









# Leading as a Soul Friend: The Anamchara Model of Spiritual Direction, Person-Centered Approaches in Psychotherapy and Follower-Focused Leadership

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A client's increased need for the integration of spiritual and psychological well-being within the therapeutic context (Sperry, 2003) leads for the consideration of holistic models of integration. One model of integration that may address client spiritual and psychological goals may be the integration of the *anamchara* model of spiritual direction with a person-centered psychotherapeutic approach. The similarities between these models allows for an avenue of integrating spiritual direction into psychotherapy in an ethically responsible manner. Specifically, the similarities in focus, stance and relationship may provide a consistent framework in which to incorporate spiritual direction goals and psychotherapeutic goals.

# Integrating Spiritual Direction and Psychotherapy: The *Anamchara* model and the Person-Centered approach

The United States is considered to be highly religious as 92% of the population is connected with a religious affiliation and 96% profess to have a belief in God or a higher being (Worthington & Sandage, 2001). For this reason, it is not surprising that within therapy, clients are increasingly expecting and requesting spiritual guidance or religious inclusion (Sperry, 2003; Worthington & Sandage). These requests for spiritual guidance within the therapeutic context are the same as those that are often presented for spiritual direction within the religious context. This need by clients has increased the interest of the field of psychology in religious or spiritually oriented therapy (Worthington & Sandage) in an attempt to address the goals of people seeking holistic wellness and completeness, which includes addressing spiritual concerns (Sperry).

Spiritual concerns are increasingly being brought to therapy by clients due to a feeling of unrest they may experience within their church (Sperry, 2003). Clients may also be bringing spiritual concerns to therapy as a result of having spirituality that is not church-based. Although the number of therapists who practice spiritually oriented psychotherapy are low, they are still more prevalent than spiritual directors (Sperry). Therapists also have more training to handle psycho-spiritual matters. For these reasons people are more likely to seek spiritual guidance in a therapeutic setting than a spiritual director-relationship (Sperry).

The use of integration within the therapeutic context allows for the increased understanding of the human nature by accounting for the influence of spiritual values and matters (Hall, 1997). Integration also helps to ground client values and aids in the creation of therapeutic goals while increasing the number of interventions available for use with clients (Hall). Thus, there are identified benefits to integrating spiritual concerns within therapy and a recognized need for more spiritually oriented therapy to address the needs and goals presented by clients within therapy.

Spiritually oriented psychotherapy is therapy that is sensitive to spiritual concerns and may address goals of spiritual emergencies and spiritual growth (Sperry, 2003). At the same time, spiritually oriented psychotherapy addresses common psychological goals with the included consideration of spiritual concepts such as God image, involvement in faith community and individuation or overall well-being. Spiritually oriented psychotherapy involves a mutually collaborative therapeutic relationship and the incorporation of psychological interventions as well as spiritual interventions, such as spiritual practices congruent with a client's faith, prayer, meditation and collaboration with clergy (Sperry).

As spiritual direction would be the religious context in which these spiritual concerns would be addressed, it may be beneficial to consider the integration of spiritual direction practices within psychotherapy rather than a general spiritually oriented approach. Although it may be that many of the roles fulfilled by a spiritual director are already fulfilled within spiritually oriented psychotherapy, the main difference between spiritual direction and psychotherapy is that of the difference between the therapeutic relationship and the spiritual directing relationship. Specifically, the spiritual directing relationship more closely resembles a supportive friendship, whereas the therapeutic relationship, although collaborative, is still considered a more one-sided relationship. This paper aims to propose that the use of a person-centered therapeutic approach may allow for more congruence between the therapeutic and spiritual directing relationship and thus would provide a therapeutic avenue for integrating spiritual direction with psychotherapy.

# **Definition and Overview of Spiritual Direction**

In considering the integration of spiritual direction and psychotherapy it is important to understand the general definition of spiritual direction as well as the main functions it serves. Spiritual direction or guidance may be defined in different ways and may have differing models within the different Christian faiths (Sperry,

2003). Some definitions of spiritual direction include applying theology to a life of prayer or seeking after the Holy Spirit's leading through meditation on Scripture. The basic goal within spiritual direction is developing a relationship with God. This goal is addressed through focusing on the prayer life of the directee as prayer is considered important to maintaining a personal relationship with God (Sperry). Spiritual direction also focuses on maintenance and development of spiritual health.

Spiritual direction involves a triadic relationship, this relationship involves God, the director and the directee (Sperry, 2003). Interventions may include prayer instruction, intercession and spiritual practices. Usually direct training is not required to be a spiritual director although some think of it as a calling. It is recommended that spiritual directors have attended to their own walk and relationship with God before directing others (Sperry).

According to Sperry (2003) there are eight functions of spiritual direction. The first of these functions is spiritual assessment, which is the gathering of information about the person's spiritual experiences, beliefs, and orientation. Spiritual assessment may be formal and include information about their spiritual upbringing, God image, spiritual community, and prayer. Another function of spiritual direction is differentiating spiritual experience from psychopathology. As some mystic experiences have similarities with psychosis, a general understanding of the experiences is necessary to ensure that a referral for psychological care is not needed as opposed to spiritual direction (Sperry).

Spiritual direction also serves to address transformation, which may be considered the central process of having a change of heart or changing more into the image of God (Sperry, 2003). Another function of spiritual direction is fostering the relationship between God and the directee. It is important to note that the director does not create the relationship with God for the directee, but fosters it and encourages the directee to attend to this relationship within the context of their daily life (Sperry).

Spiritual direction also includes advisement about prayer and spiritual practices as well as discernment, which is the mutual process of seeking the leading of the Holy Spirit. Similar to psychotherapy, spiritual direction addresses resistance as well as transference and counter-transference. Specifically, it addresses the directee's resistance to spiritual experience, resistance to spiritual direction as well as the director's resistance to the directee. The transference and counter-transference addressed within spiritual direction are similar to that of psychotherapy, namely, that they may arise from unresolved emotional or spiritual concerns that are brought into the directing relationship (Sperry).

Incorporating spiritual direction practices into therapy includes more than just using spiritual interventions in the therapeutic model or framework (Sperry, 2003). The integration of spiritual direction may require a difference in relationship, focus and stance. Specifically, a spiritual director is a companion and open to sharing experiences with the directee. This differs from the therapeutic relationship where the therapist does not self-

disclose often and the relationship is not considered a mutually giving friend relationship (Sperry). Also, the focus would need to include a more explicit concentration on prayer and the relationship with God. The stance refers to the therapist's nature in therapy as being supportive but also analytical or specifically, using purposeful interventions to proceed towards the accomplishment of therapeutic goals in a timely fashion. A spiritual director's stance is one of waiting and relying on the Spirit to guide movement towards the goal without a time constraint. The stance of the spiritual director is different from that of the therapeutic stance and a shift would need to be considered when integrating spiritual direction into the psychotherapeutic context (Sperry).

According to the negotiated perspective of integrating spiritual direction with therapy, the therapist provides the spiritual guidance as well as psychotherapy in a planned and negotiated manner (Sperry, 2003). For example, the therapist and client may agree that one session a month is devoted to spiritual issues. This model of integration is congruent with a spiritual director model, where the director and directee usually meet on a monthly basis. This allows for the psychotherapeutic goals to be addressed in a timely fashion as well as for the more relaxed progression of the spiritual goals, providing the needed shift in stance.

# The Anamchara Model of Spiritual Direction

Spiritual direction can be found in many different forms throughout the history of the church and the practice of spiritual direction may look different throughout the many faith traditions. The central concept to spiritual direction, regardless of how it was manifested, was developing and fostering a relationship with God (Michael, 2004). The form of spiritual direction that may be especially congruent with psychotherapy is the Celtic model of soul friendship or anamchara. Within this model of one-to-one spiritual direction those in the soul friendship help with discerning spiritual paths and helping each other grow in fullness with God.

The soul friend model of spiritual direction stresses an acceptance of the directee as they are, and assists in discerning God (Troxell, 1992). An anamchara is a person of great importance in Celtic history and religion and served many purposes in a person's life such as a soul friend, mentor, confessor and spiritual guide (Wenker, 2006). Saint Brigit of Kildaire declared that "anyone without a soul friend is like a body without a head" (quoted in Wenker, 2006, p. 246).

An anamchara approaches problems as opportunities to become closer to God and helps their soul friend fully experience moments and learn to appreciate God's loving presence by offering support and accountability (Troxell, 1992). An anamchara is sought to provide trust, respect and love (O'Dell, 2002). This soul friendship model is grounded in a spirituality of ongoing conversion and reconciliation. It involves being a sanctuary for others and is rooted in the heart and applied with wisdom. Anamchara is concerned with acquisition of holiness as well as Christian wisdom (O'Dell).

Soul friends nurture growth of the inner and whole self and encourage each other to develop into all that they can, in order to reach their full potential (Benner, 2002). A soul friend, sometimes referred to as a sacred companion, helps one become more aware of the sacred and offers support in following Jesus on the journey of spiritual growth through which they are trying to transform to be more like Him. Spiritual friends do not lead the way to Jesus, but point the way. They also do not assume that their experience is best for the directee, but help to determine the presence and will of God (Benner).

Within the anamchara model of spiritual direction the use of soul hospitality is important (Benner, 2002). This includes making space in your own life for someone and providing them with a safe and quiet place, a sanctuary, for them to discern God's will. This relationship also includes confidentiality without judgment or criticism. By accepting the directee as they are the anamchara is allowing the person to fully be themselves (Benner). Being present in the moment with the soul friend and attending to what they are sharing is also very important within this model of spiritual direction. This includes attentiveness and requires being genuine which displays integrity of character (Benner).

The anamchara model also includes the use of a dialogue of shared inquiry, which increases the understanding of both people, while maintaining the focus on the goal of increasing the directee's relationship with God (Benner, 2002). This model offers love and acceptance while simultaneously allowing the directee space within the relationship to be wholly themselves. The directing relationship is one of mutuality and includes some reciprocity, although the anamchara is the one helping the directee increase their awareness of God in their daily life, so it is not a true two-way relationship.

# **Person-Centered Psychological Approach**

The person-centered approach was generated by Carl Rogers out of his humanistic perspective of therapy. The person-centered approach does not in itself provide for spiritual or religious intervention as Carl Rogers felt the church as an institution stifled people from reaching their full potential and felt the client was capable of reaching fullness within themselves. Even still, the goals and techniques of the approach are similar to that of spiritual direction and may allow for the integration of spiritual direction within psychotherapy.

Some key values within the person-centered theory include that the person should be studied as a whole, rather than in parts and that the person's self-report is more important than what we objectively observe, specifically, their experience should be central to therapy (Jones & Butman, 1991). Within the person-centered approach the therapist is considered a co-participant in the client's self-actualization process and must enter into their experiential field through the use of intuition and empathic understanding (Jones & Butman).

Within the person-centered approach the client is believed to have the potential and desire for healthy growth (Jones & Butman, 1991). Strong emphasis is placed on the inner life a person experiences and their

feelings. Rogers did not believe that this inner life could include the spiritual as he was focused on the client's own abilities to interpret life and self-actualize. In order to attend to the client's goal of achieving their full potential, and specifically within an integrated view achieving their full potential in their relationship with God, according to the person-centered approach we must accept the client's experience as long as they maintain a level of responsibility for their life and choices. If their experiences and goals include a spiritual or religious focus then that is applicable to the therapeutic context. As we are considering the spiritually oriented approach of integrating spiritual direction with psychotherapy and emphasizing the client's personal goals of fostering a relationship with God we may extend the concept of the inner life to include the inner spiritual life or inner walk with God.

The person-centered approach considers a healthy, fully-functioning person to be one whose self-concept is aligned with their experiences without anxiety (Hall, Lindzey & Campbell, 1998). Therefore a fully functioning individual would be open to experiences as well as accurately aware of their circumstances and engaged in harmonious relationships. The process of becoming a fully-functioning individual is thought to be a continual process. Within this approach the therapeutic relationship fosters this fully functioning self-actualization by providing unconditional positive regard. The therapist adopts a nondirective, supportive stance throughout therapy and the therapeutic relationship stresses the attitude of the therapist as opposed to the training. As the relationship is an accepting, genuine and supportive one, the general hierarchical nature of therapeutic relationships is not utilized in this approach (Hall, Lindzey & Campbell).

# Comparing Anamchara and Person-Centered Therapy

Although the person-centered approach places more emphasis on the importance of the therapeutic relationship for change than spiritual direction does, it allows for the same elements within the relationship. Specifically, within the person-centered approach the therapist enters a relationship with the client and thinks of the client as possessing unconditional self-worth. The therapist is real with the client and experiences their own emotions and completely enters the relationship, relating to the client's experiences (Hall, Lindzey & Campbell, 1998). The relationship between the client and therapist allows the client the freedom to fully experience emotions since they are accepted unconditionally. Through this process the client is able to change and move into healthy growth.

This relationship is similar to that of the *anamchara* model of spiritual direction in which the *anamchara* is fully present and genuine in their relationship with their directee. These two models are also similar in that they are both nondirective. Specifically, the person-centered approach is nondirective in that the therapist does not try to force the client to move toward imposed goals or offer a time constraint or intrusive interventions. Within this model the therapist is present with the client and supports the client in reaching their own goal of self-fulfillment through their own process. This is similar to the *anamchara* model of spiritual direction in which

the director does not impose their own model of spirituality on the directee. Although the director may offer advice, the directee is the one propelling the process of fulfillment forward with the support of the director. According to the person-centered approach only one person in the relationship needs to have personal congruence to inspire change and growth in the other. For this reason the therapist is the facilitator of self-actualization (Hall, Lindzey & Campbell, 1998). Therefore, it is important for the therapist to have reached congruence within themselves, just as a spiritual director must have attended to their relationship with God before directing another. Within person-centered therapy self-actualization is the agent which allows therapy to improve clients, whereas within spiritual direction it is the relationship with God and the process of becoming more like Jesus that changes the person.

Both the *anamchara* model of spiritual direction and person-centered approach to therapy stress the importance of having an attentive, supportive and genuine relationship. Within both of these models the director and the therapist are expected to truly relate to the person with complete acceptance and confidentiality which creates a sanctuary-like safe place for the client or directee to reach the goal of full potential. Although within the person-centered approach the goal of self-actualization is considered to be fullness within themselves and in spiritual direction the full potential is considered to be within their relationship with God, the central focus of both of these models remains on the person's attending to their experiences and reaching their full potential.

This process of reaching ones full potential is considered to be a continual process within both the *anamchara* model and the person-centered approach. Specifically, within the *anamchara* model the process is considered to be an ongoing conversion into the likeness of Jesus. Within the person-centered approach the goal of self-actualization, or reaching a congruency within oneself, is considered to be ongoing as well.

# **Practical Implications**

It would seem that the *anamchara* model of spiritual direction and the person-centered approach to psychotherapy are congruent enough to allow for integration of spiritual direction into psychotherapy. Namely, their focus of reaching one's full potential are similar, as are their stance of offering nondirective support and their attentive and genuine relationship. These similarities allow for the eight functions of general spiritual direction to be applied through an *anamchara* model with the use of person-centered therapy. Specifically, through the use of the empathic, supportive and genuine relationship the functions of spiritual assessment, differentiating spiritual experience from psychopathology, and addressing transformation can be addressed. Similarly, the functions of fostering a relationship with God, offering advisement or encouragement on spiritual practices as interventions, addressing resistance, transference and counter-transference all become compatible within the therapeutic context. Even so, there are ethical considerations to be addressed within any form of integration that aims to maintain the integrity of both fields.

One such ethical concern is that of having a dual relationship (Tan, 2003). As the therapist would be fulfilling the role of a spiritual director as well as a therapist, there is cause to consider the ethical implications of this integration on creating an unethical dual relationship. According to the negotiated model of integration the therapist will negotiate the two aspects of the therapeutic focus, namely, the spiritual and psychological aspects (Sperry, 2003). This approach, with the addition of defining both relationships, should guard against creating an unethical dual relationship. As both roles would remain in the context of the therapeutic setting, an unethical dual relationship is less likely to occur. The addition of supervision and consultation on both aspects of therapy should also decrease the implication for an unethical situation (Tan).

Another ethical consideration is that of displacing or usurping the client's religious authority figure (Tan, 2003). In an effort to integrate spiritual direction into therapy and address the client's spiritual concerns and growth in their personal relationship with God there arises a danger of overstepping the bounds and displacing religious authority. It is suggested that before using spiritual intervention the therapist make efforts to collaborate with religious authorities, with the informed consent of the client. This collaboration is likely to decrease the implication of usurping the religious authority (Tan).

In the process of integrating spiritual direction with psychotherapy the ethical concern of imposing one's religious values on the client arises (Tan, 2003). Although the models of integration suggested in this paper are nondirective and may decrease the threat of imposing one's values on the client, it is recommended that the therapist maintain a respect for the client's values and simultaneously maintain an awareness of their own values. Also, it is recommended that all spiritual goals are mutually considered and are implemented only with the client's informed consent (Tan).

Another ethical consideration involved with integration is that of respecting church-state boundaries (Tan, 2003). Although clients may present with spiritual concerns and goals for therapy it is best practice to refrain from employing spiritual therapy in civic settings. It is recommended that a therapist wishing to integrate spiritual direction with psychotherapy seek written consent from their supervisor as well as from the client before implementing spiritual goals or interventions (Tan).

Lastly, the ethical consideration of practicing outside the boundaries of competence should be addressed when considering integrating spiritual direction into psychotherapy (Tan, 2003). Although spiritual direction is not an area where directors usually receive specific certification or training, it is important to remain ethically competent when providing any form of psychotherapy, including spiritually oriented therapy. For this reason, it is recommended that a therapist wishing to integrate spiritual direction into psychotherapy attend at least one workshop or course on religion and mental health and maintain a multicultural understanding. It is also recommended that the therapist seek continued supervision or consultation (Tan).

# Conclusion

There is an increased need for holistic care within the field of psychology. The need for a holistic view of well-being includes that of spiritual well-being as is evidenced by the increased numbers of clients seeking spiritual goals within the therapeutic setting (Sperry, 2003). As clients are presenting with more spiritual concerns to therapy, there needs to be an integration of spiritual interventions within psychotherapy. One possible way to decrease fragmentation between spiritual well-being and psychological well-being may be to integrate some spiritual direction within psychotherapy. According to the negotiated perspective this integration may occur in a more planned and negotiated manner (Sperry). The use of person-centered therapy and the *anamchara* model of spiritual direction may provide for an ease of negotiating spiritual goals into psychotherapy as they have many similarities.

Among the similarities between *anamchara* and person-centered therapy is that of the relationship. Specifically, the use of the person-centered approach with the *anamchara* model of spiritual direction addresses one of the main differences that was evident between spiritual direction and psychotherapy, that of the relationship. As both models hold to a nondirective, accepting and genuine relationship it is possible to include the goals of spiritual direction within the therapeutic context. Namely, it is possible to address client's needs to foster their relationship with God within therapy, in an ethically responsible manner, by applying the person-centered model of acceptance and genuine relationship which mimics the *anamchara* relationship of spiritual direction allowing for these concerns to be addressed in similar fashions.

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