

*A Developmental Continuum of Twelve Spiritual/Religious Resources*

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**Abstract:**

This paper introduces a developmental continuum of twelve spiritual and religious resources that may characterize an individual's transpersonal dimension of experience. It is proposed that these spiritual, mystical, and religious resources may: (a) exist in and/or move from a singular (or independent/differentiated) state; to (b) a state of complimentary integration wherein they may coalesce with and mutually influence each other as well as (c) intersect with and mutually influence the individual's other (biopsychosocial) dimensions of experience; while also possessing the potential to (d) progressively evolve with a greater capacity to influence spiritual development than the sum of any of their component parts. This paper further proposes that these twelve resources may be selectively incorporated into a multidimensional approach to psychotherapy as well as into most treatment models and that by doing so, they will serve to mediate suffering and facilitate healing and resiliency in the spiritually-sensitive client. A multidimensional approach to psychotherapy simply recognizes and incorporates the different (biopsychosocialspiritual) aspects of the client's reality; viz., the reality of the human experience.

By facilitating convergence of all dimensions of the patient's experience the therapist maximizes the potential to disrupt the dynamic forces impeding recovery; thereby enabling, once again, the patient's innate, multidimensional pathways of healing to unfold. Definitions of religion, spirituality, and transpersonal social work are offered that are both embedded in and emerge from this developmental continuum of twelve spiritual/religious resources. The words 'client' and 'patient' are used interchangeable within this paper.

**Biography:**

*Ms. Davina Gabriela, MSW, LCSW*, has over 32 years experience in mental health & substance abuse behavioral health services specializing in treating depression, anxiety, panic attacks, trauma, and PTSD. She is certified in EMDR (Eye Movement Desensitization Reprocessing) and is also a certified Ericksonian Clinical Hypnotherapist. She has education, training, or experience in therapy models such as CBT (Cognitive-Behavioral Therapy), short-term psychodynamic therapy, and TIR (Traumatic Incident Reprocessing). She has presented on the integration of psychotherapy, neuroscience, and spirituality at regional, national, and international conferences.

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This paper places emphasis on the expediency of recognizing, understanding, and incorporating into the psychotherapeutic dialogue an appreciation of and sensitivity to the patient's potential array of *spiritual* and *religious* resources. I introduce a developmental continuum of twelve spiritual/religious resources that may characterize a patient's transpersonal dimension of experience. In working with patients with *spiritual* sensibilities, the selective verbal and non-verbal utilization---in relation to both language and technique---of this continuum of *resources*, constituting as they do, the patient's transpersonal dimension of experience, represents a pivotal aspect of spiritually-sensitive psychotherapy.<sup>i</sup>

This continuum of twelve spiritual and religious resources offers the potential to expand the therapist's understanding of the patient's transpersonal dimension of experience while illuminating additional and complimentary pathways for both connecting and intervening with the spiritually-sensitive patient. For these patient's, having a therapist who is mindful and respectful of their spiritual dimension of experience serves, at the most basic level, to strengthen the therapeutic bond; thereby facilitating trust, contingent communication, and the likelihood that any therapeutic change that is made will be successfully integrated into the spiritual dimensions of the patient's autobiographic narrative.<sup>ii</sup>

I have previously described this continuum as: "the developmental array of *spiritual*, *religious*, or *mystical* resources a patient may present with during psychotherapy are as follows: 1) *beliefs* that are professed or strongly held and practiced; 2) the capacity for and degree of *fellowshipping*; 3) respect, admiration, and/or committed dedication to a particular historic, contemporary, or transcendent spiritual, religious, or mystical *authority figure*; 4) use of

spiritual, religious, or mystical *music, imagery, and symbolism*; 5) use of spiritual, religious, or mystical *words, language, sacred writings, or holy scriptures*; 6) observance of religious *ceremonies, rituals, and sacred festivals*; 7) belief in, respect for, and use of *sacred places* such as *holy temples, synagogues, mosques, shrines, or ancient burial grounds*; 8) understanding from a spiritual perspective, *humility and sacrifice*; 9) understanding from a spiritual perspective, *suffering and forgiveness*; 10) understanding from a spiritual perspective, *renewal and resiliency*; 11) *communicating to* the transcendent utilizing *prayer, chants, or meditation* (in addition to any or all of the above ten resources); and 12) *communication with* the transcendent wherein one comes to know, through *transpersonal experiences*, the reality of the transcendent; that is, the actual experience of transpersonal realities” (Gabriela, 2003, p. 27).

It is beyond the parameters of this paper to individually discuss the twelve spiritual or religious resources identified above; that is, to provide clinical applicability for each with various patient dynamics and specific intervention techniques. The central thesis of this paper is to introduce and discuss the developmental continuum of twelve spiritual/religious resources described above; resources that a patient may bring to the psychotherapeutic process. Integrative, multidimensional models of psychotherapy that facilitate the selective convergence of all dimensions of the patient’s experience are suggested in order to maximize the potential to disrupt the dynamic forces impeding recovery; thereby enabling, once again, the patient’s innate, multidimensional pathways of healing to unfold. A multidimensional approach to psychotherapy simply recognizes and incorporates the different (biopsychosocialspiritual) aspects of the patient’s reality; viz., the reality of the human experience. Such an approach seeks to be mindful of both the historical and contemporary influences of biopsychosocialspiritual experience

unfolding in the individual's life and how they have both impacted and are currently impacting the patient's mental health and resiliency as well as the propensity for disturbances in affective, cognitive, and behavioral self-regulation.

### **Defining Religion, Spirituality, and Transpersonal Social Work:**

In relation to defining religion and spirituality for purposes of this paper, I have previously described religion as: "A personal or institutionalized system or method of worship involving a set of beliefs and/or practices associated with service, commitment, or reverence to a particular belief in God, gods, or a supernatural power outside of one's self that generally includes specific and detailed devotional practices that may be transcribed in written texts or verbally and/or non-verbally communicated" (Gabriela, 2003, p.3). Carroll (2001) described how: "organized religion serves as a means to express one's beliefs about his or her spiritual nature (Dudley & Helfgott, 1990; Oritz, 1991; Titone, 1991)" (Carroll, 2001, p. 6-7) and Pargament (1997) describes religion involving: "a search for significance in ways related to the sacred" (Ibid., p. 32). I have described spirituality as: "...of or pertaining to the recognition, pursuit, achievement, and sustainability of a perceived or genuine connection/ relationship with something temporally or transcendently greater than or beyond one's skin-defined self" (Gabriela, 2003, p.3). These definitions are deeply interwoven into the continuum of spiritual and religious resources discussed in this paper. Canda (2001) has described spirituality as: "a person's search for a sense of meaning, purpose, and morally fulfilling relationships with self, other people, the universe, and the ultimate ground of reality, however understood" (Canda, 2001, p. 114, see also Canda, 1997). For additional definitions of these terms see, for example,

Bullis, 1996; Canda, 1988; Elkins, 1995; Graham, et al., 1998; Joseph, 1987; Sheridan, et al., 1992; Underhill, 1999.

In relation to transpersonal social work, Reese (2001) explains to us that this approach to social work: “encompasses spirituality as a universal aspect of human development” (p. 136) and Leight (2001) described integrating: “a transpersonal model into clinical social work practice as a logical extension of the profession’s inclusive perspective” (p. 64). I have described transpersonal social work as involving: “a theoretically and clinically integrated and coherent approach to practice that allows us to view, through our theory, the spiritual and religious dimensions of the individual’s we work with; and which allows us, through our clinical interventions, to fully engage, for the spiritually-sensitive patient, their potential array of spiritual and religious resources whose influence may be contributing to and/or offering additional avenues for healing. A transpersonal model of social work incorporates the individual’s religious beliefs as well as the reality of spiritual phenomenon” (Gabriela, 2007).

### **These Twelve Resources as Pathways to Spiritual Development:**

These twelve resources, when viewed as pathways to spiritual development, may emerge subdued or robustly; and they may emerge at various times in the individual’s life; although not necessarily occurring in any traditional or particularly sequential developmental order. Recall how Canda, in speaking of spiritual development over the life span stated that: “...the developmental path is not standardized; it is distinctive to each person” (Canda, 2001, p.128). Wilber stated it this way: “one’s *overall* development (or self-development) follows no set pattern, no fixed stages, no rigid sequence.....each individual will follow his or her own unique unfolding” (Wilber, 1998, p.183). These same resources, when viewed as components of

spiritual development, may emerge singularly or in complimentary combinations throughout the individual's life and each may, in their own way, contribute (via sustained utilization) to one's on-going faith development.

### **Resources Emerging As A Single Dimension of Religion or Spirituality:**

When emerging as single dimensions of an individual's spirituality, they possess an inherent capacity to develop and function independently from each other; in other words, emerging as differentiated, even isolated components of one's overall journey of spiritual development. Recall how Carson (1989), in discussing spiritual development, emphasized the capacity for independent spiritual development in the psycho-social-spiritual paradigm and Reese (2001), while defining spirituality as "a two dimensional construct", explained how both "dimensions influence each other, but are *distinct*" (p. 138, emphasis added). Wilber (1998), in his discussion of different developmental lines, explained that they: "develop relatively independently" (p. 183). An example of how these twelve resources may emerge as single dimensions of an individual's spirituality would be those individuals who, for example, have committed to and sustained a daily devotional time wherein they read their sacred writings (Resource #5), such as the Bible, the Qur'an, the Tanakh (the Jewish Bible), the Vedas (primary texts of Hinduism), or the Gnostic texts of mystical wisdom, yet, over the years, have not integrated other resources into their spiritual quest, for example, they have not connected with others of similar beliefs in any form of collective worship or fellowshiping (Resource #2) nor have they, for example, utilized meditation, chanting, or prayers (Resource #11) as a means of communicating to the transcendent. These individuals, having obtained from their holy texts, through their sustained effort, a higher degree of knowledge, may have, nevertheless, reached the

limit of what Resource #1, in a singular way, has to offer them in relation to on-going spiritual development.

Another example of how these resources may emerge as a single dimension of an individual's spiritual/religious practice may be observed in those individuals who have developed strong interpersonal connections with others of their faith (Resource #2) as evidenced by consistent and punctual attendance at religious services, social events, auxiliary meetings, temple or synagogue attendance, and/or church-related fundraisers, yet, have not sufficiently embraced the core beliefs (Resource #1) of their religion or connected in a genuine way with who or what they worship (Resource #3) to the extent necessary to promote genuine spiritual development. These are they who, when their social (fellowshipping) attachment is wounded, and without a strong doctrinal belief attachment (Resource #1) or a commitment to a historic, contemporary, or transcendent spiritual authority figure (Resource #3), may find themselves adrift regarding their spiritual focus. These examples have briefly illustrated how an individual's spiritual/religious resources possess an innate capacity to develop and function independently from each other; emerging, for some, as differentiated, even isolated components of their spiritual/religious practice.

### **Resources Emerging In Complimentary Combinations:**

It is further proposed that these same resources, as they individually unfold, also possess an innate propensity to progressively merge, through sustained effort, into interconnected relationships with each other; synergistically coalescing, engaging, interacting, and integrating into complementary combinations; therein serving to amplify, co-regulate, and mutually influence one another in the individual's progressive journey toward spiritual wholeness.



Neuroscientist and psychiatrist Daniel Siegel (1999, 2003, 2010) has described the concept of movement toward wholeness (integration) as a basic law of neuroscience. Speaking from a neurobiological perspective, he explained that differentiation may be viewed as: “the specialization of function of component parts” (as described above, the capacity of spiritual/religious resources to emerge as single, independent aspects of spiritual development) and integration as “the bringing of these parts together into a functional whole” (for example, spiritual/religious resources connecting with each other in the process of spiritual development) (2003, p. 5). Recall how Freeman (2001) described spiritual development “as encompassing a universal search for a state of wholeness or completeness” (p.96) and further explaining how “Wholeness dictates an integration of transpersonal energies...” (Ibid., 97). Siegel (2010) in offering connections between neuroscience and complexity theory explains that: “...complexity theory suggests that the self-organization of a dynamic system moves toward increased complexity by *linking its differentiated elements to one another*” (p. 134; emphasis added). It is proposed that this same principle is operant as a component of spiritual development as the individual’s spiritual/religious resources progressively and synergistically interact, coalesce, and merge, through focused effort and devotion, into complementary combinations in the individual’s path toward spiritual wholeness.

Within the transpersonal literature this dynamic process (of differentiation and integration) has been repeatedly described in relation to spiritual development by an abundance of transpersonal authors as they each explain, in their own way, movement of levels, parts, stages, phases, etc., into more consolidated and/or higher functioning wholes. Wilber (1979), in speaking of developmental movement, observed how: “the whole of any level becomes a part of

the whole of the next level” (Ibid., p. 2); describing these interconnected relationships as “holons”; that is, a “whole that is part of other wholes” (Wilber 2006, p. 34). Recall how psychologist Arthur Koestler (1967) also discussed the concept of “holons” (p.48); describing the individual as: “striving toward a state of complete integration” (Ibid, p. 68). Capra (1983), in speaking of this concept, explained that: “all individuality dissolves into universal, undifferentiated oneness” (p. 371) and Fowler, in *Stages of Faith* (1981), envisioned individuals joining with other individuals and with a shared center of value to form a “covenantal triad” (p.17). Peck (1978), in *The Road Less Traveled*, described: “a journey out of the microcosm into an ever greater macrocosm” (p.193) and Vaughn (1980) discussed: “transcending the condition of separateness and isolation in recognition of the *interrelated unity* of existence” (p.16; emphasis added). Recall how Jewish author Lawrence Kushner in his book, *Invisible Lines of Connection: Sacred Stories of the Ordinary* (2004), spoke of this interrelated unity when he said: “everything is connected to everything else through invisible lines of communication” (Ibid, p. 16). Derezotes (2001), in applying Wilber’s (1986) transpersonal theory and Berne’s (1961) transactional analysis to work with couples, explained that: “healing is wholing, i.e., to have all of one’s parts” (p. 168). From this view described above, movement along developmental lines wherein one stage of spiritual development builds upon others may also be observed in the work of many additional transpersonal authors (Jung, 1954; Maslow, 1962; Ellison, 1983; Farran et al., 1989; Canda, 1990, 1997; Kilpatrick and Holland, 1990; Sermabeikian, 1994; Vaughan, 1995; Robbins, Chatterjee, & Canda, 1998; Canda and Furman, 1999; and Ellor, Netting, & Thibault, 1999; Marion, 2000; Wilber, 1979, 2006).

In the course of my own journeys, I have come to understand the dynamic process of differentiation and integration as an immutable temporal and spiritual principle and have elsewhere described it as movement toward: “‘At-one-ness’ [ or at-one-ment]... the natural movement toward a state of unification ... it may be observed in all living things and at all levels of their creation; it is the natural tendency for all living things, once differentiated, to seek affinity with something outside of, beyond, or greater than themselves” (Gabriela, 2003, p.23). Wherefore, these twelve resources, as herein described, similarly possess an innate propensity to progressively merge; evolving into interconnected and complementary relationships with each other in the individual’s progressive journey toward spiritual wholeness.

This process of innate movement toward differentiation and integration has been equally observed (beyond the transpersonal literature) by researchers from a variety of seemingly unrelated disciplines as diverse as physics, neuroscience, biology, psychiatry, and even the marital arts (see Yawkey, et al., 1988; Wilson, 1989; Klein, 1990; Weinberg, 1993; Coveney and Highfield, 1995; Ogawa, et al., 1997; Siegel, 1999; Jeffrey, et al., 2000; Colwell and Eisenstein, 2001; Davies, 2005). Recall how biologist, Edward O. Wilson (1998), in his book, *Consilience*, espoused that all knowledge (as diverse as astronomy, geology, evolutionary biology, anthropology, physics, social science, and the arts) is, through a number of natural laws, intrinsically unified; describing this unity as *consilience*. Physicist Paul Davies (2005) states it this way: “The universe is, in reality, an interconnected whole” (p.157); further describing this as a process that exists: “from the deepest recesses of the atom to the most distant galaxies” (p.194). Morihei Ueshiba, founder of Aikido, a Chinese martial art, explains that “aiki is *the universal principle that brings all things together*, it is the optimal process of unification and

harmonization that operates in all realms, from the vastness of space to the tiniest atoms” (as quoted in Stevens, 2002, p. 14, emphasis added). In describing ‘Quantum-Integral Medicine’ Michael Wayne, Ph.D. states that: “The integral view states that all perspectives interrelate and emanate from a spiritual source” (Wayne, 2007, p. 10).

Physicist Henri Bortoft, who conducted research on wholeness in quantum physics, stated it this way: “the whole comes into presence within its parts...[therefore]...if the whole presences within its parts, then a part is a place for the presencing of the whole” (Bortoft, 1998, p. 285). In *Presence* (2006), Senge, Scharmer, Jaworski, & Flowers, while directing their thoughts to leaders in business, education, and government similarly discuss the dynamic interrelatedness of parts and wholes, explaining how they may emerge within the human community of organizations. They state that: “A part, in turn, was a manifestation of the whole, rather than just a component of it.....The whole exists through continually manifesting in the parts, and the parts exist as embodiments of the whole” (Ibid., p. 6).

From this discussion we may observe how transpersonal author’s descriptions of movement toward wholeness and unity links to similar observations made within neuroscience, developmental psychology, biology, quantum physics, and other diverse disciplines. As I pondered the similarities in what these scientists were observing, I thought, why not substitute the word ‘Divine’ for the word ‘whole’ and substitute the word ‘creations’ for the word ‘parts’ as quoted above by both physicist Henri Bortoft (1998) in his discussion of wholeness within quantum physics as well as the same word substitutions in the quote by Senge, Scharmer, Jaworski, & Flowers (2006) in their discussion of complexity theory and the human community

of organizations. From this application, the following translation emerged which, among other things, may serve as yet another example of this interdisciplinary linkage:

The Divine comes into presence within Its creations...[therefore] ...if the Divine presences within Its creations, then a creation is a place for the presencing of the Divine and a creation, in turn, was a manifestation of the Divine, rather than just a component of it.....the Divine exists through continually manifesting in the creations, and the creations exist as embodiments of the Divine.<sup>iii</sup>

### **Spiritual/Religious Resources Emerging Within the Bio-Psycho-Social Dimensions:**

As you consider these convergent views from seemingly diverse disciplines, and as we shift our discussion to the integration of an individual's spiritual/religious resources with their biopsychosocial dimensions, I would invite you to consider how Besthorn (2001), in commenting on Schriver's (1998) work, cautioned that our profession has: "too often limited the integration of knowledge for conceptual development to the narrow confines of traditional sociological and behavioral scientific theory. In doing so the profession has failed to appreciate and utilize the full range of epistemological innovation that has occurred in the arts, humanities, philosophy, critical theory, and ecological/systems perspectives—to name but a few" (Besthorn, 2001, p. 24). Besthorn then quotes Schriver (1998) who further counsels us that we have: "cheated ourselves out of some of the most current, exciting, and challenging streams of thought...denying the people with and for whom we work important new avenues for defining, pursuing, and resolving many of the problems with which we must deal" (Schriver, 1998, p. xiii, as quoted in Besthorn, 2001, p. 24, emphasis added).

We live in a time that offers great potential for advancement in the art and science of healing through the continued discovery (differentiation) of new knowledge across multiple

domains of knowing. We live in a time of great potential for the integration of emergent discoveries between science with science, religion with religion, and science and religion with each other and with the arts and humanities. This is a time that offers the potential for the selective and purposeful ‘unity of knowledge’ in a peaceful, harmonious, and global way between individuals, societies, cultures, religions, and countries; even between all dimensions of experience; between both the seen and the unseen. This is indeed a time that presents with the legitimate, practical, and enlightened application of this unity of knowledge to the reality of human needs, to the reality of human suffering, and to the reality of the profound potential for human growth and transcendence. Recall how his Holiness the 14 Dalai Lama stated it this way: “Science and Buddhism are very similar because they are exploring the nature of reality and both have the goal of lessening the suffering of mankind” (2003, p. D4). Gandhi, in speaking similarly as the Dalai Lama but regarding religion stated: “Religions are different roads converging upon the same point. What does it matter that we take different roads as long as we reach the same goal” (as quoted in Peck, 1998, p. 155). Pope John Paul II stated in this way: “Science can purify religion from error and superstition. Religion can purify science from idolatry and false absolutes”. Leight (2001) along with Vaughan (1979) address the practical application of weaving religious views with the biopsychosocial when they remind us that: “The therapist is not required to agree with any particular belief system or validate any particular experience but rather does well to incorporate the transpersonal content into “the full spectrum of the client’s life experience” (Vaughan, 1979, p. 105)”. (as quoted in Leight, 2001, p.72).

The ability to remain flexible in the face of, adapt to, and then acquire stability in the presence of changing events, predictable or unpredictable, is an on-going process for all living

things at all levels of their creation and within all phases of their developmental experience; and this from biochemical, cellular, and interstellar levels to neuroanatomical, intrapsychic, and interpersonal levels. This on-going and dynamic process, for all living things, reveals an innate array of biopsychosocialspiritual resources as well as those acquired secondary to on-going experience. Wherefore, and in relation to my present topic, it is proposed that these twelve spiritual and religious resources, as they continue to develop individually and merge into interconnected relationships with each other within the practitioners life, may be inhibited or further fueled by the simultaneous mutual influence of the individual's other (biopsychosocial) dimensions of experience. This is so simply because all dimensions of experience are, from the very beginning, inextricably interconnected and this, despite my earlier observation of the capacity for independent development of the identified continuum of spiritual/religious resources.

Consider what other transpersonal writers have discussed regarding the relationship between an individual's spirituality and their biopsychosocial dimensions of experience. Recall how Ellison (1983) described this relationship as the intersection between the vertical (transpersonal) dimension with that of the horizontal (biopsychosocial) dimension; explaining the latter as the experience of being in relationship with one's self and others. Siporin (1985) described this intersecting process as the "union" of the two dimensions (p. 85) while Koestler (1967), Wilber (1979), Vaughn (1980), and Reese (2001) emphasized the interrelated and mutually influencing aspects of these dimensions. Carroll (2001) stated it very clearly when she explained how spiritual growth is "inextricably linked to growth in the bio-psycho-social dimensions" (Ibid., p.15) and offered us a way to theoretically view: "the boundaries of their

interconnection” by diagramming her “Spirituality: A Wholistic Model” (Ibid., p. 17). This, she explained: “provides a way to see the relationship between the transpersonal dimension and the bio-psycho-social dimensions” (Ibid., p. 17).

Leight (2001) offers us a clinical/practice view of this relationship when she describes how a transpersonal approach to psychotherapy: “is an inclusive, holistic model of practice that enables the social work practitioner to provide clients a bio-psycho-social-spiritual framework for personal empowerment, development, and growth” (p.66). Recall how Vaughn (1995) proposed that healing in psychotherapy occurs when “all” levels of the individual’s biopsychosocialspiritual dimensions of experience (physical, emotional, mental, existential, and spiritual) have attained “well-being” (Ibid., p.21, emphasis added; see also Cowley, 1993). Derezotes (2001) explained that: “Spirituality does not replace the other dimensions” but that the physical, emotional, cognitive, social, and spiritual dimensions are “interrelated” (Ibid., p.169). Future research will continue to illuminate the clinical utility of an approach to treatment that recognizes the inseparability and mutual influence of all dimensions of experience; and from this, the recognition and ability to utilize multiple pathways for healing. Understanding how all dimensions of experience are all part of the same reality, and understanding how they converge to reveal new, emergent properties, will deepen our understanding of both the human experience and the mutative elements of the healing process.

### **Ascension To A Higher Level of Spiritual Sophistication:**

These twelve resources are further viewed as developmental inasmuch as the innate, integrative potential that they each possess, when operationalized, for example, in a complementary dyad, have the potential to then collectively evolve; ascending the individual to a



higher level of spiritual sophistication. Convergence of the identified spiritual/religious resources in an individual's life enables, through mutual influence, those resources to, in turn, have a greater capacity to influence the individual toward the transcendent than any individual resource did singularly. It is proposed then that the collective whole that may emerge from the progressive convergence of two or more of these twelve resources with each other has the potential to become synergistically greater than the sum of its' component parts in its mutative influence on spiritual and religious development. This principle has been observed throughout history in an ever increasing spectrum of sciences (for example, in biology, S. Alters, 2005; in political economy, A. Smith, 1776, 1991; in mathematical biology, A. Turing, 1936, 1952; in complexity theory, Coveney, P. & Highfield, R., 1995; S. Johnson, 2002). Lewes stated it this way: "The emergent is unlike its components insofar as these are incommensurable, and it cannot be reduced to their sum or their difference" (Lewes 1875, p. 412).

In relation to the whole of separate, yet, convergent parts emerging in a greater way than any of the individual parts, I have previously written: "I believe that this same principle is operational when it comes to understanding how the emergence of the mind is related to, but does not mirror nor singularly emerge from neurofiring within the brain. We are so much more than the psychological constructs developed to explain our mind; we are so much more than the neurobiologic chemical and electrical activities of our brain; and we are so much more than the mutually influencing interpersonal connections we form throughout our lives; we are none of these things singularly and we are far much more than the sum of their parts" (Gabriela, 2007, p.8; 2003, p. 23).

In relation to the process of ascension to a higher level of spiritual sophistication, and as I have intimated above, in most cases, sustained effort is required and, as Besthorn reminds us: “involves rigorous practice to realize this transpersonal level” (Ibid., 35). As I have previously written: “For most though, it is not a single transpersonal experience that effectuates spiritual growth of the type I have described above; for most it is a process. This process is a gradual one that generally involves an expansion and convergence in spiritual/religious resources. Such convergence expands the individual’s capacity for increased *spiritual awareness*, from which emerges increased *spiritual consciousness*, with continued increases in *type* and *experience* of *transpersonal energies*, with necessary time for the progressive *integration of the reality* of those *transpersonal energies* into the routine of one’s daily life, with the concomitant development of a *spiritual narrative* that makes sense of or gives meaning to the experienced reality of transpersonal energies, along with sustained expansion of one’s *spiritual narrative* via greater utilization of twelve spiritual/religious resources, and the continued and necessary grounding of spiritual narratives into one’s ‘here-and-now’ autobiographic awareness (i.e., with other biopsychosocial dimensions of experience) and, with sustained effort, culminating in increased illumination of awareness of a progressive ascension into a *transpersonal self* (or selfhood)” (Gabriela, 2003, p.53).

Connecting this path of spiritual development with neuroscience, recall that Siegel (2003) has stated: “Experience activates specific neuronal connections and allows for the creation of new synapses and the strengthening of existing ones” (Ibid., p.11; see also Le Doux, 2002). To which I have previously responded: “Transpersonal experiences, I would propose, have the inherent and unparalleled capacity to profoundly affect every fiber of the human psyche; from

individual neurons, their various and specific neuronal circuitry, the mental representations, belief systems, and cognitive processes that both rise from and, in turn, continually influence those associated neurobiological processes as well as all levels of interpersonal relationships; including one's capacity for interpersonal connectedness. This capacity for interpersonal relationships then, having been transpersonally influenced, begins to further modulate the continued flow of energy and information through the various neural networks, which were, themselves, first influenced by the transpersonal experience" (Gabriela, 2003 p. 52).

Recall how Coveney and Highfield (1995), in like manner, discussed complex system science (complexity theory), introducing to us: "a new way of thinking about the collective behavior of many basic but interacting units, be they atoms, molecules, neurons, or bits within a computer" (Ibid., p.7). They discussed how these 'interacting units': "...are endowed with the potential to evolve in time" [as]...coherent collective phenomena" [with] ...emergent properties that can be described only at *higher levels* than those of the individual units" (Ibid., p.7, emphasis added). In other words, through the lens of complexity theory, the authors are introducing us to: "the possibility of fundamentally new phenomena arising from...collective interactions" (Ibid., p. 151). Wherefore, it may be proposed that in addition to these twelve resources possessing the potential to merge together and collectively evolve in their capacity to more substantially influence the individual toward the transcendent than any single resource; as a gateway to spiritual development, they may also be viewed to possess an interdisciplinary straddling potential to the extent that, as herein described, they incorporate and link to similar observations of development that are observed and described in seemingly unrelated and varied sciences including complexity theory. From such a lens we may once again observe, if only for

a glimpse, the 'consilience' or "unity of knowledge" that Wilson (1989) described and, beyond that, through a transcendent view of this same phenomenon, come to understand: "important new avenues for defining, pursuing, and resolving many of the problems with which we must deal" (Schrive,1998, p. xiii).

### **Conclusion:**

I have introduced a developmental continuum of twelve spiritual/religious resources that may characterize a patient's transpersonal dimension of experience. It has been proposed that an individual's spiritual, mystical, and religious resources may: (a) exist in and/or move from a singular (or independent/differentiated) state; to (b) a state of complimentary integration wherein they may intersect (connect with) and mutually influence each other as well as (c) intersect with and mutually influence the individual's other (biopsychosocial) dimensions of experience; while also possessing the capacity to (d) progressively evolve with a greater capacity to influence spiritual development than the sum of any of their component parts. It has been further proposed that these twelve resources may be selectively incorporated into a multidimensional approach to psychotherapy as well as into most treatment models and that by doing so, will serve to mediate suffering and facilitate healing and resiliency in the spiritually-sensitive client.

It is my hope that this continuum of *spiritual, religious, and mystical* resources will continue to increase in its' capacity to inspire practitioners, scholars, and researchers---those with or without acknowledged spiritual, religious, or mystical beliefs---to further explore innumerable inter-disciplinary crossroads wherein the spiritual/transcendent dimension of human experience intersects with, emerges from, or is reflected within the neurobiologic/physical, intrapsychic, and

relational dimensions of human experience; and in so doing, bring to light new pathways for healing. ----Davina Gabriela

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<sup>i</sup> For example, in relation to using these 12 resources in trauma-related therapy, I have previously written: “Consequently, for the patient with pre-trauma religious and spiritual sensibilities, the utilization of these resources throughout the therapeutic process and particularly in relation to the resolution of involuntary ‘flashbacks’ as well as in the co-construction of a spiritually-sensitive post-trauma narrative, represent pivotal and crucial aspects related to the goal of reintegration of the traumatic experience into the patient’s autobiographic awareness; which is understood to include the transpersonal aspects of the narrative of their life story” (Gabriela, 2003, p.27).

<sup>ii</sup> As Siegel (2010) states: “Whatever the individual approach or clinical technique employed, the therapeutic relationship is one of the most powerful determinants of positive outcome in a range of studies of psychotherapy (see Norcross, Beutler, & Levant, 2005)” (Ibid., XI).

<sup>iii</sup> For biblical reference see, for example, the King James Bible, John 14:11; 14:20; 15:4; 15:5.