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Naming the Spiritual: The Hidden Dimension of Helping

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ABSTRACT. The history of spirituality and the social work profession is marked by ambivalence, even avoidance. This paper expands the definition of social work practice to include a spiritual dimension. The authors suggest that this dimension is not new, but its importance has not been sufficiently articulated. The spiritual dimension of practice includes consciousness of and attention to the client's search for meaning. Both the helping relationship and many of the issues that clients bring are spiritual in nature. A simple framework to help practitioners identify spiritual issues is presented and illustrated by a case example. [Article copies available for a fee from The Haworth Document Delivery Service: 1-800-342-9678. E-mail address: getinfo@haworthpressinc.com]

This paper is about a vision. The vision has to do with enlarging the definition of social work practice to include a spiritual dimension. And, although the focus of this paper is on social work practice, this vision is relevant to professional helpers of all sorts because it can

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expand the way professionals think about human behavior. It is commonly presumed that human behavior may be understood in terms of its biological, psychological and/or sociological components. This article will suggest that the spiritual dimension is essential to a more complete understanding of human behavior and that naming this dimension is important for both practitioners and clients.

A few preliminary thoughts on the nature of the authors' vision are in order. First, the spiritual dimension of practice is not new. It does not represent an innovation or addition to practice. What is relatively new is the naming of it as such. The spiritual dimension of practice is inherent in the nature of the social work relationship and in many of the issues clients bring. Secondly, the spiritual dimension of practice flows out of the spiritual dimension of living or *life itself*. That is, spirituality is rooted in the nature of personhood and what it means to be human. Finally, naming the spiritual dimension is important because the act of naming it will make social workers more conscious of it. This consciousness will permit more deliberate attention to spirituality assessment and related intervention strategies.

Treatment of this subject will begin with a discussion of spirituality and the social work profession. The link between spirituality and practice will be explored beginning with the recognition that not all helping professions have viewed spirituality as separate from practice. The reasons this separation has occurred in social work will also be explored along with the current interest in the inclusion of spirituality as a practice issue. Next, the spiritual dimension of practice will be clarified. Spirituality will be defined and differentiated from religion. Its basis in personhood will be discussed, and the extent to which spirituality is an existing (although hidden) dimension of what social workers already do via the spiritual nature of the social work relationship. A broad framework for identifying spiritual issues will be presented to assist practitioners in becoming more conscious of the spiritual dimension. This paper will conclude with the presentation of a case example which illustrates the spiritual nature of client issues and how the act of naming the spiritual provided more avenues for change.

SPIRITUALITY AND THE SOCIAL WORK PROFESSION

Not all helping professions have considered spirituality or spiritual development as separate from the helping process. Theologians and

pastors of virtually all faiths have viewed spirituality as an integral part of healing, growth and development. Perhaps in part because matters of faith seem to be within the purview of religious professionals, secularly trained helpers have tended to see spirituality as more appropriately handled by the "specialists." Most notably, however, developmental psychology has a history of interest in the ways that spiritual development affects counseling (Fowler, 1986; Worthington, 1989).

It is also important to note that the social work profession hasn't always had what many would consider an antagonistic relationship with organized religion. Holland (1989) maintains that the original social work practitioners saw themselves as spiritually motivated and as expressing their faith through their work. Ortiz (1991) argues that the fundamental values of the profession, love and justice, come out of the Judeo-Christian tradition, and Canda (1988) maintains that social work practice had its roots in religious activities. In its recent history, however, the social work profession has made conscious attempts to avoid addressing religious or spiritual issues. The motives behind these attempts to separate issues of spirituality from practice are important to understand.

First, the emphasis on scientific, objective practice standards as a strategy for increasing the credibility of the profession has exerted considerable influence. Social workers wishing to be seen as something more than "do gooders," began to embrace the enlightenment values that were and still are dominant in the larger culture. These values emphasize reason, quantifiable results, and an objective, supposedly value-free approach. Issues of faith, spirituality and religion are explicitly value laden, and hence, incompatible (or so it seemed) with this approach.

Clergy were often seen as less skilled, less knowledgeable, and not trained as well as other professional helpers. The perception that religious institutions were sometimes oppressive in nature and at least partially responsible for some of the problems that clients experience also added to the need that many practitioners felt to distance themselves from spiritual concerns. Practitioners did not want to contribute to various forms of religious oppression or exploitation. Neither did they want to be seen as proselytizing clients or imposing their values on clients.

The simplest solution appeared to be avoidance—avoid contaminat-

ing the objective approach with subjective, value-laden material; avoid being considered similar to less-skilled clergy; avoid the possibility of contributing to religious institutional oppression; avoid the appearance of proselytizing or otherwise imposing values on clients. In this avoidance, the social work profession has adopted language that virtually ignores the spiritual dimension of the problems brought by clients.

The story does not end here, however. Within social work practice and education there is a movement to develop spiritually sensitive practitioners (Canda, 1988b; Joseph, 1988; Semabeikian, 1994). In a recent study of various helping professionals, 41% of the subjects believed that spiritual issues should be treated just the same as other issues in the client's life, and 20% regarded the process of therapy to have a spiritual component (Sheridan and Bullis, 1991). These same practitioners were especially interested in spirituality as it relates to assessment and appropriate interventions. At the same time social work educators are advocating for the inclusion of spirituality content in social work curricula (Dudley & Helgoff, 1990; Miley, 1992). Ortiz (1991) refers to spirituality as the "missing link in social work education" and Joseph (1987) refers to it as the "neglected dimension of social work practice." Articulating this hidden dimension is the focus of the remainder of this paper.

NAMING THE SPIRITUAL DIMENSION

It is first necessary to differentiate spirituality from religion. As Miley (1992) notes, spirituality and religion can be understood as separate though often related dimensions. Spirituality can be defined as "the general human experience of developing a sense of meaning, purpose, and morality," whereas religion is a more formal set of beliefs and practices which evolve within a particular denomination (Miley, 1992, p. 2). She further notes that the connection between religion and spirituality isn't always obvious. People may raise spiritual questions outside the purview of organized religion, and likewise, people may be inside of an organized religion and *not* raise these questions (Miley, 1992, p. 3).

Both Dewey and Maslow argued for a more humanistic understanding of spirituality (cited in Elkins, 1988). That is, they saw spirituality as a human phenomenon, something "more basic than, prior to, and

different from traditional expressions of religiosity" (Elkins, 1988, p. 6). Another way of saying this is that spirituality is a dimension of being human. Thus understood, the spiritual dimension of personhood simply *is*, much like the physical nature of personhood simply *is*. How people respond to it, how conscious they are of it, and whether they choose to express this dimension through an organized religion varies from person to person, just as the degree to which people are aware of their physical bodies and take care of them varies.

Spirituality may thus be defined as the personal search for meaning which is universal among humans. This broad definition is supported in the social work literature (Joseph, 1987; Canda, 1989; Lantz & Pegrum, 1989; Sheridan & Bullis, 1991; Miley, 1992), and is the fundamental tenet of existential philosophy. Existentialists believe that perceived meaninglessness is the most frequent and profound human difficulty, and that failure to address issues of meaning results in mental health problems of all sorts. This is in contrast to a psychoanalytic perspective which would view the drive to experience pleasure and avoid pain as the chief motivator of human behavior, or to the Adlerian perspective which suggests that power is the most significant human motivator (Lantz & Pegrum, 1989). This desire to find meaning or "will to meaning" (Frankl, 1969) provides the theoretical foundation for the spiritual dimension of practice. Whether one views the desire to find meaning as *the* most important motivator of behavior, or whether one acknowledges it as one of many motivators of varying importance, it is clear that practitioners need to be aware of this aspect of personhood.

The spiritual dimension of practice is that dimension in which professionals attend to and are conscious of the client's search for meaning. This is different from the psychological dimension which the authors specifically define as the client's thought processes and related emotions. Similarly, the social dimension is concerned with the interaction between the individual and the social environment. This differentiation is essential, so that the spiritual dimension is not lost or hidden from either client or practitioner. As important as psychological and sociological insights are, they do not always answer spiritual questions. To give only psychological or sociological answers to spiritual questions represents a failure to fully hear the client and be "where the client is." Practitioners, therefore, need to be able to

recognize and name spiritual questions as spiritual questions, so that they can help clients frame these questions and address them as such.

Although social workers have been aware of clients' search for meaning, a goal-directed, problem-solving orientation may obscure the spiritual nature of the search. Problem solving usually implies the existence of concrete solutions and has a pragmatic focus. Spiritual issues are better thought of as dilemmas or difficulties that need to be tended, rather than as problems that need to be solved. They are like plants in a garden that need watering, weeding and attention from a gardener (Moore, 1992; 1994). The search for meaning may not lend itself to measurable outcomes and concrete solutions; it simply *is*. It is in part the struggle or process of the search itself which holds the meaning.

Many practitioners have been engaging clients in this search without having a professional language for talking about it. Canda (1988) likens social workers to "sleepwalkers" who are "engaged in deeply spiritual activities but often lack awareness of this" (p. 45). Many clients have found meaning, even when they or their social workers have been unconscious of this process. At issue is making that process more conscious for practitioners, so that they can help clients become more conscious of it as well.

The next two sections will address the way social workers engage clients in a spiritual process via the social work relationship and the nature of the issues that clients bring.

SPIRITUAL NATURE OF THE SOCIAL WORK RELATIONSHIP

The relationship between a social worker and a client is generally viewed as secular (Peterson, 1992), and for reasons already noted, the social work profession has tended to avoid addressing spiritual issues directly. Unfortunately, this avoidance hides the spiritual core of the helping relationship.

Social workers, like lawyers, therapists, doctors, teachers, and clergy, are professionals who either implicitly or explicitly take a solemn vow to serve humanity. In return for a certain amount of power that they are granted over other people's lives, they promise to abide by and keep sacrosanct certain practices and ideals. This exchange can be understood as a covenant, a type of contract found in all civiliza-

tions. In Western theology, Abraham is popularly considered the progenitor of the Jewish people. God made a covenant with Abraham that if he served God and kept his law, God would make him exceedingly fruitful, and his descendants would become the chosen people. Abraham proved his faith by agreeing to circumcise every male child as a symbol of the covenant between him and God, and between God and his people. Abraham was, therefore, twice obligated—to God, and to the people (Peterson, 1992).

Helping professionals, like Abraham, also have a dual affiliation. Their covenant grows out of a dual obligation to (1) care for people using the knowledge and skills of their profession, and (2) remain faithful to the transcendent principles of their profession. For religious professionals *the* transcendent principle is God and/or principles related to truth, justice or other moral codes. For other helping professionals the transcendent principles are frequently expressed in professional codes and ethical standards. This framework helps to keep professionals ethically grounded (Peterson, 1992).

According to Christian tradition, the Jewish covenant was extended to every human being through the person of Jesus Christ. Christ is believed to have represented the covenant itself, inasmuch as he was believed to be fully divine (the God side of the covenant) and fully human (the people side of the covenant). The mystery of Jesus' suffering, death and rebirth became a metaphor for the suffering, death, and rebirth necessary for authentic human experience. As Garanzini (1989) notes, "Healing grace is communicated when one human being risks the pain and hurt of rejection possible in every contact of intimacy" (Garanzini, 1989, p. 186).

Every helper and client takes this risk upon entering a helping relationship. But merely taking the risk is not enough. Social workers and other helpers have an obligation to be faithful to the trust that clients place in them, to keep their promises, and to stand with the client until the helping relationship is no longer needed (Miller, 1990). Metaphorically speaking, they re-enact the spiritual mystery of life, death, and rebirth. In this way the covenant between the practitioner and client is fulfilled.

Through this relationship or covenant, social worker and client join together to help the client heal body, mind, and spirit. This healing necessarily involves the acceptance of what is and has been. At the same time, healing involves a challenge. The challenge is to discover or else create some meaning from experiences which will provide a

sense of direction for the future. The helping relationship is one arena in which this discovery takes place. Another way of saying this is that the helping relationship *embodies* the search for meaning. The helping relationship is a medium through which meaning is found.

A FRAMEWORK FOR NAMING THE SPIRITUAL

The authors have created a simple framework to assist practitioners in naming or identifying spiritual issues (or issues of meaning). Others (Lantz & Pegrarn, 1989; Elkins et al., 1988) have developed frameworks for identifying types of meaning. There is nothing inherently superior in the authors' framework. It does have the advantage of being fairly simple and easily comprehensible to both practitioners and clients. Four dimensions have been identified which seem to be inherently spiritual in that they represent significant types of meaning. These four dimensions are not intended to be exhaustive, but many, if not most, spiritual issues can be understood in terms of these four dimensions. In addition, there may be overlap between the various types of meaning. It is necessary to enter the world of the client to try to understand his or her values, meanings, metaphors, and guiding principles. In so doing, the worker learns to use the client's own words to reframe presenting problems as spiritual issues.

The four dimensions are:

1. *Belonging and alienation.* Belonging, relatedness (Joseph, 1987) to something beyond oneself, and a community of connectedness to the humanness of others (Elkins, 1989), can be contrasted with alienation (Krill, 1988) and isolation (May & Yalom, 1989).
2. *Faith and doubt.* Faith or trust in the universe, a higher power or some ultimate reality (Fowler, 1986), can be contrasted with doubt (Krill, 1988).
3. *Hope and despair.* Hope (Krill, 1988), idealism (Elkins, 1989), freedom to make choices (May & Yalom, 1989) can be contrasted with despair (Krill, 1988) and death (May & Yalom, 1989).
4. *Suffering and joy.* Suffering (Krill, 1988), all forms of pain, and guilt (May & Yalom, 1989) can be contrasted with acceptance, surrender (Shuzzo, 1989), joy, vitality, spontaneity, and humor (Krill, 1988).

A case presentation illustrates an application of this framework. It is included to give practitioners a sense of how issues may be identified as spiritual and how naming them as such is an important first step in the healing process. This case is described in the traditional psychosocial framework. The presentation will be followed by a discussion which names the spiritual dimension.

JOANNE

Joanne was a 26-year-old woman who had a history of severe sexual and emotional abuse by members of her family, by a doctor, and by a member of the clergy. She suffered from many of the symptoms of anxiety, particularly symptoms associated with post-traumatic stress disorder. For example, she was extremely vigilant. She felt the need to anticipate physical and emotional danger so that she could be prepared to ward it off.

Directly related to the vigilance was an almost complete lack of trust. Since the world always held the potential for danger, no one could be trusted. In any situation, the possibility existed that she could be hurt. This lack of trust became evident in the relationship that she formed with the social worker. It took her quite some time before she could trust that the worker had her best interests in mind and genuinely cared about her. Underneath these concerns was her ongoing belief that her very survival was in danger. This belief was borne of her childhood experiences which taught her that she had no right to exist, that her stay on earth was a favor, and that she had to repay the favor by making no trouble for anyone and by remaining invisible.

Another core issue for this client was a deep sense of personal shame. Like many abuse victims, this client internalized the feeling of being "bad" and "dirty." She filtered all information and feedback from the world through this lens, using it as a reinforcement for this belief about herself. In reaction both to her shame and to her belief that she had no right to exist, Joanne remained quite isolated and had neither family nor friends on whom she could rely for support. She saw herself as flawed and, in some essential way, not like other human beings.

The psychological issues of anxiety, cognitive distortion, and shame as well as the social dimensions of mistrust, isolation, and lack of

social support can be addressed using a number of traditional approaches. These approaches might include problem-solving methods, cognitive/behavioral interventions, or psychodynamic therapy, to name a few. These treatments may imply but do not explicitly articulate the spiritual dimension. This omission could lead to missed opportunities to understand Joanne's situation more completely and intervene most effectively.

On a spiritual level, the issues discussed here can be seen as issues of doubt versus faith, isolation versus connection, and hope versus despair. Faith can be defined as a belief that help is available from something larger than oneself, be it a God, a higher power, a larger reality, or the universe. A possible conclusion to having been reared in an abusive environment is that there is no such help forthcoming. A child may be told that God does not punish, but the failure of God to save or protect the child from the abuse is frequently experienced as an abandonment. Why else does a so-called loving God fail to intervene? In any case, the child is left alone to deal with the pain. Therefore, one way of understanding this client's vigilance and lack of trust is to understand it as a reaction to her perception that she was all alone in the world, and that she could only count on herself.

Not only was faith in anything beyond herself impractical, Joanne also lacked the ability to believe in her own inner resources. In spiritual terms trust in oneself can be seen as faith in the divine within (Muller, 1992). This put Joanne in a double bind because she believed she had only herself to count on, and could not do so. Thus, alienation and despair flowed naturally from her total lack of faith.

Addressing spiritual issues ideally occurs on two levels. First, it is useful simply to name the issue as such. Stating to Joanne that she was struggling to find some sort of faith in the universe as well as some way of trusting other people gave her the room she needed to consider the spiritual dimension of her struggle. In addition to the psychological and social dimensions which also required attention, this acknowledgment led her to explore her relationship with God by pursuing a connection to a religious faith and community in which she felt affirmed. She also identified her sense of betrayal from God and paradoxically, affirmed her hope in God. Secondly, the social work relationship itself can become a medium for addressing spiritual issues. As Joanne learned to experience another human being as trustworthy and as willing to walk with her on her journey, she began to learn that

she could count on someone outside of herself for support. This development of trust in the worker began to create a larger sense of faith.

Just as psychological issues impact the social arena (and vice versa), spiritual issues also interact with each of these realms. For example, Joanne's shame, previously identified as a psychological issue, can also be understood as social and spiritual. Psychologically speaking, shame pertains to individual assumptions about self-worth (Fossum and Mason, 1986). The social manifestations of shame may vary. Joanne isolated herself, believing herself unworthy of friendship or care from others. Spiritually, Joanne's shame interfered with her ability to experience an identity or connection to the universe in a larger sense (to humankind and to God). Naming the spiritual dimension of her shame as well as the psychological and social manifestations, led Joanne to increased awareness that she is fundamentally a human being, with much more in common with the rest of humanity than she ever imagined before. With this awareness came a lessening of her isolation, and an increase in her hope that she, too, could find meaningful and satisfying relationships with herself, with others, and with the world at large.

CONCLUSION

Many social workers might describe this case in terms of its psychological or social dimensions alone. Similarly, many social workers might not routinely characterize the helping relationship as spiritual. Even when the spiritual dimension of practice remains nameless, effective outcomes are still evident in the progress made within the other dimensions. The *conscious* awareness of the spiritual dimension, however, and the ability to name it as such represents an expansion of practice that will make current approaches even more relevant and helpful.

Some clients, it seems, are more willing than some practitioners to name the spiritual using their own frames of reference. The historical context for this practitioner reluctance has been presented. But social workers needn't fear entry into this realm. Neither the dilemmas described, nor the interventions employed in the preceding case are unique. What is perhaps new to some is overtly naming spiritual issues as such and describing interventions in spiritual (meaning) terms. A discussion of the spiritual nature of the helping relationship and a

simple framework to assist practitioners in identifying spiritual issues have been presented in an effort to de-mystify the spiritual nature of social work practice. Awareness of the spiritual dimension helps both clients and workers develop a fuller understanding of the helping experience and simultaneously creates more avenues for change.

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