

SPIRITUAL DIRECTION AND TRAUMA RECOVERY

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SOUL CARE in the form of spiritual direction has been a sustainable source of shepherding and support for individuals for centuries. In their contemporary classic *The Practice of Spiritual Direction*—one of the most referenced sources in the literature of spiritual direction—William A. Barry and William J. Connolly assert that direction is primarily focused on an individual's relationship with God, the most significant relationship for his or her spirituality: the space of spiritual direction asks, 'Who is God for me and who am I for him?'²

John H. Coe and Todd W. Hall state that spiritual direction 'is guidance designed to assist the believer into the process of spiritual transformation by responding to God through attending to the Holy Spirit in the context of prayer'.³ The authors also propose that, like clinical psychotherapy, spiritual direction involves a 'meaning-making process':

In the broadest sense, the telos of both psychotherapy and spiritual direction is the promotion of maturity as a meaning-making process, which includes separateness and connectedness, interdependency, intimacy, and the ability to freely give and receive in love. This applies equally to both psychological and spiritual maturity, the only difference being that psychological maturity does not require spiritual maturity (i.e. relationship with God) in any explicit sense, whereas spiritual maturity does necessitate psychological maturity because our love for others and development of character and our

¹ The authors are grateful for the collaboration of Larry Warner and Robert K. Welsh in writing this article.

² William A. Barry and William J. Connolly, *The Practice of Spiritual Direction* (New York: HarperCollins, 1982), 5.

³ John H. Coe and Todd W. Hall, *Psychology in the Spirit: Contours of a Transformational Psychology* (Downers Grove: InterVarsity, 2010), 386.

human capacities is part of our love for God. So, the respective goals of psychotherapy and spiritual direction, in the broadest sense, are very similar in that they both seek to increase the capacity for intimacy and love and the overall development of the person.⁴

Thomas M. Holden maintains that spiritual direction, by contrast with therapy, highlights God's concrete involvement in everyday life: 'The underlying assumption that God acts and is involved in the concreteness of our everyday living is made more explicit in spiritual direction than in psychotherapy'.⁵ With these thoughts in mind, we would like to consider here the ways in which the development of an individual's relationship with God may have an impact on his or her processing of traumatic experiences, and we reflect on how this may contribute to post-traumatic growth in the context of the relationship between spiritual direction and psychotherapy.

Trauma and Resilience

According to the US Substance Abuse and Mental Health Services Administration, trauma 'occurs as a result of violence, abuse, neglect, loss, disaster, war and other emotionally harmful experiences'.⁶ The *Diagnostic and Statistical Manual of Mental Disorders* lists diagnostic criteria for post-traumatic stress disorder including direct exposure to a trauma, intrusive symptoms associated with the traumatic event, avoidance of stimuli associated with the trauma, negative cognitions and mood, and 'marked alterations in arousal and reactivity'.⁷

Taken together, these sources reflect what is likely to be most readily considered when defining trauma. However, some people experience symptoms of post-traumatic stress disorder who have not gone through these types of events. Accordingly we shall be adopting an enlarged perspective on trauma which includes emotional and spiritual trauma. Robert Stolorow articulates this more complex view, asserting that

⁴ Coe and Hall, *Psychology in the Spirit*, 387.

⁵ Thomas M. Holden, 'A Therapist's View of Spiritual Direction: A Case Study', *Chicago Theological Seminary Register*, 73/3 (Fall 1983), 1–13, here 12.

⁶ Larke N. Huang and others, *SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach* (Rockville: SAMHSA, 2014), 2, available at https://ncsacw.acf.hhs.gov/userfiles/files/SAMHSA_Trauma.pdf, accessed 25 August 2023.

⁷ American Psychiatric Association, *Diagnostic and Statistical Manual of Mental Disorders*, rev. 5th edn (Washington, DC: American Psychiatric Association), 301–303.

emotional trauma is ‘an experience of unendurable emotional pain’.⁸ Emotionally painful events become unbearable when a person does not find what Stolorow calls a *relational home*, where the pain is known, understood and held.

Severe emotional pain that has to be experienced alone becomes lastingly traumatic and usually results in some form of emotional numbing. In contrast, painful feelings that are held in a context of human understanding can gradually become more bearable.⁹

Most individuals who experience trauma do not develop symptoms of post-traumatic stress or other trauma-related disorders; instead, they demonstrate resilience.¹⁰ People affected by trauma are able to recover, and spirituality and religious belief may be an important factor in this, along with personal attitude, education and community, and various intrapersonal and interpersonal mechanisms such as a sense of inner control and self-esteem.¹¹

Trauma and Spirituality

Trauma has been discovered to affect spirituality in multiple ways, including, but not limited to: compromising a person’s sense of safety and security; raising existential doubts and questions; raising questions of identity; producing immense guilt or shame; undermining concepts of good and evil; and subverting the person’s world-view.¹² The impact of one or more of these may result in a crisis of faith. At the same time, spirituality may also influence and inform how an individual makes sense of trauma and how he or she recovers and grows in the aftermath of processing traumatic experiences. Yvonne Farley named seven traits of individual resilience that are enhanced by spiritual or religious practices:

⁸ Robert D. Stolorow, ‘A Phenomenological-Contextual, Existential, and Ethical Perspective on Emotional Trauma’, *Psychoanalytic Review*, 102/1 (2015), 124.

⁹ Stolorow, ‘Phenomenological-Contextual, Existential, and Ethical Perspective’, 125.

¹⁰ See George A. Bonanno, ‘Loss, Trauma, and Human Resilience: Have We Underestimated the Human Capacity to Thrive after Extremely Aversive Events?’, *American Psychologist*, 59/1 (January 2004), 20–28; LaNAE Valentine and Leslie L. Feinauer, ‘Resilience Factors Associated with Female Survivors of Childhood Sexual Abuse’, *American Journal of Family Therapy*, 21/3 (1993), 216–224.

¹¹ See Roberta R. Greene, Colleen Galambos and Youjung Lee, ‘Resilience Theory: Theoretical and Professional Conceptualizations’, *Journal of Human Behavior in the Social Environment*, 8/4 (2003), 75–91, at 78; Valentine and Feinauer, ‘Resilience Factors Associated with Female Survivors’, 221–222.

¹² Yvonne R. Farley, ‘Making the Connection: Spirituality, Trauma and Resiliency’, *Journal of Religion and Spirituality in Social Work*, 26/1 (2007), 5–6.

insight, independence, relationships, initiative, creativity and humour, and morality.¹³

Spirituality and trauma may have reciprocal influence in positive and/or negative ways. Recovery from trauma often includes a search for meaning, which spirituality may help or hinder. Spirituality has specific components that enhance individual resilience. However, it is also of note that religious and spiritual beliefs can increase an individual's traumatic experience, causing harm.¹⁴ A particular set of spiritual beliefs can lead victims of trauma to blame themselves, perhaps believing that the trauma was a punishment for sin. Beliefs that promote self-blame in the aftermath of trauma can be detrimental to spiritual life. The potential for the interaction between spirituality and trauma to be either empowering or devastating is a foundational rationale for exploring the impact of spiritual direction on those who have experienced or will experience trauma.

Spiritual Direction, Trauma and Post-Traumatic Growth

Trauma brings to the surface existential realities about life, purpose and death.¹⁵ These realities do not create traumatic suffering in themselves; rather, it is a response to them. The context in which a painful event is experienced dictates whether emotional trauma, or emotional recovery and post-traumatic growth, will prevail. One way of decreasing vulnerability to emotional trauma is by turning to a relationship with the transcendent through religious and positive spiritual coping.

According to Bessel van der Kolk, who is one of the foremost thinkers and researchers on trauma, recovery from trauma occurs in the context of *relationships*.¹⁶ This resonates with Stolorow's concept of a 'relational home' as the healing factor in emotional trauma. Not all relationships facilitate recovery; of particular importance are those that provide physical, emotional and, we add, spiritual safety—safety from being dismissed, from being shamed and from being judged.¹⁷

¹³ Farley, 'Making the Connection', 8–13.

¹⁴ See Stacy Smith, 'Exploring the Interaction of Trauma and Spirituality', *Traumatology*, 10/4 (December 2004), 207–266.

¹⁵ Stolorow, 'Phenomenological-Contextual, Existential, and Ethical Perspective', 130–132; Mary Patricia Van Hook, 'Spirituality as a Potential Resource for Coping with Trauma', *Social Work and Christianity*, 43/1 (2016), 7–25, here 11.

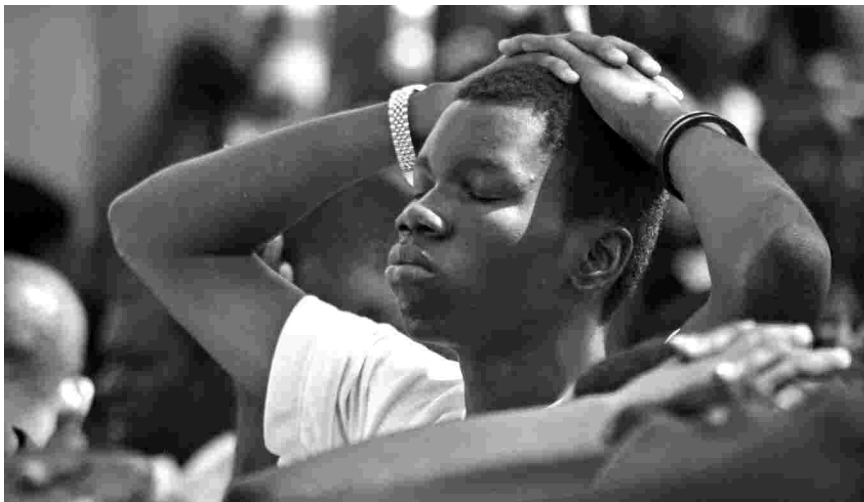
¹⁶ Bessel A. van der Kolk, *The Body Keeps the Score: Brain, Mind, and Body in the Healing of Trauma* (New York: Viking, 2014), 212.

¹⁷ Stolorow, 'Phenomenological-Contextual, Existential, and Ethical Perspective', 134.

Such hospitality and safety are fostered within spiritual direction, so that a directee may enter more fully into relationship with God and develop an increased awareness of God's movements and actions in his or her life relative to the experiences of trauma. A closer relationship with God may contribute to a directee being more able to process, integrate and adapt to trauma, recover from it and experience post-traumatic growth.

Major world religions, including Christianity, accept that suffering, significant stress and even trauma itself can enhance faith and personal development.¹⁸ Spiritual direction has sought to address human suffering for centuries and, consistently with Christian theology, has worked to enhance positive adaptations to trauma and suffering.¹⁹ 'And not only that, but we also boast in our sufferings, knowing that suffering produces endurance, and endurance produces character, and character produces hope' (Romans 5:3–4): a first-century text reflects the connection between suffering and growth.

A study of the devastating 2010 earthquake in Haiti affirms, 'When individuals are able to create positive meaning out of tragedy, they are often able to activate critical recovery attributes such as a sense



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A survivor prays after the Haitian earthquake

¹⁸ See Annick Shaw, Stephen Joseph and P. Alex Linley, 'Religion, Spirituality, and Posttraumatic Growth: a Systematic Review', *Mental Health, Religion and Culture*, 8/1 (March 2005), 1–11, at 2.

¹⁹ Coe and Hall, *Psychology in the Spirit*, 365 following.

of self-efficacy and a sense of purpose'.²⁰ Any meaning-making context that can provide what Stolorow calls a 'relational home' in which to process trauma—or offer some protection against its effects—is worth exploring. To determine whether spiritual direction is a worthwhile practice for recovery from trauma or in developing resilience, the role that religious protective factors have in post-traumatic growth should be examined. Surveying the research on spiritual direction and positive spirituality will reveal if there is any relationship between recovery from trauma, post-traumatic growth and participation in spiritual direction.

Positive and Negative Spirituality

A positive relationship with God, or *positive spirituality*, is correlated with post-traumatic growth. While there is no direct empirical research assessing spiritual direction's effect on an individual's relationship with God, a favourable connection may be inferred from existing empirical evidence—and confirmed through future research.

Religion and spirituality have been reported to have an overall positive impact on mental health.²¹ People often turn to spirituality and religion when they are faced with distressing circumstances and suffering.

Studies of trauma have referred to positive spiritual or religious coping as a means of navigating mental health problems, working through suffering, recovering from natural disasters and processing traumatic events. Positive spirituality has been found to decrease psychological distress, increase interpersonal connectedness with God, decrease anxiety and worry, increase the quality of interpersonal relationships and quality of life, and even help to prevent suicide.²² Spirituality moves people

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towards something that is beyond themselves. It provides a resource in times of frustration, despair and painful encounters with finitude. Spirituality contextualises difficult life circumstances by providing meaning and empowerment through relationship with God. It also provides a sense of belonging, worth, direction, community support, altruism and hope for life after death.²³

²⁰ Kari A. O'Grady and others, 'Earthquake in Haiti: Relationship with the Sacred in Times of Trauma', *Journal of Psychology and Theology*, 40/4 (December 2012), 289–301, here 289.

²¹ Samuel R. Weber and Kenneth I. Pargament, 'The Role of Religion and Spirituality in Mental Health', *Current Opinion in Psychiatry*, 27/5 (September 2014), 358–363, at 359.

²² Weber and Pargament, 'The Role of Religion', 359.

²³ Van Hook, 'Spirituality as a Potential Resource for Coping with Trauma', 16–17.

However, it is important to note that, conversely, spiritual and religious difficulties may be a source of poorer psychological adjustment to stress.²⁴ Individuals who have significant spiritual struggles over an extended period of time are at an increased risk of developing mental health difficulties.²⁵ Samuel Weber and Kenneth Pargament have noted that those who respond to a distressing event in a negative religious or spiritual way have poorer mental health outcomes. They stated more explicitly that there are three types of spiritual struggle: 'divine, or difficulties and anger with God; interpersonal, or negative encounters with other believers; and intrapsychic, or internal religious guilt and doubt'.²⁶

The quality of a person's spiritual beliefs and religious practices affects how a painful event is experienced. 'Spirituality can both contribute to resilience (the ability to bounce back after hardship) and can intensify the pain and distress.'²⁷ Religion and spirituality may be used to contextualise suffering as an opportunity for God to fix the painful event or take it away, or to blame God or the devil for the pain and suffering; these religious responses are less likely than more positive ones to lead to post-traumatic growth following pain and suffering.²⁸ Externalising trauma in this way through entreaty or blame diminishes the positive relational aspects of religion and spirituality that enhance constructive spiritual coping.

How a person engages his or her spiritual and religious coping in times of pain and suffering has been shown to have a significant impact on the development of trauma symptoms or, alternatively, post-traumatic growth.²⁹ Although the potential negative impacts of spirituality need to be considered, meta-analytic studies have demonstrated that religion and spirituality can be effective resources in developing resilience.³⁰

²⁴ Carol Ann Faigin, Kenneth I. Pargament and Hisham Abu-Raiya, 'Spiritual Struggles as a Possible Risk Factor for Addictive Behaviors: An Initial Empirical Investigation', *The International Journal for the Psychology of Religion*, 24 (2014), 201–214, at 202.

²⁵ See Vincent R. Starnino, 'When Trauma, Spirituality, and Mental Illness Intersect: A Qualitative Study', *Psychology of Trauma*, 8/3 (May 2016).

²⁶ Weber and Pargament, 'The Role of Religion', 360.

²⁷ Van Hook, 'Spirituality as a Potential Resource', 13.

²⁸ Shaw, Joseph and Linley, 'Religion, Spirituality, and Posttraumatic Growth', 6.

²⁹ See Smith, 'Exploring the Interaction of Trauma and Spirituality', 239; Van Hook, 'Spirituality as a Potential Resource', 13.

³⁰ Ca Trice B. Glenn, 'A Bridge over Troubled Waters: Spirituality and Resilience with Emerging Adult Childhood Trauma Survivors', *Journal of Spirituality in Mental Health*, 16/1 (2014), 37–50, at 40; Kirby K. Reutter and Silvia M. Bigatti, 'Religiosity and Spirituality as Resiliency Resources: Moderation, Mediation, or Moderated Mediation?' *Journal for the Scientific Study of Religion*, 53/1 (March 2014), 56–72, at 57.

Some people are predisposed to greater resilience by protective factors such as higher IQ or a stable family, but spirituality has been shown to enhance resilience irrespective of such factors.³¹ Strengthening a person's positive religious practices and spiritual beliefs in the context of a safe relationship may have a significant impact on resilience in the wake of trauma.

Spiritual Direction and Psychotherapy

It is understandable to assume that someone who has experienced trauma should be referred to psychotherapy. As a spiritual director, the training I received encouraged me to do this if a directee revealed a history of trauma. Appropriate referral is part of being a good and ethical spiritual director. However, it is a concern that while spiritual directors refer directees to psychotherapy, psychologists less often refer patients to spiritual direction.³² It is important for both psychologists and spiritual directors to acknowledge the impact that spiritual direction

may have on processing trauma. Cross-referrals may result in spiritual directors having more confidence in their vocation as it relates to trauma recovery. Moreover, psychotherapists are ethically obliged to recognise the limits of their competence, and should be open to consultation, further training and referral when they are beyond their knowledge in the area of spirituality.³³

Over the past decades, there have been many explorations of how spiritual direction has been influenced by psychology, how the two disciplines are alike and

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³¹ Farley, 'Making the Connection', 14.

³² Cassandra Vietan and David Lukoff, 'Spiritual and Religious Competencies for Psychologists', *Psychology of Religion and Spirituality*, 5/3 (June 2013), 138–139.

³³ Vietan and Lukoff, 'Spiritual and Religious Competencies', 138.

how they are different. In her discussion of Ignatian spirituality in relation to Jungian psychoanalysis, Ruth Barnhouse suggested that whether people seek help from clergy (for example in spiritual direction) or mental health professionals (for example in psychoanalysis) is in many ways a cultural accident: 'what it perhaps comes down to is that the care of souls is the care of souls, and the more vocabularies and symbol systems one has at one's disposal, the more effective one is likely to be in exercising that care'.³⁴

Barnhouse stated that counselling troubled people and providing guidance to those desiring personal growth,

... really is the oldest profession, and every culture has had its shamans, confessors, gurus, spiritual directors, magicians, and many other varieties of wise men and women, dedicated, with varying degrees of expertise and effectiveness, to carrying out just these tasks.³⁵

Only in the last century has there been a split between the spiritual and the psychological in theory, research and practice. We find it curious and interesting that psychotherapy, rather than spiritual direction, became the more popular way of caring for soul and psyche.

Spiritual direction and psychotherapy have several overlapping features: first, the client, patient or directee needs to desire change; secondly, the therapist or spiritual director offers an objective vantage point by his or her presence; thirdly, both handle unique events; fourthly, both involve the technique of choice.³⁶ In psychotherapy, the technique of choice may include helping to bring what is unconscious into conscious awareness. In the practice of spiritual direction, the technique of choice is the use of discernment.

Although spiritual direction and psychotherapy may overlap, their goals are different. The former is concerned with spiritual growth and the latter with psychological growth.³⁷ Spiritual direction does not focus on pathology, although this is acknowledged when it presents. Instead,

³⁴ Ruth R. Barnhouse, 'Spiritual Direction and Psychotherapy', *The Journal of Pastoral Care*, 33/3 (September 1979), 149.

³⁵ Barnhouse, 'Spiritual Direction and Psychotherapy', 149.

³⁶ Barnhouse, 'Spiritual Direction and Psychotherapy', 150–152.

³⁷ Marilyn A. Ganje-Fling and Patricia R. McCarthy, 'A Comparative Analysis of Spiritual Direction and Psychotherapy', *Journal of Psychology and Theology*, 19/1 (March 1991), 104.

the focus is on that which unifies and separates all: the spirit. Spiritual direction is concerned with the spirit–Spirit relationship, whereas psychotherapy is concerned with the self–other and self–self relationships. Spiritual direction is unique in that it does not treat the person as the barometer of change. Instead, ‘the reference point in spiritual direction is not on the human plane, but is the subject’s relation to God, and the participation in the entire Christian community, the Invisible Body of Christ’.³⁸

Psychotherapy’s overarching aim is the relief of psychic disturbances; and the aim of spiritual direction is the cultivation of the relationship between a person and God. These aims can, however, be complementary: ‘The relieving of psychic disturbances can aid spiritual growth, and the deepening of spiritual life can aid the relieving of psychic disturbances whether their manifestation is intrapersonal or interpersonal’.³⁹ The two helping disciplines probably have more in common than not, and practitioners have the opportunity and potential to collaborate in the care of those who seek them out.

Spiritual direction, like psychotherapy, also has limitations. Ruth Barnhouse warns,

The first major trap is that either therapy or spiritual direction may become so standardized as to once more muffle the inner voice rather than to promote those conditions of personal freedom in which it can be truly heard.⁴⁰

Spiritual direction is fallible and prone to human error in its practice and may indeed ‘muffle the inner voice’. Additionally, there is a potential for it to emphasize the inner life of the individual at the expense of the group, missing out on the benefits of community. Spiritual direction in the last century has been significantly influenced by psychoanalytic and psychodynamic theory.⁴¹ The limitations of these theories are relevant for the current practice of spiritual direction, especially Ignatian spiritual direction, because of the ways in which some authors have

³⁸ Barnhouse, ‘Spiritual Direction and Psychotherapy’, 149–150, 153.

³⁹ Susan L. DeHoff, ‘In Search of a Paradigm for Psychological and Spiritual Growth: Implications for Psychotherapy and Spiritual Direction’, *Pastoral Psychology*, 46/5 (May 1998), 345.

⁴⁰ Barnhouse, ‘Spiritual Direction and Psychotherapy’, 163.

⁴¹ Duane R. Bidwell, ‘The Embedded Psychology of Contemporary Spiritual Direction’, *Journal of Spirituality in Mental Health*, 11/3 (2009), 148–171, at 151.

compared the Ignatian Exercises to psychoanalytic and family systems developmental models.⁴²

People experiencing trauma have a need for interventions that specifically address spiritual struggles, and the potential of spiritual direction in trauma recovery is important because spirituality aids in meaning-making.⁴³ Spiritual direction has the potential to improve psychological adjustment to stress for those who have a religious belief system. It may lead to practices that offer a new way of looking at one's life, both past and present. Like psychoanalysis, it is a long and slow process, attending to the movement of the Holy Spirit and the inner voice. It is not for acute treatment, but rather for continual support. Those who engage in it are likely to experience post-traumatic growth.⁴⁴

How Spiritual Direction Fosters Post-traumatic Growth

In the process of spiritual direction, the director encourages the directee to tell his or her spiritual narrative while placing the directee in a 'relational home' between God, spiritual director and self, which is attuned to the directee and to the Holy Spirit.⁴⁵ This process is meant to facilitate the directee's growth in his or her self-understanding, through God's work. The goal is to create greater intimacy between the directee and God, increasing positive spirituality.

Janet Ruffing explains: 'The person seeking direction tells a religiously shaped life story, incorporating key episodes from the past and the present related to his or her understanding of spiritual direction'.⁴⁶ Her description illustrates how direction may invite directees to articulate their traumatic life events to an attentive other who bears witness to their suffering. However, it is not only the director who affects the narrative;

⁴² See Bidwell, 'Embedded Psychology of Contemporary Spiritual Direction', 151; Mary Jo Meadow, 'Four Stages of Spiritual Experience: A Comparison of the Ignatian Exercises and Jungian Psychotherapy', *Pastoral Psychology*, 37/3 (March 1989), 172–191; Ekman P. C. Tam, 'Satir Model of Family Therapy and Spiritual Direction', *Pastoral Psychology*, 54/3 (January 2006), 275–287.

⁴³ Kavita M. Desai and Kenneth I. Pargament, 'Predictors of Growth and Decline Following Spiritual Struggles', *The International Journal for the Psychology of Religion*, 25/1 (2015), 54.

⁴⁴ See Kenneth I. Pargament, Kavita M. Desai and Kelly M. McConnell, 'Spirituality: A Pathway to Posttraumatic Growth or Decline?', in *Handbook of Posttraumatic Growth: Research and Practice*, edited by Lawrence G. Calhoun and Richard G. Tedeschi (New York: Psychology, 2014 [2006]), 121–137; Starnino, 'When Trauma, Spirituality, and Mental Illness Intersect'.

⁴⁵ Gene Barrette, 'Spiritual Direction in the Roman Catholic Tradition', *Journal of Psychology and Theology*, 30/4 (2002), 290–302.

⁴⁶ Janet K. Ruffing, *To Tell the Sacred Tale* (New York: Paulist, 2011), 69.



it is also the process of direction itself, the invited presence of God and the safety of the relational space. The directee, sharing his or her trauma in the safe holding environment of the spiritual direction room, has an opportunity for healing and growth.⁴⁷

It is both in the holding and in the telling that the directee's perspective on, or experience of, the meaning of his or her story is changed. 'By telling the story of how they have encountered the mysteries of faith, directees make their experiences increasingly specific, coherent, personal, and concrete', which in turn allows them to see where God can have or has had an effect on their life.⁴⁸ The opportunity for directees to tell their story and, eventually, to develop a coherent, ordered narrative, enables them to see how their religious beliefs and spiritual practices can reshape what they previously thought to be unresolvable trauma experiences.

Practices encouraged in spiritual direction, such as silence, various prayer postures and discerning the movements of the Holy Spirit, are agents of spiritual development. Joseph Driskill observes that silence can be used by a directee to discover personal agency: 'Finding God's love and mercy in the quiet places of spiritual disciplines allows a woman to find her voice'.⁴⁹ Additionally, the quiet space—which is often

⁴⁷ See Stolorow, 'Phenomenological-Contextual, Existential, and Ethical Perspective', 124–125; Ann Belford Ulanov, *Finding Space: Winnicott, God, and Psychic Reality* (Louisville: Westminster John Knox, 2001).

⁴⁸ Ruffing, *To Tell the Sacred Tale*, 81.

⁴⁹ Joseph D. Driskill, 'Spiritual Direction with Traumatized Persons', in *Still Listening: New Horizons in Spiritual Direction*, edited by Norvene Vest (Harrisburg: Morehouse, 2000), 32.

overlooked in modern talk-therapy practices—enables the directee's perspective and needs to be identified rather than being overwhelmed by the voice of another. Most spiritual direction relationships are indefinite, without any agenda or treatment plan, giving space for the directee to move towards forgiveness and healing without being forced or pushed by another's timeline or agenda.

'Because direction focuses on spiritual growth', Ruffing writes, 'the spiritual-direction encounter presupposes that the person seeking direction consciously relates to God, however mysteriously or vaguely'.⁵⁰ Directees are able to have a spiritually informed perspective within the context of the spiritual direction relationship. The exploratory, intentional and narrative process of spiritual direction is a reflection of a directee's intrinsic motivation to grow. This intrinsic motivation is nurtured by spiritual direction and fosters spiritual development.

Jack Bauer, Dan McAdams and Jennifer Pals call post-traumatic growth 'a narrative identity process of exploration and self-transformation'. Given the exploratory nature of spiritual direction, it should be able to foster the emotional resilience that leads to post-traumatic growth.⁵¹ As directees continue in spiritual direction, growing psychologically and relationally with God by actively looking for the ongoing work of the Holy Spirit, experiences once perceived as traumatic may begin to be viewed as redemptive. In other words, the spiritual development encouraged by spiritual direction will shift their perspective on certain life events, moving towards an integrated view includes redemption of suffering. Also, given the directees' spiritual development and increased engagement in a positive relationship with God, when faced with a new trauma they 'are more likely to benefit from their faith, and more likely to emerge from the ordeal with beliefs essentially intact'.⁵²

Spiritual direction is designed to provide a space where directees have the opportunity to experience change, including change in the way trauma has been internalised. As directees reflect on existential experiences that make them confront their limitations, fears and belief systems, those experiences that have a negative connotation owing to trauma are able to be reshaped.⁵³ Vulnerable moments while processing

⁵⁰ Ruffing, *To Tell the Sacred Tale*, 20.

⁵¹ Jack J. Bauer, Dan P. McAdams and Jennifer L. Pals, 'Narrative Identity and Eudaimonic Well-Being', *Journal of Happiness Studies*, 9/1 (February 2008), 95.

⁵² Smith, 'Exploring the Interaction of Trauma and Spirituality', 236.

⁵³ Ruffing, *To Tell the Sacred Tale*.

trauma may push the directee towards belief, or they may lead to unbelief. They may bring the directee into a deeper relationship with God and transform the traumatic event into a redemptive story, or they may confirm him or her in unbelief, especially if spirituality and religion were previously negative forces in the individual's life.⁵⁴

Sidney Furst stated, 'At various stages of life old conflicts and psychic organizations are revisited and reorganized and become reintegrated into new psychic organizations'.⁵⁵ This suggests that the developmental stage at which a trauma occurred, the attachment style of the individual at the time, and the opportunity for processing the traumatic event, all influence whether or not the trauma becomes pathogenic. At the same time there is always the opportunity to heal intrapsychic conflicts by revisiting them. The degree to which a spiritual director is able to understand the directee in his or her developmental and historical context and perceive the directee's specific stage of spiritual development as well as reflect God's redemptive role in the directee's life is the degree to which the directee will evolve in a more secure and healing relationship with God.

Post-traumatic growth through spiritual direction is mediated through positive spirituality in the context of the spiritual direction relationship. Spiritual direction is linked to positive spirituality by means of a relational practice that focuses on an individual's view and experience of God. Spiritual direction is unique because the process incorporates all three characteristics identified by Desai and Pargament that strengthen an individual's religious orientating system: it is a meaning-making practice, it takes place within a religious setting and it is a positive coping tool.⁵⁶

Through a willingness to dwell in the pain of the directee and a stance attuned to the work of God in the midst of the pain, the spiritual director is occupying a meaningful role in building the relational home between directee and God. 'Painful feelings that are held in a context of human understanding can gradually become more bearable.' There is potential for powerful healing to occur in the context of spiritual direction through both human understanding and Holy understanding.

⁵⁴ Smith, 'Exploring the Interaction'.

⁵⁵ Furst, 'Psychic Trauma', 35.

⁵⁶ Desai and Pargament, 'Predictors of Growth', 52.

Trauma isolates people; therefore, healing from trauma involves both the individual and the other.⁵⁷ As a hospitable and relational process, spiritual direction has the potential to facilitate processing and recovering from trauma in ways that lead to post-traumatic growth and the articulation of a redemptive narrative of a life lived more securely with God, others and self.

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⁵⁷ Stolorow, 'A Phenomenological-Contextual, Existential, and Ethical Perspective', 129–135.