

SPIRITUALITY AS A DIMENSION IN COUNSELLING

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ABSTRACT

The purpose of this paper is to examine the vitality of the spiritual dimension of the human person and its centrality in counselling. Spirituality is differentiated from religion as every person can be said to have his own sense of spirituality, even though the person may be an atheist; not everyone adheres to religious beliefs. A brief historical overview of how spirituality and religion have evolved in their roles within the context of mental health, specifically in counselling is addressed. While many proponents of mental health theories highlight the idea of spiritual dimension as a major or an indispensable dimension, not everyone agrees on the debate, and an antithesis is discussed.

INTRODUCTION

Spirituality can be defined as the motivational emotional source of an individual's quest for a personally defined relationship with people and the non-human environment; for some, it includes a connectedness with a higher being, leading to enhanced feelings of well-being, inner peace, and life satisfaction (Canda, 1988; Hoyer and Roodin, 2003). "Spirit" is derived from the Latin word "spiritus," which means breath of life. We can be spiritual and religious at the same time. Everyone can be said to be spiritual but not everyone is religious.

Spirituality can be considered to be the motivational and emotional cause of the human search for meaning; some people also link it with an experience with a higher being. This emotional experience involving relationships and the search for meaning leads an individual to a sense of connectedness and transcendence (Hoyer and Roodin, 2003).

For more than a decade, spirituality has emerged to be more prominent in counselling

literature than ever before in the profession (Ceasar and Miranti, 2001; Hall, Dixon and Mauzey, 2004). Spiritual feelings and beliefs can enhance a person's health, and it has been linked to hopefulness among nursing home residents (Gubrium, 1993). Reese and Brown (1997) reported that spirituality is the most frequently addressed topic in home hospice visits. Patients who face death are strengthened by spiritual strength and they overcome their fears of disability and death.

Spirituality and religion can affect a person's life in a profound manner and they are both concerned about attaining psychological well-being (Gearhart, 2005). Lehman (as cited in Burke et al., 1999) reported that the National Gallup Poll (of persons more than 65 years of age and older) conducted in the United States showed that 76 percent identified religion as a very important part of their lives; two thirds of respondents had preference for counsellors who shared similar spiritual values and beliefs. In fact, more counsellors now recognise that older people have spiritual needs; the latter's mental well-being depends on the fulfilment of such needs.

In a study by Carlson, Kirkpatrick, Hecker, and Killmer (as cited in Sabloff, 2003) on the clinical members of American Association of Marriage and Family Therapists, an impressive 95 percent of the respondents indicated that the relationship between spirituality and mental health was an important one. Efforts have been made to integrate spiritual elements into modern counselling practice such as in Spiritual Cognitive Therapy as well as in the many approaches adhered by counsellors in their day-to-day practice (Spiritual Cognitive Therapy, 2005; Wong, 2005). Meanwhile, many pertinent questions have been raised as to whether the more empirical,

biological, and behavioural models in mainstream counselling are able to help clients to help themselves at the optimal level without considering spiritual resources.

SPIRITUALITY AS ONE OF THE PRIMARY RESOURCES IN COUNSELLING

Victor Frankl (1965), the Viennese psychiatrist and philosopher who survived the torments of World War II concentration camps, says that there are three dimensions to the human person, viz. the somatic, the mental, and the spiritual. Here is what he says of the spiritual dimension:

The spiritual dimension cannot be ignored, for it is what makes us human. To be concerned about the meaning of life is not necessarily a sign of disease or of neurosis. It may be; but then again, spiritual agony may have very little connection with a disease of the psyche. The proper diagnosis can be made only by someone who can see the spiritual side of the man (Frankl, 1965), sic, people or humans.

Psychotherapist Emmy van Deurzen (2002) claims that there are four dimensions of human beings, namely the physical (body), social (ego), personal (self), and spiritual (soul) domains. For van Deurzen, the spiritual world is "the domain of experience where people create meaning for themselves and make sense of things."

In their book, *Concepts of Fitness and Wellness: A Comprehensive Lifestyle Approach*, Corbin et al. (2006) discuss the five dimensions of health and wellness: the physical, emotional or mental, intellectual, social, and spiritual.

Wilber's (as cited in Sperry, 2001) integral psychology focuses on the five basic dimensions of human experience: psychological, social, moral, spiritual or religious, and somatic or biological. Sperry illustrates the inter-relationships of the five dimensions and the centrality of the spiritual dimension with the following figure (p. 24):

The spiritual dimension is placed at the core of the diagram to show its fundamental characteristics to the rest of the dimensions. For Sperry (2001), this spiritual dimension "may or may not involve any formal affiliation with a religious tradition, but it reflects the beliefs, effects, and behaviours associated with the basic spiritual hunger or desire for self-transcendence that all individuals experience." Regardless of whether we compartmentalize ourselves into three, four, six, or more dimensions, the spiritual dimension is certainly a vital part of human nature which is indispensable.

SPIRITUALITY AND RELIGION

Although most people see themselves as spiritual beings, the way they define spirituality varies, and

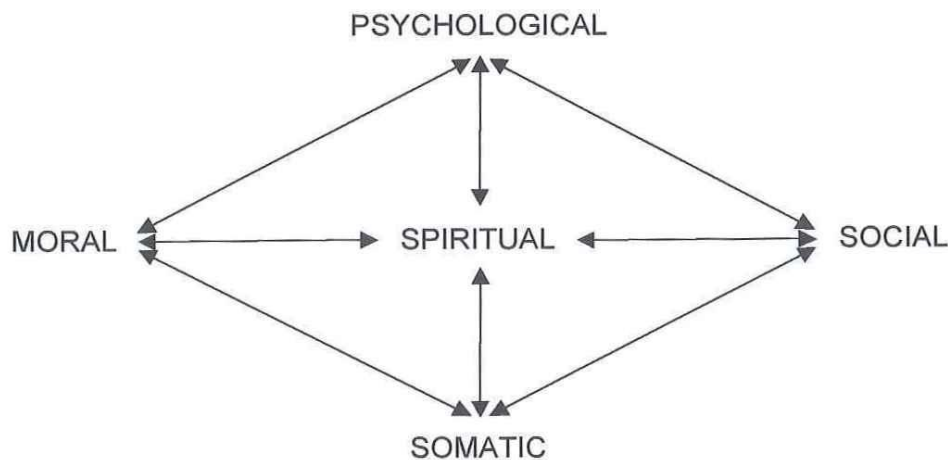


Figure 1. Inter-relationships of five dimensions and the centrality of the spiritual dimension. (After Sperry, 2001)