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**SPIRITUAL PRACTICES IN PSYCHOLOGICAL COUNSELING: THE  
RETURN TO THE SELF**

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**Abstract:** Integrating religion and spirituality in psychological counseling is a challenge for many practitioners in mental health. Nowadays, the interest in this topic has increased due to its great impact on addressing existential crises. Since many scholars proposed spirituality as a reservoir for promoting well-being and growth after being confronted with major life stressors, integrating it into therapeutical practices would be of great value for welcoming human suffering. Thus, this study aims to explore the practical implication of religion and spirituality in the context of psychotherapy and the various forms of counseling. Specifically, it argues the value of building effective intervention on scriptures and spiritual behaviors, especially when it comes to addressing difficult psychological topics such as the meaning of life, traumas, or death anxiety. By bringing up attention to our most profound need for spirituality, we aim to welcome this yearning by outlining some of the guidelines that would help both clients and practitioners. Reviewing the most recent empirical findings, we propose some general recommendations designed to help practitioners work with spiritual/religious clients, together with some specific tools based on cognitive restructuring using sacred texts, enhancing healthy spiritual habits, and exploring and living values and virtues.

**Key words:** spirituality, psychotherapy, counseling, religion, meaning-making, death anxiety, trauma.

## **1. Introduction**

Addressing and integrating religion and spirituality in one's practice of psychological counseling has become an important aspect due to its great impact on impacting existential problems. In the past two decades, much attention has been given to how to address the problem of the client's religious orientation and spirituality, and how to integrate the subject if needed. The interest in the subject can be attributed to research showing positive relationships between mental health and religion (Captari 2018), and to the increased interest in multicultural counseling which implies facing religion and spirituality (Hage 2006).

Still, the question remains: how and when to address the religious/spiritual elements? Thus, this article aims to explore the practical implication of religion and spirituality in the context of psychotherapy and the various forms of counseling. We start with the invitation for therapists to consider their stance on the problem of religion and spirituality, as most therapists are more likely to identify themselves as non-religious persons, which can affect the way practitioners view and interpret some of their client's behavior (Post and Wade 2009). In this case, studies show that therapists and counselors tend to describe themselves as "spiritual, but not religious" (Delaney et al. 2007), while many of the clients will report engaging in spiritual or religious practices and commitments. It is also problematic that most practitioners do not receive specific training regarding the more spiritual and existential aspects of the human experience, or are not encouraged to explore their own religious and spiritual beliefs and biases (Hage et al. 2006). To avoid making poor judgments based on biases regarding religious beliefs unfamiliar to psychologists, the practice demands orienting their education towards the more existential realm of religion and spirituality.

This aspect, it seems, is important for the clients, as many of them seem to be open to addressing spiritual problems, even wanting to, assuming that these clients might have concerns about religion and spirituality causing distress (Post & Wade 2009). Of course, it takes courage and flexibility to step on such "sacred grounds", as most clinicians report a lack of confidence in addressing religious/spiritual matters and existential questions (Ulland and DeMarinis, 2014), which may be due to insufficient training (Endresen Reme et al. 2009). A recent qualitative study (Mandelkow, Austad & Freund 2021) investigated the importance of exploring and integrating such existential aspects in the framework of one's practice, in the scope of creating "sacred moments" (Pergament et al. 2014) in therapy, which include not only a sense of transcending one's suffering but also moments of meaning-making and interconnectedness, on the basis of religious and spiritual values.

## 2. Context

Even though the term psychotherapy has its roots in pastoral care and counseling, the syncretism of spirituality and therapeutic practices was susceptible to a continuous swing between two poles, acceptance, and rejection (Jafari 2016). After being confronted with a period of dismissal (Pandya and Kathuria 2021), the debate on integrating spirituality into the therapeutic stage moved towards a more optimistic viewpoint that encouraged the necessity to blend the two seemingly separated dimensions (Harris et al 2018, Johnson 2020). This perspective is consonant with Pargament's (2007, 32) assumption that a prerequisite of stimulating change in a client's behavior and emotional repertoire is the therapist's need of acknowledging the propensity of human nature toward spirituality. Bergin and Payne (1991, 95) also introduced the question "why would clinicians be reluctant to address one of the most fundamental concerns of humankind- morality, and spirituality?". As we already saw in the previous section of this paper, paradoxically, there is a lack of instruction in terms of how therapists should tackle the spiritual conversation with a client. Going back to Pargament's (2007) perspective, he introduces the term "integration" suggesting how spirituality can be "interwoven into virtually any psychotherapeutic traditions whether it be psychodynamic, cognitive-behavioral, family systems, interpersonal, experimental, humanistic and existential". Alongside our quest of making this syncretism possible, we first need to refine our understanding of what exactly spirituality means and how we can differentiate it from other related terms (Frunză, Frunză and Grad 2019). The necessity of terminological clarification was stipulated by a lot of scholars (Damiano, Peres and Sena 2019; Piedmont 2021), thus Oxhandler and Pargament (2017) took a step further and differentiated between "religion" which refers to "the search for significance within an institutionalized sacred context" and "spirituality" meaning "the individual search for the sacred". We will also refer to the "sacred" as "the experience of essential elements of human life, such as meaning, belonging, or responsibility" (Mandelkow et al. 2021).

Assuming this perspective we will further expand it in relation to major existential domains, namely, meaning of life, experiencing traumatic events, and existential anxiety, implicitly providing an overview of the major therapeutical orientations and specific tools that are sensitive to the spiritual underpinnings of human nature.

### **3. Counseling, spirituality and existential crisis**

#### **3.1. Meaning of life**

Perhaps one of the most overt existential topic addressed by several therapeutic and counseling orientations is the problem of meaning. As straightforward as it may seem, the concept of meaning has been used in several forms across the different kinds of therapies, starting with the humanistic and existential approaches. Today, cognitive-behavioral therapies are starting to integrate the problem of meaning (Pimpinella 2011). As a universally problematic conceptualisation with multiple facets (Frunză 2019), we do not propose to solve the definition of meaning, but we will merely choose to refer to this element of the human existence in the form of one's sense of purpose in life.

In the humanistic-existential psychotherapies, the idea of one's meaning of life took many forms, thus, Yalom (1980) distinguishes between cosmic meaning and personal purpose in life, which we will briefly discuss in this section. Before we do that, we take a look at how the meaning of life was central to Viktor Frankl's Logotherapy. His theory claimed that man is guided by some external meaning, by a "will to meaning". That is, human nature strives for some sort of coherence beyond himself due to its fundamental characteristic of being self-transcendent. Frankl (1966, 2004) is careful to define meaning more as an external strive, that which pulls humans towards something more than the self-driven experience (thus being self-transcendent). In such a context, striving for meaning of one's life is essential to a healthy and balanced life. But how does one claim meaning for his one life? This is where for some, religion and spirituality, and the values promoted in such systems of meaning, play their part in transcending the human being (Mandelkow 2021). In western culture Judeo-Christian religion has implemented the idea that the human being is part of a divine plan, thus giving a cosmic meaning to human life (Yalom 1980). The cosmic meaning refers to the existence of some external and spiritual ordered design, which Christianity identifies in the faith in God and in the postulate that a life lived, according to the values prescribed by this faith, will be rewarded.

One's meaning of life can be, of course, separate from spirituality and from religion, but in the context of a client that has a faith, a spiritual practice, or commitment, practitioners should know how to interact with that system of beliefs, values and ultimately, of meaning, that could guide the healing process.

### **3.2. Spirituality in relation to trauma**

Drawing upon Park's (2010) view of people representing their world in terms of meaning-making systems, we can understand the experience of trauma as a direct violation of a person's spiritual views that, consequently, makes them question their existence, spiritual aims, and the sense of purpose in life (Park et al. 2017). When experiencing trauma, personal global meaning can be shaken which in turn can shatter the view of God as a protective and loving parent or the fact that we live around benevolent human beings (Park et al. 2017). In the midst of the conflict between pre-existing existential beliefs and in the face of a reality that is cruel, all that remains for us is to learn how to reduce these discrepancies, and one way of doing that is by engaging in spiritual coping mechanisms (Harper & Pargement 2015).

Going back to the two fundamental concerns that Bergin and Payne (1991) proposed, when we talk about spirituality, we can't ignore the moral pivots of human existence. In regard to traumatic events, when corroborating human lived experiences drawn from qualitative studies we can easily uncover profound reflections on the conflict between experienced life events and moral tenets that define one's identity. Drawing upon the tragic experiences that veterans go through, the scientific community suggested new lenses that can offer us a way of looking at their experience as a moral injurious one. Specifically, moral injury, even if it is a relatively early emergent construct, it derives from Greek tragedies, being associated with the word "miasma" which refers to a "pollution of the soul", or "a moral wound" (Currier 2020, Nash et al. 2013) that one can experience when confronted with potentially morally injurious events (PMIEs) (Shay 1991). Litz et al. (2009) describe the experience of moral injury as "perpetrating, failing to prevent, bearing witness to, or learning about an act of transgression that creates dissonance and conflict because it violates assumptions and beliefs about right and wrong and personal goodness".

Thus, bringing more attention to this experience, we can perceive moral injury as a syndrome that consists in reporting feelings of shame, guilt, and anger in relation to traumatic events that consequently lead to social isolation, lack of meaning, and, most importantly, a challenge of religious and spiritual beliefs. A set of doubtful questions regarding the justice of the world we live in and the sense of uncertainty regarding the benevolence of God are one of the aspects that brought this issue within the purview of religious and spiritual counseling rather than classical approaches. Seen as a private experience, a personal internal struggle toward reconciliation, moral injury can present itself also as searching for the soul. The consequences go beyond mere cognitive evaluation, and tumultuous emotions and transcend the experience towards a more profound phenomenological dimension. In the realm of these forces,

questions like “Does God exist?” or “Does God care about humans?” arise and challenge the most deeply held personal beliefs (Coady et al. 2021). Consequently, the joint between spirituality and psychotherapy becomes a useful tool for the practitioner to help clients work through these issues.

An example of how the most promising interventions on this matter are ones that meet the confluence between spiritual orientations and psychotherapy is a new approach called Spiritually Integrated Cognitive Processing Therapy (SICPT; Resick et al 2016) which showed promising results when addressed with clients that report experiencing a moral injury. This protocol focuses on building spiritual strength that draws on Fowler’s (1981) stage of faith development to enhance post-traumatic growth. The main strategies are cognitive-behavioral interventions, using an activity log of prayer practices, compassion, and forgiveness exercises (Resick et al. 2016). In terms of therapeutical outcomes, patients reported a decrease in symptomatology even after 2-month follow-up assessments (Pearce 2018, 197), but the number of studies is limited which stress the importance of empirical refining these new theoretical pivots that are valuable for clinical practice (Coady et al 2021).

One of the most prominent grounds for opening the dialogue between clergy or pastoral care providers and mental health practitioners in terms of traumatic experiences was advanced by Rambo and Keller (2010) in their work “Spirit and Trauma: A Theology of Remaining”. Rambo demolishes the assumption that Christianity is too narrow, too reductionist in the aftermath of its focus exclusively on the redemption value of existence to be used for trauma survivors. His position seems to condense the deep roots of what is Christianity, seeing it as what survives after trauma, what remains in terms of re-joining with personal values and virtues in the name of what makes life worth living, what makes existence precious.

### **3.3. Conquering death anxiety**

Embarking on the journey of understanding the complexity and dynamism of anxiety, as humans, we take advantage of the symbolic framework that spirituality offered us as a compass that guides us through uncertainty. When facing death, even in the most distal, overt, and impersonal way, we are experiencing a glimpse of how fragile human beings are. The omnipresence of death can be easily seen even in the sacred texts in which Jesus’s cry on the Cross “My God, my God, why have you forsaken me?” (Matt. 27:46) shows us how universal the fear of dissolution is.

There is something about being heard at the moment when our own being is at stake when our being is threatened with the non-being (under the form of death or the refusal of our potentiality and needs for the sake of others more powerful than us). In this sense, anxiety in the face of

death, or in the face of non-being, seems more of an ontological condition than merely a state, as Rollo May (1983, 211) (one of the leading American existential psychotherapists) observes regarding his clients. He sees anxiety as always being related to death and to the others with whom we must be involved to manifest our potentiality, our meaning of life. It is also notable that may emphasize the importance of anxiety, as a search for our values: "In the experience of normal anxiety, for example, if the person would not have anxiety, he or she would also not have freedom. Anxiety demonstrates that values, no matter how beclouded, do exist in the person. Without values, there would be only barren despair" (May 1983, 211). What is central to overcoming the feeling of anxiety in May's view is the transcendence of the eros into Agape, a way of transcendent, selfless love.

In the last half-century research was preoccupied with the problem of death and the anxiety related to facing the imminent passing into nonbeing (Kastenbaum and Costa 1977, Engelke 2019). Several other studies looked at how spiritual practices alter or protect against anxiety while facing death (Feng et al. 2021, Mohammadzadeh and Najafi 2020). Considering these aspects of our most salient prospect, anxiety is a way towards our freedom to embrace our values through nurturing Agape, a transcendent selfless love. Religion and spirituality can serve as a beacon toward what is valuable to human life and promises a purpose beyond our own self, it becomes obvious why the sacred grounds of our existence can no longer be neglected in the context of psychotherapy and counseling. Thus, the promise of the eternal reward of Heaven and salvation becomes a way of overcoming the anxiety of dissolution by offering meaning of life structured around values and virtues, giving the possibility to act toward a life worth living "And do not fear those who kill the body but cannot kill the soul. Rather fear him who can destroy both soul and body in hell." (Matt. 10 28:31).

#### **4. Building a bridge between counseling and spirituality - practices**

Before we discuss some specific techniques that could serve as mechanisms of change and as tools for healing, we note a few guidelines for how and when to address the more existential and spiritual aspects of one's schemas of meaning-making. In that direction, we use the advice and the knowledge offered by the two studies. Firstly, we turn to Post and Wade (2009), who are trying to explore the way religion and spirituality find themselves in therapy and counseling today. The authors investigate the clinical relevance of practitioners' and clients' attitudes, but also the impact of introducing more existential aspects and religious practices in therapy.

Considering this study, there are some recommendations made: therapists and counselors should not shy away from asking and exploring religious beliefs, and that could be done by including spiritual and religious assessments. Therapists could find religious and spiritual resources mentioned by their clients, and those could be explored to evaluate if the religion the client commits to is truly supported or not. Moreover, this kind of approach offers the client an understanding that the practitioner is respectful and open to their values and beliefs. Another aspect is that the practitioner might not be religious. In that case, if the use of religious interventions might be useful to the client's goals, the clinician could show openness to the client's religion and enquire into the specifics of the religious system. It is also recommended that if possible, the practitioners could make use of more generic techniques, adapted to the religious and spiritual needs of the client, or could make use of the client's spiritual metaphors.

It is also important to make the reminder that different clients may respond differently to religious or spiritual interventions. In that regard, if a client considers that religious interventions do not find their place in therapy sessions despite them being religious, or if clients are not religious, then religious interventions might not be appropriate.

The second study which we would like to reference, and which we found fruitful regarding the way more existential, religious, and spiritual interventions could guide our attitude toward more appropriate use of these aspects of one's life is a qualitative study by Mandelkow, Austad, and Freund (2021). The study was conducted by interviewing 12 Norwegian psychotherapists regarding their stance on using more spiritual techniques. The problem the study addresses is the anxiety with which practitioners are met when having to face existential or religious aspects of their client's lives. What the study found is that all of the practitioners used some sort of spiritual intervention at some point and that they have similar reflections on how it is best to interact with the more existential problems that arise. First, there must be the courage to step on those grounds and create "sacred moments" with clients, by simply practicing acceptance of the more religious and spiritual aspects of life.

Secondly, it is essential to pay attention to several competencies described in more detail in that study, those being: existential/religious sensitivity, self-reflection, and self-disclosure management. Other recommendations were that a practitioner should not wait for the patients to address these topics, but could start the conversation in a respectful manner and that sometimes could be achieved by questions evoking meaning or values. Finally, the study alerts us about the spiritual bypass, "the tendency of some patients to avoid personal challenges and conflicts by using spiritual terminology and hiding behind spiritual world views" (Mandelkow 2021) which should be appropriately addressed in therapy (Picciotto, Fox, and Neto 2018).

Assuming Romanyshin's (2020, 23-43) claim that all research models, even those that set the ground for different therapeutical schools, have a spiritual component to them, a specific transcendental quality that also offers a "hint of the sacred", we stress the importance of incorporating spiritual practices in our work with clients. In the wake of the existential crises, even if we talk about trauma, death anxiety, or lack of personal meaning, spiritual services are often seen as a way of facing these difficulties (Dill 2017). Spiritual practices manifest as a pathway of change, dedication to the roots of personal commitments, showing devotion and discipline, but most important, offering a promise to a new beginning, by reacquiring the sense of purpose and comprehensibility (Park 2017).

In building effective interventions, it is valuable to remember the power of community in enhancing individual spiritual and psychological journeys. Individuals do not come into the counseling space as solitary beings, more likely are bringing with them their history of actors in a larger social context in which they actively contribute to and co-construct the identity of other human beings (Pargament 2007; Iftode 2021, 192). Although spirituality implies a personal journey that encompasses unique perspectives and beliefs, we can't separate the individual from the community itself (Hylton 2022). Blink (2012) asserts that individuals are part of a community which entails being committed to a shared journey and acting in the virtue of a shared creed by engaging in spiritual practices that offer a "spiritual direction".

#### **4.1. Sacred texts as powerful intervention tools**

Religious texts can serve as models of virtues such as compassion, resilience, and kindness that can, in turn, act as protective factors amid suffering (Bergin 1980). This implies a shared experience between client and therapist, setting a common ground for integrating spirituality not as a static set of practices and principles, but as a process of evolving and being in virtue of what makes our lives worth living (Pargament 2007). Moreover, clients need to understand that the sacred don't disband the full range of human experiences including both times of greater awe and ones of suffering. In this way, integrating spiritual practices in the counseling process offers a way of accessing the phenomenological architecture of human nature by countering the "western propensity to medicalize human suffering" (Goździak 2004). Clients should, thus, understand that even going through experiences of pain and suffering, our "darkest nights of the soul", as St. John of the Cross put it, can be seen as one of greatest value with a deeply rooted spiritual and transcendental significance.

Immersing ourselves in a world where empirical data assets the usefulness and importance of a therapeutical practice, we can easily

recognize the rise of cognitive-behavioral therapies in clinical practice. Stressing the importance of a comprehensive and applied method of integrating spiritual insights into the therapeutic setting, recent studies pointed out a new set of therapeutic techniques reunited under the name of Religious Cognitive-Emotional Therapy (RCET; Rajaei 2010). This new form of therapy encapsulates a set of practices in which religious beliefs become the foundation for promoting insight in psychotherapy (Rajaei 2010). During therapy sessions, the therapist challenges the client's set of beliefs and values by clarifying and explaining them in relation to the spiritual framework. An effective tool is the cognitive restructuring technique that takes advantage of the person's spiritual background and knowledge by offering anchors for perceiving distorted and unrealistic thoughts (Beck 1976) more flexibly, resulting in decreasing anxiety or depression symptoms (Cole 2005).

Passages from Scripture, besides their immediate utility when used in cognitive restructuring, can also be implemented in psychoeducation. Specifically, they can help practitioners set the ground for normalizing thoughts, emotions, and behaviors, implicitly, building the therapeutic alliance. For example, the *Psalms* can bring attention to welcoming emotions with an open heart and also enhance reflexivity. Some Biblical passages also portray Jesus in his journey with emotional awareness, such as His cry over Jerusalem (Luke 19:41-42), how he welcomes his anger in the Temple (Matt. 21:12-13), and the heartbreaking prayer in the Gethsemane (Matt. 26:36-46) and can be used in therapy sessions (Garzon 2005). Suffering comes with greater awareness of the feelings that we embody, thus, seeing them not only as a part of mundane life but with a flavor of spiritual transcendence can help clients be more accepting of their emotional dynamic.

## 4.2. Connecting spiritual dynamics to daily life

Some therapeutical interventions aggregated in spiritually oriented psychotherapy go beyond the mere cognitive aspect and immerse clients into the world of sensations (Garzon 2005). One example has its roots in St. Ignatius of Loyola's practices from the 16th century (Endean 1990). He was the promoter of what he called "Living Scriptures" seen as an approach to integrating spiritual dynamics into daily life. Bringing this closer to the therapy context, it can be used as a meditative practice during which both client and therapist decide upon a Biblical passage, varying from a piece of the Gospels, a parable, or even a passage from "The Lives of Saints". The client is then asked to immerse himself into that specific passage by bringing his attention to every sensation that he has experienced, trying to connect and blend with his body and mind (Cook 2004). After the

exercise, they can work together on what this experience brought up and how it can be used as a map for navigating through daily experiences.

Secondly, the practices of praying is a proved practice effective for relieving human suffering (Hayes and Smith 2005). As those practices could be appealing in their secular form for most clients, the roots of praying can represent a problem in the case of other clients that hold different faiths, being off-putting due to its roots in eastern religion (Garzon 2022). In this sense, an approach more integrates of Christian belief system. This approach is called Christian Accommodative Mindfulness, and it wishes to emphasize the need to accommodate the eastern technique to more western practice. This approach defines mindfulness as a way of making time to turn one's attention toward God, feeling his presence while practicing. This approach incorporates meditation on the scripture and several prayers on love and kindness and it encourages clients to end secular mindfulness practices with small prayers to God or to just be with God for a few moments (Garzon 2022).

In another study, prayer was incorporated as a form of morning and evening ritual that would "provide peace", but also as a way of coping and a way to regulate difficult emotions. It is mentioned that sometimes, prayer can be frustrating for clients, and thus being stressful, especially when in times of crisis, they feel that their prayer is not answered by God (Szałachowski and Wioletta Tuszyńska 2021). The analysis of qualitative studies focused on capturing spiritual insights in the most tremendous human experiences offers us a refined perspective on how the lived experience can define the benefits of this sacred practice. Participants reported that "Prayer reminds us that we are part of a community." "Prayer ... redeems people from isolation.", "The practice of praying is a reassurance that people are not alone." (Kushner 1981) emphasizing how sacred rituals are not seen as singular experiences, but more likely as glorifying interconnectedness.

The therapist should not limit the prayer to its most proximal utility as a practice exclusively implemented in sacred rituals with a specific and limited scope. There are examples of implementing prayer in psychotherapy that show how it can be proved useful concerning most common difficulties that clients face, namely being lonely or isolated, since one of the most vocal human yearnings is the one of connectedness. Pargament (2007) offers an example he used in therapy, suggesting a prayer that addresses the specific fear that the client reported- "*I live alone, dear Lord,/ But I am sure/ Your gaze is ever on me/ As on an only child./ Abide in me, dear Lord,/ That I may live in you. Amen!*" (Hite 2005, 1).

### **4.3. Values and virtues as a way of living**

Acknowledging the sensibility of every form of counseling to the axiological dimension of human nature, we can anticipate the importance of values and value work under the framework of spiritually integrated counseling (Pargament 2011). It can be easily misunderstood by the scientific community that spiritually oriented counseling practices assume an enhanced interest in values. In fact, is no more value-laden than other forms of treatments. The only thing that seems different is the elevated visibility and accessibility of values and virtues via spiritual practices. Apropos of life transitions and struggles, as we saw in the case of trauma and even the confrontation with death and dying, what remains constant is the human's propensity to orient himself towards what matters and what seems to be important to them.

One of the founders of Acceptance and Commitment Therapy (ACT), Kelly Wilson, views his clinical practice as a work that corroborates six pillars, one of them being the value pillar (Wilson 2009). Drawing upon his spiritual experience and the quest for redeeming himself for his confrontation with addiction, he posits that a therapy session is a safe place in which contact with personal values can be enriched. One way of doing that is through paying attention to human suffering, acknowledging the hardest experiences, and making them a spot for growing into what gives us the fuel for living a life that fulfills us.

Even if this therapeutic orientation doesn't expand on spirituality in general, it sets the ground for the importance of values for any kind of human experience. Particularizing this to Christianity, we can compress the constellation of values and virtues to what theologians considered the three most meaningful pillars of existence, faith, hope, and love, and see how they can be brought up as tools for the therapeutic encounter (McMinn 2016). Faith represents the seed of God's grace and mercy, allowing Christians to navigate through experiences with a deeply held belief in God's presence and kindness, which encapsulates the next virtue, hope (Bergin 1980).

We can't see the therapeutical scene as one that's involving just one actor. Thus, the therapist himself offers us new lenses through which we can see working with values in action. The counselor or the therapist creates a space for modeling through his behavior and attitudes a set of principles and values that can be of great value for the client's progress. From a foundation of faith and hope, the therapist will show confidence in the benefits of the work he and his client are doing, seeing the possibility of growth and change in his fellow companion. This reiterates Wilson's creed about the client being an astonishing sunset, an unfinished poem, rather than a problem to be solved (Wilson 2009). In this way, living the virtue of faith and hope can be of great utility for therapeutical alliance

and its progress, even by offering an anchoring point in the present moment, allowing a breath of trust and space amid suffering.

In relation to love, the therapist or counselor can put this virtue into practice by showing warmth, understanding, and compassion, while also remaining authentic to himself and embodying “the Christian consciousness of the unique character and eternal worth of every human being” (Edmonds 1991).

## 5. Conclusion

Integrating spiritual practices should not be seen as the start of a new rival to other therapeutical treatments but as a way of enhancing human potential. The present article has discussed a theoretical, practical, and applied basis for bringing together spirituality and counseling perspectives. Building on many recent findings, we proposed relevant practices for enhancing the effectiveness of psychological interventions on major life challenges such as death anxiety, traumas, or meaning-making, emphasizing the importance of integrating and connecting religious and spiritual perspectives and practices in daily life.

Thus, one of the most powerful arguments for seeing spirituality as a central part of improving psychological well-being is that it can be a source of comfort and guidance, which was argued in our paper through the lens of different psychological perspectives. The scriptures and spiritual rituals can enrich counseling tools by providing powerful representations, and responses and can address profound personal needs. As Mark (1994) concluded, religion/spirituality used in psychological counseling enhances life and brings value—for time and eternity, for our relationship with God and our relationship with others, for our spiritual and emotional, and mental well-being.

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