

Éisteach

*A Quarterly Journal of
Counselling and Psychotherapy*

Volume 12 No. 1 • Spring 2012 •

▼ **Spirituality in Counselling**

Ann Long

▼ **Spirituality and Therapy**

Siobhán Mahon

▼ **What is Integrative CBT?**

Eoin Stephens

▼ **The Evolution of Human
Consciousness and Spirituality**

Barbara Dowds

The logo for the Irish Association for Counselling and Psychotherapy (iacp). It features a stylized white '@' symbol followed by the lowercase letters 'iacp' in a bold, sans-serif font.

Irish Association for Counselling and Psychotherapy



In November 2011 I had the opportunity to attend a workshop – in London – entitled ‘Troubling Patients in Troubling Times’. The backdrop to the workshop is the raft of changes being introduced in the NHS in the United Kingdom. I found that much of what was discussed was applicable to Ireland as we are in a period of recession, austerity and cutbacks. As we know within the HSE there is a moratorium

on recruitment and all of us are aware that hospital budgets are under immense pressure and that contributions to private health insurance are going one way – up.

The workshop looked at the inter-relationship between troubled patients - those who need access to psychological services - and the ‘troubling’ times we live in. Patients or our clients need our support, our availability and our ability to contain the anxieties they may presently be experiencing. Counsellors employed in the public sector or by charitable organisations, indirectly through a referral system may be feeling under pressure to either reduce the number of sessions they offer, or will be paid for. This can lead to what one participant at the workshop described as a ‘triage approach to psychotherapy’, only short-term contracts are offered often when that is not appropriate.

For those depending on or maintaining a private practice the pressure points may be slightly different. How can one maintain the stream of referrals? If referrals are not as numerous as they were in the past, would a reduction in counselling fees bring in more? And what about those newly qualified or presently in training? What is their future?

There seems to be a growing trend in organisations employing counsellors to demand proof that counselling works. For example, Mr X is referred because he is feeling depressed. By the end of so many sessions the counsellor has to ‘prove’ to those who referred Mr X that he is now less depressed than he was when first referred. At the workshop counsellors spoke of the myriad forms they had to fill in to prove that their work was effective. Some of these forms had to be filled in both before and after a session. This type of proof grates with me as I feel it undermines the fundamental relationship between client and counsellor which often cannot be quantifiable.

The value of the workshop was not that it came up with any solutions to the difficulties faced by counsellors either working within the public sector or employed indirectly by the public sector. Rather its value was in the openness, concern for the client, discussion and solidarity that was so evident throughout the day.

Perhaps there needs to be a whole rethink of how to provide appropriate services to those clients who require them. Maybe we should take the lead from the father of psychoanalysis – Sigmund Freud – who wrote in 1918; ‘some day the conscience of society will awaken and admonish it that the poor have just as much right to help for their minds as they already have to life saving surgical help, and that neuroses threaten the health of the people no less than tuberculosis.... [On that day] these treatments (“talking cures”) will be free of charge’.

Mike Kelly

Contents

04 Spirituality in Counselling

Ann Long

08 Spirituality and Therapy

Siobhán Mahon

13 What is Integrative CBT?

Eoin Stephens

19 The Evolution of Human Consciousness and Spirituality

Barbara Dowds

Regulars

24 Letters to the Editor

27 Workshop Reviews

30 Therapist Dilemmas

32 Noticeboard

Editorial Board: Geraldine Byrne, Barbara Dowds, Mike Kelly, Alison Larkin, Padraig O'Morain.

Design and layout: Niamh Power, Print Design Services.

Co-ordinator: Deirdre Browne.

ISSN: 1393-3582. Advertising rates and deadlines: Contact IACP for details. (Early booking essential.)

Scripts: Each issue of *Éisteach* is planned well in advance of publication date and some issues are themed. If you are interested in submitting an article for consideration, responding to the Therapist's Dilemma or wish to contribute a book or workshop review or letter to the editor, please see 'Author's Guidelines' on the IACP website, www.iacp.ie.

SPIRITUALITY IN COUNSELLING

by *Ann Long*

Abstract:

This paper is designed to invite counsellors to review and examine what spirituality means to each and every one of us as unique human beings. The paper is not written with the intent of being prescriptive. It depicts, merely, one woman's attempt to unravel the enigmatic and mysterious meanings inherent in and around the concepts related to the phenomenon of spirituality and my endeavour to relate these paradoxical themes to counselling. The works of spiritual philosophers are used to reflect on some of these mystifying concepts. Counsellors are providers of a sacred space known as the therapeutic relationship. They are guardians of that essential humanity, which ensures that clients never become less than full human-beings whatever life stories they share or whoever they may be. This paper reflects on some of the fundamental concepts embroidered within the tapestry of the phenomenon of spirituality.

Introduction

Sometimes the very use of the term 'spirituality' stirs up some confusion. It can conjure up iconic flashes of Christianity, Judaism, Buddhism, and so on. Spirituality, as conceptualised in this paper, is not equated with any of the varieties of religious experience. This is principally because it is explored within the context of counselling. To link the conceptualisation with one or all denominations, or creeds, only leads to bias promotion and perhaps to the counsellor's patronage of their own religious views to clients with different belief systems. Throughout history religion has, in some instances, played a part in creating barriers to communication. When extrapolated to counselling, this may become evident when counsellors wear certain jewellery, badges and symbols when working with clients. These actions, sometimes unknowingly, may create barriers, or warnings to clients that certain life experiences are best left unsaid (Klein, 1975).

The current examination of spirituality intends to step over all cultural and religious divides and all other partitions that consciously, or unconsciously, separate one human being from another. The classifications and labels that segregate individuals and nations crave to be overcome. At the same time, it is acknowledged that all creeds, classes and cultures can communicate on a spiritual domain and still maintain their individual choice about being, or not being, affiliated to a certain religion. Consequently, throughout the text the common thread of spirituality will be used like a therapeutic catalyst, which helps to unite humankind like family (Fromm, 1961).

In this paper the term spirituality is used to refer to each individual's right to discover and own his or her interpretation of spirituality. This may be a religious free, culture free, bias free representation, which rests (sometimes quietly) within the being, self, or essence of each and every one of us as unique individuals.

Freedom to be me

Freedom of choice is used as a backdrop to this discussion together with a heightened awareness that there are as many different interpretations of spirituality as there are people on this planet (Gandhi, 1982). With this perspective in mind, the phenomenon of spirituality may be defined as something ideal, in that in one sense it is part of our selves, part of our human inheritance and, therefore, very human, and, in another sense it is greater than ourselves. This mysterious part can be defined as a form of intangible energy that exerts an influence, raises our centre of personal energy and generates developmental, regenerative and healing properties that are unattainable in other ways (James, 1962). This unseen force, or energy, guides each of us and propels the *self* of human beings forward towards self-actualisation (Maslow, 1987) and self-realisation (Rogers, 1993).

Acknowledging the existence of this imperceptible spiritual energy suggests that there is a wider world of 'being' than that of our everyday consciousness and that it is possible to experience union with this something that is greater than our self (Jung, 1989). Moreover, we discern that we have embraced this union when we find our greatest sense of direction in life, a direction that is grounded solidly in higher

level principles, values and core human-care qualities (Rogers, 1993; Carkhuff, 1969). Embracing these qualities and using them to guide our actions and hence our counselling practice, enables us to act and to work in accordance with what is felt as deepest and truest within our own self, and in so doing, we find our greatest peace.

Self

The term '*self*' as used in this paper, refers to our innermost being, our essence, our soul. It may be described as analogous to the voice of consciousness and the feeling of wellbeing and of a job well done. This definition of self should not be confused with the notion of cognitive wellbeing, which refers to knowledge we have gained in life from academic experience or from psychological and semantic memory processes. In this paper understanding the word *self* differs from materialistic, academic and worldly knowledge and possessions. Angelus Silesius (1986) eloquently described this notion in his work on the spiritual maxims.

*'Love goes into God's presence
unannounced,
While at the gate
Reason and knowledge must
remain,
And for an audience wait.'*

Self care

A spiritual perspective of counselling has become increasingly important among counsellors who wish to work holistically with their clients. However, counsellors need to first feel comfortable with, and have the ability to care for themselves, emotionally, physically, mentally and spiritually before they can truly care for others. Otherwise, it is not possible to care for and respect other people's holistic health, wellbeing and well

becoming. Counsellors might find it difficult, if not impossible, to co-travel with other human beings (clients) into the emotional, spiritual and mental domains, if they had not first travelled inward into the self and discovered a new and liberated self-awareness. It would be difficult for counsellors to accept and honour a client's perception of his or her spiritual aspect of self and of the truth within -with unconditional positive regard-without counsellors first discovering a personal understanding of spirituality (Rogers, 1993). It is not possible to know other people better than we know our own self. Our capacity to feel for and with other people -a capacity that is vital for the nourishment of spirituality - and counselling - is limited by the extent to which we are able to feel compassionately for and with our own self.

Exploring the spiritual aspect of self, therefore, may begin with the belief and understanding that all our relationships start with our own self. The subtle combination of how we feel about our own self, how well or little we know about our own self and, how healthy and alive we feel inside, largely determines the quality of time we spend comfortably alone, in solitude, coupled with the quality of relationships we have with others. This is particularly noticeable in those interactions that are intimate, self-disclosing and self-revealing such as in the healing encounters that occur in the counsellor-client relationship.

Human being or being human

The experience of 'being' is also central to understanding the concept of spirituality. At moments of 'being' in touch with the spiritual side of self, there is no specific content to consciousness, no colouration,

no qualification, but simply a 'beingness' that is both powerful and all pervading. There is no 'where' to go with this experience, it is 'here and now' (Ferruci, 1983). Experiences of peace and tranquillity often accompany moments of 'beingness'. These experiences permeate every aspect of the psyche and reach out to other people and the world.

Consequently, it is an experience of 'being' both unique and universal; having transcended all aspects of our everyday self and yet, at the same time, 'being' oneself more fully than at any other time. 'Being' is present now and forever and is not dependent on change of lifestyle or circumstance. In Psychosynthesis, for example, 'being is, and always has been, a touchstone for healing and human development (Assagoli, 1974).

Spiritual work in counselling, therefore, is not a matter of expanding awareness to obtain more psyche content, but simply a matter of intensifying essential 'being', of removing obstacles or growth blocks to that 'being', and to making choices to allow that 'being' to shine more clearly and brightly through the 'lenses' of the psyche and the body.

The spiritual dimension of self

The 'self' is what an individual is when considered separately from other human-beings. It is 'me' in my individuality, in my inwardness, in my uniqueness. It is my closeness with my own self in times of solitude. Searching for the spiritual dimension is 'an inside job' that begins from within one's own self.

Co-evolving with the 'self' is the concept of 'becoming a person' and self-actualising (Rogers, 1993). Becoming a person is 'me' considered in relationship with

other human beings, in my social context, in my solidarity, 'in-touchness' or communion with others in moments of sharing and at times of listening. It reflects my inner world as almost nothing else does. It reveals my innermost self in silence. How I experience having a sense of self dramatically affects how I experience 'being in touch' whether this is with others (clients), as in the; I-thou relationship, or with my innermost self (Buber, 1935). For Buber, 'in-touchness' meant the development and maintenance of spiritual; 'I-thou' relationships. This is a life-long developmental process of discovering how to make enlivening, rewarding, nurturing and caring contacts with other people without losing the sense of and being at ease with who I am - in a self-nourishing and self-affirming way (Vaughn, 1986).

Touching the untouchable, hearing the unspoken and seeing the unseen

Relationships with others, of this nature and wonder, may also happen with individuals we have never met, as I am attempting to do, now, with you the reader. This makes the job seem worthwhile. Further, even as you read you may be 'tuning in' or 'becoming in touch' with me, now, as you read. This makes both of us seem worthwhile (through the channel of a journal).

In order to advance this debate, two interesting perspectives will now be explored. From a metaphysical perspective, a counsellor may be looking at the moon or a star and realising that this same sky can be seen in other countries, at the same time, by other human beings. This type of self-awareness has the power to connect us all together, as one family, in one universe.

From an existential perspective, the spiritual dimension of self enables us to make connections with other human beings in their pain and suffering. For example, when atrocities happen in other countries, as well as our own, other people's suffering has an impact on the self of the person choosing to make that connection with his or her brothers and sisters, on this planet, at this moment in history. In so doing, this connects the self of one person with the self of others. In communion with others we reach out and touch the untouchable, and, in so doing, we become one in our humanness, using the channel of spirituality to hear the unspoken and see the unseen.

Embracing the essence of humanness

The spiritual dimension of self, therefore, refers to the intangible, non-physical part of human beings. The non-physical facets of thought, feeling, and sense of purpose were identified by the early Greeks as the 'psyche' (Saks and Krupat, 1988). Many people and religions tend to use the word 'soul' for this non-physical aspect of human beings (Peck, 1996). People who have a sense of 'soul' have an inner reality, something virtually as precious as life itself, because it distinctly influences the way in which we experience ourselves and relate with others. Von Franz (1975) said: 'The experience of [the soul] within self brings a feeling of standing on solid ground inside oneself, on a patch of eternity, which even physical death cannot touch.'

It is vital therefore for counsellors not to view spirituality as synonymous with religion. Religion is considered by some to be of divine origin, with a set of revealed truths and a form of worship (Peck, 1996). Spirituality is regarded to be of human origin, not based on worship or creed,

but paradoxically from something inherent within the self of the person, which symbolises his or her spirituality in humanness.

Using this frame of reference, it is easy to see that many people who are **not** affiliated to a religious group may be very spiritual and that adherence to a religious group does not automatically guarantee that one is spiritual. To believe that spirituality derives from religion (usually only one religious denomination- depending on what the person is affiliated to) poses many ethical dilemmas for counsellors as witnessed anecdotally in counselling. The following vignettes highlight this quandary.

Incident 1. Counsellor A. could not understand why a client had chosen not to believe in any form of organised religion. After every session she whispered some prayers asking that he might ‘see the light’.

Incident 2. During a supervision session counsellor B. disclosed that she was working with a young woman who had gone to England for an abortion. The supervisor asked: ‘What is it like to work with a murderer?’


Endeavouring to change counsellors’ attitudes about each individual’s freedom and right to choose, or not to choose, their own personal form of worship is difficult when it concerns the counsellors’ deep and heartfelt understanding of his or her own religion. Yet, if people believe that ‘what is right’ for them must also be ‘right’ for all other human beings, we become reductionist in our thinking and in our counselling practice. Hence, we are automatically diminished in our humanness. We no longer practice the core conditions of counselling as we are placing conditions on our clients.

Further, ‘In putting ourselves up’ as being right (in any scenario) we are simultaneously ‘putting others down’ as being wrong.

Conclusion

To be spiritual means paradoxically to become fully human. The reverse is also true, with all its pain and beauty, trauma and healing, living and dying. People who are troubled emotionally, or dying, search to find freedom from the bondage of excruciating suffering, and for healing (or a peaceful death).

Counsellors are in a privileged position when journeying with other human beings (clients) who bare their souls while sharing their lived experiences within the sacred space that is called the therapeutic relationship. Moreover, this soul sharing is a much needed life-affirming force for many human-beings like our selves. However, sometimes we may shy away from exploring the spiritual dimension of self. Perhaps because we see it as something different from being fully human, hence fearing it rather than embracing it. Regardless of our own interpretations we should not deprive our students or clients from exploring natural, human, life-giving and life-nurturing spiritual experiences.

Alice Walker (1982) writes eloquently about Shrug experiencing one such moment: [Shrug says] *One day when I was sitting quiet and feeling like a motherless child, which I was, it comes to me; that feeling of being part of everything, not separate at all. I knew that if I cut a tree my arm would bleed. And I laughed and I cried and I run all around the house. I knew just what it was. In fact when it happens you just can't miss it.* 



Ann Long began her career as a registered general nurse and then a registered mental health nurse. She taught mental health nursing at the University of Ulster from

1983 until her retirement four years ago.

During her time at the University she graduated with a BSc (Hons) Psychology, an MSc Counselling and a Doctor of Philosophy by published work (focusing on the therapeutic relationship). Currently, Ann is an Honorary Fellow of the University of Ulster. She has a small private counselling practice in Belfast. She is an accredited counsellor and an accredited supervisor with IACP. Ann invites you to contact her at: ma.long@talktalk.net

REFERENCES

- Assagoli, R. (1974) *Psychosynthesis: a collection of basic writings*. New York: Viking.
- Buber, M. (1935) *I and thou*. New York: Scribner.
- Carkhuff, R. R. (1969) *Helping and human relations*. New York: Holt, Rhinehart & Winston.
- Ferruci, P. (1983) *What we may be*. Wellingborough: Turnstone.
- Fromm, E. (1961) *May man prevail*. New York: Anchor.
- Gandhi, M. (1927) *All men are brothers*. New York: Continuum.
- James, W. (1962) *The varieties of religious experience: a study in human nature*. London: Fontana/ Collins.
- Jung, C.J. (1989) *Modern man in search of soul*. New York: Vintage.
- Klein, M. (1975) *The writings of Melanie Klein*. Harmondsworth: Penguin.
- Maslow, A. (1987) *The further reaches of the human mind*. New York: Viking.
- Rogers, C.R. (1993) *On becoming a person*. London: Constable.
- Saks, M.J. & Krupat, E. (1988) *Social psychology and its applications*. New York: Harper and Row.
- Silesius, A. (cited in Castel, T. (1986) *The perfection of love*. Glasgow: Collins.
- Vaughn, F. (1986) *The inward arc*. Boston, MA: Shambala.
- Von Franz, M. (1975) *Carl Gustav Jung: his myth in our times*. New York: Putman.
- Walker, A. (1982) *The color purple*. New York: Washington Square Press.

Spirituality and Therapy

by Siobhán Mahon

Abstract:

We are spiritual beings on the human path of life. Spirituality and therapy do not have to be in opposition for both seek to develop self-awareness and integration of the person.

In this article, the human body, our own creativity, our human relationships, our connection with Nature and our 'awareness' are highlighted as avenues to access the innate spirit. The practice of 'Mindfulness' brings us into the present moment and expands our consciousness while Logotherapy provides further sustenance in the search for existential meaning. Meditation and access to the receptive and creative domains of the arts are also identified as portals through which we can deepen our spirituality. The nurturing of the therapist's own spirituality helps sustain relational depth in therapy. Ultimately, it is argued that the spiritual life requires to be honoured as the essence of our humanness.

"We are spiritual beings on a human path"

(Pierre Teilhard de Chardin)

What is Spirituality?

We are spiritual beings on a human path. We invoke the word spirituality to describe our human experiences of connectedness and depth. The word spirituality itself is derived from the Hebrew *ruach*, or the Greek *pneuma* meaning spirit, breath, wind, that which gives life or animation. Spirituality has been variously described as that which connects us to other people, nature and the source of life. It is about being aware and getting rid of illusions. It is not about the pursuit of devotion and piety but it is a real and practical way of being in the world. (deMello 1990)

David Tacey's description of spirituality is "attentiveness animated by desire" (Tacey 2003). Attentiveness involves living in the here and now. We can be fearful of what others think of us and this fear suspends our living in the present. The realisation of our dreams and hopes is thus delayed or even thwarted. John O'Donohue (1997) is emphatic in his assertion that "we should never allow our fears or the expectations of others to set the frontiers of our destiny". All we have is the present moment and that moment is laden with possibilities.

Mindfulness

'Mindfulness' offers us that possibility of staying grounded in the present moment. It is concerned with paying purposeful attention to the present moment in a non-judgemental way. Jon Kabat-Zinn (2007) presents 'Mindfulness' as a type of spiritual therapy which brings an increased awareness of what is happening in the here and now in our lives. As such it requires an intimacy with ourselves.

Mindfulness, as an ancient practice from the Buddhist tradition extols the individual to become aware of their patterns of behaviour. We perceive an event which could be external or which could also be a memory or a thought. We can be swept away by our physical, emotional or mental reaction to that stimulus. The practice of 'Mindfulness' brings the mind back to the present moment. It allows the person become cognisant of the fact that they have choices in how to react to a situation. Living in the present moment opens us up to experience the spiritual, the transcendent and the ineffable. In the particular is contained the experience of the numinous.

The search for Meaning

The second question raised by Tacey's definition of spirituality is 'what do we desire'? If our quest is for finding meaning in life, the eternal questions of "why are we here?" and "where are we going?" remain at the centre of our search.

Viktor Frankl's version of existential analysis is encapsulated in his formulation of Logotherapy where the search for meaning is identified as the primary motivation in life. (Frankl 1959). Having struggled for survival through the horror of life in a concentration camp, he asserted that even if everything is taken away from a person they still have one freedom remaining i.e the freedom to choose one's attitude in any given set of circumstances. Even in times of gross psychic distress and abhorrent physical deprivation, the human being is capable of exercising a type of spiritual freedom. This is the freedom which makes life meaningful and purposeful. (Frankl 1959). In the concentration camp Frankl observed that the prisoners who looked to the past for comfort or escape, failed to grapple with the reality of the present situation. They despised their present life and lived in the past. The "now" thus became meaningless. However, in spite of its horror the present still held possibilities and a chance for the inmates to grow spiritually beyond themselves. (Frankl 1959).). Logotherapy thus advocates living in the present moment, choosing

how to respond to the now, while keeping hope alive in a vision of the future.

The experience in Ireland

The human spirit in Ireland has, in the past, been subject to containment and repression. In order to be whole and to live life fully in acknowledgement of our humanity and spirituality, we have to face our darkness. (Hederman 1999). In our unconscious lurks what Jung identified as the shadow side of ourselves with the instincts, impulses and attitudes we find unacceptable. We project 'the shadow' onto others in an act of self-preservation and yet to become whole and individuated we have to befriend and own our 'shadow'. This process was buried in the particular type of Irish spiritualism espoused in the educational system under the tutelage of the Catholic Church. Hederman refers to the type of education that was offered as "the strait-jacket of the asparagus plant" where the social, psychological and sexual aspects were left untended and the unconscious world was ignored. It was also the ethos that pervaded religious practice and the core of civil life. It promoted a split between soul and body, between mind and matter. In Ireland the divine invitation was interpreted as one which involved renouncing "our nature, our flesh and above all our sexuality". (Hederman 1999). However to be spiritual is to be fully human with all our fragilities, foibles, instincts, desires, and with our goodness and giftedness also. It is ultimately through our humanity that our spiritual essence is enriched and made whole.

Spirituality in other traditions

Modernity, with its emphasis on the material world has not satisfied the deeper longings of the human spirit. There is a societal shift today towards secular or non-institutional forms of spirituality. A myriad of meditative practices, mind, body and spirit movements and philosophic quests have become more pervasive. They involve the exploration of person-centred, nature-based, creative, body-centred, non-gendered forms of spirituality. They highlight the spiritual lacuna that humans, as spiritual beings, seek to fill. The need for the inner journey is therefore more important than ever in these times of social alienation, economic chaos, spiritual void and "existential meaninglessness" (Frankl 1959).

The wisdom of the body

"If anything is sacred, the human body is sacred"
(Walt Whitman, 1903)

The human body is the home for the spirit. In ancient times Plato viewed mind and body as separate entities. The Greeks perceived the gravity in the body as a negative force in opposition to the divinity. The Christian tradition was in turn heavily influenced by Greek philosophy. An acceptance of this dualism relegated the body to a lesser position. This reflected the Platonic idea of the soul or spirit as a rider on a trenchant horse that had to be tamed. In the same way the spirit was seen as the assuager of the wayward body. (Johnston 1988). The legacy of this dichotomy is still with us.

There is however an integrity about the human body. It is a kind of external frame for an internal storehouse. In order to be congruent we must tap into this treasure house of information which the body conveys to us. (Thorne 2002). If we accept that a spiritual person searches for meaning and purpose in life it follows that they seek to be fully alive in their body. If we live with an awareness and a respect for our body we become attentive to the experience of the moment. In meditation the body is permitted to speak and reveal its truths to us.

Meditation

The process of meditation is simplicity itself. The paradox of its simplicity is tempered with the requirement of discipline. Meditation invites us to enter into a loving silence and a deep peace. (Johnston 1988). As we practise periods of quiet meditation we begin to hear more from our inner voice, from our spiritual selves. The deeper part of our human nature can be best expressed when the outer part of our being has quietened and is still.

For many people the discipline and practice of meditation is a challenging task. They find it difficult to spend time with themselves. The agitation experienced in the silence is the agitation of the undigested past. The human spirit is calling for attention and healing. We need to befriend the act of 'non-doing or just being'. When we live in the present moment, we find through meditation and through mindfulness that it is full of interesting possibilities. We nurture our body and spirit in the entry into awareness through the fruits of meditation. (Kabatt-Zinn 2007).

Imagination and the arts

The creative and receptive processes in the arts are also pathways of connection to the spirit. The creation and appreciation of art forms, lead us to the divine self. The arts allow access to our deepest feelings and to the world of our imagination. Through the arts we tap into our right brain with

its holistic, imaginative, spatial, non-sequential mode. Natalie Rogers (2009) writes of the symbolic and metaphoric messages inherent in the arts which give us insight, if we take time to allow the arts speak back to us. Aside from the aesthetic and craft elements of the arts, they are a form of expression and of letting go. The arts allow a connection with the inner self where we are most authentic, most at home with our humanity and spirituality.

Nature

Nature has long been a source of solace, of contemplation, of nurturing and of healing for human beings. The spiritual life is also accessed through the world of nature. Poets and mystics have written of the redemptive power of nature. They speak of becoming aware of the divine, the ineffable and the numinous through creation. Nature's elemental forces, its grandeur, beauty and complexity inspire awe and wonder. In his sonnet "The world is too much with us" (1802) William Wordsworth laments our separation from the world of nature. He extols our relationship with nature as one of spiritual advancement. To be distanced from nature is to be at distance from our spiritual essence;

*Getting and spending, we lay waste our powers;
Little we see in Nature that is ours;
We have given our hearts away, a sordid boon!*

Two centuries on, we are challenged by his words in our society's pursuit of consumerism and in its worship of externality. Pantheism, Buddhism and Christianity alike all extol the life-giving, healing and liberating presences in Nature. She can teach us to listen, to look, to be present and to be aware. Nature teaches us to be in awe at the wonder of creation. Thorne asserts that she helps us experience a sense of connectedness. (Thorne 2002). Jung also believed we had to see ourselves as belonging to a wider cosmic purpose in order to be spiritually alive. (Stevens 1990). Lovelock's theory of 'Gaia' developed in the 1970's is an expression of "the interdependence of all life on this planet, and for many people this energetic ecological reality is experienced as deeply spiritual. (Lovelock, 1979 cited by West 2000). In a cosmological and existential way we are inextricably linked.

Implications for Therapy

When we view the human being as an embodied spirit it has implications for how we practice therapy. The counselling process can facilitate acceptance, challenge, understanding and a fostering of spiritual growth. Therapists who are

open to the transcendent and comfortable to explore the spiritual domain can work with clients in their search for meaning and deeper spirituality in their lives. (Faiver & Ingersoll (2005) in Kelliher (2009). The therapist also needs to explore with the client whether there are other developmental or emotional issues masqueraded by the overtly spiritual focus. Cashwell, Myers & Shurtz (2004) warn against using a spiritual bypass where “the spiritual identity becomes the individual’s persona while the unfinished psychological business, considered too undesirable by the person to acknowledge, is repressed and relegated to the ‘Shadow’”. With this caveat aside, there are many points of convergence between therapy and spirituality in their pursuit of meaning, their struggles with existence, their exploration of values and their forgiving of self and others. Corey (2005) asserts that dealing with a client’s spirituality will often enhance the therapy process

In Counselling and Psychotherapy there is a recognition of the ‘numinous’ in several of the modalities of therapy. Psychodynamic, Jungian, Transpersonal and Humanistic models have all addressed themes of a spiritual nature. Many therapists themselves believe that therapy is in essence a spiritual process. While there may be a tension inherent between the empirical schools and those with a more mystical inclination, there is a general trend towards a more eclectic and integrative approach in the realm of Psychotherapy in today’s world. (Lines 2006). This is a positive advancement recognising the inherent spiritual nature of the human being. We are not solely cognitive and emotional beings, we too have a spiritual essence.

Countertransference

If therapists however are not aware of their own attitudes with regard to spirituality, these may block the efficacy and integrity of the counselling process. Any countertransference responses to spirituality need to be explored. Many people carry negative religious experiences with them from childhood into adulthood. The exploration of these in personal therapy can free the therapist.

The nature of counselling work involves therapists paying attention continually to their own internal processes. This is, in essence, a spiritual exercise which leads over the years to spiritual development. (Tart and Deikman, 1991, in West 2000). The reflective therapist is constantly engaged in personal development. That process is part of the bedrock of the therapeutic relationship.

The centrality of the therapeutic relationship

Humanistic, transpersonal and existential therapies have all been influenced by the works of Martin Buber, Carl Rogers and in more recent times by the writings of Brian Thorne. For Buber “the purpose of relation is the relation itself-touching the You”. (Buber 1970). To Buber all actual life is encounter. When the human being is responding to his ‘You’, he is then living in the spirit. He is in relation with his whole being. He recognises the whole person with the spirit as core of the human being. The challenge for the therapist is to be aware of the sense of unity and absorption. There is an intensity of engagement with the client while still remaining grounded and separate. The boundaries of the therapeutic relationship have to be respected always.

The Rogerian approach

Carl Rogers viewed his core conditions as somewhat akin to Buber’s ‘I-Thou’ relationship. Roger’s core conditions place the therapeutic relationship at the core of the counselling process. It is a one to one existential encounter and it is also a spiritual encounter. Unconditional positive regard can be also understood as a form of love where the client is offered understanding and acceptance. Rogers placed congruence at the core of the therapeutic encounter. To be authentic is to live in truth and love and as such it is the very essence of the spiritual quest. (Van Kalmhout 2006 in Moore, Campbell & Purton).

Furthermore in the last decade of his life Rogers admitted that something else happened in terms of relational depth when the core conditions were adhered to faithfully. Rogers recognised a type of transcendental experience when one inner spirit touched the other and the relationship became a part of something larger. When he came to acknowledge a spiritual dimension in his work, he then added a further quality to the core conditions, that of *presence*. Rogers asserted that when he was in touch with his inner, intuitive self he was a source of healing. He described something ineffable when he wrote that “at these moments it seems that my inner spirit has reached out and touched the inner spirit of the other.....Profound growth and healing energies are present”. (Rogers, in West 2000).


Rogers was moving closer to spirituality in this revelation of a mystical element in the therapeutic relationship. He came to admit to having “underestimated the importance of the mystical, spiritual dimension.” (Rogers 1980). The adherence

to person-centred principles thus allows the therapist to pay attention to the spiritual dimension in the counselling process. The spiritual search of the client is acknowledged as he/she struggles to become more fully human in facing their problems and pain. To be open to the numinous, the ineffable and transcendent is to deepen the therapeutic exploration.

The concept of tenderness

Brian Thorne (2002) similarly recognises the person as a spiritual being, constantly facing existential questions. He also postulates that the optimum position a person-centred counsellor can hold is to accept spiritual experience as one of the 'givens' of being human and to engage fully with it. Thus in acknowledging his/her own spiritual dimension the counsellor can be more fully present to the client. Thorne acknowledges that his own attempt to involve his whole self in the process and not to deny his spirituality leads to a greater capacity for 'tenderness' in the therapeutic relationship. Thorne's 'tenderness' is somewhat akin to Roger's 'presence.' His nurturing of his own spiritual essence informs and enriches his relationship with the client in the counselling room. (Thorne, 1991). As spiritual beings we have a creative and resourceful dimension, that of our own spirituality, to bring into therapy.

In the final analysis, the practice of psychotherapy in a person-centred way can be regarded not only a psychotherapeutic method but as a philosophy of living. When we pursue our true self we are responding to the quest for our authentic identity. To be in connection with the inner true self is to access our spiritual core. Rogers later in life recognised the development towards the self as one involving change and flow. This can thus become an intersecting point between the humanistic idea of achieving one's potentiality and the spiritual notion of search for our inner selves and authentic identity. (Van Kalmthout 2006)

Ultimately the therapist who is open to the transcendent, the mystical and to the inner journey is also aware of the societal dimension in life. A deep sense of self awareness coupled with heightened social awareness allows the therapist help the client in a way that is mindful of their spirituality. The therapeutic relationship works best when the therapist brings the whole self into the relationship. The spirit and body are together in this quest for wholeness. 



Siobhán Maher M.Ed, B.Sc (Counselling & Psychotherapy) has a background in education and in bereavement support. She trained as a therapist with PCI College and graduated last year from Middlesex University. Siobhán is currently based in Kilkenny and works at the Kilkenny Rape & Sexual Abuse Counselling Centre. She continues her involvement with the Kilkenny Bereavement Service and also maintains a private practice.

REFERENCES

- Buber, Martin, (1970) *I and Thou*. Edinburgh: T&T Clarke
- Cashwell, C.S., Myers, J.E. & Schurtz, W.M (2004) "Using the Developmental Counselling and Therapy Model to work with a client in spiritual bypass" *Journal of Counselling and Development*, 82 (4), pp.403-409
- Corey, Gerald. (2005). *Theory and Practice of Counselling and Psychotherapy*. Belmont, C.A.: Brooks/Cole
- De Mello, Anthony. (1990) *Awareness*. Glasgow: HarperCollins
- Frankl, Viktor. (1959) *Man's Search for Meaning*. London: Random House
- Hederman, Mark Patrick. (1999) *Kissing the Dark*. Dublin: Veritas
- Johnston, William (1988) *Being in Love*. London: Fount
- Kabat-Zinn, John (2007), *Mindfulness at Google on www.utube.com*
- Kelliher, Anne. (2009) "The Model Approach to Spirituality: Some implications for Counselling", *Éisteach*, vol. 9, no. 3: Autumn 2009. pp. 15-19
- Lines, Dennis. (2006) *Spirituality in Counselling and Psychotherapy*. London: Sage
- McMonagle, Niall (Ed.) *Lifelines*. (2006) Dublin: Town House
- Moore, Judy & Purton, Campbell (Eds.) (2006) *Spirituality and Counselling. Experiential and Theoretical Perspectives*. Ross-on-Wye : PCCS Books
- O'Donohue, John. (1997) *Anam Cara*. London: Bantam
- Rogers, Carl. (1980) *A Way of Being*. Boston: Houghton Mifflin
- Rogers, Natalie (2009) "Person-Centred Expressive Arts". *Éisteach*, vol. 9, no. 1: Spring 2009: pp. 15-17
- Stevens, Anthony (1990) *On Jung*. London: Penguin
- Tacey, David (2003) *The Spirituality Revolution*. Sydney: Harper Collins
- Thorne, Brian. (1991) *Person-Centred Counselling. Therapeutic and Spiritual Dimensions*. London: Whurr
- Thorne, Brian. (2000) *Person-Centred Counselling and Christian Spirituality*. London: Whurr
- Thorne, Brian (2002) *The Mystical Power of Person-Centred Therapy*. London: Whurr
- West, William. (2000) *Psychotherapy and Spirituality*. London: Sage
- Whitman, Walt. (1903) "I sing the body electric" www.daypoems.net/poems

WHAT IS INTEGRATIVE CBT?

by **Eoin Stephens**



As a counsellor/psychotherapist who had a fairly eclectic initial training, I have increasingly specialised in the Cognitive Behavioural approach over more than 20 years as a practitioner. However, I believe that it is best used in an integrative way, incorporating the best of what other approaches have to offer. The components of any emerging integration should ideally gather around the approach which is most evidence-based and consistent with the findings of scientific psychology. CBT is currently the leading contender in this regard, at least for certain specific diagnoses (depression, anxiety disorders etc), but it is by no means yet a complete theory on its own. The approach currently forming around the work of integratively-oriented CBT therapists such as myself can be called Integrative CBT, and aims to have both a humanistic and a scientific basis. I present here a tentative model in which Integrative CBT practice can be seen as relating to other therapeutic approaches in a pragmatic way, based on client needs, by thinking in terms of 5 Levels of work:

Abstract:

Cognitive Behavioural Therapy can claim to be the counselling/psychotherapy approach which is most evidence-based and consistent with the findings of scientific psychology, but it is by no means yet a complete therapy on its own. I believe it is therefore best used in an integrative way, incorporating the best of what other approaches have to offer, and I present here a tentative model in which Integrative CBT can be seen as relating to other therapeutic approaches on 5 Levels:

- Level 1: Therapeutic Relating
- Level 2: Practical Problem-Solving
- Level 3: Cognitive-Emotional Re-learning
- Level 4: Schema Change
- Level 5: Embracing the Human Condition

The core theory of therapeutic change in this model is Beck's Cognitive Therapy. The choice of what level to focus on at any particular point in therapy can be influenced by the client's goals, the stage of therapy, the type of issues, the overall case formulation, and the therapist's individual style.

- LEVEL 1:**
Therapeutic Relating
- LEVEL 2:**
Practical Problem-Solving
- LEVEL 3:**
Cognitive-Emotional Re-learning
- LEVEL 4:**
Schema Change
- LEVEL 5:**
Embracing the Human Condition

LEVEL 1: Therapeutic Relating

Integrative CBT needs to be first of all grounded in a therapeutic relationship, where skills such as Active Listening, Advanced Empathy etc are used to enable the client to experience the therapeutic benefits of a helping human encounter. Sometimes this is all a client needs: containing, holding, support, validation, a safe space to explore their world and their concerns. For other clients, this working alliance serves as the basis for work at the other levels below. At this level, much can be learned from Humanistic approaches such as Person-Centred Therapy (e.g. Rogers C.R. 1961) and Gestalt Therapy (e.g. Perls, F. 1951).

Integrative CBT is, amongst other things, an attempt to follow in the tradition of Aaron Beck (e.g. Beck, A.T. 1976). When it came to the therapeutic relationship, Beck was very definitely of the 'necessary but not always sufficient' camp. He emphasised that "The general characteristics of the therapist that facilitate the application of cognitive therapy... include warmth, accurate empathy and genuineness..." (Beck et al. 1979). However, he also believed that "...these characteristics in themselves are necessary but not sufficient to produce optimum therapeutic effect..." (ibid.)

So Integrative CBT believes in introducing Cognitive-Behavioural models and interventions, as necessary, into a well-grounded therapeutic relationship. But what do I mean by a well-grounded therapeutic relationship in the context of Integrative CBT?

Firstly, I agree that all therapy is conveyed through the medium of relationship, and indeed a very particular type of relationship, based on the importance of making real psychological contact with the client. Some clients may need no more than this experience of contact with another human (for instance, clients with uncomplicated bereavement), but in many cases I would also see the need for the additional factors of Explicit Collaboration, Psycho-Education, Guided Discovery etc. In situations where we are dealing with problems like Social Anxiety or an Eating Disorder, there is a lot of detailed problem-solving, cognitive restructuring, etc to be done at other levels, and the groundwork needs to be laid at the beginning.

LEVEL 2: Practical Problem-Solving

The next level many clients need, in order to create change in their lives, is the level of problem-clarification and practical action. However, in moving ahead with problem-solving, case-formulating and intervening at other levels, we mustn't lose the felt connection with the client. If we do, we need to go back and re-establish it.

At this level, clients can be helped to engage more effectively with their environment by decreasing negative behaviours (e.g. social avoidance, passive/aggressive behaviours) and increasing positive behaviours (e.g. using social supports, asserting oneself). This can be achieved both by introducing them to general principles of change such as goal-setting, planning and reviewing, as well as by introducing specific life-skills training in areas such as stress management, assertiveness, decision-making etc.

When we move into the problem-solving attitude of Level 2, while still remaining grounded in the therapeutic relationship, we are travelling in the company of influential figures such as Gerard Egan (Skilled Helper model - see Egan, G. 2006) and William Glasser (Choice Theory - see e.g. Glasser, W. 1999). Both emphasise the importance of establishing a warm working relationship, but also understand that clients often need us to add a directional, change-oriented focus, with a commitment to planning and behavioural trial-and-review. At this level, we don't need to reinvent the wheel, but can happily incorporate the work of the above approaches, as well as others such as Motivational Interviewing (Miller, W. R. & Rollnick, S. 2002).

Skill-training in specific areas can also be a focus at Level 2. Again, there is already an enormous amount of work available to be integrated, from Assertiveness Training, Stress Management, and many other areas.

So, although this level of work is easy enough to understand conceptually, it is very broad, and there is a lot for the practising therapist to learn about.

One final point: this level is about action, behaviour change, helping the client to have a more positive influence on their environment. It can therefore be seen as more "directive", often a controversial term. The therapist should not tell the client what to do with their lives, but sometimes they do need to be quite direct in supporting the client to find the direction they want to move in, and to test out ways of moving in that direction.

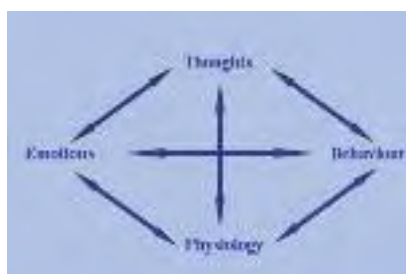
LEVEL 3: Cognitive-Emotional Re-learning

The next level of intervention which may be needed (especially for those with specific mental health issues such as Depression, OCD, etc) is collaborative, educative Cognitive/Emotional re-learning. This is the heart of CBT, and is based on the work of Beck and Ellis (e.g. Beck, A.T. et al. 1979; Ellis, A. & Dryden, W. 1999). Here we help the client to untangle self-perpetuating vicious cycles between their Environment, Cognition, Emotion, Behaviour and Physiology, so that they can unlearn what is dysfunctional and learn new, more functional, approaches. Guided Discovery processes such as Socratic Questioning and Behavioural Experimentation are used at this level, and many techniques from other approaches can also be usefully integrated; Mindfulness training is a well-known example (e.g. Segal, Z.V. et al 2001).

The central aim of Integrative CBT is cognitive change: change in the way we see things, interpret events, talk to ourselves, pay attention to certain aspects of our environment, put meaning on our lives, etc. This level therefore takes us a step beyond the work of Egan etc, into the specifically cognitive focus at the heart of the model.

There seem to be frequent misunderstandings about this type of work; common misapprehensions range from “Working with cognitions is cold, and is not concerned with emotions” to “Working to change thinking is about persuasion, and is only concerned with getting people to think rationally”. Certainly none of this is true of Beck’s Cognitive Therapy, which is the basis for Integrative CBT.

Focus on cognition can be relatively generic, looking at the way in which we all distort our interpretations of our experience; Ellis’s Rational Emotive Behaviour Therapy and the classic Cognitive Distortions outlined by David Burns (Burns, D.D. 1989) are good examples of this. A more individualised Case Formulation can be put together with a client by identifying vicious cycles of thoughts/feelings/behaviours/physiology that are keeping a problem going.



For instance, in a depressed client, their negative thoughts feed their depressed feelings, lack of activity, and exhaustion, and are in turn reinforced by each of these symptoms. Integrative CBT gives attention to all four pieces of this symptom cycle, but is Cognitive-Behavioural in being especially focused on helping the client to make relevant changes in their thinking and in their behaviour, in order to reverse the damaging vicious cycles. Integrative CBT therapists therefore need to be comfortable in working with emotion, behaviour, cognition and physiology.

The key change process at Level 3 is what I call **Structured and Facilitated Experiential Relearning**, or “**SAFER**” – hopefully a memorable name, especially because working with anxiety is a particularly good example. When we are overanxious about something (e.g. essay-writing, attending

social occasions), we no longer learn from experience in that area, because the cycle of experiential learning has become blocked (we avoid the situation, discount any successes, interpret our discomfort as a sign of failure, etc). When we do manage to make changes in a vicious cycle like this, we do so through **Experiential Relearning** – discovering through experience that our fears are not well grounded. Sometimes we are lucky, and this process happens without it being deliberately planned or structured (e.g. we find a subject that really interests us, get involved with a new social activity, etc). But when we are really stuck, this process of change requires more **Structured Experiential Relearning**; a relevant self-help book may provide sufficient structure for some people, but many people need the process to be professionally **Facilitated** by a therapist.

At this level of Integrative CBT, as in Cognitive Therapy, the learned habits of thinking and behaviour which keep the problem going can be unlearned and replaced through a process of Guided Discovery, using two very powerful therapeutic tools: Socratic Questioning and Behavioural Experiments. Socratic Questioning starts out as a cognitive/empathic process which tries to tease out what beliefs the client has learnt from their life experiences. This then leads into a probing, testing process, where the basis of beliefs are examined and questioned, not just in relation to their truth, but also their current relevance, value, importance, meaning, usefulness etc.

Behavioural Experiments are different from the Behavioural Change work we discussed at Level 2. At Level 2 we focus on

Some view of what it is to be human is implicit in every approach to psychotherapy, and should be made as explicit as possible

identifying, learning and practising “good”, helpful, useful behaviours in areas of the client’s life where this is necessary (e.g. asserting oneself, relaxing, eating more healthily, cutting down on drinking, etc). Behavioural Experimentation, on the other hand, might equally focus on “bad” behaviours (e.g. leaving a task unfinished, not being “nice” to everyone, staying up all night, etc), since just as much, or more, can be learned experientially from the results of such experiments. So Level 2 is about engaging with the environment in order to make changes; Level 3 is about engaging with the environment in order to reality-test and re-learn; the main goal is change in the client’s cognitive interpretations, assumptions etc.

**LEVEL 4:
Schema Change**

Therapists who are dismayed at the lack of any detailed exploration of the client’s past, and especially their early development, in cognitive-behavioural approaches such as REBT and Choice Theory, will hopefully be relieved to know that Integrative CBT sees such an exploration as essential, though it may or may not need to be a central focus of therapy, depending on the client’s issues and goals. Longer-term developmental work, involving more detailed life-history exploration and deeper Cognitive/Emotional restructuring at the level of Core Beliefs, can help clients to gain a broader understanding of the sources of their difficulties, as

well as increasing resistance to relapse through lessening the influence of maladaptive Core Beliefs/Schemas.

One approach to this is Jeffrey Young’s Schema Therapy (Young, J.E. 2003), which is CBT-based but also explicitly integrative in its theory and practice, incorporating aspects of Attachment Theory and Object Relations Theory, amongst others.

The equivalent of transference/counter-transference issues can also be explored at this level, within the framework of a Cognitive Behavioural case formulation approach, and this level allows a lot of room for integration with theoretical constructs from other schools, such as Models of Attachment, Transactional Analysis Scripts, Object Relations, Conditions of Worth, etc.

Even when the focus is mainly at other levels, therapeutic choices are best guided by a broad Case Formulation. Working at Level 4 involves adding a developmental perspective to the vicious cycles discussed earlier, expanding the formulation to include hypotheses about the client’s underlying dysfunctional cognitions (see e.g. Persons 1989; Padesky & Greenberger 1995). Our earlier learning experiences leave us with deeply held ways of viewing the world, ourselves, and others, ‘templates’ through which we process current experience, and which therefore tend to be self-perpetuating and rigid in nature (blocking experiential re-learning at an even deeper level than that

discussed earlier). These templates can be called Schemas; their contents (e.g. “I’m unlovable”, “Men can’t be trusted” etc) can be called Core Beliefs.

Persons (1989) suggests that this kind of formulation can explain how current problems are precipitated, and how they actually make sense in the light of underlying schemas and current triggers. It can also suggest origins of the underlying beliefs in the client’s early life. A typical diagram for a Schema-based case formulation is shown below.



Negative Automatic Thoughts are seen as arising, in relevant trigger situations, from underlying Schemas/Core Beliefs. For instance, a depressed client’s negative automatic thoughts could arise out of underlying beliefs such as ‘I’m no good’ and ‘If I try anything, I make a mess of it’, triggered by some current situation which is seen as a failure (e.g. applying for a job and not being called for an interview). These beliefs could be rooted in the client’s early experiences of being treated as no good, or being told that he was no good.

LEVEL 5: Embracing the Human Condition

Since not all difficulties can be resolved through therapy, clients may need help to understand and process the realities of the human condition which necessarily remain. Some of these may be specific to their circumstances and history, or to their particular mental health problems (e.g. long-term health issues, marital separation, wasted career potential, partially-healed trauma). Others arise from the evolved vulnerabilities of our species (e.g. unhealthy appetite for sugar, tendency to fall in love, anxieties regarding status and meaning), or are just part of the essential nature of life (e.g. competition, rejection, risk, loss, old age, death).

Here the therapist tries to help the client towards a greater understanding of themselves as a human being, incorporating whatever perspectives they find helpful, whether philosophical, cultural, scientific, existential, or spiritual. Since this level is about humanising the client's experience, it brings us back full circle to Level 1, where the therapist tries to meet the client non-judgmentally human-to-human.

Focusing on what it means to be human can help the client to more deeply understand their vulnerability to the problems they have grappled with; not just why they are individually vulnerable to depression, or addiction, or relationship difficulties, but why human beings in general are vulnerable. This can be a great help with the process of normalising and de-stigmatising problems, and developing self-compassion.

Focusing on the human level can also help the therapist and client

to plan for the client's future in a realistic way, as a human being in their own particular circumstances. Not everything is possible for everyone, and limits are set by factors such as age, resources, previous choices, personality and values. The fact that therapeutic planning happens within limits isn't necessarily bad news. Working within limits is where the creative action is; ask any artist or composer – or any recovering alcoholic.

Some view of what it is to be human is implicit in every approach to psychotherapy, and should be made as explicit as possible. A view of the human condition is not just something that we come to at the end of therapy, but a theme that runs right through the process, and influences what both client and therapist believe to be possible. The personal philosophies of being human which can be found amongst clients and therapists obviously vary enormously; along with this, there are the formal psychological theories of human nature on which any therapeutic approach is based, for example the optimistic, growth-oriented perspective of the Humanistic approaches, the relatively pessimistic Freudian view, or the pragmatic, scientific model of most Cognitive-Behavioural schools. Since the role of the therapist is to help the client towards a greater understanding of themselves as a human being, incorporating whatever philosophical, cultural, scientific, existential, or spiritual perspectives the client finds helpful, the best that can be done is to discuss these issues explicitly at appropriate points in therapy (by raising the question of long-term goals, values, etc). Client and therapist do not have to fully agree, though too great a difference in views may simply

not work for the client (especially in relation to value-laden issues such as abortion, pornography, etc).

Closing remarks

Finally, I want to say a bit more about the process of choosing what level to focus on at any particular moment in therapy; I am not just describing a theoretical model here, but how I actually work. This choice can be influenced by many factors: the client's goals, the stage of therapy, the type of issues, the overall case formulation, and maybe also the therapist's individual style.


It is possible to look the five levels of Integrative CBT as a progression, and over the whole period of therapy with a client this may in fact be accurate. For example, addiction counselling often moves from developing trust and acceptance, to encouraging practical behaviour-change steps, to challenging underlying addictive thinking, to addressing "Inner Child" issues, to fostering some self-acceptance as a flawed human being. But of course the different levels are not really separate; from moment to moment in each session the therapist may be moving between problem-focus, the state of the relationship, the childhood story, reviewing goals and motivations, noticing the client's cognitive distortions, trying to validate and humanise what is happening, etc.

Yes, it does get more complicated once you try starting to problem-solve with a client, while also keeping an eye on the integrity of the therapeutic relationship; and it gets even more complicated when you add in some cognitive restructuring and developmental exploration. Of course it is easier if you take an approach which concentrates on just one of these

– but is that good enough for the client? Well, it depends on the issues. Some clients may just need some problem-solving, skill-learning assistance; they may not even need much attention paid to the therapeutic relationship, just the minimum necessary for a working alliance. On the other hand, clients with specific mental health issues such as OCD or anger problems may need to postpone much of this kind of practical work until they have learnt to think and feel differently about their problems through cognitive-behavioural re-learning at levels 3 and 4; otherwise they may be trying to

solve the wrong problems (e.g. their co-workers' unhygienic habits, their spouse's high expectations!).

To be genuinely integrative, rather than just eclectic, an approach needs to be based on a core theory of therapeutic change. Following Beck, the core change in successful Integrative CBT is understood to be cognitive change (Alford, B.A. & Beck, A.T. 1997). While this change may need to be facilitated by the direct cognitive restructuring techniques of traditional CBT (Level 3), it equally may require a containing

relationship (Level 1), problem-solving tools and direction (Level 2), developmental exploration, including at a transference level (Level 4), and some attempt to set problems and recovery within the context of the human condition (Level 5). A case is therefore formulated in primarily cognitive terms (i.e. beliefs and other cognitions are seen as the main determiners of emotions, behaviours etc), but the primary work may be at any or all of the five levels described. This clearly involves a wide skill-set, if the therapist is to be flexible enough to meet a client at any of these levels. 



Eoin Stephens has worked in the area of mental health and therapy for more than 25 years, and is currently President of PCI College, and practices at CBT

Solutions in Clondalkin. He is co-founder of the charity Dual Diagnosis Ireland, and a director of the Addictive Behaviours Centre (formerly the Centre for Sexual Addictions). Eoin has served as Vice-Chairman of both the Irish Association for Counselling and Psychotherapy and the Irish Association of Alcohol and Addiction Counsellors, and was the 2010 recipient of the IACP's Carl Berkeley Memorial Award.

Contact details for publication: CBT Solutions, 2a Orchard Road, Clondalkin, Dublin 22. Email: eoin@cbsolutions.ie.

REFERENCES

- Alford, B.A. & Beck, A.T. (1997) *The Integrative Power of Cognitive Therapy*. New York: Guilford Press.
- Beck, A.T. (1976) *Cognitive Therapy and the Emotional Disorders*. New York: International Universities Press.
- Beck, A.T. et al. (1979) *Cognitive Therapy of Depression*. Guilford Press.
- Beck, A.T. (1991) Cognitive therapy as the integrative therapy. *Journal of Psychotherapy Integration*, 1, 191-198.
- Beck, J. (1995) *Cognitive Therapy: Basics and Beyond*. New York: Guilford Press.
- Bennett-Levy, J. et al (eds) (2004) *Oxford Guide to Behavioural Experiments in Cognitive Therapy*. Oxford: OUP.
- Burns, D.D. (1989) *The Feeling Good Handbook*. New York: Plume.
- Egan, G. (2006) *The Skilled Helper: A Problem-management and Opportunity Development Approach to Helping*, 8th edn. Thomson Learning.
- Ellis, A. & Dryden, W. (1999) *The Practice of Rational Emotive Behaviour Therapy*. 2nd Ed. London: Free Association Books.
- Gilbert, P. & Leahy, R.L. (2007) *The Therapeutic Relationship in the Cognitive Behavioral Psychotherapies*. Routledge.
- Glasser, W. (1999) *Choice Theory*. New York: HarperCollins.
- Miller, W. R. & Rollnick, S. (2002) *Motivational Interviewing: Preparing People for Change*. New York: Guilford Press.
- Padesky, C. & Greenberger, D. (1995) *Mind over Mood*. New York: Guilford Press
- Perls, F. (1951) *Gestalt Therapy: Excitement and Growth in the Human Personality*. Souvenir Press.
- Persons, J.B. (1989) *Cognitive Therapy in Practice: A Case Formulation Approach*. New York: W.W. Norton.
- Rogers, C.R. (1961) *On Becoming a Person: A Therapist's View of Psychotherapy*. London: Constable.
- Sanders, D. & Wills F. (2005) *Cognitive Therapy: An Introduction*. London: Sage.
- Segal, Z.V., Williams, J. M.G. & Teasdale, J. D. (2001) *Mindfulness-Based Cognitive Therapy for Depression: A New Approach to Preventing Relapse*. New York: Guilford Publications
- Weishaar, M.E. (1993) *Aaron T. Beck*. London: Sage.
- Young, J.E., Klosko, J.S., & Weishaar, M. (2003). *Schema Therapy: A Practitioner's Guide*. New York: Guilford Publications.
- Integrative CBT weekly blog: <http://integrativecbt.blogspot.com/>

THE EVOLUTION OF HUMAN CONSCIOUSNESS AND SPIRITUALITY

by **Barbara Dowds**



The constant need of human beings in civilization to create ideologies, religious beliefs, political hierarchies, and the like, investing these with meaning so as to feel mirrored, real, validated, part of some larger transcendent reality is largely the product of dependency and sedentism and does not appear in societies that value autonomy and mobility.
(Berman, 2000:168).

Between this sky and the faces looking up to it there is nothing on which to hang a mythology, a literature, an ethic or a religion; only stones, flesh, stars and those truths which the hand can touch.
(Camus, 1970: 89)

Abstract:

This article outlines a theory of the historical evolution of human consciousness and spirituality from the time when we became self-conscious and aware of a painful and alienating gap between self and the world. It is postulated that mankind has taken various attitudes to this gap: from accepting it to attempting to bridge it by ecstatic fusion with a transcendent god to numbing out from it. We carry the genetic inheritance which makes any of these strategies possible. In a groundbreaking work, Morris Berman argues that transcendent religion emerged in response to the stress of settled life but that we have retained – mostly in dormant form - the capacity for the earlier immanent ‘paradoxical’ spirituality of our pre-agricultural nomadic ancestors. What we should do with this knowledge is discussed.

Introduction

What is wrong with modern man – and woman? Particularly in the West, we are constantly dissatisfied, striving, looking for more, whether it is consumer goods, fame, fortune, power, a longer lifespan or spiritual kicks. As Anne Wilson Schaef (1987) has pointed out, we are living in an addictive society. Morris Berman is a cultural historian who has attempted to make sense of our malaise in a remarkable trilogy about the evolution of Western consciousness. These volumes are aimed at demonstrating that our current alienation - with its attendant economic chaos and ecological disaster - is not an inherent part of being human, but is a product of certain social and historical changes. His prescience is revealed by noting that the first part of the trilogy was initially published in 1981 and the losses he mourned then have become only more extreme in the intervening 30 years.

In *The Reenchantment of the World* (1981), he traces our distancing from nature back to the Scientific Revolution of the 16th and 17th centuries. In *Coming to our Senses* (1989) he explores the relationship between our physical experience of the world and the larger culture. In Western society, we have lost our senses – not our minds, but our bodies. Finally, in *Wandering God* (2000), he contrasts the consciousness, power relations and spirituality of our hunter-gatherer ancestors with later settled human beings, the originators of our present-day urban societies. He argues that with the shift from nomadic to sedentary life, relative social equality and secular/sacred immediacy gave way to power hierarchies and spiritual transcendence.

In this article, I want to examine what Berman has to say about the *evolution* of spirituality, a topic on which I couldn't have imagined any available evidence until reading his book (Berman, 2000).

The Basic Fault

During the Upper Paleolithic era 35,000 years ago, cave painting originated, there is a sharp increase in artefacts such as personal ornaments and grave goods and there is evidence of goal orientation in the form of advance planning (see below). There is general agreement amongst archaeologists that this suggests a 'theory of mind' (Mithen, 1998: 104, 174): i.e. the emergence of self-conscious awareness (Berman, 2000). This generates a painful and alienating split between self and world. In our physical growth, ontogeny recapitulates phylogeny: i.e. the development of the embryo mirrors in its stages our evolution from more primitive life-forms. So it is with our psychological development. This split that arose in mankind in the Paleolithic era is seen to appear during the psychological birth of the infant. The beginning of self-awareness typically occurs around the third year of life and creates what Lacan called "the gap" and Balint called the "basic fault" (Gomez, 1997). This is the pulling away from a primal unity with mother and the world into our awareness of Self as a separate entity in a world of Others. Here I want to document how the human race may have grappled with this alienation historically.

The Upper Paleolithic

Based on evidence from the archaeological record as well as studies of today's remaining hunter-gatherer tribes, Berman argues that our Paleolithic ancestors lived in a state of

'paradoxical' consciousness, so named because it is simultaneously focused and nonfocused, a state of attentive waiting: 'It is hovering, or peripheral (horizontal perception), rather than intense or ecstatic' (p.9). The person accepts the world as it presents itself, including the split between Self and World. Spirit is not separate, but is immanent within the world: it is 'the smell of the forest after rain, the warm blood of the deer' (p.11). In this way of being, the secular is the sacred.

The Neolithic

With the beginning of our dependence on agriculture about 10,000 years ago (the Neolithic period), our consciousness began to change. Berman believes that by going sedentary, we shifted from a direct experience of life to the pursuit of substitutes and that a certain kind of mental flexibility got lost as well. In this delayed-return economy with its accompanying insecurity, trust in the world declines and fear of death takes on a prominent place. Where hunter-gatherers dealt with conflict by fission and fusion of groupings, settled communities had to create rules and authority structures: i.e. vertical power relations. The sacred which was formerly located in the world is now projected upwards, in what Berman calls the vertical or ascent model of spirituality. This 'sacred authority complex' is typified by the theocracies of Egypt and the Near East. The pharaoh was God's representative on earth and through him security was relatively assured. Paradox has been replaced by certainty and vertical spirituality is accompanied by vertical power relations.

2000 B.C. until recently

Sometime, around 2000 B.C. or later, verticality became more pronounced as the 'ascent' phenomenon emerged. These unitive trance or ecstasy experiences generated temporary psychological security by healing the split. 'All of this served to offset the pain of ego-consciousness by means of a mystical experience that merged the psyche with the rest of creation' (p.4-5). Freud called this the "oceanic experience" and regarded it as regressive, whereas Jung saw it as progressive in contacting primitive wisdom. Apart from this mystical ascent out of our bodies, erotic energy is channelled into specific experiences that we now regard as the norm, e.g. romantic love, heroism or great ambition. The social background to this form of spirituality is quite different from our Paleolithic ancestors. There is narrow birth spacing, dyadic mothering, increasing population density, gender and class inequality, fear of death and adherence to ideology in the pursuit of certainty (see p.150).

Industrial Societies

The current way of dealing with ego-consciousness is what Berman calls 'dullardism', in other words, spacing out. The goal here is to become unconscious - with perhaps a short-term high - by means of our favourite addiction: alcohol, tranquillisers, TV, spectator sports, busyness, workaholism, etc.

Those who try to bring inspiration into our current culture and challenge the dominant analytical, scientific, rational, materialist paradigm in Western thought, tend to shift to Gnostic insight, some form of mysticism or transpersonal spirituality: i.e. a return to the ascent model. Berman believes that mankind has gone through a 'progressive loss in spiritual intelligence' (p.188) and tries to offer an embodied alternative to the ascent model by reintroducing the concept of paradox. Years of bodywork and meditation have convinced him that the vertical model, indeed the addiction to paradigm-shifts, is rooted in denial of our somatic experience. He is highly critical of Jung and transpersonal theorists who, 'despite some valuable insights, were (are) cut off from bodily experience; they created a larger mind than the dominant intellectual paradigm, but when all is said and done, it was still a mind' (p.15). In *Coming to our Senses*, Berman argues that we need a renewed corporeality if we are not going to repress the body and make a fetish out of a supposedly new spirituality. He also believes that the need for certainty that arose with sedentary life overlies a deeper need for the world to be unpredictable, surprising and alive.

Some Evidence

The case that Paleolithic Hunter-Gatherers were Non-Religious

It is impossible in a short article to do justice to the wealth of evidence Berman finds in archaeology, anthropological studies of extant hunter-gatherer and nomadic tribes as well as power relations in non-human primates. Berman is aware that his analysis runs counter to most anthropological thinking about religion. He disagrees with James Frazer, Carl Jung, Joseph Campbell and Mircea Eliade that primitive man 'was up to his eyeballs in trance, myth and shamanism' (p.19). He argues in detail for a much more parsimonious and practical interpretation of Paleolithic cave art than the traditional religious/shamanic view. He cites hunter-gatherer societies today that do not worship anything; they 'merely' regard their forest, their universe as alive and friendly. Berman shows with many examples that hunter-gatherer peoples cope with inter-

personal conflict by leaving the community and re-grouping and suggests that the induction of altered states of consciousness may be a response to the stress of living in large sedentary communities - addiction in embryo. Berman further believes that our ancestors may not have viewed death as something terrifying or mysterious, as is in fact true for some hunter-gatherer societies today.

The counter case is put by the archaeologist, Steven Mithen, who convincingly argues that 'we can be confident that religious ideologies as complex as those of modern hunter-gatherers came into existence at the time of the Middle/Upper Paleolithic transition and have remained with us ever since' (1998: 202).

The Origins of the Split between Self and World

After 35,000 years ago, evidence of developing advance planning appears in the archaeological record in the form of carving, polishing and repair of tools, storage of tools at the home base and the advent of big game hunting. The events of the Upper Paleolithic - technology, burials, adornment, hunting and artistic/symbolic representation - all indicate a shift from the exterior world to the mind. It is thought that before this period, man's cognitive ability was limited to thinking about physical reality, but that later, it encompassed abstract ideas such as death or personal identity. This is paralleled in the cognitive development of children today as demonstrated by Piaget. By the time we arrive at the Neolithic with the planting of grain and the domestication of animals which involve enormous depth of planning, our capacity to feel at home in the world by paradoxical thinking is virtually lost. The split between Self and world needs mending. We now require religion - and attachment.

Mothering in Hunter-Gatherer Tribes

Hunter-gatherer societies in the present and probably in the past have/had to space their children; and with a typical 4-year period of nursing at the breast, HG children do not develop attachments to transitional objects, but cathect the whole environment instead. Erikson (1968) makes explicit the link between unitive trance and the bond between mother and infant. He suggests that we repeatedly try to recapture the dyadic, numinous experience of infancy through later experiences of fusion such as romantic love, immersion in a leader's charisma or religious observance. In this way we transcend our separateness. However, as Berman shows, other cultural versions of child-rearing are possible and 'in them romantic love, religion, war, vertical

spiritual experience and charisma seem to be absent, aberrant, or muted because infants in those societies are not the object of such exclusive (narcissistic) intensity' (p.46).

Nomadic 'Religion'

Berman suggests (following Bruce Chatwin) that for nomads and hunter-gatherers, it is movement that makes religious ritual superfluous. 'Movement across the landscape is such a vivid, immediate experience that the need for anything more complicated than paradox is largely obviated' (p.166). Among many others, he cites the Basseri nomads of Iran for whom the spring migration is the highlight of the year. 'The search for pasture was of secondary importance to the symbolism of the event, which revolved around spatial mobility, the freedom to migrate' (p.167). Chatwin (1988) believes that religion is a response to anxiety and that movement, by catharting this anxiety (something that body therapists will recognize), removes the need for religion. I wonder if the real point of the Christian pilgrimage was movement rather than holy sites, journey rather than destination, though of course part of the thrill and holding of any journey is the prospect of arrival.

Berman acknowledges that there are many hunter-gatherer and nomadic groups today who do espouse vertical, ecstatic religions. It is not known whether their distant ancestors worshipped in the same way or whether their ascent-model of religion was acquired from settled neighbours. However, what is important for Berman's argument is that it is possible – and there are many current or recent tribal examples – to live deeply engaged, non-alienated lives without transcendent religion. These tribes are more embodied and have an ongoing trusting acceptance of their world and of themselves and others. They are not trying to escape from their lives.

The Nomadic Personality

One of the most comprehensive studies of nomadic personality (cited p.172-174) involved interviews with four East African peoples, each of whom had agricultural and nomadic wings, making for a total of eight groups. There was a clear difference in personality structure, not along ethnic lines, but along ones of subsistence. The pastoralists expressed emotions, including anger, directly, whereas the farmers suppressed them. The farmers hated others, whereas the pastoralists did not harbour hostilities (though they relied on the option of fission and fusion in the event of

conflict). Fear of poverty, jealousy of wealth and desire for friends were dominant in the agrarian psyche, whereas pastoralists prized independence and self-reliance above everything else and their networks of interdependence were not person-specific. Even their cognitive abilities differed in terms of the nomads' tendency to see parts of a perceptual field as separate from the whole, a necessity for survival in that way of life.

In general, nomadic society is less specialised and more egalitarian, and when hierarchies do develop, it is due to interaction with sedentary states rather than from their own internal dynamics.

Berman's Conclusion

We all carry within us the genetic legacy of immanent spirituality. If Berman is right and this was mankind's way of life from the dawn of self-consciousness 35,000 years ago until we settled in agricultural communities 10,000 years ago, then a much greater part of our evolutionary history was spent in paradoxical consciousness than in the relatively recent ascent model of being. All we need is to remove our blinkers and realise that the vertical model is not the only one. So, where does all this lead us? Clearly with the current world population, there is no possibility that we can return to a nomadic existence. Nor does Berman want to add to paradigm-shift addiction by creating a new false god for us to pursue. He concludes: 'there is an alternative to this paradigm-shift addiction, but because it is not addictive, it is much less exciting. This is to recognise that what we need is not a dramatic transformation of reality and culture, but simply the willingness to live in this culture and reality as we work on the intelligent repair of present problems, without hype or bombast, and let the future take care of itself' (p.229). He believes that there are two elements of HG living that modern individuals could adopt: one is the cultivation of silent spaces and the second is the radical acceptance of death. At a social level, we must tackle the population problem.

He cites Bernadette Roberts (1993) who has made the transition he talks about from the unitive experience of the sacred to the paradoxical: "I quit wandering around looking for life". She gave up on the "false expectation that some ultimate reality lies hidden somewhere behind, beneath or beyond what is."... "How many can appreciate the triumph of being common and ordinary? Who can understand what it means to learn that the ultimate reality is not a passing moment of bliss,


not a fleeting vision or transfiguration, not some ineffable, extraordinary experience or phenomenon, but insteadas simple as a smile?" (p.232). In reading this, I am reminded of the journey of the spiritual teacher, Catherine Ingram (2003). After decades of Buddhist striving, she became depressed and has moved away from Buddhism to a non-affiliated teaching of what she calls "awakened awareness". This is a relaxed present attention that is not something to be attained but rather something to be noticed and honoured. Most of the qualities she helps awaken in her students are those that Berman advocates: silence, embodiment, genuineness, delight and wonder.

What About Me?

Having spent most of my word space attempting to summarise Berman's argument, I begin to wonder where I fit into all of this. I was drawn to the book because of my fascination with the same subjects: psychology, anthropology, archaeology, etc. But, at a deeper level, I know in my body-spirit what he is talking about. In my childhood, I was fortunate enough to cathect nature more than the numinous (m)other. Yet my childhood experiences of nature may not have been entirely of the immanent variety and may have had moments of ecstatic fusion that I have spent my later life seeking to repeat. But, in my adult life, spiritual striving has brought me a sense of failure and emptiness, with a constant seeking after a fusion that may be impossible for me without extreme physical deprivation. I need to learn to recognise and give thanks for the more ordinary pleasures such as I have experienced on walking holidays with a different destination each day. There is a joy and satisfaction beyond words in the moods of the ever-changing landscape and weather, the soothing physical exercise, the genuine hunger at the end of the day and the holding provided by the need to reach the destination with its attendant food and shelter. If the life of a nomad was an option, I would take it.

And yet, I don't share Berman's disquiet about out-of-body experiences or altered states of consciousness. Can we not work against some of

the unacceptable faces of the ascent model of consciousness while retaining transcendent religion? If I was graced with the experience of ecstatic fusion with God, I certainly wouldn't say no. At the same time, I have got the message from Berman that it is time to stop searching above, behind and beyond and value what is *here*.

What still needs to be explored is to what degree we are becoming nomads again in a globalised world and whether our technologised, internet identities are becoming more diffuse and therefore, ironically, open to paradoxical consciousness. 

Editor's note: This article was first published by Inside Out in the summer 2010 issue.



Dr Barbara Dowds MIACP MIAHIP is a humanistic and integrative psychotherapist in private practice and a tutor on the B.Sc. course in Counselling and Psychotherapy in PCI College. Prior to 2002, she was a lecturer and researcher in the field of Molecular Genetics. She left the world of science because she found it contracting, alienating and soulless. She is interested in critique, connections and integration of psychotherapy, philosophy, spirituality, anthropology and science.

REFERENCES

- Berman, M. (1981) *The Reenchantment of the World*. Cornell University Press.
- Berman, M. (1989) *Coming to Our Senses*. New York: Simon & Schuster.
- Berman, M. (2000) *Wandering God*. Albany: SUNY.
- Camus, A. (1970) *Selected Essays and Notebooks*. London: Penguin.
- Chatwin, B. (1988) *The Songlines*. New York: Penguin Books.
- Erikson, E.H. (1968) "The Development of Ritualization", in Donald R. Cutler (ed.) *The Religious Situation*, pp. 713-715.
- Gomez, L. (1997) *An Introduction to Object Relations*. London: Free Association Books.
- Ingram, C. (2003) *Passionate Presence*. London: Harper Collins.
- Mithen, S. (1998) *The Prehistory of the Mind*. London: Phoenix.
- Roberts, B. (1993) *The Experience of No-Self*. New York: SUNY.
- Wilson Schaef, A. (1987) *When Society Becomes an Addict*. Michigan: Harper & Row.
- Unless otherwise stated, all references are to Berman (2000).

INVITATION TO JOIN THE EDITORIAL BOARD

We are looking to increase the number of editorial board members. Would you be interested in joining the Editorial Board? Being part of the editorial team means attending four or five meetings each year and editing an edition of Éisteach once in a while. You don't have to be a journalist, rather someone who is prepared to use their skills and energy on behalf of the wider IACP membership. If you wish to join the editorial board, please contact IACP and your name will be forwarded to the Board.



LETTERS TO THE EDITOR

Éisteach welcomes members' letters or emails. If you wish to have your say on either the contents of Éisteach or on an issue that concerns you or you feel strongly about, please send your views to; e-mail: eisteach@iacp.ie or

Éisteach, IACP, 21 Dublin Road, Bray, Co Wicklow.

We hope the 'Letters to the Editor' section will become a regular feature in each edition of Éisteach. For that to happen we need your comments and views. We look forward to hearing from you.

THE ABUSIVE PERSONALITY

Dear Editor,—We feel compelled to write to you this morning in response to the lead article in the winter edition of Éisteach magazine entitled "The Abusive Personality" by Jim O'Shea.

Our initial delight at finding an article that proposed to take a measured look at domestic violence from the viewpoint of the "abuser" personality types was quickly replaced by uncertainty and then, sadly, a degree of annoyance and regret.

If the aim of the piece was to give an insight into the mind and behaviours of an "abuser" then surely the real life example or experience to give should be that of an "abuser" and what is happening to them? We are in no way dismissing the experience of the "victim" in any domestic violence situation but surely to gain an understanding of an "abuser" it might have been more beneficial to show the human experience of the "abuser" alongside the cold hard facts and theories.

Perhaps there needs to be a recognition that given the prevalence of domestic abuse in Irish society that maybe the faceless, ambiguous, shadowed and redeemless wretch that is the author's "abuser" could also be our mothers and fathers, brothers and sisters, sons and daughters, friends and colleagues and knowing this can we then say that we would be prepared to offer anything less than a basic human compassion?

But perhaps as counsellors only at the beginning of a career there is an enthusiasm that maybe comes with a

degree of ideology and naivety but we feel strongly that if we are to be given information in this manner then at the very least it should be objective and fair.

There is a regrettable after taste having read and re-read this article that perhaps instead of bringing a greater understanding of the "abuser" to your readership; the author has only succeeded in marginalizing and stigmatising the "abuser" even more. Perhaps there may be a greater reluctance on the part of any fellow "beginners" to the profession who have read this article to offer themselves unconditionally to an "abuser" who may seek their counsel. We hope not. Where then would that leave us as a profession and indeed society?—Yours etc.,

LUKE DEVLIN
DONNA HAYES

Editors Note: *Jim O'Shea was given the right to reply to this letter but declined to do so. However Jim did say that anyone who has read his article and wished to discuss it with him could contact him. His phone number is 087 8211009.*

DISILLUSIONED WITH COUNSELLING AND PSYCHOTHERAPY TRAINING —AN OPINION

Dear Editor,—Today I became disillusioned; I wondered and worried about counselling as a process of helping clients in distress, counselling and psychotherapy as a profession, and the training and education of

counsellors and psychotherapists in general at this time.

Being involved for nearly twenty years in the field of counselling from being a client to becoming an accredited therapist, an accredited supervisor and experienced trainer and facilitator I am questioning myself this evening.

I am fully convinced of the power of therapy and the healing and empowerment of people through self awareness and personal development either on a one to one or in a group situation.

Why the doubt and the concerns? I spent time this evening "surfing the net and Google" in the field of counselling training. I see a growing number of training courses that advertise and are focused on offering academic qualifications, evidence based outcomes, tools and quick fix approaches. I am aware that I may sound judgemental and critical of standards and current trends; my intention is not to offend but to provoke an attitude of enquiry.

I agree with the need to commit to academic standards, accreditation processes, learning outcomes and quality assurance but this has to be balanced with personal discovery and growth, the ongoing personal integration of the spectrum of being human with its potentiality and vulnerability, experiential learning and skills practice, exploration of ethical issues and what it means to become a professional helper. Hopefully the result then is qualified, informed, competent, ethical, compassionate, self aware practitioners. The focus has to be on the future clients that will seek out the expertise and guidance of our counsellors and psychotherapists.

I welcome the statutory regulations that are coming. The profession of counselling and psychotherapy is open to unethical practice by unqualified practitioners and requires monitoring by both the professional and statutory bodies.

I am concerned about academic qualifications being offered by some training organisations, e.g. an honours degree or masters degree in

Counselling and Psychotherapy where there is no obligation to participate in personal development, and there seems to be a lack of importance attached to building a therapeutic relationship of trust with clients, very little skills practice, and supervision is seen as ticking a box rather than a necessary support and resource for the trainee counsellor and their clients.

Participants on counselling training courses in my limited opinion need to be given a message from day one that they are now trainee counsellors and that in itself carries a responsibility to behave with integrity, honesty, respect, authenticity which means embracing a code of ethics. This message needs to be modelled by tutors, staff and training colleges. It is crucial that those who design and implement counselling training programmes understand the process of counselling and psychotherapy otherwise they do the profession of counselling and psychotherapy a grave injustice.

I ask myself am I out of touch with current trends, do people today require a solution to their problems without the exploration and excavation of the reasons why they behave in ways that they allow themselves to be demeaned, diminished or dominated in situations and relationships. Do we as counsellors feel and think that we know what is best for another, that we are the expert on the impact of life's experiences on another. Are clients expecting us to have the answers and are we falling into the trap of providing instant gratification. In a world where everything is at the push of a button, where impatience and rage is acceptable if there is a delay, where symptoms are often treated as inconvenience and the use of power dictates the pace of recovery, mental health issues and wellbeing. We as counsellors and psychotherapists need to stand apart from the crowd and reflect on where we are going as professionals and as a profession. This takes courage and self awareness (we know this place).

As therapists we have studied and assimilated many different therapeutic approaches, their theory and practice. As well as the main theorists, their concepts and techniques, we learned about visualisation, guided imagery, about assessments and collaborative plans and goals, mindfulness, meditation and many other interventions to assist the client in their journey towards wholeness. Unless all of this is founded on the intention of profound respect for the others experience, their struggles and resources we are not tuned into what counselling and psychotherapy is about. If you are working on a surface level with your client because you are unable to encounter their reality at a meaningful level, then call what you are doing something else, please don't call it counselling and psychotherapy.

Unless we are prepared to be witnesses to the gestation and birthing of the aspects of self in another as they move towards integration we are not facilitating a person's potential. This sacred work requires patience, authenticity, energy and a genuine willingness to be present in the here and now to the unfolding process of discovery, understanding and movement in the inner world of the client. Knowing and sensing themselves to be accepted and understood in the counselling relationship, they connect with themselves in a deep way that is affirming, and healing, this bestows on them a security and strength to move forward in their everyday lives.

To provide this service to another we need to be able to touch our own inner pain and fragmented aspects, we need to be willing to embrace the "hairy monsters" at the bottom of the well, who when seen and accepted become our ally and friend. This cannot be learned from a book or power point presentation. Only by being in the presence of tenderness and appreciation can our vulnerabilities and gifts come to light and be integrated. Only when we feel accepted and safe can our preciousness be experienced and we get a glimpse at our true nature.

The counselling relationship offers this unique opportunity. I know because I was fortunate to meet therapists who loved me and hoped for me and allowed me to grow at my pace. These wonderful human, fallible beings that I now guess were unsure and doubtful at times were able to hold a space for me, and challenge me with loving kindness to like myself and eventually honour myself as a beautiful creation.

And so I sit now not really wondering anymore, because writing as usual helps me come to a place where I can let go and trust the process and hope that the client seeking support in times of change and crisis will find a professional who will meet them fully in body, mind and spirit.

In my heart I feel reassured. For what it's worth I can only speak my truth in this moment. As an elder I don't have a choice otherwise I leave myself open to regret that I didn't speak. I owe it to the profession of counselling and psychotherapy which I hold dear and am passionate about and to the clients who seek my help. I owe it to the supervisees who come for guidance and encouragement and at present to the adult learners, the trainee counsellors on the counselling training programmes that I work with.—Yours etc.,

CHRISTINE MORAN
MIACP, MNAPCP, SAI,
Academic Director at The international
College for Personal and Professional
Development, (ICPPD) Athlone.
www.icppd.com and Director and co-
founder of New Beginnings Counselling
Services www.newbeginnings.ie

CAREERS IN COUNSELLING AND PSYCHOTHERAPY

Dear Editor,—I would like to comment a little further on the editorial in the Autumn 2011 issue. It was very refreshing to read your comments, especially when the experiences you describe have been experienced by many counsellors. I am recently accredited, but while at college studying, I often remember asking myself the very same questions you posed in your editorial.

In my second year at college, I began to wonder if handing out all this hard earned cash on fees, personal counselling, supervision, books, seminars, travelling, will be worth it in the end? I paid for my own fees etc.; I did not have an organisation to help me financially. Also in my second year I started to see clients and found myself a supervisor. On one occasion my supervisor requested we meet in a pub. Needless to say I was surprised and wondered was this ethical, does this happen to other students? It certainly went against my ethical standards. When we met I told my supervisor I was uncomfortable and felt this was not an appropriate setting for supervision. My supervisor tried to reassure me, had checked with their supervisor and that this was alright. Following this I found myself a new supervisor. This experience also added to my disillusionment with the profession of counselling and psychotherapy.

As for employment prospects, well, that was never really discussed. Although students often tried to discuss it with tutors, it was always tactfully avoided. I remember on tutor saying, "It's our job to 'pull you through' this course. I thought this was very strange and then began to wonder at the quality of training that I was getting, if all they were interested in was "pulling you through".

I became very despondent as a student trying to get a placement for the first time. I did not know anyone in the counselling field, nor did I have any contacts in the "industry". It saddened me to see some of my fellow students' absolute reluctance to divulge where they had a placement. There was a meanness and an attitude of me fein which left a bad taste in my mouth for a long time. These were not the attitudes I expected from counselling students. The college I paid my fees to did nothing to help me find a placement, not did I expect them to at the time. Thankfully I remembered a wonderful tutor from my foundation year and contacted her. She kindly put me in touch with a

wonderful man who gave me an opportunity to complete my hours for the Diploma. Although this placement was difficult, I discovered so much about myself.

I also realised that our profession depends on student counsellors, as many counsellors and supervisors depend on students to make a living. My ultimate goal was to work as a counsellor and psychotherapist. Students were never asked what path they wanted to take when qualified. However, by the end of my Diploma year, I soon realised that there is no certainty of employment post qualification. I must say I felt somewhat let down at not being told how difficult it is to make a living from this kind of work.

I am grateful for the work I have now, but I realise that this "industry" is no different from any other industry with the same dynamics occurring. I feel further debate on this matter is welcome and on many other issues relating to our profession. After saying all that, I love what I do and I have no regrets. I am in the right place and being who I am meant to be.—Yours etc.,

MARIA McPHILLIPS
M.I.A.C.P.

CELEBRATING 30 YEARS

Dear Editor,—I am writing to express my sincere and heartfelt congratulations to everyone involved in researching and writing the IACP book *Celebrating 30 Years*. It is a beautiful book; well-written, easy to read, with very tasteful colour photos and pictures. I felt moved by the manner in which the book captured the human stories and journeys of the people involved in the organisation from the beginning.

The journey of the IACP parallels my own journey as a psychotherapist. Like many of the early professionals in this field in Ireland, I trained in America. Having sat my Leaving Certificate in New Ross, I was awarded an academic scholarship to Immaculata University in Pennsylvania, where in 1982 I completed a B.A.

Degree in Psychology and English. In 1985, I obtained my M.Sc. Degree in Counselling from Villanova University, also in Pennsylvania. Coming home from America with a Master's in Counselling, I was very aware of the challenges of working in such a new field here. At 24 years of age, knowing that I was much too young to set up a private practice, I saw some work possibilities in either what was then termed "services for the mentally handicapped," or alcoholism and addictions services. I chose the latter and was most fortunate to get full-time work in the newly-opened Aiseiri Centre in Tipperary and later worked in Aiseiri in Wexford until my mid thirties, when I set up a private practice, which has been busy and diverse for the last 15 years. I had been engaged in supervision for many years, and became an accredited supervisor after completing the Trinity Diploma in Supervision in 2004.

I was surprised to read in the book *Celebrating 30 Years* that I was accredited by I.A.C.P. at the very first accreditation meeting on 19th August 1986. My name then was Alice O'Neill and changed to McLoughlin when I married in 1990. I would like my many friends within the Association, including two former Cathaoirigh; Patricia Kennedy and Claire Missen, to know that I am the Alice O'Neill who was accredited in 1986. Due to simpler office procedures and lack of computer records, I myself was never sure of the exact date of my accreditation. As reaccreditation was introduced, I was eventually given a membership number of 1391, but I think my membership number might more correctly be 5!

I have thoroughly enjoyed my 25 years of full-time work as a psychotherapist in Ireland. It has been a joy to be part of the growth of the I.A.C.P. Well done to everyone. Congratulations on a lovely book! Here's to the next 30 years!—Yours etc.,

ALICE McLOUGHLIN
Wexford

Workshop Review

Couple Counselling — Finding the balance

Presenter: Eithne Kelliher

Reviewed by: Emer Kilmartin

Date: 19 February 2011

Venue: Moate, Co Westmeath

From the moment I introduced the presenter Eithne Kelliher and the workshop title 'Couple Counselling – Finding the balance' the interest and energy in the room intensified. It is a topic of interest to many Counsellors and Psychotherapists in Ireland with so much societal change taking place. This has a consequential impact on relationships. Seventeen Counsellors / Psychotherapists attended this workshop. Some had an in depth knowledge and experience of the area, whereas others were embarking on this work for the first time as practitioners. We all shared the common interest in couple counselling.

Eithne is an experienced psychotherapist with a strong interest in Family and Couple Therapy. She also works with a programme team in counselling and psychotherapy in DCU where she lectures.

The workshop commenced with a discussion on the differences and similarities in individual and couple work. The main concept which came to the fore was the challenge for the therapist to hold the stance on neutrality. This posed the question how can we truly hold the position without aligning ourselves with one or other of the partners? We hold


fundamental biases within our being based on our own relational experiences. She stated the Gilbert and Shmulder (1996:147) point out 'as soon as you are beginning to favour one person's perspective over the other and ceasing to see the issue as a systemic one, then it is time to stop, take stock and get supervisory help'. It is vitally important that the therapist is aware of their own process in this work.

Eithne went on to highlight the presenting problems that couples are faced with; communication difficulties, conflict needs, role change, parental roles and transitions in the relationship. When working with couples it is important to work from the different dimensions that are involved such as economic, emotional, boundaries, sexuality, parenting and household responsibilities. In the couple's relationship there are three parts, me, you, and we. Through these the couple have expectations of the relationship which can emerge from family of origin, social context, gender, values and beliefs. These are all factors that can influence a couple on how they are experiencing their relationship.

At this point in the workshop the dynamics of relationships and possible presenting issues when working with

couples had emerged. The emotional charge and temperatures which the couples may go through came to light in our experiential work. We worked in triads and it became evident the therapist needed to be adequately skilled and trained to work in this area. Eithne clearly outlined the importance of contracting and reviewing the therapy during the process. One dilemma which arose was whether it is effective for the couple to attend individual work and couple work with the same therapist? It's an issue which needs to be addressed in supervision before the onset of this work.

The therapeutic approaches which were effective in this work are Person Centred, CBT, and Psychodynamic Therapy. The couple feeling heard and being allowed to feel heard is a powerful process. A useful framework to draw on is 'The Stages of the Family Life Cycle'. (Carter and McGolderick, 2005) It clearly outlines the stage the family are at, the emotional processes involved and the changes in family status required to proceed developmentally.

This workshop was a fruitful experience on both a personal and professional level. It created a balance of theory and practice when working with couples. 

Workshop Review

Love and Fear in Supervision

Presenter: Robin Shohet

Date: 5 February 2011

Reviewed by: Mary E. Torney

Venue: Holiday Inn Express, Antrim

'What would I least like my supervisor to know about my work?' 'I would not like her to know because...'

These were a couple of the perceptive questions that introduced a challenging, stimulating, thought-provoking and heart-opening workshop given by Robin Shohet last weekend to over 40 members of IACP and other counsellors.

Robin has been writing about and teaching supervision for over 30 years and is acknowledged as a dynamic, creative and passionate stand for supervision as a place where 'loving presence can bring healing for supervisor, supervisee and client'. By dealing with Fear where it manifests as anxiety, concern, guilt, shame, preoccupation with safety and rule-governed behaviour and thinking or obsessive attention to procedures, we can open ourselves to being present in the supervisory relationship, being with supervisees as they explore what prevents them in turn from offering the core conditions to their clients.

Rogers held that three conditions were necessary and sufficient in order to form relationships between counsellor and client that foster healing and transformation. Congruence or genuineness and realness, is the condition of being 'oneself' without putting up a front or facade where what the counsellor experiences at a 'gut' level, what is present in their awareness and what they express to the client are consonant with one another.

When we are anxious, challenged by a client's behaviour or expression, afraid that he will make an attempt on his life, afraid he will disclose something that we will have to take action on, concerned that we are not good enough or guilty at not living up to expectations, at that point we cease to be present with the client and stop being congruent through fear.

Unconditional Positive Regard, non-possessive warmth, is a condition of being accepting and caring, being willing for the client to be with and express whatever is present in his emotions at that time and not in order to meet our need to be of use, to be powerful, to be successful.

The third condition, Empathic Understanding, is where the counsellor senses accurately the feelings, meanings and those that lie below the level of the client's awareness. All these necessary conditions are adversely affected when the counsellor is snapped back to an awareness of himself through an anxiety about his ego-survival.

In this workshop, Robin Shohet, through gentle, persistent and incisive questions, engaged us in an exploration of our own fears and facades that we bring into supervision, both as supervisors and as supervisees. By recognising them and dismantling them, we can then be free to presence the active and skilful compassion of the Core Conditions.

With a partner we looked at the question *'I would not tell my supervisor because...?'*


We did not share exactly what we would least like our supervisor to know about our work but rather examined the impact of 'hiding' on our own supervisory relationship and the implications it has for our supervision and our client work. We expect our supervisees to share openly with us but if we do not in turn risk being authentic in our own supervision...!

In triads we began a short supervision of a real client issue. After 5 minutes the observer stopped us and we answered the question, 'What am I not saying here?' and 'I am not saying it because...' from each position in the triad. We then had the opportunity to share what it was we were not saying and voice the fear that had caused us to stay silent.

Then supervision continued for a further 5 minutes before stopping and discussing the exercise.

It was surprising how the opening up of honest and fearless communication had deepened the work of Supervision to such an extent that in 10 minutes the supervisee had achieved clarity and direction – and in a manner where she felt heard, held, not judged, facilitated, trusted and honoured.

Robin Shohet, along with Michael Carroll distinguishes between 'Supervision as a technology and a philosophy of Supervision – supervision as a way of being'.

This introduced us to a way of being that frees us to be the best supervisors we can be. 

Workshop Review

A Theory of Attachment-based Exploratory Interest Sharing (TABEIS)

Presenter: Dr. Una McCluskey

Reviewed by: Fionnuala Darcy

Date: 12 March 2011

Venue: Clarion Hotel, IFSC, Dublin 1

Dr. Una McCluskey works at the University of York and as a Freelance Attachment Consultant. She has written extensively on working with individuals, couples, families, and groups. Una was presented with the Award for Vision, Innovation, Dedication and Achievement (VIDA) in 2004 by the Group Psychotherapy Association of Southern California in appreciation of her contribution to the field of psychotherapy.

Una presented a thought provoking workshop based on the premise that each one of us is born with the expectation of "being met as a person". Her research is influenced by her work with Bowlby and underpinned by Object Relations Theory and Family Systems among others.

This engaging presentation highlighted the importance of bonding and attachment and how this helps us to understand our clients better. She explained the "interpersonal world of the child" and that children's behaviour is integrated with Adult behaviour. From here, she went on to explain how a fear free exploratory caregiver, who is able to respond quickly and effectively to signs and signals of stress in the child enables growth and engagement. In this way, she says that the self is autonomous and at the same time embedded in relationships. Thus fundamental to the growth of the child is the care-giving relationship which it is at the heart of survival, development and transformation. In the

context of the therapist, Una explained that effective care-giving is not only about the process of providing support at the core of the vulnerable self but also requires tapping into all our senses as this is at the heart of human growth and development for our client.


As the day progressed, we learned about the self and the five goal-corrected instinctive systems within us. These being: Caregiving; is needed for each system and comes primarily from our environment. Careseeking; Interest sharing and The defensive self (or Fear) are with us from birth. Sexuality is linked to our sense of identity and develops in our late teens.

Essentially, we all have different experiences of the self. The more experience one has of dominant submissive relationships the harder it is to trust supportive companionable empathic relating. This clearly is a significant piece of learning for the therapist, especially when working with resistant clients. For those who have experienced this, there is a greater tendency to rely on their "fear system" by managing threat on their own and displaying fight, flight or freeze behaviours. Alternatively those whom have been exposed to experiences of the fear free exploratory caregiver are more likely to seek another's help. For this goal to be achieved, both care-seeker and care-giver must interact and this means arousing the biological system *not* the person. It is possible for the care-seekers needs to remain

active and unmet for a lifetime. Should this be the case then the self has not been met as a person and misattunement is the result, not knowing what one knows and feels.

Having garnered some insight about misattunement, Una went on to explain how to achieve attunement through "Goal Corrected Empathic Attunement". Here, the therapist is highly interactive, very present and very focused which leads to a very high response rate. Una likened it to Mary Ainsworth's work A Strange Situation. Using the example – when an adult just gives a baby an object, the baby collapses (there is nothing to strive for); If the baby is ignored, similarly, the baby collapses. However, if you put the object within reach then the baby is happy, is encouraged to explore further in safety. Overlapping this example in the therapy session means that enthusiasm must be the same for both therapist and client or matching in intensity of focus. This is empathic attunement, essentially, knowing what you know and feel.

In summary, as therapists, it is our job to help our clients to leap from Fear to Attachment. It's a bridge which is underpinned by the care-seeking system.

This workshop was presented with passion and a depth of knowledge that kept me engaged the entire day. My major learning point and no doubt many other attendees was the importance of using all our senses when dealing with our clients. 

THERAPIST DILEMMAS

Generally speaking the dilemmas discussed on this page are not based on factual cases but are reflective of the kind of situations that can occur in therapy. The response given represents the personal opinion of the respondent. If a therapist encounters, in the course of their work, a dilemma similar to any of those discussed, it is advisable that they discuss the situation with their supervisor or take legal advice where necessary.

Send your Dilemma to:
Dialogue, Éisteach,
21 Dublin Road, Bray, Co. Wicklow
or email eisteach@iacp.ie

Dear Editor

I work for an organisation where part of my job entails giving, where appropriate, in-the-moment support to clients who contact the service.

Recently I spoke to a client, a girl who was 17 years of age; she was raped by a member of the travelling community when she was aged 14. On the same night her friend was gang-raped by a number of the same group. She was unwilling to disclose the identity of the perpetrator due to fears around her safety and that of her family and her home.

I spent time with this client on the phone, listened and supported her as best I could. I did not force the topic of the identity of the perpetrator, the responsibility of it being too great.

This is the first time I have come across a situation like this and have being left feeling that I could not do more for this client because if I tried to take it any further it could lead to putting the client and her family at risk of harm. What else could I have done in a situation like this? If the client rings again what other possibilities/supports could I offer the client without putting the client or her family at risk?

R

What is the dilemma being presented here? A counsellor has offered a compassionate listening ear to a young woman who has shared a horrific story of abuse and fear. Empathy and alliance seep from the page and one gets the feeling that the call ended with an open invitation for the young woman to get back in touch.

The counsellor has asked us though "What if she does?" This suggests that although she is, on reflection, content that she has done what she could for the young woman, there may be other issues not yet addressed or clarified. What for instance is her obligation to the wider community? Is there a gang of men roaming the streets looking for

another victim? And if there is, what information could the counsellor possibly offer that would be of any assistance in identifying the perpetrators and bringing them to justice.

The issue of possible serious risk must also be considered. Despite the fact that the young woman has reported the attack three years after it occurred, is she still in danger? The counsellor has repeatedly mentioned concern for the safety of the client and her family which may imply that there is an ongoing risk of harm. If so, then guidance on how to act must be sought from the counsellor's agency policies, their line manager and their code of ethics.

The physical and mental well being of the young woman is also an area of concern and one which needs attention. Informing and, if possible,

enabling the young woman to make use of the services of a rape crisis centre could or perhaps should be part of any future contact with the client. Perhaps time could be spent in researching the availability of such a service to become familiar with their protocols and facilities so that if she does call back you are able to offer accurate and knowledgeable information.

Lastly concern for the counsellor must not be over looked. We are told that this is the first encounter this practitioner has had with this issue. To hear and contain such harrowing details is not easy and it is hoped that there is established support systems in place; supervision, peer consultation groups, line management etc that the counsellor can turn to.

Maxine Cunningham

DILEMMA FOR ÉISTEACH SUMMER ISSUE

*The editors would like to receive responses to the following dilemma directly from the readers. Answers of 300-500 words should be emailed to eisteach@iacp.ie. Responses to the following dilemma to be published in the Summer 2012 issue of Éisteach.
Deadline: 1st April 2012.*

The dilemma for this issue is that we do not have a dilemma! It would appear that this section in *Éisteach* has outlived its usefulness as we receive few if any responses to the dilemmas posted.

Is the availability of online forums to debate and discuss dilemmas in real time partly responsible for the lack of responses?

If you wish to comment on this please do so through the Letters to the Editor section of the journal.