719. In relation to how you draw upon 720. them or covering this whole 721. discussion... tell me about 722. different states of conscious awareness.
<table>
<thead>
<tr>
<th>Training contributed to ongoing development of spiritual identity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Struggle to articulate the integration of psychological concepts and existing spiritual beliefs process</td>
</tr>
<tr>
<td>Validation of how therapy acts as spiritual healing through connection with another</td>
</tr>
<tr>
<td>The healing experience elevates the present experience to something different = transformation</td>
</tr>
<tr>
<td>Therapist acts as a transmitting device for healing</td>
</tr>
<tr>
<td>Healing is a shift in awareness</td>
</tr>
<tr>
<td>The mystery and awe contained in shifts of awareness</td>
</tr>
</tbody>
</table>

Participant:

723. Well, I think that goes back to 724. one of your earlier questions 725. about how did I learn about it.... I 726. think that I learnt in my 727. profession from the beginning 728. about different perceptions of self and others. Some of these, 730. yeah, I think that is what I mean. 731. Hard to explain again. But that 732. somebody can get an idea of, 733. different view of themselves and 734. feel so different and this can 735. happen at some extraordinary 736. time during the therapy. It is 737. something that is going on at 738. quite a spiritual level. Maybe in 739. between sessions or after the therapy.

740. Somebody I interviewed in my 741. research said she had many 742. issues and one of them was she 743. had lost her husband and we 744. were talking about how therapy 745. helped her. She said after the 746. therapy sometime after she had 747. a wonderful experience sitting 748. near water on a rock. It just 749. sounded very peaceful. I can’t 750. remember the exact experience 751. she said she had this absolutely 752. wonderful experience a kind of 753. heaven and earth meeting and 754. her in it and letting go, a kind 755. of letting go. A kind of really 756. lovely letting go of her husband 757. and she said she had suffered so 758. much until that point and it was 759. through, she felt it was to do 780. with the relationship she had 781. with her therapist and being able 782. to talk about it and it would have 783. been at some like some process, 784. at some spiritual level she was 785. able to then get hold of this level 786. of awareness and

Learned in the work and in the training about different perceptions of self.

Seeing oneself and getting a different view of oneself creates a different feeling state. (Thinking in symbols, symbols like Jung’s archetype).

Themes of loss reappear when discussing spirituality.

Connecting with nature in a state of peace.

This experience of heaven and earth meeting and experiencing letting go of a painful loss which was somehow allowed through the relationship that she had with her therapist.

Felt experiences seem to transfer across experiences along with the learning experiences?

Space and an ability to allow something into the space is important.
<table>
<thead>
<tr>
<th>Personal belief that in severe mental health work, spiritual awareness is important</th>
<th>allow it to 787.breathe and allow it space and it 788.sounded very healing for her and 789.she reported it as being a very 790.healing experience.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Awareness of different ways of communicating</td>
<td>791.A really wonderful experience 792.and then, so I mean, I think these 793.things these levels of awareness 794.of self perception which is what I 795.often work with, always actually 796.work with people and also 797.importantly I think it’s with more 798.long and enduring mental health 799.difficulties I think it is very 800.important to have a spiritual 801.awareness. Ways of 802.communicating can vary and 803.being with somebody in a 804.spiritual dimension (laughter) is 805.parcially important and being 806.very sensitive to those levels of 807.awaren ess so that you are with 808.those levels of awareness.... as 809.they can be developed and 810.processed and spoken about 811.even not spoken about.</td>
</tr>
<tr>
<td>Spoken vs unspoken ways of communicating</td>
<td>812.Have I come anyway near to answering your question?</td>
</tr>
<tr>
<td>Ongoing development of understanding the place for spirituality in therapy</td>
<td>Researcher:: 813.I think so. I believe so.</td>
</tr>
<tr>
<td>Spirituality important in working with those without hope</td>
<td>Participant:: 814.It’s also very important I thought 815.before I saw you working with 816.people who are, for example, 817.have suicidal thoughts or who 818.have had suicidal plans because 819.of hope I think to put it bluntly 820.and there is something that goes 821.on or that can go on I think 822.where something unspoken 823.happens where that very.... that 824.person who is going into quite a 825.deeper level of suicidal</td>
</tr>
<tr>
<td>The struggle to articulate and make sense of what happens in the therapeutic relationship</td>
<td>These are all considered awarenesses. It seems to come back to allowing a quality of connecting or being with. Communicating this readiness to receive or enter into connecting with or without words.</td>
</tr>
<tr>
<td>How different models treat the subject of spirituality</td>
<td></td>
</tr>
<tr>
<td>Avoidance of naming the spiritual dimension of relationship</td>
<td>This spiritual quality of connecting or conveying hope by the connection can be helpful for those in complete despair such as working with suicidal patients. Those who have given up all hope in themselves.)</td>
</tr>
<tr>
<td></td>
<td>In training it is important to grasp this quality of the spiritual (meaning?) and understand how to draw on it and use it in the work. These aspects of relating is to be called something different in each model but she seems to be meaning that spiritual element would</td>
</tr>
</tbody>
</table>
Struggle to make meanings understood

Spirituality as a communication between therapist and client

thoughts 826. can get some kind of light. I 827. don’t know how else to explain it 828. and that can go on between 829. therapist and client or patient 830. and I think that’s, it’s very 831. important to have that spirit… I 832. feel quite strongly that all models 833. need to incorporate a spiritual 834. dimension. With CBT you would 835. call it calibration and there would 836. be a relationship, a relational 837. aspect and I think that’s what we 838. draw on and I think with 839. psychoanalysis or psychodynamic 840. therapy the same thing. Very 841. much so with person centred 842. therapy. It’s quite an existential 843. kind of thing spirituality in fact.

Researcher::
844. That seems to be, I think I was 845. hearing you say that hope is, I 846. don’t know if this is my 847. interpretation so please let me 848. know. You feel that hope is 849. another dimension of spiritual 850. communication of humanity and 851. people who are in a desperate 852. state about living, was it 853. something like that?

Participant::
854. Can you say the first bit again, sorry

Researcher::
855. That hope is some kind of 856. element in this spiritual, in the 857. spirituality hope is a particular 858. element of that a particularly 859. useful element for people who 860. are in this very desperate state of 861. suicidality, or suicide.

862. Hope is very important

Hope is a quality of
<table>
<thead>
<tr>
<th>Spirituality</th>
<th>Participant:: 863. Yes, it’s a part of the spirituality 864. that hope is a part of that</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Researcher:: 865. Yes... Did I get that right?</td>
</tr>
<tr>
<td></td>
<td>Participant:: 866. ....get that right...</td>
</tr>
<tr>
<td></td>
<td>Researcher:: 867. That is what I wondered.</td>
</tr>
<tr>
<td></td>
<td>Participant:: 867. Yes, I think so.</td>
</tr>
<tr>
<td></td>
<td>Researcher:: 868. It is very important I think. Thank you.</td>
</tr>
<tr>
<td></td>
<td>869. So our final question is, under 870. what circumstances would you 871. draw upon any of these thoughts 872. or understandings 873. that you have 873. had and talk about them in supervision.</td>
</tr>
<tr>
<td></td>
<td>Participant:: 874. Oh yes absolutely, I do, I have as 875. a supervisee and I have as a supervisor.</td>
</tr>
<tr>
<td></td>
<td>Researcher: 876. And how have you found that experience?</td>
</tr>
<tr>
<td></td>
<td>Participant: 877. Good, very good.</td>
</tr>
<tr>
<td></td>
<td>878. Can you say in what way or give an example?</td>
</tr>
<tr>
<td></td>
<td>879. Both as a supervisee and as a 880. supervisor how can I say. I think 881. there is a kind of, there is a 882. strong felt sense of the client and 883. of the relationship of all the people involved in the room.</td>
</tr>
</tbody>
</table>

| Disorientation at trying to communicate the unnameable | Would emphatically speak in supervision about these things. Both as a supervisor and as a supervisee. (Perhaps because she is comfortable with the concepts related to the spiritual?) |

<table>
<thead>
<tr>
<th>Positive spiritual identity can be shared</th>
<th>Is trust part of this “felt” sense?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sharing spiritual experience can be a validation of identity</td>
<td></td>
</tr>
<tr>
<td>Trust enables the felt connection</td>
<td></td>
</tr>
</tbody>
</table>
| Professionals and clients relational histories interact | Researchers: 885.Okay.  
Participant: 886.So you know, like Carol says in supervision there are so many people who walk through the room. So there is the therapist, the therapist’s people and all the therapists bring and their experiences and there are the supervisor and all the people and experiences they bring and there is the client and all the people and experiences they bring and the interrelationship that goes on and when you think how much goes on in a one hour or a one-to-one or a supervision session. Many people will have been there in a sort of spiritual sense and in quite a real sense as well because that is where great learning and all the kind of, yeah. 906 Everybody goes away affected. 907.Now that is a spiritual part of it as well. There is no communication without some affect taking place and this in my research I found this and I thought this I think is sort of. 913.Can you have a look at it or read it out somehow.  

| The ‘being’/intelligence of all connections meet in supervision? | We bring all of our concepts of self and others including what we have made of our meaningful connections to each encounter we have to supervision.  
She seems to be saying that according to her all relationships are spiritual so that all of these experiential relationships are a part of us and brought into our encounters both as therapist with the patient and as supervisor or supervisee. All if this is done in a felt way. (“There is no communication without affect taking place”).  

| Historical internalised memories of others connect in present relationships | This poem expresses for me the essence of spirituality is that each meeting with someone is a connection and this connection could be called spiritual. Love is the essential feeling that is given? (As therapists?)  
Love is the essential thing in the work regardless of the label that therapists are given.  

| The power of metaphor to communicate what cannot be explained |  
Participant: 916.There is a kind of food taken through the mouth. Bits of knowing that nourishes love, the body and human personality from the cup of love. Every time you meet someone something is poured in. Rumi 1991 page 50.  

| Spiritual identity and professional identity inform meaning of life |  

<p>| Professional label |</p>
<table>
<thead>
<tr>
<th>---</th>
<th>---</th>
</tr>
</thead>
<tbody>
<tr>
<td>dismissed</td>
<td>Participant: 923. That is what I think at the beginning of when I started psychology and then became a psychologist whatever we are called now by the Health Professionals Council. But I think this is what is developing in me. 930. This is developing and I think it’s always kind of been there but I think I am learning it more as I go and I am appreciating it more in my work.</td>
</tr>
<tr>
<td>Personal development ongoing</td>
<td>The interview was really a snippet. One can’t convey everything with words in this subject as it is too complex and too big.</td>
</tr>
<tr>
<td>The impossibility of containing the complexity of spirituality</td>
<td>She had been worried about the wording of the questions and worried that she wouldn’t be able to speak about her thoughts on this in a way that was accepted?</td>
</tr>
<tr>
<td>Fear of exposure</td>
<td>She instead found the interview rewarding. She had also worried that the questions were entrapping. Was the trust created which allowed her to speak. Was the space created to allow openness?</td>
</tr>
<tr>
<td>Talking about the spiritual beliefs is rewarding</td>
<td>The use of language can be entrapping and open to negative interpretation.</td>
</tr>
<tr>
<td>The questions are entrapping</td>
<td></td>
</tr>
<tr>
<td>Putting the experience into language is threatening</td>
<td></td>
</tr>
<tr>
<td>Speaking about spiritual experiences is meaningful</td>
<td></td>
</tr>
</tbody>
</table>
Feeling accepted allows for open expression.

Physical symbols are interpreted as spiritual signs which continue the ongoing spiritual learning.

Symbols represent the ongoing connection with important lost other.

Participant:
May be this, we touched 964.on this in the teaching.
965.The language almost contains... 966.or traps it in a way that doesn't 967.allow for the openness of it all. 968.That was in one of my thoughts.

She felt able to say that one of the communications she thought she received from her father was physical symbols like feathers which represented his being there for her in spirit if not in body.

Participant:
969.It sounds kind of mad but it 970.actually is not, it's meaningful, 971.and its purposeful and important 972.and valuable but when I said 973.signs earlier talking about my 974.father, it was like it would be in 975.light. It would be in actual light 976.often coming through clouds. Or 977.it would be signs... well it was a 978.Robin at one stage which came 979.to the garden. There would be 980.various signs that... it is a bit 981.difficult to talk about because it 982.always sounds like... of the wall. 983.But these were very important to 984.me at the time and so I always 985.knew that this was part of the 986.kind of close learning experience 987.that I was continuing with him and needed to.

Our beliefs were similar. I left the role of researcher to perhaps relieve her from feeling exposed or regretting doing the interview.
Appendix 5

Transcript No. 5 – Susan

**Interviewer:**
Thank you so much for agreeing to participate in this interview to explore this subject and I suppose, I guess I want to ask you just the first question, and we can take it from there and that question is, what does the term spirituality mean to you?

**Interviewee:**
It’s a very broad question. I have been trying to think about it for some time before you arrived. It made me consider how much I’ve thought about spirituality in my time as a therapist which is, I suppose including my training, fourteen years now and I think when I started out I wasn’t very... I, you know, thought of spirituality as a rather slightly scary thing something to do with... I must be very religious and because my family come from very diverse religions. Some are Christian some are Jewish some are other religious leanings and faiths. I sort of thought spirituality had to be something religious... so I was a bit... and then as time went on I realised that I think I realised that I have a great appreciation, a natural appreciation of different faiths and cultures.

But then I started to think about... I think as early in my training about counselling psychology as something to do with something that goes on beyond what is known and beyond... like we are sitting here talking. There is something going on that goes on between us that we kind of create together. There’s a felt sense. There’s a not knowing that kind of then evolves into something between people and I became much more interested in... I think I always have been without really knowing it but through seeing people and through my training and thought experience of working with many different diverse groups I started to appreciate more about that which is very hard to put into a language and that which is a bodily felt sense and so there are different dimensions to people that I then... I think I’ve had an inkling about all my life. But then became more real for me.

So spirituality it’s not easy to define.

**Interviewer:**
Because my second part of that question is: How did that come about for you, this, I guess hard to define concept of this term?

**Interviewee:**
A greater understanding hmm... Well I think right from the beginning when I started being a therapist I began to realise that there’s something that comes from the person that I liked to... I could somehow pick up, and that was the most important thing about the therapy. I mean you’re taught all the different models and skills and so on and so forth. But I think that sense of connection that sense of... It’s very hard to... embeddedness something that goes on. The relational side I suppose, is what makes it things spring from that that don’t in any other way and I think every model, every therapeutic relationship has that and it’s a bit like... I was thinking it is a bit like, you know, people for as long as we’ve ever had recorded have tried to describe what it is to fall in love and its outer planetary, it’s very hard to describe and many people have tried. It’s something that goes beyond us and so I think many people who come to therapy I think.

If we talk about patients or clients have a need to find a sense of kind of belonging of being with of identifying with and I think those things go on in quite a spiritual way because... things go beyond
the words spoken and they’re very rarely spoken about in the therapeutic relationship and sometimes in supervision I think it is spoken about but even there it is fairly rare.

Can you remind me of the question again? How did I get to become aware of spirituality.

**Interviewer:**
As it stands for you today that concept.

**Interviewee:**
Learning from my clients I think... and I think, you know, as a child I always had that with my mother, I was, I had a close relationship with my own mother and I think that has been helpful and I think that is probably where that kind of... some people are perhaps more gifted than others. Perhaps it springs from some kind of close relationship or caring for somebody or being cared for. Some sense of closeness and belonging, attachment that helps that kind of development.

I think people who come to therapy want that and I think in my own therapy experience, I think I got that because I had a sense of my therapist and I having something that was my own that helped me. You know, she would be with me when she wasn’t there and people who I’ve interviewed about their therapeutic experience in my own research have said, *You know it really helped me after therapy to have a kind of spiritual sense of what it was like to be with my therapist. That’s helped me to keep doing the work and keep healing*. That’s helped me to keep doing the work and keep healing’.

So I think that my experience of life, my experience or bereavement. I think importantly helped me understand about spirituality and then I think all these experiences have helped me in a sense in my professional world to open up more and more to the idea that people have extraordinary experiences that I may not know about or understand even, but that I need to appreciate. So a kind of conglomerate, if that is the right word, a kind of amalgamation of experiences and I’m still learning. I don’t think it is something that you ever achieve or get to a sort of end point with. I think it is something that you grow, you grow with or it develops it’s a continual development I think.

**Interviewer:**
You said that this experiential something so far as I have understood...

**Interviewee:**
Yes...

...that it is rarely spoken about sometimes in supervision.

**Interviewee:**
Hmmm...

**Interviewer:**
I wondered if you could elaborate on that a little.

**Interviewee:**
I think it’s why I chose counselling psychology is because I’ve learnt so much in my psychology degree. That is not to make it special or derogatory of any other degree or any other learning. But for example I like the idea of context and I think for example if you think about shamans and the way they need to speak to... they have voices they hear things they have an appreciation of what goes on
in our mines the kind of auditory all the different kind of feeling states. Now I think very often it’s, how can I say. I think there can be a misunderstanding of patients who are suffering particular problems particularly at the more severe end. It’s very involved but people taken in context will have a certain way from their own learning and development and the constraints and difficulties in their own lives of being able to verbalise what they are experiencing. I think without that idea of context, environment, past experience who they are as people in the world. It’s very difficult it can be hard not to kind of put them in a tight spot, in a diagnostic tight spot that may not always be that helpful. At least it might be helpful to have a diagnosis and all that goes with it from psychiatry, psychology and so on. But I think in the event of giving therapy to somebody it’s very important to have a very open mind to that person’s own experiences and believe in them and it covers, it’s a huge area.

You say you are picking up on the idea that it is not spoken about much, which I think, yes, I think the training is limited. I think the research is limited. I think it is a good piece of research that you are doing. It may be to do with the fact that it needs to be a science. I don’t think clinical psychology would touch this. I think counselling psychology it’s a good opening for counselling psychology because we do understand we’re part of the process as therapist in research and we do, we are open to the human element of being a relationship with somebody who is suffering or has, you know, at all levels of difficulty and problem and mental health.

So I think it is a good opening for, and I don’t know why it is not spoken about more. I mean I have tried mindfulness techniques with... what are they called... skills or guided imagery and listening to your own self with supervisees and it hasn’t always gone down very well. It does with patients and clients and I am introducing that more and more into my work. I don’t know whether it’s people learning on a course trainees. Perhaps they feel they want knowledge that it written down and more knowing more structured somehow more. They can grasp hold of easily and then write about.... test and assessed. I don’t know if that is the reason and it seems.... theory bound and I don’t think spirituality is necessarily very theory bound. People have tried to write about it. Rollo May, Jung, Patricia Clarkson. Lots of people I could think of. So it’s alluded to but I am not sure if there is enough maybe specifically to do with spirituality and the idea of faith.

Having said that about religion there are some religions... you know, I could write an essay about religion being the opium of the masses where there are cultural things like... I have just been to the Middle East. Women are treated appallingly... it just brings out the feminist side of me and I just think, you know, I can’t agree with the way women and children are treated. So I think maybe even religion can be slightly, a kind of, off putting to the idea of spirituality and all that it might mean in general.

_I interviewer:_
I just wondered if I could clarify a little bit, the bit that you said that you tried the mindfulness techniques and guided imagery and suchlike with supervisees and it hasn’t gone down very well. I wondered how that looks when it doesn’t go down very well.

_I interviewee:_
Not good.

_I interviewer:_
Can you..

_I interviewee:_

194
Because, I did trauma training and I worked with trauma for five years and the thing about trauma is it can affect a person in quite a spiritual way.

So the trauma will occur and it can bring up all kinds of other traumas. I can remember with one patient I came out of the session and felt very, almost faint, and I think I’d picked up images, feelings as though I had almost been there with him. It was a terrible case and, an unusual case, and I came and it was to do with a murder and I came out and I felt quite heady and quite faint. I am not a fainter and so there was a kind of a whole dimension to this that I’d. So in the training we have lots of mindfulness training so that we can, as therapists working with trauma, learn how to offset some of the kind of what you might call the vicarious trauma that can occur for the therapist. So for years I learnt...

**Interviewer:**
The depression...

**Interviewee:**
Yes, anyway and they are very, very useful and I am not sure I am doing that more with patients and clients and they can take that out with them and use those things as they see fit. Are you asking what I made of it when supervisees don’t like it.

**Interviewer:**
Yes, how did they say, do they say *I don’t like it*. You said it didn’t go down very well so I wasn’t very clear about what that meant.

**Interviewee:**
It was just this one set of, one set of supervisees who said, I got some feedback and they just said it was just a bit boring. It just wasn’t really. You know they wanted to learn about their clients and talk about their client issues. It was as though it was something... I experienced it as quite naive, was as though.... and I felt quite... I felt I hadn’t got it right somehow. A sense that I don't know a failure or shame it was quite a powerful experience.... as though, that’s rubbish that’s not really doing what a supervisor should do. So it was quite an interesting... experience I had. That is the only time.

I think it showed me something about training I think different trainings can be very, quite powerfully different and so some will incorporate relational aspects such as spirituality. Actually there’s nothing without spirituality you know it’s getting the different meanings of spirituality is very important in supervision I think and it very often spills, of course, the idea of supervision is that it spills back to the client in beneficial ways. So it was very interesting that it felt quite stuck at that moment. But I have tried it with other supervisees who have incorporated it and have gone on to learn not only about themselves but take it to their clients and fed back that it seemed to be very useful very helpful. I think it’s quite often to do with a sense of, I think love in the therapeutic relationship is an area that’s very scary for some people to talk about and yet you know the spirituality, you know, if it starts at birth then, if you look at the research that Trevarthen and other people did on the mother and child bonds then it’s a gleam in a mother’s eye. There is no language that we learn to speak later. It’s all a spiritual level and it carries on and I think that is what people want in therapy very often.

It is very often not the actual language but it is a kind of something non verbal... very everyday something very human. That happens that is later reported as being very healing.

**Interviewer:**
And that leads me onto this idea of... can you describe for me a particularly vivid example of what you might call a spiritual experience... can you relay something that seems to stand out for you as that?

_interviewee:_
Probably a very obvious one is after my father died. I felt that he was around somehow and he stayed around. I don’t want to cry. It’s very emotional for me. He stayed around for about a year or so and I knew that he’d gone and it was a very emotional time for me yes. I am very emotional about it.

_interviewee:_

_interviewer:_
I think I understand

_interviewee:_
But it was very helpful and very wonderful and I learnt a lot and I think it helped me understand about attachment and loss, yeah.

_interviewer:_
I guess I am wondering if you, I know it is hard to, I could see the emotional in you telling me about that but I guess I am wondering if maybe we could try to get a little closer to the experience with language and I don’t know whether that is possible at all. What it felt like?

_interviewee:_
It felt, well I would talk to him and he would sign back somehow...

_interviewer:_
So would you see a vision of him?

_interviewee:_
Yes, yes, yes. So there was an ongoing connection and... I knew more that it was there once it had gone. Because reflecting back on it I could see there was a period of time where it seemed that he was still alive. I absolutely knew that he had died in his body. I saw him and so on and so forth. But there was a... he had more to teach me really. So I felt there was a, and I had things I needed to understand better and so it was a whole process of, it was a time of great life really even though it was about loss and death.

I can’t remember... I didn’t have an actually letting go experience but there was a period of time where I knew that he could go and he was, we sort of gone through what we needed to go through. Yeah.

_interviewer:_
Thank you for sharing that.

Can you think of a particularly vivid experience in your professional life that you might call a spiritual experience?

_interviewee:_
All the time everybody I see [laughter] but you would like something particular and I. Yeah.

Maybe think of somebody I saw not that long ago. I’m quite experienced and we are taught not to disclose and not to be emotional and it’s not about us it’s about the patient, of course it is. But it
was a moment that somebody. A very lovely patient said and she had been very very busy in our therapy and it was hard to get this... I was really reaching out to her and she said to me, I was asking how she was seeing herself and... reasonably near the beginning of therapy and she said: well I think of everything that I am not and I didn’t say anything. I just welled up in my eyes. I looked at her and she gave me such a strange look for once she didn’t keep talking keep talking keep talking. She looked at me and she said something like wow and I said you know, I didn’t weep. She could see that I had been very affected and it was an absolute turning point in our relationship because she had never seen. She had not thought that I would be affected and it made her think and it changed everything changed. She, we made a, some kind of a... and do you know what happened she had been very very ill for many many years and she started to, it was, she started to heal physically and she said I just can’t believe this is happening and I think it is something to do with a human element that she understood that I was listening in kind of more much more feeling something that she had not allowed herself to feel that she, I was picking up her experience I think, if you like, in the empathy of it and the counter transference of it. Something that she had held but perhaps denied and was coming into our relationship and I think she was really astonished somehow.

Interviewer:
I know that you are talking about what happened for her. I wondered if something happened for you as a result of what happened with her.

Interviewee:
Yes, absolutely. For me I looked back at her in my speechless moved state and watched her actually connect with me. We sat kind of in silence for a little while realising something. Now if that isn’t a spiritual moment I don’t know what is. That’s the spiritual moment where something occurs that is very healing. So I kind of, I got the evidence as we continued through our therapeutic relationship but at that moment I had, I saw that she was somehow going ‘oh my God’ and I just watched it. I was with her. Yes for me I think it was one of, I felt a very, ‘Oh my God’ kind of experience. It is very difficult to explain.

Interviewer:
I saw your eyes light up and you got a bit moved and it felt like you conveyed to me with your body and reaction something that I don’t know whether I heard with the words. Would you say that could be, because I don’t want to pick up something from you that isn’t yours.

Interviewee:
Well I think the light up in the eyes I think that is the spiritual moment of connection. Her eyes and my eyes were somehow making some kind of her feelings and my feelings were somehow meeting in the atmosphere and my hands were meaning that it was a coming together of something I think. That’s perhaps how I would explain it. I think she wasn’t expecting that kind of connections. I think she was expecting, like a lot of people, may be to be suggested what would be best to do, or maybe to be given some kind of structured method of dealing with her life better. None of that was occurring of course. So she was talking away as though trying to get, but that moment that’s very spiritual moment of kind of... I can’t explain it! It’s frustrating. It was a meaningful moment and I think she then trusted that I was somebody who would be with her and understand enough that I would appreciate her enough. That I would be somebody trustworthy, that I was a human being. You know I don’t think often in this profession people don’t often expect us to be so human. Hmmmm. There are lots of moments I think like that. Not necessarily where I am moved to that extent but where there is a moment of light a moment of... and it is not always joyful it’s quite painful sometimes but it can also be joyful Joy! [laughter]
Can you speak about any meaning that you might have made about these things that have occurred in both your personal life and your private life because the examples that you have given are very different that fall into the headings of this concept of spirituality. I am wondering what meaning you made from these very different kinds of experiences.

**Interviewee:**
It’s interesting that you say they are so different because I don’t.

**Interviewer:**
Okay.

**Interviewee:**
They’re not categories to put into different files they are all linked in my mind as I talk to you. So they are, I think maybe that is why it is difficult to teach. Maybe that is why, and you know if you see psychology as an art as well as a science it can be incorporated but I think it’s quite difficult to. Everything we learn in psychology is linked but it is put into separate teaching areas with spirituality it also needs to do that but it’s linked to all the other areas. So I don’t think there is anything that isn’t to do with spirituality.

**Interviewer:**
Okay.

**Interviewee**
I am a spiritual being and so are you and you know it’s... Yeah so I don’t see them as separate.

I think what you are asking me for is you are seeing these different experiences that I am talking about from my patients and from me with patients and in my personal life and you want a kind of umbrella for it. How would you describe the meaning of spirituality that incorporates all, you know, if these are so... different experiences. Gosh I’d have to go away and think about that it’s very hard. That’s a very difficult question. Now I am stumped to find an answer for that except that I think they are all connected and linked.

I think that’s a very powerful answer from you because, I don’t know, what I am hearing. Let me know whether I am hearing this in the right way. Is in the beginning of your answer you said... actually I don’t see them as different but they are not they are all actually connected and actually that is what makes it very difficult to teach because it covers this humanness of being. I am a spiritual being. You are a spiritual being is what I heard you say. You are a spiritual being and I suppose it is like me asking you: What is the meaning of life? I am alive you are alive. Did I get that right?

**Interviewee:**
Absolutely,

**Interviewer:**
So that is a very powerful...

**Interviewee:**
...so it’s about, it covers so many areas you know, it’s. If you look at social constructions if you look at philosophy if you look at how we’ve managed to devise so many things in life. Religion being one of them but also all aspects of life really, different socialisation processes make for different, but we are all human actually. So if you come back to the... we’re all human that gets closer to what I am
talking about I think. So that’s it’s a rather idea of mine that we are all born in the same fold, in the same, we are all born good actually. But some people would not agree with it all.

_Interviewer:_
Thank you for that. Do you draw on this sort of this meaning or these learnings in any way in your professional life that you have just talked about.

All the time, I don’t know if I do it in a very thinking sort of way. I think I do it in a very intuitive sort of way. So that would be... these things that I have learned and experienced and keep learning and experiencing open to new things all the time and I think they kind of, they’re all floating around in a less obvious or conscious way.... Is that what you are kind of asking.

_Interviewer:_
Yes, how do you now at this particular snap shot moment in time think about talk about how you experience this stuff in your professional life.

_Interviewee:_
It is just at a completely intuitive, I feel it something it’s something that goes on at a very intuitive level I think.

_Interviewer:_
So a felt...

_Interviewee:_
Felt, yes.

It’s not so bodily aware I don’t think. With me it’s a kind of, I don’t know... It’s an emotional life. It’s a mixture of things I think. But it’s very, I don’t know what intuition is really, but whatever intuition is I think it comes quite close to it.

_Interviewer:_
Yes...

_Interviewee:_
Whatever intuition means, again it is very hard to people have written about intuition it is a kind of felt sense.

_Interviewer:_
Can I just be clear I heard you in the beginning of your answer. It is not something I think about but I don’t know what else I am drawing on, I would say it was intuition.

_Interviewee:_
I suppose it must go through my brain.

I suppose it must go through quite frankly but sometimes, for example have you ever had the experience in supervision where the client’s spoken about it in a way and it can quite involved quite a deep level quite a lot of issues and it has never been spoken about with the client and either a supervisee or as supervisor it transpires that the... it is as though the patient has been there in the supervision. So there is something that has gone on in the therapy prior to the supervision without being discussed, without words and language that has evolved that has been spoken about....
So it is that kind of thing and I am not exactly sure where that has come from... something in tone, something in body language it could be in any number of things so we work in quite a not knowing kind of way. In ways that are quite powerful and I think that is at a spiritual level. But that is why it is kind of everywhere. Because you don’t have anything in human endeavour without that, actually if you look at other species they also have it. So that’s a whole other story.

I’m just quickly going to have a look at this. I’ve thought states of different states of conscious awareness. It’s different stages of conscious awareness is what I was thinking and I think I appreciate that more and more.

**Interviewee:**
In relation to how you draw upon them or covering this whole discussion... tell me about different states of conscious awareness.

**Interviewer:**
Well, I think that goes back to one of your earlier questions about how did I learn about it.... I think that I learnt in my profession from the beginning about different perceptions of self and others. Some of these, yeah, I think that is what I mean. Hard to explain again. But that somebody can get an idea of, different view of themselves and feel so different and this can happen at some extraordinary time during the therapy. It is something that is going on at quite a spiritual level. Maybe in between sessions or after the therapy.

Somebody I interviewed in my research said she had many issues and one of them was she had lost her husband and we were talking about how therapy helped her. She said after the therapy sometime after she had a wonderful experience sitting near water on a rock. It just sounded very peaceful. I can’t remember the exact experience she said she had this absolutely wonderful experience a kind of heaven and earth meeting and her in it and letting go, a kind of letting go. A kind of really lovely letting go of her husband and she said she had suffered so much until that point and it was through, she felt it was to do with the relationship she had with her therapist and being able to talk about it and it would have been at some like some process, at some spiritual level she was able to then get hold of this level of awareness and allow it to breath and allow it space and it sounded very healing for her and she reported it as being a very healing experience.

A really wonderful experience and then, so I mean, I think these things these levels of awareness of self perception which is what I often work with, always actually work with people and also importantly I think it’s with more long and enduring mental health difficulties I think it is very important to have a spiritual awareness. Ways of communicating can vary and being with somebody in a spiritual dimension (laughter) is particularly important and being very sensitive to those levels of awareness so that you are with those levels of awareness.... as they can be developed and processed and spoken about even not spoken about.

Have I come anyway near to answering your question?

**Interviewer:**
I think so. I believe so.

**Interviewee:**
It’s also very important I thought before I saw you working with people who are, for example, have suicidal thoughts or who have had suicidal plans because of hope I think to put it bluntly and there is something that goes on or that can go on I think where something unspoken happens where that very that person who is going into quite a deeper level of suicidal thoughts can get some kind of
light. I don’t know how else to explain it and that can go on between therapist and client or patient and I think that’s, it’s very important to have that spirit.... I feel quite strongly that all models need to incorporate a spiritual dimension. With CBT you would call it calibration and there would be a relationship a relational aspect and I think that’s what we draw on and I think with psychoanalysis or psychodynamic therapy the same thing. Very much so with person centred therapy. It’s quite an existential kind of thing spirituality in fact.

**Interviewer:**
That seems to be, I think I was hearing you say that hope is, I don’t know if this is my interpretation so please let me know. You feel that hope is another dimension of spiritual communication of humanity and people who are in a desperate state about living, was it something like that?

**Interviewee:**
Can you say the first bit again, sorry

**Interviewer:**
That hope is some kind of element in this spiritual, in the spirituality hope is a particular element of that a particularly useful element for people who are in this very desperate state of suicidality, or suicide.

Hope is very important

**Interviewee:**
Yes, it’s a part of the spirituality that hope is a part of that

**Interviewer:**
Yes... Did I get that right?

**Interviewee:**
...get that right...

**Interviewer:**
That is what I wondered.

**Interviewee:**
Yes, I think so.

**Interviewer:**
It is very important I think. Thank you.

So our final question is, under what circumstances would you draw upon any of these thoughts or understandings that you have had and talk about them in supervision.

**Interviewee:**
Oh yes absolutely, I do, I have as a supervisee and I have as a supervisor.

**Interviewer:**
And how have you found that experience?

**Interviewee:**
Good, very good.
Can you say in what way or give an example?

Both as a supervisee and as a supervisor how can I say. I think there is a kind of, there is a strong felt sense of the client and of the relationship of all the people involved in the room.

_Interviewer:_
Okay.

_Interviewee:_
So you know, like Carol says in supervision there are so many people who walk through the room. So there is the therapist, the therapist’s people and all that the therapists bring and their experiences and there are the supervisor and all the people and experiences they bring and there is the client and all the people and experiences they bring and the interrelationship that goes on and when you think how much goes on in a one hour or a one-to-one or a supervision session. Many people will have been there in a sort of spiritual sense and in quite a real sense as well because that is where great learning and all the kind of, yeah. Everybody goes away affected. Now that is a spiritual part of it as well. There is no communication without some affect taking place and this in my research I found this and I thought this I think is sort of. Can you have a look at it or read it out some how.

_Interviewer:_
This thing here

_Interviewee:_
There is a kind of food taken through the mouth. *Bits of knowing that nourishes love, the body and human personality from the cup of love. Every time you meet someone something is poured in.* Rumi, 1991: 50.

_Interviewee:_
That is what I think at the beginning of when I started psychology and then became a psychologist whatever we are called now by the Health Professionals Council. But I think this is what is developing in me. This is developing and I think it’s always kind of been there but I think I am learning it more as I go and I am appreciating it more in my work.

_Interviewer:_
That is such a wonderful thing to end on. I wonder if there are anything that has a bearing on this interview perhaps or this topic that you feel you would like to say that I haven’t asked your about. That I haven’t covered?

_Interviewee:_
Well I think like the interview is really a snippet. You will go and I will think I could have said this and I could have said that. I hope I came across with.... because it is such a huge area. For some reason I think being interviewed is always a little bit, you know, when I looked at the questions I thought I hope I can answer these the way I would like to the way that would be helpful and so on. I must say I was a little bit what is the word, concerned that I wouldn’t be able to... But I found the interview rewarding in much easier....
Interviewer:
You said that you found the questions a bit... in the beginning you thought they might be entrapping at times. What do you find...

Interviewee:
Well I think it is a subject that it is hard to put language to that is why. May be this, we touched on this in the teaching. The language almost contains... or traps it in a way that doesn’t allow for the openness of it all. That was in one of my thoughts.

Interviewee:
It sounds kind of mad but it actually is not it’s meaningful, and its purposeful and important and valuable but when I said signs earlier talking about my father, it was like it would be in light. It would be in actual light often coming through clouds. Or it would be signs... well it was a Robin at one stage which came to the garden. There would be various signs that... it is a bit difficult to talk about because it always sounds like... of the wall. But these were very important to me at the time and so I always knew that this was part of the kind of close learning experience that I was continuing with him and needed to.