

Exploring the significance of 'sacred moments' in therapy

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"My client said I was different than all other therapists in the sense that I was genuinely caring about him and paying attention to what he was saying and also to what he was not saying. It was like time had stopped and we were two vulnerable human beings connected at a very deep level -- a 'sacred' moment."

New research from Bowling Green State University shows that these kinds of "sacred moments" between therapists and their clients lead to improved well- being for both sides, demonstrating the value of paying close attention to the spiritual dimension between providers and their patients.

The study "Sacred Moments in Psychotherapy from the Perspectives of Mental Health Providers and Clients: Prevalence, Predictors and Consequences" is featured in December's issue of *Spirituality in Clinical Practice*. Dr. Ken Pargament, professor of psychology at BGSU, is the lead researcher on the study, assisted by Drs. James Lomax of the Menninger Department of Psychiatry and Behavioral Sciences at the Baylor College of Medicine, Jocelyn McGee, Department of Psychology at the University of Alaska at Anchorage, and Qijuan Fang, a psychology graduate student at BGSU.

The study represents the first systematic effort to examine a potentially important ingredient of therapeutic change -- sacred moments that unfold in the relationship between client and therapist. In samples of both mental health providers and clients, these moments proved to be more frequent than expected and beneficial in terms of the therapeutic relationship as well as the mental health and well-being of both client and provider.

The term "sacred moments" refers to brief periods of time in which people experience spiritual qualities of transcendence, ultimacy, boundlessness, interconnectedness and spiritual emotions.

Transcendence involves experiences that are perceived to be set apart from the ordinary and day-to-day, and go beyond the limited self. Ultimacy refers to experiences of deep truth. Boundlessness has to do with experiences that are perceived as beyond the limit of ordinary time and space. Interconnectedness involves perceptions of deep mutual understanding and caring. Spiritual emotions refer to experiences of uplift, awe, humility, mystery, gratitude, joy, peace and serenity.

Pargament points out that it's important to note that the term "sacred" is used in "a psychological rather than theological sense. 'Sacred' refers to human perceptions of qualities often associated with the divine or higher powers."

In their first study, the researchers asked providers to focus on an important moment in treatment and then asked them to indicate whether the moment was sacred, the degree to which the moment was filled with spiritual qualities and predictors and consequences of the moment.

The majority of the providers indicated that the important moment they identified in treatment was sacred to them. "Far from being unusual, then, sacred moments appear to be fairly normative in treatment," Pargament stated.

"As predicted, sacred moments were more likely to emerge out of a stronger therapeutic alliance between therapist and client, marked by a sense of therapeutic acceptance, presence and receptiveness," he said. "Providers also reported that, prior to the sacred moment, clients were more likely to be experiencing a general sense of unease and tension in their lives. In this sense, sacred moments may provide a spiritual resolution to fundamental life unease."

Providers who perceived greater sacred qualities in their important moments also described improvements in their working relationship with the client, such as increased trust, honesty and openness, cooperation and mutual respect. Sacred moments were also associated with reports of greater provider gains in terms of growth and insight, work motivation and satisfaction, meaning in work and spiritual well being.

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"These findings suggest that sacred moments may be an important ingredient of therapeutic change, which fosters the health and well being of clients and the therapeutic alliance," said Pargament. "Moreover, these moments may be a resilience resource that supports and sustains mental health providers through the significant challenges of mental health care."

The researchers then conducted a second study focusing on the clients, asking them the same questions posed to providers in the first study.

The findings largely replicated and confirmed what was seen with the mental health providers. First, sacred moments were not unusual. Clients who attributed sacred qualities to their important moment in treatment reported an enhanced therapeutic relationship, a better working treatment alliance, greater satisfaction with their therapist and positive changes in mental health efficacy and mental health more generally.

"These findings, preliminary as they are, suggest that sacred moments may be transformational, life-generative experiences, and, more generally, act as vital ingredients in the process of healing to people grappling with fundamental unease in their lives," Pargament explained. "Clients may find that they have been fundamentally transformed by the sacred moments they have experienced in treatment. Providers may find that sacred moments are what make their work most meaningful and worthwhile, and what sustain them through the challenges of a mental health career.

"Overall, these findings underscore the value of attending to critical moments in treatment, brief moments which may facilitate powerful change and transformation for client, therapist, and the therapeutic relationship. This encounter between therapist and client can be, and we believe should be, understood at a deeper, more profound spiritual level."

Story Source:

The above story is based on materials provided by **Bowling Green State University**. *Note: Materials may be edited for content and length.*

Journal Reference:

1. Pargament, Kenneth I.; Lomax, James W.; McGee, Jocelyn Shealy; Fang, Qijuan. Sacred moments in psychotherapy from the perspectives of mental health providers and clients: Prevalence, predictors, and consequences. Spirituality in Clinical Practice, Vol 1(4), Dec 2014, 248-262 [link]

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