

RESPONSE TO COMMENTARY

With One Foot in the Water and One on Shore: The Challenge of Research on Spirituality and Psychotherapy

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For many years, Jon Allen has brought a remarkable blend of wisdom and humanity to his writings on trauma, attachment, mentalizing, and psychotherapy (e.g., Allen, 2004; Allen, Fonagy, & Bateman, 2008). More recently, the focus of his writings has expanded to include wonderful insights on the place of spirituality in these processes (Allen, 2013). As coauthors, we were delighted then to hear that this leading clinical thinker and practitioner was willing to comment on our article. At the same time, we were not a little bit nervous anticipating his response to our admittedly new study, one that falls so clearly outside the mainstream of clinical research (Pargament, Lomax, McGee, & Fang, 2014, pp. 248–262). Allen's affirming, indeed generous, review then was quite gratifying, especially his encouraging words about the value of studies of the spiritual dimension of psychotherapy (Allen, 2014, pp. 263–265). We hope other researchers and practitioners will also take these words of encouragement to heart. Like reviews at their best, Allen's also points to important new directions for study and raises a few provocative issues.

Allen correctly notes that, although the focus of our research was on sacred moments that occur in the therapeutic relationship, our research examined sacred moments from the individual perspectives of clients and therapists. Several questions follow: What is the relationship between clients' and therapists' perceptions of sacred moments? Are client and therapist equally likely to imbue a moment in therapy with importance, sacredness, and spiritual qualities? Is the degree to which a sacred moment is shared important for efforts to understand their impact? If so, how do researchers go about capturing sacred moments as they actually unfold in the process of treatment in ways that do justice to the character of the experience? We agree with Allen that questions such as these could serve as a "cornerstone" of future study.

Allen also encourages us to take a closer look at some of the dispositional factors that may increase the likelihood of sacred moments in treatment. In our second study of patients, we found that people who reported higher levels of religious and spiritual involvement were more likely to perceive sacred moment qualities in their important moment. However, the magnitude of these relationships was small; Allen suggests we consider another variable that could be relevant to both therapists and clients, "the general capacity or disposition for spiritual experience." Perhaps, sacred moments grow not only out of the therapeutic encounter but also out of earlier priming for spiritual experience through family, institutions, and larger cultural forces. This then leads to another key question. Do sacred moments in psychotherapy help nur-

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The Challenge of Therapy

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that, although the focus on sacred moments that define the relationship, our real moments from the inflections of clients and therapists. What is the relationship and therapists' perceptions? Are client and therapist able to have a moment in therapy that is sacred, spiritual, and meaningful? How do we know which a sacred moment is? How do we know that researchers go about their work as they actually do? How do we know that treatment in ways that do not diminish the experience? We need to ask questions such as these as the "cornerstone" of future study. We need to take a closer look at the relational factors that may influence sacred moments in therapy. In our study of patients, we reported higher levels of involvement were more sacred moment qualities in therapy. However, the magnitude of the relationship was small; Allen's other variable that could influence therapists and clients, "the position for spiritual experiences grow not out of a therapeutic encounter but also out of spiritual experience, culture, and larger cultural context." Another key question: How can psychotherapy help nur-

ture this spiritual disposition and, if so, do sacred moments in treatment foster sacred moments in the context of other relationships? We suspect that a sacred moment in and of itself may not be sufficient for the cultivation of these spiritual experiences; rather a sacred moment would need to be brought into the conversation between client and therapist, processed, and considered for its import. Without that, the client may have no place to put the sacred moment in the psyche and the experience may be dismissed or quickly forgotten. Once again, Allen is suggesting another valuable direction for further thought and study.

On a more critical note, Allen calls us to task, albeit gently, for subsuming sacred moments beneath the rubric of the therapeutic alliance. Sacred moments, he maintains, may have effects and implications that are not limited to this relationship. We agree. It was not our intention to treat sacred moments as merely a therapeutic alliance variable, and concur wholeheartedly with Allen's admonition against spiritual reductionism. Sacred moments, we believe, represent a spiritual variable, but one which also holds important implications for relational, psychological, and perhaps physical functioning. The experience of sacred moments in therapy could conceivably have direct effects on clients and therapist apart from any role the therapeutic alliance may play in the process. Our focus on the therapy alliance was simply a logical and, we would say, important starting point. We hope that it will stimulate studies of sacred moments that take us, in Allen's words, "beyond the therapeutic alliance."

Allen is not shy about voicing his greatest concern about research in this area, "the potential erosion of humanism by the mainstream deference to science in the field of psychotherapy." With respect to our particular area of study, he argues forcefully against treating sacred moments as "interventions" and designing "manuals" to facilitate these experiences. Speaking specifically of the need to go beyond the mainstream of research on the therapeutic alliance, he recommends that we "keep both feet out of the stream and firmly on the bank" of spiritual and humanistic thought.

Here, Allen is doing a great service in fluently articulating one of the dangers that arises in research on spirituality and psychotherapy, that of twisting and distorting spirituality to fit

within the concepts and methods of science. In doing so, sacred matters become merely a part of the therapeutic alliance, one among many tools the practitioners can pull out of a bag, and one that can presumably be taught and implemented in step-by-step fashion through manualized treatments. But in doing so, the distinctive character of spirituality—rich, complex, mysterious, sacred—may well be lost and the efforts of practitioners prove unhelpful.

Yet, we think that there is another danger of work in this area, one that Allen does not explicitly address—call it spiritual fuzziness (cf., Spilka, 1993), the lack of spiritual grounding in systematic thought and methods. Without some grounding, spirituality becomes a concept so amorphous that it is impossible to define, study, or address in psychotherapy. Of course, our definitions, concepts, and methods will never be able to do full justice to processes of the depth of spirituality. Perhaps the best we can do is move forward in our halting, imperfect way, being sure to acknowledge our limitations as we go along. In any case, the solution, we believe, is not to separate studies of spirituality from current scientific concepts, theories, and methods. That would leave our field adrift. Many of the most important advances in the psychology of religion and spirituality have involved integration of religion and spirituality into mainstream theories, such as attachment theory (e.g., Kirkpatrick, 2005) and coping theory (e.g., Pargament, 1997). This work has shed important new light on not only religion and spirituality, but also on attachment and coping.

So we take issue with Allen on only one point in his tremendously encouraging commentary. We would say that the task for researchers interested in the spiritual dimension of psychotherapy is not to stay out of the stream and keep both feet firmly on the bank. Rather the challenge is to maintain our balance while we attempt to keep one foot in the water and, at the same time, one foot in the stream; avoiding the dangers of spiritual reductionism on the one hand and spiritual fuzziness on the other.

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