# GROWTH PROCESSES OF
# SEASONED MARRIAGE AND FAMILY THERAPISTS
# WHO TAKE A SPIRITUAL APPROACH TO THERAPY


By

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## ABSTRACT

The growth processes of seasoned marriage and family therapists who take a spiritual approach

to therapy were explored using a qualitative phenomenological research approach. Three

therapists, who met the above descriptors, were interviewed. Data analysis identified common

themes in the stories of the participants. Participants identified one's personal spiritual journey

as having the greatest impact on one's ability to integrate spirituality and psychotherapy.

Significant events and influential resources were the two themes that typified the factors that

shaped the personal spiritual journeys of the participants. A number of common subcategories

were found within those two categories. The study offers suggestions for future research.

# ACKNOWLEDGEMENTS

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Chapter I: Introduction

Upon conclusion of the "academic portion" of my master's degree training in marriage and family therapy, I was full of new ideas and perspectives on life and relationships. Yet, a part of me was left longing for something more. There seemed to be a missing piece in my preparation as a therapist and I was not sure what to name it. I knew that it had to do with my self as a person. Something was telling me that I needed to grow deeper in my understanding of myself in order to do the kind of therapy that I desired to do.

During the limited amount of time that I have been in this field, I have come across a select number of therapists who seem to stand out from the rest. Something about their presence makes them different. It is as if they have come to some sort of resolve or peace within themselves. When I am around these people I get a taste of what is possible, as a person and as a therapist, and I yearn to someday be at a similar place. While trying to find a name for this missing piece, I knew there was a connection between what I saw in these people and what I felt was missing in my life in order to be the therapist I envisioned in my mind.

When deciding on my research topic, I choose to target this "missing piece." I started by reading literature on self of the therapist. Throughout the process of reading articles and books to formulate my research question, I found myself drawn to the concept of spirituality. A majority of the literature I read defined spirituality in a manner that was more inclusive than how I understood it in the past. I had thought of spirituality strictly in terms of one's personal relationship with a higher power. When I saw it

defined to include how one makes meaning and purpose out of life, I knew that

spirituality was the name for what I felt was missing from my training experience.

When examining myself, I found an inability to articulate my understanding of

the spiritual realm and an unsatisfying connection with a higher power. I also found that

I was unable to name my core values and how I make meaning and purpose out of my life

and the lives of those around me. My desire for clarity in these areas has been present for

many years but I tend to suppress that desire, rather than face it, and cope by remaining

busy and using superficial aids. I believe such a pattern developed out of a fear of

opening Pandora's box and not knowing what I would find. However, now there is

something pushing me to take on this journey. For if I find myself unconnected in this

world and unable to articulate how I place meaning on my life, how can I help those

coming to therapy to do that for themselves (directly or indirectly)? Without those

things, most likely I could still conduct symptom-based therapy, but if I want a life of

wholeness for my clients, I need to be able to set that example.

While embarking on this journey, I find it helpful to hear the stories of others who

have gone down this road. Many have taken the journey towards spiritual wholeness.

However, I am particularly interested in the experiences of those who identify themselves

as a psychotherapist. In her book, Soul Healing, Dorothy Becvar (1997) includes a

section on her personal and professional path towards becoming one who effectively

incorporates spirituality into her psychotherapy practice. Outside of this book, there are

minimal documented accounts of the growth processes of therapists which fall within my

area of interest.

In order to facilitate my growth process and contribute to the gap in research on this subject matter, I choose to explore the stories of therapists who have undertaken this journey.

Chapter II: Literature Review

Despite numerous research findings that have proven a strong relationship between spirituality and mental health, spirituality has long been neglected in the field of psychotherapy. There are historical reasons for their split, but these reasons do not necessitate a continued separation. Since the late 1990s, spirituality has become a major area of interest in the psychotherapy field. There is no simplified method for incorporating spirituality into one's practice. Rather it is a process, of which "self of the therapist" work is a major part (Becvar, 1997).

*Historical relationship between spirituality and psychotherapy*

When tracing back to the inception of psychotherapy, one will find spirituality as the original source that nurtured its existence. This is most apparent when uncovering the original definitions behind the field's current terminology. The term "psychology" comes from the Greek word "psyche" which means spirit or soul (Mish, 2000), therefore defining psychology as "soul knowledge" (Becvar, 1997, p. 28). Therapy comes from the Greek word meaning "to heal" (Hart, 1994), hence the original name for psychotherapy as "cure of souls." Freud is often thought of as the original inventor of psychotherapy, but healing has been practiced since the beginning of humanity. In the earliest times, those who practiced the curing of souls were shamans, medicine men, soothsayers, (Cornett, 1998) philosophers, and religious leaders (Becvar, 1997).

Despite its birth in the matters of the spirit, modern psychotherapy has historically made efforts to separate itself from anything viewed to be subjective, unscientific, or intangible -- namely spirituality (Hickson, Housley, & Wages, 2000; Prest & Keller,

1993).  For the purposes of this paper, the term psychotherapy includes all domains that fall under that umbrella: psychodynamic, systemic, etc. (Hart, 1994).

Several factors contributed to and perpetuate psychotherapy's split from the transcendent realm.  When the field of psychotherapy was being established (as we know it today), objective, measurable, and systematic knowledge was highly valued (Becvar, 1997).  In order to receive a well-regarded status, psychology chose to "establish itself as an empirical science rather than a speculative discipline such as philosophy" (Miller, 1992, p. 2). Strong efforts where made to align psychology with the medial model, leaving little room for spiritual matters (Haug, 1998).

Freud was a proponent of psychology gaining its position as a science (Bergin, 1991) and contributed to this outcome by claiming that religion often generates pathology (Miller, 1992, p. 2).  Out of Freud's stance developed a general school of thought that religion is a source of neurosis or mental illness.  Due to this perception, case studies that demonstrated this type of presumed causal relationship were widely publicized, further perpetuating the idea (Haug, 1998).  The results of more recent studies challenge this notion.  In 1991, Bergin performed a meta-analysis of several studies that examined the relationship between these two factors and found that the correlation between religion and pathology does not exist to a level of significance.  Despite these more recent findings, Freud's legacy continues on.

Due to the above factors, there is minimal research and literature on the role of spirituality in psychological health, and in particular on how spirituality can be used as a resource in psychotherapy (Haug, 1998). This further propels the absence of spirituality in therapy because without sufficient resources or training many therapists do not feel

confident enough to make the integration (Carlson, Kirkpatrick, Hecker, & Killmer, 2002).

Finally, narrow definitions of spirituality have contributed to the neglect of formally recognizing the role of spirituality in therapy.  Often, spirituality and religion are defined as one in the same, which can produce the fear that therapists will influence the client into converting to his/her religion.  Others define spirituality so narrowly that they believe it is too private to be discussed in therapy (Prest & Keller, 1993) or name religious leaders as the only figures suitable for navigating this topic.  By having a broader conceptualization of spirituality, there are more opportunities for utilizing it in therapy.

*Defining spirituality and religion*

For centuries, the terms "spirituality" and "religion" were understood to be similar concepts (Sperry & Shafranske, 2005).  Over time, they each developed distinct definitions that are often described in dichotomous terms, with spirituality being labeled as private, internal, personal and process-oriented, and religion as public, external, social and content-oriented (Grimm, 1994; Haug, 1998; Sperry & Shafranske, 2005). While the two often intersect, Becvar (1997) notes that spirituality and religion are "not mutually exclusive" (p. 30).  Therefore a person can be spiritual and not religious, while another can be religious and not spiritual.  Hodge (2000) describes the relationship between the two concepts when they do co-exist in an individual's life: "Religion flows from spirituality and expresses the interior subjective reality in particular forms, rituals, beliefs, and practices that are developed in community with other individuals who have similar spiritual experiences" (p. 219).

Over time, spirituality has gone from being determined and dictated by those in positions of power to being uniquely formulated by each individual. In their book, Sperry and Shafranske (2005) trace the developmental process of today's conceptualization of spirituality, articulating the ways in which it was shaped by the modern and postmodern movements. During the era of modernism, empirically derived knowledge was valued. Humankind became preoccupied with discovering ways to control nature, including the environment and human life. Spirituality could not be measured or quantified and therefore began to lose its credibility. Events such as the holocaust only supported society's growing doubt in a higher power. The postmodern era brought the notion that reality is relative to each individual. This posed a challenge for religious institutions claiming universal truths. It also left the responsibility up to each individual to determine what is truth and which values to follow. Postmodern ideas along with prevalent social changes (divorce, physical distance between family members, etc.) created a disconnected society in which each individual has to create his/her own identity and find his/her own meaning for life. Out of all of these events, spirituality, as we know it today emerged.

For the purposes of this research, spirituality is defined as, "the human experience of discovering meaning, purpose, and values, which may or may not include the concept of a God or transcendent being" (Prest & Keller, 1997).

*Psychotherapy today*

Today's practice of psychotherapy is a product of the popular theories that have been developed over the past century (for example, psychoanalysis, behaviorism, and cognitive theories) (Bergin, 1988). When categorizing the prevalent theories of the 20th

century into value systems, they predominately fall within the "clinical pragmatism"

(Bergin, 1980) (also called "mechanistic" (Bergin, 1988)) value system, or the

"humanistic" value system. The focus of clinical pragmatism is the resolve of symptoms

that are deemed pathological, such as depression and anxiety. Symptom relief is

conducted by taking a first-order approach and once the symptoms are absent the client is

considered to be healthy. The humanistic value system, while quantitative in nature like

clinical pragmatism, focuses less on what is pathological about a person and more on

what factors generate positive mental health. These factors include "flexibility and self-

exploration; independence; active goal orientation with self-actualization as a core goal;

human dignity and self-worth; interpersonal involvement; truth and honesty; happiness;

and a frame of orientation or philosophy by which one guides one's life" (Bergin, 1980,

p. 98). While both of these value systems offer many useful ideas for the practice of

psychotherapy, they are not inclusive enough to allow for matters involving the non-

quantifiable aspects of human experience (Bergin, 1980).

Anderson and Worthen (1997) organize marriage and family therapy theories into

three dimensional categories: time (ex. strategic), space (ex. structural), and story (ex.

narrative). A therapist operates from one or more of these dimensions based upon his/her

assumptions about human experience. While all of these dimensions are an important

part of people's lives, together they still fall short of the totality of human experience.

Anderson and Worthen (1997) advocate for the addition of a fourth dimension: the

transcendent. "Transcendent means beyond the limits of time, space, and language,

beyond human ability to analyze, contain, or explain" (p. 4). Sperry and Shafranske

(2005) also use the term "transcendent" when they describe the recent trend that is

happening in psychotherapy; a growing number of practitioners are noticing that "there is 'something more' to human experience than modifiable behaviors, intrapsychic conflicts, and serotonergic imbalances" (p. 12).

In general, there is growing disbelief in science's ability to find the answers to all of life's conditions. Many of the theories and ideas derived from the medical model benefit the practice of psychotherapy, but when used as the only source for understanding human experience psychotherapy will always fall short (Bergin, 1980).

*Growing interest in spirituality and therapy*

Since its formation in the 1950s the field of marriage and family therapy continues to develop, and with each decade the field becomes more established and comprehensive. In the 1960s models were formulated, leading to the creation of structured training programs in the 1970s. Discovering similarities and relationships between the various approaches was the focus in the 1980s. With the 1990s came critiques, mainly from the feminist perspective. There was also an emphasis on going beyond the models and finding ways to communicate across approaches in a professional manner (Becvar, 1997).

In the current decade much attention is being given to further examining the role of ethics, values, and spirituality in the therapeutic process (Becvar, 1997; Bergin, 1991). Moules (2000) claims, "the family therapy field is increasingly acknowledging the spiritual aspect of human experience and the connection between spirituality, suffering, and healing" (p. 237). Since the late 1990s there has been a significant increase in the amount of journal articles, books, and seminars devoted to the topic of spirituality and how it relates to marriage and family therapy (Anderson & Worthen, 1997; Becvar, 1997;

Carlson et al., 2002). The energy behind this movement comes from the consumer (who

has a desire to discover meaning and purpose in life) and recent therapy modalities that

have helped make more space for exploring existential topics (ex. solution-focused,

narrative, and cognitive) (Haug, 1998, Miller, 1992).

*Assumptions about spirituality and human experience*

Before making a case for the inclusion of spirituality in psychotherapy, certain

assumptions must be named. First, all humans are spiritual in nature (Hoogestraat &

Trammel, 2003). In his book, Hidden spring: The spiritual dimension of therapy, Hart

(1994) states:

> We are spiritual whether or not we belong to a religious denomination.
>
> That orientation to something beyond, that questioning or questing, that
>
> irrepressible transcendence of the human spirit…are simply part of the
>
> constitution of our existence, whether we are fully aware of it or not, and
>
> whether we cultivate it within the context of organized religion or not (p.
>
> 23).

Hodge (2000) also uses the term "spirit" when describing the makeup of humans. He

claims that there is more to humans than emotions, thought processes, behavior, and the

physical body. There is also the spirit, which is made up of three interwoven parts:

communion, conscience, and intuition. These three parts have an interconnected

relationship with emotions, thought process, behavior, and the physical body.

Second, all humans have a desire and drive to connect with a higher power or the

transcendent. Without this connection there is a "sense of personal incompleteness."

(Anderson & Worthen, 1997, p. 5). Becvar (1997) talks about the human drive towards

"wholeness," which emerges when the physical and spiritual self are in harmony or accordance with one another.

In order to achieve a life of wholeness, one needs a sound articulated sense of meaning, purpose, values, and a developed understanding of how one is connected to the universe (Becvar, 1997). At the core of spirituality are these factors, which ultimately influence how one makes meaning out of life and creates reality (Prest & Keller, 1993). This leads to the third assumption, that the nature of one's spirituality affects all aspects of a person's life.

This third assumption is supported by several empirical findings, which show that one's spirituality can either have a positive or negative effect upon one's mental, physical, and emotional health, depending upon its quality (Hoogestraat & Trammel, 2003). Taking a systemic perspective, spirituality influences life at multiple levels.

At a personal level spirituality is the seat of identity, morality, and self-worth. At the level of social systems, spirituality is the value framework that drives society, community, and family. At all these complex levels of human life and interdependence, spirituality is manifested in our politics, culture, ethnicity, race, and religion. Spirituality, with its values, morality, and worldview, defines the priorities, obligations, and roles of people in society. Ultimately, spirituality is the foundation upon which is built the structures of our personal psychology and relationships, as well as our society. It follows then that there is a spiritual base of values at the core of all psychotherapies that gives each school its perspective and direction in the understanding of human functioning (Aponte, 1996, p. 2).

*The role of spirituality in human experience*

Spirituality has the potential to positively influence human experience in multiple areas. Haug (1998) describes the influence of spirituality in the cognitive, affective, behavioral/relationship, and developmental dimensions of life. In the cognitive realm, spirituality gives meaning to human experiences and promotes a sense of connectedness and purpose in life. In the affective dimension, having a sense of connectedness and purpose can provide reassurance, comfort, and hope, and allows for flexibility and opportunity. Having the ability to make meaning out of life's struggles also reduces anxiety (Prest & Keller, 1993). In the behavioral/relationship domain, belief systems guide people's behaviors and decisions, which then influence their relationships. Haug (1998) uses the term, "purposeful living" to describe how spirituality can influence people to make choices that are selfless. Developmentally, spirituality is always changing and growing, at both the individual and multigenerational level. Because it is a continual process of discovering, it enables humans to accept some degree of uncertainty and paradox in life (Haug, 1998).

In a broad sense, spiritual experiences have the power to change a person's lifestyle (Bergin, 1991). Anderson and Worthen (1997) assert that connection with the "fourth dimension" (the transcendent) beautifies an individual, out of which the individual makes choices that are in alignment with the nature that he/she feels within.

At the systemic level, research has found that spirituality can positively impact a family in the following ways: as the key to "long-term satisfying marriages," "creating resilient families and enabling them to cope," and "fostering lower instances of adolescent deviant behavior and alcohol use" (Hodge, 2000, p. 218).

On the flip side, a deprived spirituality can lead to several negative outcomes. Several authors assert that society's current state of disarray results from the lack of purpose, meaning, and connection to a higher power that most of Western humanity experiences (Becvar, 1997; Bergin, 1980; Moules, 2000). At the social level, a lack of connection to something greater and to each other results in "racism," "violence," "poverty," and other social injustices (Moules, 2000). At the individual level, common presenting problems in psychotherapy (ex. depression, substance abuse, eating disorders, etc.) are understood as resulting from deprivation of the soul (Becvar, 1997).

Former president of the American Counseling Association, Joyce Breasure, nicely ties together the current state of American society and the corresponding responsibility of psychotherapists.

I think the reason we are seeing so many people in disharmony is because

the American people have lost their hearts, souls and spirits. The struggles

that people are facing today can easily bring them into disharmony unless

they have a strong spiritual belief system.... I implore you to recognize the

unity of mind, body and soul in others and yourself. It is much easier to

medicate, hospitalize and ignore the items that do not fit into a treatment

plan, but that's not truly helping our clients. People can easily recognize

our insincerity and fear of things that cannot be put into nice little

categories (1996, p. 5).

*A case for incorporating spirituality into psychotherapy*

With the current state of Western society, it is essential to make spirituality an active component of the therapeutic process. Due to the integral role that spirituality

plays in human experience, it can be utilized as a powerful tool in therapy to create change (Haug, 1998). The ways in which spirituality can positively influence multiple facets of life (cognitive, affective, behavioral/relational, and developmental) were stated previously. Spirituality is a valuable resource for helping families and individuals cope with past and current struggles, preparing them for future challenges (Miller, 1992) and generating a life of wholeness (Becvar, 1997).

Another reason to include spirituality in therapy is to meet the demands of the client or consumer. Sperry and Shafranske (2005) believe that "psychotherapy is often sought to address not only psychological conflicts, narrowly defined, but also to deal with the spiritual malaise that at times underlies symptoms of depression, anxiety, or restless disquiet" (p. 18). As a result of the lack of meaning and purpose that a majority of Americans are experiencing, clients are coming to therapy wanting more than just symptom relief, but to develop the spiritual element of their lives (Bergin, 1980). Aponte (1996) stresses, "People are coming to therapy...asking for values, purpose, and meaning – spirituality" (p. 4).

This leads to the third argument for use of spirituality in therapy, which has to do with ethics. Therapy without spirituality is limited (i.e. the degree to which change can occur) (Anderson & Worthen, 1997), therefore bringing into question the ethics of the therapist (Hoogestraat & Trammel, 2003). In addition, just as therapists are accountable to practicing in a manner that is sensitive to culture, sexuality, gender, and social class, they must also be able to effectively handle spiritual matters in order to maintain an ethical practice (Frame, 2000).

*Spirituality in therapy*

When integrated appropriately, therapy can become a place for facilitating

spiritual growth, where clients develop a sense of meaning, purpose, and connection to a

greater force (Becvar, 1997). Openness to alternative possibilities can be fostered within

clients' belief systems, creating the potential to see life and relationships in a new light

(Prest & Keller, 1993). Becvar (1997) states that all clients have the "potential for self-

healing" (p. 68) and therapists can help clients to trust their own abilities and intuition.

Hart (1994) notes that while psychotherapy falls within the scientific field and

spirituality within the religious field, they share common goals: "promoting human

growth and well-being" (p. 20) and values: "honesty, self-acceptance, kindness, humility,

tolerance, hope, self-control, material simplicity, sharing of goods, service of others,

forgiveness, serenity, non-violence [and] contemplation" (p. 22). In addition, most

people turn to therapy and spirituality for the same reasons, to find relief from their

struggles and reach a place of fulfillment. Hart argues that psychotherapy and spirituality

both have something to offer and need each other in order to meet the needs of those

utilizing them as a resource. This is why he describes their relationship to each other as

"both/and" rather than "either/or" (1994).

Carlson, Kirkpatrick, Hecker, and Killmer (2002) conducted a study on marriage

and family therapists and their beliefs on the use of and relationship between spirituality

and therapy. While 95% of MFTs agreed that spirituality affects one's mental health,

only 62% agreed that spirituality should be acknowledged in therapy. The authors pose

two possible explanations for this discrepancy. First, only a few participants reported

receiving any training on how to incorporate spirituality into therapy. Several additional

authors report this same occurrence: therapists are not getting enough training in the area of spirituality and therefore do not have the ability or confidence to integrate spirituality into their practice (Aponte, 1996; Carlson et al., 2002; Frame, 2000; Miller, 1992; Sperry & Shafranske, 2005; Worthington, 1989). The second potential explanation for this incongruity falls along the same lines; because the use of spirituality in modern psychotherapy is a new concept, it will take time for people to become more receptive to the idea. Prest and Keller (1993) also take note of this discrepancy in the marriage and family therapy field and hypothesize that "spirituality may perhaps be even more taboo than sex and death" (p. 138). Both sets of authors claim there is a lack of literature and research on the topic of spirituality and on how to effectively use it in therapy (Carlson et al., 2002; Prest & Keller, 1993).

Whether or not spirituality is named as a part of the therapy process, its presence cannot be avoided (Hart, 1994). Because people are innately spiritual and have a drive towards wholeness, the issues that clients present with in therapy to some degree stem from a desire to meet one's "spiritual needs" (Clinebell, 1996). Because spirituality is at the core of each individual's values and perspective on life, the therapist's spirituality manifests itself in multiple areas of the therapy process, from treatment goals (Bergin, 1988) to the therapist's approach in handling the client's problems (Frame, 2000), to determining a diagnosis for the client (Grimm, 1994). Therefore, it is imperative that therapists are aware of their spirituality and mindful of how it is playing out in their therapy practice (Haug, 1998, Grimm, 1994, Walsh, 1998). In simple terms, spirituality serves as the backdrop or basis from which psychotherapy functions (Hart, 1994).

*Spirituality-of-the-therapist*

Research demonstrates that there are a select number of factors that have a significant influence on the degree to which change occurs in therapy. One of most powerful factors is the self-of-the-therapist and the ability of the therapist to connect with the client (Walsh, 1998). In his book, Spiritual Care and Therapy, VanKatwyk (2003) states that, "it is the relationship that heals" (p. 24) and therapy has the potential to construct such a relationship. In this healing relationship, the client shares his/her life experiences and the nature of the therapist's presence creates a space for the client to heal. Bergin (1980) agrees with VanKatwyk's assertion that "human interactions" serve to produce change, adding that in the mix of all human interactions are individual perceptions and beliefs (p. 98). When combining these two factors, it is apparent that the spirituality-of-the-therapist is a major component to effectively incorporating spirituality into therapy.

Spirituality-of-the-therapist involves not only who the therapist is during his/her sessions, but also who he/she is outside of his/her therapy practice. Becvar (1997) discloses that "soul healing is a process in which I am actively engaged on a personal as well as a professional level and it has ramifications for every part of my life" (p. 25). Awareness and active involvement, in one's own spirituality as a therapist, is beneficial at multiple levels in the therapy context. Therapists who are mindful of their own spirituality are more skillful at incorporating spiritual dialogue into therapy (Hoogestraat & Trammel, 2003). Anderson and Worthen (1997) note that a therapist's spirituality is directly connected to the nature of his/her presence while in session. A participant of a qualitative study on the development of MFTs found that becoming more in touch with

his spiritual values softened his personality and furthered his ability to connect with and understand his clients (Coward, 1996).

A therapist's presence is important because it influences the relationship quality between the therapist and client, and also offers a mirror to the client of what is possible. Becvar (1997) states, "you cannot support another on a journey that you are not willing to take yourself" (p.73). Prosky (1996) asserts that the effectiveness of a therapist is dependent upon the degree to which a therapist has successfully dealt with his/her own experiences. He names "acceptance of the self" as the first step and integral part of a positive self of the therapist. Ideally, the therapist provides a mirror that demonstrates love and acceptance of oneself, a desire for wholeness and balance, and energy that resonates from having gone through the process of discovering one's spirituality (Anderson & Worthen, 1997; Becvar, 1997, Protinsky, 2001,). Having undergone this process not only affects the therapist's presence, but also prepares the therapist for sharing his/her own journey with the client (Prest & Keller, 1993). In addition, the therapist can address spirituality from a place of experience, rather that speaking strictly from academic knowledge (Protinsky, 2001). Hart notes that it is the combination of these two (knowledge and experience) that best prepares a therapist for using spirituality in therapy (1994). He uses the following narrative to depict the difference:

Disciple: What is the difference between knowledge and enlightenment?

Master: When you have knowledge, you use a torch to show the way.

When you are enlightened, you become a torch (p.143).

As mentioned above, there is a lack of research and adequate training on the use of spirituality in therapy (Aponte, 1996; Carlson et al., 2002). The spirituality-of-the-

therapist plays a major role in the successful integration of these two areas. As previously described, the therapist must be at a place in his/her own spiritual journey in order to promote positive spiritual growth for his/her clients. I believe there are therapists who have reached this place and are effectively incorporating spirituality into their practice. However, the growth processes of these therapists are minimally documented. The following qualitative research project seeks to fill this gap by documenting the growth processes of three seasoned marriage and family therapists who take a spiritual approach to therapy.

Chapter III: Methodology

The purpose of this qualitative study was to better understand the growth processes of seasoned marriage and family therapists who take a spiritual approach to therapy. The study centered around each interviewee's growth process as a professional and what each interviewee identified as significant factors that contributed to her ability to integrate spirituality into her psychotherapy practice. The leading inquiry of each interview was the following statement, "Tell me about the important events and influences in your life that have shaped your professional growth as a therapist who uses a spiritual approach to therapy."

*Qualitative Research*

This study was conducted within the framework of the qualitative research paradigm. Due to the characteristics that make up qualitative research, this paradigm was a good fit for the phenomenon being studied. The following are characteristics of qualitative research as named by Creswell (2003):

1. Qualitative research takes a *natural* approach to understanding human experience. Typically the researcher meets with the participant at his/her home or office. This adds to the depth of the researcher's understanding of the participant's lived experience.

2. The methodology used in qualitative research is *humanistic* and *interactive* with the participant. The researcher seeks to minimally disturb the natural environment as opposed to quantitative research in which variables and factors are manipulated. Data collection is often done through observations or interviews that are flexible in nature.

3.  Due to this flexibility, qualitative research has an *emergent* quality rather than a predetermined fixed format.  Over the course of qualitative research the research questions, methodology, and data analysis will often develop in order to obtain a better understanding of the natural phenomenon.

4.  In qualitative research, data analysis is essentially *interpretive*.  The researcher interprets the data.  The resulting findings, conclusions, and future implications are not independent from the self of the researcher.

5.  The qualitative researcher understands the phenomenon at study from a *holistic* perspective.  The researcher's goal is to shed more light on that phenomenon.  The aim of quantitative research is to reduce the area of research into more simple terms by categorizing the parts of the study into variables.  This differs from the objective of the qualitative researcher, which is to highlight the complexity of the phenomenon and illuminate its depth and dimensionality.

6.  Qualitative research recognizes the *interactive* relationship between the research and the researcher.  The researcher understands that his/her context and perspectives on life influence the emergent research and therefore is intentional about becoming aware of his/her biases, values, and investments.  The researcher actively reflects on these areas and is open and candid about them in the study.

7.  A majority of qualitative research involves *inductive* reasoning rather than deductive reasoning.  Inductive reasoning starts with gathering data and moves towards developing a theory or working hypothesis.  The deductive reasoning process, found in quantitative research, starts with a hypothesis or theory and then gathers data, which supports or does not support the hypothesis or theory.

Within qualitative research there are numerous methodological approaches. Popular approaches include ethnography, case study, grounded theory, narrative, and phenomenology (Creswell, 2003). Taking a phenomenological approach seemed most suitable for the purpose of this study, as stated above.

*Phenomenology*

The aim of phenomenological research is to understand the "lived experiences" of the participant. The researcher seeks to understand the topic of study from the participant's point of view. Phenomenology comes out of a philosophical school of thought that suggests that people create much of their reality and respond to the world in ways that are congruent with that reality. To get at the participant's lived experiences the researcher meets with the participant, preferably firsthand, over an extended period of time. During this time the researcher seeks to capture how the participant makes meaning in life. The researcher then identifies themes and patterns found in the participant's process for making meaning (Creswell, 1994).

In this project, I was interested in understanding the growth processes of those interviewed, from a holistic perspective. Taking a phenomenological approach made that possible; by allowing the participant flexibility when reflecting on her growth process she had room to talk freely about any aspect of her life that she identified as significant. This type of approach is also fitting for the topic being studied due to the lack of previous research on this particular subject area. The intent of this study was not to create a theory, but to help fill the gap in the literature on this subject area. The hope is that this study, along with any future studies related to this topic, will begin to create a foundation from which a theory can be developed.

*Sample Selection*

In qualitative research, participants are intentionally selected rather than randomly selected. This is to ensure that each participant is a good fit for the research question, providing a rich experience or answer to the question (Creswell, 1994). Several potential participants for this study were identified. All potential participants fell within the categories of "seasoned marriage and family therapist" and one who takes a "spiritual approach to therapy." For the purposes of this study, a seasoned marriage and family therapist was someone who was licensed in the field and had been practicing for five years post-graduate. A therapist who takes a "spiritual approach" was defined as someone who understands his/her clients from a holistic perspective and intentionally allows space for clients to heal at a spiritual or soul level. The participant selection was limited to therapists who were within a reasonable driving distance of the researcher; therefore all were within the Midwest region of the country. I have a greater interest in Eastern spiritual perspectives than in Western approaches, so participants were chosen who align with this interest

When coming up with a list of potential candidates I contacted my supervisor who gave me a list of therapists who met the above criteria. My supervisor used a professional member directory as an aid when naming potential candidates. I choose three people out of this list. I decided to select only female participants in order to control for the gender variable. I also gave preference to candidates that had been in the field longer. I sent letters to the candidates explaining the proposed study and requesting their participation. I included a copy of the consent form (see Appendix A) and a list of the interview questions (see Appendix B). A week later, I contacted the candidates by

phone to determine their willingness to participate. Each candidate agreed to participate and interview times were scheduled.

All of the participants were licensed Marriage and Family Therapists who had been practicing for over 10 years. Two of the participants were white and one Asian. They all live within the metropolitan area. One had an additional license as a social worker. Two primarily follow the Buddhist teachings and one does not align with a particular tradition but has studied multiple traditions including Buddhism.

*Data Collection Procedures*

Upon agreement to participate in the study, a meeting time was determined and participants were encouraged to pick a meeting place that was comfortable and convenient. Two participants were interviewed at their office space and one at her home. A 90-minute slot was allotted for each interview and all interviews were between 60-90 minutes in length. Interviews were conducted in person and one on one. All interviews were audio-recorded by a digital voice recorder. During one of the interviews the recorder stopped working after 45 minutes. During the remainder of the interview I took as many notes as possible, notating which phrases were exact quotes.

At the beginning of each interview, participants were again informed as to the purpose and nature of the study and what the process of their involvement will look like. A signed informed consent was obtained.

The interviews were semi-structured, starting with the overarching research inquiry, "Tell me about the important events and influences in your life that have shaped your professional growth as a therapist using a spiritual approach to therapy." Additional questions were aimed at further clarifying the significant events and factors in the

participant's life that shaped her growth process as a therapist taking a spiritual approach to therapy. For one of the interviews, the allotted time ran out before formally asking each research question, but the participant spoke to the matter of the unread questions when responding to a previous question(s).

The interview process was flexible enough to allow each participant room to talk about whatever topics or experiences were important in her process, and for the conversation to flow naturally while still staying connected to the subject in research. All participants were given a copy of the completed project.

I personally transcribed the interviews. Each interview recording was listened to in its entirety two times. Due to the rigorous nature of transcribing, many sections were listened to four or five times to ensure the accuracy of the transcriptions. The interviews were not transcribed verbatim. Filler words, such as "um" and "you know," were left out as long as they did not seem necessary for understanding the participant's experience.

*Data Analysis*

In qualitative research, there are multiple parts to the data analysis process. The process involves the researcher developing a deeper understanding of the data. Out of this deeper understanding, the researcher begins to interpret the data and make meaning out of it. He/she then organizes the data into a format that captures the essence of the data and highlights the major themes and important points (Creswell, 2003).

Data analysis began alongside of data collection. During the interviews I began to get a sense of the major themes within each interview and across interviews. During the transcription process I developed a deeper understanding of the experiences of the participants.

Once all of the interviews were transcribed I began the coding process. Coding was done using the constant comparative method. Using this method the researcher identifies themes in each interview while comparing and refining the themes continually throughout the process. The researcher starts with one transcript and creates names or labels for the themes that he/she finds. When reading the remaining transcripts, the researcher compares back to the previously coded transcript(s) using similar labels if appropriate and/or refining the names of categories in order to better represent the overlapping concepts and themes (Taylor & Bogdan, 1998).

When analyzing the data I highly relied upon the transcripts and recordings of the interviews. I used the transcripts when identifying themes in the data, and referred back to the interview recordings anytime I was confused about the true meaning of a statement. My aim during data analysis was to understand the research topic from the perspectives of the participants.

After comparing and contrasting the content of the three interviews, the names of major categories and subcategories were solidified. I put together an outline of these categories and under each category documented the places were they showed up in the transcripts. Another simplified document was made showing the relationships between categories and naming major and minor themes. Data analysis also identified any material that seemed significant, yet was not mentioned by all of the participants.

*Validity*

In qualitative research, validity looks at the "meaningfulness" of the study. This contrasts sharply with quantitative research validity, which emphasizes the ability to replicate the study and the degree to which the results are true. Qualitative researchers

are committed to the accuracy of their research, as are quantitative researchers, but their methods for obtaining validity are not as standardized and simplistic as those in quantitative research, and therefore are often more rigorous (Taylor & Bogdan, 1998).

*Internal Validity.* In qualitative research, data analysis is subject to the interpretation and biases of the researcher. Therefore, the validity of the study is dependent upon the researcher's level of dedication to pursuing the true meaning of the phenomenon being studied. To strengthen the validity of a study, the researcher must examine and state his/her biases and judgments related to the subject matter. Once named, the researcher attempts to set these aside and approach data collection and analysis from a place of not knowing.

Before collecting the data for this research, I went through a process of discovering my own biases, judgments, and values related to the growth processes of therapists who take a spiritual approach to therapy. I viewed this study as the platform from which I would launch my intentional growth process towards becoming a spiritually oriented therapist. Therefore, I did not approach this study from a place of having already integrated spirituality into my practice and having a well formulated personal growth process from which to compare my experience to those of the participants. Rather I approached this study with curiosity about the nature of others' growth processes, and with the hope that learning about them would be helpful in my own growth process. However, I did bring to the study my own life experiences, especially those related to spirituality, religion, and psychotherapy, and my assumption was that these would influence the study.

Before conducting the interviews, I had several assumptions and hypotheses about what the growth processes of those interviewed might look like. In order to intentionally set these aside during data collection and analysis, I took the time to self-examine and write them down. My assumptions and hypotheses were largely influenced by the resources and materials that I utilized while formulating my research question and writing the literature review for this paper (which I did before the interviews). Of my hypotheses, many were confirmed, which further validates the sources I used for the literature review.

From the beginning of this study, my curiosity about the growth processes of spiritually oriented therapists was drawn towards therapists rooted in Eastern spiritual perspectives, rather than in Western approaches. The spiritual orientations of each therapist interviewed are described in the case study section.

I hypothesized that in order to effectively practice in a spiritually oriented manner, it would require personal work on the part of the therapist. I formulated this hypothesis based on my personal conviction that I had personal growth to undergo before being able to take this type of approach in therapy. These convictions were further solidified when reading about Dorothy Becvar's personal path in her book, Soul Healing, in which she illustrates how her personal life experiences shaped her professional approach to conducting therapy.

I assumed that the participants would be aware of and able to name their general values and underlying process for making meaning in life. I believed this awareness would facilitate the therapists' ability to recognize when and how these things show up in therapy, and increase their ability to be open about their biases with clients.

I predicted that participants would have undergone some hardship or difficult growth period, which would have served as their motivation to take a spiritual approach to therapy.  I expected the participants to describe a particular hardship or difficult period as a turning point, out of which they changed their approach to therapy.

Another bias that I named before conducting the interviews was that the participants would have a "calming presence."  In the introduction section, I describe noticing a different sort of presence in a select number of therapists.  I am not sure what word best describes this type of presence, but the words calming and healing come to mind.  In conducting this research I was interested in learning about the growth processes of therapists who I believe manifest such a nature.

Lastly, I assumed that open-mindedness on the part of the therapist would be necessary for doing this type of work.  I believed that the therapists would be open to new ideas and different forms of spirituality and that they would not have a single prescribed spiritual path which they encouraged all clients to follow.

During the data collection and analysis process I made a conscious effort to set aside the above hypotheses and assumptions.  I approached the interviews with an open and curious mind, ready to discover new concepts and ideas.

In addition to identifying and setting aside my biases, low inference descriptors were used to strengthen the internal validity of this study.  The use of low inference descriptors -- verbatim quotes -- strengthens the interpretative validity of a research project because the reader gets to experience the actual words of the participant and compare his/her interpretations with those made by the researcher (Johnson, 1997).  In writing this report, I tried my best to accurately portray the experiences shared by the

participants, supporting my findings with direct quotes when possible.  I think there is great value in experiencing the language used by the participants, bringing more depth to the reader's understanding of each participant and her growth process.  While I placed great importance on accurately portraying the lived experiences of the participants, the reader must be aware that the interpretations and findings are exclusively my own.

*External Validity.*  Due to the fact that all of the participants were female, residents of the Midwest, and aligned more with Eastern spirituality than Western, this study is not representative of the totality of marriage and family therapists who take a spiritual approach to therapy.  Along with the small sample size of the study, these factors limit the generalizability of this study.  However, within the study's parameters there are particularistic findings that are rich and of value, and the themes across participants offer a starting place for further research.  In addition, the study's methodology is clearly stated, creating the potential for replication with spiritually oriented therapists who are similar, or for investigation of spiritually oriented therapists who have different characteristics.

*Strengths of this Study's Methodology*

Taking a phenomenological approach greatly contributed to the strength of this study by allowing room for the rich and meaningful stories of the participants.  I was interested in understanding the whole experience of the participants, and the methodological design of this study made that possible.

The quality of the participants brought great depth and value to the study.  With the freedom to select participants for the study, I was able to select therapists who closely matched the topic of study and my interests as a researcher.  When choosing participants,

I made a list of possible candidates. The three therapists whom I felt were most fitting for this research all agreed to participate. They are all passionate about and highly committed to the integration of spirituality and psychotherapy. I believe that all three participants had rich experiences and stories to share. I also believe all three participants had a strong ability to reflect on their growth processes and articulate the essence of their experiences.

Due to the researcher's active involvement in a qualitative study, the researcher strongly influences the quality of the study. I believe my greatest strength, as a researcher, was a strong interest in the subject matter and genuine enjoyment in understanding the topic. I put significant effort and time into finding credible and valuable sources for the literature review. When conducting the interviews my personal interest in the topic helped me to really connect with the interviewees. My training in marriage and family therapy enhanced my ability to conduct interviews that facilitated gaining rich narratives from the interviewees.

Another strength was my willingness to examine my biases. I took an active approach to exploring and naming my biases and then to setting them aside during data collection and analysis. Personally transcribing the interviews allowed me to intimately connect with the data and to bring this nuanced understanding to the process of data analysis.

*Limitations of this Study's Methodology*

In addition to its limited generalizability, a further limitation of this study is that results are based on the interpretation of only one researcher. Peer review, for example, would have provided verification, refinement, or a challenging of the themes identified by the researcher. In addition, having the findings reviewed and approved by the

participants would have further supported the results of the study. However, due to time constraints I was not able to include these steps in the methodology.

Secondly, I feel that my minimal experience with conducting research also posed some limitations to this study. While having experience as a therapist was helpful in some ways, at times it was difficult for me maintain my role as a researcher, and I moved into the role of therapist or colleague. After reflection on the interview process, I see that I might have spoken less and reduced the degree to which I framed my questions, leaving them more open-ended. At points I might have asked more questions to deepen my understanding of certain responses.

*Ethical Considerations*

Data collection for this study commenced after approval from the Institutional Review Board. Participants were clearly informed as to the process and intent of the study. The informed consent form was included in the initial contact with the participants via mail. At the start of the interview, I verbally covered the consent form. Participants were given the option to terminate their involvement in the study at any point in the process.

Maintaining confidentiality was taken seriously. When transcribing the interviews, only initials were used to identify the participants. Any demographics given in the research paper were limited to those that would not lead someone to identification of the participants. In the research paper, the names of the participants were changed. I was the only person to have contact with the original data throughout the process.

The existential nature of the topic had the potential to provoke unexpected emotions in the participants. However, this was not a major ethical concern due to the

background of the participants involved.  As a therapist, each participant has had training

in working through emotions.  In addition, participants were given the option to not

answer any of the posed questions.

Chapter IV: Case Studies

*Mary*

Mary is a licensed marriage and family therapist who has been practicing for nearly 21 years. Before getting her masters in marriage and family therapy she studied biology at the undergraduate level and was a secondary education biology teacher for six years. Professionally, Mary is known for integrating mindfulness and psychotherapy. Mary stated that she has intentionally taken a spiritual approach to therapy since the beginning of her practice, with increasing intention over the years, specifically within the last 13 years. Mary comes from an Eastern spiritual approach, specifically the "basic teachings of Buddhism."

Mary became a "spiritual seeker" before the age of 10. The circumstances and events of her childhood were a catalyst for her becoming a spiritual seeker at a young age. In her childhood Mary experienced emotional, physical, and sexual abuse. She had a mother whom she described as "severely mentally imbalanced" and a father who was the "counterbalance" to her mother. Mary's father was a very loving person and she attributes her being alive today to him. He died when Mary was very young, which was also a major source of "pain and suffering." The manner in which he died and how the family handled his death led to Mary's loss of "faith in organized religion" and growing interest in spirituality.

During Mary's masters degree training and the beginning of her psychotherapy practice, she felt strongly that there had "to be more than just the Western approach to mental health." That's not to say that Mary discredits what the Western approach has to offer, but that she considers it to be limited on its own. Mary recalled her masters degree

program experience and being the only student in her cohort that did not have a previous background in mental health.  She describes her perspective as being different from her colleagues, who leaned towards taking a theoretical approach to understanding client cases.  Mary tried to stay true to her perspectives and beliefs throughout the program.  And while it was not easy, she ended up excelling in the program and being thanked by some of the professors for her "participation and presence in the program."

During her masters program Mary had an off-campus practicum supervisor, who she named as an influential person in her growth process.  He emphasized the self-of-the-therapist and the importance of connecting with one's clients, which matched Mary's approach to therapy.  He supported Mary in developing these areas along with facilitating her ability to trust her heart, intuition, and experience.

Seven years following the completion of her masters training, Mary saw Jon Kabat-Zinn speak on "healing of the mind," which significantly contributed to her growth processes as a spiritually oriented therapist.  Mary stated that she saw Jon Kabat-Zinn speak "and that was it."  Shortly following, she took his 8-week introductory class on Mindfulness-Based Stress Reduction and then "took the professional training and started facilitating groups and incorporating more and more of what [she] was learning in [her] own spiritual practice combined with the Jon Kabat-Zinn training into therapy."

About seven years following her first experience seeing Jon Kabat-Zinn, Mary began studying with Thich Nhat Hanh and his monks and nuns.  Every other year she goes to his three-week retreat in Plum Village, France and on the off years goes on a one-week retreat when he is in the United States.

In the seven years between seeing Jon Kabat-Zinn and starting to study with
Thich Nhat Hanh, Mary "read and listened to many many Western and Eastern teachers
of mindfulness meditation and Buddhism." She also deepened her "own daily practice of
mindfulness and meditation" and "went on a number of retreats with a number of
Western and Eastern local teachers." It was also within this period of time that Mary
"started a relationship with a spiritual director." Mary was experiencing "some
difficulties" during that time in her life and was looking for some support. Mary
described how she ended up seeing a spiritual director.

> I was thinking about going back to therapy and a friend of mine said, 'Oh
>
> no, you've had enough therapy [Mary]. I think you need a spiritual
>
> director. And so I did, I started to see a spiritual director, and which is a
>
> profound experience.

A few years before beginning to study with Thich Naht Hanh, Mary went into
private practice. Consequently, she left the HMO that she had been working in for an
extended period of time. This was a "freeing" experience for Mary because now she was
able to practice in a manner that aligned more with her beliefs. She was no longer forced
to diagnose clients and follow other limiting guidelines set by those managing her.

Over the course of her professional practice, Mary went from mostly "doing
psychotherapy" and teaching some mindfulness and meditation, to now having a majority
of her work center around "mindfulness and meditation and mindfulness based stress
reduction" and a minimal part focus on the category of psychotherapy. For the most part
this was a gradual transition, up until three and half years ago when Mary's dream of
opening a "non-sectarian mindfulness practice center" happened. At that point her

balance between practicing psychotherapy and doing mindfulness and meditation work took a "big shift" towards doing more work related to the later.

Several times Mary noted the role that marriage and having a family has played in her growth process. She specifically stated that both have contributed to the "expansion of [her] heart."

As named above, there were several major events and influential people in Mary's life that contributed to her growth process, but above and beyond these Mary names her own spiritual growth and seeing the spiritual growth of those around her as the primary factors that influenced her to take this type of approach to therapy.

> Primarily it was the...decrease in suffering in me, as a result of the
> development of my spiritual practice, and how I came to see and
> experience so many other people really being transformed and their heart
> opened to themselves and to the world in...their spiritual practice.

Mary also noticed that people "are talking spiritually when they are coming to therapy." They are really "yearning for and wanting and needing, not knowledge" in the "academic intellectual" sense, but are "really yearning for and wanting...a very human interaction." And this human interaction is one with "a open heart...with compassion and loving kindness and acceptance, and from the perspective that people are doing the best they can and that people are basically good." Mary saw that her clients really wanted to make that spiritual connection, which is defined differently by, and looks different for, each client.

I think that once grounded, connected, opened to their own spirituality,

then… there's really very little for us as therapists to do…but to help…

nourish that for people and their own connection to their own goodness.

Mary described her growth processes as an unplanned unfolding path, "that's

really been [the] opening of my heart." This unfolding path of "increasing clarity and

trust in the truth of the very simple teachings from the east" has helped Mary to "live

from a place of love rather than fear" and personally reduce the presence of depression

and anxiety in her life.

Mary claimed that her ability to effectively integrate spirituality into her

psychotherapy practice is primarily dependent upon her own spiritual practice. The

deeper her personal spiritual practice, the more naturally she is able to integrate

spirituality into her professional practice. Mary talked about the challenge of language

and how the use of language comes more easily with the deepening of one's spiritual

practice. After teaching an all-day workshop on mindfulness and psychotherapy, Mary

often gets asked by participants if they can take the stuff they have learned and integrate

it into their practice. Mary explained that "the answer is yes and the answer is no. You

will only bring the depth of what you know. And the deeper it is the easier it is."

Mary's past and continued spiritual journey is supported by multiple different

influences: people, books, retreats, and formal and informal practices. Mary named

several friends who are supportive of her journey and a particular close group of friends

who are all committed to a spiritual way of life. There are teachers from the east who

have been like mentors to Mary. There are also writers whose books have contributed to

Mary's spiritual growth. Some of these authors and books are listed in Appendix C.

Those mentioned previously, Mary's spiritual director and off-campus supervisor, were also influential in her unfolding journey.

Some of the formal practices that Mary participates in are sitting meditation, walking meditation, eating meditation, the study of yoga, and qigong. "Mindfulness in daily life" is an informal practice that has facilitated Mary's growth process and continues to be a part of her lifestyle. Currently, Mary has committed to having a "lazy day" every other Friday. On these days Mary intentionally listens to her body and what it is wanting. She does not do anything related to "work" which includes not using a phone, car, computer, etc. She might do gardening or cooking, but she does it with a different type of energy than the type of energy that may be present when she has to do these types of things as part of a household "job." The energy she is operating from is that which is nourishing her mind, body, and spirit.

"The care of... dear friends who have died" and "being a step-mom" are additional informal practices that Mary named as facilitating her growth process. Mary also identified music, art, and cooking as informal practices.

As Mary talked about resources and practices in her life she was reminded of nature. Mary and I were both laughing as she reiterated the role of nature in her life, "Things that have resources, practices, um, nature. Nature, nature, nature in all of these. Influences in my life, *nature*. Nature, nature, nature."

At this point in her life, Mary continues to be curious about where this unfolding path will take her. She believes that everything that has happened in her life contributed to who she is right now, and therefore she is thankful for all of those experiences, even those of pain and suffering.

I wouldn't be who I am without them. You know, the lotuses grow out of

the mud…and great joy can come out of great suffering.

Mary recognizes that society is becoming more open and interested in the area of

Eastern spirituality and the integration of that into psychotherapy. For those curious

about going in this direction she recommends, "to not be afraid to (pause) pursue what

you wish in your heart and body" and to "speak openly about your approach." Mary

warns against the potential dangers of "operating only on a spiritual plane" and offers this

advice: "Read a lot. Consult with people who might be ahead of you in this process of

integration. Be curious and ask for help."

In general my suggestion is to just keep exploring your own spirituality.

To be curious about it and stay open and not think you have arrived. And

to continue to learn and grow and change. And to continue to explore the

meaning…of your life and life at this time.

When reflecting back on her growth process, Mary only wishes that she

would have "started studying Eastern philosophy and Buddhism" at an earlier age

so that she knew more now. She also wishes she had bought property on the

north shore when she had the opportunity to earlier in life, because it has been a

place of great nourishment for her spiritually.

*Sue*

Sue is a licensed social worker and licensed marriage and family therapist. She

got her masters degree in social work about thirty years ago and soon after completed

some additional supervision to become a licensed marriage and family therapist. Sue

stated with a laugh, "I was around when the [AAMFT] licensure boards were formed."

She calls her mental health practice "integrative psychotherapy," integrating meditation and spirituality into her psychotherapy practice. She also described it as a "body, mind, spirit" approach. She has been in the field of psychotherapy for 29 years and has intentionally taken a spiritual approach to therapy during that entire time. When asked what her spiritual beliefs are in a general sense, Sue explained that she does not have any beliefs; she has practices. Sue's "primary root is the Buddhist practice" with a background in yoga. She stated, "I value and have other spiritual traditions as well."

When naming the important events and influences in her growth process, Sue began by describing her nature as a child and the dynamics of her family of origin. As early as elementary school, Sue was asking questions of an existential nature. She was a "seeker" and someone who desired more depth in comparison to those around her. Sue explained that the context of her childhood only fueled her desire for something more, "to find truth, or break free from suffering, or whatever you want to call it."

Sue's father is a holocaust survivor and her mother "had her problems." Sue stated that she "grew up in a family where there was…trauma and loss" and out of that resulted dysfunction in the family. In addition, Sue's family was different from the other families in the neighborhood in several ways. During the first ten years of her life, her family was the only Jewish family in the neighborhood. And because she grew up with all Catholic friends, Sue had an experience of "being different" and not quite fitting in as a child. The values of Sue's family and the minimal importance that they placed on material items also led to her having a "different way of relating." In the following paragraph, Sue summarizes the aspects that initiated her growth process.

I don't know if there's events, I think it's just kind of an experience where

I didn't feel...like I quite fit in growing up...I was...seeking some more

depth below the surface. I very early on saw...these material things as

kind of surface stuff in life. It wasn't satisfying. And I think because I

wasn't very happy and I didn't... quite...fit in. And...because I grew

up...in the family I did.

Sue came across meditation for the first time when she was in college. Her first

experience was with transcendental mediation, which she now sees as "pretty

superficial," but it was the first step towards finding that "something" that she was

looking for.

Then in graduate school, a boyfriend of Sue's roommate shared with her the

things he was learning in a class on meditation and psychotherapy. He also introduced

her to yoga. Sue stated, "Then it was like I'd had this little taste, so what I want[ed] to do

is go *study* this stuff." Sue had felt unhappy and dissatisfied with what she was getting

out of her graduate studies and so she consulted with her academic advisor who told her

to, "Take charge of your education." This really put the responsibility in Sue's hands and

she ran with it.

After that conversation, Sue signed up to live at a spiritual center for half of the

following summer. She got an opportunity to visit the center once before moving there.

When she first saw the people there and what they were doing she was apprehensive

about the commitment she had made, but Sue credits a fellow colleague for being able to

reassure her. Below is Sue's narration of her experience living at the center.

So basically I jumped in. So that was...one of the most significant

experiences in my life. As I literally went from my regular life ...as a

graduate student to moving into a spiritual center...Overnight I was doing

yoga, I...started a vegetarian diet, was getting up at...5-6 in the morning...

just doing this whole different thing. I listening to all of these tapes and

talks...it was like an emersion experience.

After having a childhood experience of "being different" and a continued

experience of not fitting in at the first college she went to, Sue notes,

When I...moved into this particular meditation center I'd really felt like

I'd come home. It was like the first time that in my life...I was...22 years

old and I just was like 'wow.' You people are really talking about what

I'm interested in...just like 'click.'

After graduation Sue studied and practiced in that tradition for 13 years, under the

teacher that she had met there. She described him as "a very authentic teacher." A year

or so before she left that center and teacher, Sue started practicing Buddhism and out of

that found a type of meditation that really fit for her. Certain conditions came up at the

center that drove Sue to leave and end her long-term relationship with her teacher. This

teacher had been like family to Sue and so leaving him was a difficult for her. However,

she describes this event as being significant in her growth process, stating that, "out of

that loss I grew up spiritually."

Because Sue had gone to the center at such a young age and as a person who was

really seeking, she relied heavily upon her teacher and never "dealt with... [her]... own

issues or stuff." While she appreciated that teacher and was thankful for what she learned

from him, since then she has "never given away...[her]...power to an external authority" again. She "came to understand that it's really within us, it's not out there."

Early on in her practice of psychotherapy, Sue was interested in integration. After her first stay at the center, she came back to school "on fire" and started "teaching relaxation and yoga for the fellow crisis center volunteers." With the teenagers at her internship site she was "reading poetry and playing music and having them do yoga." As long as people were interested and open to learning, Sue was eager to share what she had learned.

During that time in history, few resources were available on how to integrate Eastern practices and psychotherapy. So for Sue it was "more of a learning by doing and experimenting." At the center Sue learned spiritual teachings, but when it came to integrating those aspects into her psychotherapy practice, support was minimal. Sue described herself as "more self-taught" and described the process as one in which "people would find each other...and then we would start creating it...cause only a few were interested in this integration."

Most of the integration taking place in the country during that time was in California, which Sue experienced firsthand when she lived in San Francisco for approximately a year, two years after receiving her masters degree in social work. Sue saw a center there where Eastern practices and psychotherapy were all "under one roof." Sue stated that this "gave me a model in my mind" and this vision inspired her to eventually create her own integrative center.

Sue reflected upon how the field is changing and marveled at the growing amount of "work in this area." When Sue first started integrating, there were some books coming

out on the topic, but Sue primarily read "seeker books." Sue commented, "The stuff out now is so good." She also marveled about the growing number of Eastern spirituality centers in the United States.

For Sue, a major part of effectively integrating spirituality into her psychotherapy practice was being dedicated to her personal spiritual journey and then bringing that into therapy. She asserts "All we need to do to be a good therapist is to be ourselves."

It's really walking our own path, is where it's at. And that you can't do it

as a technique... I mean there are techniques and stuff but that...really

commitment to one's own path, and practice and journey. Being willing

to do your own inner work, your own therapy...that's where it's at.

Overall, Sue describes her growth process as "this natural thing that evolved." She encourages others who are on a spiritual journey to find what is a fit for them personally; to discover what one is drawn to and then to "make a commitment...and put some roots down." Now Sue teaches Integrative Psychotherapy at the collegiate level, using a format that encourages her students to have their own "emersion experience." When reflecting back on her growth process, Sue only wishes that she had been kinder to herself and would have had "more support and what's available now."

*Karen*

Karen is a licensed marriage and family therapist who has been practicing in the field for 11 years. The incorporation of spirituality into her psychotherapy practice has been much more intentional in the past five years, but present all along. When asked what her spiritual beliefs are in a general sense, Karen responded:

I first believe that…spirituality is the meaning that we place on life. It is

also, I believe, a way of life versus something that we do, practice, or even

integrate. I see it as a way of being…and I believe that it's a process. I

also believe spirituality to be about connection, and that connection versus

separation. For some people…there is one transcendent being. I don't

believe that has to necessarily exist for a spiritual way of life.

Karen does not align herself with any particular religious tradition. She has explored

several different traditions along her journey including Buddhism, Hinduism, the

Spiritualist Community, and Native American spirituality. At some point she integrated

all of those, focusing on the common themes across traditions, such as humility and the

circle of connection.

Karen named her own "personal exploration" as the biggest influence in her life

that has shaped her professional growth as a therapist taking a spiritual approach to

therapy. Karen had some "traumatic experiences" and "experiences of loss" in her

childhood but nothing that she considered to be "hugely significant." However they did

prompt her to "question the meaning of life." As a child, Karen had intuitive and psychic

abilities and many intuitive and spiritual experiences. However, at that point in her

process she did not understand what these things were and as a result struggled with

them. Karen stated that at times she would end up feeling like she was "crazy." Over

time, with various experiences, people, resources, and practices, Karen's experiences

growing up were validated and given meaning, which aided in connecting her to

something larger than her self.

Karen stated, "Most of my life I've always had this sort of searching and longing for something." One of Karen's first tastes of that "something" was around the time when she was starting her masters degree program. She saw a mystic shaman speak and she wept throughout the training. She describes the experience as touching something within her, her spiritual self.

Also while getting her masters degree, Karen met her first spiritual director. This particular director was recommended to her and Karen described being resistant at first to meet her. Eventually she did and now states that, "she was immensely important to me." This particular director was "an intuitive and a medium herself" and she opened Karen's eyes to many different spiritual practices such as Buddhism, Native Americanism, Tibetanism, and Hinduism. She was the first person, among several people, that really helped Karen to connect the dots in her life.

> I have had very significant teachers, spiritual directors, mystics, some
>
> shamans...who have interestingly enough really guided me in working
>
> and me finding my own spiritual base, and placing meaning and language
>
> on that, and then also really helping me and guiding me in my intuition
>
> and my mediumship abilities and helping me to make that connection
>
> between the two.

Karen also names going to Taiwan and reading the *Mists of Avalon* as both "huge openings" for her. Karen's experiences in Taiwan pushed her to greater recognition of her spiritual calling. In reading the *Mists of Avalon*, Karen valued the way in which it integrated "spirituality, mysticism, femininity, and nature."

Karen has also done a lot of her own therapy throughout the years. Even though her therapist did not name taking a spiritual approach to therapy, Karen describes it as contributing to her spiritual growth and providing balance in her life, "I think there is a way...[that]...doing therapy ...can ground you into doing spiritual work because there is a sense of practicality that can ...get missed in doing the other."

During the period in which she was completing her master's degree (which was "very medical model" and "theoretical") and also exploring her spirituality (such as working with "energy" and "principles of connection"), Karen found herself getting stuck in a duality, with spirituality on one side and marriage and family therapy/psychology on the other side. At one point she even debated "between continuing to be a therapist and training to be therapist versus going the more spiritual direction."

Eventually Karen realized that "doing one or the other just seemed too extreme" and that "something was always missing if" she did just "one or the other."

So learning how to integrate the two first in my personal life and then

learning how to integrate the two in my work showed me that for me...one

or the other wasn't the path to go.

Karen had several practices that helped her to integrate these two aspects in her life, many of which she continues today. These include centering everyday, meditation, yoga, qigong, staying connected, setting intentions each day, exercising, being in nature, and doing her own therapy. Recognizing that "living a spiritual life doesn't mean living a perfect holy life" also helped Karen to make this integration and motivate her to work with the "concepts of compassion."

Karen strongly believes that effectively integrating spirituality into one's psychotherapy first starts with the self-of-the-therapist. She emphasized the importance of having a "sense of foundation of who you are" so that in the practice of therapy spirituality does not become an "externalized thing" that you do, but rather is one's place of being. Karen talked about how clients often operate from a "heady intellectual level" and believes that change is limited when therapists match their clients at that place. But in order to not match them, Karen asserted that, as a therapist, you "have to…know what it is like to not live from that level."

Karen stated that being in a grounded, centered, and/or present state all help her to integrate spirituality in her work. Learning how to pick up on the vibrational energy of her clients was also "a huge help in integrating" for Karen.

Karen found that talking with other therapists who take an integrative approach was helpful, and as a result formed a consultation group of integrative therapists. Developing inclusive language for talking about spirituality is another piece that Karen named as part of effectively integrating spirituality into one's practice.

Karen has had many mentors along her journey as supports through her growth process, some of who are marriage and family therapy supervisors. Books have also served as a great resource. Authors and books that Karen named are included in Appendix C.

Karen now supervises other therapists and finds that teaching and mentoring other therapists is now an important part of her journey and continued growth. Continuing to grow, explore, learn, and make room for changes are all things that Karen named as

important pieces for ongoing successful integration.  Staying out of "dualistic thinking" is a conscious effort that Karen also makes.

Stated in the simplest fashion, Karen's advice to others wanting to intentionally incorporate spirituality into their psychotherapy practice is, "To live it yourself first and not be perfect in it."  She suggests having a foundation but also allowing room for change and playfulness.  Lastly she names building a support system of people with similar interests as an important key.

When reflecting back on her growth process up to this point, Karen wished that she would have tried to stay out of duality and would have allowed for more "humanness" within her process.  She wished she could have flip-flopped the order of her process, having some of the foundational pieces first, and then the spiritual and intuitive experiences.  Karen also stated that it would have been nice if someone would have told her in the beginning stages of her exploration, "When you choose to live this…way of life, it comes with its hard times."

Chapter V: Discussion

The participants described their growth processes as continuous unplanned

unfolding paths, starting from the time that each was a young child and continuing

through the duration of their profession. Throughout the course of this process each

underwent great growth and change and each sought continual growth and change.

Sometimes the growth was gradual and sometimes it was sudden and dramatic.

*Personal→ Professional*

The participants named their personal spiritual journeys as having the greatest

impact on their growth processes as professionals taking a spiritual approach to therapy.

Integration of spirituality into their psychotherapy practices started first with the

therapist's own spiritual growth process and the therapist's presence or being, and then

the therapist brought her experience and being into the therapeutic setting and the

therapeutic relationship. All interviewees affirmed that taking a spiritual approach to

therapy is not something that you *do*. There is not a set of techniques that one learns and

then applies. Rather, it's an inside out process; how one shows up externally as a

therapist is dependent upon who one is on the inside. In summarizing her interview,

Karen stated, "Remember that it's not something that we do, that we integrate, or that we

practice but it's...in essence I think it's who we are, it's our way of life."

Active involvement in one's own spiritual growth and living a life dedicated to

spiritual connection and wholeness helps a therapist to develop different skills and

qualities that aid in effectively incorporating spirituality into one's practice. Some of the

skills and qualities named by the therapists interviewed include the development of

language that is inclusive, a sense of openness and respect for all spiritual and religious walks, and a presence that creates a healing space.

*Personal Spiritual Journey*

The spiritual journeys of those interviewed were shaped by several significant experiences and influential resources. Common themes were found across the participants' journeys with the two broad themes being significant events and influential resources. Within each of these themes common sub-themes were also found. Many of the themes are interconnected and overlapping.

All participants named several different significant experiences that shaped their growth processes. Some were broad experiences that took place over an extended period of time or stage in their lives and some were specific experiences that took place within a defined short period of time. Within the category of significant experiences there were common sub-themes including the experience of having a strong spiritual desire from a young age, childhood experiences of trauma and loss that contributed to their growth processes, and experiences of bumping up against the mainstream psychotherapy system.

All participants discussed the importance of several different resources in their growth processes. Each interviewee named influential people, books, and practices that impacted their journey. They all had an academic training experience that minimally, if at all, contributed to their growth process as a therapist taking a spiritual approach to therapy. As stated before, the themes identified often overlap, and the language used to describe the themes can often be used interchangeably. For example, the participants all claimed that their childhood struggles contributed to their spiritual growth processes. These struggles could be classified as a significant experience but they could also be

categorized as being a resource since they served as a source of motivation to grow spiritually. It is important therefore to not get caught up in the language, but to understand the essence of what the participant was meaning.

*Significant Experiences*

*Innate spiritual desire at a young age.* At some point in their interview all three participants described themselves as having an innate spiritual desire at a young age. Mary talked about becoming a "spiritual seeker" before the age of ten. Sue stated that she had a "longing for...intimacy, for spiritual, for connection" starting in elementary school or earlier. And Karen said that most of her life she has had "this sort of searching and a longing for something."

This spiritual desire follows along with the assumptions stated in the literature review, that all human beings are spiritual in nature and have a desire for connection with something greater. Therefore, the spiritual desire present in each interviewee was not surprising. I do think it is significant, however, that each therapist was aware of this aspect of herself and recognized its role in her spiritual growth process.

Although some may be able to identify their spiritual nature as an adult, and with hindsight recognize how it showed up in their childhood, it seems that at least two of the participants described recognizing this desire as a child. While they, as children, did not name it as a "desire for the spiritual," they did have an experience of feeling different from those around them; unlike their peers they had this appetite for something more.

*Childhood Experiences.* All participants talked about their innate desire for the spiritual being accentuated and perhaps brought to the forefront by the experiences of their childhood. The language of "trauma" and "loss" was most often used to describe

these experiences. The severity of these experiences varied by participant, yet regardless of their severity, these experiences pushed all participants to discover more out of life. Karen's experiences seemed to be the least severe, yet she recognized their influence.

I think in general a lot of people's own personal struggles lead to the growth process, so certainly some of my traumatic experiences in my childhood, experiences of loss, but...they weren't hugely significant, but those certainly all... made me question the meaning of life.

Mary and Sue both talked about their parents' dispositions and how these influenced their family systems. I would have liked to have learned more about each participant's family of origin and how it shaped their spiritual growth process, but with the research question being as broad as it was, time did not allow me to go into more detail. However, I do think that it is important to note that each participant talked about her family of origin as an influential piece in her growth process.

*Navigating through the mainstream system.* Each participant described a specific time in her life in which she struggled with the mainstream form of conducting psychotherapy. Most likely, such experiences repeatedly occur in the lives of those interviewed, but each person specifically brought up the tension that she felt during her master's degree program. Sue found herself unhappy with her educational experience and turned to her academic advisor who urged her to take charge of her education. Karen experienced a strong duality between her study of psychotherapy and devotion to spirituality during the time of her masters training and eventually found a way to integrate the two. Mary's approach to clients

appeared unconventional in comparison to her fellow classmates in her masters program, making it challenging to remain true to her beliefs. All struggled with the limitations that come from taking an exclusive Western approach to psychotherapy.

Interestingly, all three participants currently have their own private practices. Mary talked specifically about the new freedom she experienced once she opened her own practice and got away from HMOs. Both Mary and Sue joyfully talked about their early dreams of opening an integrative therapy center and the recent fulfillment of these dreams.

*Other significant experiences.* Not all of the experiences named by the participants fall within a common sub-category of significant experiences, yet some of those experiences still deserve attention. Examples include Karen's first experience of hearing a mystic speak, Sue's emersion experience living at a spiritual center, and Mary's experience of seeing other people and herself transformed by spiritual growth. However, I believe these were best described in the case study section of the paper.

*Influential Resources*

*People.* The participants named several people that were influential in shaping who they are today. These people range from being public figures to like-minded friends. Those in the former category include but are not limited to Thich Naht Hanh, Pema Chodron, and Jon Kabat-Zinn.

All participants worked closely with a spiritual director or teacher at some point in their lives. Both Mary and Karen were encouraged to see a specific

spiritual director by an acquaintance or friend, out of which developed relationships that profoundly impacted their spiritual growth. While the relationship she had with her first spiritual director seemed to be the most influential, Karen went on to develop a number of other relationships with spiritual directors, mystics, teachers, and shamans who shaped her growth process. Sue primarily talked about the long-term relationship that she had with a spiritual teacher from the mediation center at which she was highly involved.

Along the way, the participants formed support networks for themselves, made up of people who were/are following a similar spiritual path. Sue used the term "synergetic" to describe the energy present among those interested in the integration of spirituality and psychotherapy during the time when she was first starting out. She described people as intentionally seeking out one another. Karen has "formed a consultation group with other therapists who integrate different practices into their therapy work," and Mary mentioned several supportive friends who are very spiritual. In particular, Mary talked about a dear friend who is a "profound yoga, meditation, and chanting instructor" and also a close group of friends made up of herself and two other people. In describing the nature of this group she stated, "We really enrich each other by our conversations and our questions...and sharing our experiences and talking about our doubts, our challenges, our individual challenges...that's very helpful."

Mary and Karen both included one or more of their marriage and family therapy supervisors as influential in their growth process. These supervisors were

people who encouraged them to follow what they believed to be true and nurtured the intuitive aspect of themselves.

In addition to the above, several other people were named as contributing to the growth processes of the participants. Whether it was a one-time encounter with a person or a long-term relationship, a connection occurred that made a strong impression.

*Books.* Books were highlighted as significant within the growth processes of all interviewees. In addition to books, Sue and Mary both mentioned listening to tapes as part of their growth process, but I did not get the names of those tapes.

Unfortunately, time did not allow for much discussion around books in Sue's interview. She did mention having a "recommended books" list for those interested in integration. As far as her own journey, minimal books on integration were available during the early stages of her process. Therefore, in those days she read "seeker books." Sue specifically talked about a story in the book, How Can I Help? by Ram Doss. She found the story inspirational and one line particularly powerful, which stated, "He was the space where the healing happened." That line caught Sue's attention and captured who she desired to be as a therapist.

Mary's appreciation for books was visually apparent since I was able to interview her at her home and had the chance to see her personal office. Again, I wish I could have written down all of the books that she owns, but time did not allow. Mary stated in general that poetry, especially nature poetry, has contributed to her growth. She named several authors whom she finds insightful

and specific books that were instrumental in her growth process, all of which are listed in Appendix C.

I interviewed Karen at her professional office space, but she described having two bookcases at home filled with "books and books and books." Karen named people who she considered to be great authors, along with the names of specific books that she found helpful. Karen has read a wide range of books on spirituality, including ones that she described as being on the eccentric side. Karen found value in those as well, stating that, "it gives you a sense of where there is that foundation and where there is that piece, I think, of misplaced mysticism." See Karen's list in Appendix C.

*Practices.* The practices named ranged from formal to informal practices and from conventional spiritual practices to unconventional spiritual practices. Meditation and yoga were the two predominant spiritual practices utilized by the interviewees. Within meditation, several different types were named including: sitting meditation, walking meditation, eating meditation, and moving meditation. Mary and Karen both moved from their yoga practice into learning about qigong.

Several informal practices were also named such as mindfulness in daily living and approaching life with intentionality. Mary and Karen both talked about the role of nature in cultivating their spirituality, and Sue told about writing poetry and making music. Karen mentioned the importance of exercise twice in her interview. "Working out for me is a spiritual practice, if I set intention for it…it really gets me in my body, especially if I'm doing it in nature." In addition, Mary named cooking, gardening, art, music, caring for friends in their dying process, and being a step-mom, all as practices that contributed to her growth process.

All participants signified doing one's own therapy work as an important part of the growth process. Sue did not explicitly talk about going to therapy herself, but when asked what things have helped her to effectively integrate spirituality into her practice, she emphasized the importance of doing your own work and therapy. Mary and Karen both talked about doing their own personal therapy.

*Academics.* When asked if anything in their formal education contributed to their professional growth as a spiritually-oriented therapist, each participant's initially laughed, seemed puzzled, or did both. All three participants initially responded "no" to the question, but Sue and Mary went on to identify one or more experiences that were an indirect part of their academic experience, which contributed to their growth processes.

Sue was thankful to her academic advisor for pushing her to take charge of her education. And Mary gave credit to her off campus supervisor for nourishing her intuition and described receiving some validation from certain professors in her masters degree program.

*Reflection on one's journey and advice for others*

At some point during the interview, each person described having a sense of gratefulness and appreciation for all of her life experiences because without those experiences (even experiences of trauma and loss) she would not be who she is today. When asked if there is anything they would like to have done differently, now reflecting back on their growth process, all three participants replied that they wish they would have known what they know now and had the resources that they do now at an earlier point in their growth process.

Several common pieces of advice for others on this journey were named. In addition to the advice already present in the above themes, such as beginning with your own personal growth, all three therapists stressed the importance of continual curiosity, openness, and eagerness to grow, learn, and change.

All three participants, at some point, mentioned the potential for harm within spirituality. All talked about how vulnerable people can be related to spirituality and the potential for harm that is present within that vulnerability. Mary highly stressed the importance of therapists being open with their biases and the type of therapy that they are doing. She also warned that if one does not stay grounded, and operates solely on a spiritual plane, a narcissistic mentality can be reinforced.

At this point in their growth processes it is interesting to note that all three participants are formally teaching and mentoring others in multiple capacities on the integration of spirituality and mental health. All participants recognized these roles as an important part of their continued growth. In addition, all interviewees spoke about the growing public interest in the integration of spirituality and psychotherapy.

*Return to researcher biases*

While I set aside my assumptions and biases during the data collection and analysis process, many were confirmed as themes. I assumed that integration of spirituality into one's psychotherapy practice requires personal work on the part of the therapist. This came out as the major theme across all three interviews.

I believed that open-mindedness by the therapist would be an important part of integration. Each therapist addressed this aspect in some form. Sue stated that she does not preach Buddhist practice to her students and "seeking" clients. Rather she encourages

them to follow whatever tradition they are interested in and, if unsure, to explore from the range of spiritual teachings and practices. In her interview, Mary stressed the importance of being "respectful to everyone's spirituality and religion." Both she and Karen claimed that finding inclusive language is necessary for doing this line of work. Continued curiosity and inquiry versus close-mindedness was given emphasis by all participants.

I predicted that the participants would have a calming presence. I do not claim to be a qualified judge on whether or not someone's presence is calming; therefore I can only speak from my personal opinion. In my experience the presence of all three participants felt calm and healing.

I assumed that the participants would be able to articulate their general values and underlying processes for making meaning in life, thereby facilitating their ability to notice these things in therapy. I do not believe the interview questions provided much space for specifically getting at these processes. However, I think this point was partially supported with each participant warning against the potential harm that can be done due to the vulnerable position of those seeking spiritual growth. In her interview, Mary clearly emphasized the importance of therapists understanding and being overt with their biases.

I predicted that the participants would name a single hardship or difficult growth period as the catalyst to taking a spiritual approach to therapy. All participants did name some degree of trauma and loss in their childhood, along with additional life challenges such as difficulties during their master's studies. On the contrary, all three participants expressed taking a spiritual perspective to understanding their clients from the very beginning stages of their therapy practices. None described a single pinnacle experience;

although some experiences were more powerful than others, a conglomeration of life experiences shaped the "being" of each participant and her approach to life and therapeutic practice.

Chapter VI: Summary

The outcome of this study is not a step-by-step process to follow when wanting to integrate spirituality into one's psychotherapy practice. If anything, this study highlights the unplanned unfolding nature of the process. The process does not happen in isolation, but is impacted by all aspects of one's life. While the path is unique for each individual, several similarities were found within the growth processes of the participants.

The central message was to begin with one's personal spiritual growth. That growth then impacts the "being" of a person. The focus of one's personal growth is cultivating a spirituality that fosters health and wholeness. Then all one has to do is bring him/herself to the therapy relationship.

Things that facilitated the personal spiritual growth processes of the participants fell into two general categories: significant events and influential resources. Within these two categories additional sub-categories were present. The participants cited a variety of significant events, but all named having an innate desire for the spiritual at a young age, the nature of their childhood fueling that desire, and difficulties with navigating through the mainstream psychotherapy system.  Under the category of influential resources, all participants referred to a number of people, books, and practices that shaped their growth processes.

I believe the stories of these participants can serve as a valuable resource for those seeking to integrate spirituality into their psychotherapy practice. The similarities and themes that came from the participants' stories provide a general framework for one to have in his/her mind when embarking on this journey. All participants stated that they wish they would have known what they know now earlier in their growth processes.

Therefore, I think the stories of these participants, who are far along in the process, are useful and meaningful to those in the early stages of their process.

I started this project with the aim of discovering the "missing link" in my preparation as a therapist. I found that missing link to be spirituality and my own personal growth in that area. I was curious as to what this growth process might look like and interested in the wisdom of those who were ahead of me on this journey. Due to the high caliber of the participants my hopes for this study were greatly exceeded. The three therapists who participated in this study exemplify all the qualities that I desire in myself as a therapist. As a beginning therapist who desires to take a spiritual approach to therapy, I feel truly fortunate to have begun my intentional growth process with the experience of this research project.

*Future Research*

As mentioned above, there is a lack of research and literature on the growth processes of therapists who take a spiritual approach to therapy. This research is a step towards filling that gap and has the potential to guide future research in this area. Future research could explore the growth processes of spiritually oriented therapists with different characteristics (ex. males, those with a Christian orientation), creating a greater ability to generalize findings.

Another area of interest for future research would be utilizing the growth processes of seasoned therapists who take a spiritual approach to therapy, such as those in this study, to create guidelines for effective psychotherapy trainings on the integration of spirituality and psychotherapy. This study, along with future studies, may also provide

implications for marriage and family therapy training programs on how to effectively

include spirituality-of-the-therapist work in a program curriculum.

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## Appendix A: Consent Form

**Consent Form for: Growth Processes of Seasoned Marriage and Family Therapists Who Take a Spiritual Approach to Therapy**

This research is a qualitative study that explores the growth processes of seasoned marriage and family therapists who take a spiritual approach to therapy.

The goal of this study is to better understand the personal processes undergone by therapists in order to competently integrate spirituality into one's psychotherapy practice. Outcomes of this study may serve to provide direction for therapists who aspire to successfully integrate spirituality into their practice. Study outcomes could also provide implications for marriage and family therapy training programs by offering ideas for facilitating this growth process for trainees.

Before granting the interview, please read and sign this consent form, indicating that you understand the potential risks and benefits of participation, and that you understand your rights as a participant. If you have any questions, please contact, Sara Bidler, the primary researcher, at (763) 458-2654.

RISKS

Due to the personal, introspective nature of the subject matter at hand, the line of questioning may unearth unexpected emotional responses. You have the right to decline answering any of the interview questions and may withdrawal from the study at any point.

BENEFITS

As a result of pondering and answering the questions asked in this interview, you may develop a deeper understanding of your personal growth process. Your participation in this study may also contribute to others in the future.

CONFIDENTIALITY OF RESPONSES

Your answers are strictly confidential. Only the primary researcher and her supervisor will have access to the confidential raw data.

RIGHT TO WITHDRAW OR DECLINE TO PARTICIPATE

Your participation in this study is entirely voluntary. You may choose not to participate without any adverse consequences to you. Should you choose to participate and later wish to withdraw from the study, you may discontinue your participation at any time without incurring adverse consequences.

NOTE: Questions or concerns about the research study should be addressed to Sara Bidler, the researcher, (763-458-2654) or the research advisor, Dr. Terri Karis (715-232-2250). Questions about the rights of research subjects can be addressed to Sue Foxwell, Human Protections Administrator, UW-Stout Institutional Review Board for the Protection of Human Subjects in Research, 11 Harvey Hall, Menomonie, WI 54751, phone (715) 232-1126.

I attest that I have read and understood the above description, including potential risks, benefits, and my rights as a participant, and that all of my questions about the study have been answered to my satisfaction. I hereby give my informed consent to participate in this research study.

Signature _____ _____ Date _____

Once the study is completed, the analyzed findings would be available for your information.

Appendix B: Interview Questions

Demographic Questions:

Professional title(s):
Therapy modality or name:
Number of years practicing post-graduate:
Number of years intentionally taking a spiritual approach to therapy:
What are your spiritual beliefs, in a general sense?

Questions directly related to the research question:

1. Tell me about the important events and influences in your life that have shaped your professional growth as a therapist who uses a spiritual approach to therapy.

2. Was there anything significant that happened that encouraged you to take this type of approach to therapy? If yes, tell me about that.

3. What things have helped you to effectively integrate spirituality into your therapy practice?

4. What type of training, if any, did you get in your formal education that contributed to your professional growth as a spiritual-oriented therapist?

5. Did you have someone who mentored you through this process or a model from whom you found direction? How was this person helpful to you?

6. Tell me about any books you read or resources you utilized that greatly contributed to your growth process.

7. What sort of exercises or practices did you take part in that facilitated your growth process?

8. When reflecting back on your growth process, is there anything that you would have done differently?

9. What things help you maintain your position as a therapist who effectively uses spirituality in therapy?

10. In general, what advice or suggestions would you give to a therapist who seeks to effectively incorporate spirituality into his/her marriage and family therapy practice?

Appendix C: Resource Recommendations

## Mary
*Books*
- Full Catastrophe Living – Jon Kabat-Zinn
- Stories of the Spirit, Stories of the Heart – Christina Feldman and Jack Kornfield
- A Path with Heart – Jack Kornfield
- A Still Forest Pool: The Insight Meditation of Achaan Chah – Jack Kornfield
- Radical Acceptance - Tara Brach
- Poetry and nature poetry
- Books on Naikan Therapy
- Books on Zen Therapy (specifically by David Brazier)

*Authors*
- Pema Chodron
- Thich Nhat Hanh

## Sue
*Books*
- How Can I Help? – Ram Dass
- A Gradual Awakening – Stephen Levine

*Authors*
- Carlos Castaneda (mentioned reading his books in graduate school)
- Stephen Levine

## Karen
*Books*
- The Mists of Avalon - Marion Zimmer Bradley
- When Things Fall Apart: Heart Advice for Difficult Times – Pema Chodron
- Wherever You Go There You Are – Jon Kabat-Zinn
- God Is a Verb: Kabbalah and the Practice of Mystical Judaism – David Cooper
- The Dance of the Dissident Daughter: A Woman's Journey from Christian Tradition to the Sacred Feminine – Sue Monk Kidd
- Spiritual Resources in Family Therapy – Froma Walsh
- Edgar Cayce books

*Authors*
- Brooke Medicine Eagle
- Dalai Lama
- Thich Nhat Hanh
- Joan Borysenko
- Jean Shinoda Bolen
- Carolyn Myss books