

## **Moral and Spiritual Aspects of Counseling: Recent Developments in the West**

**Mumtaz Fatima Jafari**

**Abstract:** *This paper aims at exploring the moral and spiritual dimension of counseling. Since professional counseling has developed in the West, cultural peculiarities and individualistic orientation of the Occident permeate the profession. Recently a surge of interest in spirituality and religion has been noted with some focused treatment on a new approach of counseling. The new approach suggests that spirituality in life is central to the individual, family, and community. Therapists are increasingly examining the relationship between spirituality and general psychological wellness. Both secular and religious professionals are recognizing the paradigm shift from illness to wellness and individualism to collectivism. Counseling has grown out of the premise that therapists need to be value-free. The emerging perspective of an integrated outlook of counseling with religion and spirituality has resulted in a fundamental conflict with the prevailing value system of the profession. Counselors still wish to avoid the role of a moralist. The controversy is also related to the desired assertiveness of a therapist in attaching a moral and spiritual dimension while advocating certain values. Psychotherapy, as a moralistic enterprise, requires modification in its training programmes. Therapists need to reorient themselves as scientists with a profound moral or spiritual commitment. Clients need and demand this reorientation. This profession has the claim of responding to the needs of its clientele and it cannot ignore the emerging thrust in its practice.*

Counseling is a dynamic and ever-growing profession with a distinct history and therapeutic modality. Grounded in many disciplines, counseling evolved and developed as an American product of the 20<sup>th</sup> century. It is an applied social science that aims to promote healthy functioning and inspires its seekers to be vibrant lives. Krumboltz

---

Dr. Mumtaz Fatima Jafari is Associate Professor of Psychology in the International Islamic University Malaysia. Email <mumtazf@yahoo.com>

defines counseling as consisting of “whatever ethical activities a counselor undertakes in an effort to help the client engage in those types of behavior which will lead to a resolution of the clients’ problems.”<sup>1</sup>

Counseling and psychotherapy are viewed as areas of overlapping activity—both relying on verbal interaction within the framework of a trusting and non-possessive atmosphere. Many clinicians contend that there are no essential differences between them and the distinction is artificial.<sup>2</sup> George and Cristiani take the view that both counseling and psychotherapy utilize a common base of knowledge and common set of techniques in the therapeutic process but may differ in approach according to the severity of a client’s situation.<sup>3</sup> Counseling has traditionally been viewed as less intensive, short-term, education-oriented in order to help normal people function more effectively. It is basically concerned with people who are not “sick” but “stuck.”<sup>4</sup> On the other hand, psychotherapy has been described as a long-term, reconstructive, in-depth, analytical process that focuses more on the dysfunctional patient with severe mental problems. The goals of counseling have been oriented towards development and prevention of mental health problems while the goals of psychotherapy have generally been remedial—helping people to empower themselves. Many regard the difference between counseling and psychotherapy as being primarily quantitative rather than qualitative. Since the fundamental processes do not change, only the situation or the client’s concern may be different, the terms of counseling and psychotherapy are used interchangeably.<sup>5</sup>

The theoretical developments and professional applications of counseling have been based on the empirical model of investigation. There has been a conscious effort to restrict counseling services to secular context where religious and spiritual values have little role to play. The primary notion of the secularist stance of counseling has been questioned by a number of Western theorists and writers during the last few decades. The basic contention has been that counseling and religion or spirituality have a common ground with regard to their goal of healing the suffering subjects and both use interactive techniques and courses. A new school of thought is emerging that advocates development of an integrated approach of counseling services and religious practices. This is a clear indication of a paradigm shift that still may take a long time to evolve. However, it is pertinent to identify relevant issues and concerns that surround the fundamental propositions of value systems, spirituality, morality, and use of religion.

### **Purpose**

A significant body of literature has emerged on counseling and spirituality in the North American context. There is a need to take stock of the intellectual advancements in the West. While there exist strong civilizational and religious traditions in the East that may have ramifications for conceptual deliberations, these have not been reviewed through any systematic effort. This paper is being written with a view to present an analytical review of salient works on the subject of moral and spiritual aspects of counseling as presented in the West. An attempt is made to project a synthetic framework against which focused discussions may be directed to address important issues and concerns. This may serve as a springboard to examine the viability of these perspectives against any specific religious context.

### **Scope and Limitations**

Islam claims to have a universal appeal for mankind. The Islamic version of salvation requires a holistic outlook for achieving harmony between the material and spiritual dimensions. Islamic perspectives are in sharp contrast with some of the fundamental tenets of Western counseling like individualism and secularism. The primary dilemma of the Western theorists of counseling has been that they are unable to break ground against these binding propositions. The Islamic heritage has ample evidence that the spiritual leaders provided immense solace and comfort to the distressed and destitute. This paper sets the ground to review relevant issues. Yet it is beyond its scope to deliberate on the faith and practice of a specific religion, Islam being one of them, in order to develop a model of integrated practices of counseling and religiosity.

At the outset of this paper, the development of counseling has been briefly documented. Then moral and spiritual aspects of counseling have been expounded. The last section brings forth relevant issues and concerns that have emerged from the discourse on this subject. This review is expected to provide a useful framework for further research to Muslim psychologists and mental health practitioners.

### **Emergence of Spirituality in Counseling**

Counseling and guidance emerged as an academic discipline and field of professional practice during the last century. Initially it grew out of the vocational needs of the era when industrialization caused massive

migration and social change. Later, around the beginning of 20<sup>th</sup> century, it was introduced in schools in order to guide students make better occupational choices. Individual wellness also gained increased attention with the widespread application of the values of competition and individualism in personal life. In the second decade of this century, the federal government of the United States adopted it as part of its public health movement to address to the needs of mental wellness.

The academic foundation was laid down when the rigorousness of empirical methodology was employed in case study method and development and refinement of measurement techniques. With certain initiatives of federal legislation in the United States, professionalization and institutionalization of counseling were enriched. The movement of public mental health was the hallmark of 40s and 50s; value-free counseling seemed to be the agenda of 60s; and professional diversification and emergence of specializations characterized the 70s.

During 1980s counseling continued its growth as a distinct mental health profession. Standardized training and certification programmes and increased diversification of counselor specialties were the important dimensions of the decade. Counselors became more diversified with emphasis on human growth and development. Moral development was another way in which human growth issues were highlighted.

According to Gladding, the evolution of the counseling profession took on a new dimension in 90s.<sup>6</sup> A movement was pioneered to incorporate spirituality and religious beliefs into the therapeutic process. As a result, transpersonal psychology emerged as the fourth force.<sup>7</sup> According to others, the psychology of religion seems to be experiencing a resurgence and is attracting new talent.<sup>8</sup>

Now counselors are assuming major roles as diagnosticians and practitioners. Training standards, codes of ethics, and certification programmes are being established and widely recognized. A return to the study of values, especially spiritual, is a widespread cultural phenomenon with a new sophistication and empirical analysis. Bergin maintains that the movement may eventually reach the point of becoming an orientation.<sup>9</sup> Edwards asserts that it is the time to rediscover and reintegrate our roots creating a novel synergy which will form the basis of 21<sup>st</sup> century counseling.<sup>10</sup> Currently a movement toward synthesis and integration of psychotherapy is driving the field of counseling, a clear indication of a paradigm shift.

### **Meaning of Spirituality**

After decades of negligence, spiritual awakening is gaining momentum in the West. There is a surge of interest in research to investigate the impact of spiritual awakening on wellness and human development. As Edwards stated, that after having crossed the Sahara of atheism, we are now heading toward a spiritual renaissance.<sup>11</sup> Research has defined spirituality largely in terms of religion as both are grounded in affirmation of transcendence. It is a feeling of being inwardly close to God, a life-sustaining endeavor, a search for meaning, and an altruistic attitude toward others.<sup>12</sup> It is an innate component of human functioning that acts to integrate other components of personality.<sup>13</sup> Religion and spirituality spring from the core of human experience and profoundly influence physical, mental and social aspects of life. Spirituality and religion are critical for a complete understanding of a person. Although spirituality and religion are closely associated with each other, some people do make a distinction between them. In contemporary American society, spirituality is considered a kind of bridge between religion and humanism.<sup>14</sup>

### **Use of Spirituality in Therapy**

The profession of counseling has been defined as "at bottom a value system," "an invitation to authenticity" or "a truth seeking venture."<sup>15</sup> Halmos believes that faith and love are the two building blocks of the profession of counseling.<sup>16</sup> A large majority of mental health professionals agree with Halmos and view spirituality and religion as promoters of mental health. Substantial evidence supports that there is a positive link between religion and mental health. Evidence gathered by Robinson based on an extensive review of literature, shows an overlap between religion and psychotherapy.<sup>17</sup> He views both having a religious stance in their outlook and approach. Research indicates that spiritually oriented life-styles are associated with reduced incidence of disease, distress and ill health in addition to having an enhanced quality of life. On the other hand, it was found that lack of adherence to spiritual and religious life-style may affect physical and mental health adversely.<sup>18</sup> Increased feelings of helplessness and hopelessness have particularly been associated with lack of spiritual perspective.<sup>19</sup> Bergin conducted his research on about ten thousand subjects spanning almost ten years.<sup>20</sup> He found a direct and forceful influence of strong religious faith on personal adjustment and accomplishment. Research conducted by Ellison also corroborates these findings.<sup>21</sup> What can be gathered

from this body of research could be summed up in the following propositions. Religion offers comfort in sorrow and misfortune, and buffers the negative effects of traumas. It enhances the quality of life with greater satisfaction. Worthington identified four themes inherent in the Western view of religion that are equally relevant to spirituality. He mentioned that religion facilitates one's relationship to the higher reality beyond one's control; instills hope and assurance in the face of uncertainty and distress; provides a sense of contentment together with a sense of purpose in life; and, helps establish relationships with like-minded individuals or community.<sup>22</sup>

Quackenbos, Privett and Klentz hold religion as a pervasive force in Western society, though it has largely been ignored by most psychotherapists. They strongly emphasize the need to integrate religion and therapy as both aim at helping people empower themselves. The authors analyzed the current situation and posited four positions to depict the relationship between religion and psychotherapy. These four positions are: the Orthodox religious positions, the aesthetic position, the neutral position, and the moderate position.<sup>23</sup>

### **Spiritual and Moral Aspects of Counseling**

Long ago, Glover made the following statement about the moral and spiritual vision of counseling profession: "No one ought to practice psychotherapy unless he has the wisdom of Socrates and morality of Jesus Christ."<sup>24</sup> Counseling is fundamentally a moral undertaking, but it may not be deeply rooted in the conscious of psychotherapists. They typically see themselves as applied scientists whose main task is developing techniques and applying them to get a job done.<sup>25</sup> A persistent minority has challenged this assumption and made counselors realize that moral and religious values have always been influencing their performance implicitly or explicitly.<sup>26</sup>

The word "counsel" denotes a special kind of relationship between counselor and client in an accepting and non-possessive atmosphere that is likely to lead to happiness and meaningful living. Wellness, the ultimate target of counseling, refers to a state or process of maximum human functioning involving mind, body and spirit. Witmer and Sweeney state that spiritual well-being has recently been added to WHO's definition of health.<sup>27</sup> The wellness model presented by them entails five life-tasks that are: spirituality, self-regulation, work, love, and friendship. Spirituality, being at the center of the wheel of wellness, denotes purposiveness, optimism and values. Optimism is one

of the primary characteristics of healthy and effective copers; and values reveal the philosophy of life.<sup>28</sup> Value can be defined as the best or most desirable cognitive choice showing persistence over time. Patterson does not see a clear difference between values and morals but does perceive values as class of morals especially relating to interpersonal relationships.<sup>29</sup> For Grant, moral values are distinguished from values in general as morals are specific.<sup>30</sup> Morals constitute attitudes toward other individuals and result in actions that affect others on the basis of moral values. For Bergin, values function as regulators of conduct. They are orienting beliefs about what is good about the client and how this good can be achieved. He further asserts that obedience to moral values is in principle not different from obedience to physical laws.<sup>31</sup>

Value is a firm belief in the worth of an idea, feeling or action needs a social atmosphere.<sup>32</sup> Stein sees culture as a source of values. Models of counseling and psychotherapy are significantly affected by the characteristics of the society in which they have been evolved. Bergin believes that psychotherapy was formulated mainly in secular countries especially in North America where cultural narrowness and ethical relativism are embedded in its theories and modes of practice.<sup>33</sup> Since Western culture is rooted in the notion of individualism and self-determination, these serve as binding perspectives in the development of counseling theories and practices. Individualism refers to self-orienting attitude and separates the individual from others. Most American psychotherapies have supported and encouraged this attitude in order to activate a kind of utilitarian individualism. It thus embraces the value experiences of autonomy, self-reliance, rationality, and relentlessness. They support narcissism, parent blaming, and neglect of community but religion does not figure with the associated concepts of God, duty, self-sacrifice or altruism. They have also overshadowed kindness, social interest, love, truth and similar moral values. Here they are largely evasive to the fundamental characteristics of counseling as being a truth-seeking activity.

The concept of individualism as a moral vision requires humans to be unique, independent, competitive, and self-promoting. Christopher maintains that moral vision has descriptive and prescriptive functions.<sup>34</sup> It not only explains the nature of human reality (the worldview) but also prescribes how the reality should be or become (ethos). Ethos refers to character or philosophy of life. Objectivity and value neutrality are the core tenets of individualism.

In the context of spiritual counseling, the code of ethics developed by the American Personnel and Guidance Association (APGA Code) is quite significant. Initiated by Super in 1961, it was aimed at protecting the public and fostering high professional standards. Since then the Code has been revised periodically with an apparent utilitarian stance. The primary concern expressed about the Code is its orientation toward the American context that leaves it inapplicable in the universal sense. An overemphasis on individualism is also reflective of its contextual bias.<sup>35</sup>

Both religion and psychotherapy are primarily concerned with both the individual and mankind. There is a considerable overlap as they share ideologies and beliefs as common foci of interest. According to many psychotherapists, religion and psychology complement each other. While psychology contributes to an understanding of human nature and one's relationships with others, religion enhances our understanding of the meaning and purpose in life. Both may contribute to more effective living.<sup>36</sup>

Many writers have reported conflicts between psychology and religion that need to be objectively reviewed. It is asserted that psychotherapists are occupying the place that was once considered the rightful domain of religious leaders.<sup>37</sup> In Western society, a physician is generally not trusted to handle psychological symptoms and a priest is not perceived to be capable of solving practical problems of everyday life. The therapist is viewed as an arbiter and linkage between the two.<sup>38</sup> Pattison elaborated that priests and physicians have grown apart in the American society, and consequently, a large number of suffering people have been left without adequate healing.<sup>39</sup>

### **Value System and Cultural Context**

Counseling practice is so rooted in the values of the dominant culture that it would be difficult to separate them from each other. Christopher has noted that counseling theories and concepts represent 30% of humanity, but these are being extended to the other 70% in potentially harmful ways.<sup>40</sup> Many social scientists contend that a large number of problems of modern society such as depression, anxiety, loneliness would not be as intense if Western culture does not emphasize self and independence so strongly that it becomes a kind of prerequisite for an ideal personality. This training is in contrast with the values prevalent in many non-Western societies where parents and other adults train children to be group-dependent. Such value themes seem to be



universal.<sup>41</sup> Maslow is among the strongest advocates of the basic underlying human standards that are beyond culture and time. London maintains that the therapists need to see themselves as moral agents when they are faced with ethical problems.<sup>42</sup>

### **Religion and Psychotherapy**

Religion is still considered to be a dominant force in the West. Results of six Gallop polls conducted after 1950 were reported in the *APA Monitor* revealing that 90% of the American population held some form of religious belief. It is also reported that two-thirds of the population, when faced with serious problems, prefers to see a counselor who is spiritual and follows religious beliefs. Clergy are often the first line of contact in time of trouble as their services are free, easily available, and unstigmatized.<sup>43</sup> However, some evidence suggests that clergy do not feel confident about their counseling skills as they are not professionally trained.<sup>44</sup>

London attributes the misery of the modern age to the impotence of creeds, weakness of the family system, decline of social and moral values, and break-up of community life.<sup>45</sup> Frankl, a strong advocate of religious perspective, contends that God-consciousness is in the depth of human psyche.<sup>46</sup> He argues that there is a void in the heart of 20<sup>th</sup> century man and believes that this void can only be filled by God. Maslow sees valuelessness as the ultimate disease of modern life that has generated permanent feelings of apathy, alienation, hopelessness and cynicism.<sup>47</sup> Psychologists like James, Jung, Adler, Allport and many others have acknowledged the significance of religion and spiritual perspective in human life. Research has further deepened our understanding of human behavior and specific dimensions of human growth that are moralistic in stance. Harmonious development implies integration or balance between social, mental, emotional, physical and spiritual dimensions. Meaning emerges from the interaction of mind, body and spirit in order to maximize human potential.<sup>48</sup>

### **Developmental Approach and Spirituality**

The process of counseling cannot occur unless a developmental approach is adopted. Development of this attitude requires acceptance of a "holistic model" of wellness and prevention that covers the entire life-span. Development is at the core of what the counselors do.<sup>49</sup>

Many psychologists believe that the profession of counseling has rejected the illness-oriented medical model. They also reject diagnosis

as a prerequisite of counseling service, and contend that all people can benefit from counseling as it offers hope for a better and brighter future. They think of development and prevention as fundamental premises of counseling. However, they insist that the counselors have yet not relinquished the medical model though they are facing a paradigm shift.<sup>50</sup> This shift is not only from sickness to wellness, immediacy-bound orientation to life-long targets, but also from an individual-based approach to the wider community, from fragmentation to wholeness, and from self-centeredness to self-transcendence. According to WHO estimates, 50% of the mental and neurological problems can be prevented if counselors shift their focus from diagnosis and treatment of pathology to wellness, prevention and growth.<sup>51</sup> This emphasis involves change in the role and function of counselors who need to have a new outlook about religious and moral dimensions with their professional competence and cultural sensitivity. Sensitivity to spiritual and religious issues requires that counselors must have an appreciative understanding of how diversely these issues can be manifested across a diversity of clients and settings. Religious agents and counselors have each to learn a method whereby they can harness whatever they have in common while respecting what will always be unique and different. Psychotherapists like Fosket and Quackenbos assert that many ideological differences are being resolved, but there still exists a need for leaders to emerge and erect the bridge.<sup>52</sup> Bergin maintains that it is timely to add a spiritual keystone to the building blocks already provided by behavioral, psychodynamic, humanistic, developmental, and cognitive approaches.<sup>53</sup>

### **Therapist or Moralist: Blurred Distinction**

Optimism is a growth-producing element in life and is deeply nurtured by religion.<sup>54</sup> Counseling permits practitioners to bring positive change in their clients' lives. Counselors need to learn how to teach others without making them conscious that they have been taught. Helping clients to learn through discovery needs a highly oxygenated atmosphere, a climate of intemperance, rhetoric and feverish melodrama.<sup>55</sup> The therapists do not communicate their morals and values directly to clients. Rather, they teach them through the force of their character and the richness of their experience, focusing on the reality of the client. It has been emphasized that therapists should not impose their values or philosophy on clients, yet it has largely been accepted that therapists cannot avoid communicating values to clients by accepting a client's ultimate goals.

Mental health professionals and researchers have given a great deal of attention to the core conditions of the counseling process. To sum up, personal growth can only be facilitated when the counselor is genuine, having no front or facade. However, counselors are often put in a difficult position when clients expect more than help in gaining awareness, meaning and comfort in life. The therapists, in their role as help givers, possess more power, knowledge, wisdom, and confidence with special skills and expertise. They have potentially greater impact on the psychic well-being of the clients. They are viewed as models to help clients develop more functional skills and processes based on their ultimate values.<sup>56</sup> This valuing process takes place primarily in the core of a person. The counselors can help clients identify their spiritual power and look inward for value guidelines to become "inner-directed." Brammer and his associates maintain that the goal of effective counseling is to encourage people to look for guidelines, trust and empower themselves, and find the balance between inner and outer criteria.<sup>57</sup>

Counselors have constantly been facing ethical dilemmas in discussing moral and spiritual issues with clients. Some of the reasons may include fear of imposing personal values on clients, negative attitude toward religion, and lack of theological knowledge that can help them explore religious and spiritual issues.<sup>58</sup> Counselors, in general, claim to be value-free and scientifically detached from their clients' values. They think their main job is to develop and use techniques and serve clients. They seldom ask questions about morality. Although this position seems to be rigorously taken, it is not universally accepted and has been substantially challenged by a new breed of therapists. Beutler views psychotherapy as a process of persuasion that systematically inculcates a healthy philosophy of life.<sup>59</sup> Clients' values make up much of the content of the counseling process while the counselors' values enter the process through case conceptualization, selection of techniques, goal-setting, and assessment of outcomes.

Modern psychotherapists admit that they influence their clients' value system, by letting them know how to live more effectively and meaningfully. Yet they want to avoid the title of "moralist." They typically see themselves as applied scientists and have mostly been silent about moral ideologies or social philosophies.<sup>60</sup> There seems to be a growing awareness among both secular and religious professionals that a large number of people need and desire treatment that integrates

psychotherapy and religion. This is expected to strengthen their emotional maturity and spiritual wellness.<sup>61</sup> A number of studies have revealed that people have been favoring mental health professionals as being more helpful for treating nervous disorders. They, however, prefer religious leaders as the best source of help and hope for marital and other life problems.<sup>62</sup> Bergin found that values of mental health professionals and those of the majority of clients were sometimes contrasted with regard to moral behavior, pathology and development of human potential. He visualized a potential danger resulting from these differences especially if the counselors were unaware or negligent about these differences.<sup>63</sup> Research conducted by Worthington and Scott indicates that religious clients had certain fears when they were confronted with secular counseling. They also had the fear of having their values changed as a result of being served by a secular counselor.<sup>64</sup>

It is generally recognized that successful counseling results in changing clients' values in line with those of their counselors. The mechanisms under which this value convergence takes place is yet not very clear. Strong attributes this change to counselor's credibility while Rogers views it the result of client's sense of personal worth for the counselor.<sup>65</sup> Truax credits this change to counselor's empathic attitude and the regard she or he holds for the clients.<sup>66</sup> Worthington and Scott suggested that counselors influence client's values through selective attention to their goals.<sup>67</sup> Both the procedures and goals of psychotherapy have moral implications. As asserted by Grant, the client's wellness is affected not only by ends achieved by the therapist's activity but also by the means used to achieve the ends.<sup>68</sup>

### **Need for Paradigm Shift**

The current situation demands a paradigm shift as people are suffering from conflicting choices. A counselor's spirituality or religiosity is an implied force without any intention or covert application of belief in position.<sup>69</sup> Psychotherapists are neither priests nor physicians. They are not questioned for their religious commitment. London does not view them as teachers though their work is more educational than medical in nature.<sup>70</sup>

Bergin considers it ethical for counselors to acknowledge that they applied their own values in their professional work. They must be explicit about what they believe while respecting the client's value system. It will help clients decide whether possible differences in belief

systems need to be addressed or resolved. He considers the therapist as a teacher who can help clients reconstitute their worldview and incorporate values in the construct system that concerns intrapsychic and interpersonal consequences of behavior.<sup>71</sup> He also stresses that time demands counselors to shed inhibitions and help people activate those values that can be used as cognitive guidance in achieving self-regulation and maintaining meaningful life-styles. Some clients view counselors as mere applied scientists and disregard their role as value agents while others may feel comfortable with value-imbued therapy. Counselors need to understand clients' religiosity as an ongoing transformational process that exerts a profound impact on their inner peace, health, productivity, and interpersonal relations.<sup>72</sup>

The need to integrate religion and psychotherapy was felt in the past by many psychotherapists. In 1961, Mowrer expressed that an integration between the two was in progress. In 1971, Walter observed that a growing congeniality between religion and psychotherapy was taking root. An official Division of Psychologists, interested in religious issues within the American Psychological Association, has been functional since 1975. There have been initiatives in synthesizing spirituality or religion with counseling and psychotherapy. Still the gap between religion and therapy remains wide.<sup>73</sup> Recent studies indicate that religious workers are not happy with their current status and wish to elevate themselves by developing therapeutic skills through professional training.

### **New Modes of Training**

The concept of psychotherapy as a moral undertaking essentially demands a modification in therapists' training programmes. Moral issues and social philosophies should be the primary focus in this process. One view profoundly professed is that the therapists must not forget that this is the person and not the religion that they need to focus on. They can study all theoretical and technical matters and yet miss an understanding of the person who lives within traditions. Counselors can help clients examine their moral and spiritual resources critically and develop effective plans to realize those resources.<sup>74</sup>

Psychotherapists can play a valuable role through collaboration with religious agents in the following three directions: developing collegial relationships; sharing a plan of action with religious counterparts regarding any emergency; and, offering them educational modules to handle problems more effectively.<sup>75</sup> Miller and Jackson observe that

spiritual dimension has been overlooked in training and practice of traditional mental health professionals.<sup>76</sup> The therapists either ignored it or perceived it to be irrelevant in the healing process. They may hold different views that may hinder the counseling process or may not possess enough information to be beneficial to a client's religious and moral belief systems. Many psychotherapists have realized that religious or spiritual identity is as vital to counseling as is ethnic or cultural identity. Worthington claims that there is a strong basis for synthesizing religion or spirituality as an essential part of the counseling process. This is based on the understanding that the majority of the world's population describes itself as believing in divine power and most of people consider religion and spirituality as a means of comfort in resolving their emotional conflicts.<sup>77</sup>

### **Methodological Issue**

The need to integrate religion and psychotherapy has existed for a long time and is felt by an overwhelming majority of clients. Quackenbos and his associates suggested two avenues for rapprochement: offering psychotherapy in religious contexts and also considering religious issues in secular contexts.<sup>78</sup> There are many unresolved issues at this stage. The psychotherapists representing different perspectives on religion and morality need to work together to deliberate on relevant issues. Integration of religion with therapy is expected to broaden the scope of counseling and psychotherapy. Consequently the individual and society will grow together toward a more meaningful resolution.

A primary concern is derived from the widely held epistemological assumption about the Western culture that an objective and universally value-free knowledge can be achieved. Bickhard took a drastic position by claiming that all knowledge is motivationally constructed.<sup>79</sup> Another significant notion is that the scientific method is not the only valid means toward knowledge development. Scientific procedures, based on physical and biological models, have separated psychology from its philosophical roots. Edwards conceded that we have been seduced by science just as other eras have been mesmerized by religious dogma.<sup>80</sup> Secular therapists believe that science promotes their empirical and technical credibility. However, science cannot justify a moral order as religion does. Science is only a method of systematically accumulating and analyzing information. It reveals facts and does not prescribe how to act on them. It cannot provide a code of life. In order to arrive at a moral conclusion from scientific facts would require a leap of

inferential faith. Science indeed has great potential for defining and explaining human nature, but it does not spell out the goals toward which that nature should be steered. It is religion that provides a holistic conception of life, sets goals in life, and provides guidelines to achieve those goals. Science can never arrive at the ultimate truth, nor it is able to nurture human psyche as it cannot heal the wounds of the soul. Science and religion must complement each other to fulfil the spiritual and psychological needs of the humanity. Psychotherapists need not to substitute their methodology but they must examine other means and methods with a certain degree of objectivity and openness.

Counselors' passive neutrality toward religion and spirituality and dispassionate attitude need to be substituted by openness and sensitivity to spiritual and religious issues. The very purpose of counseling, enhancing personal growth, gives a clear rationale for reflecting on client's religious beliefs and values into the counseling process to crystallize meaning, hope, assurance, and strength in their lives.<sup>81</sup>

### Conclusions

Counseling with spiritual and religious overtone is becoming a tenable phenomenon. Here the term counseling covers all therapeutic modes including vocational guidance, psychotherapy and other forms of mental treatment. Counseling has evolved through a number of phases of vocational emphasis, mental health movement, psychological measurement, value-free treatment and intensive interaction with the client.

The last few decades are marked by a growing sophistication of therapeutic treatment, with enhanced refinements through research undertakings. It has also led to investigations of primary premises that were hitherto considered sacrosanct and untouchable. The most striking evidence is found in the challenges posed to the phenomena of empiricism, value neutrality, individualism, and secularist foundation. A concomitant surge of interest is also noted in exploring religious and spiritual avenues for healing and developing clientele. So far the initiatives have been sporadic, fragmented, and without a theoretical coherence. Consistent with the character of theoretical fields, significant dimensions have been brought forth that need to be further explored, distilled, theorized, and synthesized. This paper has identified important viewpoints and conceptual strands that serve as vital sign-posts in the development of the sub-discipline of moral and spiritual counseling. The issues that warrant systematic research are as follows:

1. Exclusive and overlapping domains of counselors and religious

- agents;
2. Appropriateness of religious or spiritual value interactions and influences;
  3. Modes for convergence of counseling services and religious practices;
  4. Facilitation of interactions between the two professional streams and provision of training opportunities in an environment of sharing and mutuality;
  5. Development of models for integration of counseling and spirituality;
  6. Addressing the core issues of epistemological orientations dealing with methodological monopoly of empiricism; and,
  7. Attending to the issues of empiricism, value neutrality, secularism and individualism for theoretical contemplation.

The question arises as to how to deal with the ramifications of this obvious paradigm shift. The first response would be the conduct of research that should focus on the vital problems and issues that have largely been left unresolved. Secondly, a core set of values permeating the essence of the core biblical faith can be defined that might have a universal appeal. However, this would require an inter-faith dialogue by capitalizing on the commonalities cutting through the basic tenets of the three religions. But such an exercise would be limited to the conceptualization of fundamentals and may not diverge into the unique properties of a faith.

One key issue might be related to the definition of spirituality itself. The Western concept draws more on individualistic and mystical or transcendental percepts. Islam has a different perspective of achieving a consonance between the inner self and outwardly imperatives through regulation, discipline, submission and a great deal of reverence to the overall wellness of the community. This ultimate goal of seeking solace and contentment is pursued through recognition of transcendental unison that may not engage the mystical mystique.

Islam also has its clear targets about the wellness of individual and society that lie at the core of counseling process. These perspectives are distinct and also need to be adequately elaborated. A clear articulation of these perspectives is a pre-requisite for the development of a code of practice of "Islamic counseling." This requires a rigorous intellectual pursuit with intensive deliberations. Only then the dream might be near



actualization.

As we have pointed out earlier, this paper is not aimed at the application of relevant concepts to any particular religion. Recent developments, however, point to a much-needed effort for integrating Islamic principles of social and individual wellness with the counseling concepts and techniques. Some efforts are underway to investigate the methods and practices of leading spiritual leaders who have presented examples of spiritual counseling. In view of the paucity of literature in this area much more needs to be done.

---

### Notes

1. J. D. Krumboltz, "Behavioral Counseling: Rationale and Research," *Personnel and Guidance Journal* 44 (1965):383-387.
2. For a discussion on this issue see for instance, J.C. Hansen, R.R. Stevic, & R.W. Warner, *Counseling Theory and Process* (Boston: Allyn and Bacon, 1986); C. Patterson, "Values in Counseling and Psychotherapy: Therapist and Family," in M. T. Burke and J. G. Miranti, eds., *Ethical and Spiritual Values in Counseling* (Alexandria VA: ASERVIC, 1992), 107-119; and J. Pietrofesa, A. Hoffman, & H. Splete, *Counseling: An Introduction* (Boston: Houghton-Mifflin, 1984).
3. R.L. George, & T.L. Cristiani, *Counseling Theory and Practice* (Boston: Allyn and Bacon, 1995).
4. S. Glading, *Counseling: A Comprehensive Profession* (NY: McMillan, 1996)
5. For some further material on difference between counseling and psychotherapy, see, L.M. Brammer, P.J. Abrego, & E.L. Shostrom, *Therapeutic Counseling and Psychotherapy* (New Jersey: Prentice-Hall, 1993); J.A. Kottler, & R.B. Brown, *Introduction to Psychotherapeutic Counseling*. (Pacific Grove: Brooks and Cole, 1997); C. Feltham, *What is Counseling?* (London: Sage Publications, 1995); Hansen, Stevic, & Warner, *Counseling Theory and Process*; and Less Parrot, *Counseling Psychotherapy* (NY: McGraw-Hill, 1997).
6. Glading, *Counseling: A Comprehensive Profession*.
7. Burke & Miranti, *Ethical and Spiritual Values*.
8. See for instance, W.R. Miller, & J.E. Martin, *Behavior Therapy and Religion: Integrating Behavioral Approaches to Change* (Newbury Park: Sage Publications, 1988).
9. A. E. Bergin, "Psychotherapy and Religious Factors: A review of R. J.

Lovinger's 'Working with Religious Issues in Therapy' and M. H. Spero's 'Psychotherapy of a religious patient.'" *Contemporary Psychology* 31 (1986): 85-87.

10. G. Edwards, "Does Psychology Need a Soul?" In W. Dryden & C. Feltham, eds., *Psychotherapy and its Discontents* (Buckingham: Open University Press, 1992), 194-224.

11. Edwards, "Does Psychology Need a Soul."

12. For some current discussion on the meaning of spirituality see, A. E. Bergin, "Psychotherapy and Religious Values," *Journal of Consulting and Clinical Psychology* 48 (1980): 95-105; C.K. Chandler, J.M. Holden, & C.A. Kolander, "Counseling for Spiritual Wellness: Theory and Practice," *Journal of Counseling and Development* 71 (1992): 168-175; and E.W. Kelly, *Spirituality and Religion in Counseling and Psychotherapy* (Alexandria VA: American Counseling Association, 1995).

13. C.E. Westgate, "Spiritual Wellness and Depression," *Journal of Counseling and Development* 75 (1996): 26-35.

14. Kelly, *Spirituality and Religion*.

15. A. Ellis, *Humanistic Psychotherapy* (NY: Julian Press, 1973); S. Jourad, *The Transparent Self* (Princeton NJ: D. Van Nostrand, 1964); I. Yalom, *Love's Executioner and other Tales of Psychotherapy* (NY: Basic Books, 1989).

16. P. Halmos, *The Faith of the Counselors* (NY: Schocken, 1965).

17. L.H. Robinson, *Psychiatry and Religion: Overlapping Concerns* (Washington, D.C.: American Psychiatric Press, 1986).

18. J.E. Martin, & C.R. Carlson, "Spiritual Dimension of Health Psychology," In W. R. Miller and J. E. Martin, eds., *Behavior Therapy and Religion* (Newbury Park: Sage Publications, 1988), 57-110.

19. M.E.P. Seligman, "Why is There so much Depression Today?" in R. E. Ingram, ed., *Contemporary Psychology Approaches to Depression* (NY: Plenum, 1990), 1-9.

20. A. E. Bergin, "Religiosity and Mental Health: A Critical Reevaluation and Meta-analysis," *Professional Psychology* 14 (1983): 170-184.

21. C.G. Ellison, "Religious Involvement and Subjective Well-being," *Journal of Health and Social Behavior*, 32 (1991): 80-99.

22. E.L. Worthington Jr. "Religious Faith Across Life-span: Implications for Counseling and Research," *The Counseling Psychologist* 17 (1989): 555-602.

23. For an elaboration of the various positions, see, S. Quackenbos, G. Privette, & B. Klentz, "Psychotherapy: Sacred or Secular?" *Journal of Counseling and Development* 63 (1985): 290-293; S. Quackenbos, G. Privette, & B. Klentz, "Psychotherapy and Religion: Rapprochement or Antithesis?"

*Journal of Counseling and Development* 65 (1986): 82-85.

24. Quoted by Feltham, *What is counseling?*

25. B. Grant, "The Moral Nature of Psychotherapy and Spiritual Values in Counseling," in Thomas Burke and J. G. Miranti, eds., *Ethical and Spiritual Values in Counseling* (Alexandria VA: ASERVIC, 1992), 28-35.

26. Bergin, "Psychotherapy and religious values."

27. J.M. Witmer, & T.J. Sweeny, "A Holistic Model for Wellness and Prevention over the Life-span," *Journal of Counseling and Development* 71 (1992): 140-147.

28. A.H. Maslow, *Towards a Psychology of Being* (NY: D. Van Nostrand, 1968).

29. Patterson, "Values in Counseling."

30. Grant, "The Moral Nature of Psychotherapy."

31. Bergin, "Three Contributors," 9.

32. H.F. Stein, "Therapist and Family Values," in M. T. Burke and J. G. Miranti, eds., *Ethical and Spiritual Values in Counseling* (Alexandria VA: ASERVIC, 1992), 81-92.

33. Bergin, "Three Contributors."

34. J.C. Christopher, "Counseling's Inescapable Moral Visions," *Journal of Counseling and Development* 75 (1996):17-25.

35. See, W.T. Gibson, & K.S. Pope, "The Ethics of Counseling: A National Survey of Certified Counselors," *Journal of Counseling and Development* 71 (1993):331-336; Grant, "The Moral Nature of Psychotherapy"; P.B. Pederson, "The Cultural Context of the American Counseling Association Code of Ethics," *Journal of Counseling and Development* 76 (1997):23-35.

36. Brammer, Abrego, & Shostrom, *Therapeutic Counseling*.

37. Edwards, "Does Psychology Need a Soul"; Feltham, *What is counseling?* and P. London, *The Modes and Morals of Psychotherapy* (NY: Hemisphere,1986).

38. Brammer, Abrego, & Shostrom, *Therapeutic Counseling*.

39. C. Pattison, *Theories of Counseling and Psychotherapy* (NY: Harper & Row, 1988), 20.

40. Christopher, "Counseling's Inescapable Moral Visions."

41. A. E. Bergin, "Psychotherapy: Sacred or Secular?" *Journal of Counseling and Development* 63 (1985): 432-440; J.W.C. Santrock, *Child Development* (NY: Brown and Benchmark,1996).

42. London, *The Modes and Morals of Psychotherapy*.

43. A. Gordon, "Religion and Psychotherapy: Share Ideals and Beliefs," *APA*

Monitor, August, 1996.

44. E.L. Worthington Jr. "Religious Counseling. A Review of Published Empirical Research," *Journal of Counseling and Development* 64 (1986): 421-431.
45. London, *The Modes and Morals of Psychotherapy*.
46. Viktor Frankel, *The Unconscious God* (London: Hodder and Stroughton, 1977).
47. Maslow, *Towards a Psychology of Being*.
48. A discussion on the meaning of development can be found in Chandler, Holden, & Kolander, "Counseling for Spiritual Wellness"; Christopher, "Counseling's Inescapable Moral Visions"; J.E. Myers, "Wellness, Prevention, Development: The Cornerstone of the Profession," *Journal of Counseling and Development* 71 (1992): 136-139; Westgate, "Spiritual Wellness and Depression"; Witmer, & Sweeny, "A Holistic Model for Wellness."
49. Myers, "Wellness, Prevention, Development," 137.
50. T. Remley, "On Being Different," *Guidance Post* (1991): 3. Also see A. E. Ivey, M.B. Ivey, & L. Simek-Morgan, *Counseling and Psychotherapy: A Multicultural Perspective* (Boston: Allyn and Bacon, 1997).
51. See Witmer, & Sweeny, "A Holistic Model for Wellness."
52. J. Fosket, "Theology and Counseling," in B. Throne and W. Dryden, eds., *Counseling: Interdisciplinary Perspectives* (Buckingham: Open University Press, 1993); Quackenbos, Privette, & Klentz, "Psychotherapy and Religion."
53. Bergin, "Three Contributors."
54. Witmer, & Sweeny, "A Holistic Model for Wellness."
55. Kottler & Brown, *Introduction to Psychotherapeutic Counseling*.
56. Grant, "The Moral Nature of Psychotherapy."
57. Brammer, Abrego, & Shostrom, *Therapeutic Counseling*.
58. D. Brown, & D.J. Srebalus, *Introduction to the Counseling Profession* (Boston: Allyn and Bacon, 1996).
59. L. E. Beutler, "Values, Beliefs, Religion and Pervasive Influence of Psychotherapy," *Psychotherapy: Theory, Research and Practice* 16 (1979): 432-440.
60. London, *The Modes and Morals of Psychotherapy*.
61. Bergin, "Psychotherapy: Sacred or Secular?" Kelly, *Spirituality and Religion in Counseling*; Quackenbos, Privette, & Klentz, "Psychotherapy and Religion."
62. H. Thomas, "Collaboration is Key for our Future," *APA Monitor*, August,

1995.

63. Bergin, "Psychotherapy and Religious Factors."
64. E.L. Worthington Jr. & G.G. Scott, "Goal Selection for Counseling with Potentially Religious Clients by Professional and Student Counselors in Explicitly Christian or Secular Settings," *Journal of Counseling and Theology* 11 (1983): 318-329.
65. S.R. Strong, "Christian Counseling: A Synthesis of Psychological and Christian Concepts," *Personnel and Guidance Journal* 58 (1980): 589-592; C.A. Rogers, *Counseling and Psychotherapy* (Boston: Houghton-Mifflin, 1942).
66. C.B. Truax, "Reinforcement and Non-reinforcement in Rogerian Psychotherapy," *Journal of Abnormal Psychology* 71 (1966):1-9.
67. Worthington & Scott, "Goal Selection for Counseling."
68. Grant, "The Moral Nature of Psychotherapy," 33.
69. D. Morrow, D.L. Worthington, & M.E. McGullough, "Observer's Perception of a Counselor's Treatment of a Religious Issue," *Journal of Counseling and Development* 71 (1993): 452-456.
70. London, *The Modes and Morals of Psychotherapy*.
71. Bergin, "Three Contributors."
72. Ibid.
73. R.J. Lovinger, *Working with Religious Issues in Therapy* (NY: Jason Aronson, 1984); W.R. Miller, & K.A. Jackson, *Practical Psychology for Pastors* (Englewood Cliffs: Prentice Hall, 1995).
74. Christopher, "Counseling's Inescapable Moral Visions."
75. *APA Monitor*, August 1996.
76. Miller, & Jackson, *Practical Psychology for Pastors*.
77. Worthington Jr. "Religious Faith Across Life-span."
78. Quackenbos, Privette, & Klentz, "Psychotherapy and Religion."
79. Christopher, "Counseling's Inescapable Moral Visions."
80. Edwards, "Does psychology need a soul," 197.
81. Bergin, "Three Contributors"; Kelly, *Spirituality and Religion in Counseling*.