
Spirituality and Psychotherapy

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Abstract

This paper enters into the field of spirituality and psychotherapy by first referring to the differences between Eastern and Western psychologies and then comparing the spiritual traditions to psychotherapy. Transference and transcendence are then discussed with reference to major analytic thinkers. The true spiritual journey which could commence as psychotherapy completes is described as development from selfhood to selflessness. Finally, the author attempts to describe what, and when, brief spiritual moments occur in psychotherapy and how the therapist might deal with these special and sacred times.

Introduction

As I began preparing this paper I was aware that its readers would be citizens of a country that is steeped in spirituality. The spirituality I refer to is inherent in New Zealand's adherence to the principles of the Treaty of Waitangi and in the current Maori cultural renaissance, and is more akin to Eastern traditions of spirituality than to those of Western societies.

This prevailing spirituality is one of the influences which direct this country's mental health policy-makers and providers to recognise the equal right of Maori and the Crown to shape your lifestyle, culture, religious beliefs and spiritual beliefs. John Turbott (1996), in a paper entitled "Religion, spirituality and psychiatry: conceptual, cultural and personal challenges", asserts there is widespread awareness in this country that much Maori ill health today can be attributed to alienation from the land and to the loss of spirituality, group support and identity (Durie: 1994; Rankin: 1986; Sachdev: 1989). In the Ministry of Health's document *Looking Forward: Strategic Directions for the Mental Health Services*, it is stated that "services in the future will need to be culturally safe and be able to provide treatment at a spiritual, physical, emotional and cultural level" (Ministry of Health: 1994).

All of these factors contribute to a cultural context in which psychotherapy might more easily extend its boundaries to include a spiritual dimension than in many other parts of the predominantly Western psychotherapeutic world, where the spiritual dimension of mental health has only just begun to be acknowledged. As recently as ten years ago, psychotherapists had to hide their interest in spiritual matters, in case their colleagues would consider them non-scientific in their thinking. Today, there is increasing discussion of the therapeutic value of spiritual approaches to psychotherapy and, in particular, of the healing powers of meditation.

I commend two books in particular to those interested in the spiritual dimension of psychotherapy. In 1997 Daniel Goleman, author of *Emotional Intelligence*, edited *Healing Emotions*, a record of extraordinary encounters between the Dalai Lama and psychologists, physicians and scientists on mindfulness, emotions, biology, culture, ethics, medicine and compassion. Just last year, Deepak Chopra published his twenty-fifth book, *How to Know God: The Soul's Journey into the Mystery of Mysteries* (2000), a scientific approach to spirituality which takes the reader on a journey through seven stages ascending towards life-changing experiences of the sacred. It is based on the simple premise that 'If we want to change the world, we have to begin by changing ourselves'.

Western and Eastern psychologies

Perhaps one way to enter the field of spirituality and its relationship to psychotherapy is to consider the differences between the psychologies of the West and the East. These differences are similar to the apparent differences between Western psychotherapeutic endeavours and Eastern contemplative disciplines.

Western psychologies are mainly concerned with the self and the development of self. Eastern cultures, on the other hand, pay more attention to the group, ranging from family-based values to the ideal of sacrifice of self for the whole country. In the field of interpersonal relating, the Westerner might be considered aggressive and confrontational when compared to the more submissive Easterner, whose initial wish would be to mediate. Perhaps there is a win/lose polarisation in the Western psyche, most apparent in the competitive world of sports and business. In the East "saving face" and a balance of "Yin" and "Yang" appears more important.

The Western world, best exemplified by America, is considered materialistic and acquisitive. In fact, a culture of narcissism is very alive in most Western countries. Perhaps more in the past than the present, the Eastern world has been deemed to be spiritual, compassionate and benevolent. Taking the relationship to nature as an example, the Western approach to landscaping would be first to bulldoze the area and then start afresh with selected plants, rocks and an automatically controlled sprinkler system. The Oriental landscape gardener would first plan everything to be in harmony with what is alive and present on site. Temples are often built around trees and waterfalls.

Cartesian law divided the body from the mind and physicalist science has insisted on studying only what can be concretely observed, preferably under the microscope. Eastern tradition, on the other hand, maintained the inseparability of mind-body. Maori, Indian, Chinese and Aboriginal concepts of illness and treatment still refer to the mind, spirit and body of the individual as a whole.

Psychotherapy and spiritual traditions

In a collection of essays entitled *Awakening the Heart* (Welwood: 1983), Robin Skynner has addressed "Psychotherapy and the Spiritual Tradition". Skynner begins his discussion of the similarities and differences between psychotherapy and the spiritual tradition by looking at similarities.

First of all, there is in both disciplines the idea that man's perception is clouded and distorted, that he does not see things as they are but as he wants them to be. In psychotherapy, we describe these distortions in terms of the various ego defences. In spiritual teachings, there is an emphasis on the world of false appearances, with our materialistic existence, our search for pleasure and avoidance of pain contributing to an illusionary view of the world.

Secondly, both traditions see self-knowledge as the key to good health and peace of mind. Through psychological self-knowledge, man may be freed from division into 'I' and 'not-I', from identifying with some parts of his being and rejecting others, which then become projected in negative fashion onto those around him. When he attends to his developmental deficits and resolves his early conflicts, he is cured of his neurotic disorders. In the spiritual traditions, man's destructive emotions are identified in terms of the seven deadly sins, and he is encouraged to resist them and cultivate instead wholesome and healthy emotions of love, kindness, compassion and forgiveness.

Thirdly, both require that the searcher shall be in regular and personal contact with a teacher/guide/guru/therapist or leader who has already been through the same experiences; has seen, understood and accepted many aspects of himself; has repaired and resolved some of his own fragmentation, delusions and distorted perceptions; and so can, through being able to perceive the searcher more objectively, help him in turn to become more objective about himself.

Fourthly, personal therapy and spiritual attainment are expected to be painful but necessary medicine that can ultimately heal and lead to regrowth. In psychotherapy, the painful truth has sooner or later to be acknowledged within the containment of the therapeutic frame. The unconscious is made conscious and the self is expanded as denial and projection are reduced and the dissociated past returns to awareness. In the spiritual life, in the "open confession of sins", in the acceptance of whatever internal manifestations arise during the stillness of meditation or prayer, similar processes occur. In both traditions, a clearer perception of the world, a greater capacity to understand and relate to others, can be seen to follow from greater self acceptance and objectivity.

Finally, both traditions see man as possessing hidden resources, which cannot become fully available without self knowledge and integration, though the scale of this hidden potential is differently perceived by two traditions.

With so much apparent overlap, I think we may be forgiven if we experience some confusion initially between these different kinds of exploration. However, these two paths also lie in quite different dimensions, and often lead in opposite directions. Let us look now at some of these differences.

Perhaps the most striking difference between the two is that in the sacred traditions man is perceived as having a choice of two life purposes. He may serve the ordinary world of appearances or a more real world behind it. He may pursue his natural appetites and desires or an inner voice of conscience. The spiritual traditions tell us that although we must still live on earth, a connection can be made with a higher order. For the person who is awakened to this other realm, a stronger energy, a more subtle intelligence, become available and begin to change the whole purpose and meaning of ordinary life. In "ordinary" psychology, by contrast, there is no concept of this second purpose to which a man can give himself and, because of this, there is no real possibility that the world of appearances could be illusionary. Thus ordinary psychology becomes (from the perspective of the spiritual tradition) another

elaboration of the illusion itself, providing more blindfolds, another ring through the nose, more “hope” to keep us turning the treadmill.

Secondly, the possibility of recognising and beginning to understand the significance of the sacred traditions usually begins from a disillusionment with ordinary life, with one’s ordinary self, with ordinary knowledge. We have to see that life is not going anywhere in the way we have been taught to manage it, that it never has and never will. Thus, we begin from the point of failing and relinquish our valuation of our ordinary selves, to replace it gradually with something which at first does not seem to be ourselves at all. We have to die to be reborn. “Ordinary” psychology, on the other hand, leads to an expansion of our “ordinary” self: more efficient, more fruitful, more enjoyable and less conflicted perhaps, but the same ambitions, fulfilled instead of unfulfilled, the same desires, satisfied instead of frustrated. Hence, “ordinary” psychology simply seeks to *improve* the self, according to the ideas of the ordinary self; it scarcely seeks to *destroy* it. There is no journey to selflessness.

The third important difference is in the view of consciousness. Following what one may call an “archaeological” concept of consciousness, Western psychology tends to assume that we already possess the light of consciousness, but that there are some parts of ourselves that have been buried and need to be found and brought to light again; until this happens, they remain potentially accessible. By contrast, spiritual traditions maintain that consciousness is much more limited, fluctuating and illusionary than one usually realises, and that an extraordinary amount of persistent effort is needed to maintain consciousness steadily, let alone increase it. For the spiritual traditions, consciousness is like light powered by a dynamo, driven by the wheel of a bicycle, where one has to pedal constantly if it is to remain alight and pedal even harder to make it brighter.

The fourth major difference concerns the relationship between teacher and pupil. The psychotherapist will certainly recognise a difference in authority between himself and his patient, based on age, experience, knowledge and skill. This would be expected to change in the course of treatment. As the patient matures, it is hoped that the transference is dissipated, and while some regard and gratitude may remain, persistent dependency and deference to the therapist’s authority are taken to indicate incomplete treatment. In the sacred traditions, however, it is accepted that the teacher is in some part of his being an actual manifestation of a higher level, and so a sharply hierarchical pupil/teacher relationship is seen as appropriate. And since the human chain

continues presumably all the way up the mountain, it would be appropriate that the authority of the guide, or of the next man above on the rope, might continue indefinitely.

Now that the differences seem clear enough, it is hard to see how we could have confused these two different kinds of development. Indeed, if we are to accept these differences as valid, it seems to me that they lead us to a view that psychotherapy and the sacred traditions are at right angles to each other, with fundamental aims that cannot in their nature coincide at all. Psychotherapy is about ordinary life, the development of man along the *horizontal* line of time, to death. The sacred traditions begin from the horizontal line of time, but are concerned with a different, *vertical* line of development: man's increasing awareness of, connection with, and service to the chain of reciprocal transformation and exchange among levels of excellence, which the cosmic design appears to need some of mankind to fulfil.

At this point we can all feel satisfied. Followers of sacred traditions can reassure themselves that, after all, they did not really need to have the analysis which seemed so much to improve the life of their neighbour. The psychotherapist can also feel relieved and firmly satisfied that the people who follow a traditional spiritual path are not living in the real world and are best left to their delusions. But—alas—to simply point out the similarities and differences between psychotherapy and the spiritual traditions is to oversimplify both pathways to development.

What complicates the issue is the relationship that exists at the meeting point of these two dimensions: that crossing, within each man, of the *line of time* and the *line of eternity*. Most of us know that there are many who, in following a sacred tradition, change profoundly with regards to ordinary life adjustment, so that many of the problems that might otherwise take them to a psychotherapist simply melt away—like ice in the sun. Their difficulties disappear without any systematic attempt to change—under the impact of some subtler, finer influence that begins to permeate and alter the whole organism. We also know of patients in psychotherapy who reach a point of simple openness, of awareness of themselves as part of mankind and of the universe, sometimes more intensely than many following a traditional teaching. We have to make a place for these mysteries in our psychotherapeutic theories and practice. I shall refer to such spiritual moments in psychotherapy later in this paper.

Transference and transcendence

We all know that the cornerstone of the analytic process is the work we do in the transference. As psychotherapists we can skilfully construct interpretations, usually transference interpretations, which provide moments of transformation in the patient and lead to amelioration of symptoms, healing and sometimes even cure. There is a sense of immediacy when these transformations occur.

We cannot, however, understand all worldly phenomena in the light of transference alone, as Freud attempted to do in his analysis of religion. In *Totem and Taboo* (1913) he reduced religion to an “obsessional neurosis” and in *The Future of an Illusion* (1927) dismissed it as a means of mitigating the terror of uncaring Nature and of removing the fear of death by providing an illusional immortality. In Freud’s view, religion represents our infantile needs for protection, compensation and the assuaging of guilt. Freud was, however, always ambivalent about religion. To the extent that it performed a civilising function and kept instinctual chaos at bay, he could approve of it. But Freud thought that psychoanalysis could provide “education to reality” which would render religion implausible and unnecessary.

Most of us today think that Freud was wrong. Meissner, in his book *Psychoanalysis and Religious Experience* (1984), using analytic theory concludes that Freud’s interweaving of complex religious themes rides on a powerful undercurrent that stems from his own unresolved infantile conflicts:

Deep in the recesses of his mind, Freud seems to have resolved that his truculent spirit would never yield to the demands of religion for submission and resignation. He had to overcome the religion of his father and annihilate the very image of the father himself. Freud was never able to free himself from these deep seated entanglements and their associated conflicts, and ultimately what he taught us about religion, religious experience and faith must be taken in the context of these unconscious conflicts. Hence, so convinced was Freud about the falsity of religion that he failed to notice that just as there can be a psychoanalysis of belief, so there can be a psychoanalysis of unbelief, just as there are neurotic reasons for believing in God, so there are neurotic reasons for refusing belief (1984: 55).

As opposed to psychotherapy, the cornerstone of spirituality is transcendence. Religious transformations occur as moments of spiritual growth during transcendence. But there must be some overlap between the healing process and spiritual growth. James Jones (1991) thinks it lies in the area of the sacred.

He suggests that in psychotherapy there is a concentration on the bond between the patient and the therapist, and that that unique interpersonal relationship is sacred, at least to the two individuals. Religion, on the other hand, concentrates on the bond with God, and it is this spiritual connection that is also sacred. In spiritual moments, to experience God is to move from the dread of the precariousness of our life to the realisation of the power of being itself. To experience God is to be in touch with the source that sustains existence in the face of nothingness, and provides the basis for the courage to live in the face of life's inevitable uncertainties.

Since Freud there have been many leading analytic thinkers who have delved into the area of spirituality. Carl Jung (1938) saw religion as a universal form of wisdom. He concluded that religion was the traditional shepherd of the process of "individuation". For him, analysis was not just cure of neurosis but recovery of the sacred buried within each self. For Jung, each of us has within ourselves the collective wisdom of the human race. If I am not mistaken, he was only one small step away from saying that each of us has to find God within ourselves.

Winnicott (1971) implies that the sacred is encountered through a transitional state of awareness transcending subjectivity and objectivity. Winnicott placed the seat of spirituality and creativity in transitional space. He spoke of letting go of our separate selves, losing ourselves and opening ourselves to an inner spirit. He also described this as a state of unintegration. A modern day Winnicottian, Christopher Bolas (1987) suggests that sacredness is in the transformative power, the capacity to evoke the foundation of selfhood.

Bion (1970) considers psychoanalysis as a sacred transformative process. He makes it clear that the human mind and body are derivatives or precipitates of the *infinite*, the *ultimate* attributeless, timeless and unknowable—he calls this "O". Atreya (2000) points out that, depending on the religious tradition, this same phenomenon is called Godhead, Al Huf, Brahman, Shunyata and Tao. For Bion, all healing, all growth, ultimately has its source in "O". This is the same as the unshakeable faith in all sacred traditions, arrived at not through the intellect, but by direct personal experience. For those of us interested in these interesting and challenging areas of the psychodynamics of religion, transformations and a psychoanalysis of the sacred, I would recommend James Jones' book entitled *Contemporary Psychoanalysis and Religion* (1991).

From selfhood to selflessness

Let us now move further into the area beyond psychotherapy, that is, the developmental path to selflessness. Western psychology's contribution to our understanding of this path lies in the development of a sense of self. As Engler puts it, "first we have to be somebody before we can be nobody" (1981).

The contribution of Eastern psychology is the emphasis on growth *beyond* living full and rich lives. Drawing on his exceedingly comprehensive review of the literature on spirituality and psychology, Wilber, Engler and Brown (1986) have offered a thorough and complex model that depicts development as a nine-stage ladder, with sub-phases, where each rung marks a different structure of consciousness, culminating in the condition of enlightenment, i.e., the condition of no mind and no self. This complex model can be broken down into three phases:

- The *pre-self* phase, as in early childhood when the self and structure has not attained full cohesion and continuity, differentiations between self and object have not been fully formed, and the observing self is still absent;
- The *self and object* phase, where a cohesive self and structure have developed, including the differentiation between self and object representations and the capacity for observing self-awareness; and
- The *trans-self (no-self)* phase, as in conditions of advanced spiritual development where the self and the distinctions between self and objects have been transcended.

Other similar models have been proposed by Meissner (1978) and Fowler (1981).

John Suler (1993) points out that the advantage of this developmental model is that it unites ideas from the East and the West, enriching each perspective where it has been deficient. Western psychology, particularly Object Relations Theory and Self Psychology, has constructed a very elaborate developmental theory that accounts for how the individual evolves from the pre-self phases of infancy to the structuralised conditions of a cohesive self and object relations that mark adult normalcy. Engler (1981) pointed out that this developmental concept is lacking in the Eastern systems which always assumed that people had a structuralised self and so never fully explored the conditions of narcissistic deficiency that Western psychology describes as psychosis and borderline disorders. Western psychology, on the other hand, always assumed that

development ended with a structuralised self, and ignored the idea that self is but another phase that one must pass through. To be rigidly attached to the self without progressing to higher stages, in which the self is recognised as transitory, is to be fixated on the developmental path, to be blocked in the manifestation of no-self, which brings the fullest actualisation of consciousness and wellbeing. Combining the developmental insights of both East and West, we arrive at a full-spectrum model of self development.

Western psychotherapy as it stands today is focused on the development and strengthening of the ego or the self. The spiritual journey goes beyond therapy as it allows the individual to discover that suffering is due primarily to non-awareness of a transcendent being. Psychotherapy without attention to spiritual aspects can only hold suffering at bay. However, a spiritually aware and, dare I say it, a spiritually *based* psychotherapy, can offer much more. Spiritually informed psychotherapy can help establish and unfold creativity itself. Analytic theories, in particular those influenced by Winnicott, have touched on the phenomena of creativity. But to date, there has been no Western psychological theory on the methodology or the creative steps to creativity!

For this reason, among others, we should not be surprised that amongst the psychotherapies today, the humanistic, experiential and existential forms are in the ascendancy. Indeed, psychotherapy is now moving towards more overt forms of spirituality, including the Eastern religions.

Most of the time, I suspect, creativity comes from a transcendent source. To find creativity, one must first surrender to a higher and a more encompassing fountain of inspiration. Is this fountain of inspiration a moment of divinity? God *is* within us. The divine is within ourselves. Spirituality taps into our inner resources rather than continuing to rely on another, as interpersonal theories in psychotherapy emphasise. This brings us to the next and, for me, the most challenging and important aspect of the connection between spirituality and psychotherapy. That is, the questions *What, and when, are the spiritual moments in psychotherapy?* and *How do we deal with them?*

Spiritual moments in psychotherapy

First, we have to define what are the spiritual moments. I would suggest that they are experiences concerned with the spirit, or our souls. They are obviously not worldly-minded. They are definitely separate from our concerns for our

physical body and material world. There is a sense of existing in another level of being, perhaps a higher order of existence.

When might these moments occur in therapy? I would suggest that at the earliest, these spiritual moments occur in the middle phase of therapy, usually past the mid point of the middle phase. The noise is over, the “empty talk” that Lacan (1978) refers to has ceased. There are more moments of silence. And then, the patient and therapist are together in a joint self-reflective exercise which I would also describe as meditative moments. In my paper “Meditative Moments as Medicine in Therapy” (1992), I describe these moments when there is an openness of mind in the therapeutic dyad and there is certainly a loss of egocentricity in both parties. This then leads on to experiences of the patient describing the development of a deeper sense of self as part of something larger. Both the patient and the therapist become very aware that they are part of mankind. Sometimes there are moments of direct communion between the two members of the therapeutic dyad. Each begins to feel totally vulnerable, naked in front of the other and somehow separate and yet fused together. It can be quite a frightening experience, as if the patient and the therapist could read each other’s minds. Spiritualists have often referred to this universal phenomenon as “at-one-ment”.

One of the most significant and important spiritual moments in therapy occurs after a long period of many sessions of despair. It is as if the layers of the onion have been peeled again and again. The therapist has nothing more to say that could be useful. Both parties wait. The therapist has to have faith: not only faith in the process but faith in himself. Michael Eigen (1993) has written on “The Area of Faith in Winnicott, Lacan and Bion” in an engaging, rich and challenging way. In summary, Winnicott’s area of faith is expressed in his descriptions of transitional experiencing (1953) and taken forward in his later work on object usage (1969). In Lacan (1978) the area of faith is associated, at least in its developed form, mainly with the symbolic order and his notion of the “gap”.

For me, Bion’s work on “O”, his sign denoting ultimate reality, comes closest to the spiritual core of faith. Nina Coltart (1992) in *Slouching towards Bethlehem* refers to the striking similarities between her thoughts on faith and those of Bion. She says

However much we gain confidence, refine our technique, decide more creatively when and how and what to interpret, each hour with each patient

is also in its way an act of faith; faith in ourselves, in the process, and faith in the secret, unknown unthinkable things in our patients which, in the space which is the analysis, are slouching towards the time when their hour comes round at least (Coltart: 1992: 3).

She continues:

Those of us who were fortunate enough to be taught by the late Dr Bion value the stress which he laid on the need to develop the ability to tolerate not knowing; the capacity to sit it out with a patient, often for long periods, without my real precision as to where we are, relying on our regular tools and our faith in the process to carry us through the obfuscating darkness of resistance, complex defences, and the sheer unconsciousness of the unconscious (1992: 3).

Most of us associate the phrase “without memory nor desire” to what we know of Bion. But what then occurs or takes the place phenomenologically when the analyst refrains from memory and desire? Bion (1970) says in “Attention and Interpretation”:

It may be wondered what state of mind is welcome if desires and memories are not. A term that would express approximately what I need to express is ‘faith’—faith that there is an ultimate reality and truth - the unknown, unknowable, ‘formless infinite’. This must be believed of every object of which the personality can be aware (1970: 31).

Hence, for Coltart and Bion, the essence of the creation of faith is a positive willed act that comes from each individual. It is widely known that Bion was not only a genius but also a mystic. Coltart, in the same book, *Slouching towards Bethlehem* reveals in her second to last chapter on “The Practice of Psychoanalysis and Buddhism” that she has evolved from Christianity gradually towards and finally into Buddhism over about 20 years (since 1972). Her practice of Buddhism in the Theravada tradition, as with all the main schools of Buddhism, centres on daily formal meditation. For Coltart, Buddhism and psychoanalysis “flow in and out of each other, and are mutually reinforcing and clarifying” (1992: 3). She gives a summary of how Buddhist teachings can be seen to contain the essentials of psychoanalysis, as she understands it. She also goes on in the same chapter to point out that the discipline of meditative practice enhances the discipline of one’s contribution to an analytic session which somehow is, in fact, itself almost indistinguishable from a form of meditation. In my paper on “Meditative Moments as Medicine” (1992), I

postulated that growth occurs in moments of silence in the session. I compared meditative practices to the psychotherapeutic endeavour and I suggested that healing and cure occurs during meditative moments in the session. Often when the therapist has not only faith in the process but faith in himself, at some point, the patient finds hope in himself. This might even herald the beginnings of the true self (to use a Winnicottian term) for some patients. The patient finds an inner strength to move on and often to find life worth living for the first time in living memory.

Later, much later, towards the ending phase of therapy, spiritual moments come in the form of awareness of positive feelings, of higher order emotions such as loving-kindness, compassion and forgiveness. The therapist must make time and space for these therapeutic spiritual moments to be to be acknowledged, experienced, enjoyed and even celebrated. George Hagman (1997) explored mature self object experiences, which among others, included self transformation and altruism. Indeed, towards the end of a long and successful therapy, many patients begin to develop a deeper sense of morality, a sense of selflessness and the beginnings of a de-attachment from money, power, status and even significant others! Spirituality is often introduced as a raising of philosophical and religious issues, issues surrounding the question of the meaning of life. Some patients return to faith with a more mature relationship to it. Some patients start their spiritual journey as therapy terminates. Lacan (1978) says that psychoanalysis brings the patient to "thou art that". But the real journey begins in meditative practices post-therapy.

How do we manage these spiritual moments? I do not think there is a theory yet for this. Most psychotherapists are too afraid even to acknowledge these moments. Some traditional therapists who have not kept up with contemporary developments, and whose minds are closed, do considerable harm by analysing spirituality away. They act on what Freud thought more than 100 years ago.

If I might humbly suggest, perhaps we should first recognise and acknowledge these moments to ourselves. Then we might join our patients in their experience, often without having to say much. Perhaps we could attune ourselves to these spiritual moments, simply validate and affirm them to our patients without judging or pathologising them. If the patient insists on embarking on a discourse on these matters we have to remind ourselves to return to our psychotherapeutic contract. We might respectfully suggest that these areas fall beyond the domain of therapy and, if appropriate, refer the

patient to spiritual/philosophical/religious leaders and literature. I believe the psychotherapist does have a role to help patients to continue their journey beyond the limits of therapy.

Conclusion

In conclusion, it is my belief that successfully completed psychotherapy is a stepping stone to the spiritual journey. The world of Western psychotherapy is just beginning to venture into the spiritual traditions to try to understand some of the apparent similarities and the obvious differences between the two. I would predict that a psychotherapy which would also take into account spiritual moments, responding appropriately as psychotherapist and not as religious leader, would offer our patients something they may choose to pursue within an appropriate spiritual practice and tradition.

Writing this paper has challenged me and my perceptions and current approaches to the spiritual aspects of psychotherapy. I am still struggling with many of these issues. I continue to read many new books and journal articles on this area. I continue to practise my Buddhist meditations in my spiritual journey. Most of all, I continue to learn from a small group of my patients, some of whom are ahead of me in their spiritual journey.

I would like to conclude with the analogy of our search for self being likened to a dog's relationship to its tail. One dog does not even know its tail is there, and never bothers to look. Another dog gets a glimpse of it, snaps at it a few times, realises the impossibility of latching on. Another dog chases it round and round in a circle, perhaps playfully, perhaps filled with a desperation, ultimately collapsing in exhaustion. Yet another dog, fully sensing that its tail is there, just wags it. This paper has given me a valuable opportunity to have a look at my tail again!

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