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Searching for wholeness in a fragmented world:

A consideration of relational factors to self, others and beyond.

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Dedicated to my lovely Mum

Gail Corrine Boulter

1953-2015

…The answer is, I should say,

To live your life your special way.

And when it ends, let's hope and pray

We've learned all we can along the way.

GCB, 1982.

Acknowledgements

City University London declaration

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Preface

This portfolio combines humanistic and transpersonal psychology, taking into account subjective experiences in relation to individual spirituality. I believe this is an important area because spirituality arguably remains a relatively new area of study within Counselling Psychology and, whilst many mental health professionals may grapple to find distinct categories of diagnosis to explain the unexplainable, many individuals are potentially facing a rebirth of consciousness in the form of a spiritual crisis, which has the potential to destroy them without proper understanding, insight and support. Hence, what is offered in this portfolio is a close-up encounter with those who have had spiritual experiences and hold spiritual beliefs and how these are perceived to be approached within their lives – individually and socially, therapeutically and detrimentally.

Within the parameters of Counselling Psychology lie the methods and means to help piece together the fragmentation specifically, in my view, by incorporating the humanistic and the transpersonal. Humanistic philosophy, on which counselling psychology is largely based, turns the focus inwards to the intrinsic good of the individual within whom the ability to heal and transcend difficulty is believed to reside. Focus is largely on facilitating individual agency through the development of healing and 'loving' relationships towards the self and other. However, beyond humanism lie phenomena that appear to transcend internal drives for betterment and also challenge established theories of the self and behaviour. Thus, the transpersonal branch takes account of those facets that fall outside 'normal' human functioning and experience. Yet, the common emphasis is on developing a strong connection with the self by integrating all aspects of personal experience and understanding.

This portfolio is divided into three parts which incorporate these underpinnings and demonstrate my professional journey thus far: a clinical case study, a qualitative research project and a related publishable journal article.

Part 1: Case Study (Removed from electronic version due to sensitive material).

Based on humanistic perspective, the clinical case study focuses primarily on the therapeutic relationship and the client's (Cameron) relationship with himself. It documents a ruptured therapy and highlights difficulties inherent in the therapeutic encounter when the relationship to the self is utterly fragmented and unable or unwilling to journey through to wholeness. Whilst it provides an example of my practice, it takes a risk in offering an arguably unsuccessful therapeutic intervention. However, as learning most often occurs through mistakes and challenges, this was a defining and

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memorable part of my doctoral training. There was also a spiritual/transpersonal dimension to the client's experience and, given the opportunity again, particularly having completed this work, I would have addressed this differently, as discussed within the case study.

Part 2: Qualitative Study

Initial ideas for this research centred on the efficacy of different therapeutic models in overcoming trauma, an interest borne out of my previous employment within children's homes and prisons. This evolved to incorporate my personal interest in spirituality and how particular experiences and beliefs may or may not help individuals overcome their trauma. I, therefore, contemplated an exploration of those who had a clinical diagnosis such as psychosis or schizophrenia; however, due to anticipated responses from ethics' panels, this was decided against.

Within personal and professional experience, I have observed individual spirituality to be both damaging and restorative, by way of offering a debilitative disconnection or healthy connection respectively. I was interested in what marks this difference and how spirituality is developed and nurtured, or not, throughout the life journey. I personally believe that, on numerous occasions, many facets of human functioning may be ignored, dismissed or misunderstood and, within therapy, failure to embrace fundamental client aspects, can lead to fundamentally failing the client.

There appears to be a distinct lack of literature pertaining to spirituality throughout the life-cycle and the emphasis is largely on religion as opposed to spiritualty per se. Hence, this research endeavoured to address these gaps by interviewing eight individuals about their beliefs and experiences of spirituality throughout their lives. Using IPA, it was found that the spiritual journey was individual rather than social, although the impact of others influenced the degree to which personal spirituality was integrated and had the potential to lead to a spiritual crisis. How this was experienced within therapy was also considered and spirituality was commonly deemed as an unnecessary or irrelevant part of the therapeutic encounter.

A wealth of rich data provides unique insight into participants' phenomenological worlds which, on a personal level, I felt incredibly lucky to be part of, to join individuals in their experience whilst also reconnecting with my own. Professionally, as a counselling psychology researcher, I was able to remain open and curious and integrate my skills in order to delve into these worlds and gain an understanding of individuals' spiritual functioning, both inside and outside the therapy room. Throughout the process, I have learned that the extent of free expression surrounding individuals'

beliefs and experiences largely impacts their relationship to themselves and others with regard to their spirituality.

Linking the case study and the qualitative study

These two pieces of work offer valuable insights that demonstrate features common to both. Firstly, as highlighted in the case study, the social reality of the client is a fundamental consideration and failure to acknowledge this can, and potentially did, result in poor treatment outcomes and premature termination. An individual does not live in a vacuum detached from his/her surroundings and therefore cannot be extracted from the external world. This was further illustrated within the qualitative study as the impact of others was a paramount consideration of participants' disclosures and experiences of spirituality within the life cycle. When dealing with the individual, all facets need to be considered to include immediate inner functioning, wider social connections and even the relationship to the beyond.

Relatedly, perceived and actual differences between the client and therapist may negatively impact therapy as clients potentially feel separate, misunderstood and unable to express themselves freely. Within the case study such differences were not acknowledged and could have accounted for the rupture. Similarly, within the research, individuals who felt their therapists were of a different spiritual orientation or lacking in understanding often felt 'unsafe' in freely expressing their beliefs and experiences. Raising such differences and allowing opportunity for exploration would no doubt benefit the therapy, relationally and therapeutically, as indicated throughout these studies.

It also emerged that openness to an array of interpretations for similar phenomena is perhaps a key element of therapeutic gains. Both pieces of work reveal the need to explore and consider a variety of perspectives rather than becoming attached to one explanation which potentially narrows the extent to which individuals can effectively explore and begin to understand themselves. There may not be a purely psychological reason or a purely spiritual one, ruptured therapy may be a consequence of social factors rather than attachment issues, or both, and so on. Therefore, offering flexibility in interpretations and freedom for exploration are perhaps fundamental, as highlighted.

The overarching theme which has emerged is the significance of relational factors - whether to the self, others or the cosmos – in navigating the journey through life. While the world stands divided, it seems that separation begins at the individual level, as many of us strive for something we think we need or 'should have', whilst ignoring the very core of our existence, the yearning of the soul. Throughout life, many traumatized or feared self-aspects may disperse deep into the unconscious and the personal shadow may become too dark to face. On so many levels, the individual may

become fragmented with sensations of disembodiment, emotional detachment, psychological splitting and spiritual emergency, that the journey to wholeness may not only be long and arduous but also terrifying and repelling. Within these studies, the relationship to the self reveals itself as a key determinate of further relational issues – to others, the cosmos and beyond, and the sense of connection to others often begins with self-interconnectedness and vice versa. Therefore, of underlying importance is seemingly the development and nurturance of the self-connection and self-integration which then enables individuals to expand this relationship to the wider world and hopefully lead better functioning lives with stronger and healthier connections, on both a micro and a macro level.

Part 3: Journal article

The thesis has been précised into a journal article for potential submission to The International Journal of Psychology and Counselling. This was considered the most relevant given the journal's breadth of multi-cultural readership and potential to open up discourse about spiritual aspects and therapy. Consideration of various therapies within the UK offers insight into a UK perspective and may spark collaboration or a merging of minds to explore different cultural perspectives and how these may be incorporated into different therapies. Broadly, it expands insight within this area. This process was a challenge in itself, testing my skills as a novice researcher, extracting the most salient features whilst not compromising the individuals' meanings and lived experiences. It is hoped that what is offered is an authentic account that furthers understanding in this area.

The formatting remains consistent with this portfolio but would be changed if submitted for publication. There is no specific word count but the guidelines state: *The length of a full paper should be the minimum required to describe and interpret the work clearly*. Hopefully, this has been achieved. The complete journal guidelines can be found in Appendix Q.

Conclusion

Overall, this portfolio incorporates a personal and professional journey as a scientist-practitioner, including a systematic approach to research and a clinical approach to therapy. It endeavours to offer a contribution to the field of counselling psychology by throwing light on individual aspects of spirituality and allowing practitioners to be better informed in terms of spiritual phenomena and how this may be integrated within therapy. The impacts of personal spirituality are immense, affecting connections with the self, family, peers, society and the universe, and psychotherapeutic intervention holds in its hands the power to successfully mediate this.

PART 1: Attachment Breaks the Therapy in a Humanistic Approach: A Case Study

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Spiritualized

Spirits wander from my mind,
A presence felt from behind.
But is the barrier ready to fall
To freely show a world to all?
Is our mind ready to open,
To mend a bond so long been broken?
So mystical, so magical a world,
But to the evil has been hurled.
Will spiritual and material meet
Before the energy's at its feet?
Will our lives meet with theirs
And filter all the evil glares?
The confrontation of such minds
May force a clash of different kinds.
But for today meet the spiritual
For tomorrow escapes all material.

CEB, 1997.

PART 2: The Spiritual Journey: An IPA study of spirituality in the lives of those who have attended therapy.

Abstract

The research aims to explore participants' experience of spirituality within their lives generally, including within their therapy. Previous research has suggested that there is a degree of trepidation amongst some therapists to integrate spirituality into their therapy and there is thought to be a general lack of training in this area. In addition, there is limited in-depth understanding of the role of spirituality on an individual's journey through life. Within this research, semi-structured interviews were conducted with eight participants across the UK. Interpretative phenomenological analysis (IPA) was used to analyse the data which provided rich insight into the impact of spiritual aspects on participants' life journeys and the experience of this within their therapy. Findings demonstrate that participants had anomalous experiences within their lives but this was not generally integrated by family members and/or peers. Spirituality was often viewed as separate from the therapy and some were wary that inclusion of the spiritual dimension would detract from the therapeutic encounter. The participants' perception of therapists and society influenced their disclosures of spirituality. The research found that people mostly drew on their spirituality on a personal level and it was an individual rather than a social endeavour. Considerations of leading a spiritual life within the confines of modern society and cultural attitudes were also raised. Limitations and suggestions for further research are considered.

Key Words: Spirituality, therapy, interpretative phenomenological analysis (IPA), life journey

<center>**2.1 Reviewing the Trodden Path**</center>

Before embarking on the literature review, it is perhaps worth clarifying the terminology used throughout this thesis as it relates herein:

Therapy relates to psychotherapeutic intervention, specifically individual face-to-face counselling which broadly includes CBT, humanistic and psychodynamic approaches. Art therapy also features within the analysis and discussion chapters.

Spirituality refers to the overall/underlying spiritual beliefs and practices of an individual. These may be considered as transpersonal ideas and esoteric thinking. Spiritual practices include those seeking connection to the self and other, insight and enlightenment, for example meditation and rituals.

Spiritual beliefs may be considered as esoteric, transcendental thinking beyond the self, world view, politics and materialism. This does not necessarily represent unfounded faith but relates to participants' thoughts and views based on their physiological and sensory experiences. Hence, beliefs in this instance may refer to experiential reality and are regarded as objective as opposed to 'blind faith'.

Spiritual experience(s) is the overarching term for what may be considered 'exceptional human experiences' (EHEs), anomalous, paranormal and/or transpersonal. Broadly, they are occurrences that transcend accepted norms of physical and rational boundaries. They relate to something powerful, that touches the soul and often transforms the individual as a result.

Client/s as opposed to 'patient/s' is generally referred to due to predominantly non-clinical settings being discussed. It is felt to be preferable to the medical model of 'patient' or the depersonalising use of 'service user'. However, it does not assume that those discussed are paying customers; simply that 'client' is generally considered to be the best fit.

2.1.1 Introduction

Spirituality is an immense area to explore, covering a vast spectrum of multi-cultural human experience and understanding. Whilst many philosophies and theoretical underpinnings may be considered, the lens of this introduction has naturally been focused on matters deemed relevant to the study. In so doing, it may appear as though particular areas are skimmed over and not provided the full credence or exploration they warrant. Whilst there are inherent overlaps and the literature is, in places, difficult to compartmentalise, it is hoped that what is offered is a coherent journey through the writing as it relates to spirituality within life and naturally includes the therapeutic encounter. After a very brief overview of spirituality and counselling psychology, the literature is

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divided into two broad sections: 'Spirituality in Life' and 'Spirituality in Therapy'. This is to allow for more palatable reading; whilst spirituality is the phenomenon being studied, it is considered in relation to those who have attended therapy and, therefore, a focus on different aspects of therapy is both warranted and intrinsic within this.

The literature is vast and permeates many disciplines that consider the scope of the human condition, including theology, philosophy, anthropology, psychology, sociology and so on. From the time of William James (1842-1910) to the insights of Jung (1875-1961) to more recently Grof (1931-present), Wilber (1949-present) and many others in-between, spiritual experiences have been a topic of debate and discussion for some time. James (1901; 1960) was arguably the forerunner, in Western society, of considering people's subjective experiences of spiritual/mystical phenomena outside the bounds of institutionalized religion. He evidenced that much experience was unaccounted for within the physical realm and he regarded spiritual experiences as transformative and objective. Of the spiritual/'unseen' he states: "we belong to it in a more intimate sense than that which we belong to the visible world…when we commune with it, work is actually done upon our finite personality…that which produces effects within another reality must be termed a reality itself…we had no philosophic excuse for calling the unseen or mystical world unreal" (p.490-1). Accordingly, this study considers individuals' subjective experience of their spiritual beliefs and experiences.

Counselling Psychology is a relatively new field yet within it is encompassed a multi-faceted approach to healing and well-being, spanning over a century's worth of knowledge and practice and broadly based on Psychodynamic/analytical (Freud, 1856-1939; Jung) Humanistic (Maslow, 1908-1970; Rogers, 1902-1987) and Cognitive-behavioural (Ellis, 1913-2007; Beck, 1921-present) paradigms. Transpersonal models arguably lie on the fringes of psychology despite connection with pioneering figures such as Maslow, Jung, Grof and Grof and Assagioli (1888-1974), among others. Indeed, there are a multitude of modalities and theoretical orientations aimed at helping to ease individuals' turmoil and help them on life's journey. Thus, there are many overlaps and commonalities amongst the different approaches and, whilst an in-depth exploration of these is beyond the scope of this thesis, various interventions will be considered as they relate to individual experiences and spirituality.

2.1.2 Spirituality in Life

2.1.2.1 Religion versus spirituality

The world has become faster, somewhat disconnected and highly technologically focused yet, in a UK national survey, Hay and Hunt (2000) found 76% of respondents reported spiritual experience within their lives. This was an increase from 48% thirteen years previously (Hay, 2002), perhaps signifying a shift in society's willingness to acknowledge spiritual matters, or perhaps illustrating a need for something meaningful. They found that, despite church attendance declining, spiritual association increased, suggesting that spirituality in Britain is expressed through means other than religion. The most recent census from the Office of National Statistics (2011) indicates that Christianity remains the largest religion, with almost 60% of the population identifying as such. However, the report notes that, whilst there is a decrease in those identifying as 'religious', there is an increase in those who report belonging to 'no religion'. Furthermore, the British Humanist Association (2017) highlights that of the same sample ticking a religious box, when asked the follow-up question, 'Are you religious?', 29% said 'Yes' while 65% said 'No', suggesting people may identify as such yet not practice; their named religious affiliation could be inherited and/or there is not adequate opportunity to express spirituality within such a census. Thus, this area within itself provides an important aspect of human existence that merits exploration.

O'Hanlon (2006, p.29) quotes from the 12-step programme: "Religion is for people who are afraid to go to hell; Spirituality is for people who have been there." As such, this research seeks to explore 'spirituality' independent of religiosity. Spirituality is multidimensional and defies a definitive definition. However, as the literature below suggests, it is largely understood to incorporate transcendental experience, belief in something other than physical/material, a sense of connectedness, meaning and purpose. For the sake of this research, subjective beliefs outside the bounds of prescribed orthodox practices will provide the focus. Perhaps Burkhardt's (1998) statement captures the core of spirituality as "the essence of who we are – the unifying or animating force that permeates all life and being" (p.127) or Pargament's (2007) definition of spirituality as "the search for the sacred" (p.32), suggesting a progressive journey to connect with something divine, within which 'higher beings/God', virtues and nature is included.

Much of the research has combined spirituality and religion due to the intrinsic overlaps, as individuals can incorporate both, or be one, without the other. Indeed spirituality does not necessarily equate to religiosity and vice versa (Tanyi, 2002). Religion is largely considered in terms of ritualised practices within an organised, prescribed, monotheistic tradition, whereas spirituality is

viewed as highly subjective, including concepts such as connectedness (to others/nature/non-material entity), meaning/purpose, belief in a higher entity and transcendence (Cawley, 1997; Tanyi, 2002; Miller & Thoresen, 2003; O'Hanlon, 2006; West, 2011). Since religion per se has monopolised much of the research in this area, the present study lends itself to a focus on spirituality independent of religiosity. From the literature and my own understanding, I view spirituality as coming from within, a way of being that is nurtured and often created by the individuals themselves and emanated outwards, whereas I perceive religion to be constructed externally and directed inwards.

2.1.2.2 Spirituality in healing

Within this study, the term 'healing' is often referred to in order to denote a progressive journey rather than a cure. It is felt, by the author, to be more phonetically pleasing and has spiritual connotations, as opposed to 'recovery', for example, which may be associated with addiction and ultimate cure of physical symptoms. Jonas and Chez (2004) expand on this idea of healing to include "…repair, renewal and transformation that increase wholeness" (p.172).

Spirituality has been linked to a vast array of beneficial outcomes in psychological and physical wellbeing such as increased resilience amongst survivors of traumatic events, with reported positive changes in self-perception, life purpose, relationships and strengthening of spiritual beliefs (Bryant-Davis, Ellis, Burke-Maynard, Moon, Counts, & Anderson, 2012; De Castella & Simmonds, 2013; Brewer-Smith & Koenig, 2014). Post-traumatic Growth (PTG) is defined by Tedeschi & Calhoun (2004) as "positive psychological change experienced as a result of the struggle with highly challenging life circumstances" (p.1). They developed the Post-traumatic Growth Inventory, to measure five domains where positive changes may occur following such an event - New Possibilities; Relating to Others; Personal Strength; Spiritual Change; Appreciation of Life (Tedeschi & Calhoun, 1996). Interestingly, many, if not all of these, could be considered spiritual aspects and certainly encompass factors already highlighted, such as meaning/purpose, connectedness and so on. Thus, it seems the web of psychological and spiritual is closely interwoven.

Frankl's (2004) poignant account of his time in Auschwitz and other concentration camps demonstrates that those who found meaning and a sense of purpose in their existence were more likely to survive the daily atrocities, whereas those who lost all hope and reason for living rapidly lost their inner resolve and died. Finding meaning in the suffering kept a light burning within, however dim, which was undistinguishable even by the most torturous and violent ordeals. He recognised that, although the external conditions inevitably affected the prisoners' physical and emotional

state, it was ultimately an 'inner decision' of the prisoner which dictated the kind of person they were and how they continued existing. He states: "Any man can, even under such circumstances, decide what shall become of him – mentally and spiritually" (p. 75). Thus, there is a choice in one's analysis and perception of their situation and how they choose to react towards this regardless of external factors. Frankl continues: "It is this spiritual freedom which cannot be taken away – that makes life meaningful and purposeful […] the way in which he takes up his cross gives him ample opportunity – even under the most difficult circumstances to add a deeper meaning to his life" (p.75-76). Suffering is viewed as an absolute and a necessity on life's path and the way in which this is confronted allows for personal growth as individuals search within to find a purpose in their existence and a reason for continuing. There are many adages within society's rhetoric that seem to support the notion of inherent and purposeful suffering such as, 'that which doesn't kill you makes you stronger' and 'you only get what you can handle', although the latter is debatable given current rates of suicide, but that is perhaps for another paper.

In his autobiography, Jung (1995) stated that the majority of his neurotic patients were "usually confined within too narrow a spiritual horizon. Their life has not sufficient content, sufficient meaning" (p.162). He found that those who were materially driven, focused on monetary, positional and reputational rewards mostly remained discontented and neurotic even when such goals had been achieved. He, therefore, regarded his work as being aimed at developing the individual and co-creating a 'more spacious personality' whereby individual life-meaning and reconnection to the inner soul was facilitated whilst the soulless corpse existing in a void was challenged.

Further research has explored meaning-making and spiritual transformation following challenging life events. The former refers to individuals' attempts at assimilating otherwise painful and distressing events into something that makes sense or offers some benefit (O'Hanlon, 2006; Park, 2010; West, 2011). As Gockel (2009) states, "transformation of meaning…is a fundamental element of effective spiritual coping" (p.228).

Spiritual transformation is recognised as a change in spiritual beliefs that can subsequently impact on self-view and behaviour and may be experienced as spiritual growth or spiritual decline (Cole, Hopkins, Tisak, Steel and Carr, 2008); however O'Rourke, Tallman and Altmaier (2008) suggest that the extent of this is determined by the level of religiosity/spirituality pre-trauma. Decline has included questioning faith, feeling abandoned and viewing 'God' as punitive (Peres, Moreira-Almeida, Nasello and Koenig, 2007; Maltby & Hall, 2012). However, these traits have largely been apparent within populations describing themselves as 'religious' as opposed to 'spiritual', the latter of which has been found to be more significant in the healing process, as indicated by Knapik,

Martsolf, Draucker (2008). In their study of survivors of sexual violence, they found that the spiritual path, including individuals' connection to a higher being and the potential for transformative spiritual experience, were fundamental to their healing as opposed to adherence to religious doctrine. The current research may, therefore, add to these findings by exploring the role of spirituality throughout individuals' lives and the impact of this on negative life events.

Previous study of spirituality has been poorly regarded due to perceived connections to neurotic and psychotic disorders (Plante, 2007; Koenig, 2009), a general lack of understanding of spirituality and difficulties with scientific measures of analysis (Walach & Reich, 2005). However, as the benefits of such beliefs are becoming increasingly recognised as a mediator in recovery, this area is gaining value. As Shaw (2005, p.350) writes: "…spirituality is one of man's strategies for dealing with the limitations of the life cycle, separation and loss, biological fragility, transience, and non-existence". Thus, whilst much focus has been on physical, mental and emotional dimensions of trauma and recovery, the recent shift in considering spiritual aspects allows for a more holistic approach to understanding individuals' experience.

There appears to be a scarcity of research conducted within the UK and a lack of literature pertaining to spirituality itself. Furthermore, whilst many of the studies reviewed consider the outcomes of spiritual beliefs, there appears to be limited research considering the role and meaning of spirituality throughout the life cycle and the healing process. Certainly, if this phenomenon was understood more fully, it could have implications for how it is addressed and integrated within the therapeutic setting.

2.1.2.3 Overview of spiritual experiences/EHEs

The term 'spiritual experiences' may fall under a number of different descriptions, as briefly presented earlier, such as peak experiences (Maslow, 1962), transpersonal experiences (Grof, 1972; 2009) and/or 'exceptional human experiences' (EHEs). The latter was coined by Rhea White in the early 1990's to encompass, in one large body, a variety of experiences that had previously been studied separately within differentially defined disciplines. She classified these under five broad themes: mystical/unitive, psychic, encounter, unusual death-related and exceptional normal experiences (see White, 1993). Due to the specific focus of the current research, such experiences are generally termed 'spiritual' but they could have effectively and appropriately been classified as any of those mentioned. These experiences may often be indescribable, unexplainable and occur within a variety of contexts in many different forms, as considered above. They may be troubling or comforting, enlightening or confusing, yet in each case, the soul, the very inner essence, is touched

and the foundation on which the formulation of life and existence has been based, is invariably shaken. Such spiritual/EHEs may occur spontaneously or through a variety of methods which arguably allow access to different levels of consciousness including, but not exclusively, meditation, fasting, drumming, dance, dreaming and psychedelics.

Research has linked EHEs to both positive and negative outcomes. For example, Palmer and Braud (2002), in their extensive study utilising standardized assessments and qualitative methods, found that mystical/unitive experiences were deemed, by the majority of participants, to have the most profound and beneficial impact on their lives due to an increased sense of meaning and purpose and enhanced positive psychological attitudes. However, participants also highlighted potential areas of caution with identification and disclosure of EHEs, recognising that interpretation could be a challenging process, often difficult due to the ambiguity of potential meanings and the inadequacy of language to effectively describe their experiences. Furthermore, the willingness to disclose to others was often thwarted and only minimally shared with close friends or relatives with whom they felt safe enough to do so.

The investigators note that, after engaging in the study, participants were more likely to interpret their experiences as 'spiritual', thus suggesting an increase in overall spirituality as a result of participating in the research. It is, therefore, postulated that the very nature of discussing and disclosing such events enables increased spirituality as events are acknowledged, embraced and, as such, assimilated. Palmer and Braud conclude that experience and disclosure of EHEs may have important impacts for psychological, physical and spiritual well-being, whilst a cultural openness and willingness to work with such events could not only benefit the individual but society as a whole as we develop insight into human nature and potential. Although the study lacks cross-cultural generalizability, it offers a significant view into the experience and outcomes of EHEs for a sizable portion of the population.

It is noted that within this sub-section prevalence has largely been given to a single study. However, discussion of EHEs/spiritual experiences will continue throughout this review. For an interesting collection of related material, the book 'Exceptional experience and health: Essays on mind, body and human potential' (Ed. Simmonds-Moore, 2012) is recommended. The text provides a multi-disciplinary approach and insight into various ways in which people have exceptional human experiences and how these can impact on physical and mental health, taking into account different levels of consciousness, belief structures and cultural contexts.

2.1.2.4 Transcending consciousness: Psychedelics, Collective Unconscious and Shamanism

It is important to note that many people describe EHEs/spiritual experiences as a result of psychoactive substance use (including ayahuasca, psilocybin, DMT, LSD, cannabis) and, therefore, this area merits inclusion within this research. Although psychedelics are not the focus of this study, it seems important to consider them due to the inherent, often transformative gains that are experienced by some in our culture, a culture which remains largely sceptical and intolerant of such methods of potential healing and transcendence, particularly evident within current UK drug laws and policy (Nutt, 2015).

Psychedelic substances have been used for millennia in spiritual and religious ceremonies across the world and, whilst much of current-day usage may be recreational within our culture and thus potentially desacralized, there is a wealth of research and anecdotal evidence that documents transformative encounters with the self and other (e.g. McKenna, 1992; Schultes, Hofmann & Ratsch, 1998; Metzner, 1999; Strassman, 2000; Pinchbeck, 2004; Hill, 2013; Erowid, 2017). For a comprehensive review of related literature, see Luke (2012a) where wide-ranging paranormal phenomena related to various psychedelic use is explored.

Grof (2009) defines transpersonal experiences as those "involving an expansion or extension of consciousness beyond the usual ego boundaries and beyond the limitations of time and/or space" (p.158). From conducting over four thousand psychedelic therapy sessions, Grof observed and recorded a vast array of experiences that defy established scientific paradigms. Whilst not possible to list them all here, such experiences included past-life incarnations, precognition, animal, plant and group identification, out-of-body experiences, encounters with other universes and their occupants, encounters with various deities and entities and so on. Such experiences were reported on a daily basis and occurred within and between patients. Whilst Grof notes difficulties with interpretation and potential researcher biases, the extent of these findings demonstrate an undeniable commonality and regularity of such experiences and, although a product of LSD in this case, many of these experiences occur in untreated populations in the absence of psychedelics, as previously highlighted.

Grof's findings seem to support Jung's (1959) idea of the collective unconscious in which he proposed that all human beings have access to a pool of consciousness that lies below the personal unconscious. Beyond the individual's often repressed emotions and memories (personal unconscious) exists our inherited past (collective unconscious) which is the totality of ancestral history and experience from the beginning of time. Thus, the content at this level consists mostly of

universal archetypes and symbolism which are evident and recognised the world over. Primordial archetypal images such as the wise man, the mother, the jester, have been depicted since time immemorial throughout religious and spiritual traditions and often appear to the individual through dreams and other moments of bypassed consciousness. Therefore, although Jung was not an advocate of psychedelic use, he was a pioneer of accessing and working with these deeper levels of the psyche in order to reach 'individuation', a process whereby personal and collective unconscious is consciously integrated within the individual, arguably to promote health and wholeness. Thus, he states: "if unconscious processes exist at all, they must belong to the totality of the individual" (p.275, ibid).

As such, just as there is no light without darkness and no joy without sadness, an individual also contains within him/her these polarizations. According to Jung, the lighter aspects may be made visible to the world through the persona, or a 'mask', which is the outward portrayal of what people are willing for others to see. Yet in the 'shadow' lurk repressed desires, impulses and emotions such as sexual fantasy, fear, shame, jealousy, traumatic memories and so on. However, this shadow is also believed to house other more positive qualities such as creativity, insights and instincts. Hence, it is the part of ourselves we may be afraid of yet are largely unaware of, residing deep in the unconscious until everyday consciousness is surpassed and its revelation enabled through such processes as free association, art and meditation. Jung states: "The shadow personifies everything that the subject refuses to acknowledge about himself and yet is always thrusting itself upon him directly or indirectly…" (ibid. p.284-285). Thus, shadow aspects may not only occur in dreams or altered states but in our projections towards others, as we are either attracted or repelled by people we may in fact be exhibiting a latent, disavowed self-aspect, as also suggested by Freud (1936) in the theory of defence mechanisms. Jung therefore advocates confronting this shadow to resolve personal difficulties as, unless this potentially troublesome part is acknowledged, understood and managed, a repetitive cycle continues.

Similarly, this shadow might emerge during what many psychedelic users may commonly refer to as a 'bad trip'. This could include hyper-intensified emotions and frightening and confusing distortions of temporal, spatial, visual, somatic and auditory perceptions. However, as Grof and others (e.g. Hill, 2013; Cabonaro, Bradstreet, Barrett, MacLean, Jesse, Johnson, & Griffiths, 2016) note, this could be better described as a 'challenging experience'. Within psychedelic therapy, the psychedelic experience itself is the therapy; the dose is often intentionally high in order to bypass individual consciousness and pathology. Whether the experience is interdimensional, offering rapid access to other realms, or whether the subconscious sea floods in, the aim is to work through this challenge to

reach a point of healing and self-reconciliation. Traumatic events may present themselves and working through these allows transcendence of continuing harm and difficulty. Facing and embracing this dark side leads to a more functional life as proposed by Jung, Grof and countless others working in psychotherapy; indeed such confrontation is a founding principle of the majority of psychotherapeutic work to a greater or lesser degree. It could be argued that the focus of CBT has little to do with embracing this shadow and is more focused on offering functional self-management techniques. However, the darkness is usually latent in the presenting problem, so to some degree, all therapy should take account of this, although the extent to which this is explored would likely depend on the therapist and the type of therapy being employed.

In his book 'Trauma and the Soul', Kalsched (2013) documents many traumatized individuals' encounters with the numinous. He argues that access to the spiritual realm is particularly available to traumatized people as it often serves as a survival mechanism – a place and/or contact of dissociation and protection against the soul's annihilation. For example, he relays a story of a little girl who was asked by her mother to take a message to her father in his office. Twice the girl returned to her mother in tears saying the angel would not let her enter the study. Exasperated, her mother dragged her back and opened the office door only to find her husband slumped over the chair, dead, having had a heart attack.

Whilst there are many ways to interpret this, including the potentially reductionist psychological view that the child conjured it up as a 'spiritual defence', or the entirely spiritual perspective that the angel is an autonomous entity, visiting from another realm to protect the child from the insufferable reality, Kalsched (p.29) leans towards the psycho-spiritual approach. He believes that the angel could be an aspect of the collective unconscious – a self-protective agent who bridges the two worlds and allows the girl's soul to continue existing within a 'mythopoetic' reality, until such time as she is able to confront the event, perhaps when external supports are established in the physical realm; for example, her mother is available to cushion and contain the emotional trauma. Certainly Jung's contribution of the psyche and the collective unconscious offered revolutionary explanations of many facets of human psychological and spiritual functioning, yet within this there is a seeming rejection of an independent reality where autonomous entities/beings may exist and move between the worlds. Despite this, he does posit that such experiences should be regarded as real and, therefore, objective.

In contrast, whilst a Shamanic perspective accepts that aspects of the human psyche function on different levels and thus the collective unconscious is considered a reality, the traditional view is one of entering different worlds through altered states of consciousness in order to acquire knowledge,

insight, healing and guidance (Harner, 1990; 2013; Ingerman & Wesselman, 2010, MacKinnon, 2012). Within the Upper, Middle and Lower worlds, an individual can meet nature and animal spirits, ascended spirits, archetypal figures, 'split-off' soul parts and shadow aspects. Within the Shamanic view, these encountered entities are usually viewed as objective beings, although MacKinnon (2012) notes that these may be culturally determined and based to some degree on the individual's belief system such that, if an individual rejects the notion of angels for example, they will seldom appear in the shamanic journeys. Thus, what Jung may consider an archetypal figure emerging from the collective unconscious, others, particularly within Shamanic and Pagan circles, would ordinarily consider these independent entities/spirits. However, regardless of the origin of these beings, a psycho-spiritual approach is regarded as paramount as such integration allows the "wisdom of the soul to enrich the limitations of the mind" (Powell & MacKenna, 2009, p.4).

Shamanic practices centre themselves on entering an altered state of consciousness, often through drumming, to journey to these different worlds in order to facilitate healing and wholeness. Similarities between the Western perspective of psychological dissociation and the shamanic view of 'soul-loss' is, therefore, evident. In both cases, an aspect of the self is 'split-off' in order to protect the individual from the effects of trauma and, consequently, offer a means of survival. Within Western psychotherapy, the aim is to integrate all these self-aspects, often by revisiting the trauma whilst integrating emotional and physiological reactions and, frequently, also by cognitive restructuring (Grey, Young & Holmes, 2002; Levine, 2008; Sanderson 2013). However, within Shamanic practice, the shaman embarks on a 'journey' to other realms, on behalf of the client in order to retrieve this lost soul part and reunite it with the individual, assuming the individual is unable to do this for him/herself. In both cases, the underlying premise is that the lack of self-integration, the soul-loss, is the cause of unrest, dis-ease and psychological disturbance within the individual.

In support of this psycho-spiritual approach, Kalsched (ibid) highlights "psychotherapy is partly a spiritual discipline helping both parties participate in this world as a potential space in which both material and spiritual energies support each other toward the goal of what Jung called individuation – realizing your destiny, becoming who you really are, becoming an ensouled person" (p.19). Evidently, some practitioners appear more comfortable with, and indeed promote, the idea of a spiritually integrative approach to facilitate healing and it seems obvious that the unity of psychological and spiritual is what enables harmony within the self and thus offers a more holistic approach to therapy.

2.1.2.5 Spiritual emergency and spiritual bypass

As previously discussed, Grof was a pioneer of psychedelic research in the 1950s, developing immense insight into the realms of the unconscious and how such access, with suitable intervention and support, can facilitate great healing and an enhanced richness to life through transformative experiences. Furthermore, both Grof and Grof (1989; 1990) have written extensively about working with different levels of consciousness and spirituality. In their writing, they make a distinction between 'spiritual emergence' and 'spiritual emergency'. The former relates to spiritual insights and experiences that are positively integrated and can lead to personal growth, whilst the latter refers to psychological distress resulting from these incidents which may often be labelled as psychotic. However, effectively integrated spiritual emergencies may lead to a spiritual emergence whereby an individual's outlook is irrevocably enhanced and a new level of consciousness is reached. They argue that such experiences are common and, if mental health professionals were more aware of these facets of human functioning, they could help individuals express this and thus allow for successful internalisation for positive gains. There would be increased acceptance, understanding and an ability to work through these frightening experiences which could, as they suggest, lead to fewer diagnosis of pathology. They therefore promote the need for professionals to work alongside the spiritual emergency, seeking understanding and offering collaborative support rather than immediately reaching for psychotropic medication; drugs used to supress the experience in an attempt to mould the individual in to what is considered 'normal'. Such a statement is not only based on the noted literature but also a personal opinion based on experience of working within various psychiatric units.

However, the need to accurately diagnose and ascertain whether the experience is spiritual or pathological is paramount for effective management (Grof & Grof, 1989; 1990). Support for this view comes from, among others, Belz (2012), in her essay exploring pathological diagnosis versus spiritual/EH experiences. She highlights that, despite the inclusion of the diagnostic category 'religious or spiritual problems' within the DSM-IV (see Lukoff et al., 1992; Turner et al. 1995), there remain unclear boundaries of what is considered delusional and what is deemed 'enlightened'. The similarities between spiritual experiences and psychotic symptoms, particularly within schizophrenic spectrum and schizotypal disorder, are closely bound including, for example, auditory 'hallucinations', sensing presences and holding beliefs that challenge established cultural norms. Belz claims that: "psychotic experiences are just the extreme expression of traits that are widely expressed in the normal population" (p.230). Thus, the majority of people likely experience EHEs to a greater or lesser extent but the content and context in which these are experienced appears to vary

widely and affect its integration. Further research is required to address this issue more substantially and develop insight into the nature and progression of the spiritual experience and how this can effectively be integrated. From personal experience, it seems that limited understanding of professionals often leads to a fault position of diagnosis in preference of more mystical explanations. Thus, although the inclusion of spiritual/religious problems in the DSM-IV indicates a shift in acknowledging such experiences, it seems there is still some way to go until they are established within society's consciousness and free expression is enabled within a facilitative environment that empowers and validates individuals' potentially awe-inspiring, transformative experiences.

In their study, Heriot-Maitland, Knight and Peters (2012) explored the phenomenology of EHEs (referred to as 'out-of-the ordinary experiences' in their research) or 'psychotic-like symptoms' between a clinical and non-clinical population. They found that within both groups such experiences emerged during periods of challenging emotions and usually when participants had, prior to the occurrence, become isolated and immersed in existential inquiry; the nature of the EHEs was often directly related to the emotional suffering and/or existential questioning. The investigators interpreted the experiences as serving an adaptive psychological process as they acknowledged that, to some degree, participants experienced a "breakdown of conceptual ego boundaries, and the formation of a new conceptual outlook" (p.50). Despite this, it appears that the non-clinical group had multiple appraisals at their disposal in order to help them integrate their experience in addition to benefitting from others' support and acceptance. In contrast, the clinical group had direct experience of being pathologized and feeling invalidated. Furthermore, a protective factor amongst the non-clinical group was the perceived transiency of their experiences yet it seems that this was not the case for those in the clinical group. This could be due to their functioning within the confines of medically-based, symptom-focused psychiatry and as such the EHE itself may be viewed as pervasive and, therefore, problematic. Within such parameters, it seems that the more one tries to ignore something, the louder it becomes; just as continued focus strains the eyes and the object becomes blurred so, too, may focused attention on the EHE/spiritual experience lead to the perception of it as permanent and damaging. Thus those with social support and a variety of conceptual evaluations seemed better able to integrate their experience and continue functioning in society. Accordingly, it appears that research aimed at further exploring the level and type of support required for those in clinical and non-clinical populations would enhance understanding of how to approach the phenomena, amongst both lay people and professionals working on the 'front line'.

Although it is acknowledged that the literature reviewed here is potentially biased towards over-pathologizing spiritual experiences, the critical issue relates to effective management and integration of spiritual/mystical/EH experiences. It is not suggested that there is an absence of psychiatric issues; indeed careful evaluation is required to distinguish between psychotic symptoms and spiritual experiences, as discussed. It is, however, suggested that there appears to be a tendency, within Western society, to diminish the spiritual nature of people's experiences and commonly deem them as psychotic.

It is, therefore, worth noting at this juncture that many people may have difficult experiences as a result of spiritual practices such as meditation and kundalini yoga, for example, which can manifest in various ways, where the recesses of the soul, the shadow, may burst in unannounced and uncontained. Similarly, the energetic pathways being stimulated within kundalini yoga may cause profound physiological, emotional and perceptual effects which, unless 'grounded' and permitted expression by the 'practiser', can potentially lead to problematic self-absorption that may detach people from this physical reality (Sannella, 1987; Welwood, 2000; Clarke, 2010). Hence, the spiritual journey may be a challenging one, which is further evident in the 'shaman's sickness' where s/he may exhibit symptoms similar to schizophrenia, facing innumerable visual and physiological terrors which can include experiences of disembodiment, death and rebirth (Grof, 1990; Harner, 1990). Kalweit (1988) explains: "every sickness is an attempt at healing and every healing an attempt to escape from the everyday neurosis of ordinary consciousness" (cited in Grof & Grof, 1989, p.93). The severity of the sickness is often regarded as a predeterminate of the shaman's level of inner strength and healing ability. Thus, what may be deemed as psychotic behaviour within Western society may in fact be revered in other cultures. The framework is, therefore, different and how this is then incorporated into life varies, which suggests that psychopathology is largely a culturally defined construct. Tobert (2017) offers a useful exploration of this as she considers various approaches to mental health and existential questions from a variety of cultural backgrounds, offering broad diversity within this and highlighting that the: "truth about human experiences appear to be culture bound, time-specific, moveable and dependent on social consensus" (p.11).

Of further consideration of the potentially detrimental aspects of spirituality is the idea of 'spiritual bypass', a term coined by Welwood in 1984. He highlighted that people may become lost in spiritual practice and teachings as a means of avoiding painful and unresolved emotional and psychological distress. The focus becomes on meditation practice, for example, or living a 'spiritual life' where an individual may regard themselves as better equipped, more spiritually advanced and, therefore,

more fully functioning than his contemporaries. Hence, he becomes 'split-off' in the spiritual realm as a defence against facing his own shadow and the perceived distress this may cause. Welwood (1984; 2000) advocates an interplay between a three-pronged holistic approach to personal development which includes 'grounding' – connecting with earthly experiences of physical and psychological processes; 'letting go' – of attachment to narrow structures, learning to 'just be'; and 'awakening the heart' – allowing others access to a part of ourselves without fear and without getting 'stuck'. Spiritual practice may help integrate all these elements; however, as he suggests, psychological intervention is also vital to the process in order to help the individual assimilate and conquer his unconscious and unresolved emotional and psychological issues. Support for this view comes from personal and professional experience whereby those so fused with their goal of spiritual enlightenment have seemingly lost the ability to relate to others or themselves to such a degree that they are unable to take any responsibility for their behaviour and appear to function mostly within an ungrounded spiritual framework, palpably disconnected from ordinary 'reality'.

2.1.3 Spirituality in Therapy

"Spirituality is a central or meaningful part of a majority of our clients' lives. To leave it out of psychotherapy is as much a disservice as imposing spirituality on them" (O'Hanlon, 2006, p.8).

2.1.3.1 Overview of findings

There seems to be limited qualitative research regarding clients' perspectives of spirituality within counselling, particularly in the UK, thus making integration of this often fundamental factor, challenging. The research has, however, highlighted that many spiritual (and religious) clients would like to discuss their beliefs in therapy and would like their counsellor to be aware of their beliefs and practices (Koenig, McCullough & Larson, 2001; Plante, 2007; Post & Wade, 2009). Mayers, Leavey, Vallianatou and Baker (2007) evidence that clients felt their psychological distress combined with therapeutic intervention served to strengthen their faith and was viewed as a spiritual journey itself. Thus, spirituality within therapy is often considered by clients as an integral part of the therapeutic alliance and healing itself. However, there appears to be little to no formal training in this area which can lead practitioners to be wary of addressing such issues in light of causing offence and sabotaging the therapeutic relationship (Walker & Aten, 2012). Furthermore, Harlow (2010) highlights that, within the NHS in England and Wales, there is no definitive guide to supporting individuals' spiritual and religious needs, despite the NHS model of providing holistic care and incorporating such aspects. Within my experience of working within a NHS IAPT (Increasing Access to Psychological Therapies) service, which is largely CBT-based, new worksheets had recently been devised that focused on

religious beliefs but did not appear to consider 'spiritual' beliefs specifically, although it could be argued that spirituality is incorporated in activities aimed at finding meaning and purpose in life and achieving personal goals. However, this remains a tentative link and the spiritual aspect per se appeared to be absent.

Gockel's (2009; 2011) narrative study revealed a 7-step process of integrating spirituality into healing – openness; shifting to a spiritual perspective; going within; connecting with the sacred; undoing patterns; setting healing intentions; following inner guidance to transform mental and physical illness into healing experiences. Her study illuminates a non-linear process to spirituality within the overall healing process. She found that participants who regarded themselves as spiritual were sometimes wary of engaging in therapy due to potential ridicule and misunderstanding on behalf of the therapist. However, participants reportedly actively sought therapists whom they believed embodied a spiritual dimension and often abandoned therapy if they perceived this aspect as missing. Despite this, the majority found the counselling process itself to be an 'extension' of their spirituality and regarded their spirituality as "…an active ingredient in healing" (2011, p.164). This was often dependent on the therapists' inherent qualities and ability in valuing, understanding and incorporating clients' beliefs. Hence, the presence of the core conditions of therapy was regarded as intrinsically spiritual. Furthermore, it was found that counselling, in some cases, initiated spirituality in those who did not describe themselves as such before therapeutic intervention, which could be due to the nature of therapy and its ability to facilitate and strengthen connections to the self and other.

This study aims to expand on Gockel's research to explore spirituality both inside and outside the therapy room and consider the challenges as well as the benefits of a personal spirituality. Within Gockel's recruitment process, emphasis appeared to be on those who drew on spirituality for 'wellness' and to 'promote healing', potentially predetermining participants with positive views and experiences of spirituality. Thus, further understanding of spirituality within the life cycle may have implications for how therapy is approached by both clients and therapists. Furthermore, whilst Gockel's study offers an insight into a Canadian population, this may not be representative of experience in the UK and, therefore, warrants further investigation.

In relation to this, Jenkins (2011) reflected on his research which demonstrated patients had learned to 'play the game' in counselling, censoring that which they felt was deemed unacceptable by their therapist. They reportedly experienced exclusion and pathologizing of their beliefs and, particularly within psychiatric settings, were advised by peers to hide their spirituality from their therapists so as to gain discharge. Arguably, this act of 'splitting' means that part of the individual is absent and,

therefore, adequate healing, achieving 'wholeness' is likely thwarted. Despite this, however, some described positive experiences whereby their therapist remained open and accepting of them, encouraging exploration of their personal spiritual meanings without judging or imposing their own views. Jenkins suggests that therapists spend time evaluating their own spiritual prejudices and seek to find the meaning underlying clients' experiences before assuming insight and understanding.

2.1.3.2 Self-actualization, peak experiences and self-transcendence

Gold (2013) purports that an individual's spiritual identity and values are the driving force to self-actualisation and, as such, suggests that counsellors need to be aware of their clients' spirituality in order to enable them on their journey to fulfilment. Self-actualisation, proposed by Maslow (1943; 1962), is similar to Jung's idea of 'individuation'. Maslow's founding contribution to psychological theory, and to humanistic paradigms in particular, is the 'hierarchy of needs'. Within this, he demonstrated that, once basic physiological and emotional needs have been met, individual attention may be focused on wider motivations, such as seeking belonging within social communities and developing self-esteem. The drive for personal progression becomes more expansive and individuals strive for 'self-actualisation', which Rogers (1961) describes as "the curative force in psychotherapy – man's tendency to actualize himself, to become his potentialities...the urge to expand, extend, develop, mature" (p.350-351).

Therefore, self-actualisation is concerned with fulfilling one's potential by embracing all the personal qualities and characteristics that can achieve this; the whole person becomes activated and integrated. Maslow noted that those who were self-actualising had a number of 'peak experiences'. Although not entirely dissimilar to EHEs, my understanding of these are transient moments of intense emotional, sensory and perceptual awareness within which he listed creativity, insight, athletic achievement, orgasm and a sense of cosmic unity, among other subjective experiences (Maslow, 1961). However, Koltko-Rivera (2006) includes 'mystical experiences' in her summary of peak experiences, which associates them more closely with EHEs. Regardless of the lexis, during peak experiences, the ego is reportedly transcended and the individual becomes an embodiment of the moment rather than a passive objective observer. Maslow recognised that descriptions of peak experiences were 'mythopoetic', speaking the soul's language, and thus signifying the transcendental nature of such experiences. He believed that, during these moments, individuals are closest to their true selves; they function as autonomous beings who have a greater sense of free-will, responsibility and an increased sense of meaning and purpose. It is unclear how he arrived at these assumptions other than through observation, yet it is personally understood that when the

'self' transcends the ego, the shackles are broken and one invariably behaves more organically, beyond the constrictions of expectation and defence.

However, without the grounding of psychotherapeutic intervention, or other forms of self-regulation, absorption in the experience and unfounded focus on achieving these elevated states could potentially harm the individual, similar to spiritual bypass. Arguably, a common goal of therapy is to effectively integrate these experiences into the client's journey and in relation to current functioning. Hence, the individual becomes a complete version of the experience whereby they exist within their true potential, integrating all their capabilities and embracing the agony as well as the ecstasy.

'Self-transcendence' is the more recently added capstone of the pyramid. Maslow observed that people who had peak experiences sought to increase the frequency of them through various practices. He argued that, once the self is actualized, more is sought and, invariably, this takes the form of a search beyond the self, which could include service to others and/or greater connection to something other than the self (Koltko-Rivera, 2006; Maslow, 1961). He initially attributed peak experiences to those who had reached self-actualization but later recognised that non-actualized people also had such experiences, which would seem more accurate given the breadth and rate of incidence of these experiences. So, in summary, using Maslow's hierarchy of needs as a foundation, individuals seek transcendence beyond self-fulfilment in pursuit of their spirituality. Arguably this provides greater meaning and purpose and is a driving force in reaching their full potential. Whilst Maslow's theory perhaps lacks scientific rigour, observation of the human condition has demonstrated time and again that his ideas are accurate, hence its solid grounding within psychology.

2.1.3.3 The varieties of therapy

Aten & Worthington (2009) suggest that more useful definitions of spirituality are required and therapeutic interventions that employ both Eastern and Western spiritual beliefs are recommended for testing and development. It seems that such a notion is particularly relevant in today's society given the blurring of cultural boundaries and the inflowing of diverse belief systems, not only within therapy but society as a whole. Alan Watts (1915-1973) was a beacon in introducing Eastern ideas into Western culture and, although arguably ahead of his time, there currently seem to be pockets of established roots within society. Although accurate statistics are not possible, there appears to be increased access and attendance at various 'spiritual' workshops such as yoga, tai chi, meditation, gong baths and so on, suggesting many people are seeking and valuing this intervention within their

lives. Furthermore, Eastern philosophy is becoming more integrated into psychotherapeutic practice with recent developments in therapies such as Mindfulness-Based Cognitive Therapy (MBCT) (Segal, Teasdale, & Williams, 2002), Acceptance and Commitment Therapy (ACT) (Hayes, 2005) and Compassion Focused Therapy (CFT) (Gilbert, 2010), all of which focus increasingly on self-acceptance as opposed to the quest for change in the pursuit of an external happiness.

The practice of mindfulness has surged in, sweeping through schools, prisons and psychiatric units, as personally observed, and highlighted by Barker (2013), in addition to the numerous therapeutic interventions noted above. However, it is argued that planting Eastern methods onto Western soil weakens the roots as what is left is a watered-down version, far removed from the spiritual tradition in which it originated and is embedded in the East (Rosenbaum, 2009; Rosch, 2007). Friedman (2010) counteracts this by stating that meditation and mindfulness "go back to the very origins of humanity" (p.186) and, therefore, should be, and is, accessible to all. Thus, it seems that Eastern and Western ideas are increasingly merging but, arguably, the mainstream therapies, although perhaps edging towards a spiritual dimension, still appear to be primarily psychologically focused and based within cognitive-behavioural parameters.

That said, there are at least three modalities where the possibility and indeed potential of 'transpersonal' experiences are consciously worked with and welcomed into the therapy room. These are Psychosynthesis, founded by Assagioli (see 1965) early in the twentieth century and influenced by psychoanalysis, Holotropic Breath-work developed by Grof and Grof (see 2010), initiated by much of their insight gained when working with psychedelic therapy in the 1970s and Core Process Psychotherapy, established by Sills and Sills in 1982 (see Sills, 2009) which combines Eastern meditation practices with Western psychology. In all these interventions, various states of consciousness are encouraged and worked with, enabling a more holistic approach which attends to somatic, emotional, mental and spiritual dimensions, using a variety of methods such as breathing practices, meditation, gestalt models, creativity, dream work, journaling and so on. Common to all these interventions is a focus on establishing personal grounding by increasing connection to the self through body awareness whilst facilitating exploration of the further reaches of the individual's psyche and perhaps beyond. Similarly, all these interventions appear to be based on an ethos of inherent goodness, much like humanistic theory whereby the individual is regarded to contain within him/her the capability to grow, heal and transcend life's trials and traumas. Thus, rather than being problem-focused, the principle is to develop and nurture the individual's intrinsic healing and goodness.

Despite these approaches, understanding of spirituality per se and the meaning of this throughout the life cycle appears to be limited within the general population. Further comprehension of this could have implications in the therapy room where this potentially fundamental aspect may be included and addressed more readily. Spirituality can define people and influence their responses to challenging life events, their self-perception and how they construct their lives around this. Spiritual experiences can be frightening, sometimes leading to isolation as people are wary of the responses of others and, in more severe cases, they both fear and/or receive a psychiatric diagnosis. This area appears under-researched yet, if there was further understanding of the experience of spirituality what may be offered are possible advanced future therapeutic interventions to incorporate these factors and/or encourage practices to further facilitate healing. As such, a close encounter with some very giving individuals seeks to gain insight into their spiritual journey within which is included their experience of spirituality within therapy.

2.2 Mapping the Route

As already outlined, this research is a qualitative phenomenological study, concerned with individuals' lived experience of spirituality. It seeks to address gaps in the literature as much of the research has largely focused on religiosity within organised monotheistic paradigms as opposed to spirituality per se. There appears to be limited research within the UK which pertains to individuals' experience of spirituality throughout the life cycle, including within therapy and therefore this study seeks to contribute to existing literature by addressing the following research question:

- ***How is the spiritual journey experienced by those who have attended psychological therapy?***

Within this chapter, the decision for conducting qualitative as opposed to quantitative research will be outlined. Following this, the epistemological stance underpinning the study and the methodological design will be described. Although reflexivity is woven into the tapestry of this whole chapter, it will conclude with a consideration of how reflexivity issues have been addressed.

2.2.1 Rationale for a qualitative versus quantitative approach

This is a phenomenological qualitative study as it aims to explore a handful of people's lived experience of spirituality, thereby gaining depth of insight and understanding. In order to 'go deep' one needs to delve in to the depth, breadth and uncertainty of the unknown, allowing space and opportunity for matter to emerge.

Quantitative methods, largely based within a positivist framework, have different aims to qualitative studies as their objective is to provide statistical/numerical data usually encompassing large samples of people. Biggerstaff (2012) argues that, whilst such information may be useful within clinical drug trials, outcome measures and improvements within health care, for example, qualitative methods are considered more appropriate when dealing with people's feelings, emotions and reflections on experience. This view is largely supported by Haverkamp, Morrow and Ponterotto (2005) (although most, if not all, qualitative researchers support this view) who highlight the need for further integration of qualitative and mixed method approaches, particularly within the field of counselling psychology, with its inherent concern with human nature.

Accordingly, this study lends itself to a qualitative methodology as this allows an exploration of emerging data and openness to follow threads as they weave new and unknown tapestries, as opposed to determining a priori hypotheses (quantitative). As such, the researcher's subjectivity is

considered integral to the process and an inherent aspect of the emerging meaning-making (Biggerstaff, 2012; Morrow, 2005). This contrasts to quantitative methods whereby the researcher aims to be detached and objective, basing findings on causal-effect links. Within counselling psychology, where the focus is on trying to understand people's experience and join them in their world, it seems entirely relevant, and indeed necessary, to enter into a process which allows for freedom of expression, time for exploration and opportunity to reflect and be reflexive regarding data collection, analysis and researcher impact.

Within the history of qualitative research, there existed many debates regarding its authenticity and value. However, these appear to have largely been settled and qualitative methods are increasingly accepted within mainstream psychology. Yardley (2000) outlines four ways in which the validity of a qualitative study can be addressed – sensitivity to context; commitment and rigour; transparency and coherence; impact and importance.

The first principle relates to theoretical relevance and understanding of the topic, in addition to considerations of socio-cultural factors influencing the research and the relationship between the researcher and participant. 'Commitment and rigour' is concerned with the level of the researcher's immersion in the data, methodological skill and competence and rigorous detailed analysis. 'Transparency and coherence' is the level of researcher openness regarding methodological decisions, such as choice of sample group, interview questions, analysis and so on. The degree of appropriateness of research design in order to answer the question is considered, as is the level of reflexivity. Finally, 'impact and importance' relates to whether the research reveals anything new which may, or may not, have implications for change. This is considered a key area of evaluating validity.

Yardley (ibid) appears to encompass Elliott, Fischer and Rennie's (1999) seven guidelines for qualitative research, suggesting these are well-founded and agreed upon principles of assessing validity. To further enhance this, Smith (2003) describes using an independent audit whereby a 'paper trail' is filed in such a way as to lead an independent researcher through the process, from the raw data to the final write-up. This allows one to establish whether the arguments and findings are consistent with the research process. This may be done as minimally or maximally as possible, depending on requirements and practical constraints. For example, I would welcome, and indeed expect, my research supervisor to check through my transcripts and initial analysis to ensure good practice and help develop skills. Inexperience and potential blinding within data means this early independent insight could be hugely beneficial to maintain coherence. Keeping a reflective journal, which I did, also helped to maintain self-reflexivity.

The next section will consider the epistemological underpinning.

2.2.2 Epistemological Framework

Robson (2011) states that we should not become overwhelmed and drown under the weight of 'philosophising' but instead we should spend our energy on simply conducting the investigation. Although I partly agree with this, I also accept the view of the majority of qualitative researchers, including those already mentioned in this chapter, who argue that philosophical discussion and consideration is required to effectively guide the study and ascertain appropriate paradigms and methodologies for particular research questions. Establishing such a foundation contextualises the research and provides grounding on which to later evaluate the 'quality and trustworthiness' of the findings and therefore, hopefully, be better equipped to promote its value (Morrow, 2005; Willig, 2013).

This study aims to explore the lived experience of spirituality throughout particular individuals' lives and, as such, is a phenomenological idiographic approach based on a constructivist-interpretivist epistemology. Phenomenology and idiography will be addressed later under 'Interpretative Phenomenological Analysis (IPA)' but it is worth considering the constructivist-interpretivist paradigm at this juncture.

Within the literature, it sometimes appears challenging to find a consensus of terminology that allows one to categorize themselves sufficiently within a particular epistemological stance. Whilst some have separated 'interpretivist' and 'constructivist' and placed them on a continuum, as described by Morrow, Castaneda-Sound and Abrams (2012), I adhere to Ponterotto's (2005) understanding of a combined 'constructivist-interpretivist' approach. It makes sense to me to combine them as their common ground is concerned with meaning-making – meaning and experience is both constructed and interpreted within and between individuals. Morrow et al. (2012) also highlight the confusion regarding whether the construct is internally or socially constructed and thus, it could be argued that all interpretation and meaning-making falls within a social-constructionist paradigm and based on social history (Dilthey, 1977). However, whilst the influence of the broader social and cultural structure cannot be ignored, I am of the opinion that, even within a shared existence, there remain individual experiences which take it beyond social constructs; for example, despite sharing the same social network and existing within the same socio-political environment, being a short ('vertically challenged') person, I will see the world very differently from a taller person. This simple example demonstrates the extent of difference in experience and interpretation of meanings without yet even considering other individual physical, psychological, emotional and spiritual factors which contribute to people's perception and experience of the world.

Thus, the underlying premise is that reality is constructed in the individual's mind and this cannot be extracted as an independent entity from the external world. The goal of the constructivist-interpretivist is, therefore, to try and understand this lived experience, interpreting and making sense of that which may not be obviously evident, thus allowing this to be brought into consciousness (Dilthey, 1977; Schwandt, 2000). The role of the researcher is, therefore, paramount to this process.

2.2.2.1 *Axiology*

Axiology is concerned with the role of the researcher within the research enquiry and is, therefore, linked to issues of reflexivity. Whilst positivists and post-positivists, particularly within quantitative methods, advocate and indeed aspire for objectivity and detachment from participants, the opposite is true for constructivist-interpretivists. Within this paradigm, I am, as the researcher, inextricably involved with the process and direction of the research, as spending time with participants, building rapport and engaging in a dualistic interaction is fundamental to capturing the nature of participants' experience. As such, the impact and influence of my involvement cannot be denied.

Many researchers and theorists including Ponterotto (2005), Willig (2013) and Smith, Flowers and Larkin (2009) describe the process of 'bracketing', whereby we 'put aside' our values, pre-conceptions and distracting focus in order to pay full attention to that which we are studying. LeVasseur (2003) describes bracketing as "persistent curiosity" (p.419). The idea of bracketing, however, keeps in mind that, although these are placed on one side, they cannot be eliminated altogether. Researcher values and experience are inherent and cannot be extracted from the process; to do so would be to deny the very interactions that have facilitated the study. However, awareness of the bracketed material is reflected on and made explicit during analysis and write-up. Yet, at the point of data collection, such reflections may also be highlighted - much like a psychotherapist who reflects on the counter-transference within therapy to further understand the client, the researcher may use her awareness of her subjectivity to aid the process and develop further insight into the participant's world of experience (Pietkiewicz and Smith, 2014). Within this chapter, my values and biases will be considered more closely under 'Reflexivity'.

2.2.2.2 *Ontology*

Ontology is concerned with the nature of reality, experience and existence. Therefore, the ontological basis of this research is 'relativist' as I believe individuals' worlds are subjective, based on their many varied life experiences and psychological processes. Life will be experienced differently according to previous history, situational contexts, influence of others, perceptions, understandings,

physicality and so on. Thus, I view experience as relative to each person - there are no definitive answers or causal-effect links that can determine people's phenomenology. As mentioned under epistemology, there may be shared experience and understanding within social and cultural structures, but the layers of an individual's reality, in my opinion, go much deeper than this.

Ponterotto (2005) states that, within the constructivist-interpretivist paradigm, there are a multitude of meanings for similar phenomena and, therefore, a vast array of interpretations of the data. He suggests that researchers identifying with this stance would be unlikely to seek verification of their analysis from another researcher, as both may be equally valid and the aim is not to find a 'single' truth. However, it could be argued that seeking verification could aid the process and bring into consciousness further material which may have been overlooked due to being so fully immersed in, and perhaps blinded by, the data. Morse et al. (2002) describe a variety of verification strategies to be employed throughout the study, within itself and by the researcher; for example, methodological coherence, appropriate sampling, maintaining a dynamic relationship between data and analysis, theoretical development and understanding. Such focus, according to them, serves to enhance the validity of the study. I propose that, if one is engaged with their research, these considerations would likely feature throughout.

Data collection and analysis will be considered more fully in later sections.

2.2.3 Rationale for selection of Interpretative Phenomenological Analysis (IPA)

IPA was developed by Jonathan Smith (Smith, Harre and Van Langenhove, 1995) as a systematic approach to studying experiential aspects of human life and living. He wanted a method which was experiential and qualitative yet would still be embraced by mainstream psychology (Shinebourne, 2011). As such, IPA offers an opportunity to broaden the lens of insight and penetrate the depth of experience where quantitative methods largely fail.

The aim of this research was to understand individuals' experience of spirituality, by entering their world and gaining insight into their perspective and meaning-making. IPA was therefore considered the most appropriate method given its proposed function and its theoretical foundations of phenomenology (study of experience and consciousness), hermeneutics (theory of interpretation) and idiography (in-depth study of something particular). The following sections will address these individually.

2.2.4 IPA philosophical underpinnings

2.2.4.1 *Phenomenology*

Phenomenology is a philosophical approach to studying human experience and was developed by Husserl (1927), Heidegger (1962/1927), Merleau-Ponty (1962) and Sartre (1948). These philosophers were concerned with how individuals experience their world, how they talk about and relate to objects and events and how they make sense of this. Husserl described a process of becoming conscious of consciousness rather than blindly engaging in experience – an idea which could be akin to the evermore popular 'mindfulness', whereby individuals are encouraged to pay attention to their lived experience.

Willig (2013, p.85) supports Husserl's notion of consciousness and states "…phenomenology focuses upon the content of consciousness and the individual's experience of the world", thus bringing to light the object of consciousness in order to understand it and gain insight. Phenomenological studies are, therefore, interested in how people attend to, and make sense of, their experience, allowing this to emerge through individuals' descriptions and perceptions rather than forcing pre-ordained categories of conceptual or scientific criteria (Pietkiewicz and Smith, 2014). This is where 'bracketing' is involved in order that the 'phenomenon can speak for itself', unhindered by researcher preconceptions.

Wertz (2005) believes that phenomenology is particularly relevant to counselling psychology due to it being the "study of subjectivity and the full human person…capturing the richness and complexity of psychological life..." (p.176). Such an approach is relevant not only within counselling psychology but for this study specifically, as it seeks to understand participants' lived experience of a very personal, unique and potentially complex phenomenon such as spirituality.

2.2.4.2 *Idiography*

Idiography is concerned with in-depth analysis of single cases, the fundamental principle being to reach saturation of one case before moving on to the next. Analysis of each case is thorough, systematic and individual and only on completion of one analysis should the researcher move on to the next and become as equally immersed. When each case has been fully analysed, general statements may be offered and similarities and differences reflected on (Pietkiewicz & Smith, 2014; Smith et al. 2009).

Whilst many proponents of quantitative methods have questioned the lack of generalizability of such limited singular focus, Smith (2014) argues that "the very detail of the individual also brings us

closer to significant aspects of a shared humanity" (p.43). This is supported by the idea that understanding the atom, for example, helps us understand the universe. However, caution is advised regarding making generalising statements across boundaries of gender, class, age and culture for example (Morrow, 2005) and the context and characteristics of the research sample should be borne in mind.

2.2.4.3 *Hermeneutics*

The word 'hermeneutics' comes from Greek meaning 'to interpret, to translate' and it is, therefore, a theory of interpretation, most notably developed by Heidegger (1962). In his book 'Being and Time', he proposes that the nature of being has been largely overlooked as it has become obvious. He suggests that the very essence of living and being is accessed through interpretation, a process which may offer insight into more apparent, visible meanings but also potentially leads to disclosure of hidden meanings. Thus, our world is experienced and understood by way of our interpretation. Smith et al. (2009) succinctly summarise this interaction between phenomenology and interpretation stating "without the phenomenology, there would be nothing to interpret, without the hermeneutics, the phenomenon would not be seen" (p.37).

The researcher's role within this process is fundamental to uncovering meanings hidden within the experience and the phenomenon - within this dynamic interaction, the researcher influences the extent to which access and understanding of the participant's world is gained. This is considered a 'double hermeneutic' as the researcher is trying to make sense of the participant who, in turn, is making sense of their experience (Smith and Osborn, 2008).

Smith et al. (2009) refer to the 'hermeneutic circle' which refers to the continual cycle between pre-supposition and interpretation; a moving between analysis of the parts and analysis of the whole and a way of thinking that is a perpetual process rather than a linear completion of steps. The researcher moves backwards and forwards between preconceptions, interpretation of the data and the emergence of new insights, which lead to an unveiling of further preconceptions and further interpretation and so on. Completing the hermeneutic circle may be achieved by approaching participants and seeking clarification that the meanings described by the researcher are in fact congruent with participants' understanding. This is, however, time-consuming and not a requisite feature of IPA but rather a closer resemblance to action research (Reason and Bradbury, 2008).

Related to this cycle, Ricoeur (1970) distinguished between a 'hermeneutics of empathy' and a 'hermeneutics of suspicion', both of which provide different levels of interpretation. The former is engaged at the meaning level, to try and understand the participant from their point of view and

enter their world as closely as possible. Such engagement may be more present at the interview stage and in the initial readings of the transcripts. As analysis deepens, the hermeneutic of suspicion and critical questioning may evolve as the researcher becomes more immersed in the accounts and questions are sparked. Smith et al. (2009) state that a successful IPA study incorporates these two positions and maintain that interpretation should always be based on the data and not incorporated from external theoretical positions; the hermeneutics should disclose what is already inherent within participant accounts, whether seen or unseen, known or unknown.

Within all of this and as highlighted throughout, the researcher's preconceptions, biases and personal biographies all impact and shape the enquiry, such that continual bracketing, alongside transparent reflection and reflexivity, can broaden the scope of insight and disclosure of meaning.

2.2.5 Research Design

2.2.5.1 Constructing the interview schedule

The interview schedule consisted of six exploratory questions aimed at facilitating openness from the participants (Appendix A) related to their experience of spirituality. Consideration was given to avoid leading, manipulative and closed questions which serve to direct and influence respondents in a particular way (Smith et al., 2009), perhaps in an attempt to satisfy the researcher's preconceptions and desired outcomes. Prompts were written on the schedule by way of directing the researcher to consider certain aspects; for example, participants were asked 'How would you describe your spirituality and what it means to you?' (Prompt for beliefs and practices), 'How has spirituality, if at all, been experienced within therapy?' (Prompt for therapist acknowledgment/challenges/benefits). One question was aimed at bypassing language limitations to gain access to more sensory experience such as, 'If you were to see/hear/feel spirituality (e.g. draw, make, play), what would it look/feel/sound like?'

2.2.5.2 Recruitment process

A number of posters (Appendix B) were distributed in various places across the UK. Initially, the majority of these were placed in various health, well-being and 'spiritual' centres in South-East England, including health food shops, meditation and Buddhist centres. They were then distributed further afield and handed out to other professionals in the discipline across the UK. There were no responses from any of these attempts. I posted the advert on my own social media page and on various social media groups that I considered to fall under the remit of spiritual/transpersonal, to include 'The Journal of Exceptional Experiences and Psychology'. These were re-posted by other individuals and, through direct contact and word-of-mouth, all participants were recruited.

2.2.5.3 Participants

Participants were selected after they demonstrated interest in the study. Within IPA, a homogenous group is sought as the question relates to common variables e.g. spirituality and therapy attendance. The only requirements, as stated in the recruitment poster, were to be over 18 years of age, have spiritual beliefs and have experience of therapy, either past or current.

Participants were considered mentally sound, i.e. functioning in the absence of severe mental health problems, which was remotely screened during interactions before the interview. This was ascertained through various written communications prior to meeting which demonstrated participants to be coherent and present through their relevant, rational and articulate responses. Further discussions related to the meeting venue revealed that all participants were independent entities and not subject to inpatient psychiatric services and they had all offered some background as to why they considered themselves suitable for the study, none of which raised concerns. Furthermore, the information and consent forms were emailed before meeting and they were encouraged to raise any issues beforehand; none were raised.

There were no cultural or ethnical requirements, although diversity would have been welcomed to offer a more representative sample. Fluency in English was fundamental to avoid any unnecessary misunderstandings or interpretations; as Biggerstaff and Thompson (2008) highlight, the researcher needs to understand the participants' language to begin to make sense of their world.

Whilst there is much discussion around appropriate sample size for such a study, Smith et al. (2009) suggest a professional doctorate should include between 4-10 interviews, although this could include the same participants being interviewed twice. Within this study, it was decided to interview eight people in order to provide a wealth of rich data and allow for potential commonalities to emerge. Although 'quality not quantity' is the catchphrase for qualitative research, it was felt that eight people's experience would offer breadth of insight as well as depth.

I considered conducting a focus group as described by Smith (2004) but decided against this as I felt depth of data would be more readily achieved within individual meetings, given the intimate nature of these and the opportunity to more easily explore certain channels. A focus group not only limits time spent with each individual but has the potential to hinder insight and reflection as participants may feel self-conscious within a group setting. To me, it felt like a focus group would offer a glimpse under the surface but would not allow for deep exploration.

There were four females and four males with an age range of 31-48 years. Participants included a teacher, nurse, student, builder, engineer, charity worker and two who were unemployed. Half were

single, three were married and one was in a long-term partnership. The geographical representation spanned Scotland (1), North West (2), South East (3) and South West (2) England. All participants were Caucasian, identifying as British or Scottish.

All were articulate, with the majority having completed undergraduate and post-graduate training. The participants' ability to communicate their experiences allowed for a smoother interaction and a level of coherence. The inherent ineffability of the subject matter proved challenging at times as, despite their cognizance, perceived adequate self-expression was sometimes a cause of frustration.

2.2.5.4 The interview procedure

A pilot interview was initially conducted with a colleague to ascertain the effectiveness of the questions. However, this could have been more comprehensive as I found I wanted to add different questions after the first two real interviews which may have been identified through an effective pilot study. However, this is debatable as it is assumed that, within qualitative studies, the structure will alter depending on each interview due to the subjective nature (Smith et al. 2009). Such fluid structure allowed the interview to be participant-led, following their journey through unchartered territory, thus providing rich insight into their meanings and experience of spirituality. Semi-structured interviews enabled individuals increased freedom to describe and connect with their material and share their lived experience more fully. Accordingly, the structure was loose, with general prompts to explore the areas of interest.

Before the interview, participants were informed briefly of the questions they would be asked in order to ease them into the process, reassure them and begin to build rapport. I aimed to encourage them further by stating the objective was interest in their experience and I reminded them that there were no right or wrong answers. Accordingly, the word 'interview' was qualified to help them consider the interaction as more of an informal discussion. Again, the aim was to encourage a free-flowing journey of reflection, discovery and insight, a journey more readily embarked upon when an individual feels safe and supported.

A few questions were consistent throughout the interviews and, despite trying to adhere to a level of standardisation, I found myself following the volunteer's journey. Whilst some researchers advocate the importance of consistency in interview schedule, Ponterotto (2005) describes 'hermeneutical discovery' whereby the following of participant material allows for deeper insights to be gained, as the researcher naturally enters their world rather than imposing their own. Evidently, people's experiences vary widely and, as such, the direction of the interviews can be quite different, although the areas of interest remain stable.

The aim was to restrict interviews to 60 minutes to encourage focus and offer a manageable amount of data. However, in reality, owing to the generosity of participants' insights and reflections, and my tussle with boundaries, this time limit was invariably exceeded. Polkinghorne (2005) recommends that researchers have three separate interviews with participants in order to build rapport and gain deeper insight. I believe this would have been unnecessary, however, as it would have been overly time-consuming and could have produced an overwhelming amount of data. Furthermore, I feel I was generally able to build rapport quickly with participants and, therefore, did not require three meetings.

The interviews were audio-recorded, transcribed and interpretative phenomenological analysis was used to explore the data.

2.2.6 Ethical considerations

The research adhered to the British Psychological Society (BPS) and Health Care Professionals Council (HCPC) code of ethics and was cleared by the City University Psychology Research Ethics Committee (Appendix C). The standard considerations to include 'respect, competence, responsibility and integrity' will feature throughout the following sections.

2.2.6.1 *Confidentiality, Containment and Support*

Confidentiality was respected throughout the process. All participants were interviewed separately except one couple who remained together throughout, as was their choice. This appeared to be for practical reasons to avoid 'making themselves scarce' within other areas of their home (please see methodological reflexivity). The audio-recordings and transcripts were encrypted/password protected and maintained securely, in a locked container, allowing only researcher access. All names and personal identifying information was altered to protect anonymity, a measure which was instigated at the point of transcription.

Interviews were held in a place convenient to participants, either in or near their homes, in a private setting in order to maintain confidentiality. One was held at City University and another at a charitable counselling organisation. Such settings served to embody a sense of safety and security and, hopefully, caused minimal disruption to participants. However, please see p.88 in the next chapter, where this proved challenging.

The vulnerability of participants was considered as the research evoked some traumatic memories and very personal disclosures. Although this was not the aim of the research per se, the open discussions and direction of the interviews prompted emotive insights and recollections. Within the interviews, I was able to draw on my skills as a therapist and offer some of the core conditions

described by Rogers (1961), to include unconditional positive regard, empathy and congruence. Indeed, at times, it was challenging to maintain the role of researcher as opposed to adopting the therapist's position and exploring other avenues whilst offering a containing, therapeutic space. I believe my ability to 'get alongside' individuals allowed them to feel safe enough to share their experiences. Participants' mental state was checked regularly throughout the meeting through observation and verbal interaction. After the interview, participants were debriefed (Appendix D) and they were offered contact details for ongoing support, including Samaritans and Mind, should they feel they needed it. They were also informed of my availability to answer any questions following the meeting.

2.2.6.2 *Consent*

After demonstrating interest and prior to the interview, the research information sheet (Appendix E) and informed consent (Appendix F) were sent electronically to participants so the nature of the study was made explicit before finally agreeing to volunteer. Consent forms were signed at interview. The purpose of the research was transparent from the outset and participants had the right to withdraw from the study at any time and to request removal of their data. Having considered offering an incentive, I decided against this as I wanted to attract those who considered themselves 'spiritual' and as such, by my value judgement, would not necessarily be motivated by monetary gain and would simply wish to share their experiences. This appeared to be the case.

2.2.7 Reflexivity

Creswell (2003) sums up the idea of reflexivity in his statement: "The qualitative researcher systematically reflects on who he or she is in the inquiry and is sensitive to his or her personal biography and how it shapes the study" (p.182) or, as Shaw (2010) states, reflexivity is an "explicit evaluation of the self" (p.234) within the (co)-construction of the meaning-making process. As the researcher, I turn the mirror back on myself to evaluate how my very being interacts and thus co-creates insight and understanding. The nature of a study such as this necessitates that the researcher is the thread woven through the rich tapestry of individual meaning as it unfolds against a backdrop of common experiential phenomena. Thus, the symbiotic relationship between thread and tapestry provides form and indeed, without each other, there would be no masterpiece!

Willig (2013, p. 25) states "…qualitative research acknowledges that the researcher influences and shapes the research process…" Thus, the very nature of choosing a particular research topic and the questions and prompts therein assumes personal resonance and beliefs related to the subject matter. However, researchers should be aware of their influence, particularly at the interview stage,

whereby such interference can inadvertently steer participants down certain avenues, away from their own experience. Since we are a product of our values, beliefs and experiences, attempting to separate ourselves from this is not only impossible but could appear mechanical and robotic - not the congruence, warmth and empathy required for crucial inter-relatedness. Thus, researcher subjectivity has the potential to hinder the process by limiting participants' opportunity for self-expression or, conversely, to enhance the process by embodying this expression and becoming a conduit of exploration through evaluation of self and other as far as possible. Hence, reflexivity provides an opportunity for a 'holistic approach' to research as all facets of the interaction are considered (Shaw, 2010).

2.2.7.1 *Personal reflexivity*

At times during the interviews, my personal beliefs, interests and experiences were triggered which undoubtedly affected my interaction and questioning style. I was raised within a Christian philosophy, albeit not overly stringent – my father had previously studied theology in order to become a pastor (which he later decided against) and my grandmother had converted to Christianity following a frightening experience whilst part of the Spiritualist community. As a family, we attended church on special occasions and for religious celebrations, although it was an enforced weekly endeavour whilst at boarding school. I felt guilty much of the time in case God punished me, I felt I should be doing more 'good' and I should give of myself, so much so, I considered sacrificial deaths and vowing to a life of ritual and celibacy in order to serve God. I was confirmed in my early teens, believing this would somehow give me indemnity. However, I never took communion and I turned away from religion as I began to further question its authenticity. Consequently, I perceived it as controlling, fear-mongering and hypocritical – stifling expression and freedom through fear of punishment. Thus, my general attitude towards potentially damaging religion undoubtedly influenced my decision to focus this study on spirituality as opposed to monotheistic traditions.

My interest in spirituality and things 'other-worldly' has been long-standing, with various experiences throughout my life helping to develop and strengthen my beliefs. When faced with different life challenges I have often turned to various spiritual practices, encouraging a searching within, seeking solitude, whilst also reaching out for connection. I have found my beliefs a comfort, often providing meaning when all sense seems lost and encouraging a means to go on. At times, however, I have also doubted, questioned and battled with that which I hold true. Around the time of my mother's recent death, a number of occurrences happened, such as sensing strong aromas, seeing figures around her bedside, items disappearing and reappearing and many electrical disturbances, all of which, for me, confirmed my belief in life beyond. At other times, however, I

have doubted and questioned my experiences and faced existential quandaries. Thus, my spiritual beliefs and experiences have offered a point of strength but also a crippling sense of madness. At times, particularly when younger, I felt isolated, rejected and misunderstood and I can, therefore, appreciate the challenges involved in multi-dimensional exploration. A poem written at the age of 15 perhaps illustrates this:

Admitting Madness

A cell with padded walls,
Corridors leading to empty halls,
The feeling of cleanliness,
But the lack of friendliness.
Is this my new home for the year?
Is my future predicted correct in this tear?
I know my mind holds something strange,
But I know my mind is one I cannot change.
I perhaps am going mad,
But to admit it is just too sad.
Worrying through many nights and days
What is to become of my weird ways.
I'll kiss goodbye life's normality
And enter with my own formality.
I've lost all understanding now
So I think it's time to take my bow.

Throughout my life I have encountered many anomalous 'spiritual' experiences - exploration of mediumship, psychedelics, shamanism and meditation, for example, have no doubt contributed to these, although I was aware of 'something other' from a very young age. Hence, I believe that many physical complaints are a result of emotional and spiritual unrest and many psychiatric diagnoses are often due to misunderstanding within the healthcare profession. This tendency to overlook the spiritual nature of experience and instead pathologize and 'treat' the 'abnormality' has been demonstrated throughout my clinical work within prisons and psychiatric units, in addition to personal experience and dealings with others. This is an area I feel strongly about and was the initial basis of this research; however, due to ethical considerations, I decided not to focus on a specifically diagnosed population. Instead, I was curious about how those within mainstream therapy experienced their spirituality and I believed that most would have a negative experience, with their spirituality largely being overlooked and misunderstood.

My desire for people, including myself, to overcome difficulties, is intrinsically bound with my spiritual, fatalistic beliefs in life's necessary trials for personal growth. My preconception was that spirituality would always be present although it may manifest in different guises and I believed it would mostly play a facilitative role in life experience.

Taking account of these prejudices, it was critical I remained consciously aware of them in order to monitor and limit a potentially dramatic influence on the research findings, where what is recorded is a product of my own meanderings and not a true insight into participants. As such, a reflective diary was maintained to acknowledge and express my personal thoughts and feelings whilst discussions with other professionals and non-professionals allowed for further self-exploration. On many occasions, my pre-conceived ideas were encouragingly challenged. I was receptive to these differences and conscious of giving them equal merit in the findings.

2.2.7.2 *Methodological reflexivity*

The initial research question was broadly concerned with 'spirituality in life' and 'spirituality in therapy'. Although I believed the questions to be related and interlinked there was perhaps an inherent separation in my own mind and a perceived necessity to include specific focus on therapy in order to make the research relevant to a counselling psychology doctorate. Following advice within the viva, consideration was given to the option of developing a robust argument for approaching what were considered to be two unrelated questions. I contacted Jonathan Smith as a guide, who stated, "In principle I can't really see what the problem is with addressing two questions (which are clearly related) in the thesis" (email correspondence, 16.11.17). Despite this, it proved challenging to find similarly conducted studies to support a robust enough justification. Furthermore, since the viva I have reflected and realise that spirituality cannot and does not necessarily need to be separated and compartmentalised as the 'spiritual journey' naturally includes participants' therapy as it encompasses all experiences of the individual. The revised research question therefore incorporates the literature review, analysis and findings which all remain relevant, yet the focus targets the single phenomenon of spirituality within a population who have attended therapy. Thus, the research may now be considered a unified whole rather than two independent studies.

Regarding the interview procedure, one couple decided to remain together in the same room throughout the process, although the one not being interviewed was simultaneously engaged in another activity. It seemed they were very open and trusting of each other with no secrets between them, and perhaps their remaining together helped maintain a sense of ease and contentment and therefore any further benefits of interviewing them separately is questionable. Perhaps they were

wary of being alone with me or maybe they were interested in each other's responses in a safe, contained and exploratory environment. Either way, it is undoubtable that audience impact, particularly a partner's presence will, in some way, influence what is shared. At times, I wondered whether some points were made more emphatically in response to the partner's previous comments within the interview and whether this arena was serving to indirectly inform the other of their differing views i.e. spirituality as in/separable. Certain features raised by one may have encouraged or influenced this to be considered by the other which may have impacted the extent of unbridled autonomous reflection and resulted in some of the similarities within the findings. Despite this, I would not change how these interviews were conducted as I believe their comfort was paramount and, regardless of the emerging similarities, there were also some clear differences between the two.

Within the interviews, I was aware of my biases towards many healthcare professionals and systems which I believe to be devaluing, minimising and limiting of spiritual expression. Whilst I felt this internally, as a physical sense of excitement that on some level participants' experience confirmed my perception, I was able to bracket this whilst maintaining awareness of it. Hence, rather than follow a line of enquiry to seek justification of my values, I often summarised what was said, using participants' own words, or I asked for further clarification of what they meant in an attempt to maintain focus on them. At times, however, my summing-up may have been influenced by my interpretation based on my perceptions. For example, in one interview, after a lengthy narrative about feeling unheard and misunderstood within therapy, I encapsulate '…so they're putting a label and pathologizing it as a mental illness...' I feel this is an accurate interpretation of her meaning and she responds 'Exactly, exactly…' and continues to reflect on her faith within a mental health setting. However, the summary directly links to my pre-conceptions and could be more reflective of me than her. That said, bringing ourselves in to the interaction can serve to broaden insight on both sides and I believe these clarifications often helped make sense of participants' explanations. Reflecting back and summarising are therapeutic interventions offered to allow clients opportunity to make sense of their experience and, although arguably not appropriate within the interview setting, I feel such interjections generally facilitated rapport and insight.

As mentioned previously, it was sometimes challenging not to adopt the natural position of therapist and offer a level of analysis and exploration in a situation that does not call for such intervention. As such, interviews diverged and had to be brought back to focus on the research questions. This could have impacted on the rapport that was built and then potentially retracted, with a seeming compromised level of empathy. Defining and maintaining roles within such a situation was a learning

curve which developed throughout the project; in subsequent interviews I began the process by explaining that, at times, I may interrupt and ask further questions, but this was not to diminish the value of what they were saying but merely to cover the research ground. This boundary set the expectation and, hopefully, counteracted any negative feelings regarding this.

A person's spiritual journey is unique to them, yet some facets may be experienced similarly. I believe that spirituality is under-valued within our culture, such that people may limit their expression of this in case of mockery or misunderstanding; a common social discourse is one of 'New Age Tree-Hugging Hippy' who is ungrounded, flighty and delusional. From my own experience, I am cautious about what I disclose and with whom, as I wish to avoid potential conflict regarding something that is so important to me. For some people, I feel it is too abstract and intangible that I no longer expend my energy entering into such a debate and facing potential ridicule. Thus, this study aimed to explore others' experience of spirituality within their lives and the fluid nature of the interviews allowed for reflection on all aspects, including the impact of wider social interactions. The bracketing of my own experience was crucial here and, although I could relate personally, I was also receptive to more positive experiences, both within society and therapy itself.

Not only do my personal biases influence the research process, the very being of 'me' likely evokes a multitude of reactions and preconceptions among participants. Prior communication was mostly through social media and, as such, participants had access to a part of me, as I did them. Consequently, perceptions are borne and a template established prior to the interaction; I may have been perceived as a dope-smoking hippy due to the bright green campervan on my social media page and thus a pre-conceived notion of how I may conduct the interview and what I may want to hear. I could have been viewed in any number of ways, based on our prior communication and time-bound interaction. Participants' knowledge of the research as part of a counselling psychology doctorate may have offered the impression that I wanted positive reports about therapy. They may have felt as though they needed to give 'the right' answers and may have potentially feared my judgement of their beliefs and experiences, particularly if they were concerned about our differing spiritual orientations. They may have been apprehensive of exposure and potential analysis by a trainee psychologist.

Understanding this encouraged placation of participants at the outset, whereby the process was clearly explained and they were encouraged to consider their life-view as fully as possible, reassuring them that there were no right or wrong answers and reinforcing my interest in them and their experience. My therapeutic skills and natural tendency to build positive relationships was useful here and it seems that respondents generally felt at ease relatively quickly.

Interviewing an old school friend not seen for over twenty years raised many emotions and memories that certainly influenced the interaction, as the shared past inevitably enters the present moment. Yet there was a level of professionalism to be maintained due to time constraints and the necessity to complete the interview rather than bathe in reminiscence and 'catch up'. However, this felt very intrusive on my part, which I acknowledged and some time was spent together afterwards. It may have been our knowledge of each other that increased her anxiety in the interview and it was therefore necessary to offer reassurance, encouragement and prompts to help counteract this.

My similarity in age to all the respondents may be considered a strength, as our cultural frame of reference is likely to be based on a shared understanding. Alternatively, it could serve as a hindrance as assumptions may be made on this perceived similarity. The fact I am female could allow some to feel more comfortable than others but maybe others not so much. This would largely depend on their prior interactions with females and subsequent perceptions. There were considerations to be made regarding the interview venue as I was a single female meeting unknown males and, on one occasion, this proved challenging, highlighted in next chapter.

It is impossible to be anyone other than we are, even if playing a role, a part of ourselves is always present. I aimed to put people at ease, generally beginning interviews with light-hearted conversations and broad questions aimed at building rapport. I often considered the impact of myself in the interaction and throughout the process. The reflective diary was a useful tool used to record my thoughts and feelings about participants and personal resonances throughout the analytic process.

2.2.8 The analytic process

Audio-recordings were listened to a number of times and the interviews were transcribed, the first six by me and the last two were sent to a reputable transcription company. Due to time restraints and the technical nature of the last two interviews, it was felt this was a useful option. The text was read and the overall 'life world' of the participants entered. Based on the audio-recordings, transcripts and the interviews themselves, initial observations, thoughts and roused emotions were noted. Smith et al. (2009) suggest that capturing these in the first instance allows them to be bracketed away, as when new insights arise and the researcher is potentially drowned in ideas and connections, these have been retained and can later aid in the search for meaning. Within my own clinical experience, I am aware that each new engagement with data – transcripts and recordings - allows an opportunity for new insights to emerge. Thus, Pietkiewicz and Smith (2014) encourage a repetition of this process a number of times to allow the researcher to become fully immersed in the

data. A reflective diary allowed for researcher thoughts/feelings/reactions to be noted separately as a way of 'bracketing'. This included commonalities to participant experiences and emotional reactions to the interview, transcript content and the individuals themselves.

Pietkiewicz and Smith (2014) suggest that during this 'note-taking' stage, researchers may focus on different levels to include content, language used e.g. metaphors, context and initial interpretations. Thus, descriptive, linguistic and conceptual comments were noted in the right-hand column and the beginnings of interpretation and meaning-making emerged (see Appendix G for an example of initial note taking). Additionally, a working document was instigated to begin noting similarities and differences between the transcripts, by recording potential themes (Appendix H).

The next stage was concerned with transforming notes into emergent themes. Comments in the right-hand column were further considered in order to condense them into meaningful parts, as described by Aurini, Heath and Howells (2016), being careful not to reduce the data and lose its meaning. Words were kept as close to those of the participants' as possible. In some cases, it was more difficult to find separate descriptive codes and, sometimes, the left-hand column became a reiteration of the right-hand column. Relevant words and phrases were used to try and capture the participants' meaning, although researcher interpretation and meaning-making was also often summarized in the left-hand column. Since the entire transcript and interview had, at this stage, been engaged with many times, this is an example of the hermeneutic circle whereby 'the parts' and 'the whole' are interpreted in relation to each other.

Researchers are encouraged by Smith and his colleagues to be flexible and creative in their thinking and conduct analysis in ways that work for them. They maintain that their ideas are suggestions of successful processes but are not rigid procedures that need to be rigorously adhered to. The first interview seemed to naturally fall under five distinct categories. Owing to the amount of data, I found that organising it in such a way offered a sense of coherence to further analyse the material. Although not based on any formalized IPA methodological structure, I felt it worked for me in this research. Such a strategy allowed for specific areas to be looked at in greater detail. These headings corresponded to the interview schedule; although this altered minimally between interviews, the overall areas were the same, for example 'spiritual beliefs', 'self', 'therapy' (Appendix I).

At times this was challenging and there was concern about being reductionist by trying to fit information under these specific headings and potentially losing vital meaning. It was also difficult to decide the relevant category, for example, does 'interconnectedness' fall under spiritual experience

or belief? Is burning a letter related to a spiritual or a mental health process? In such cases, the entire context was considered and this was either placed under what was deemed the most relevant or under multiple headings (see Appendix J for an example of individual interview table). This process was repeated for each participant and the content amalgamated into combined tables (Appendix K offers an example).

Each participant's interview page was further analysed to find themes within each category and overall themes were recorded but remained fluid (Appendix L). I was aware of the possibility of disregarding potentially important ideas in light of my own values and interpretation and I continually questioned the validity of choosing some themes over others. However, these were either due to being repeated or appearing particularly emotive and salient features (Aurini et al. 2016).

I was conscious of remaining with individual interviews and not being influenced by my knowledge of subsequent interviews. However, it was sometimes useful to move on to another interview when I felt trapped in the hermeneutic circle and the perpetual cycle of interpretation and analysis. As much as I tried to maintain authenticity with each interview and bracket my thinking regards the hermeneutic circle, there is undoubtedly an influence from previous analysis and insight into all other interviews. At this stage of the analysis, all interviews were considered and the lens became focused on the group rather than the individual.

The aim was to find connections between themes and cluster them accordingly, thereby developing super-ordinate/master themes. This was a manual process and largely involved what Smith et al. refer to as 'abstraction' and 'contextualisation'. The former involved putting like with like and the latter involved consideration of temporal key events. Since the interviews seemed to involve the sense of a journey, this seemed particularly relevant in this research. The frequency of emerging themes was also considered and a relevant descriptive label was assigned to the themes. Please see Appendix M and N for working examples of clustering themes. Appendix O offers individual examples of emerging themes and Appendix P provides a summary table of finalised master themes and subthemes.

During the writing-up stage, it seemed the analysis continued as what was felt to be a stable theme beforehand then altered as the extent of overlaps became clear. Consequently, whilst master themes largely remained the same, subthemes were occasionally moved to different master themes or were removed altogether if it was considered they were encapsulated by other themes. Smith et

al. reassure that analysis often does continue into the writing-up stage as this can prompt further interpretation of the data. Throughout the next chapter, and in accordance with the suggested guidelines, the findings involve a description of the master themes and the subthemes encapsulated therein. Participant extracts are included to offer an insight into each of their worlds whilst also offering researcher analysis and reflexivity, allowing transparency of the process and clear demonstration of how the findings have been arrived at. Smith et al. warn against being overly descriptive in the write-up, offering excessive extracts with little interpretation. I have aimed to balance this.

Aspects of IPA and psychotherapy are closely linked - the emerging of ideas, interpretation and personal reflections are features of both and including reflexivity within the analysis section offers insight not only into this unfolding journey but also into the interpretations reached. Transparency, also a valued and necessary feature of both, is therefore offered in order that the reader may further understand the researcher's motivation and interpretations and can therefore consider the accuracy/relevancy of the findings as situated against her own life's template.

Furthermore, the inclusion of extended pieces (e.g. Elliott) offers a working and transparent example of the point/interpretation reached, not only from analysis of the interview transcripts but from the interview process itself. It is felt that this offers deeper and clearer insight in to the entire evolving process and therefore offers validity of the theme reached. The parts inform the whole and vice versa, and offering a detailed example of the part, not only adds interest, in my view, but also enables insight in to the whole and authenticates the emergence of certain themes.

2.3 The Journey Revealed

This chapter will initially offer some background information about the participants, including the role of religion in their lives, their description of spirituality and challenging life experiences. Following this, the master themes and subthemes will be presented and explored[1].

2.3.1 The role of religion

The majority of participants had been raised within a monotheistic environment and most of them reflected on this during interview. Two participants appeared to integrate established religions more readily into their wider world-view and seemed accepting of an underlying value that could be culturally influenced:

> *"…[2]it doesn't matter what your religious or spiritual tradition is to me, I love them all. I just happen to practice one, but I believe in all of them too." (Craig, p. 54, 1513-1515).*

> *"I believe all religions. Most established religions are based on the same principles and you know there's themes that run through all of the major books that you know they're […][3] the same, they're coming from the same place but maybe they just popped up at different times in different cultures according to that culture". (Emma, p.3, 75-80).*

The majority, however, described religion, specifically Church of England and Catholicism, as an enforced endeavour, signifying a lack of freedom and considered 'violent and traumatizing':

> *"I remember being traumatised by Sunday school where I had to colour in a particularly violent depiction of the crucifixion…traumatised by it, the blood dripping…" (Elizabeth, p.4, 106-109).*

> *"…so it was decided that I would become a devout Christian one day and be confirmed and so on" (Aaron, p.11, 302-303).*

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[1] Within the extracts some vocalized pauses and fillers such as 'um', 'err', 'you know' and 'sort of' have generally been removed to allow for easier reading.
[2] … This is in the original transcripts and signifies longer pauses in the narrative.
[3] […] Text has been omitted to illustrate findings more clearly. This may include repeated phrases, or clauses/sentences that are not necessarily relevant to that section. Extracts are written in the order spoken and consideration given to ensure that omissions have not impacted on the meaning.

"Christianity is very convenient for telling you exactly what you should think and feel and do […] the Christian dogma was tearing me apart". He turned against religion, becoming *"atheistic towards a single, all-powerful entity who basically punishes people"* (Ben, p.15, p.29, p.4).

"I remember once telling my mum that I didn't believe in God and she said that 'any child of mine who doesn't believe in…I'll disown any child of mine who doesn't believe in God'" (Sue, p. 16, 444-447).

The perceived lack of free-will and stringent family expectations were often a catalyst in participants searching for a more personally resonant spirituality. Yet it was this theistic background that often provided a platform from which to spring further into philosophical thought and exploration, to find something more 'fitting' for them. However, with the rejection of family and societal values came a sense of a loss of social networks, as described by Ben, *"but then there was this great sense of loss that was this loss of community"*. These wider relationships will be considered in greater detail later.

Perhaps unsurprisingly, those who reported negative experiences with religion when young were more likely to view religion as destructive and 'rebel' against this enforcement. Conversely, those without negative experiences were more able to acknowledge and appreciate the value of other traditions and belief structures, assimilating this into their own spiritual framework rather than perceiving it as a threat to their autonomy. Thus, the overarching difference between participants' religious backgrounds and current spirituality appears to be one of control versus freewill; all participants feel their current spiritual framework is a personally established choice.

2.3.2 Description of personal spirituality

The first interview question was 'How would you describe your spirituality and what it means to you?' Although this thread was woven throughout the entire interview offering a wealth of related data, the table below aims to convey a flavour of each participant's response to this, allowing every voice to be heard at this juncture. Included in the table is their self-assigned label of their spiritual orientation below their name. Where this was not specifically identified, it is left blank.

Elizabeth Pagan	It's a part of me as much as my nose, my eyes, my hair […] it is inseparable from what is me. It's almost like it's another body system because I believe divinity is within everything […] I'm clearly living, I have divinity in me, in the same way that you know, I breathe, or my heart beats or my digestive system digests. It's not something that I can really separate from myself (p.1, 3-13).

Aaron Pagan	I believe in nature, the connectedness of nature, the gods that control, not control, but guide the wheel of the year, the fact that the seasons represent the cycle, and that the gods play a part in that, there are festivals throughout the year that we try to observe but we don't always. But I suppose I see spirituality in everything, I see it in nature, I see it in the change of the seasons (p.1, 4-11).
Ben	…it's a sense of oneness with one's surroundings, but it's, it's you know, um and those responsibility that entails, um […] if you believe something you have a responsibility to act on it rather than just, you know it's not a passive thing I don't think […] well, it can be (laughs) you know, but I don't think you get much meaning out of you know just kind of thinking something in the background of your mind and not doing anything about it (p.1, 4-15).
Sue	I feel like my belief system is based around nature […] …everybody has like a light inside them which connects everybody to each other and all living things and the whole universe […] everybody is born with it, everybody has it and I think that it can be covered up, it can be hidden with lots of other things (p.2, 34-50).
Jessica	…it's a sense of awe in the world…and my tiny place within it, like when you're somewhere in the countryside and you can see the full night sky and you kind of get that sense of power and awe of nature and your role and place in it…[…] um something bigger, some sort of energy that connects everyone and should be in harmony…should, should be some sort of harmonious…(breathes out) harmonious…element that connects animals, humans, nature, you know, everything (p.2, 28-46).
Emma Universalist	…it can be quite consuming and you experience things and you see the world in a slightly different way and you become very open, um and in a sense that openness can also maybe leave you quite vulnerable and you know you can end up just being a bit kind of caught up in the spiritual world without really then paying attention to what you need to do to just live your life (p.1, 9-16).
Elliott Buddhist	I'm mostly a Buddhist and it means finding the truth of reality […] the core of it is non-duality, so I believe there is a reality and I believe in the two truths, so the relative truth and the ultimate truth. It's a philosophy and psychology rather than a faith. There's not much faith. It's all about having a look. That said, I've been most drawn to the analytical side of it (p.1, 3-21).
Craig Buddhist	…my spirituality is founded in a religious belief system, as of there's nothing external that's been planted upon me; it's something I've always known that was there as a young child and then choices and avenues I've taken in life have taken me closer to a deeper understanding of it that have then manifested in where I am today, if that makes sense […] I've come to be a practising Buddhist (p.1, 5-12).

Please refer to Appendix K which offers an example of overall spiritual experiences and practices. Participants' spiritual beliefs were recorded similarly in another table.

In each case, this was a personal journey that was very much self-driven. The various junctions, terrains and obstacles that influenced this voyage offer a map of individual experiences as a backdrop to an emerging spirituality. Thus, although this was a venture of self-discovery offering much divergence between participants, there were also commonalities. These will emerge

throughout the analysis but the first that struck me as interesting was the intellectual background and functioning of all participants.

It was apparent, not only through their descriptions but from our interactions, that all participants were well-read, many of whom had studied related subjects such as psychology, philosophy and theology. Furthermore, the majority described themselves as either being raised within a scientific, logically-minded environment and/or themselves as being rational thinkers, such as scientists and an engineer. This in itself was interesting based on their apparent religious backgrounds and I wondered whether these findings were contradictory, questioning how one can be logical yet religious. However, based on my own upbringing, I understand that a rationally-minded person may also embrace the abstract. Thus perhaps these aspects do not have to merge and can be a separate part of the whole. That said, Sue and Emma drew links between spirituality and quantum mechanics, suggesting that the latter offers observable fact of the interconnectedness of all beings, among other things. For Jessica, her dissonance between science and spirituality continues to be an area of exploration, although, in many cases, it was often through the limitations of logic that people turned to a more spiritual explanation for their experiences and observations.

2.3.3 Challenging life experiences

There was predominance of disrupted or challenging childhood experiences that were often deemed instrumental in directing an individual's journey and defining their personality. Three participants went to boarding school and, although one claimed this was her choice, it was in response to a painful and confusing parental abandonment. I understand from my own experience and subsequent emerging issues that, even when boarding school may be perceived positively by the child or adolescent, issues of abandonment are invariably triggered and self-esteem is threatened, not only as a child but in later life.

Three participants reported sexual abuse or assault; one in childhood and two as adults. Although this was not explicitly stated by one of them, my interpretation of our interaction and her use of language strongly suggest there was a sexually assaultive incident. Half the participants cited bullying throughout the life cycle as pertinent experiences.

This is included to offer further insight into the participants and consider potential underlying factors that may have fundamental effects on personality development and later functioning. Whilst everyone faces hardship at some point, I feel it is important to consider the participants' backgrounds here, as not only may these experiences prompt attendance at therapy, but they may

also be a reason for the individual spiritual journey. Although these will be considered more fully throughout the analysis, all eight participants have lived through some potentially harmful, painful experiences.

2.3.4 Master Themes and Subthemes

Master Theme	The Lost Self	Finding & Managing the Self	Spiritual self & Society
Subthemes	Remembering the spiritual child	Western methods: Connection & disconnection Integration & separation	Family contexts
	Lost adult in the spiritual realm	Spirituality: Nature Consciousness	Social contexts
			Practicalities
		Meaning Support/Protection	Embodied spirituality

The findings demonstrate a spiritual journey through life, from childhood to current adulthood. Participants reflected on lost aspects of themselves that were either forgotten or overlooked with the passage of time and/or within their spiritual exploration. A subsequent process of finding, understanding and managing the self, appeared to emerge and this was through various spiritual practices and/or by more mainstream methods such as medication and therapy that allowed participants to connect with and integrate the lost self. Following this self-acknowledgement and integration, participants were seeking to, or succeeding in, embedding their spirituality within their daily lives and it was becoming an accepted part of their behavioural patterns despite familial and societal challenges. Such challenges, which previously contributed to a degree of self-denial, generally became a more accepted and well-managed aspect of their spirituality. Undoubtedly, individuals may merge into these different 'stages' at various times, and it may not be a rigid linear process but, the findings certainly indicate that there is an overall progressive spiritual journey, from lost and misunderstood to found, accepted and integrated, broadly.

2.3.5 MASTER THEME 1: THE LOST SELF

The idea of 'the lost self' was a recurring theme as participants focused on various aspects of themselves that had been forgotten, overlooked or challenged along their journey. Lifespan development and experience was organically recalled as respondents were asked about their spiritual journey throughout their life, prompting a reflection of this through the ages. There was

enough fluidity within the interviews for participants to focus on personally-salient features and recollect at will.

Whilst there are many ways and reasons a person may become split and face a fragmented self, this theme is mostly concerned with the spiritual aspects of this. It takes account of the 'spiritual child' whose natural way of simply being, offered an existence which has since been challenged. Similarly, while many adult aspects may shut down or disappear, the current theme is concerned with the potentiality of being lost within a spiritual realm, of splitting off into the ether and losing footing in this physical world and the fundamental connection to the self.

2.3.5.1 Remembering the spiritual child

This subtheme refers to the forgotten aspects of childhood. Although equivalent to the 'inner child', it is termed the 'spiritual child' here due to the link to profound spiritual experiences and an untainted interaction with the surrounding world. The spiritual child is the inner child, the child within us all, who most likely was highly perceptive, attuned, nature-loving and living in wondrous rapture before the corruption of adulthood likely clouded over. Thus, this theme is borne out of participants' childhood encounters and ways of being that were commonly dismissed or ridiculed by others.

Ben describes how he used to be a very sensitive child, aware of presences around him and easily able to 'tap in to energies'. Although he states he can still become aware of this if he concentrates, it is not as forthcoming as when he was a child. He also describes being able to enter into a 'meditative state' with his artwork far more easily in his youth:

> *When I was younger I used to connect to that without thinking about it, it just used to come really easily [...]. (p.10, 277-279). I think when I was younger I was a bit of a, they'd say 'oh that space cadet', I was off with the fairies a bit and wasn't worried about practical things, I don't think the adult life sort of, you know once you have to start doing the work [...] and you've got all these other things you don't have time to be that sort of mind set all the time (p.34, 925-931).*

It seems he perceives adulthood as dulling the child – what came naturally has become more challenging. He also reflects on others referring to him as 'that space cadet', assuming negative connotations, being judged as ungrounded and absent from this reality. His description of himself as

'off with the fairies' further strengthens this image of a dreamy child who is somewhat removed, yet his self-portrayal seems less affronting as he considers a more magical world of fairies and lessens the extent of this by claiming 'a bit'. The impact of wider connections will be addressed more thoroughly in a later theme (Self and Society) but suffice to say, one of Ben's biggest challenges has been within his social networks. It seems that this dreamy child who was content in his own meditative world, aware of unseen presences, has been buried under the weight of adulthood and expectation; or, at least, this appears to be his experience. He perceives a lack of 'time' in the practical adult world to have such a mind-set and, therefore, this aspect of himself has to be limited to appropriate and acceptable times (see Self and Society).

Jessica also remembers an incident from her childhood:

> *I remember seeing a ghost when I was 7 […], no one believed me that I saw a ghost but […] so, I've always felt that there was something…there's some kind of energy that…that's tangible to people who are open to it…and that we don't understand anymore (p.4-5, 104-110).*

Although Jessica described this in detail later in the interview, this extract demonstrates how real this experience was for her, described as 'tangible' and a consequence of which was to solidify a belief in something beyond physical. She recognises that not everyone is open to this and offers a sense of a shared lost connection to this reality. The shift from her personal experience, 'I', to the communal 'we' places her within the wider context, making her part of a shared community and, therefore, perhaps less vulnerable to self-exposure. Thus, although she feels Western society is largely to blame, as discussed in interview, identifying with the group suggests she feels a current personal lack of understanding and lost connection to previous knowledge.

> *I was terrified, was like, kind of exhilarated but more terrified […] and I felt, I felt it was, I felt, I had quite a strong physical…I guess it's being scared when you're little, you know it's very (breathes out) children feel emotions very strongly, um […] I was very disappointed, I thought that perhaps, because I felt so strongly about it, that people would recognise that and respect it…but they didn't and I was quite used to that sort of thing…at home (p.5, 120-129).*

Her use of 'terrified' and 'exhilarated' suggest a strong dichotomy of emotions, further emphasised by her repeatedly saying 'I felt'. She is seemingly reliving a physiological and emotional reaction as she recalls the experience, demonstrating the power within this incident as it is brought to mind. Again, the generalizing of 'children' removes the impact from her to perhaps lessen the direct idiographic focus and distance herself from emotional recall or perceived judgement from me, a possible

consequence of being dismissed by others. As a child, this experience was felt incredibly intensely and her breathing out indicates how powerful this was. However, this potentially transformative event was not recognised or respected by others and was 'laughed off', leaving her feeling disappointed that she was overlooked, although she states this was a common experience, particularly 'at home'. This rejection inevitably leads a child to doubt him/herself and to potentially withhold further disclosures or minimize or reject the experience. This learned behaviour of not being respected or heard could be the reason Jessica shifts focus from the personal to the shared. Although she never doubted the reality of her experience, the sense she had of a haunted house was confirmed by another who was 'open to these sorts of things' and, consequently, it helped her realise that 'it wasn't just a childhood fantasy or dream', thus affirming her experience.

Craig recalled a variety of childhood experiences, including astral projection, spontaneously moving objects and physical contact with unseen entities. On telling others of his experiences, he recalls being laughed at by his peers, not listened to by his mother and only recently sharing childhood 'ghostly experiences' with his parents. Again, this suggests that, despite how real these events were for him, unquestionable in their validity, there was limited opportunity to discuss them. Although he appears to have a close relationship with his parents, his reluctance to share suggests he did not consider it an accepting enough environment in his childhood.

Other respondents recalled significant childhood memories that they link to a feeling of spiritual connection, such as Sue sitting in a tree and remembering the feeling of bark against her face, describing a more 'unconscious connection' to nature which has become a recent consciously established endeavour. Similarly, Aaron sought childhood solace in nature and revisits a specific place as an adult to reconnect to that feeling where his soul feels 'utterly, utterly at peace'.

It seems that many participants recall early events as foundations for transcendental thought and a personally developed spiritual path. Thus, these childhood experiences appear impactful, memorable and significant to their journey and outlook on life. Although we may sometimes forget this inner child, it remains a fundamental part of us, with all the memories, experiences and emotions; the adult is borne out of the child. Thus, honouring the child within is often part of the healing journey through accessing, nurturing and integrating this inner, often forgotten, child.

2.3.5.2 Lost adult in the spiritual realm

While the spiritual child can be forgotten, so too may the adult become lost in the spiritual realm. This subtheme initially related to a general sense of lost self experienced by many of the respondents, often as a result of life's challenging events. For example, Sue spoke of abandoning

vital aspects of herself in order to maintain equilibrium within an abusive relationship and Jessica described loss of identity due to motherhood. Whilst all these accounts offer important insight into the phenomenology of a lost self, it is more relevant to hear those who spoke specifically and/or alluded to detachment from the physical realm. Exploration of, and/or attachment to, the spiritual dimension can cause potential difficulties with living a 'grounded', functional life, as illustrated by the following examples.

An extended case-study-like inclusion offered below provides a working example of the theme as it emerges and sets it in context so the reader can appreciate the analysis and findings. Interpretation and analysis begin at interview stage and this is offered by way of transparently sharing this working with the reader. Reflexivity is an unfolding and necessary part of this journey and is therefore offered in 'real-time' at points throughout this chapter.

Elliott was raised within a scientific background. He became interested in Buddhism in his teens, following a study of existentialism which he realised did not resonate with him. Now in his forties, he describes himself as a 'serious, devoted Buddhist'. He has spent extended periods of time in monasteries around the world and been on extensive silent retreats, occasionally against advised common practice. He is widely informed and currently spends much time at home where he largely reads and watches Buddhist-related material.

It is worth noting that Elliott appeared quite hostile towards me for the first part of the interview, responding to my questions in a seemingly abrasive manner and wondering how I could be conducting this research in the absence of his scholarly book collection. There are a few possible reasons for this initial interaction but I believe this was perhaps due to power and control issues in the early stages of the interview process. To placate my family's concerns about meeting an unknown male in his home, I had insisted that Elliott and I met in my campervan which was outside his home, in view of passers-by. The alternative of meeting in a public place such as a café would compromise privacy required for the meeting and I, therefore, considered my van to be the best option. The distance travelled and schedule involved meant it was not possible to book anywhere else beforehand. Despite our conversation prior to the interview where I apologized, explained my reasoning for the venue and offered him food and drink, I believe he felt judged and mistrusted, thus compromising his power, which was certainly not my intention. He also struck me as someone who likes to be in control and I had jeopardised this by insisting on the venue. Thus, he may have felt his autonomy threatened and/or felt judged – neither of which are desirable precursors for such a

meeting. He did, however, 'soften' during the interview, developing a level of trust on which to self-reflect more readily. The extracts below are mostly in chronological order and, therefore, demonstrate his increasing level of personal engagement.

Elliott initially appeared entangled in a confused web of Buddhist philosophy, randomly grasping at different teachings in an overwhelming and chaotic manner; indeed, I found it difficult to follow his thread at times. Undoubtedly, his hostility ignited my defensiveness which may have contributed to a power-struggle where neither is feeling heard. Nonetheless, when asked about his actual experience, he often reverted to learned teachings:

> It's important to understand that there is no self. There is no me at peace. There is no why am I doing it, because there is no me. [...] (p.7, 176-178).

Elliott was focused on the concept of 'non-self' and seems to want me to appreciate the importance of this teaching as a founding principle of his philosophy. (My interpretation of this concept is different from Elliott's. I understand it as non-attachment to the self-identity/ego, due to the ever-changing, impermanent nature). His perception that he does not exist likely separates him from this reality and allows further detachment from himself. I felt this was a defence mechanism which he also considers later in the interview:

> I don't know if that is itself a - I want to say defence, or a level of shielding and maybe there's something underneath that. (p.24, 666-667).

In early adulthood, Elliott suffered the traumatic loss of his relations. Thus, it seems to me that he is spiritually bypassing - burrowing in spiritual theory to protect against the pain of difficult and unresolved emotions. A later claim that these significant losses were 'not the problem' further supported my interpretation of protective spiritual bypass.

Further on in the interview, he considers his existential dilemma more closely:

> My struggle is how come there is no self if I really think there is. [...] It's just an ongoing thing. One part of it is there's not many people I can talk to about it. So sometimes what is that? I would feel a bit lonely, or a bit misunderstood? Also, you get a sort of, like, oh, it's just me that's into this, so that's a little bit egoic, isn't it? So, there's balancing that. Also, I don't

know if I'm doing it right, because I don't have any guidance really [...] I don't know if anyone
is doing it right. Then I don't know if it's possible to. It's kind of like being - it's about me
really. It's just me versus my thoughts. (p.16, 431-444).

Elliott seems to experience a continual inner battle between his own thoughts and external teachings, a battle where opposing sides seem to have equal merit yet cannot compromise to become integrated. The absence of supportive others only increases his sense of isolation and confusion although, again, he distances himself from his felt-sense by posing his feelings as a question and becoming future-orientated. His protective barrier remains intact although he is edging towards the emotional boundary.

Elliott seems concerned of others' judgements, not wishing to focus too much on himself yet paradoxically 'the (non) self' appears to be the all-encompassing quarrel. His sense of wanting to 'balance' these personal facets suggests he experiences a level of psychological dissonance, which I would interpret not only from this extract but from the entire interview. His mention of a lacking guidance suggests he seeks reassurance and a level of grounding to contextualize his internal meanderings. Yet the battle continues and he seems unsure of any certainty, even with potential said guidance. Consequently, it remains him against himself. With no context and limited opportunity to self-explore, he is potentially lost in a personal minefield where connection to his core fades into the distance.

I feel lonely and sad; I get anxious; I procrastinate; I am not sure who I am [...] I've come up
against this, if there's no self, then what's the...that's the existential problem that I've got.
(p.24, 659-665)

The extent of his self-uncertainty makes annihilation a possibility, although he does not complete the sentence - perhaps saying it aloud makes it too real and frightening. I sense within him a myriad of unresolved psychological, emotional and spiritual (not necessarily separable) aspects that seem to be overwhelming at times, such is his need for spiritual bypass.

Despite this tendency, his current therapy appears to be providing a necessary 'frame' in which he can effectively be contained and his spiritual musings contextualized. His use of multiple descriptions suggests this is a particularly important component for him to help keep him grounded:

At the moment I experience it as a kind of anchor, or fulcrum, or focus point, or contextual

centre (p. 25, 679-680).

This idea of grounding is shared by Emma who believes that, in order to function safely, people need to be rooted within the material realm before exploring too much within the spiritual. Early in the interview, she acknowledges potential vulnerability when beginning on the spiritual journey, experiencing this as 'all-consuming'. Emma practices Reiki and crystal healing but, although an advocate of using these methods for herself, when seeking external help she will generally use talking therapies in attempt to maintain her equilibrium:

The last thing I need maybe when I am going through a dark period is to go more spiritual

[…] if I go too spiritual then, and I've had that happen before, you just, you can lose yourself

[…] losing yourself in the world of conspiracy theories and spiritualism and too much of the

world that you can't have any kind of control over (p.41, 1052-1063).

Emma seems to suggest that there is a continuum of safe spirituality where 'too much' means a potential loss of self, as one becomes consumed in a world which cannot be fully understood. It seems she experienced a loss of control in the past, which she is relating to now and perhaps it is this loss of control that signifies the loss of self – if we have no control or feel we have no control, to what extent are we truly ourselves?

I am aware of my mirrored experience here and feel I can empathise with Emma's sense of lost self. During the interview I commented, 'That's interesting, why do you think that is?' (p.41, 1050). The fact I have offered a value judgement may give an indication that I can relate to this or encourage Emma to talk more about this than other areas. This resonates strongly with me and the level of importance I give it has undoubtedly influenced my acknowledgement and recording of it in the findings. It is important for understanding the potential challenges faced when considering a personal spiritual dimension and helping people to address this whilst also managing existence in our physical world.

Emma highlights potential loss in conspiracy theories and I suggest that it is this focus on alternative ideas which are not necessarily grounded or embedded within wider society; if one is attracted to these ways of thinking, then perhaps the extent to which they feel accepted within our culture is limited. Emma described being influenced many years ago by the idea of the 2012 Armageddon.

Consequently, she withdrew from what may be considered mainstream society, questioning the purpose of a career and travelling for an extended period:

It didn't completely stop me from engaging in the world and looking for work but [...] what's the point in getting a career if the world's going to end (p.15, 388-391).

She re-evaluated the meaning of this and views it as a shift in consciousness and, therefore, a metaphorical end of the world as we know it. It seems that an alternative way of thinking and being may threaten the extent to which someone engages with society but beyond that, a lack of acknowledgement or opportunity to explore these alternative realities potentially threatens the level of one's psychological functioning and the extent to which they can contain and manage themselves.

Both Elliott and Emma raise notions about the meaning of existence, both highlighting the idea that if there is nothing beyond this physical realm, then what is the point in doing anything, why conform and why exist at all? The idea that there is nothing more has led them to question their purpose and, at times, withdraw from society. Paradoxically, it is also the exploration and consideration of something beyond, that, at times, appears to have led to heightened confusion and loss of self. Thus, the idea of balance seems important – balancing interdimensional exploration with some rootedness to the ground. Perhaps the further we travel from ourselves, the longer the journey back and the more difficult, without an established route.

2.3.6 MASTER THEME 2: FINDING AND MANAGING THE SELF

This was a large overarching theme and related to all participants in one form or another. Most participants had 'lost' a part of themselves somewhere on their journey, including identity, personality trait or ability. It was often this sense of loss and lacking that led them to search their souls to find the missing parts and feel whole. Participants embarked on this journey of self-discovery at different times and for different reasons but, most commonly, to find their true selves – either lost or forgotten. They also invariably sought help and guidance when directly facing particular life trials.

The subthemes demonstrate the main ways in which participants searched, discovered and managed themselves and include 'Western methods' and 'spirituality', which were further analysed

to reveal themes of connection/disconnection and integration/separation within Western methods; and nature, consciousness, meaning, support/protection within spirituality.

2.3.6.1 Through Western methods

This subtheme incorporates participants' use of therapy and medication and how their spiritual journey featured within these aspects. All participants had experience of at least one therapist and a range of interventions although these mostly included cognitive-behavioural and humanistic approaches. Three described use of anti-depressants.

2.3.6.1.1 *Connection and disconnection*

This is concerned with the level of dis/connection individuals felt to themselves, other people and the wider world as a result of engaging in therapy and/or using medication. It takes account of self-exploration which invariably enabled access to the lost self through connection to the past and current self and others.

Whilst most participants generally portray a positive experience of therapy, Craig expresses a particularly disapproving view of Western approaches. In his twenties, following a relationship breakdown, he felt he needed counselling to 'pull himself out of it' but it seems therapy failed in this endeavour:

> *I just found it to be sessions of navel gazing. It wasn't doing anyone any good. It wasn't doing me any good and it sure as hell couldn't have been doing her any good (p.45, 1252-1255).*

He offers the impression that there was little interaction between him and the therapist, suggesting that he was mostly looking down, disengaged. He describes himself as 'ignorant' at that stage in his life and it could be that he had unrealistic expectations of what therapy could offer. It could be that the relationship was inadequate, that therapist and client were incompatible, or he may have been reluctant to connect with his inner being at that time. There are a host of possibilities but his experience is one of unfulfilled outcome and an apparent undercurrent of anger towards this, evident in his tone and use of language. To further fuel his negative view of western treatment, he describes his use of prescribed anti-depressants. A few years after the above incident, he sought help to resolve his unhealthy and destructive lifestyle. He was prescribed a two-week course of anti-

depressants. During this period, he read the side-effects, one of which was 'suicidal tendencies' and thought to himself - *'I don't need this shit' (p.47, 1314)*. He returned after this period for a review:

> *I sat there and I said that was the biggest load of bullshit I've had to go through and that's the biggest load of bullshit two weeks I've had so far in my life (p.48, 1320-1321).*

It seems this was quite an ordeal for him and a period he had to 'get through' and survive. The experience appears quite extreme as he positions it within the context of his entire life. He describes being compared to others who find it useful and being given a 'very clinical diagnosis' when raising his concerns. It seems he felt unheard and disregarded and it appears that, in both instances, he experienced a lack of therapeutic connection with the professionals as they appeared disconnected from him and his subjective experience. The 'biggest bullshit' seems to be a product of the medication rather than the emotional challenge alone and further suggests he did not feel in control of the decision to take the medication or its effects. Perhaps there is, within this, an element of negated autonomy which may also encourage a sense of disconnection to the self and others as personal wants become overlooked and disregarded.

This negative experience of medication is also shared by Emma who approached her doctor in her early twenties suffering with a bout of depression. She mimicked the doctors prescribing drugs as a first resort to deal with most difficulties. On two occasions when she visited the doctor, including once as a child, their first response was reportedly to offer anti-depressants.

> *I just felt **so, so** like spaced out and […] I just thought this isn't what I'm, I don't want to feel, I want to feel more connected, I don't want to feel less connected (p.25, 633-637).*

It seems the medication took her out of contact with herself and others, muddying the water of felt experience and distancing herself from any possible 'real' connections. She explains that she finds strength in mastering her difficulties without medication and that by doing so, using therapy or various other tools, helps strengthen her ability to overcome future obstacles. It seems that maintaining a strong connection to herself and developing her inner capabilities helps increase her sense of resilience.

For Elizabeth, it seems that a loss of connection with reality, exasperated by her medication provided her with a subsequent diagnosis which she found useful. Elizabeth states that her

medication *'was both the best thing I've ever done in my life and absolutely the worst thing'* (p.22, 589-590). She described '*bouncing off the walls*' and being *'utterly, utterly, utterly crazy'* when on the drug. She returned to the GP, who had initially prescribed the medication, with a detailed list of all her recent behaviours and moods. Consequently, they were able to make sense of this and diagnosed her with 'rapid cycling bipolar 2 with primarily depressive tendencies'. It seems that Elizabeth rates this as the best and worst thing due to the subsequent diagnosis that was enabled as a result of extreme behaviours and mood. It is not suggested that the medication caused the symptoms, but Elizabeth draws links between being unhinged by the drug and receiving a formal diagnosis. It seems that she had symptoms before but the medication may have exaggerated this. In this sense, a loss of connection to ordinary 'reality' enabled a subsequent connection to herself which allowed her to better understand and manage her symptoms.

Therapy itself seemed predominantly to offer participants opportunity for self-exploration, thereby gaining access to hidden or forgotten self-aspects. In some cases, individual spirituality was inherent in this process whilst in others it was viewed separately, as a technique provider for self-management as opposed to repairing the fragmented self.

Aaron states:

> The biggest breakthrough I had was realising that […] the past can't be taken away, it's there […] it's knowing that I wasn't ever alone that I always had **me** […] rewriting the script so the outcome's different […] if you could go back and meet yourself at that point what would you say…you know what would you say to little Aaron, what would you say to teenage Aaron (p.19-21, 514-565).

Aaron seems to have reached a level of acceptance of his past and building his self-efficacy by acknowledging his separated parts. By revisiting his past and meeting the abused boy as the more rational, containing adult, he is able to reach a deeper level of understanding of past events and himself within that. It seems that he is cultivating self-love, valuing his constant inner-companion and realising that within him resides the ability to heal and overcome trauma. He has connected to, understood and appreciated his past self which inherently informs and impacts his current being.

In a similar manner, Sue was able to explore and subsequently connect to a deeper understanding of herself through therapy, which appeared to boost her self-esteem enough to leave a destructive relationship:

It was this opportunity to work out who I was […] I'm not sure if I'd have left that relationship if it wasn't for the therapy and I certainly wouldn't be exploring all of that if it wasn't for the therapy […] the therapy created the situation where I could do that and start to think about what I believed (p.23, 641-648).

Sue appears to value the opportunity and time where she is able to freely explore her inner-being and begin to know and understand the deeper recesses of herself. Such a healthy self-connection seemingly enables her to make healthier decisions and approach from a position of self-understanding and insight. Sue describes a positive relationship with her therapist, a connection which seemingly encourages a similar self-relationship.

2.3.6.1.2 *Integration and separation*

Although broadly similar to the above section, this subsection relates to the extent to which individuals felt their spirituality to be integrated or not within their therapeutic journey and takes account of therapist characteristics and feelings of safety and danger in disclosing and sharing their personal spirituality.

Despite the unification of Aaron's fragmented self, mentioned above, he views spirituality as separate from his therapy sessions, stating:

It would have got in the way of the therapeutic relationship I think, so I'm glad it didn't come up. […] it's a psychological thing that I was…addressing…not a spiritual thing. If I'd said 'yea but the gods are telling me this', that would in some way have skewed what we discussed I think (p.23, 620-633).

It seems that although Aaron relies on spiritual practices and beliefs outside these sessions, he regards them as a separate entity, potentially threatening the therapeutic relationship. It suggests he fears possible rejection within the relationship, or he is concerned that the focus will be directed towards his spirituality, which he feels is well managed, as opposed to healing the psychologically damaging situation. This evidences psychological-spiritual splitting, perhaps as a means to protect himself within his therapy and guard against potential rejection and judgement. There is a sense that if he shares this aspect of his thinking he will be misunderstood. So, his behaviour and the extent he feels he can freely share this, even within a situation that should be focused on his processes, perhaps reflects society's rhetoric and its impinging nature of free self-expression of things other-worldly or alternative.

Similarly, regarding a local CBT course, Ben states:

I don't think it had any relation to spirituality whatsoever asides from 'if that's something that will make you feel better go do it' […] it's an utterly pragmatic approach to things (p.8, 217-221).

I don't know that if it had been for the CBT I wouldn't have gone on to the Pagan Council thingy and done the course and met loads of people, I think it would have been quite a solitary thing (p.12, 327-331).

A lot of what I needed to do and work on through therapy actually seemed to come about through what was there as a lack in my spiritual life (p.26, 722-725).

There is evidence of both integration and separation of spirituality within Ben's therapy. The actual process of the therapy appears to be experienced as separate from his spirituality but he is able to integrate his spirituality within his meaning-making of certain issues and within his subsequent activities and behaviour. He described CBT as a 'path of logic' and had initially viewed it as quite separate from his spirituality, providing unrelated practical tools. However, his therapy encouraged him to find what was important to him to help increase his well-being. He says that, although he did not share the specifics of this either in group or individual therapy, it pushed him in an important spiritual direction that opened up many avenues such as Paganism, Shamanism and reconnection to his art. Therefore, although separated in some ways, his therapy helped him tread further along his spiritual path and consequently helped him acknowledge and integrate this aspect of himself.

Sue has, through her own motivation and her therapist's encouragement, created an elaborate visualisation that is also represented physically in a scrap book. It incorporates, among other things, her beliefs and feelings of an interconnecting orb of light, trees in which she can feel safe and supported, an electric fence and a stag who guards the perimeter, offering protection.

*We all have parts, but I've got them very clearly defined […] when I was first having the therapy, they weren't very well integrated at all and that's why I would dissociate, I would go in to this part which completely switched off, **completely** switched off, […] and I would feel like I was right deep inside my head and I couldn't speak, couldn't move, nothing and it's through working with this whole idea of parts and then finding a safe place for each one of those parts in this forest glade that they're becoming integrated now (p.28, 766-778).*

It seems the therapy has offered an opportunity to effectively address and integrate all these fragmented aspects, valuing them and offering them space where they can all feel safe and

protected. Addressing the fragmented self appears to be completing her, helping her maintain grounding and managing to care for all parts of herself, rather than dissociating. It appears that this intervention offers a holistic approach where Sue's spiritual beliefs of a universal light connection and her attachment to nature are all embodied and incorporated within her therapy. Thus, her spirituality and her fragmented being are nourishingly integrated within this process.

Jessica has attended therapy a few times throughout her life. She has found it useful in helping her accept and better understand the challenges she faced, by broadening her perspective and helping her take responsibility, thereby accepting herself, even the shadow parts. More recently, a sense of lost identity prompted therapy. Similar to Aaron, Jessica also experiences her spirituality as separate from the therapeutic hour. However, perhaps due to my direct assumptive question – 'How did spirituality come in to this?' she seems to be trying to mould her response in an attempt to satisfy what she thinks I want to hear. Her apparent low self-esteem, both observed and disclosed, is likely to motivate compliancy.

> *getting you to think differently, but not necessarily in a spiritual way…I mean perhaps I felt in a way I felt calmer and more at ease and more peaceful, perhaps it sort of, perhaps it **has**, inadvertently…perhaps by giving me that much more confidence about who I am and where I've come from and that sort of thing (p.18, 462-467).*

It seems that Jessica has developed a level of self-acceptance through therapy, regaining an identity and understanding herself within the context of her life. It seems she considers therapy to have helped with the sense of calm, ease and peacefulness which she regards as spiritual attributes that were inherent in the therapeutic journey. However, my follow-up question, asked in an attempt for clarification, only seems to force a response whereby she simply agrees. Thus, overall, Jessica does not seem to regard her spirituality as particularly relevant to her therapy and suggests that, if she were to raise it, she would perhaps initially be wary due to perceived misunderstanding of the therapist. Therefore, the level of connection to the therapist appears to determine, to some degree, the extent of shared or disclosed spirituality.

Emma acknowledges that the extent of her spiritual integration within therapy depends on the type of therapy offered:

> *I probably see things I do spiritually and having therapy or counselling as quite separate things […] I suppose it depends on what sort of therapy it is […] there's workshops that I've done…that kind of cross the boundary between what you might call self-help and might fit in*

to kind of more therapeutic practices but then are also very much within a…spiritual-ish framework (p.21, 537-545).

It seems that establishing a robust definition or understanding of a spiritual-therapeutic boundary is proving challenging here. However, it appears Emma has attended workshops that enter into what may be described as spiritual and, therefore, likely consider transpersonal factors. In contrast, CBT is considered a very structured intervention, providing specifics which do not include her spirituality:

I wouldn't relate (CBT) to spirituality, I see that as […] practically managing your life and anger and negative emotions and having your practical tool box – there we go, we've got 2 different tool boxes – one is your practical one and how to manage life and the other tool box is like the spiritual and so I might pull different tools from those different boxes at different times depending on the situation (p.22, 549-556).

Therefore, there is a degree of separated spirituality within her therapy, yet it finds integration within herself at specific times. It seems she draws on different techniques depending on what she feels is necessary at the time and there is seemingly a psychological/spiritual split that does not seem to be cause for concern for Emma. She discusses her spirituality with her current therapist as she was aware in the beginning that her therapist 'talks to cats'. This suggests that she feels safe enough to share her thinking, given that her therapist's behaviour may also be considered 'alternative' by the general population. Sensing similarities between therapist and client may encourage the client to feel free enough to express their spiritual dimension, as also suggested by Sue. Emma has found her recent humanistic therapy enabling of deep personal exploration and inclusive of her spirituality, perhaps due to the inclusive/holistic nature:

*Just having someone to listen at a time […] but then being able to go **deep** […] I was able to divulge in a lot of stuff with her (p.24, 601-604).*

Elliott's therapy seems to be inclusive of his spirituality and provide him with a backdrop where he can discuss and explore his existential questions and spiritual ideas.

Recently I had the gem that it's all about self-awareness, so what we're doing is we are increasing self-awareness and so […] the big area for exploration is self-awareness and non-duality; how do they go together (p.25, 696-700).

The dichotomy between increasing his self-awareness and allowing himself to be embraced when he has a fundamental dilemma of whether the self exists or not, allows him to be contained and contextualized within this environment. The therapy appears to be enabling integration of these

different self-aspects and the beginning of clarity and insight into himself is regarded as invaluable and as precious as finding a 'gem'.

Elizabeth generally experiences her spirituality as split-off amongst most mental health professionals but integrated within her own mind. More recently, however, her spiritual journey has begun to be integrated within the mainstream. The following extracts illustrate this unfolding journey.

Elizabeth views her spirituality as an inherent part of her as stated at various points throughout the interview.

> *I can't separate it from me any more than I can stop my digestive system digesting (p.16, 444-445).*

Elizabeth seems to view her spirituality as vital to her existence, likened to bodily functions that keep her alive. Just as our internal mechanics work without our engineering, so too does Elizabeth appear to regard her spirituality as functioning regardless of her conscious control. Thus, to separate if from the therapeutic encounter would, for her, be ignoring a vital aspect of her internality, challenging the efficacy of the therapy:

> *For me to not take that into account during therapy would be […] like I'm not acknowledging part of me and therefore therapy's not going to work (p.38, 1047-1049).*

Elizabeth highlights a few occasions when she has felt unheard and misunderstood by therapists and mental health professionals when she has tried to share her spiritual beliefs:

> *this gets me into trouble sometimes, I have divinity within me […] I'm not saying I'm god […] …that was another thing that was misconstrued by a therapist that I had, who actually said, 'so obviously you think you're god'. No, no I really don't, like that whole session gone, and of course the more you try and say, no I don't, honestly, I don't, the more it sounds like you're protesting too much […] it was […] when I was first aware that oooh you got to be careful who you say your beliefs to […] who you open up to and who you can say you're openly Pagan to […] (p. 16-17, 447-462).*

Elizabeth feels divinity within, which she also mentioned at the beginning of the interview, suggesting that all living beings and inanimate objects that were once living, such as wooden furniture, all has divinity. I interpret this as the interconnected energy that unites us all – it seems to resonate with the idea that we are all spiritual beings encased in a physical body and this divinity within is what connects us all – the god within. However, as much as I may perhaps share, to some degree,

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Elizabeth's ideas and, therefore, have a level of insight into her experience, it appears that others have misinterpreted her meaning and her spirituality has not been acknowledged in the way she intended. Consequently, it seems potentially valuable self-exploration and understanding has been suffocated by unheard self-expression. I sense within her a level of frustration with trying to be understood, yet a degree of futility insofar as there is a limit to how much she can protest her sanity for fear of judgement. Accordingly, Elizabeth has learned to be wary, hiding her beliefs from some and making a 'judgement call' as to who she can trust to be fully open with. She, therefore, seems to deny this fundamental aspect with certain mental health professionals to avoid being deemed psychotic, as further illustrated by the following extracts:

> (I've had) a variety of really crap care-coordinators, one in particular […] I'd have to persuade her that no I wasn't psychotic, I was just express…I expressed A, AN aspect of my faith (p.24, 662-666).

Again, there is a sense of expended energy in trying to be understood, trying to convince the professionals that her spiritual beliefs and practices are not synonymous with mental illness. It seems aspects of her faith are regarded as outside the norm and, therefore, potentially psychotic. Similarly, when discussing her desire to practice and be formally trained and certified as a Reiki healer, she says:

> I'm hesitant about that again until I get discharged from mental health services […] (p.33, 922-923).

Although she describes her current care-coordinator as supportive of her:

> It also feels like maybe it is a step too far for somebody who has a more medical model of training and who doesn't have a spirituality, a faith…[…] (p.33, 926-929).

It seems there is a limit to what she feels is deemed 'normal' by those who monitor her mental health. She perceives those working within the confines of the medical model and who do not share a spiritual outlook as lacking understanding of her and, therefore, her chances of discharge potentially violated. Regarding her psychiatrist, she is unsure how she will be received and resorts to hiding aspects of her experience and current lifestyle in a bid to be granted discharge. Although it remains important to her, she is not yet willing to share this with certain professionals, regarding the medical approach as restrictive:

> If I start talking about being able to channel energy and such…possibly isn't good if I want to get discharged so that one's staying fairly firmly under my hat for a while (p.34, 938-941).

Within therapy, her spirituality is experienced as part of her internal process; part of her identity and self-expression. Thus, regardless of whether this is openly shared within the therapeutic encounter, it remains an aspect of her personal self-exploration and integration.

Whilst I might not necessarily openly talk about it with a therapist […] I would be seeing it as part of the fundamental 'who am I?' 'Who am I, what does Elizabeth think of this? What does Elizabeth take of this, where do I fit it […] I've got to include my spirituality in that. So, yea, while I might not necessarily discuss it with a therapist, depending on how…safe, in inverted commas, I, I feel it would be um…it would be part of the…part of ME, part of the work that I do (p.38, 1053-1063).

The sense of safety versus danger further emphasizes her perceived risk in disclosure, the extent of which appears to be determined by how she views the therapist and her perception of their understanding of her; perhaps the level of connection that has been established. She has control over what she shares and her judgement appears based on their power to section her and deny her freedom. Thus, different settings are considered in her decision of what to disclose, when and to whom:

depending on the context, you know, a counsellor that I had who isn't likely to be on the phone to my psychiatrist and say 'think we need to think about, you know, the nice padded room,' I'd be more likely to open up and share even if she didn't, she or he…wasn't overtly accepting of non-traditional faiths (p.39, 1071-1077).

Despite these struggles for acceptance, Elizabeth's spiritual practices, such as being outside and holding a plant were integrated into her care plan. With her care-coordinator, she likened this to a Catholic who may use rosary beads in prayer, in an attempt to normalise it: *I'm not holding a plant and talking to it, it's not a symptom of illness, it's just me praying (p.25, 687-688).*

Although she thinks that sharing her interest and experience of Reiki may be too extreme for her current care-coordinator, she acknowledges that he is supportive of the plan integrating her practice, whilst her nurse also *'thinks it's absolutely brilliant that my spirituality, my faith is always there and that I do get such comfort from it and it does sustain me in the times when I don't think I can cope anymore' (p.26, 701-704).* Hence, despite the many obstacles Elizabeth has faced within mental health services, it appears there are some on that journey who can support and help her to effectively incorporate her spiritual needs.

Consideration has been given to providing a balanced view as I am aware of the fact that Elizabeth's negative experiences resonate with my pre-conceptions regarding mental health professionals and

their approach to spirituality. Hence, recognition of a facilitative approach is also necessary to provide a true insight into her lived experience.

Evidently, each participant's journey is unique and their approach, their experiences and the outcomes are individually determined and expressed. Broadly speaking, just over half the respondents rationalized their spirituality as separate from their therapy, perceiving it as not necessarily relevant to what generally seems to be viewed as psychologically-focused intervention; a separation of the psychological and the spiritual. However, it appears that the type of intervention also determines this, with CBT offering a more practical approach than humanistic, for example. For those who have integrated their spirituality within their therapy, this has generally been well-received and in the case of Ben, it offered the impetus to tread further down the spiritual path. Conversely, Elizabeth seems to experience a dichotomy of personal self-integration that is contextually determined; she is able to integrate her spirituality on her own but feels potential threat in openly sharing this in various psychiatric settings. However, her spiritual practices were recently included within her care plan. The fact that all participants sought therapy to improve themselves and/or their situation is suggestive of an internal locus of control and the self-actualising tendency in action.

2.3.6.2 Through spirituality

Whilst the above subtheme, Western methods, relates to an impact and influence of others, considering the degree of connection and separation from themselves, others and their spirituality, this subtheme is more concerned with individual exploration. This aspect of the journey is largely personally motivated and does not necessarily require or seek the intervention of another human being. Western methods provided the means through which to manage certain situations and often offered an invaluable opportunity for in-depth analysis, allowing integration of various self-aspects through greater understanding and acceptance of the self. The current subtheme considers how individuals' spiritual practices and beliefs also aid in their search and management of the self and are clustered under four main areas of nature, consciousness exploration, meaning, support/protection. Whilst this subtheme could have been labelled 'transpersonal', 'spiritual' was used as it related more closely to participants' language.

2.3.6.2.1 *Natural surroundings and sacred places*

Whilst participants engaged in a variety of spiritual practices, spending time in natural surroundings and connecting ecologically was important for seven of the participants; it may have been a factor for all of them but Elliott did not mention this specifically. The majority sought time in natural and/or

sacred surroundings, sometimes to connect with past events and childhood feelings but mostly as a way of reconnecting with themselves and the wider world; experiencing a sense of interconnectedness between all life and often a subsequent feeling of awe as they consider their place within the great vastness of the cosmos.

Craig says *'my spirituality is my therapy' (p.50, 1379)*. His negative experiences of western interventions means he draws on his spiritual thinking and practices readily as a way of coping and self-development. He enjoys visiting sacred places including churches, stone circles and burial mounds, finding this a valuable link to a forgotten past. From my own experience, I interpret this to mean a connection with certain energies and feelings that are characteristic of some places, whether due to their history, sacred ceremonies, ley lines; whatever the reason, it seems some places can ignite certain feelings/senses in those visiting them and it can offer an important link to our past and an opportunity to reflect on our place in this world.

He also describes the natural world, specifically birds as *'very therapeutic […] obviously there's the flight aspect there, but within all cultures throughout the world they're an incredibly sacred totemic symbol, especially birds of prey. When I see a […] a buzzard or a kite, I always take it as a blessing (p.56, 1550-1556).*

It seems the 'flight aspect' of the bird may offer Craig a visual representation of a sense of freedom within his own life, reinforcing his ability to transcend his own issues. Furthermore, the assimilation of other cultural beliefs to his own, perhaps allows him to further sacralise the birds and feel he is valued, protected and looked after by something greater. The power bestowed on these birds of prey often encourage many to feel it is a symbol of protection or guidance, among other possible interpretations. His perception of a 'blessing', therefore, suggests it is viewed as some sort of sign. Jessica finds that escaping city life and venturing to the countryside has a therapeutic quality:

> *…you can see the full night sky and you get that sense of power and awe of nature and your role and place in it […] it helps you feel balanced and get perspective and feel whole and grounded… (p.2, 30-32; p.3, 52-53).*

It seems that connection to natural surroundings, contemplating the vast cosmological mystery, provides a restorative function for Jessica where her perspective is broadened and she gains a sense of grounding and balance. She seems to value herself within this, viewing herself as part of something

greater. This connection seems to complete her, give her space where she can re-centre herself and not be split off in other areas.

This sense of value is shared by Sue, whose negative internal voice is silenced when she considers the interconnectedness of all life:

> *…if you know you're connected with everyone and everything, that you're part of everything […] those doubting voices and critical voices just all go away because it's like well no, I'm just as important as everybody else and everything else (p.14, 383-388).*

Sue feels valued when considered an equal part of the universe. Her view of herself can be quite destructive which may be exaggerated when not spending time outdoors or visiting her nature-based visualisation. Sue is currently growing a tree as she feels a particularly strong connection with trees, experiencing them as 'incredibly calming and very grounding'. Whilst Sue often sought solace and protection through a connection with trees, perhaps personifying them to some extent, she seems to derive a great deal of strength and support from them.

As such, it appears that natural surroundings can serve to integrate self-aspects that may be ignored during the hum-drum of daily life and expectation. Also, the sense of equal interconnectedness can heighten feelings of value and worth.

2.3.6.2.2 *Exploring different levels of consciousness*

This relates to practices that allowed participants to transcend their own minds, allowing access to the subconscious and/or higher consciousness. Such methods included meditation, shamanic journeying, art and psychedelics, all of which will be considered here. Obviously, it is not possible to record all individual experiences so a few extracts have been selected.

The majority of participants meditated using a variety of methods. It was very much a disciplined and structured part of Craig's life, used to focus on specific aspects, such as 'death' in preparation for the future and for self-improvement in all areas including character, behaviour and skills: *Through the meditation I cannot only get better - improve myself, which is the aim, I hope to see improvements in […] those recreational things that I enjoy* (p.25, 693-696). For Elliott, it was 'focused attention on the nature of the mind' in an attempt to overcome the mind's natural tendency to wander, thus overcoming cognitive limits. For others, it was a way of relaxing, 'zoning out' and achieving a sense of calm and connectedness.

Half the respondents found art to be a useful tool for emotional management and, in many cases, it was considered a spiritual endeavour, whereby conscious control was bypassed and a sense of something greater activated. When feeling depressed, Emma reached for her paints and a spontaneous picture emerged: '*god knows where that came from, and it was like looking at that just made me really, really happy*' (p.37, 953-954). Sue equally found art to be therapeutic and a means of effective emotional release.

Ben employed all the aforementioned at various times and with different yet perceptively similar outcomes/messages/feelings. When involved in art therapy with a friend, he made a wooden horse-shaped object that he viewed as a symbol of protection and felt a deep connection to it, both on a personal level but also sensing something transpersonal:

> *(it) seemed to have an energy to it [...] it felt like it had something more to it than what it was [...] I felt quite disconcerted by it actually, it raised more questions, [...] I tried to analyse it and reduce it to something rational and understandable but couldn't (p.9, 229-231; 250-253).*

It could be that Ben was connecting to a part of himself which had been forgotten, subconsciously externalizing a lost-aspect onto the object, whether this is part of his character or his felt connection to universal energy. It seems he experiences it as coming from outside of himself. He evidently attempts to contextualize this psychologically, perhaps to fit it into a culturally acceptable parameter to help him make sense of it. However, he feels that to do this would be to minimise and reduce the transcendental nature of his experience. In the absence of a rationale, the experience seems confusing and beyond the bounds of succinct explanation. He recognises:

> *There's something to it which is very profound which I don't know if we have words for. [...] we have such a vague technical language that a lot of the things that need discussing don't have language for (p.11-12, 308-311).*

Thus, the experience seems to defy language parameters, suggesting it is beyond a mental, describable experience and touches on something transpersonal. Ben experiences his art, shamanic journeys and meditation as *'all tapping into something quite similar,'* within which he feels a sense of *'channelling something from outside'* himself.

Ben described an incident of meditating on a train, concentrating on his breathing when, behind closed eyes, he experienced the following:

I was walking through the woods following someone who had a cloak made out of darkness and stars…it was weird […] and I wasn't actively thinking of it, if I'd started actively thinking about it, it would have just completely disappeared…but I don't know what it was, I don't know if it's part of my…it's something that fascinates me, gives me a sense of calm but it's also very troubling because I don't know what it is, I don't know what it meant (p.18, 473-484).

It seems the person he was following was genderless and unknown to him, but the 'darkness and stars' could be a metaphor for life, encompassing a backdrop of challenges against the lighter aspects of life which could include accomplishments, character traits, connections, natural beauty or anything regarded positively; or it could be an enlightened, transcended being. As with his art, he seems to experience this as being projected externally, feeling that, if he were to involve himself consciously, the vision would be lost. It seems it was spontaneous, vivid and beyond his active imagining. Whilst he is fascinated by the encounter and feels a sense of calm, the confusion potentially leads to a questioning of sanity as he becomes further absorbed in trying to make sense of the unknown. Thus, the calm he feels could be due to interpreting the vision as protective and signifying something beyond, or could be due to physiological changes as a result of being in a meditative state. However, the unknown can be disconcerting and, without a meaningful conclusion that satisfies him, the spiral of uncertainty and confusion may continue in the absence of a supportive context in which to explore his experience. Similarly, he regards his shamanic journeys in much the same way: *it's that sense of calm detachment with purpose…but at the same time it's not necessarily comfortable (p.18, 484-487).*

Within this specific journey he was instructed to find his 'true teacher' who communicated to him through imagery rather than dialogue. He describes this teacher as 'playing games' with him, hiding behind masks and having vivid exchanges which he interpreted as:

Try being more honest with yourself […] if you need something stop trying to deny it all the time (p.19, 530-532).

A picture says a thousand words rings true here as imagery surpasses language. Through this communication, either from an aspect of his higher self, or from a guide in another realm, he

appeared to gain insight into himself which enabled him to focus more on his own needs, valuing aspects that had been ignored for some time.

Over half the participants had used psychoactive substances such as LSD, cannabis, ayahuasca and psilocybin at various points throughout their lives. They generally experienced this as mind-enhancing, often considered a spiritual experience in itself, which instigated or further advanced the spiritual journey. However, there were occasions when this proved to be a challenging experience.

Ben describes *'quite a weird drug induced spiritual experience […] of just everything being connected which was **really** profound…the effect didn't go away for a…quite a while after the drug experience but I didn't really do anything about it at the time, I tried talking to a few people […] no one really got it, […] so I let it go by the wayside and just became more and more down the atheist journey* (p.2-3, 42-52).

It seems this had quite a dramatic impact on Ben who was affected for some time afterwards. However, he felt no one understood him and, therefore, as much as his eyes had been opened and he now likely viewed the world in an entirely different way, his experience was suppressed and he turned away from it. Without having an arena to explore this bemusing, life-altering incident, it seems it was easier to ignore it than become entangled in solitary attempts at potentially futile sense-making. Ben states that it was not until sometime later, when he watched a video illustrating this idea of universal interconnectedness, that his experience was validated and he began exploring these realms again.

Elliott attended an ayahuasca retreat with a close friend. He describes it as *'off the meter and difficult to talk about […]. Sacred voyage it was called. It was a sacred voyage.'* (p.21, 574-576). Again, this appears a profound experience for Elliott, beyond the realms of this reality and perhaps difficult to describe with any coherence or accuracy. Although he initially defined the label of 'sacred voyage' as 'cheesy', it appears that, for him, it was in fact a cherished and profound journey. Perhaps a journey within or without; everyone's 'voyage' will be different so it is difficult to get a sense of Elliott's true experience, with little insight offered and seemingly beyond the constraints of language. I can relate to Elliott's experience and, although different, I understand the ineffability and often impossibility of filtering such profound experiences through the physical earthly mind.

Jessica recalls smoking cannabis when younger and openly exploring her beliefs with a friend during this time. These 'chats' rarely, if ever, happen anymore. She says that cannabis made her '*definitely feel more …perceptive, more open […] it makes you go down these thoughts you wouldn't otherwise go down' (p.25, 641-645).* It also helps her '*make sense of things and put things in perspective' (p.26)* which she feels is a more 'spiritual way of thinking'. Thus, it seems that Jessica is able to access different parts of her mind when using cannabis, becoming more open to the world around her and gaining a wider perspective where she can potentially improve her outlook on situations. Increased perceptiveness is likely to include sensory experience as well as perhaps mental insight into situations.

Craig recalls having psilocybin as a late-teen and making himself a '*leaf mandala […] which became my little area to sit in during my trip and I wouldn't go outside of it' (p.34, 939-942).* He says that he did not know it was a mandala at the time and he was unconsciously compelled to make it; he has since learned that many traditions have and use a protective circle. Thus, it could be that the collective unconscious was at play and he was motivated unwittingly to behave in a similar manner to what has been practiced for millennia. He seems to link his behaviour to an unconscious drive which has since been validated within the framework of civilization.

As Craig started taking LSD, he met similar-minded people and felt his life drastically influenced as a result: '*For me, that little path, that little time, that little bit with LSD and everything, brought me into - if I hadn't taken LSD, I don't think I would have ever wanted to study theology.' (p.35-36, 981-984).* By repeatedly describing it as 'little', it seems to suggest that, despite how small and short-lived this involvement was, it had an overwhelming effect on his life. It opened his mind to '*what I regarded as inter-dimensional beings that I believed were there through the hallucinations. […] I still believe in inter-dimensional beings […] it's just that those parts of your brain are not always open to see them.' (p.36, 991-1003).* Thus, Craig's mind was opened to meta-physical existence and he suggests that this openness can be increased with the use of psychedelics, as was his experience. That said, from his childhood experiences, he was already aware of something beyond, but it seems this was perhaps amplified and potentially life-changing.

Psychedelics in general seem to have helped broaden these participants' horizons to consider alternative ways of thinking and viewing the world, not only within and of the physical dimension, but inter-dimensionally. Whilst some of these experiences may be challenging and confusing, subsequent effective assimilation provides a useful context in which to make sense of it. It seems that none of the participants discussed these experiences with their therapists.

2.3.6.2.3 *Finding meaning*

All participants drew on their spiritual beliefs not only to help them make sense of hardships they faced but also to find meaning in their lives generally. This subtheme relates to the various meaning-making patterns utilised by participants to help them understand their experiences and further support their sense of a higher purpose. Such validations generally enabled them to feel encased within a divine and, therefore, ultimately safe plan and helped make hardships more bearable.

Elliott lost his family members in a similar manner and, consequently, perceived these as purposeful events: *'…this all means something. You know, you get that feeling like, ah, it's all meaningful' (p.11, 305-307).* Positioning such a tragedy within reason likely makes it more acceptable; it makes it intended, as though there is a higher purpose or intelligence that makes these situations have an underlying meaning. They are not considered random accidents and thus are believed to serve a purpose. Although he does not state the purpose, the belief that it was intended may help him become more accepting of it and make peace with it. As he states: '*In terms of traditional I got into God because of tragedy, I definitely fit that data point' (p.13, 343-345).* Finding esoteric meanings can help to accept life's sufferings and extract any positive or learning from the difficulties faced. Feeling part of a divine plan somehow seems to make things seem manageable.

Sometime later, Elliott attended a retreat where attendees studied 'The Tibetan Book of the Dead'. He describes the retreat as *'crazy as acid'*, thinking they were putting drugs in the food due to all the coincidences and energies, '*not just the vibes, but the whole freaky deaky stuff. […] Then I (returned home) and (relation) had died, the day after I did The Book of the Dead. I was just like, no, there's no way. […] It just was too coincidental' (p.14, 365-375).* Again, the synchronicity of events may offer a means for Elliott to view this as higher-ordered, to view the matrix of life as an interwoven intention whereby he is part of something beyond his control yet included within a meaningful structure. It seems he views an underlying sense of purpose in the events surrounding him.

In a similar vein, Emma readily attributes certain happenings as meaningful and labels them as synchronicities as opposed to coincidences:

> *…whatever you might be reading, to have that stuff then happen in real life around you is […] like a confirmation, […] when synchronicities happen in your life, you can either just ignore them and brush them away and 'go, wh, you know what a coincidence' or you can take it as a meaningful synchronicity which confirms a way of thinking (p.14, 360-368).*

It seems that synchronistic happenings in the physical world confirm her view that there exists more than this material plane, *'It makes it a bit more special […] seeing the beauty in synchronicities […] that's my anti-depressant […] you can choose whether to see them or not' (p.31, 790-795)*. Emma recognises that she has a choice about how she views the world and her existence and it seems that noticing these events elevates her mood, allows her a sense of specialness within herself and the world in which she exists. She offers a sense that there is something beyond which governs this and, although she cannot manipulate and make these events happen, she can be the master of her perceptions.

For Elizabeth, her connection with nature and her embodied concept of balance has enabled her to recognise that, as the cycle of life ebbs and flows, so too does her bipolar cycle:

> *I learned to manage my illness and part of that was…when to not run away from periods of depression […]…You know you can't have joy without having sadness, […] without the dark side I can't have the light (p.23-24, 639-647).*

Elizabeth seems to regard her bipolar as a necessary and vital component of her existence, without which she would not be enabled more enjoyable times. It seems she is making sense of her experience in the context of her Pagan beliefs, in a way that makes the challenges more acceptable. This view is shared by the majority who believe that hardships are an inescapable and necessary part of the journey, an acceptance and understanding of which allows for individual growth and development, as suggested by the extracts below:

> *Once there is acknowledgement of that suffering, […] there's a liberation, a mental liberation, because the acceptance comes around (Craig, p.12, 324-326).*

> *Without a doubt the most challenging things that happen to you are also the most rewarding things (Emma, p.5-6, 130-132).*

The suffering is therefore faced and a search for meaning within the experience is sought in order that the ordeal can be worked through and not avoided.

2.3.6.2.4 *Support and protection*

For some, their spiritual beliefs offer them a sense of externalized support and protection. Whilst various spiritual practices and thought have already been covered, these have generally related to internal functioning as opposed to external focus. Although it may be considered that beliefs surrounding synchronicities are externally focused, it seems important to hear from those who talk directly of being looked after and protected by something outside themselves.

Elizabeth and Aaron both identify as Pagans, believing in a variety of different gods and the continuance of ancestors who exist just behind the veil. As Elizabeth states:

> *I just have to take a minute, centre myself and reach out, with my head, with my mind and I feel it as a supportive force…In times of stress, I just have to tap in and the supportive force is there walking with me, just 'cause I can't actually touch it or reach out physically with my hand, doesn't mean to say I don't feel it (p.14, 376-382).*

It seems that Elizabeth is able to focus mentally in times of stress in order to connect with this supportive energy. Whether this is an internal self-aspect or external ethereal entities, she 'feels' it, suggesting there is a palpable effect on her physiology as a result of this connection. She seems eager to qualify that not everything that exists is observable, which is perhaps due to feeling she is *'in dodgy territory with people 'cause you say that to people and they start to think 'ooh, well you're a bit delusional' (p.14),* as considered previously. This relationship seems very strong for Elizabeth:

> *I feel the ancestors walking around me, and almost like gather me up and put me in the equivalent of a soft fluffy blanket…and it's a very nice feeling when I don't necessarily have that…and I certainly didn't have it as a kid (p.29, 788-793).*

Elizabeth offers an image of security, comfort and protection. It seems that her unmet childhood needs are finally being met in adulthood and there is constant availability as and when needed. Although there was an occasion when she felt 'abandoned by the gods', this resulted in a powerful vision whereby she also felt her depression lifted and *'a sensation of peace and calmness just flowed over me, it was very strange, it felt very special' (p.30, 826-827).* Elizabeth believed that the ancestors made way for the 'big guns', who she believes were instigators of this experience. Hence her sense of containment and protection is further supported.

Similarly, Aaron describes:

> *the protection I feel from the gods, the protection I feel from the goddess, that are giving me another voice…there have been times in my life when I have felt incredibly alone and with my faith I'm not alone […] I feel them come, I'm not alone and I'll never be alone and that's to me, that is the big comfort that these people are there, these spirits…are there (p.22, 596-605).*

Aaron had a difficult childhood plagued with instability, abuse and bullying. Unsurprisingly, and by his own admission, he felt isolated and abandoned, often victimized by his own mental torture. Within his spiritual beliefs, he seems to have found the protection he never had and the voice that was never heard. Feeling constant protection means he never has to feel alone again. This, combined with his insight in therapy that he 'always had himself', likely means that, when one area perhaps feels weaker, strength can be gained from the other; the self can be managed through both psychological and spiritual means.

2.3.7 MASTER THEME 3: SPIRITUAL SELF AND SOCIETY

One of the most challenging aspects for participants seems to be how their spirituality is perceived and integrated within society. All respondents experienced a level of rejection and/or ridicule from family members, peers or wider society. Whilst some of these experiences have been mentioned under other subthemes due to an inherent, unavoidable overlap, this was an emergent master theme that warrants specific attention. It relates to how participants experienced their spirituality within their family and social networks and how they seek to and, often succeed in, embedding their spirituality within their daily lives, taking account of the various practicalities involved. It highlights challenges involved within social networks and finishes with insight into healthy integration of daily lived spirituality.

2.3.7.1 Family Contexts

This subtheme relates to spirituality within the family. Participants often felt unheard by their family when they were children. As previously discussed, many mystical and profound experiences were often overlooked and disbelieved by family members, resulting in the child feeling disrespected and perhaps stifled. Although participants did not dismiss their experiences, they learned not to discuss them within the family. It seems this attitude is often continued through adulthood.

Aaron became visibly upset during the interview when discussing his Pagan wedding and his family's reaction:

> *The great awkwardness that all my family showed, was um…something to behold, the po-faced, yea, but that was the ultimate…you know we expressed it, we said there **will** be a Pagan ceremony,[…] but to get people to actually come was very difficult […] and it's never been mentioned since (p.17-18, 468-481)*

Aaron had paid for his family to attend. His voice became much lower and he spoke slowly, looking down, clearly upset by the lack of recognition and support within his family. It seems he and his partner had prepared them for what would happen, how the ceremony would be conducted, but the awkwardness suggests the family did not wish to be there and their dismissiveness overrode what should have been and was a very special occasion. Aaron's descriptions are extreme – 'the ultimate, something to behold' - it seems he was surprised by their reaction and the silence that since followed suggests an exaggerated level of discomfort within his family, that such an important occasion has not been fondly reminisced at family gatherings, almost as though if it is not spoken about it did not happen. Such reactions are likely to increase Aaron's sense of rejection and reignite his sense of unworthiness.

Sue is not particularly close to her family and, since her mother said she would disown any child who did not believe in God, she naturally feels unforthcoming with her spiritual beliefs:

> *I can't really explain to my family what I believe […]. But that's not a problem, it's just a kind of limitation you know, it's kind of just a bit sad really (p.16-17, 448-451).*

Whilst there are many reasons why she may not feel close to her family, the fact that she cannot discuss her beliefs is not considered a major hindrance in her life, yet it is an aspect of her that is hidden from the family - an aspect which is 'not allowed' to be revealed. Lack of family integration serves as a barrier to support when needed and these relationships, which should arguably be the most stable for the development of the child, can help mediate later psychological stresses. That said, if there are other supports in place, the family perhaps does not have to be the only torch-bearer.

In contrast to these detrimental experiences, Emma offers another view, whereby she feels she has facilitated new ideas within her family:

*I've always been very, **very** open about it despite the fact that my friends and family are not necessarily spiritual, that's just who I am and people accept that (p.17, 420-422).*

Whilst Emma feels unstifled regarding her beliefs, this contrasts to later discussions where she felt lost connections within her community and a wish to meet on this spiritual plain with her contemporaries. However, it seems that, within her family, despite all other obstacles faced, this aspect of herself is accepted. She practiced Reiki on her grandmother who then encouraged her friends to attend following her positive experience. Thus, Emma seems to feel valued within her family as she feels she has helped expand their minds.

2.3.7.2 Social contexts

The impact of culture and society cannot be ignored since it is an inherent part of our existence and certainly emerged as a theme for these participants, in relation to their spirituality. For many, the reactions of their immediate social circles and wider society have often been experienced as inhibitive. This subtheme therefore takes account of participants' experience of spirituality within their peer groups and wider society.

Ben was unable to effectively integrate his psychedelic spiritual experience at the time which made him repress his esoteric thinking for a while. He experiences a lack of opportunity for intelligent discourse amongst his peers to help him challenge and explore his ideas, a vital missing part which he finds 'saddening':

…it's like having a plant that's slightly grown and absorbed the things around it that seem to make sense and sort of growing out of it a bit, it doesn't really seem to have much active interaction with the world around it, it's something that matters a lot to me […] it just seems so separate to everything else, which, I'd like it to be more included (p.15, 402-408).

Using a plant as a metaphor, it seems Ben regards himself on a developing spiritual journey where currently he feels he has absorbed the things he needs yet his spirituality seeks further expression. Schooling provided him with the opportunity for 'mental growth' to get him to a place where he is able to 'feed himself' with what he needs. However, it seems his immediate social environment is restrictive and he seeks further nourishment. The image is of a solitary, almost withering plant requiring nutrients in order to survive. Hence, Ben seeks active immersion in a fulfilling environment

where his needs can be adequately met. Whilst this has been a black void in his life, it seems his therapy, as mentioned earlier, has helped him fill this gap, and the link between the spiritual dimension and well-being is evidenced:

> *What I needed to do and work on through therapy actually seemed to come about through what was there as a lack in my spiritual life (p.26, 423-425).*

The impact of Elliott's lack of social support has previously been considered, '*there's not many people I can talk to about it'* and he, therefore, feels he is the only one thinking in these rhythms (see lost adult). Thus, it is perhaps worth reiterating at this stage that this lack of social context potentially increases the likelihood of ungrounded spirituality as spiritual confusion is encountered within the isolation: '*I would feel a bit lonely, or a bit misunderstood?' (p.16, 437).*

Thus, whilst individual social circles impact the spiritual journey, wider society is also vital to the phenomenology. Jessica and Craig generally view Western society as limited in terms of spiritual outlook and enhancement. Jessica describes a reluctance to openly share beliefs due to *'derision in society about people who have spiritual beliefs'*, regarding them as ridiculing and rejecting of those they don't understand, such as 'hippies going to Stonehenge'.

Similarly, Craig is critical of the general ethos within Western society:

> *Everybody from a Western point of view has feelings of self-deprecation and self-worth. They are imposed upon us by the world in which we live [...] It's a secular, materialist, reductionist society that puts no emphasis on the spiritual and has run away with the secular thinking, that that's the be all and end all. But what comes with the secular is absolutely […] no goal to existence. You're born, you go to work, you die (p.54, 1503-1509).*

Due to Craig's previous self-deprecation and low self-esteem that he suffered into adulthood, it seems he was a casualty of society's pressures and expectations. He regards society as lacking in spirituality, where the material world becomes the supreme focus for existence. As such, he feels that deeper purpose and meaning is breached as society attends to material gain at the expense of something greater. Consequently, Craig has, like the bird of prey, risen above this and sought fulfilment in alternative ways, establishing himself within an assimilation of ideas and practices from many different cultures.

2.3.7.3 Practicalities within society

Whilst the general ethos of our society may be regarded as dismissive of spiritual factors with focused attention on monetary gain, it perhaps makes sense that practically applying a spiritual

dimension within such parameters may prove challenging. This subtheme considers the necessary prerequisites for practicing a spiritual life within society and although is related to 'embodied spirituality' below, it is concerned with specific attributes considered necessary by the participants.

Ben already highlighted that the 'adult world' inhibits available time to explore these dimensions (spiritual child). This view is shared by Jessica, who regards society generally and her more personal commitments as a hindrance to developing her spirituality. Within modern society, she feels the connection to this spiritual dimension has been lost over the centuries as we have become increasingly '*distracted by transient things like twitter and Facebook and Instagram you just don't tap in to…any longer' (p.2, 50-51).* Her family obligations also obstruct her as '*I'm so busy looking after everyone and being busy, but it's just something that's there…quietly' (p.8, 207-209).* Thus, although she is aware of this part of her, it is not at the forefront of her existence due to other priorities. However, she says:

> *…if I was completely alone and I could make any decision I wanted to…then I guess I'd lead a life that would honour that much more…I'd probably wake up really early, I'd go to bed really early, I'd meditate every day, I'd exercise outside in nature every day, so I was constantly getting those sort of hits' (p.22, 559-565).*

It seems she would like to pay more attention to this aspect of her life; her experience of such engagement has yielded positive results and she feels that to increase this would offer constant benefits. It seems her spiritual development would largely be based around self-care/healthy living and time for herself, whilst maintaining connection to nature. Thus it seems self-focused attention is considered necessary for spiritual development.

Sue has only more recently explored her spirituality as previously she was in 'survivor mode' and lacked the capacity to explore this:

> *I wasn't in a good place to be thinking about it, there were other things that I needed to be focusing on and so I didn't really have space in my head to be thinking about it […] (p.22, 593-596).*

It seems that exploring a personal spirituality takes time and a concerted approach to self-focus. Sue freed herself from an abusive relationship and it was then that she was able to consider herself:

I really had the space to think about them you know and to work out my own priorities and work out who I was and yea, it was a lot of finding out who I was and part of that was 'what do I actually believe?' (p.22, 610-613).

Time, solitude and mental and physical space appear to be cornerstones of spiritual development, actively sought by those on such a journey and enabled through practices such as meditation. Other people, in family and social networks, seem able to hinder such opportunities and it seems that, for those with unsupportive others, the self can become entangled in a perceived or actual necessity to serve others at the cost of nurturing the self.

2.3.7.4 Embodied spirituality

Whilst time and space may be important factors for spiritual growth, it appears that all participants have managed, to some degree, to embody their spiritual beliefs and practices within their lives, some of which are considered within this subtheme. A handful of participants are vegetarians in support of their respect for all living beings:

I feel that energy and that light in everything and that's part of the reason why I don't eat meat […] because I kind of feel like that would be damaging that energy (Sue, p.2-3,53-56).

Beliefs about karma are shared by a few and, consequently, encourage positive behaviour towards others, whilst also encouraging a sense of living in a just and fair world where retribution befalls those perceived as deserving of it. There is a sense of balance, fairness and natural order and a desire to behave morally in order to avoid potential reprisal:

If you do something it'll come back on you three-fold […] knowing that the rule of three doesn't just apply to me, it applies to other people too, like for example those that…did what they did (Aaron, p.21-22, 589-593).

Craig integrates Buddhist principles into his life such as 'right speak' which, although he sometimes finds challenging, he also reflects on during his meditations. His behaviour is therefore consciously conducted and time spent afterwards to reflect and address as necessary:

It certainly challenges my conduct at times perhaps. I might have spoken behind somebody's back. […] Everybody does it, but that doesn't excuse it. But I've actually started to adopt the policy of just, if I don't like something, saying it to their face (p.39-40, 1091-1099).

Ben states:

if you believe something you have a responsibility to act on it […] it's not a passive thing I don't think […] I don't think you get much meaning out of just kind of thinking something in the background of your mind and not doing anything about it (p.1, 9-13).

Ben raises the issue of personal responsibility, which suggests embodying and implementing the personal beliefs that you have. Transferring thought in to action, to him, offers a sense of meaning where thought is galvanised and is not wasted in the recesses of the mind. He suggests that such behaviour need not be grand gestures but, if everyone even just turned off their light, we could make a difference. The idea of shared responsibility and universal interconnectedness therefore emerges again and signifies each individual's part to play in the overall whole.

Spiritual beliefs influence action which may become established behaviour, beginning at the micro level and rippling out into the world; the previously lost soul may therefore become a fundamental of the world's salvation as they begin to embody their spirituality.

Endnote

These participants have offered a fundamental and true part of themselves, allowing an insight into their essence, their being and offering great generosity in sharing such personal accounts. There is so much richness and subjectivity that it seems unfair not to include more of their journey, although this is obviously not possible. It is hoped that each participant has been heard and an insight has been gained into each of their lives and experience.

The next chapter will consider these findings in relation to the literature.

2.4 The Journey is the Destination

This discussion chapter will consider the master themes in the order they appeared within the analysis and how they relate to extant literature. Reflexivity and issues of quality/validity will be addressed and applications to practice, limitations and considerations for future research will be offered.

2.4.1 Religion and spirituality

As highlighted within the analysis section, religion was largely viewed as an enforced negative component, except by those who were more able to assimilate this within their lives, seemingly based on more positive experiences of it when younger. It could be that the recruitment advert, aimed specifically at those who have "spiritual beliefs that are not connected to an orthodox religion" naturally attracted those who had a difficult relationship with religion. However, the fact that two people viewed religion positively suggests this was not ultimately exclusive.

Those more able to integrate and accept religion per se seemed more attuned to an underlying morality on which the religion itself is based and were, therefore, better able to cut through the seemingly dogmatic control of church attendance and family expectation. It may be that fear drives this need to control and having set parameters of behavioural expectations and a succinct way of interpreting life and the cosmos, as offered in monotheistic religions, has facilitated generational adherence to such teachings, such that potential deviation from this instils fear. Hence, parental concerns may be bestowed on children by way of enforced compliance to religious ideals in a bid to achieve a contented life after.

Arguably, such a notion is consistent with O'Hanlon's (2006) supposition that people attend to religion in pursuit of avoiding hell, whereas spirituality is gleaned from already experiencing 'hell'. Given that all participants had endured challenging life experiences, it could be that their search for 'something more' was borne out of these difficult personal trials. However, the individual spiritual path was also a product of seeking answers to existential questions and finding that which 'felt right'. It was, in some cases, a means of rebellion against established religious paradigms and, further still, it was often an innate aspect which participants felt had long existed within. Thus, the question remains, are people borne with innate spirituality or is this derived throughout the life cycle? This study seems to suggest that personal spiritual paradigms have developed over time yet are commonly based on a sense of 'something more' from a very young age, which suggests it is innate. As Teilhard de Chardin famously said: "We are spiritual beings having a human experience"

and, therefore, our spirituality is considered an inherent aspect of our existence. The direction in which this manifests, however, appears to be dependent upon life circumstances.

In response to Kalsched's (2013) view that spirituality is more readily accessed by traumatized people, this would require the level of trauma to be measured to ascertain who qualified for easier access. It could be argued that we all experience trauma to a greater or lesser extent, on a continuum, and the greater the trauma the greater the fragmentation, as the survival drive has to work much harder. But perhaps that is a negative way to view it; life is littered with emotional upheaval, loss, grief, craving and discontent – a vital necessary part of life and our journey is perhaps to navigate our way through this to mend the broken parts and feel complete in spite of it all. Thus, life could be viewed as a traumatic continuum or as a continuum of repair, renewal, growth and wholeness. Although not considered a linear process, as various circumstances can disrupt the journey, a level of progression cannot be ignored as what has been learned, seen and heard cannot be undone.

Most participants were aware of 'something else' from a young age, based on anomalous experiences and emotional connections they had to their surrounding world. However, one participant became atheist, or felt lacking in spirituality during a traumatic period in her life. This was in her early twenties and could suggest a rejection of her spiritual thinking, perhaps feeling abandoned, struggling with hope and engaging all her energy in simply surviving. This suggests that spiritual aspects may not always be available during traumatic times, as too much energy is expended on resolving psychological damage and pain rather than exploring these other unknown levels.

Individual spirituality included aspects of nature, ritual, responsibility, connectedness and a sense of cosmic wonder and awe. This is consistent with the literature that describes spirituality as such (e.g. Miller & Thoresen, 2003; West, 2011; O'Hanlon, 2006). Nurturing this aspect potentially benefits not only the individual but society as a whole, as an increased sense of responsibility and cosmic unity undoubtedly strengthens connections to others and broadens perspective from the individual to include the interrelatedness of all beings and thus care and concern for their states of existence. Furthermore, although people may believe and feel there is something more, it appears that, for this population, this was not a 'blind faith' but rather a lived sensory/physiological experience that has guided and influenced their journey, in both outlook and experience.

2.4.2 MASTER THEME 1: THE LOST SELF

2.4.2.1 In childhood

All participants recalled having either spiritual/EH experiences or what may be classified 'peak experiences' such as a sense of connectedness to nature or a sense of 'something else' when they were children. It seems these could generally be considered transformative experiences insomuch as they facilitated a sense and/or connection to something beyond the self which was vividly recalled within interviews, suggesting the transcendental and impactful nature of such events.

Research suggests there is evolving insight in to children's spiritual development as the potentially reductionist view of stage-development models as proposed by Piaget (1965), Erikson (1963; 1968) and Kohlberg (1976), for example, has been challenged (Moore, Gomez-Garibello, Bosacki & Talwar, 2016). Hart (2003) offers insight into a vast spectrum of childhood spiritual experiences and highlights children's inherent ability to connect with complex issues such as injustice and compassion and suggests a more flexible approach to considering children's spiritual insights. He demonstrates that childhood experiences are deemed to have personal meaning even if the child's linguistic capabilities defy their ability to adequately express themselves. However, such ineffability of spirituality and related experiences remains evident within adulthood as demonstrated not only within this study but by Hart's description of attempts to define spirituality as "trying to hold water in our hands" (p.7). Thus, both child and adult face similar challenges of self-expression.

Similarly, Moore et al. (2016) caution against underestimating children's ability to engage with their spirituality. They demonstrate that children have the ability to connect with metaphysical concepts and are able to draw distinctions between the duality of human and divine. Through their study of children's spiritual development, they concluded that "although spirituality may be deeply intrinsic, it is fostered and channelled by one's environment […] children who have more opportunities to interact in highly religious and spiritual contexts, may have a spiritual life that is being more intentionally nurtured and supported" (p.8). This suggests that enhanced integration of spiritual contexts may lead to subsequent effective spiritual development and, therefore, highlights the extent to which this is culturally determined and influenced. They propose further qualitative and mixed methods designs to advance understanding of children's spirituality.

In response, the current research supports the influence of familial context and it seems that the degree to which children's spirituality is nurtured and encouraged depends on support of the child's development as opposed to spiritually imposed parameters and ideals. This study offers a qualitative review of some of the participants' childhood experiences and supports the notion that children are

attuned to their spirituality. However, this research offers retrospective insight into these experiences and, although valuable in understanding a personally developed spirituality, the rawness and timely recording of such experiences is potentially clouded by the adult's subsequent perspective. Despite this, most participants were able to recall events in a seemingly engaged physiological and emotional manner, suggesting they were able to effectively re-engage with the experience.

Children's spiritual experiences and insights may find better verbal expression in adulthood, as suggested by the aforementioned stage theorists. However, the findings demonstrate that these participants had spiritual experiences, heightened connections to nature and an innate belief in something other/beyond. Nevertheless, they largely felt ridiculed and devalued by their family and peers. Their unshakeable conviction of these experiences was seemingly undiminished by such reactions but the potential internalization of perceived rejection and worthlessness could have destructive consequences for the developing child.

Maslow's (1943) hierarchy of needs and Erikson's (1963) psychosocial stages of development are similarly posited in terms of how successful fulfilment of consecutive levels leads to a self-actualized person or, in Erikson's view, a more defined and integrated personal identity. According to Erikson, particular qualities need to be nurtured and achieved at various life stages to develop into a fully-functioning adult, although this process can continue into maturity. Thus, the child should be allowed autonomy and room for initiative in the early stages (2-5 years) to counteract feelings of personal doubt and guilt. As children mature, the peer group becomes more influential in shaping interests and self-perception and, on entering adolescence, the conflict is based around establishing a sense of self within a period of biological confusion and social expectation. Thus, around this time, issues of personal meaning and purpose are explored – a stage aptly named 'identity versus role confusion'. Successful integration of this developmental stage arguably offers a foundation for a strong sense of identity and direction within one's life. Gebelt and Leak (2009) highlight the centrality of spirituality and suggest: "[it] is not simply a domain of identity, but rather the central feature around which identity is organised" (p.181).

Within this study, two participants explicitly named adolescence as a time of spiritual exploration and awakening, whereas one individual described this as a quiet period, encased by innumerable vivid occurrences either side of it. Two individuals, despite childhood spiritual experiences, felt their spiritual connections emerged more strongly within early adulthood. Thus, Kiesling, Montgomery, Sorell and Colwell's (2006) assertion that ego construction and spiritual identity continues into adulthood is supported here. The participants explored and developed their own paths at different

stages, therefore demonstrating that the spiritual journey may not be a linear process as events occur that thwart or quicken the development at different times.

Part of this journey seemingly involved spiritual identity being expressed in physical representations such as body tattoos and various objects around the home. Emphatically described by one participant as being an essential part of her, it seems that spirituality is a fundamental aspect of identity which, if challenged, belittled, minimised or ridiculed, has the potential to damage self-esteem and be associated with various consequences of negative attachment styles (Bowlby, 1969; Howe et al. 1999). Thus, psychosocial stages of identity formation and attachment style can serve to nurture children's innate spirituality, allowing an integration of all self-aspects and experiences or, alternatively, to hinder their progression by challenging their apparent negation of 'normality'. Hence, aspects of the self may become lost as identity is challenged. This fear of losing the self was experienced by many of the participants, although this was also due to adult relationships and not only a product of childhood interactions. However, it could be argued that if identity formation and attachments were sufficiently developed, then this sense of self-loss would be unlikely to occur at any stage.

2.4.2.2 In adulthood

Nevertheless, this loss was both feared and experienced by some of the participants. Many described a need for 'grounding' within the physical realm whilst engaging in opportunities to explore the spiritual. Regarding spiritual emergency as described by Grof and Grof (1989; 1990), it seems that, within this traditional sense, none of the participants experienced this, although they arguably teetered on the edge. Participants had transformative experiences throughout the ages although it seems they did not exhibit psychotic-like behaviour as a result of these. Perhaps the participant closest to a spiritual emergency was Ben, following his transpersonal/spiritual experience when taking psilocybin mushrooms. He largely sought to ignore this earth-shattering insight after peer minimisation and lack of understanding offered him no grounds on which to explore his new level of consciousness. Thus, perhaps his defence of 'ignoring' it allowed him to remain grounded and contained until a later time when he was able to explore this further; at such time an opportunity (perhaps synchronistic) offered him means of understanding and contextualising this via a video on YouTube. Ben, therefore, seemed to have experienced a spiritual emergence without the emergency. Arguably, this was the case for all participants to varying degrees.

Elizabeth described her bipolar symptoms and was receiving approved psychiatric intervention. However, it seems that her initial 'breakdown' which she described as an "enormous great wave" which was going to "pull her down into the abyss" and she "had no control over" was an accumulation of other life events that amassed to finally overwhelm her. Thus, again, it appeared that this was not a result of a spiritual/transformational experience per se and indeed her spirituality seems to have further developed as a result of the challenges she has faced. Given that this was a non-clinical population, it is perhaps unsurprising that there is limited expression of spiritual emergencies. This would likely be increased within a clinical population as highlighted by Heriot-Maitland et al. (2012).

Despite this, it appears that the possibility of spiritual emergencies lie on the periphery with a potential to be triggered at any moment, leading to confusion, sense of ego dissolution, lost identity or distancing from this reality and, given alternative interventions or lack of, the experience may have been different for these participants. The majority of them highlighted lack of support and understanding as problematic, often leading to a temporary state of isolation and uncertainty. Therefore, although not an emergency within itself, this sense of alienation and fragmented spiritual enlightenment has the potential to detach the individual from grounded reality and become lost in the ether; fears that were raised and experienced by a couple of the participants, albeit seemingly effectively managed.

Furthermore, issues of psychological dissonance were raised. For one participant this was in relation to balancing felt-sense and beliefs with particular spiritual teachings whilst for a handful of others this was concerned with integrating spirituality alongside scientific understanding and background. Those apparently more able to manage the spiritual/science dichotomy contextualized this within scientific research that confirms the meta-physical reality of cosmic interconnectedness and unity. 'The Tao of Physics' by Fritjof Capra (1983) offers an accessible insight into such matters.

Within this study, it seemed that spiritual bypass, as described by Welwood (1984; 2000), was only really evident within one participant. It appeared that other individuals were more able to manage spiritual exploration and were not caught in a defensive self-protective cycle that disengaged them from the material world. This could be linked to varying levels of trauma, as Welwood highlights, to avoid unresolved emotions. Further knowledge of individual childhood attachments and experience would offer more insight as to why Elliott, specifically, was seemingly more prone to spiritual bypass

than other participants when all of them had endured challenges and trauma to a greater or lesser extent.

Perhaps the degree to which individuals engage with spiritual bypass is impacted by their locus of control (Rotter, 1966). Arguably, all participants demonstrated an internal locus of control in terms of taking responsibility for their lives and actively seeking self-development/healing through attending therapy, various workshops, travel and study. Although unquantifiable in this instance, it could be argued that Elliott exhibited a greater degree of external control, crediting his Lama with manipulating events around him for example and, whilst this may be accurate, such externalisations further detach him from self-focus.

Elizabeth sometimes felt powerless and, therefore, out of control within the care of mental health professionals as, ultimately, decisions regarding her liberty were made by various others. Also, both she and Aaron often reach out to 'the gods' for comfort and protection which may also be considered as an external locus of control. However, overriding this appeared to be an internal drive for achieving a sense of 'wellness' and wholeness, thus demonstrating the self-actualising tendency in action, to improve and potentially transcend the self. Aaron and Elizabeth demonstrated ability in confronting painful emotions and were seemingly more able to integrate these into their life rather than seeking to avoid them. Spiritual bypassing may therefore be a consequence of various attachment styles and subsequent perceptions of control and self-management. A more comprehensive review of individual attachments could throw further light on this.

2.4.3 MASTER THEME 2: FINDING AND MANAGING THE SELF

2.4.3.1 Western Methods

There were various ways in which participants found connection with lost aspects of themselves and the means in which to manage and contain their lives and difficulties. Within this subsection was largely included medication and therapy, within which the themes of dis/connection and integration/separation emerged.

2.4.3.1.1 Connection and disconnection

A common theme within this sample was the level of connection individuals felt to themselves and to others as a result of therapeutic intervention and/or medication. The use of medication was deemed helpful by one participant, whereas two others found this to be largely a product of self-dissolution which hindered their ability to connect with themselves and others and denied them the opportunity for self-management. Whilst use of medication is evidently useful for certain individuals to help

stabilize and manage chemical imbalances for example, these participants' experiences support personal observations and experience of a similar nature. For one, he found the interaction to be void of a therapeutic encounter whereby he was offered a clinical diagnosis which he felt negated his subjective experience. Similarly, another felt that medication was a rapid response to personal difficulties without consideration of more therapeutic interventions and was a process which challenged healthy connections to herself and others, generally.

I can relate to this personally, given my attendance at a GP surgery at the age of 15 seeking help, whereupon I was immediately offered anti-depressants as opposed to psychotherapy, which was what I was seeking. However, the landscape appears to have developed since then with the introduction of IAPT services for example and greater recognition of mental health issues that are seemingly more readily dealt with through human connection and technique rather than medication. That said, whilst recently working in an adolescent psychiatric inpatient unit, I witnessed a girl being given medication largely against her will in an attempt to 'calm her down', despite the fact she was managing well by holding my hand and engaging in breathing exercises and grounding techniques. When discussed in supervision, the nurse's approach was described as 'old school', suggesting that reliance on medication, particularly within a clinical environment perhaps remains at the forefront of such a setting. Although there was opportunity for a variety of therapeutic interventions, it seemed the girl's distress was uncomfortable for the nurse to encounter and she sought to diminish it quickly rather than encourage her to use learned skills which would help develop her agency and self-actualising ability, a point raised by two participants in this study.

With the exception of one participant, all were able to report positively on some or all aspects of their therapy, suggesting a degree of successful outcome. Main benefits appeared to be centred on increased self-awareness and insight into their phenomenology and various situations and relationships. Participants mostly had experience of CBT and Humanistic paradigms which were experienced differentially; the former offering practical skills and techniques such as cognitive restructuring and personal goal-setting and the latter providing a more in-depth, exploratory process of past and current being. In most cases, an improved connection to self-aspects led to better functioning through greater insight, understanding and ultimate acceptance of the self.

Based on the perspective of James, Maslow and humanistic psychology in general, Helminiak (2005) believes focus on spirituality should be grounded within inherent human qualities as opposed to meta-physical phenomena, thus avoiding alienation of spirituality within psychology. He states that all experiences, even transpersonal, are human in nature and, therefore, underlying meanings and

values should provide the focus as opposed to the experience itself. This proposal supports Gockel's (2011) findings that participants found their therapist's inherent qualities to be a predictor of assimilated spirituality. Furthermore, much research highlights the therapeutic relationship as the biggest determinate of successful therapeutic outcomes, above and beyond the use of specific techniques and processes (e.g. Lambert & Barley, 2001; Clarkson, 2002). Thus, in this instance, Helminiak states: "spirituality would be a matter of overall good living and the enhancement of advanced human development. Good psychology would be good spirituality and vice versa." (p.76).

Support for this is also evident within this study as participants valued the opportunity for time and space for self-exploration alongside perceived similarity of therapist philosophies. The possibility of self-focus, feeling understood and heard, allowed some of the individuals to feel grounded within physical reality and avoid disappearing into the ether and potentially losing further contact with themselves. It appeared that positive connections with the therapist, in an environment in which participants felt valued, increased their ability to connect with themselves and ultimately acknowledge and understand various lost aspects. Humans are social beings and without such strong connections whereby risk can be taken to reveal the self and connect with the painful shadow, much may be overlooked and potentially lie wasted, destructively rotting under the surface.

2.4.3.1.2 Integration and separation

This study offers an alternative view to much of the research that highlights clients' wishes to discuss their spirituality within therapy and thus be deemed an integral part of the process (e.g. Koenig, McCullough & Larson, 2001; Plante, 2007; Post & Wade, 2009). Many of the participants did not actively seek to introduce or explore their spirituality within the therapeutic setting as some were concerned that such inclusion would negatively impact the therapeutic relationship. Some were wary of how they may be perceived and reacted to by their therapist and, therefore, decided not to raise their spiritual beliefs/practices in an attempt to avoid this. In most cases therapy was not viewed as part of the spiritual journey as suggested by Mayers et al.'s (2007) study. Thus, the current research seems to support Jenkins' (2011) findings that some clients 'play the game' in order to continue with therapy and avoid potential judgement.

Furthermore, over half the participants viewed their spirituality as separate from the process, not only in terms of maintaining a therapeutic relationship but due to a compartmentalization of spiritual versus psychological focus. Thus, arguably, the process of splitting seems to continue, in many cases, into the therapeutic encounter as inherent self-aspects are rejected upon engagement.

Whilst some, including myself, may be guilty of over-spiritualizing certain issues and, admittedly, I was surprised at the level of psychological/spiritual dissonance, Clarkson (2002) warns of the need to "differentiate between the psychologization of spiritual hunger and the spiritualization of psychological problems" (p.39). There is a need to recognise the psychological versus spiritual nature of issues without an over-reliance on either. In this study, although the majority viewed their spirituality as an innate aspect, they seemed adequately able to discern their need for psychological and/or spiritual focus at particular times.

Those who actively discussed and explored spiritual aspects appeared to be those who were based within humanistic paradigms. However, one participant felt his spiritual journey was encouraged by his cognitive-behavioural therapy where he explored certain meaningful activities aimed at increasing his well-being. Despite this, although he further explored his interest in Paganism, spurred on by the function of the therapeutic model, he did not feel it an appropriate arena in which to share the specifics of this; he feared peer judgment in group therapy and lack of understanding by his therapist.

Gockel's findings (2011) are supported to some degree here. Most participants were wary of engaging their spirituality within therapy but, in contrast to Gockel, they generally did not view therapy as an extension of their spiritual journey and, with the exception of one participant, they did not actively seek a spiritually-orientated therapist. In most cases, particular counsellors were offered through specific organisations such as IAPT and community/inpatient psychiatric services and/or social contacts. One participant actively researched a specific therapist whom she felt was compatible based on her 'alternative' ideas. Difference in approach may therefore be based on whether the setting is private or clinical and the extent to which clients have the opportunity to choose their own therapist, based on who they consider to be an attuned match.

Elizabeth's experience of a clinical setting offers invaluable insight into the approach therein as opposed to non-medical models. Although perhaps not a spiritual emergency, as previously discussed, it is difficult to establish, from this stand-point, the presence or absence of psychosis and indeed, from her account, it seems her bipolar may have caused the ultimate distress yet there was an emergence of spirituality within this. However, she experienced much of what has been highlighted in the literature – a general sense of being unheard, misunderstood and frustrated in trying to have her experience and fundamental self-aspects integrated into her treatment without being pathologized. It seems that these themes also ran true for those in the community to perhaps a lesser extent. This links to Heriot-Maitland et al.'s (2012) findings that clinical and non-clinical settings and the expectations therein can influence the experience of spirituality within therapy.

Jung (1995) states: "in therapy the problem is always the whole person, never the symptom alone" (p.138). While some models may be more attuned to dealing with the observable problem, as arguably the case within time-bound, structured CBT paradigms, humanistic approaches appear more geared towards holistic intervention by way of 'prizing' the entirety of the individual and allowing opportunity to swim through the waters of discovery and as such integrate all individual aspects.

Whilst the therapeutic relationship may be a critical determinant of healing, it is proposed that the main goal of therapy is to reach a point of self-integration, a sense and experience of wholeness and grounding within the self, thus becoming self-actualized. In order to achieve this, all parts of the self require equal acknowledgement for successful healing and transformative integration including the child/adolescent/adult, the cognitive/emotional, the physical/spiritual, the conscious/unconscious and the personal/transpersonal. Such interventions offering a psycho-spiritual approach include those under the humanistic/transpersonal umbrella such as Psychosynthesis, Holotropic breathwork and Core Process psychotherapy, mentioned previously. However, such interventions seldom seem to exist within mainstream society and certainly, within my experience, I have not encountered them within state organisations. This is perhaps due to the lengthy nature of such interventions that are incompatible with cost-effective, time-bound access.

2.4.3.2 Through Spirituality

Spiritual beliefs and practices were drawn on as a means of coping and seeking connection with the self and other. This included spending time in natural surroundings and sacred places, exploring the unconscious, finding meaning and support/protection.

2.4.3.2.1 *Natural surroundings and sacred places* were commonly referred to by participants as particularly healing and unifying. They often found that time outdoors provided a sense of awe and cosmic unity whereby they were equalized within the greatness of the universe and, therefore, valued themselves and their place within the world. Defensive, self-critical and destructive barriers were largely diminished as they transcended the psychological restraints and focused on something much more expansive and freeing. Consequently, certain issues appeared to hold less significance as perspective innately broadened, enabling more rational appraisals to then deal with them.

'We are nature' was the mantra of the 'Psychotherapy in Nature' Conference held at the Eden Project in November 2016. Yet modern technology, material focus and the development of a

perceived duality of human (physical) versus nature (spiritual) has detached us further from this, despite the fact that our ancestral past was founded on close unity with the natural world for our existence and survival – we were 'at one' with nature. During this conference, the therapeutic benefits of nature-based psychotherapy were explored. In support of these participants' experiences, it was proposed that the natural environment can become a third aspect of the therapeutic relationship, by way of exploring client's interactions with their surroundings and, therefore, the focus is less intensely directed on the client-therapist relationship. Although not exclusive, this would obviously be of particular benefit to those who have difficulty relating to themselves and others. Furthermore the sense of space and freedom allows aspects of trauma to seem absorbed by the surroundings and feel less intense and threatening as can often be the case within the constraints of an indoor counselling setting. Various practices may be employed to facilitate connection with Mother Earth and potentially increase a sense of unconditional love and unity and/or highlight issues of self-worth which could then be worked with. Whilst participants in this study felt benefits from such connection, others, perhaps with a need for further healing, may face obstacles and discomfort in experiencing and accepting this relational quality (Jordan & Marshall, 2010; McKinnon, 2016). Thus, there are seemingly attendant benefits that can be gained as highlighted by these participants and supported within the literature. However, nature-based therapeutic interventions require careful consideration to be ethically sound for both practitioner and client.

2.4.3.2.2 *Exploring the unconscious* was experienced and practiced by all the participants in one form or another, to include artistic/creative endeavours, meditation/journeying and psychedelics. Accessing the subconscious by creative means could be associated with the concept of free-association whereby consciousness is bypassed and innermost thoughts, feelings and images have the opportunity to emerge, thus revealing latent insight and self-reflection. Within this study, such engagement was often experienced as transcendental and externally influenced which could be due to self-doubt in personal ability to produce such inspired creations. However, the outcome, although at times disconcerting and confusing due to the experience of powerful energies, also offered participants a sense of pride, elevated mood and a sense of connection. Art therapy is used widely as a means of healing that transcends language barriers and allows direct access to unconscious material (Maldiochi, 2007).

Whilst creativity has been associated with pathological states such as schizophrenia and bipolar disorder (Lukoff, 1988; Kyaga, 2011), Holt (2012) explores the extent to which this creativity may serve as a protective factor when people encounter anomalous/EH experiences, providing an outlet

on which to express this and thus promote well-being. Whilst none of the participants appeared to engage with art as a response to a transpersonal experience, the experience itself appeared transcendental. Engaging these aspects may therefore help individuals connect more closely with their spirituality.

Various meditation practices and shamanic journeying were engaged with by many of the participants. Meditation appeared to offer benefits of insight, relaxation and self-improvements, which is consistent with established literature. However, it could be argued that extended meditation practice by one participant led to a potential spiritual emergency which was 'as crazy as acid' and he felt overwhelmed by coincidences, energy shifts and changes in consciousness. Hence, caution is advised and appropriate intervention and support is suggested when exploring such intense practice to ensure healthy state of mind and maintain grounding in physical reality (Shonin et al. 2013; Grof & Grof, 1990).

The shamanic journey/meditation appeared to offer one participant invaluable insight into how he was leading his life and necessary interventions required to move forward and develop. He subsequently made changes and was continuing on his spiritual journey with seemingly more clarity. His experience was disconcerting and confusing yet enlightening. Such practice may be consistent with Jung's idea of confronting the shadow, as described by the 'cloak of darkness and stars'. What Ben encountered, however, was arguably an archetypal figure emerging from the collective unconscious or, as suggested within the shamanic literature, a guide/teacher from another realm. The confusion and lack of available support could have potentially led to a spiritual emergency, yet his appropriate and varied appraisals of the 'message' meant he was able to integrate the experience effectively and move on. Thus, the origin of the image is largely immaterial; it is how the inherent message is assimilated into the individual's life journey that negates the chance for this to become a spiritual crisis which then potentially requires subsequent intensive, costly intervention.

Psychedelic substances were reportedly a source of great insight and a progressive shift in consciousness, often regarded as a spiritual experience within itself, consistent with much of the literature (e.g. Grof, 1972; Griffiths et al. 2006). Thus, the impact of such involvement cannot be denied and should not be overlooked despite the constraints and limitations of current political stance. One participant managed his experience well and quickly became involved with a new social group who were similarly inclined and, were, therefore able to offer mutual support and multidimensional exploration. However, as discussed previously, another participant was left potentially vulnerable, trying to make sense of his profound insight of energetic fields and cosmic interconnectedness in a barren environment which offered little support, leading to a temporary

suppression of his expanded consciousness. For those who used psychedelics, it seemed that the spiritual journey was instigated and/or further developed by their usage.

However, caution is advised and it is widely acknowledged that 'set' (individual thoughts/feelings/expectations) and 'setting' (social/physical environment) are fundamental to the process of the psychedelic journey and potential mediation of subsequent integration. Grof (2001) states: "Psychedelics, used responsibly and with proper caution, would be for psychiatry what the microscope is for biology...or the telescope is for astronomy" (p.12). They provide access to an otherwise invisible world that could harbour untold benefits of healing and growth. This is supported by recent research into psychedelic therapy which has revealed benefits for a variety of issues including obsessive-compulsive disorder (Moreano et al., 2006), anxiety related to terminal illness (Gasser et al. 2014), addictions (Loizaga-Velder, 2013), and depression (Cahart-Harris et al., 2016) and has demonstrated that, where long-term medications have often failed, psychedelic substances have succeeded.

Luke (2012b) explores the healing potential of mental imagery in dreams and psychoactive substances and demonstrates this through the ages of civilization. He highlights cultural biases in rejecting genuine mystical/transpersonal experiences and notes Grof's (2001) view of making assumptions of experiences based on normal states of consciousness and potentially overlooking the true nature of the phenomenon. Researchers and practitioners are, therefore, advised to be more flexible in their approach and divert from standard materialistic assumptions.

In all these methods of consciousness exploration, it seems clear that the fundamental principle is one of connecting to the experience, allowing the shadow and the darkness to meet and understand the inherent message of internal functioning that has perhaps long been ignored or denied. Some forms of exploration do perhaps offer access into multi-dimensions and communication with other beings, yet it seems to be the individual value, meaning and interpretation assigned to it which appears to have the biggest impact and, therefore, support and opportunity to explore this appears to mark the difference between successful integration and destructive fragmentation.

2.4.3.2.3 *Finding meaning:* Participants demonstrated a tendency to attribute spiritual/transpersonal meanings to various life events of both a traumatic and potentially perceived 'ordinary' nature, such as coincidences/synchronicities. The literature highlights that many individuals turn to spiritual concepts following disruptive life events to help make sense of them and thus better deal with them (e.g. Gockel, 2009; Bryant-Davis et al. 2012; De Castella & Simmonds, 2013). Finding meaning and purpose provides impetus for continued existence as highlighted by Frankl's observations. However,

whilst this was the case for many, one participant largely abandoned spiritual leanings, describing herself as atheist during a traumatic period. This could be akin to feeling abandoned by particular deities and supportive beings and, therefore, questioning the purpose of one's existence if the reality is so hard to deal with, internalizing the tragedy as a personal affront and denigrating oneself in light of this (Peres et al. 2007; Maltby & Hall, 2012). Having assimilated her experiences, she was later able to place this in the context of growth. Thus, in accordance with some of the literature and personal experience, it seems that those with a spiritual as opposed to religious orientation are more likely to perceive negative experiences as a necessary and valued healing journey rather than as a punishment, as has been demonstrated within this study.

In the aforementioned participant's case, her spiritual rejection appeared to be more due to dealing with the psychological damage and healing on this level, further suggesting a differentially levelled focus where too much energy given to either the spiritual or the psychological means that ultimately one side of the coin loses out. Although it may seem obvious that an equal balance between psychological/spiritual be sought, it seemed, throughout this study, that participants intuitively knew which focus was more prevalent and necessary than the other; they instinctively seemed to know what they needed. Is this a form of defensive splitting or of effective coping? Perhaps the scales need to be imbalanced at times in order to re-balance the individual. Or, maybe, they simply cannot be separated.

There is, however, a balance to be maintained between psychological and spiritual appraisals, as suggested previously, between over-analysis on either end of the spectrum. Individuals need to maintain a sense of autonomy and agency over their lives but, if the meanings they attribute to events help them to survive and see a wider cosmological integrity, then this should arguably be supported. Helminiak (2005) maintains that focus on normative and prescriptive beliefs is the responsibility of therapists who need to challenge damaging irrational and delusional thinking; however, as has been demonstrated, what some may believe is pathological may in fact be supreme insight.

Participants largely embraced the dark aspects of life and they were perceived to be a necessary part of life's journey and spiritual development. Suffering and subsequent rebirth in the form of engendering a new level of consciousness has been rooted in spiritual and religious traditions for millennia, such as Christianity, Hinduism, Buddhism, Shamanism and so on. Thus, the 'darkness and stars' need each other to exist, as these dichotomous yet interrelated aspects underlie our experience and, the greater the extent to which these can be integrated, the greater the level of personal congruence and the greater the level of healing (Rogers, 1961; Jung, 1969).

Seeing synchronicities and meaningful coincidences further supported individuals' ideas of being part of a special interconnected matrix where they are a valued enough entity to be bestowed such moments. Acknowledging these moments was regarded as a choice in one's perception of the world and its underlying personal meanings to be derived from such events. While some theorists within psychodynamic approaches may regard the subconscious as the causal instigator, such that people may come out in skin hives as a defence against being deemed attractive, perhaps due to childhood sexual abuse for example, Jung was very much a pioneer in illuminating synchronistic events. Defying the causal structures of science, he regarded synchronicities as occurring frequently and often at a time of emotional unrest and transformation which enabled individuals to assign meanings to them and progress on their journey of individuation as a result. He stated: "…it is not so much a question of superstition as of a truth which remained hidden for so long only because it had less to do with the physical side of events than with their psychic aspects" (2008, p.119). Although he was surprised by the level of incidence and secrecy surrounding this, it was attributed to fear of self-exposure and mockery in light of challenging rational frameworks, a state that seemingly continues today as evidenced within this sample.

In many cases, participants described 'accepting' their experiences rather than trying to make sense of them as, when no adequate rationale can be found, the only choice then seemed to be acceptance, perhaps to avoid becoming lost in a world of unanswered quandary. Their lived experience offered proof of their convictions and, despite the invisibility of such ideas and experiences, there was acceptance rather than questioning of them. In some cases, this was perceived to be belief that magic exists and an acknowledgement that 'it just is'. When there is no other explanation, whatever fits for that person is real for them and, therefore, any therapeutic work should arguably begin from this focus.

2.4.3.2.4 *Support and protection* were strong attributes of personal spirituality, often enabling participants to feel contained by way of centring themselves to feel close to their ancestors/supportive others and/or by directly sensing their presence and unconditional love. In one case, connection with these significant others offered opportunity to dispel emotion such as anger and fear by shouting at them or blaming them on the one hand and confiding in them on the other. The felt consistency allowed him to be supported and establish a connection which was lacking in childhood. However, despite external focus, the participants faced their demons and integrated their difficulties into a context of necessary balance and meaning.

Meaning-making and perceptions of support and protection arguably serve as protective factors against spiritual emergency and potential self-destruction. Prior to this research, I would have

considered that a healthy balance between the spiritual and the psychological would be necessary to serve functional benefits. However, as suggested, it seems that sometimes the balance may need to tip in one direction more than the other at different times. However, it is proposed that the sense of control needs to remain with the individual rather than being expelled outwards and thus potentially losing individual power and connection.

2.4.4 MASTER THEME 3: SPIRITUAL SELF AND SOCIETY

2.4.4.1 Family and social contexts

The impact of family context has largely been addressed under 'loss of self' where consideration was given to issues of identity formation and attachment as related to the spiritual journey. It was suggested that parental and peer reactions, although they did not diminish participants' belief in their spiritual experiences, did potentially affect self-perception and individuals' subsequent assimilation of spirituality. Arguably, we are only ourselves in relation to others, our perception and experience of ourselves and the world around us is always a product of relationship to something or someone else, nothing is ever in isolation and everything is valued, analysed and perceived relatively. Thus, trauma and psychological distress is largely a product of interaction with others. Just as light cannot exist without darkness, space cannot exist without form, there can be no 'self' without other. Although this is uniquely based on individuals' numerously varied experiences, the relationship to other is often the catalyst in self-perception and effective integration of spiritual experiences, as appears to have been demonstrated here.

Most participants reportedly lacked spiritual nourishment within their social circles and it was a common desire for personal beliefs and experiences to be more readily and fully integrated within a social context. For some, the early rejection of religious ceremony and practice led to a loss of community and connection with others wherein they had mostly felt embedded and supported. McClure (2013) describes her church attendance as personally beneficial, stating: "The rituals in church join the details of my life with those of others' lives in ways that bring them closer to me, and that feels important, perhaps even sacred" (p.728). Thus, connection to others seems to be a fundamental part of the spiritual journey that, without which, one risks becoming stranded and isolated.

However, therapy, particularly CBT in one case, provided the impetus to actively search for this missing piece through various activities and behavioural processes which encouraged a searching without to satisfy a need within. Although this participant did not share his personal spirituality within the group or individual therapy sessions, it offered opportunities to connect with others. Similarly, the

process of therapy allowed some to connect with themselves through connecting with another (the therapist), which offered grounding and anchoring to the physical realm. Lack of appropriate support and understanding could have the potential to lead to a spiritual emergency which was evident in at least one of the cases here. As such, social contexts may serve either a protective or damaging function for the spiritual individual.

Furthermore, linked to, yet perhaps transcending peer connections, is participants' perceived role in society and the ways in which their spirituality may or may not be embedded. How does someone effectively integrate their spirituality within a society that is largely regarded as dismissive? Although there appears to be minimal research pertaining to this, further insight is perhaps vital to understanding current functioning and considerations for how this may be dealt with within therapy. Participants viewed society's philosophy of meaning and purpose as being derived from material and monetary gain and, therefore, devoid of a spiritual ethos.

McKenna (1992) discussed how some substances are legal within society such as caffeine, sugar and alcohol (all mind-altering and potentially addictive) as they serve the establishment by encouraging a stronger work ethic and/or benefitting the economy. However, the suppressed and criminalized substances are those that can potentially offer spiritual enlightenment, a consequence of which may be deemed as anarchic behaviour such as a rejection of cultural goals of promotional career and material betterment. Those engaging in 'alternative' lifestyles and philosophies are feared as destabilizers of a financially goal-driven society where that which is not understood is often denigrated. McKenna highlights this as a long-standing tradition which appears to remain in society's ether and be experienced by the majority in this study.

Despite this, however, it appears that to some degree focus has recently gravitated more towards individual well-being with increased implementation of funded services for mental health, such as IAPT. Furthermore, increased mindfulness within schools and other establishments suggests there is an emergence of increasing self-focus in the actual lived experience as opposed to externally motivated goal-seeking. However, the prevailing experience of society, for those in this study, was as a dismissive and unfulfilling foundation on which to lead a spiritual life. Despite this, some participants engaged in occupations that satisfied their spiritual orientations such as voluntary work and nursing and, in all cases, there were attempts at integrating their spirituality into their daily lives to a greater or lesser extent.

2.4.4.2 Practicalities/embodiment

Time and personal space - both physical and mental - were considered prerequisites for exploring individual spirituality. Certain obligations such as family and work commitments and perceived expectations of others, influenced the degree to which people felt able to engage with their spiritual practices. Kiesling et al. (2006) note that "spiritual identity required intentionality to cultivate and great effort to protect from encroachment by the demands of adult life" (P.1276), an experience which was similarly shared here. Overall, a spiritual lifestyle was largely considered within the paradoxical parameters of self-focused attention (through time, space, meditation) and expansive connection (through nature, ritual, different levels of consciousness).

All participants demonstrated a tendency towards self-actualization by engaging in activities for self-development, to heal their wounds and lead more fulfilling lives; they sought to better themselves. They also demonstrated desire for self-transcendence, seeking to emanate positive attributes and responsible living through service to others and mobilizing personal beliefs and values. Perhaps with the exception of one participant, it appeared that most of the spiritual practices were in order to gain a better connection to the self and other and focus was seemingly on personal development as opposed to achieving mystical and transcendental experiences, which would be considered a spiritual bypass.

Overall, these findings corroborate White (1993) and Brown's (2000) extensive large-scale qualitative analysis on exceptional human experiences (EHEs). From their extensive analysis of hundreds of accounts, they developed the EHE process model which consists of 5 stages: the initiating event, search for reconciliation, between two worlds, in the experiential paradigm, and a new way of being in the world.

Within the current study, all participants experienced some exceptional event that challenged their established view of life as they knew it (1). There was a search for meaning, finding answers and, in some cases, denial and repression of the event as a defence against unsatisfactory conclusions, disrupted equilibrium and potential loss of self (2). There was, in many cases, evidence of cognitive dissonance with a separation of the psychological and the spiritual yet, within this, a desire to integrate the experience in a personally meaningful and acceptable way (3). For the majority of the participants there was a sense of 'knowing', not only of the validity of the experience but of the interconnectedness of all life, an unshakeable conviction in universal connectivity and sometimes an increase in EHEs (4). This new consciousness was then largely established and embedded through living a responsible life, fulfilling a perceived calling and putting beliefs in action (5).

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As with White and Brown's findings, this was not necessarily always a linear process, as individuals may spontaneously enter stage 4, for example (as in the case of Ben), and then may move between the other stages at varying degrees and at different times. Similarly, stages may be easier to navigate and resolve with future EHEs as an individual is more readily able to reflect on previous experiences. Overall, there appears to be a progressive journey from potential shock, denial and fear to grounded assimilation and acceptance. The individual is commonly altered as a result of the experience, both inwardly through a new level of consciousness and outwardly, reflected in their new behaviours.

Evidently, the spiritual path is not an easy one, made ever more complicated by the reaction and alienation of others who find it difficult to join the individual in their world and help them make sense of their experience. Pockets exist within society where people can attend to and fulfil their needs but, in general, it seems our society has lost its connection to the spiritual realm and things not experienced or misunderstood are denigrated as 'alternative' and unfounded. That said, hypnotherapy and complementary health methods, such as acupuncture, are becoming increasingly referred to within medical approaches, there is increased access to community spiritual workshops and greater integration of mindfulness practices within psychotherapy which all suggests a slow re-emergence of our link to these areas. However, further work is needed to allow spirituality, as a concept and life path, to become more readily integrated and accepted within wider society.

2.4.5 Applications to practice

In his paper, Gold (2013) purports that the basis of self-actualization stems from individuals' spiritual identity and values which pave a unique path to self-growth and, therefore, therapists should be aware of their clients' spirituality. This approach is shared by a number of people including Koening (2008) and Pargament (2007) which is explored and challenged by Poole and Higgo (2011) in relation to its inclusion within psychiatry. It seems this is a contentious issue due to varied understanding of what 'spirituality' means; therefore, how this is acknowledged and worked with in therapy largely remains a personal issue.

The findings in this study demonstrate that participants often seemed protective of their spirituality and did not seek to share it or feel it to be a necessary part of their therapy. They feared ridicule and pathologization and so, by protecting their spirituality - their beliefs and experiences - they were protecting a fundamental part of themselves against potential threat. This challenges those who

advocate the necessity to endorse spiritual assessment and consciously include spiritual factors within the therapeutic encounter.

Valuing the clients, it is their right not to share their spiritual beliefs and experiences and it is the therapist's job to honour and respect this, despite how much it may be considered to be an integral part of the process. If and when a client is willing to disclose and explore their spiritual understandings and experiences, it seems that allowing space, time and opportunity in which to explore their derived interpretations and value is of primary importance. Clients need to feel heard, understood and contained whilst therapists take account of their own potentially narrow parameters of analysis, considering the impact of trying to make sense of non-ordinary states of consciousness from a stance of ordinary consciousness, as suggested by Grof (2001). Therapists need to validate the power and the potential privacy of spiritual experiences and accept that maybe they will not fully understand or share their clients' insights. Just as one cannot adequately describe colour to a blind person, trying to explain a mystical experience to a 'non-experiencer' is perhaps impossible and such therapeutic incongruence is likely to be palpably felt by clients. Therefore, feigning neutrality is perhaps therapeutically damaging, yet openness to clients' experiences, an interest in their underlying meaning and their interpretations, is ultimately the hallmark of psychotherapy and should arguably guide the process, as opposed to attempts at determining the validity or authenticity of the experience; for clients it is a fact based on their physiological and sensory experience.

Despite this, it is the lack of context given to spiritual experiences and a subsequent lack of effective integration that appears to be the catalyst for spiritual emergencies and, therefore, therapeutic intervention is strongly positioned as a mediator in effective assimilation or potential crises. For many in this study, despite the fact that participants may not have shared their experiences directly with their therapists, they often felt grounded within the therapy and the increased ability to connect to themselves enabled them to remain connected to the physical realm and draw on their spirituality when they needed it. For one, therapeutic intervention appeared particularly important in mediating his tendency to defend through spiritual bypass, although he was perhaps unaware of this; just having the opportunity to self-explore and connect with another seemingly offered a vital lifeline.

Various interventions have been proposed to confront and effectively manage clients' spiritual bypass, including a Developmental Counselling Therapy (DCT) model (Cashwell, Myers and Shurts,

2004) and Motivational Interviewing (MI) (Clarke, Giordano, Cashwell and Lewis, 2013). Although the approaches differ, in both cases the spiritual bypass is regarded as a developmental block and the aim is therefore to address this within the therapy whilst exploring and embodying the bypassed material. The client's spirituality is actively engaged within the process and discrepancies between healthy and unhealthy spiritual aspects are addressed. Such interventions offer mid-length therapy of approximately 20 sessions in order to safely and effectively explore the rejected deeper material.

These modalities appear to offer a more holistic approach that arguably contradicts some of the participants' views within this research who stated that spiritual inclusion was unwarranted and unnecessary at times. Accordingly, perhaps the greatest value, as suggested within the humanistic literature and arguably common to all modalities, is in fact developing the individual's agency in order that they can differentiate and decide on the most appropriate focus i.e. spiritual or psychological, at any given time, for them. It is suggested that time is of the essence and in the same way that a therapist would not necessarily immediately pounce on underlying trauma before the relationship has been sufficiently nurtured, perhaps the same is true when exploring and considering people's spiritual beliefs and experiences.

In this sense, the idea of underlying meaning and purpose is viewed differently from spiritual experiences as the focus is on foundational values as opposed to unexplainable happenings. Thus, it could be argued that a general aim of therapy is to engage these aspects in order to move the client forward by establishing what is important to them and how they envisage and wish to conduct their lives and their experiences within this. However, therapeutic models, based on a variety of theoretical paradigms offer different interventions and objectives, from the practical applications within CBT, to the exploration of unconscious processes in psychodynamic, to the reparative holistic relationship of humanistic, in very broad terms. Beyond this, however, are the therapies specifically aimed at encountering and engaging transpersonal phenomena and, therefore, offer a more holistic psycho-spiritual approach such as Psychosynthesis and Core Processes, as previously discussed. However, the fact they are seldom encountered in the mainstream is perhaps due to limited research in treatment effectiveness and the time-consuming nature of the interventions that allow safe and grounded access in to an individual's spiritual dimension.

Therefore, the therapeutic setting, whether clinical or non-clinical, and the approach being used, is experienced differently. Practitioners functioning within a medical approach were generally regarded as dismissive and lacking in empathy and insight into clients' subjectivity and with a seeming resistance to engage on a therapeutic level with the participants. It seems that those with a

pre-diagnosis and involvement with psychiatric services perhaps face greater stigma towards their spiritual experiences due to the symptomatic and sterile structuring of what is considered normal. Thus, the need to embrace the client and hear their experience and truly understand their world is reiterated here. Although it may seem obvious, for therapists working within any model and any setting, the primary concern should be how is this person making sense of this experience? How may this experience help them? What needs to be done to help them integrate it? Are personal beliefs/prejudices/preconceptions stopping me from hearing and accepting them?

The predominance of Western focus on symptom cure is challenged and a suggestion for greater flexibility in attending to client needs, which proved invaluable in this sample, is encouraged. Such interventions could include therapeutic processes that engage the unconscious through imagery/visualisations, creativity and meditation practices. Furthermore, promoting time spent in natural surroundings and honouring time for self-focus may encourage a more holistic approach to self-management and growth. However, of paramount importance was the degree to which many participants felt isolated and misunderstood within social and familial contexts regarding their experiences and underlying philosophies. Therapy should therefore take account of this, by considering the impact of attachment and identity issues that are raised as a result of spirituality and perhaps by further encouraging social interaction with similarly-minded people.

2.4.6 Reflexivity

As acknowledged throughout, the qualitative researcher, and indeed myself, cannot offer a purely objective view of findings and indeed this is not the aim of a study such as this (West, 2009). Given that I entered the research with my own experiences, preconceptions and biases, I have likely consciously, and perhaps at times unconsciously, inextricably influenced the study. Awareness of my inherent views and prejudices has been noted in a reflective diary and attempts have been made to make these explicit throughout, such that there is transparency in each stage of the process.

Whilst this was easier to consider and challenge during analysis and write-up, the interview process sometimes proved more difficult, as momentary micro-responses and occasional leading questions undoubtedly encouraged certain responses from participants. Although this was often an unconscious process which became more apparent during the transcription and analysis stages, during the interviews, when I became aware of this, I refocused on participant material by seeking further clarifications and attempting to bracket my views. Despite this, one interview in particular, required more of my intervention due to a seemingly nervous participant who was wary of how to

respond in case it was not the 'right' answer. As such, I questioned and encouraged much more than in other interviews.

Despite my prior beliefs, I explored and recorded participants' experiences and views which contradicted my perspective, suggesting personal flexibility within the process to offer as true an insight as possible into their actual lived experience. For example, I perceived individual psychological and spiritual aspects to be inextricably linked and my hopes prior to this research were that such a vital inherent quality - spirituality - becomes more readily integrated into therapeutic practice, believing that a balanced integration would increase beneficial therapeutic outcomes. However, this was obviously not the case for the majority of participants who had positive gains from psychological as opposed to spiritual focus within their therapy. Most had positive experiences of therapy even though their spirituality was not necessarily a considered factor.

The psychological/spiritual divide remains interesting to me and, although I accept participants' experience of this, I continue to consider whether this is a process of defensive splitting in a world perceived as unaccepting. The spiritual and psychological could, therefore, perhaps be viewed as concentric circles encased within individuals, with spirituality being the outer circle and focused attention given to either at various times, thus co-existing yet separate. The continued reflection demonstrates openness to unpredictable findings and signifies an evolving process which continues beyond this research.

With hindsight, it may have been better to refer to 'exceptional human experiences' or 'transpersonal' rather than 'spiritual'. In some cases, the term 'spiritual' detracted from participants' accounts whereby they felt this was an inadequate and incorrectly defined label to describe phenomena that, as they described, 'just is', for example the experience and sense of interconnectedness. Furthermore, some participants asked for my definition of spirituality and, whilst this may have been useful to help clarify my meaning, I was interested in their understanding and, therefore, chose not to share this in an attempt to avoid influencing them.

Whether the interview schedule should have been adhered to more rigidly remains a question. At times I considered that such a structure would offer more standardized responses and be better received. However, following the participants' accounts led in to unchartered and very rich territory which would have likely been missed by being bound to a pre-defined route.

2.4.7 Considering quality and validity

As outlined in Chapter 2, Yardley (2000) proposed four essential qualities of good qualitative research, which will be considered here:

Sensitivity to context: This research was situated amongst the relevant literature that endeavoured to offer understanding and theoretical insights into the main areas, not only of considered import prior to analysis but also issues raised through the research. However, given the breadth of this subject matter, the chosen literature undoubtedly reflects, to some degree, personal interests and therefore may not provide an entirely thorough overview which may be considered vital by other readers, academics and professionals. Despite this and related to this area of quality assessment, it is felt that due attention has been given to the relationships between the researcher and participants, as was outlined within the reflective diary notes and commented on at various points in the thesis. Perhaps more focus could have been afforded to socio-political stance to improve sensitivity to context, yet it was felt that aspects of spirituality would transcend divisions of gender, ethnicity, class and status as defined within the UK and were, therefore, not forefront of focus.

Commitment and rigour: This has been demonstrated throughout the stages of analysis and to the subject matter itself based on subjective experience which made this an important personal area of study. As such, there was commitment to being immersed in the data to understand participants' experiences as fully, yet as individually, as possible and using supervision and discussion with other professionals to address concerns and consider the findings further. Being a novice researcher, systematic approaches of analysis were developed, based on theory but also on personal engagement and immersion in the data. Thus, skill would no doubt be developed through future research projects and opportunity for increased practice.

Transparency and coherence: Perhaps both a strength and weakness within this research is the level of transparency and personal disclosure. In order to contextualise qualitative investigation, the role of researcher is paramount and this was made explicit throughout the stages of the study, such that the reader may understand personal motivations underpinning the research and may situate this accordingly. As discussed within the methodology chapter, the research design was considered appropriate for the question under investigation and demonstrates a level of coherence. However, despite systematic analysis, there was within this, a certain level of 'intuitive' analysis/coding and therefore this may not be considered transparent enough, as that which makes sense to me may not be clear to others; what is worked out intuitively cannot necessarily be defined literally and thus the ineffability of spirituality seemingly filters into the analysis.

Impact and importance: Spirituality is considered a defining feature of many people's lives. This research offers rich insight into people's felt-sense of spirituality and spiritual experiences which are rarely, if ever, discussed or revealed. Certainly, for some participants, this was the first opportunity they had to closely consider their spirituality. As such, this potent, yet often dismissed, aspect has been brought to the forefront and insights offered as to how this may be experienced within the therapy room. It offers a contribution to the literature by exploring the interface between spirituality and therapy and provides some empirical data that may help therapists develop their own models for practice.

2.4.8 Main findings

- All eight participants felt a spiritual connection and/or had spiritual experiences within childhood. In most cases these were dismissed or ridiculed by family members and peers.

- Spiritual experiences were sometimes disconcerting and confusing yet also self and life-affirming.

- Spirituality was generally regarded as separate from therapy, with spirituality being a personal process and offering individual practices therein. There was often concern for therapists' reactions to spiritual experiences in case of ridicule or perceived pathology.

- Spirituality and psychology were generally regarded separately, with concentrated focus on either at different times when participants felt specific interventions/practices were necessary. For example, therapy to focus on trauma (psychological), nature to feel cosmic unity (spiritual).

- Protective factors of spiritual emergency appear to be social support, creative expression and finding meaning for the experience. None of the participants actually had a spiritual emergency, although some seemed on the brink, which suggests they all managed to find a context for their experience, albeit perhaps latterly.

2.4.9 Limitations and suggestions for further research

Whilst this study offers an in-depth view of spiritual experience in life, including therapy, it is a very focused and narrow sample, offering insight into the lived experience of eight participants. Thus, although richness would be compromised, quantitative approaches would offer access to a wider population and be better equipped to generalise findings. Such studies could further examine individuals' locus of control and consider wider populations attending specific therapies. With one exception, all participants offered experience of non-clinical settings, although insight offered into the clinical perspective was an added benefit. Subsequent research would benefit from further

evaluation of varied settings and specific approaches in a more rigorous way to find the extent of dismissed or integrated spirituality within the therapeutic environment and further understanding of contributing factors that help to integrate or hinder this.

There was a limited age-range of early thirties to late forties so all participants were arguably at a similar stage in life and so, according to developmental literature, would likely be experiencing aspects of the world similarly. As such, the study could have been improved by incorporating a greater distribution of ages which would offer insight into changing and developing spirituality throughout the lifespan. Someone later in life perhaps experiences their spirituality very differently to someone in early to mid-adulthood. Therefore, the impact of spirituality on meaning-making of life events, further spiritual experiences and the extent to which this has, or has not, been integrated into daily life would offer richness throughout the life cycle.

There was also limited cultural and ethnic diversity with all participants being white Caucasian - seven British and one Scottish. Whilst different cultural studies in different countries could no doubt reveal very different findings, the focus was specifically on a UK population. However, the fact that all participants were white and well-educated offers a narrow perspective.

The research question was perhaps initially too broad, offering a vast overview of spirituality within the life cycle and within therapy. This could be further improved by perhaps focusing on a single aspect, such as a particular time-frame or specific therapeutic interventions which would offer a more detailed analysis of one particular area. Furthermore, the study offers retrospective insight into childhood experiences and, in many cases, therapeutic experiences, the recall of which may change over time and between experiences of different therapists.

So, future studies could focus on current therapy that enables a clearer insight at the time of intervention to ascertain the principles of effective spiritual integration as they may or may not be happening. Further research could focus on private and funded therapy and the extent to which this makes a difference in seeking a therapeutic spiritual dimension. The mainstream funded therapies, arguably CBT approaches, have mostly been well received by participants, but is there more that funded therapies could be doing to incorporate individual spirituality? Or is this necessary, based on these findings?

Focusing on children's spiritual experiences at the time of childhood would likely offer clearer insight into their actual experiences and how these are perceived by family members and, therefore, how these are then integrated within the child's experience. Recommendations may then be offered as a way of appropriately responding to children's spiritual needs.

2.4.10 Conclusions

Depending on interventions and interactions with others, it seems that an individual's spirituality has the potential to protect or destroy them. Childhood experiences may occasionally be terrifying yet at the same time beautifully pure and innocent, offering clarity of interconnectedness and unconditional love that becomes dulled through the ages. Different life circumstances lead to differential access and engagement with spirituality which potentially, but not necessarily, may lead to spiritual experiences. The extent to which these experiences become a spiritual crisis or a successful emergence of heightened consciousness and transformation, largely depends on the opportunity for contextualisation such as through social and therapeutic interventions.

While cognitive-behavioural approaches may attend to the practical ways of embodying spirituality, for example, by encouraging attendance at particular groups and structuring time aside for spiritual practice, other approaches, such as humanistic and transpersonal, may serve to embody all aspects of the self, not only through nurturing a healing relationship but also by providing opportunity for in-depth self-exploration on all levels of physical, emotional, mental and spiritual. Creative interventions that transcend the therapy room may offer enhanced freedom in which to explore and integrate spirituality by strengthening the connection to self and other through wider cosmological unity and exploration of unconscious processes.

Individuals note that their spirituality needs time and space - freedom - to be nurtured, factors that are also significant within healthy therapeutic encounters. Perhaps this is the cornerstone of healthy self-integration, offering expansiveness in which to nurture the self in relation to others, the wider world and their underlying spirituality. However, time-bound therapies may not have the capacity to delve too far within the spiritual dimension and therefore the need to incorporate different interventions that can safely and effectively access and contain these personal aspects is suggested.

A variety of methods may be incorporated to help people exist in this reality and there needs to be openness to what may work for each individual and what it is they need. Whilst this research may seem dichotomous in its consideration of therapeutic approaches, it must be highlighted that the boundaries appear to be merging and there are many therapists who readily embrace the unpredictable and unexplainable within their approach, incorporating an experiential process, as has previously been mentioned. Furthermore, the inclusion of the Consciousness and Experiential section of the BPS suggests an increasing interest and inclusion of this, although perhaps not yet filtered down into widespread therapeutic modalities.

Perhaps an unrealistic and unnecessary utopia, yet it seems that cultural awareness of many unexplained phenomena needs to be increased which may reduce the extent to which this is 'split-off'. Such cultural integration means that society as a whole and counselling psychology in particular, may embrace spirituality as a lived experience with all its weird and wonderful components that often cannot be rationalised or reduced to perfect structures that sum up the world and its inhabitants. Occasionally, we may simply need to accept that 'it just is'.

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The Spiritual Journey: An IPA study of spirituality in therapy attendees.

Abstract

The research aimed to explore participants' experience of spirituality within their lives generally, including within their therapy. Previous research has suggested that there is a degree of trepidation amongst some therapists to integrate spirituality into their therapy and there is thought to be a general lack of training in this area. In addition, there is limited in-depth understanding of the role of spirituality on an individual's journey through life. Within this research, semi-structured interviews were conducted with eight participants across the UK. Interpretative phenomenological analysis (IPA) was used to analyse the data which provided rich insight into the experience of spiritual aspects within participants' life journeys. The findings revealed three master themes within which were a number of subthemes: The Lost Self (remembering the spiritual child, lost adult in the spiritual realm); Finding and Managing the Self (Western methods: Disconnection/connection, integration/separation; Spirituality: Nature, consciousness, meaning, support/protection); Spiritual Self and Society (Family, social, practicalities, embodied spirituality). Limitations and suggestions for further research are considered.

Key Words: Spirituality, therapy, interpretative phenomenological analysis (IPA), life journey

3.1 Introduction

'Spirituality' refers to individual underlying esoteric beliefs/views and practices. Such beliefs may be considered as transcendental thinking beyond the self, world view, politics and materialism and are often considered objective based on physiological and sensory experience rather than 'blind faith'. 'Spiritual practices' include those seeking connection, insight and enlightenment and may include meditation, rituals, exploration of consciousness. 'Spiritual experience(s)' is the overarching term for occurrences that transcend normal physical and rational boundaries. They relate to something powerful, that touches the inner essence and often transforms the individual as a result. Within this paper they incorporate 'peak experiences' (Maslow, 1961), 'transpersonal experiences' (Grof, 2009) and/or 'exceptional human experiences' (EHEs) (White, 1993).

3.1.1 Spirituality in Life

Since religion per se has monopolised much of the research in this area, the present study lends itself to an independent focus on spirituality. Religion is largely considered in terms of ritualised practices within organised, prescribed, monotheistic traditions, whereas spirituality is generally viewed as highly subjective, including concepts such as connectedness (to others/nature/non-material entity), meaning/purpose, belief in a higher entity and transcendence (Cawley, 1997; Miller & Thoresen, 2003; O'Hanlon, 2006; West, 2011).

Spirituality has been linked to a multitude of beneficial outcomes in psychological and physical well-being including increased resilience amongst survivors of traumatic events, with reported positive changes in self-perception, life purpose, relationships and strengthening of spiritual beliefs (Bryant-Davis, Ellis, Burke-Maynard, Moon, Counts, & Anderson, 2012; De Castella & Simmonds, 2013; Brewer-Smith & Koenig, 2014). Further research has explored meaning-making and spiritual transformation following challenging life events. Spiritual transformation is recognised as a change in spiritual beliefs that can subsequently impact self-view and behaviour and may be experienced as spiritual growth or spiritual decline, e.g. feeling abandoned/punished (Cole, Hopkins, Tisak, Steel and Carr, 2008). However, these traits have largely been apparent within populations describing themselves as 'religious' as opposed to 'spiritual', the latter of which has been found to be more significant in the healing process (Knapik, Martsolf, Draucker, 2008). Whilst many of these studies consider the outcomes of spiritual beliefs, there appears to be limited research considering the role and meaning of spirituality throughout the life cycle.

Spiritual experiences

Research has linked spiritual experiences to both positive and negative outcomes. Palmer and Braud (2002) found that mystical/unitive experiences were generally deemed to have the most profound and beneficial impact on participants' lives due to an increased sense of meaning and purpose and enhanced positive psychological attitudes. However, participants found interpretation of experiences was often challenging, as meanings were ambiguous and language inadequate to effectively describe their experiences. Furthermore, disclosures were minimal and only shared with close friends and family with whom they felt safe. The investigators note that after engaging in the study, participants were more likely to interpret their experiences as 'spiritual', suggesting that the very nature of discussing such events enables increased acknowledgment and assimilation of personal spirituality.

Many people describe spiritual experiences as a result of psychoactive substance use (e.g. ayahuasca, psilocybin, DMT, LSD, cannabis). Psychedelic substances have been used for millennia in spiritual and religious ceremonies across the world and there is a wealth of research and anecdotal evidence that documents transformative encounters with the self and other (e.g. McKenna, 1992; Metzner, 1999; Strassman, 2000; Pinchbeck, 2004). Grof's (2009) extensive research with LSD revealed a variety of experiences that defy established scientific paradigms, such as past life incarnations, out-of-body experiences, encounters with other universes etc. and his findings demonstrated an undeniable commonality and regularity of such experiences that, although a product of LSD in this case, highlighted a universality that could be accessible to all.

Similarly, Jung's (1959) idea of the collective unconscious proposes that all human beings have access to a pool of consciousness that lies below the personal unconscious. Beyond the individual's repressed emotions and memories (personal unconscious/the shadow) exists our inherited past (collective unconscious), which is the totality of ancestral history and experience from the beginning of time. He highlighted that content at this level consists mostly of universal archetypes and symbolism which are evident and recognised the world over and often appear to individuals through dreams and other moments of bypassed consciousness. Jung was a pioneer of accessing and working with these deeper levels of the psyche in order to reach 'individuation' - a process whereby personal and collective unconscious is consciously integrated to promote health and wholeness.

Kalsched (2013) argues that traumatized individuals are more likely to access the spiritual realm as it often serves as a survival mechanism – a place and/or contact of dissociation and protection against the soul's annihilation. He embraces a psycho-spiritual approach and states: "psychotherapy is partly a spiritual discipline helping both parties participate in this world as a potential space in which both material and spiritual energies support each other toward the goal of […] individuation" (p.19).

Spiritual emergence, emergency & bypass

Grof and Grof (1989; 1990) distinguish between 'spiritual emergence' and 'spiritual emergency'. The former relates to spiritual insights and experiences that are positively integrated and can lead to personal growth, whilst the latter refers to psychological distress resulting from these incidents, often labelled as psychosis. They promote the need for professionals to work alongside the spiritual emergency offering collaborative support rather than immediately reaching for suppressive medication. However, they also emphasize the need to accurately determine the aetiology, which is supported by Belz (2012). She acknowledges that despite the diagnostic category 'religious or spiritual problems' within the DSM-IV (see Lukoff et al., 1992; Turner et al. 1995), there remain

unclear boundaries of what is considered delusional and/or 'enlightened'. The similarities between spiritual experiences and psychotic symptoms are closely bound including, for example, auditory 'hallucinations', sensing presences and holding beliefs that challenge cultural norms. She states: "psychotic experiences are just the extreme expression of traits that are widely expressed in the normal population" (p.230). Thus, the majority of people likely experience EHEs but the context in which they occur varies widely and seemingly affects their integration.

Heriot-Maitland, Knight and Peters (2012) explored the phenomenology of EHEs between a clinical and non-clinical population. Such experiences seemingly emerged during periods of challenging emotions and usually when participants had become isolated and immersed in existential inquiry; the nature of them was often directly related to the emotional suffering and/or existential questioning. They demonstrated that those with multiple appraisals, a sense of experiential transiency and adequate support were more able to integrate their experiences and continue functioning in society. In contrast, the clinical group felt pathologized and invalidated.

Hence, the spiritual journey may be a challenging one with potential spiritual crises resulting from various practices such as intense mediation and kundalini yoga (Sannella, 1987; Welwood, 2000; Clarke, 2010). Furthermore, emerging shamans may experience a 'sickness' or 'crisis' whereby they face innumerable terrors which may be deemed as psychotic and involve experiences of disembodiment, death and rebirth (Kalweit, 1988; Harner,1990). Thus, what may be deemed as psychotic behaviour within Western society may in fact be revered in other cultures, suggesting that psychopathology is largely a culturally defined construct, as Tobert (2017) suggests: "…human experiences appear to be culture-bound, time-specific, moveable and dependent on social consensus" (p.11).

Further challenges of spirituality link to Welwood's (1984) theory of 'spiritual bypass'. He recognised that people may become lost in spiritual practice and teachings as a means of avoiding painful and unresolved emotional and psychological distress. Individuals may regard themselves as more spiritually advanced, therefore more fully functioning and superior to their contemporaries; they become 'split-off' in the spiritual realm as a defence against facing their own shadow. Welwood (ibid; 2000) advocates a three-pronged approach to personal development which includes 'grounding', 'letting go' and 'awakening the heart'. Spiritual practice may help integrate all these elements, however psychological intervention is also deemed vital to the process in order to help the individual assimilate and conquer unresolved unconscious material.

3.1.2 Spirituality in Therapy

There seems to be limited qualitative research regarding clients' perspectives of spirituality within counselling, particularly in the UK. However, research highlights that many spiritual (and religious) clients wish to discuss their beliefs in therapy and would like their counsellor to be aware of their beliefs and practices (Koenig, McCullough & Larson, 2001; Plante, 2007; Post & Wade, 2009). Spirituality within therapy was often considered by clients as an integral part of the therapeutic alliance and healing itself. However, there remains little to no formal training in this area which can lead practitioners to be wary of addressing such issues in light of causing offence and sabotaging the therapeutic relationship (Walker & Aten, 2012). Furthermore, Harlow (2010) highlights that within the NHS in England and Wales there is no definitive guide to supporting individuals' spiritual and religious needs, despite the NHS model of providing holistic care and incorporating such aspects.

Gockel (2009; 2011) found that participants who were spiritual were sometimes wary of engaging in therapy due to potential ridicule and misunderstanding. Participants actively sought therapists who they believed embodied a spiritual dimension and often abandoned therapy if they perceived this as missing. Despite this, the majority found counselling itself an 'extension' of their spirituality and regarded as "…an active ingredient in healing" (2011, p.164). This was often dependent on the therapists' inherent qualities and ability in valuing, understanding and incorporating clients' beliefs. Hence, the presence of the core conditions was regarded as intrinsically spiritual. Furthermore, counselling, in some cases, initiated spirituality in those who did not previously describe themselves as such. This study aims to expand on Gockel's research to explore spirituality both inside and outside the therapy room and consider the challenges as well as the benefits.

Jenkins (2011) demonstrated that patients learned to 'play the game' in counselling, censoring that which they felt was deemed unacceptable by their therapist. They reportedly experienced exclusion and pathologization, particularly within psychiatric settings and were advised by peers to hide their spirituality in order to be discharged. Arguably, this act of 'splitting' means that adequate healing is challenged. Despite this, some described positive experiences whereby their therapists remained open and accepting, encouraging exploration of personal spiritual meanings. Gold (2013) purports that an individual's spiritual identity and values are the driving force to self-actualisation and suggests that counsellors need to be aware of their clients' spirituality in order to enable them on their journey to fulfilment.

The varieties of therapy

Aten & Worthington (2009) recommend that interventions employing both Eastern and Western spiritual beliefs are tested and developed. This appears particularly relevant in today's society given the blurring of cultural boundaries and inflowing of diverse belief systems. Eastern philosophy is becoming more integrated into psychotherapeutic practice with recent developments in therapies such as Mindfulness-Based Cognitive Therapy (MBCT) (Segal, Teasdale, & Williams, 2002). Acceptance and Commitment Therapy (ACT) (Hayes, 2005) and Compassion Focused Therapy (CFT) (Gilbert, 2010), in which focus is increasingly on self-acceptance as opposed to the quest for change in the pursuit of external happiness.

Similarly, mindfulness practice is increasingly integrated into schools, prisons, psychiatric units and within numerous therapeutic interventions, noted above (Barker, 2013). However, it is argued that planting Eastern methods on to Western soil weakens the roots as what is left is a watered-down version, far from the spiritual tradition in which it originated and is embedded in the East (Rosenbaum, 2009; Rosch, 2007). Friedman (2010) counteracts this by stating that meditation and mindfulness "go back to the very origins of humanity" (p.186) and therefore should be accessible to all. It seems that Eastern and Western ideas are increasingly merging but arguably the mainstream therapies, although perhaps edging towards a spiritual dimension, still appear, within the UK, to be primarily psychologically focused.

However, there are at least three modalities where the possibility and potential of 'transpersonal' experiences are consciously integrated within therapy. These are Psychosynthesis (see Assagioli, 1965), Holotropic Breath-work (see Grof and Grof 2010) and Core Process Psychotherapy (see Sills, 2009). Commonly, the focus is on establishing grounding by increasing somatic connection and awareness whilst facilitating exploration of the further reaches of the individual's psyche and perhaps beyond. They are all based on humanistic principles of inherent goodness and capacity to heal and transcend life's traumas.

Spirituality can arguably define people and influence their responses to challenging life events, their self-perception and how they construct their lives around this. Spiritual experiences can be frightening, sometimes leading to isolation as people are wary of others' responses, and in more severe cases they reportedly both fear and/or receive a psychiatric diagnosis. This area appears to be under-researched, yet if there was further understanding of the experience of spirituality, what may be offered are advanced future interventions to incorporate these factors and/or encourage practices to further facilitate healing.

This research aims to address gaps in the literature and answer:

How is the spiritual journey experienced by those who have attended psychological therapy?

3.2 Method

3.2.1 Theoretical framework

This is a phenomenological idiographic approach based on a constructivist-interpretivist epistemology, as outlined by Ponterotto (2005). Willig (2013, p.85) states, "…phenomenology focuses upon the content of consciousness and the individual's experience of the world". The goal of the constructivist-interpretivist is to try and understand the individuals' phenomenology, interpreting that which may not be obviously evident and allowing this to be brought into consciousness (Dilthey, 1977; Schwandt, 2000). Within such a framework, the researcher's subjectivity is considered integral to the process and an inherent aspect of the emerging meaning-making (Biggerstaff, 2012; Morrow, 2005). As such, theorists advise 'bracketing' whereby personal values and preconceptions are acknowledged but 'put aside' and made explicit during analysis and write up (Ponterotto, 2005; Willig, 2013; Smith, Flowers & Larkin, 2009). Accordingly, a reflective journal was maintained to continue reflecting on this and avoid detrimental intrusion on the analysis. Personal resonance was also made explicit throughout the process.

3.2.2 Participants

A homogenous group of participants were sought who were over eighteen years old, had spiritual experiences/beliefs that were not attached to monotheistic religion and who had experience of therapy. Posters were distributed across the UK in various well-being centres and via other professionals in the field. After yielding no results, an advert was placed on social media sites. Consequently, four males and four females with an age-range of 31-48 years were recruited from Scotland and England. All were Caucasian and identified as British (7) or Scottish (1).

3.2.3 Data collection

Semi-structured interviews consisting of six open-ended questions, with prompts, were conducted for approximately 60-90 minutes and were audio-recorded. The structure was fluid to accommodate journeying through participants' subjective experience rather than imposing pre-ordained rigidity. Interviews took place in or near participants' homes including at a university and a counselling centre. Participants received an information sheet and signed a consent form before participating. Following the interview they were debriefed and offered contact details in case they wished to

process any raised issues. Interviews were transcribed verbatim, including vocalized fillers and pauses.

3.2.4 Analysis

IPA (Smith et al., 1995) was considered the most appropriate method given its proposed function and its theoretical foundations of phenomenology (study of experience and consciousness), hermeneutics (theory of interpretation) and idiography (in-depth study of something particular). Transcripts were read through a number of times and initial thoughts and feelings were noted followed by consideration and recording of descriptive, linguistic and conceptual comments as proposed by Pietkiewicz and Smith (2014). Notes were transformed into emergent themes for each participant and the entire group. Using 'abstraction' and 'contextualisation' (Smith et al. 2009) master themes and subthemes were finalised.

3.2.5 Reflexivity

Shaw (2010) states reflexivity is an "explicit evaluation of the self" (p.234) within the (co)-construction of the meaning-making process. Thus, facing potential spiritual crises as a teenager, feeling misunderstood, 'crazy' and battling with religious doctrine have undoubtedly influenced the choice of research topic. Professional and personal experience has further demonstrated a tendency of many mental health professionals to overlook an individual's spiritual dimension. Monitoring, recording and discussing with others were useful ways to maintain awareness yet bracketing of my own material. Similarly, my personal characteristics and potential impact on the interview process were considered.

3.3 Findings

Analysis revealed three master themes: The lost self; finding and managing the self; spiritual self and society, within which there were between two to six subthemes, as illustrated below:

Master Theme	The Lost Self	Finding & Managing the Self	Spiritual self & Society
Subthemes	Remembering the spiritual child	Western methods: Connection & disconnection Integration & separation	Family contexts
	Lost adult in the spiritual realm	Spirituality: Nature Consciousness	Social contexts
			Practicalities
		Meaning Support/Protection	Embodied spirituality

Most participants had a religious background and were often introduced to spiritual thinking through these opened channels. However, personal spirituality also emerged through seeking answers to life's questions which they felt science was unable to answer.

3.3.1 The Lost Self

Remembering the spiritual child

Most participants demonstrated spiritual awareness and belief in something other since childhood and all had various spiritual experiences, including seeing and sensing various presences, astral projection and cosmic interconnectedness and awe. Many participants felt they were much more spiritually in-tune as children and were able to connect on a deeper level to their surroundings and intuitions more readily than in adulthood, as Ben[4] says:

> When I was younger I used to connect to that without thinking about it, it just used to come really easily […]

Many participants recalled significant childhood memories as foundations for transcendental thought and a personally developed spiritual path. However, often these childhood experiences were not shared due to family and peer reactions that invariably left participants feeling ridiculed, misunderstood and undermined, as Jessica remembers:

> I remember seeing a ghost when I was 7 […], no one believed me that I saw a ghost but […] I was terrified, was like, kind of exhilarated but more terrified […] I was very disappointed, I thought that perhaps, because I felt so strongly about it, that people would recognise that and respect it…but they didn't…

The spiritual child, the inner child often became lost under the weight of adulthood and expectation and what was once a natural connection and occurrence was experienced as a more conscious effort in adulthood. Although the adult is borne out of the child, the child had become lost, suppressed and forgotten, in many cases.

Lost adult in the spiritual realm

Some participants demonstrated concern at the potentiality of becoming 'lost' in the spiritual realm, losing a sense of control without appropriate support and grounding to their physical existence. The spiritual dimension could be experienced as over-powering:

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[4] All names and identifying information have been altered to protect anonymity.

The last thing I need when I am going through a dark period is to go more spiritual […] losing
yourself in the world of conspiracy theories and spiritualism and too much of the world that
you can't have any kind of control over (Emma).

There was recognition of a need to stay grounded and connected to the physical realm which is largely perceived as logical and controllable. When facing the abstract, the intangible and confronting apocalyptic ideas, there was the potential for individuals to disengage from society's norms as the point of existence became questionable. The idea of a future nothingness led participants to question their life's purpose yet, paradoxically, it was also the exploration and consideration of something beyond that often led to heightened confusion and loss of self.

One participant, although perhaps not consciously aware, had seemingly lost connection to his actual lived experience by spiritually bypassing, focusing on Buddhist teachings, in an attempt to avoid his internal distress. He had become so focused on the teachings and intensive meditation practice, at various times, that he had lost connection with himself and others and forgotten who he was:

It's important to understand that there is no self. There is no me at peace. There is no why
am I doing it, because there is no me […] I feel lonely and sad […] I am not sure who I am
(Elliott).

3.3.2 Finding and Managing the Self

It was often this sense of a lost and lacking self that led participants to embark on a journey of self-discovery to find these forgotten aspects and begin to feel whole again. A range of methods were used including Westernised medication and therapy within which participants experienced dis/connection and separation/integration. Various aspects of spiritual thought and practice were also incorporated to help participants on their journey.

Western Methods: Connection and disconnection

The level of dis/connection participants felt to themselves and others was often a catalyst in the healing process. Anti-depressant medication, although useful for one participant, was generally experienced negatively due to the sense of loss of connection to the self and others:

*I just felt **so, so** like spaced out and […] I want to feel more connected, I don't want to feel*
less connected (Emma).

Within this, successfully overcoming life's obstacles without the use of medication led participants to feel more resilient. The connection to their inner-resolve helped them feel they were able to cope.

Similarly, within therapy, as the connection to the self, both past and present, was strengthened, there appeared to be an increase in inner strength and self-reliance, as Aaron highlights:

> *The biggest breakthrough I had was realising that […] the past can't be taken away […] it's knowing I was never alone, that I always had **me** […] rewriting the script so the outcome's different.*

Sue also found that having the opportunity to explore the deeper recesses of her being increased her self-efficacy and enabled her to find the strength to leave an abusive relationship:

> *It was the opportunity to work out who I was […] I'm not sure I would have left that relationship if it wasn't for the therapy […] therapy created the situation where I could start to think about what I believed.*

Through searching for the lost self, participants came to a greater understanding and acceptance of themselves, within which often heralded the beginning of personal spiritual exploration; sometimes with the help of others, and sometimes alone.

Western Methods: Integration and separation

Although broadly similar to the above, this subtheme relates to the extent to which individuals felt their spirituality to be integrated or not within their therapeutic journey. Spirituality was often regarded as separate from therapy, with participants choosing not to disclose this and instead focusing on purely psychological issues. Some feared that inclusion of spirituality may compromise the therapeutic relationship and detract from the presenting psychological issues. For some, there appeared to be a spiritual/psychological divide:

> *It would have got in the way of the therapeutic relationship I think […] it's a psychological thing that I was…addressing…not a spiritual thing (Aaron).*

Another participant referred to:

> *…two different tool boxes – one is your practical one and how to manage life and the other tool box is like the spiritual and so I might pull different tools from those different boxes at different times depending on the situation (Emma).*

Despite this, one participant who initially felt his therapy to be spiritually devoid found that this had inadvertently been integrated as he began to explore important spiritual paths such as Paganism and Shamanism and he established a reconnection to his creativity as a result of his therapy. He realised:

> *A lot of what I needed to do and work on through therapy actually seemed to come about through what was there as a lack in my spiritual life (Ben).*

One participant, who was under the care of community psychiatric services, generally experienced her spirituality as split-off amongst most mental health professionals but integrated within her own mind. She felt she had been pathologized and misunderstood regarding her spiritual beliefs and experiences and was learning to modify her reflections and disclosures according to different contexts. She did not, for example, share that she was hoping to be trained in Reiki for fear of jeopardizing her potential discharge from services:

> *It also feels like maybe it is a step too far for somebody who has a more medical model of training and who doesn't have a spirituality, a faith…If I start talking about being able to channel energy and such…possibly isn't good if I want to get discharged so that one's staying firmly under my hat… (Elizabeth).*

She often felt she had to 'persuade' those working with her that she was not psychotic and was simply expressing 'an aspect of her faith'. However, more recently, she found some mental health practitioners inclusive of her spirituality, actively encouraging integration of her spiritual practices into her treatment plan.

Thus, different contexts, practitioner characteristics and the perceived level of safety within this appear to influence the level to which participants found their spirituality to be integrated or not within this particular aspect of their journey. Although separated in many cases, this did not appear to be a cause for concern as participants seemed able to discern their desired intervention at different times, depending on their needs.

Spirituality

This aspect of the journey was largely personally motivated and did not necessarily require or seek the intervention of another human being, as the previous subtheme does. Incorporation of personal spirituality to self-manage and search within and beyond took a number of forms and was clustered under the four main areas of nature, consciousness exploration, finding meaning, and support/protection. The value of this was summed up by Craig as: *'my spirituality is my therapy'*.

Spirituality: Nature

Spiritual practices generally enabled participants to transcend themselves and gain insight into the wider world, experience a sense of cosmic unity and gain perspective of certain situations. Reflecting on time spent in natural surroundings and a sense of interconnectedness, Sue recognised a sense of self-worth and equality:

> *If you know you're connected with everyone and everything, that you're part of everything […] those doubting voices and critical voices just all go away because it's like well no, I'm just as important as everybody else and everything else.*

Connection with the natural environment also offered insights into participants' own existence, allowed them to feel blessed and offered a restorative function:

> *…you get that sense of power and awe of nature and your role and place in it…it helps you feel balanced and get perspective and feel whole and grounded (Jessica).*

Spirituality: Consciousness exploration

Meditation, shamanic journeying, creativity and psychedelics were various means by which participants explored their inner journeys but also connected to something transpersonal. Psychedelics, in one case, signified an important milestone on the spiritual path, supported by compatible peers. For another, the initial lack of context and social understanding led him to repress his experience until a later date when he was able to make sense of it by watching an informative YouTube video. Ben explains:

> *'quite a weird drug induced spiritual experience […] of just everything being connected which was **really** profound…the effect didn't go away for a…quite a while after the drug experience but I didn't really do anything about it at the time, I tried talking to a few people […] no one really got it […] so I let it go by the wayside and just became more and more down the atheist journey.*

The lack of understanding and frustration with inconclusive answers to explain his new level of consciousness meant this had to be ignored for some time to enable him to continue functioning in ordinary reality.

Similarly, individual creativity (painting/sculpting) was often transcendental in nature, sometimes experienced as confusing and as though being produced or manipulated by an external force. Participants reflected on their spontaneous creations:

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God knows where they came from, and it was like looking at that just made me really, really happy (Emma).

…(it) seemed to have an energy to it […] it felt like it had something more to it than what it was […] I felt quite disconcerted by it actually, it raised more questions, […] I tried to analyse it and reduce it to something rational and understandable but couldn't (Ben).

Participants recalled a variety of experiences such as feeling disconcerted and confused, as they could not understand the inherent meaning in certain instances, yet they also experienced elevated mood and greater insight into themselves by interpreting messages within their meditations, creations and spontaneous revelations.

Spirituality: Meaning

All participants drew on their spiritual beliefs, not only to help them make sense of hardships they faced but, also to find meaning in their lives generally. There appeared to be a general tendency to attribute 'divine' reasons for traumatic events such as the tragic loss of family, as illustrated by Elliott:

This all means something. You know, you get that feeling like, ah, it's all meaningful […] In terms of traditional I got into 'God' because of tragedy, I definitely fit that data point.

It seems that regarding tragedy as part of an intended plan helped individuals accept and make sense of events where the rational mind was perhaps unable to understand it. Viewing synchronistic events in life allowed some to also feel as though they are part of a wider interwoven fabric whereby they are part of something beyond their control yet are included within a meaningful structure.

…it makes it a bit more special […] seeing the beauty in synchronicities […] that's my antidepressant […] you can choose whether to see them or not (Emma).

Most participants regarded personal hardships as an inescapable and necessary part of their journey, providing opportunity for growth and development, and being a fundamental aspect of life's balance. They generally appeared able to accept and integrate personal trials rather than recoiling and rejecting them. Finding meaning allowed them to embrace the challenge:

I learned to manage my illness and part of that was…when to not run away from periods of depression […] you can't have joy without having sadness, […] without the dark side I can't have the light (Elizabeth).

Without a doubt the most challenging things that happen to you are also the most rewarding things (Emma).

Spirituality: Support/protection

Many participants felt their spiritual beliefs and practices served a supportive function when facing difficulty and offered a point of contact from which to reconnect and re-centre themselves. Two participants spoke directly of feeling physically supported by their ancestors in another realm and this connection offered a sense of permanence and constant protection, which they had both lacked as children. Within this they were looked after, heard, understood and valued:

In times of stress, I just have to tap in and the supportive force is there walking with me, just 'cause I can't actually touch it or reach out physically with my hand, doesn't mean to say I don't feel it (Elizabeth).

…there have been times in my life when I have felt incredibly alone and with my faith I'm not alone […] I feel them come, I'm not alone and I'll never be alone and that's to me, that is the big comfort that these people are there, these spirits…are there (Aaron).

3.3.3 Spiritual Self and Society

Family and social contexts

Participants had mostly endured ridicule and disbelief by friends and family when sharing their often transformative spiritual experiences and felt it was not something they could openly discuss. However, others' reactions did not diminish their conviction of the reality of such encounters. Participants often felt that their spirituality was a personal endeavour with limited opportunity to include it within their family or wider social circles; it was felt to be 'something missing' which was 'saddening':

…it's something that matters a lot to me […] it just seems so separate to everything else, which, I'd like it to be more included (Ben).

I can't really explain to my family what I believe […] it's just kind of a limitation you know, it's kind of just a bit sad really (Sue).

Without this vital support, not only are some experiences repressed, but the potential for spiritual emergencies increases as the individual is ungrounded and uncontained within their experience:

> *…there's not many people I can talk to about it […] I would feel a bit lonely or a bit misunderstood […] also, you get like, oh it's just me that's into this […] I don't have any guidance […] it's just me versus my thoughts (Elliott).*

Wider society was also viewed negatively, bereft of a spiritual dimension with supreme focus on material gain, an environment in which openly expressing spirituality was sometimes deemed challenging:

> *It's a secular, materialist, reductionist society that puts no emphasis on the spiritual […] But what comes with the secular is absolutely no goal to existence. You're born, you go to work, you die (Craig).*

Practicalities

With wider society being deemed as diminishing of personal spirituality, the practicalities of engaging spirituality were also experienced as challenging. Time and space - both physical and mental - were regarded as cornerstones of a developing spirituality and were often actively sought in order to achieve this. Family and societal commitments were sometimes viewed as stifling and it was considered that, in the absence of such obligations, one could nurture a more satisfying spiritual path:

> *If I was completely alone and could make any decision I wanted to then I guess I'd lead a life that would honour that much more…I'd wake up really early, I'd go to bed really early, I'd meditate every day, I'd exercise outside in nature every day (Jessica).*

Mental space was also considered necessary for spiritual development, allowing time to nurture this aspect:

> *I wasn't in a good place to be thinking about it, there were other things I needed to be thinking about and so I didn't really have space in my head to be thinking about it (Sue).*

Other people in family and social networks seemed able to hinder such opportunities and it seems that, for those with unsupportive others, the self often became entangled in a perceived or actual necessity to serve others at the cost of nurturing the self. Thus, a spiritual lifestyle was largely

considered within the paradoxical parameters of self-focused attention (through time, space, meditation) and expansive connection (through nature, ritual, different levels of consciousness).

Embodied Spirituality

Despite these difficulties, most participants demonstrated desire for personal growth and self-transcendence, seeking to emanate positive attributes and responsible living through service to others and mobilizing personal beliefs and values. Various behaviours satisfied these values for example, vegetarianism:

> *I feel that energy and that light in everything and that's part of the reason why I don't eat meat […] because I kind of feel like that would be damaging that energy (Sue).*

And daily meditation practice:

> *Through the meditation I can not only get better - improve myself, which is the aim, I hope to see improvements in […] those recreational things that I enjoy (Craig).*

Beliefs about karma were shared by a few, encouraging positive behaviour towards others. There appeared a sense of balance, justice and natural order:

> *If you do something it'll come back three-fold […] knowing that the rule of three doesn't just apply to me, it applies to other people as well (Aaron).*

The sense of responsibility to fellow human beings and the planet was shared by a few and regarded as a fulfilment of the spiritual path.

> *If you believe something, you have a responsibility to act on it […] it's not a passive thing […] you don't get much meaning out of just thinking something in the back of your mind and not doing anything about it (Ben).*

Embodied spirituality therefore emerged through behaviours that galvanised thoughts and beliefs into action. Views of universal interconnectedness and shared responsibility meant that such actions not only served the individual and fulfilled their personal values but could also have impacts on a collective level.

3.4 Discussion

3.4.1 *The lost self*

The findings suggest that individual spirituality is a personally nurtured path that has been in existence, within participants' memories, since childhood. Hart (2003) highlights children's inherent ability to connect with complex issues such as injustice and compassion and suggests a more flexible approach to considering children's spiritual insights. This is supported by Moore et al. (2016) who caution against underestimating children's ability to engage with their spirituality. They concluded that, "although spirituality may be deeply intrinsic, it is fostered and channelled by one's environment […] children who have more opportunities to interact in highly religious and spiritual contexts, may have a spiritual life that is being more intentionally nurtured and supported" (p.8). This suggests that enhanced integration of spiritual contexts may lead to subsequent effective spiritual development and, therefore, demonstrates the extent to which this is culturally determined and influenced.

Maslow's (1943; 1962) hierarchy of needs and Erikson's (1963) psychosocial stages of development are similarly positioned in terms of how successful fulfilment of consecutive levels leads to a self-actualized person, or in Erikson's view, a more defined and integrated identity. Accordingly, successful integration of developmental stages offers a foundation for a strong sense of identity and direction within one's life. Gebelt and Leak (2009) highlight the centrality of spirituality and suggest: "[It] is not simply a domain of identity, but rather the central feature around which identity is organised" (p.181). Therefore, if children are not adequately nurtured or offered freedom to express 'abnormal' experiences, they may become lost as their identity is challenged. Loss of self was feared and experienced by some of the participants and many described a need for 'grounding' within the physical realm whilst engaging in opportunity to explore the spiritual. However, none of the participants appeared to experience a full spiritual emergency as described by Grof and Grof (1989; 1990), although they arguably teetered on the edge; they had transformative experiences throughout the ages, although it seems they did not exhibit psychotic-like behaviour as a result. The majority highlighted lack of support and understanding as problematic, often leading to a temporary state of isolation and confusion. Although not an emergency within itself, this sense of alienation and fragmented spiritual enlightenment has the potential to detach the individual from grounded reality; fears that were raised and experienced by a couple of the participants, albeit seemingly effectively managed.

3.4.2 *Finding and managing the self*

Participants employed a variety of interventions to help them manage and explore themselves and the beyond. The findings demonstrate that participants often seemed protective of their spirituality and did not seek to share it or feel it a necessary part of their therapy. They feared ridicule and pathologization and by protecting their spirituality - their beliefs and experiences - they were protecting a fundamental part of themselves against potential threat. This challenges previous research that suggests this is an integral part of the process and should always be included (e.g. Koenig et al., 2001; Post & Wade, 2009). Participants seem to support Jenkins' (2011) findings of 'playing the game' and modifying their behaviour according to differential contexts.

The spiritual/psychological divide, described by many of the participants is recognised by Clarkson (2002) who warns of the need to "differentiate between the psychologization of spiritual hunger and the spiritualization of psychological problems" (p.39). There is a need to determine the underlying nature of issues without an over-reliance on either psychology or spirituality. In this study, although the majority viewed their spirituality as an innate aspect, they seemed adequately able to discern their need for psychological and/or spiritual focus at particular times.

Bypassing ordinary consciousness through various means helped progress and, in some cases, instigate the spiritual journey. Whilst creativity has been associated with pathological states such as schizophrenia and bipolar disorder (Lukoff, 1988; Kyaga, 2011), Holt (2012) explores the extent to which this creativity may serve as a protective factor when people encounter anomalous/EH experiences, providing an outlet on which to express this and thus promote well-being. Whilst none of the participants appeared to engage with art as a response to a transpersonal experience, the experience itself appeared transcendental. Engaging these aspects may therefore help individuals connect more closely with their spirituality, transcending language barriers and allowing direct access to unconscious material (Maldiochi, 2007).

Meditation appeared to offer benefits of insight, relaxation and self-improvements, which is consistent with established literature. However, caution is advised and appropriate intervention and support is suggested when exploring such intense practice to ensure healthy grounding in physical reality (Shonin et al. 2013; Grof & Grof, 1990). Similarly, whilst psychedelic substances offered a progressive shift in consciousness, often regarded as a spiritual experience within itself, consistent with much of the literature (e.g. Grof, 2001; Griffiths et al. 2006) 'set' (individual thoughts/feelings/expectations) and 'setting' (social/physical environment) are fundamental considerations of the psychedelic journey and potential mediation of subsequent integration.

In all these methods of consciousness exploration, it seems clear that the fundamental principle is one of connecting to the experience, allowing the shadow and the darkness to meet and understand the inherent message of internal functioning that has perhaps long been ignored or denied. Therefore, support and opportunity to explore this appears to mark the difference between successful integration and destructive fragmentation.

Finding meaning within life's tragedies and challenges was a common feature amongst these participants and supports the literature demonstrating people's tendency to turn to spiritual concepts following disruptive life events to help make sense of them and thus better deal with them (e.g. Gockel, 2009; Bryant-Davis et al. 2012; De Castella & Simmonds, 2013).

Overall, improved connection to the self appeared to be a vital component of the journey which increased self-acceptance, understanding and resilience. The extent to which participants' spirituality was integrated or not within their different therapeutic methods was largely a personal decision seemingly based on therapist characteristics and contexts. However, individuals were able to draw on various other 'spiritual' practices in order to effectively manage themselves and deal with life's challenges and, although mostly a solitary journey, often increased a sense of universal connectivity.

3.4.3 *Self and society*

Most participants reportedly lacked spiritual nourishment within their social circles and it was a common desire for personal beliefs and experiences to be more readily integrated within a social context. For some, the early rejection of religious ceremony led to a loss of community and connection with others wherein they had felt embedded and supported. McClure (2013) describes her church attendance as personally beneficial, stating; "the rituals in church join the details of my life with those of others' lives in ways that bring them closer to me, and that feels important, perhaps even sacred" (p.728). Connection to others seems to be a fundamental part of the spiritual journey that without which, one risks becoming stranded and isolated and facing a potential spiritual emergency. As such, social contexts seemingly serve either a protective or damaging function for the spiritual individual.

Physical and mental space were considered prerequisites for exploring individual spirituality. Certain obligations such as family and work commitments and perceived expectations of others influenced the degree to which people felt able to engage with their spiritual practices. Kiesling et al. (2006) note that, "spiritual identity required intentionality to cultivate and great effort to protect from encroachment by the demands of adult life" (P.1276), an experience which was similarly shared here.

All participants demonstrated a tendency towards self-actualization by engaging in activities for self-development, to heal their wounds and lead more fulfilling lives. They also demonstrated desire for self-transcendence, seeking to emanate positive attributes and responsible living through service to others and mobilization of personal beliefs and values. Perhaps with the exception of one participant, it appeared that most of the spiritual practices engaged with were in order to gain a better connection to the self and other, with focus on personal development, as opposed to simply attaining a mystical experience, which may be considered a spiritual bypass.

Overall, these findings corroborate White (1993) and Brown's (2000) extensive qualitative analysis on exceptional human experiences (EHEs). They developed the EHE process model consisting of 5 stages: the initiating event, search for reconciliation, between two worlds, in the experiential paradigm, and a new way of being in the world. Although not always a linear process, this study supports this seemingly progressive journey from potential shock, denial and fear to grounded acceptance and assimilation. The individual is commonly altered as a result of the experience, both inwardly, through a new level of consciousness and outwardly, reflected in their new behaviours.

3.4.4 Applications to practice

Clients need to feel heard, understood and contained whilst therapists take account of their own potentially narrow parameters of analysis, considering the impact of trying to make sense of non-ordinary states of consciousness from a stance of ordinary consciousness, as suggested by Grof (2001). Therapists need to validate the power and the potential privacy of spiritual experiences and accept that they may not fully understand or share their clients' insights. Just as one cannot adequately describe colour to a blind person, trying to explain a mystical experience to a 'non-experiencer' is perhaps impossible and such therapeutic incongruence is likely to be palpably felt by clients. Therefore, feigning neutrality is perhaps therapeutically damaging, yet openness to clients' experiences, an interest in their underlying meaning and their interpretations, is ultimately the hallmark of psychotherapy and should arguably guide the process, as opposed to attempts at determining the validity or authenticity of the experience; for clients it is experiential and therefore real.

For many in this study, despite the fact they generally did not share their experiences directly with their therapists, they often felt grounded within the therapy and the increased ability to connect to themselves enabled them to remain connected to the physical realm and draw on their spirituality when they needed it. For one, therapeutic intervention appeared particularly important in mediating

his tendency to defend through spiritual bypass, although he was perhaps unaware of this, just having the opportunity to self-explore and connect with another seemingly offered a vital lifeline.

Various interventions have been proposed to effectively manage clients' spiritual bypass, including a Developmental Counselling Therapy (DCT) model (Cashwell, Myers and Shurts, 2004) and Motivational Interviewing (MI) (Clarke, Giordano, Cashwell and Lewis, 2013). Although the approaches differ, in both cases the spiritual bypass is regarded as a developmental block and the aim is therefore to address this within the therapy whilst exploring and embodying the bypassed material. The client's spirituality is actively engaged within the process and discrepancies between healthy and unhealthy spiritual aspects are addressed. Such interventions offer mid-length therapy, of approximately twenty sessions, in order to safely and effectively explore the rejected deeper material.

These modalities appear to offer a more holistic approach that contradicts some of the participants' views within this research who stated that spiritual inclusion was unwarranted and unnecessary at times. Accordingly, perhaps the greatest value, as suggested within the humanistic literature and arguably common to all modalities, is in developing the individual's agency in order that they can differentiate and decide on the most appropriate focus i.e. spiritual or psychological, at any given time, for them. It is suggested that time is of the essence and, in the same way that a therapist would not necessarily immediately pounce on underlying trauma before the relationship is sufficiently nurtured, perhaps the same is true when exploring and considering people's spiritual beliefs and experiences.

The predominance of Western focus on symptom cure is challenged and a suggestion for greater flexibility in attending to client needs, which proved invaluable in this sample, is encouraged. Such interventions could include therapeutic processes that engage the unconscious through imagery/visualisations, creativity and meditation practices. Promoting time spent in natural surroundings and honouring time for self-focus may encourage a more holistic approach to self-management and growth. However, of paramount importance, seems to be the degree to which many participants felt isolated and misunderstood within social and familial contexts regarding their experiences and underlying philosophies. Therapy should therefore take account of this, by considering the impact of attachment and identity issues that are raised as a result of spirituality and, perhaps, by further encouraging social interaction with similarly-minded people.

3.4.5 Limitations and suggestions for further research

Whilst this study offers an in-depth view of spiritual experience in life, including therapy, it is a focused and narrow sample, offering insight into the lived experience of eight participants. Although richness would be compromised, quantitative approaches would offer access to a wider population and be better equipped to generalise findings. With one exception, all participants offered experience of non-clinical settings, although insight offered into the clinical perspective was an added benefit. Subsequent research would benefit from further evaluation of varied settings and specific approaches in a more rigorous way to find the extent of dismissed or integrated spirituality within the therapeutic environment and inherent contributing factors.

There was a limited age-range of early thirties to late forties. This could have been improved by incorporating a greater distribution of ages which would offer insight into changing and developing spirituality throughout the lifespan. Someone later in life perhaps experiences their spirituality very differently to someone in early to mid-adulthood. Therefore, the impact of spirituality on meaning-making of life events, further spiritual experiences and the extent to which this has or has not been integrated in to daily life would offer richness throughout the life cycle.

The study offers retrospective insight into childhood experiences and, in many cases, therapeutic experiences, the recall of which may change over time and between different therapists. Future studies could focus on current therapy, enabling a clearer insight, at the time of intervention, to ascertain the principles of effective spiritual integration. Furthermore, a consideration of private versus funded therapies could offer insight into the extent to which this makes a difference in seeking and gaining a therapeutic spiritual dimension.

3.4.6 Conclusions

A variety of methods may be incorporated to help people exist in this reality and there needs to be openness as to what may work for each individual and what it is they need. Individuals note that their spirituality needs time and space - freedom - to be nurtured, factors that are also significant within healthy therapeutic encounters. Perhaps this is the cornerstone of healthy self-integration, offering expansiveness in which to nurture the self in relation to others, the wider world and their underlying spirituality. However, time-bound therapies may not have the capacity to delve too far within the spiritual dimension and therefore the need to incorporate different interventions that can safely and effectively access and contain these personal aspects is suggested.

Perhaps an unrealistic and unnecessary utopia, yet it seems that cultural awareness of many unexplained phenomena needs to be increased, which may reduce the degree to which this is 'split-

off' within life and therapy. Such cultural integration means that society as a whole, and counselling psychology in particular, may embrace spirituality as a lived experience, with all its weird and wonderful components that often cannot be rationalised or reduced to perfect structures that sum up the world and its inhabitants. Occasionally, we may simply need to accept that 'it just is'.

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My Journey

This has been an incredible journey for me (minus one dog and a cat). From my not so imaginary friend appearing around the age of three, to watching a programme about reincarnation aged five, I have long had a fascination with the 'Unexplained' and a sense of something greater which has permeated my life and brought me to this point. Whilst my childhood experiences were shared with others, my teenage years were riddled with pain and confusion. I lost myself and faced a spiritual crisis as events happened around me, thoughts shattered and my entire being was scattered - unfounded and misunderstood. I met two very influential people who helped me begin to make sense of myself, offering a sense of normality, cohesion and context, helping to contain and ground me. Over time and with social support, my fragmented being was mostly mended.

I entered the world of mediumship and my 'reality' became so much brighter, so much more vivid; the colours, the connection with others, an acute awareness of co-existing realities that mostly supported, but also had the potential to threaten, my equilibrium. For a while I enjoyed the 'quickening' and the expanded consciousness, until once again I became lost and overpowered by something I felt I had no control over. I lost the fundamental connection to myself. With limited guidance, I was becoming enveloped in a world I barely understood and was unable to 'close down'. However, with concerted effort focused on ignoring my surroundings (paradoxical as it is), the unexplained happenings, sounds, sensations and visions became less frequent until they very rarely occurred. Further interest and experience of shamanism, meditation and psychedelics has been from a more grounded position, although I am conscious of ensuring this is the case and that set and setting, in all aspects, are considered.

At times throughout this research my adolescent experiences have re-emerged and there has been increased incidence of felt presences, ego dissolution and spontaneous moments of (perceived) melting and merging into other realms. I trust that despite my caution with writing this I will not be deemed psychotic, and hope it will be appreciated that, since time has naturally distanced me from my own crises, these latest experiences have allowed me to enter more fully in to the participants' worlds.

A recent experience, although lacking in poetic and literary flair reads:

I was suspended somewhere unknown. I didn't exist but I did exist but I didn't know where or how. I was attached to nothing and belonging nowhere. I was something but nothing, I had no sense of myself, my surroundings, no knowledge of anything but a vague confusion as to what was going on...

And even more recently:

I suddenly felt distant from myself like I'd gone behind something and I was part of a group of people around a table – I was each person. They didn't seem friendly and there was something very strange about it …I didn't know who I was yet someone was me – but I had gone…the fear crept up within and I started panicking that I had gone mad, 'lost it'. How was I ever going to make it back? I put my hand on my heart and imagined connecting with the earth… When I spoke aloud that helped. Now I'm writing, it's helping even more. But I feel on the cusp – that feeling of disappearing whilst reappearing in another body, yet consumed and with no choice.

Whilst some may perhaps question my sanity, I feel honoured to have these experiences and to be able to reconnect, from a more solid grounding, with that which was so destructive in my former years. This research has confirmed to me the commonality of such experiences and the extent to which this is often hidden through acute fear of being so damagingly misunderstood.

This process has also strengthened my desire to work with the farther reaches of the human spirit, to access those parts that are often denied and feared and to help heal the fragmentation. My hypnotherapy and Reiki training can serve to compliment my professional career as a counselling psychologist as I continue to work amongst the traumatized and the troubled. And whilst I potentially venture back in to the confines of prison employment and the structured therapeutic approaches therein, I take with me greater insight and appreciation of holistic care and intervention and how this may be incorporated even within such parameters.

At the beginning of this project I struggled to find an appropriate definition of 'spirituality' that encompassed my understanding fully and perhaps there remains no succinct or adequate phrase that encapsulates this. However, it is fair to say that this research has helped develop my sense of spirituality and what it means to me. I believe that whilst spirituality may permeate all aspects of our lives, if we choose it to, an interest and exploration of different levels of consciousness and hence, heightened awareness, may in fact be a defining feature of the phenomenon. Yet it is perhaps the intention behind this exploration that marks the difference between superficial self-gratification or desire for insight, connection and understanding of the world and our place within in – features which I believe constitute spiritual journeying.

Happy travelling and may the 'darkness and stars' always be shared.

Interview Schedule

1. How would you describe your spirituality and what it means to you? (Prompt for beliefs/practices).

2. Can you tell me how you've come to be where you are now in your life...how has spirituality featured in your life (prompt for insights, experiences, influences, motivations, positive and negative aspects).

3. Can you describe any difficulties/challenges you've faced as a result of your spirituality?

4. Can you describe your experience of therapy...How has your spirituality, if at all, been experienced within therapy? (prompt for therapist acknowledgement of/challenges/benefits)

5. If you were to see/touch/feel/hear spirituality – e.g. draw/make/play etc how would it look/feel/sound.

6. Are there any changes you would make to your experience of spirituality and/or therapy?

SPIRITUALITY & THERAPY

- **Are you over 18 years of age?**
- **Do you have spiritual beliefs and/or spiritual experiences that are not connected to conventional religious beliefs?**
- **Are you in psychotherapy and/or have you had psychotherapy in the past?**

If you have answered 'yes' to all of these questions, would you like to be involved in a research study exploring spiritual beliefs in healing and therapy?

This will involve a 60-90 minute discussion and an opportunity to share your experiences. I can meet you at a place convenient to you.

Please contact Caz for more details:

Email: ▮▮▮▮▮▮▮▮▮▮▮▮▮▮▮▮▮

Phone: ▮▮▮▮▮▮▮▮

This study has been reviewed by, and received ethics clearance through the Psychology Department Research Ethics Committee, City University London [PSYCH(P/L) 14/15 135].

If you would like to complain about any aspect of the study, please contact the Secretary to the University's Senate Research Ethics Committee on 020 7040 3040 or via email: Anna.Ramberg.1@city.ac.uk

Appendix C

CITY UNIVERSITY LONDON

Psychology Research Ethics Committee
School of Social Sciences
City University London
London EC1R 0JD

30th March 2015

Dear Caroline Boulter

Reference: PSYCH(P/L) 14/15 135
Project title: An exploration of the lived experience of spirituality in healing and therapy

I am writing to confirm that the research proposal detailed above has been granted approval by the City University London Psychology Department Research Ethics Committee.

Period of approval
Approval is valid for a period of three years from the date of this letter. If data collection runs beyond this period you will need to apply for an extension using the Amendments Form.

Project amendments
You will also need to submit an Amendments Form if you want to make any of the following changes to your research:
> (a) Recruit a new category of participants
> (b) Change, or add to, the research method employed
> (c) Collect additional types of data
> (d) Change the researchers involved in the project

Adverse events
You will need to submit an Adverse Events Form, copied to the Secretary of the Senate Research Ethics Committee (anna.ramberg.1@city.ac.uk), in the event of any of the following:
> (a) Adverse events
> (b) Breaches of confidentiality
> (c) Safeguarding issues relating to children and vulnerable adults
> (d) Incidents that affect the personal safety of a participant or researcher

Issues (a) and (b) should be reported as soon as possible and no later than 5 days after the event. Issues (c) and (d) should be reported immediately. Where appropriate the researcher should also report adverse events to other relevant institutions such as the police or social services.

Should you have any further queries then please do not hesitate to get in touch.

Kind regards

Karen Hunt
Departmental Administrator
Email:

Katy Tapper
Chair
Email:

An exploration of the lived experience of spirituality in life and therapy.

DEBRIEF INFORMATION

Thank you for taking part in this study!

The research aimed to explore how people experience spirituality in their lives and within therapy. Being an under-researched area, particularly in the UK, this study aimed to offer insights that could not only have possible implications for future practice, but also throw light on an important facet of human nature. The research will likely show how people experience spirituality differently, but that there are common patterns and gains amongst those who describe themselves as spiritual. Experiences of how this is addressed in therapy will also highlight any differences or commonalities that may impact the role of spirituality in healing or otherwise.

If the study has raised any personal issues for you and you feel you would like support or to talk with someone, please see the contact details below. Alternatively, please contact your GP and/or your local counselling service who can offer support.

Samaritans: www.**samaritans**.org   **08457 90 90 90**

MIND: www.**mind**.org.uk   **0300 123 3393**

I hope you found the study interesting. If you have any other questions please do not hesitate to contact us at the following:

Caz Boulter: ██████████████████

Marina Gulina: ██████████████████

Title of study: An exploration of the lived experience of spirituality in life and therapy.

I would like to invite you to take part in a research study. Before you decide whether you would like to take part it is important that you understand why the research is being done and what it would involve for you. Please take time to read the following information carefully and discuss it with others if you wish. Please ask if there is anything that is not clear or if you would like more information.

What is the purpose of the study?

As part of my Counselling Psychology Doctoral course, I am required to undertake a research project of my interest that may benefit the field of Counselling Psychology. In our ever faster, technology filled lives, it is perhaps not surprising that the role of spirituality is becoming more prevalent in society, yet there remains limited research in this area and a level of trepidation amongst many healthcare workers. This research aims to explore how people experience their spirituality in their lives and within their therapy, and the impact of this on their journey. In order to research this, interviews will be conducted which will take approximately one hour.

Why have I been invited?

You are considered suitable for the study as you are over 18 years old, you consider yourself to have spiritual beliefs and you have either attended therapy in the past or you are currently attending. There will be a maximum of 8 participants, but you will be interviewed individually and will not meet each other as part of this research.

Do I have to take part?

Participation in the project is entirely voluntary, and you can choose not to participate in part or all of the project. You can withdraw at any stage without being penalised or disadvantaged in any way. It is up to you to decide whether or not to take part. If you do decide to take part you will be asked to sign a consent form. If you decide to take part you are still free to withdraw at any time and without giving a reason.

What will happen if I take part?

- You will be invited for a discussion with myself, lasting approximately 60 minutes.

- You will be asked some questions about your therapy and then we will explore the role of spirituality in your life in an open and unstructured way. No other participants will be present. Interviews will be audio-recorded.
- This research is concerned with your subjective experience, there are no right or wrong answers, just an opportunity to reflect on what spirituality means to you.
- You will be provided an opportunity to offer feedback on the findings. This will be some time after the first interview and is completely optional.
- Research will take place in a quiet setting, in a place convenient to you.

What do I have to do?

Before taking part you will have to sign the consent form. Following this, we will arrange a convenient time to meet for the interview. Once this is arranged we will meet for approximately 1 hour. After the interviews have been analysed you will be invited to offer feedback on the findings.

What are the possible disadvantages and risks of taking part?

It is possible that by discussing your experiences of therapy and spirituality, you may become emotional as thoughts or memories are recalled. This is not the aim of the project, but may happen as a result of our discussion in the interview. You will be offered support, from myself at the time of our meeting and some useful numbers following the interview, should you wish for further support.

What are the possible benefits of taking part?

By taking part, you are offering insight into an under-researched area that could have important implications for counselling and society as a whole. Your experience could influence future practice.

What will happen when the research study stops?

Once the project is completed all audio-recordings will be destroyed. Transcribed data will be stored in a locked cabinet and will not contain any identifiable information.

Will my taking part in the study be kept confidential?

- Yes. Myself and my supervisor will have the only access to the information
- This will consist of audio-recordings of the interview and written transcripts of the recording.
- These will be password protected and stored in a locked cabinet.
- Your personal information will not be shared and will be destroyed on completion of the study.
- Restrictions on confidentiality will include any concerns raised regarding current harm to yourself or others.

What will happen to the results of the research study?

The findings will be written up in the thesis and made available to the University library. There is a possibility of future publication in relevant journals. Any references to interview data will be anonymised and no personal identifying information will be published.

What will happen if I don't want to carry on with the study?

You are free to withdraw from the study at any time, without explanation or penalty.

What if there is a problem?

If you have any problems, concerns or questions about this study, you should ask to speak to a member of the research team. If you remain unhappy and wish to complain formally, you can do this through the University complaints procedure. To complain about the study, you need to phone 020 7040 3040. You can then ask to speak to the Secretary to Senate Research Ethics Committee and inform them that the name of the project is:

An exploration of the lived experience of spirituality in life and therapy.

You could also write to the Secretary at:

Anna Ramberg
Secretary to Senate Research Ethics Committee
Research Office, E214
City University London
Northampton Square
London
EC1V 0HB
Email: Anna.Ramberg.1@city.ac.uk

City University London holds insurance policies which apply to this study. If you feel you have been harmed or injured by taking part in this study you may be eligible to claim compensation. This does not affect your legal rights to seek compensation. If you are harmed due to someone's negligence, then you may have grounds for legal action.

Who has reviewed the study?

This study has been approved by City University London Psychology Department Research Ethics Committee, [PSYCH(P/L) 14/15 135].

Further information and contact details

You can also contact my supervisor:

Dr. Marina Gulina,
City University London
Northampton Square
London
EC1V 0HB
UK
Email: ██████████████████

Title of Study: **An exploration of the lived experience of spirituality in life and therapy.**

Ethics approval code: PSYCH(P/L)14/15 135   Please initial box

1.	I agree to take part in the above City University London research project. I have had the project explained to me, and I have read the participant information sheet, which I may keep for my records. I understand this will involve: • being interviewed by the researcher • allowing the interview to be audiotaped • answering questions about my therapy and spiritual experience • making myself available for a further interview should that be required • having my interview referred to anonymously in the thesis	
2.	This information will be held and processed for the following purpose(s): • to inform the research • to gain insight in to my experiences • to find common themes and patterns • to be referred to in the thesis I understand that any information I provide is confidential, and that no information that could lead to the identification of any individual will be disclosed in any reports on the project, or to any other party. No identifiable personal data will be published. The identifiable data will not be shared with any other organisation.	
3.	I understand that my participation is voluntary, that I can choose not to participate in part or all of the project, and that I can withdraw at any stage of the project without being penalized or disadvantaged in any way.	
4.	I agree to City University London recording and processing this information about me. I understand that this information will be used only for the purpose(s) set out in this statement and my consent is conditional on the University complying with its duties and obligations under the Data Protection Act 1998.	
5.	I agree to take part in the above study.	

Name of Participant: Signature: Date:

Name of Researcher: Signature: Date:

Appendix G

pendant / tattoo	Pagan, whether, I h...have, well I don't wear them to work anymore, I use to have a goddess pendant that I wore all the time, I've got a pagan tattoo, it's just what I believe and ...yea...(OK) so there is that, that, yea, there is an air of smirking...which does make it hard to stand up and celebrate, really	Don't hide it – part of physical identity – goddess pendant – tattoo.
Pagan / Physical identity not hidden		just my beliefs (level of importance
Smirking / Judgement is challenge to celebration	R – and how, in what way? P – just because of the smirking really and because of this huge belief that we'll go to hell and yea, you say it's that but we know you worship the devil...	Smirking/Judgement makes it difficult to celebrate.
		Smirking – condemned to hell, not believed (seen as evil – the devil) can spill over into
Others respectful – watch / interested / keep distance	R – so other people make it difficult to celebrate it and P – yea, yea, I think so and yea if we are up at C with a cloak on and a um...um a little flame going, a little tiny hexy burner (laughs) going, coz we don't want to damage anything, people don't laugh, people will keep a respectful distance, some will watch, and there have	respect of space / interest by others cloak fire respectful to surroundings – people don't laugh – keep respectful distance – watch – interested
cloak / fire, short, include others	been times, there was a time earlier this year when a woman was there and we said 'do you want some of our bread then?' and um yea, we had a Pagan wedding and	Sharing / community / involving others
Family awkwardness 'disappointment' - hurt	the great awkwardness that all my family (laughs) showed, was um...something to behold, the po-faced, yea, but that was the ultimate, we found it...you know we expressed it, we said there will be a Pagan ceremony,	Awkwardness of family - uncomfortable – not at ease (disappointment/hurt?) – pre-warned / explained event/process – to avoid surprise
Family unwilling to share day (reichal?)	there will be a priest and a priestess who will use daggers and so on and we will break bread and mead, have mead and you will eat some, um...but to get people to actually come was very difficult	– mead / terrible / daggers – food / mead - know how it works – unwillingness of people to join their special important day – difficult
	R – because of the Pagan aspect of it?	

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Left margin notes:

⑤ barrier to
Therapy + therapeutic
re'ship.

Care-co focus on
emotions – ↓ thought

⑤ Clouds the
emotions

⑤ doesn't have a
part in therapy

Psychological v
spiritual
therapy + psych.

Focus on gods
externalises
removes focus
from him.

Part of him outside
therapy.

light / peace (35...
relaxation = 35...
thru faith

not nec for
techniques

Transcript (centre column):

pause) for...(breathes out) I mean for one thing it would have got in the way with the therap..., for me it would have got in the way of the therapeutic relationship, I think and I'm, so I'm glad it didn't come up. My care coordinator was and is absolutely brilliant, um...he...constantly discussed about emotions, not thoughts but emotions – what emotion are you feeling, what emotion does that make you feel, no that's not an emotion, what is an emotion? And I think...(dog groaning, laugh, quick talk to dogs)...um that's ok, that's good that spirituality doesn't have a part in that, with belief...(O...OK) because it clouds the emotions I think...

R – what spirituality does?
P – yes, doesn't cloud but...it's a psychological thing that I was...addressing...not a spiritual thing (OK). If I'd said 'yea but the gods are telling me this', that would in some way have skewed what we discussed I think. It's hard to say...
R – so is it, so to you it's separate then is it?
P – yea, it is, it's separate from therapy, it's separate from the therapy sessions...it's not separate from what I'm doing at home and when I'm...in a dark place I can find the light through my faith...find peace, relaxation in order to use the techniques, then I can do that. But the techniques themselves, I don't think...I don't think the techniques themselves, I don't think the techniques themselves (OK, faith was necessary for the techniques themselves but it's yea)...so... it's separate from the therapy sessions but it's important for me when I use it to make sense of what I'm doing, to make sense of how I'm thinking, to make sense

Right margin notes:

Barriers to therapy + therapeutic re'ship. How?
- focus on spirit barriers to therapy? Too? are there @beliefs barriers?
Can't have good therapeutic relationship - constantly discussed emotions
care-co brilliant

Emotion – important to him –
acknowledged (understood)/viewed with...
- spirituality not addressed in past?
Can't emotions be spiritual - on a higher plane... here?
Shaman (met good mediums highly...when men emo...
(feel emotions are high vibration)

Spirituality clouds the emotions
- psych to be addressed
psychological v spiritual – not ⑤
- exacerbates... experiences
- Gods telling me = skewed discussion
- takes it away from him?

Separate from therapy sessions, - focus on psy... not spirit...
not separate from self @ home
in dark place => light thru my faith
- peace
relaxation :. use tech...

Faith not nec. for techniques – want te...
...he mean

Spirituality important to him
to make sense of doing, thoughts...
- making sense of self? - Ha...

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Left annotations:

wasting time trying to be understood.

Trust does therapist you satisfy too much.

Caution in disclosure / openness of beliefs for self-protection –

Spending valuable time explaining beliefs.

Educating the therapist rather than looking at me.

Who's therapy is this? Therapist v client/patient disclosure. goals.

What I want v what you want.

Transcript (centre column):

I'm god, I'm NOT be going there, um, that was another
thing that was misconstrued by a therapist that I had,
who actually said, 'so obviously you think you're god', No,

No I really don't, like that whole session gone, and of

course the more you try and say, no I don't, honestly, I
don't, the more it sounds like you're protesting too much
and, and that was quite an interesting...

R – and how was the experience of that then?

P – very frustrating and scary, you know it was one of the
times when I thought, you know when I was first aware
that oooh you got to be careful who you say your beliefs
to, you've got to be careful who you express...who you
open up to and who you can say you're openly Pagan
to...erm because not everybody gets it, not everybody
wants to get it, not everybody is prepared to put their
what they think they know aside and but then you've got
the flip of it who people are really interested and want to
know more and it's like this is great but this is my therapy
session, I don't want to spend it telling you what
Paganism...what my branch of Paganism is, I don't want
to spend the whole session educating you on what I
believe as a druid because that's not what I'm here for
actually, to do this, I'm here to do you know, look into
therapy, look in to, I'm here to look in to why I make the
mistakes, or why, not mistakes, why I've made the
mistakes, but why things have happened and how I can
make sure that I don't repeat those things, how I don't
like perpetrate what's ha...gone before really, not

Right annotations:

misconstrued by therapist.

– ignorance (explanation).

misinterpreted by therapist. Time consuming in therapy.

wasted session – explaining herself.

more you explain (clarity)
– seen as protesting/psychotic not too much.
– fine time – explain, but not over-do.

Frustrating scary

Be careful.
– who +
when +
Danger – 'Be careful' of ? . . . thought /considered herself to protect herself reaction...

Choose who you open up to

not everyone gets it

reluctance of others to want to get it (try to understand)
takes effort

Telling others v not (really?)

others really interested

Assuming she needs therapy to discuss issues that provide her insight. But distracting values on other ... + not educate others. many myths (forms of ... specific to her. many Paganism.

'my branch' – ...
whole session – educating / explaining Paganism.
– roles within therapy too... to be close

They can't be bothered.
They're too interested.

focus on therapist rather than her.

my mistakes

Therapy about me – my mistakes,
– reasons for things happening,
– not to repeat/overcome. / repeat...

reluctance to share – therapist to help client/patient an inseparable po...

past experience, ... relevant?

therapist's/client direct me ... therapy – do they... is important area or deviation to e...

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Initial Thoughts - Similarities and Differences

Similarities	Differences
Spirituality helps use therapy techniques	Spirituality part of therapy V spirituality not part of therapy
Gods/pagan beliefs	
Catholicism/paganism as rebellion	Internal v external locus of control
Majority have scientific background	Connection v Separation (attachment)
Acceptance of experiences rather than questioning at the time	Lost v grounding
	Containing v uncontained
Teenage years = time of questioning, turning away from religion – time of spiritual crisis?	Community v isolation
Protection & safety	Expansion v nihilism
Disowned/rejected by family coz of beliefs	Power v powerless
Sense of **value** within world – 'I am something, I am part of something'	
Becomes relationship that's perhaps been lacking throughout life – connection to something/part of something	
In adulthood the child is lost – adulthood abandons the inner child	
Reliving childhood memory/feeling – revisiting **places** of comfort/calm/safety	
Time & space needed to consider beliefs	
Time alone	
Conviction of beliefs – no one persuade otherwise	
Time for spiritual practice	
Label/name their spiritual orientation (6/8)	

Initial Broad Categories

1. ELIZABETH	Religion	Spirituality (beliefs & feelings)	Spiritual experiences	Self (psychological)	Therapy/MH professional	
2. AARON	Religion	Spirituality (beliefs)	Spiritual experiences	Life experiences	Mental Health	Therapy
3. BEN	Religion	Spiritual beliefs	Spiritual experiences		Mental health/self	Therapy
4. SUE	Religion	Spiritual beliefs	Spiritual experiences/ practices	Life experiences	Self	Therapy
5. JESSICA		Spiritual beliefs	Spiritual experiences/ practices	Life experiences	Self	Therapy
6. EMMA	Religion	Spiritual beliefs	Spiritual experiences/ practices	Life experiences	Mental health/self	Therapy
7. ELLIOTT		Spiritual beliefs	Spiritual experiences/ practices	Life experiences	Mental health/self	Therapy
8. CRAIG	Religion	Spiritual beliefs	Spiritual experiences	Spiritual practices	Self/mental health	Therapy

These categories were a result of initial reading/note taking and analysis. The categories were borne out of the information gained from the interview and provided much of the interview content. Interviews largely fell within these broad categories and allowed some systematic analysis of salient features within the interview. Further analysis of categories to reveal encompassing themes within them and find commonalities and differences within individual interviews and across the sample.
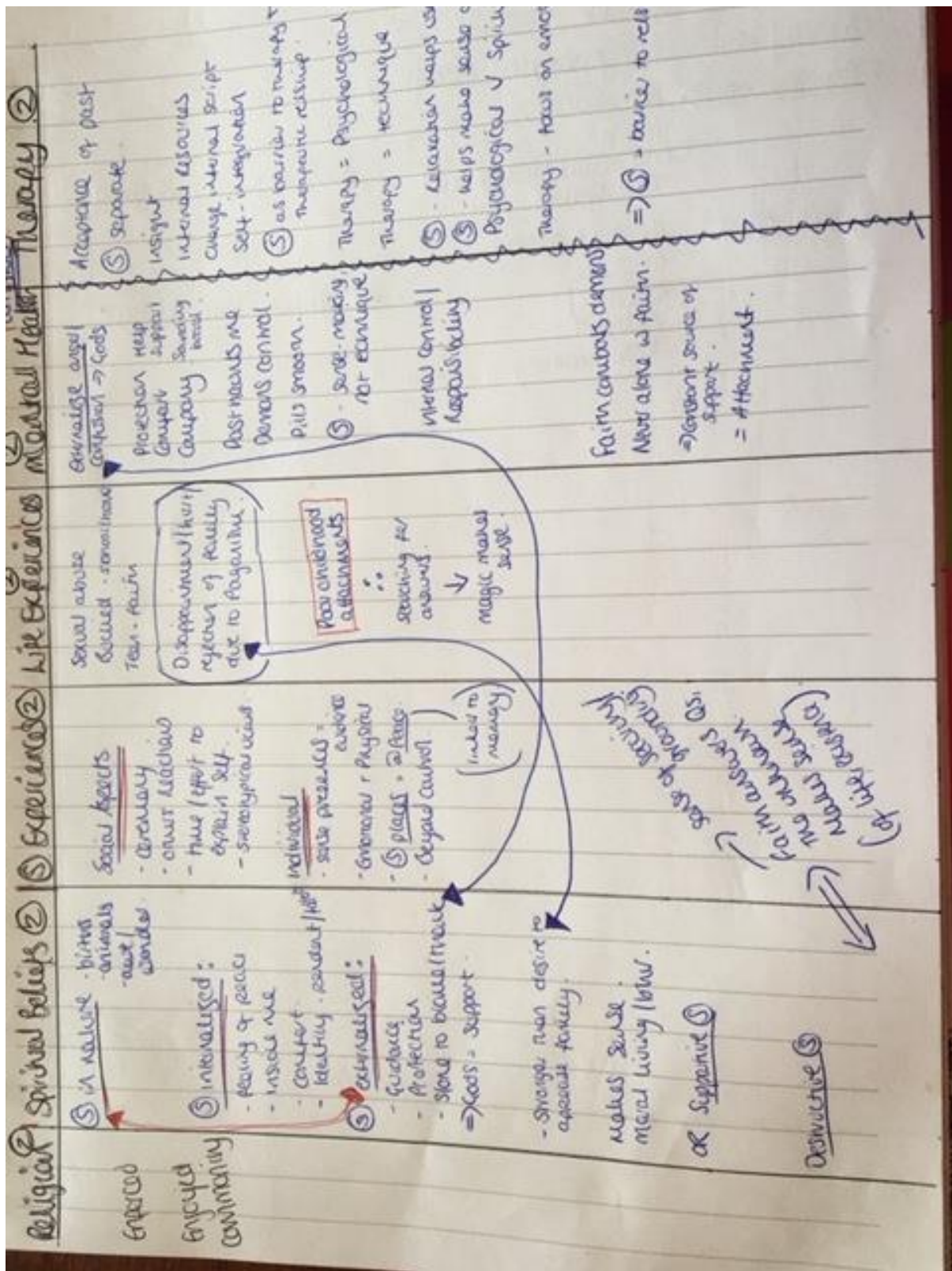
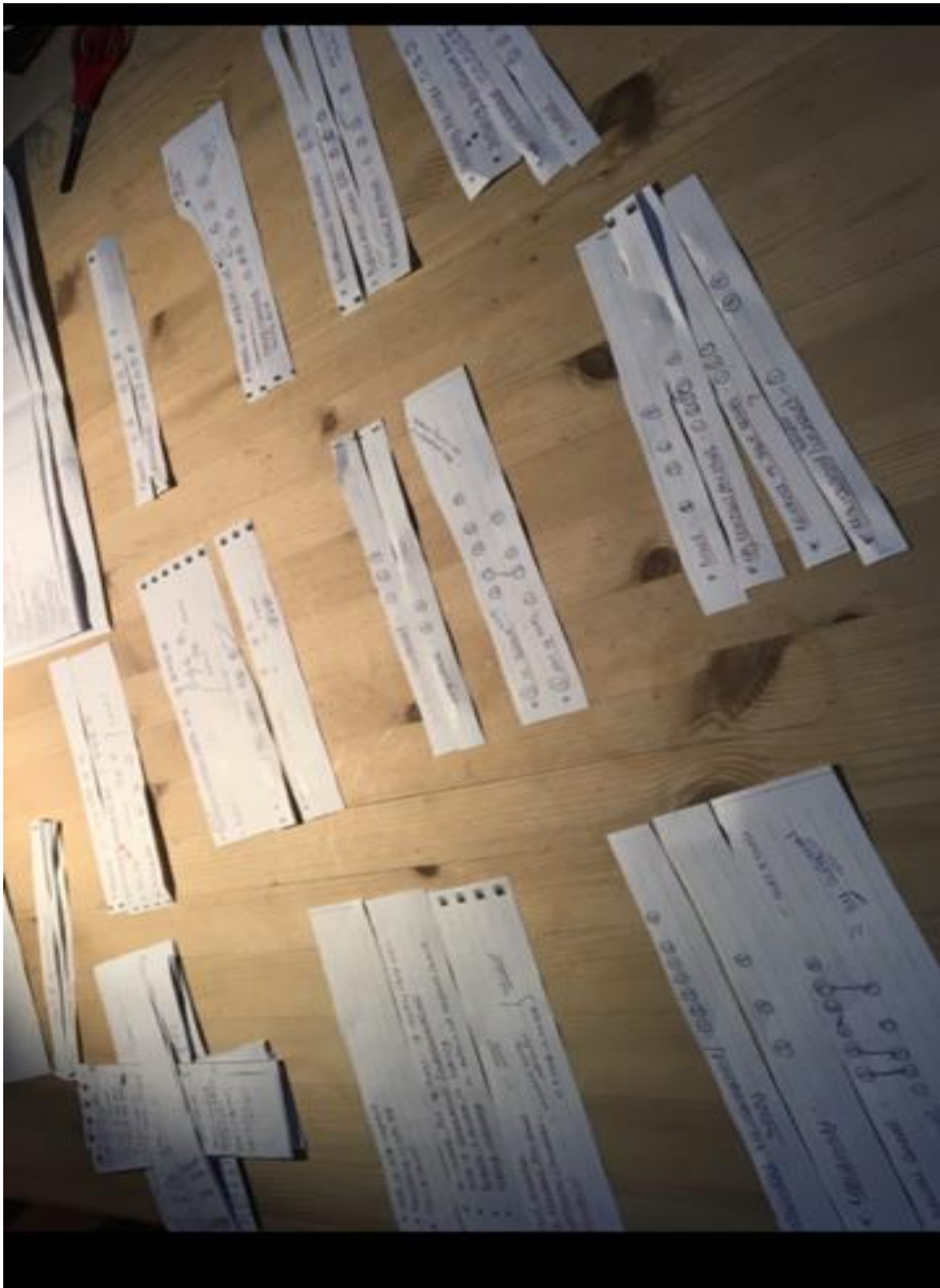| 1. RELIGION	1. SPIRITUALITY (beliefs & feelings)	1. SPIRITUAL EXPERIENCES	1. SELF (Psychological?)	1. THERAPY/MH PROFESSIONALS
Society expectations	Support on tap	Unexplainable but feels good	Small yet powerful	Misunderstanding
Fulfilling roles	Internal images & visualisations	Validation from others that it's real	In control (sometimes)	Inexperience
Not spiritual			Influence (over others)	Lack of explanation (from professionals)
Not enough	Inseparable from me	Palpable but unexplainable	Caution	Powerlessness – threat of section so shied away
Traumatizing	Expression of identity		Fear of judgement	Offering self-insight
Violent - blood dripping	Transition to Pagan = change of identity	'light goes out before death'	Rebel	Insight = start of changes and healing
Time for reflection	Acceptance of light/dark	Became focused and clear	Hidden rebel	Future possibilities and hope
Something bigger acknowledged	Balance		Always thought there's something else	Insight into (abusive) relationship
Not enough, want more	When can't cope, just reach out	Crystalized thoughts	Supported by something bigger	Medication best and worst thing
		A knowing		Time and positive relationship leads to understanding
Habit, routine	External support (fills internal void?)	Mystery solved	Trusting and certainty of gods	Misinterpreted
Lack of thought		Clarity without words	Lacking belief in self	Misconstrued
Strict	Allows for time out to connect/do therapy	Depression/crisis point – storm/wave/abyss	Misunderstood by professionals	Thou dost protest your sanity too much
Led to inquiry & curiosity	Survival	Visual & physical experience	Mental health – slow, unnoticed burn	Caution in disclosure for self-protection
	Balance			Educating the therapist rather than looking at me
Religion v society expectations	Making sense	Very strange & very special	Mental health – powerlessness in wake of storm	Whose therapy is this?
Ritual to avoid responsibilities (mass/maths)	It fits, feels right	Special places link to feelings		Therapist v client needs/wants
	Paganism as identity		Utterly crazy	Weigh up pros and cons of sharing beliefs – reluctance to share
Religion in education	Gradual dawning realisation	Special, perfect natural circle (of trees)	Bouncing off walls (uncontrollable)	Loss of power – nurses holding powers
Platform for further exploration/questioning	Completion/wholeness	Sounds muted	Self-management through acceptance	Closed view
	Beyond words	Being followed, watched, looked after		Viewed as delusional
Risky if against family beliefs	Social judgement of paganism – acceptability & stereotyping	Strange experience	MH viewed as cycle, balance of pos/neg, light/dark	Lacking understanding
		Same sensation/experience - felt separately	Can't have light without the dark	Time spent clarifying meaning
Hidden practices	Identity			Convincing them I'm not delusional
Rebellion		Validated by others' experience	Embracing all aspects of self	No, I'm not delusional
Based on Paganism (manipulated using festivals)	Support when needed		Certainty and hope the darkness will end	Viewed as psychotic
	Identity	Unexplained physical sensations (crackling stone) – question sanity		Experiences blown out of proportion, made a 'thing' (pathologized)
	Inseparable		Seeking an identity	
Traditional religion used as comparison to explain/justify beliefs – more accepted within society.	Fundamental	Acceptance of experiences rather than explanation	Finding meaning of existential questions	Integration into care plan and recovery
	Living		Seeking answers	Wasting my time trying to be understood
	Survival	Accept experiences as evidence of beliefs (gods with me)	Disillusioned	Unheard and unsupported
	Ineffable		Atheist (theological questions too great)	Too much diagnosis and not enough understanding (my view)
	Connection	Physicality makes it more real	Searching	Having a voice in therapy
	Acceptance		Clear understanding	Client control and power
	Sensitivity		Missing piece found	Show interest and understanding = well regarded – 'amazing'
	Power in everything	Unquestioned evidence of being blessed	Confused and unanswered questions	Connection with nature – praying = coping strategy on care plan
	'Alive and buzzing'	Conduit of energy		
	All-encompassing	In absence of MH issues/cycling	Careful/wary disclosure of beliefs	Practices integrated
	Symbiotic relationship with self	Happening outside her control (just happened)	Small and scared	Openness when beliefs legitimized
	Constant		Denying truth = limited insight (her and mother's experience)	Liberating/holistic care – beliefs acknowledged and integrated
	'Soft Fluffy Blanket' – Ancestors as safety/security Protection Comfort Security lacked as child	Lead to desire for further training		'amazing' – personal insights gained
		Wary/hesitant of sharing as not mainstream – fear of sectioning	Negatives = positives/acceptable (manipulation)	Destructive life events become constructive (PTG??)
	Difficulty connecting		Using learned strengths (manipulation – get people to do what I want)	Understanding myself
	Abandonment (by Gods)	Keep personal beliefs close to me (link to therapy)		Spirituality and therapy intertwined
	Bizarre, close connection (with partner)		Justified manipulation – for good	Get into trouble ('beautiful' experience/vision misunderstood)
			Life events encouraged life skills e.g. not good enough = drive and ambition	Hiding beliefs/future directions – fear of section
	Beliefs as fact/truth Who am I? Spirituality as part of me.		Power and ability to rewrite future	Step too far for medical model (reiki)
				Risk in disclosure
			Trained scientist – 'least likely person'	Keep personal beliefs close to me
				Pre-determined judgement of MH means she not open
			Psychologically v psychiatrically un/well	Acknowledge all self-aspects in therapy
				If I leave part of me outside, how can it work?
			Final acknowledgement of others' differing views	Consideration of 'safety' in disclosure – what is outcome if I share beliefs?
				Context dependent disclosure – counsellor or psychiatrist Implicate myself through disclosure

Appendix K

1. SPIRITUAL EXPERIENCES
- Unexplainable but feels good
- Validation from others that it's real
- Palpable but unexplainable
- 'light goes out before death'
- Became focused and clear
- Crystalized thoughts
- A knowing
- Mystery solved
- Clarity without words
- Depression/crisis point – storm/wave/abyss
- Visual & physical experience
- Very strange & very special
- Special places link to feelings
- Special, perfect natural circle (of trees)
- Sounds muted
- Being followed, watched, looked after
- Strange experience
- Same sensation/experience - felt separately
- Validated by others' experience
- Unexplained physical sensations (crackling stone) – question sanity
- Acceptance of experiences rather than explanation
- Accept experiences as evidence of beliefs (gods with me)
- Physicality makes it more real
- Unquestioned evidence of being blessed
- Conduit of energy
- In absence of MH issues/cycling
- Happening outside her control (just happened)
- Lead to desire for further training
- Wary/hesitant of sharing as not mainstream – fear of sectioning
- Keep personal beliefs close to me (link to therapy)

2. SPIRITUAL EXPERIENCES
- Energy – 'carried on a wave', communal experience
- Beyond control (energy, power, forces)
- Stone circles
- Celebrations– food, mead, wine, offer to gods; sharing, focus on gods
- Ritual
- Invoke gods
- Awareness of their presence
- Not alone
- See shapes
- Presence of relatives in head/body/atmosphere
- Somebody bring baby – feeling/sensing
- Overwhelming feeling
- Same emotions evoked as when that person alive- evidence they're there
- Feel presence/emotions
- Ritual – invite whoever, good intentions, leave with glad heart, take what they need – reciprocal
- Shapes = spirits
- Inside and outside me – standing next to me, hand on shoulder
- Beyond rationalisation – a feeling/experience

3. SPIRITUAL EXPERIENCES
- Drug induced spiritual experience (altered states of consciousness)–
- profound/everything interconnected – lack of understanding/minimised/ lack of containment and social context/lack of support so abandoned
- Further searching offered a context
- Searching/progression -
- Ayahuasca retreat – supportive environment, learn about shamanism, work on self-aspects – (self-development)
- Profound/interesting spiritual progression – desire to seek/progress/learn
- Sensitive to unseen presences – (experience validated years later)
- Hearsay – footsteps/doors opening/exorcisms
- Profound experience when young – unheard until later
- Sensing energy, very sensitive, very connected – reconnecting to lost sensitivity
- Easier when younger to 'tap into energy' – need to concentrate as adult

4. SPIRITUAL EXPERIENCES/ PRACTICES
- Vegetarian - eating meat damages that energy
- Grow a tree (uncaged) – connection
- Symbiotic relationship to trees
- V. strong connection – nurture a tree
- Incredibly calming/grounding
- In awe – natural intelligence/helping relationship amongst trees
- Practices – when needed, not routine – behaviours/actions, not nec practices
- Opportunities to connect with nature
- Camping/walking/hiking
- Physical connections to trees/ground – satisfy urge/seek connection
- Bodily connections – touch/barefoot
- Visualisation of safety – more active than meditation
- Includes all natural things I like connecting with
- Constant resource/safety mechanism within self
- Calmness in physical connection
- Real sense of calm
- Hiding – privacy/anonymity – very still, quiet/really peaceful
- Peace & calm – held by strength of tree
- Amazing/in awe
- Wise old woman/fire (passion/energy)
- Feeling connection means I'm as important as everyone &

5. SPIRITUAL EXPERIENCES/ PRACTICES
- Wants to explore further
- Time needed
- Know it's there
- Meditation, yoga, being in nature = spiritual sense
- Balanced
- Get perspective
- Whole & grounded
- Out of city – coastal breaks – natural
- Ease, connected, sense of energy
- Grounded, calm, peaceful, excited
- Yoga weekly – breathing/meditation
- Wake up early, alone in house
- Take in morning energy – 'promise of the day'
- Awe of nature and its beauty
- Spirituality is – real harmony, respect of nature, natural rhythms of life
- Seeing ghost – physical manifestation – unbelieved/unheard
- Tangible energy if open to it
- Seeing ghost – terrified & exhilarated – felt strong physical reaction
- Really scared & sense of wonder – knew it was spirit
- Unbelieved/laughed off by others –disappointed by others' reactions –

6. SPIRITUAL EXPERIENCES/ PRACTICES
- Pray – in gratitude rather than desire
- Pray for strength rather than avoidance (of situation)
- Practices based on internally driven sense/feeling of knowing what I need to do (e.g. writing/ burning)
- Moon/universal cycles significant – connection between feelings & power of moon
- Qigong
- Finding master 'thing' in India
- Understand timing/symbiotic relationship master/student
- Open to fate/opportunity – non-directive/fluid
- Synchronicity/coincidence in finding master (self-development/ openness to learning)
- Open to learning/practicing
- Body as important – in tune, flow of energy, flow of blood
- Reiki on self and others
- Reiki influenced how think about life: mind/body connection, neg. emotions make you sick – scientifically proven.
- Practices/tools –

7. SPIRITUAL EXPERIENCES/ PRACTICES
- Travel/time with Buddhists
- Serious, devoted Buddhist
- 'Nature of mind' practice
- Non-distracted non-meditation – challenge
- Simple concept, difficult practice
- Past – mantras
- Wide reading, talk about it
- Bring into daily consciousness
- Purpose of practices – liberate from suffering
- At peace, don't take things seriously, alleviates suffering
- Mantras – focus from self, calming, safety
- Specific mantras for goals
- Focused meditation, mind control
- Mind as powerful/independent of self
- Buddhism bridge lit. & psych. – coherence
- Influential books
- Sharing insights with others
- 2 years monastery – commitment
- Surrender to Lama – no control
- **(search for father figure/guidance)**
- Choice to leave
- Lama – 'ego assassin' –loss

8. SPIRITUAL EXPERIENCES

Childhood:
- 'Ghostly' experiences
- Spontaneous astral projection – confirmed physically - footprints
- Scared/awake (5 years) – hand swiped
- Shared with parents v. recently
- Sense-making = historical site
- Car jumped on own

Visual experiences:
- Kaleidoscopic light – other witnesses – relaxing
- Faces in paintings – frightening
- Quiet period – adolescence
- Late teens – psychedelics – self part of hallucinations

Adulthood:
- Time/distance shift (on pilgrim)
- Menacing/small entity appeared – beyond explanation/ understanding
- Rattling house – Yaksha
- Certainty
- Perceive as 'normal, everyday' experiences
- LSD influenced journey – theology study
- S objects as manifestation of S beliefs
- Great joy/excitement in objects = my therapy
- Love outdoors, scared places – connection to forgotten past
- Natural world/birds – therapeutic

8. SPIRITUAL PRACTICES

Practising Buddhist
- Pilgrimage – social/shared interests
- Continual self-management/ control/observation
- Vegetarian
- Long-standing interest in Buddhism – well-read / researched

incredible powerful (feeling a presence)	everything else – **equal**	important to her – not recognised/not respected **(self as ignored/dismissed/misunderstood)**	managing life, continue sense of positivity	of self – aggressive/destructive lama	Meditation – observe self & parents
Special childhood place – soul utterly at peace	Spirituality not part of existence/experience in 20s.	Physical manifestation (ghost) supports previous feelings of haunted house	Reiki used to 'shift things' (practices extended outwards when feeling positive/inwards when negative)	Challenge/purpose (lama)	Meditation = acceptance – reflection/contemplation of death
Place transcends problems	Stag as protector	Lack of time/external pressures – can't engage spiritually	Connection to spiritual place (Glastonbury) – drawn there. Linked to synchronistic events – developed spirituality	10 day retreat/empowerments	Embrace/explore negative thoughts/feelings – preparation for future = Gratitude
Quiet, personal, walk in nature or at work	Constant protection if needed	Watching sun rise for first time – first memory of sense of awe of nature, feeling energy – quite powerful	Playing/experimenting with energy before understanding – mobile phones breaking	Powerful, uncontrolled incidents	Appreciation of present by acknowledging death – **Living in light of dying**
Faith confirmed through observation – miracle of life, baby born, bird flies	All about connection with nature and presence of light	Emotional rather than physical feeling – quite deep down (part of her?)	Things happening without understanding – beyond control	'Drugs in food' – nourishment tampered by others	Control V Acceptance of events
Faith answers the unknown	Real, most important/most prominent is white light that connects all	Difficult to describe	Many things happening – synchronicities/signs	Lack of social support	Meditation as key/core
Misunderstanding	Physical experience of spirituality in tummy – adrenaline/excitement	Natural phenomena increase sense of Spirit.	21 – S exploded – spontaneous phenomena/insights happening without info. Gathering	Lack of guidance – seeking support/guidance	Scriptures
Effort/time spent explaining self	Dramatic side of spirituality – physical/visual (action?)	When feeling spiritual – no problems, self-love, others' opinions of me don't matter **(self-love/self-acceptance)**, confidence in self	Physical manifestations of reading confirm beliefs	Me against me	Deity embodies qualities
smirked at – challenge to open celebration – others respectful – watch/interested/respectful distance	Undramatic side:	Thinking about something much bigger – own problems aren't relevant (ref - C.Mackinnon)	No definitive proof but choose to see world in particular way e.g. as meaningful event	Unsure of self in S practice/understanding –lack of context/grounding	Accept good & bad in people – unconditional love (p.19)
Cloak/fire/share/include others (if wished)	Sense of calm	Broader focus helps get perspective	Interpretation of dreams = synchronistic event	Need for structure around practice	Different deities for different purposes/aspect of mind
	Well-being	Restorative, refreshing, grounding, nourishing (healing/growth)	Dreams – massive part of life – help figure stuff out (guiding/insight)	**Want v Obligation (practice)**	Visual tool to manifest psychological ideology
	Grounded	Focus on macro rather than micro	Psychic stuff – 'happened' to me (beyond control) – unknown scientific explanation for psychic happenings	Sitting/thinking	Thru mud great beauty can arise
	Part of earth	De-stressor, balancing when stressed out	Reaffirms belief beyond	Low-intensity research/FB updates	Visual representation of mind aspects
	Sense of awe – being very small but important part of something much bigger **(sense of self)**	With freedom/singlehood would honour spirituality:		Seeking enlightenment – study process/themes in others	Recitation/visualization = change within self
	Visualisation within her control			'Flashes of insight'	Visualize colour spreading over body – mind/body connection – grounded in this reality
				20 days silent retreat – achievement	Words affect body
				Meditation – adherence to teaching V free will. Choice V obligation.	Great, enjoyable challenge
				Teachings expect you help others	Routine/structured (p.23)
					Meditation – intrinsic in many parts of life – part of life
					Art – esoteric/Eastern influence – interconnectedness of art
					Meditation = self/hobby improvements
					Challenge – personal discipline
					Personal pressure/discipline
					Personal choice/mental control – conquer own mind
					Psychoactive link to religion and S trads.
					Meditate on bhv – calm reflection
					Assertive bhv not passive walkover, Peace & love = biggest challenge
					Assertive communication
					Taking responsibility
					S practice continue despite mental health and withdrawal from society – routine/habit/fear of personal failure??
					Meditation potentially dangerous
					Value support/guide
					Practice – small in comparison – motivated/personal/pure/ untainted S = therapy
					S objects as manifestation of S beliefs
					Great joy/excitement in objects = my therapy
					Notice all surroundings – small animals
					Diet as cultural – India belief in action – vegetarian

Appendix L

FINDING THE SELF + SELF-MANAGEMENT

* Reconnecting / completing the self - ① ③ ④ ⑥ ⑦

* Identity - ① - big for ①②③ ⑤ ⑦

* Comfort / Protection / Support - ①② ④

finding meaning - ① ②③ ⑤ ⑦
making sense.

* Balance, yin, yang +ve + -ve - ① ④ ⑥ ⑧
n+/life

Positive
* Physiological / Emotional Impacts ① ② ④ ⑤⑥⑦ ⑧
changes

* Positive Psychological impacts -- ④ ⑤ ⑥ ⑧
changes
coping
skills
perspective

calming /
grounded.

* Developing self-insight - ① ② ③ ⑥ ⑦

* Developing self-acceptance / integration - ② ③ ④

Appendix O

Spiritual practices and effects on well-being?

Participant	Spiritual Practices/Beliefs	Psychological outcomes/well-being
Elizabeth	Visit special places, natural settings Offerings/rituals to gods Connection to nature - praying	Support when needed – 'soft fluffy blanket' Acceptance of balance/light/dark Cycle of life = her bipolar cycle – symbiotic Abandoned by gods.
Aaron	Offerings/rituals/invoking gods/ancestors Revisit special places Nature walk = solitude Social & solitary activities	Comfort when needed Sense-making/answers questions
Ben	Psychedelics Nature Meditation – selflessness, zone out from mind Shamanic journeys – meet 'true teacher', connection to self Troubling v sense of calm Art – spiritual connection to emotional self through object – powerful, transcendental, transpersonal.	Interconnected energy Raises more questions, not answers Active search when for answers/meaning when ill
Sue	Connection with nature – physical touch Trees Visualisation/meditation – wise old woman, stag, fire, interconnecting orb. Art Writing	Constant support/protection Calm, reassurance, connection, hope, grounded, part of earth, awe 'Knowing you're part of something means you're less small' Feeling connection means I'm as important as everyone and everything else' Spiritual & scientific self integrated – makes sense 'A rock' – permanent, strong, reliable Rely on it to make me feel better Survivor mode (20s) not spiritual
Jessica	Meditation Yoga Time in nature Cannabis (bigger picture/perspective)	Grounded, calm, peaceful Self-love/acceptance – connection Broader focus gives perspective Restorative, refreshing, nourishing (healing/growth) Self has a place/role in nature Spirituality/science – cognitive dissonance unresolved Spirituality gives life meaning – without, no meaning
Emma	Pray – for strength/gratitude Karma – helping people helps you Synchronicities – choice to view world in particular way Timing Suffering has purpose Moon/universal cycles – connection to emotions	V. open = v. vulnerable Detach from life Bad things part of journey/personal growth Beauty in synchronicities – 'my antidepressant'

	Qigong Reiki on self and others Art Drugs (past)	Subconscious self-management – immediate emotional/physiological change
Elliott	Meaningful coincidences Focused meditation – 'nature of mind/mind control' Mantras Monastery Retreats Surrender to lama Ayahuasca	Searching after tragedy – meaning/purpose/connection to god At peace, don't take things seriously, alleviates suffering, calming, anxiety/depression lasts less Meditation – choice v obligation Competitive spiritual student Confused Spiritual bypass Powerful/uncontrolled incidents Ego-assassin, loss of self
Craig	Pilgrimage Meditation Unconditional love Visual representations of deities Objects as manifestation of beliefs Natural world as therapeutic Suffering inescapable Positives in suffering Renunciation of neg emotions and neg mind Outdoors, sacred places, connection to past Esoteric art Psychedelics	Meditation: Reflection/acceptance/contemplation of death Explore/prepare for future Mind/body connection – grounded in this reality Personal discipline Reflect on behaviour – taking responsibility Self/hobby improvements 'Spirituality is my therapy' Great joy/excitement in objects – my therapy Constant connection to self Enjoy present Mind as free, uncontrolled, liberated, self-sufficient Self-acceptance – unconcerned of prejudice Feel good about vegetarianism Self-awareness – mind-set and suffering connected

'Embodied' Spirituality?

Name	Behaviour/integration in daily life
Elizabeth	Balance
Aaron	Don't hurt anyone – karma/rule of 3
Ben	Active responsibility – gives meaning Life distracts from spiritual practice – not practical, no time, difficulty integrating in daily life
Sue	Mental space needed – time and space required to evaluate beliefs Vegetarian
Jessica	Lack of time/external pressures – would do more meditation, solitary focus with more time
Emma	Trying to imbed in daily life Karma – imbedded way of being, guides decisions
Elliott	Success/achievement = renounce all worldly concerns Well-being as not existing in this realm Need for structure around practice
Craig	Vegetarian Meditation part of many life aspects – routine/structured Meditate on behaviour – calm reflection, assertive communication, taking responsibility Belief in action – e.g. 'right speak' - say to face Responsibility to develop self – continual self-management, observation, control Embodied identity – nickname Buddha. Self-acceptance – unconcerned of prejudice

Spiritual self in family and society

Name	Experience of society – journey through society
Elizabeth	
Aaron	Rejected by family – sad
Ben	Spirituality lacks social context – saddening Social integration missing Overlooked/misunderstood by colleagues
Sue	No open discussion with family – limitation/sad
Jessica	Society's lost connection Derision in society Ridicule by friends Don't talk about beliefs Family relationships challenged Living in a spiritually unfulfilled environment in a society which has lost spiritual connection
Emma	Open about beliefs despite friends & family – 'it's who I am'. Seeking connection/understanding with others Social connections as harmful – no deep connection Desperate for connection – reconnection with lost self through connection with others – 'felt like myself again' Connections with others affect mental health
Elliott	Lack of social support/guidance – me against me – lack of context/grounding Misunderstood by society – unconventional, self as different
Craig	Laughed at by peers Social/shared interests now – pilgrimage, social support West impose self-deprecation, low self-esteem, society as damaging, lacks spirituality, no goal to existing Self as acknowledged, respected, revered by peers

Appendix P

Master Themes and Subthemes Tables

MASTER THEME 1: THE LOST SELF

Subtheme	Remembering the spiritual child	The lost adult
Elizabeth	Yes	Yes
Aaron	Yes	No
Ben	Yes	No
Sue	Yes	Yes
Jessica	Yes	No
Emma	No	Yes
Elliott	No	Yes
Craig	Yes	No

MASTER THEME 2: FINDING AND MANAGING THE SELF

Subtheme	Western methods		Spirituality			
	Dis/connection	Separ/Integ	Surroundings	Consciousness	Meaning	Support
Elizabeth	Yes	Yes	Yes	No	Yes	Yes
Aaron	Yes	Yes	Yes	No	Yes	Yes
Ben	Yes	Yes	No	Yes	No	No
Sue	Yes	Yes	Yes	Yes	No	Yes
Jessica	Yes	Yes	Yes	Yes	Yes	No
Emma	Yes	Yes	No	Yes	Yes	Yes
Elliott	Yes	Yes	No	Yes	Yes	No
Craig	Yes	Yes	Yes	Yes	No	No

MASTER THEME 3: SPIRITUAL SELF AND SOCIETY

Subtheme	Family contexts	Social context	Practicalities in society	Embodied spirituality
Elizabeth	Yes	No	Yes	Yes
Aaron	Yes	No	No	Yes
Ben	No	Yes	Yes	Yes
Sue	Yes	Yes	Yes	Yes
Jessica	Yes	Yes	Yes	Yes
Emma	Yes	Yes	Yes	Yes
Elliott	No	Yes	Yes	Yes
Craig	Yes	Yes	Yes	Yes

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Pitout JDD, Church DL, Gregson DB, Chow BL, McCracken M, Mulvey M, Laupland KB (2007). Molecular epidemiology of CTXM-producing *Escherichia coli*in the Calgary Health Region: emergence of CTX-M-15-producing isolates. Antimicrob. Agents Chemother. 51: 1281-1286.

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