# **Intuition: The Bay Leaf of the Therapeutic Stew**

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### **Abstract**

Definitions of intuition are explored and compared with various spiritual understandings. An attempt is made at integration, drawing from Wilbur's integral spirituality, certain Abrahamic mystics, and Baylor's U-shaped model of intuition. Potential risks of relying on intuition are discussed, and ways of testing it are explored, including the process of differentiating it from impulses. Specific clinical examples are given to illustrate this work. Suggestions are given to assist clinicians and clients to more readily acknowledge and utilize intuition. This allows intuition, like the flavor of the bay leaf, to permeate their lives and move them a little closer to their own dreams and preferences. The goal of integrating spiritual experiences into the secular setting of the consulting room is achieved.

### **Biography**

Gregory L. Nooney received his Master's Degree in Social Work from Loyola University in Chicago Illinois and, in addition to his 24 years experience in clinical practice, is also the director of Burgess Mental Health at Burgess Health Center in Onawa, Iowa. As a licensed Independent Social Worker in Iowa Nooney also serves as an adjunct instructor at the University of Iowa School of Social Work. As a facilitator of numerous workshops his article "Spirit Bridge" was published in The Spirituality and Social Work Forum (Winter 2004).

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Utilizing Intuition in Social Work Practice

Spence (2007) stated: ...over many thousands of clinical contacts some vividly stand out where clinical intuition saved the day. . . . These odd experiences are shared by many of

us but are spoken of only in hushed voices, for fear of being overheard (p. 1158).

This paper will contribute to eliminating the need for such hushed voices. One criticism of having social work practitioners focus on intuition is that such work has not been deemed to be evidence-based practice (EBP). Hall (2008) argued that societal perceptions of social work as a "semi-profession" cannot be challenged effectively by relying on a generalist approach that draws on system's theory. He maintains that the "more exact technology" of Evidence-Based Practice (EBP) is essential to solidify social work as a respected profession. I do not argue that the use of intuition by social workers as explored in this paper is EBP. I would maintain, however, that the social worker's primary task is not to enhance the reputation of its profession, but to provide the best care possible to the client.

One problem I have with confining social work practice to those interventions that have been determined to be evidence-based is the limitations of scientific research to quantify many clinical practices. Hall (2008) argued that an evidence-based practice intervention would be the most effective intervention due to the rigorous application of scientific research involved. To wait for laboratory evidence, however, would be to refrain from many practices including the process of deciding what to be curious about in a conversation with a client, what questions to ask, and how to best intervene with this particular client on this particular day, with specific issues that have never been addressed in the laboratory. To restrict one's practices to only those deemed to be EBP would be to paralyze one's ability to intervene at the moment. Rather, clinical practice ought to inform research as to those interventions, already implemented, which show

the most promise. Even so, some of those successful practices will never be reproduced in the laboratory under double blind conditions due to ethical concerns or that such reproduction is simply impractical. This does not preclude, however, the practitioner consulting frequently and extensively with the client as to the effect of such practices so that adjustments can be made in the moment.

Gigerenzer (2007) pointed out that in the case of uncertain environments, optimal strategies are in fact impossible to accurately ascertain through the use of reason no matter how much information and data one has at one's disposal. In order to intuit a strategy that is likely to be a good one to fit the situation, some of the information we do have must be ignored and "rules of thumb" must be used (pp. 81-92). Some of these rules of thumb or heuristics are innate; some are learned at a young age, and some are acquired and developed from an extensive set of experiences and knowledge. Client-practitioner interactions certainly qualify as uncertain environments, as the pool of possible questions to ask a client at a given moment is probably close to infinite. Even if one has prescribed to a particular EBP, such as a certain form of cognitive therapy, the possible ways that one can respond to a particular clinical situation is still very large. Intuition must be used in order to make such decisions in the moment.

I would further argue that insistence on EBP as the only form of practice can pose ethical problems. Citizens for Responsibility and Ethics in Washington (2008) reported that a memo was sent by psychologist Norma Perez, coordinator of the Posttraumatic Stress Disorder program at the Olin E. Teague Veterans' Center in Temple, Texas to a number of VA employees, including psychologists, social workers, and a psychiatrist. This memo was widely criticized due to her suggestion that Post Traumatic Stress Disorder be diagnosed sparingly for Vietnam veterans. What was less widely reported was that she also eliminated about a dozen long-term Post-traumatic Stress Disorder groups involving approximately 40 veterans. She argued that the evidence does not support the idea that such long term groups are effective in successfully treating Posttraumatic Stress Disorder, but that short term (three month or less) groups

utilizing cognitive therapy and focusing on skill development were more effective. I would maintain that ethically one ought to consult with the veterans in those groups as to whether those groups are helping them in their day-to-day lives, rather than relying solely on limited research to determine treatment options.

Social work practitioners of course do not have to rely on an either-or way of looking at this problem. It is certainly possible to be informed clinically by both the established research and the input of those involved in receiving the mental health services. However, this example shows how an emphasis on EBP can easily be used to justify practices designed to reduce or eliminate needed services.

There are other possible risks involved in the therapeutic utilization of practices based on intuition as it could be used as a justification for unethical or irresponsible practice. Cable Network News (CNN) reported a 2006 interview with Larry King where George W. Bush stated, "If you make decisions based upon what you believe in your heart of hearts, you stay resolved. And what we're doing is hard. But what we're doing is going to make this country more secure. And what we're doing is going to lay that foundation for peace." This was part of his justification for the invasion of Iraq. This appears to be an example of how intuition can be used to justify actions that are less easily justified by reason. Similarly the social work practitioner could say, "I did it because I felt it was right," or "I had a very strong feeling that the client needed to hear what I had to say." In my view, intuition never justifies going against our NASW Code of Ethics, or engaging in dangerous or risky practices that cannot be additionally justified through the use of reason.

### What is Intuition?

Gladwell (2005) explored the ways in which people often make snap judgments in the first two seconds of an experience. He noted that there are times when less information is better than more information because people can be distracted by too much data. Intuition is the ability to ascertain the key slices of information that are the most important in order to make a

decision as to what action to take. People generally do this unconsciously, and may later utilize reason to justify the decision. Gigerenzer (2007) argued that the ability to do this is based on the fund of knowledge and experience that people have accumulated prior to an event. As an example of this, Matzler, Bailom, and Mooradian (2007) pointed out that a grandmaster chess player will decide on the next move within a few seconds and then spend the rest of the allotted time thinking about the move and deciding whether it is in fact the best move. "The more extensive a decision maker's experience, the more patterns he or she will be familiar with; the more patterns, the better the intuition" (p. 14).

In summary, intuition is defined as a way to access intrinsic knowledge, from a pool of unconscious data, through a process of slicing up data into the most important slivers of information that will allow for quick, accurate guesses about the best decision. Both Gigerenzer (2007) and Gladwell (2005) gave many examples when such processes are more effective in choosing the best strategy than a deliberate, time consuming reasoning process. They also gave examples of situations when that is not the case. Gladwell (2005) reported that "truly successful decision making relies on a balance between deliberate and instinctive thinking" (p.141), or intuition and reasoning.

As a way to further refine this definition for the purposes of this paper, I view intuition as a flavor of consciousness. The other prominent flavor is reason. Rather than seeing intuition as somehow in opposition to reason, this paradigm views intuition as a way of accessing knowledge that is simply different from reason or from the scientific method. On one end of a continuum lies unconsciousness, where we live when we are on automatic pilot. On the other lies consciousness, where both reason and intuition live together. When we are on automatic pilot, our ability to access knowledge is severely limited. When we are conscious, we have the opportunity to access knowledge through reason and we also have the opportunity to access knowledge through intuition. Both intuition and reason share the quality of being tasks of consciousness. This is a "both/and" paradigm rather than an "either/or" one. I also maintain

that intuition can be subjected to testing but not in the same way that scientific facts are subject to testing.

Most social worker practitioners probably use such intuition every day. Baylor (2001) developed a U-shaped model of understanding expertise and intuition. In this model, novices tend to rely on "immature intuition" because they do not have sufficient knowledge and experience to understand and analyze the available data. Intermediate experts with more knowledge and experience tend to abandon intuition and rely on a more analytic strategy. Once they become experts, however, they return to a heavier reliance on intuition as their intrinsic pool is full enough that they can effectively select the most relevant slices of information from the large amount of data present in a complicated environment. Baylor calls this "mature intuition." Gladwell (2005) contends that experts are able much more reliably to rationally explain why they have a particular intuition or why they make particular decisions, whereas non-experts, in whatever the area of interest, are notoriously inaccurate in doing so. It is almost as if they "make up" a rational explanation for their decision, without actually being aware that they are making it up (p.179).

It would seem logical that seasoned therapists who have decades of experience in working with clients should have a richer pool of intrinsic knowledge from which to draw, and would then be more likely to be able to utilize "mature intuition." When criticism is leveled against the use of intuition in social work practice, it would be more useful if the critique were to distinguish between immature intuition and mature intuition, as what is accurate for one may not be so for the other. Unfortunately, some of the pressures of third party payers and an emphasis on Evidence Based Practice may either discourage practitioners from relying on intuition, or may de-emphasize the value of a seasoned therapist in favor of younger therapists who may accept smaller compensation.

## **Testing Intuition**

Intuition is simply another form of information or knowledge. Just as there are times that social workers will question information obtained from other sources (client records are not always accurate, for example), similarly, intuition needs to face the same scrutiny. However, testing intuition poses special difficulties. Any such test or scrutiny will remain subjective, as one cannot know what is going on inside another person. Even that which goes on inside of oneself is subject to various interpretations depending on one's mood or state of mind. Difficulty, however, does not need to mean impossibility. I do believe that it is possible to provide oneself and one's clients with tools to use in testing out whether a particular intuition ought to be followed or not. I will outline a few such guidelines as follows.

First of all, it is advisable to consider the difference between an impulse and an intuition. Impulses come and go and are strongly influenced by various desires and hungers. One sees a chocolate cake and has an impulse to devour it. One sees an attractive woman or man and has a desire to be intimate with that person. One sees a bottle of whiskey or an illicit drug, and has a desire to drink it to get "high." Intuitions, on the other hand are different, and most people have a way to tell the difference by examining the feelings that each elicits. The easiest way to assist clients in making distinctions between impulses and intuitions is to first ask them: "Can you tell the difference?" For those who answer in the affirmative, an exploration of how this is accomplished is valuable in increasing awareness as to how one does distinguish these differences. This skill then becomes invaluable later on as situations come up where consulting one's intuitions becomes desirable or useful.

Secondly, it is often helpful to ask clients to reflect back on other situations in their life when they either did or did not follow their intuition and to remember the results of those decisions. Did things turn out better or worse when they followed their intuition? When they chose to ignore their intuition? These sorts of inquiries will provide a backdrop of historical experience which they can use to instruct themselves in the future.

**Spiritual Concerns** 

The above understandings of intuition are sufficient to provide a basis for the social work practitioner to utilize intuition in practice, especially if the practitioner can claim some likelihood of accessing "mature intuition," as described by Baylor (2001). This paper goes a step further, however, in bringing in a spiritual dimension.

Bengtson and Earnshaw (2007) in discussing Henri Nouwen, who wrote extensively about "the wounded healer" stated: ... Nouwen likens the hub [of the wheel] to his own heart, to the heart of God, and to the heart of the world and reiterates that only by remaining in his own center can he feel communion with the world and find the energy to move out of the center to help others. (p.231).

As social worker practitioners move from their own intuitive centers to help their clients, some will become interested in assisting their clients in finding their own centers, so that they can rely increasingly more on their own intuitive understandings and experiences.

Buck (2002) stated: . . . most of us spend a large part of our daily lives in secular environments where spirituality and religion are expected to remain a private concern. With little emphasis on religious values in our daily experience many have chosen to disregard it altogether. For others it has become a source of feeling alienated and unconnected to community and a larger meaning in life. The current rise of interest in spirituality in our culture is a reflection of that sense of loss (pp. 105-106).

Social work practitioners have been taught to leave spiritual maters to the pastors, ministers, priests, rabbis, caliphs, shaman, and spiritual advisors, and refer their clients to them when necessary. What do practitioners do when their clients are not affiliated with a religious community, or when they have already consulted with such leadership and find it lacking? How do they answer questions such as "If my faith is strong, how can I feel so depressed?" or "I hear

voices and I do not know if they are from God or the devil, or are they simply the voices of Schizophrenia?"

For those practitioners who consider themselves to be deeply religious or spiritual, is there a way to integrate that spirituality with their work without imposing or promoting their own religious or spiritual perspective or beliefs? Is it possible to utilize techniques and modalities that meet the criteria for secularism while actually drawing on deep spiritual understandings from established religious exploration? Linehan (1993) drew heavily on the process of mindfulness (a common Buddhist practice) in the development of her Dialectical Behavior Therapy, widely used in the treatment of persons diagnosed with Borderline Personality Disorder. I propose that it is possible to draw on some of the traditions of the mystics of the Abrahamic religions (Judaism, Christianity, and Islam) in designing modalities that can be useful for clients of any (or no) religious or spiritual tradition, and that one way to do so is to focus on a deeper understanding of intuition.

Buck (2002) described the work of Louis Massignon, a French diplomat, scholar and Christian mystic who died in 1962. For 50 years he studied the life and works of a tenth century Islamic mystic and martyr known as al-Hallaj. Massignon attributed al-Hallaj as a powerful influence in his radical conversion to Christianity and he spent his life searching for ways to unite Christians and Muslims.

Buck (2002) reported that Massignon (1955) was fascinated by al-Hallaj's reference to "le pointe vierge" the virgin point, or as Buck refers to it, "Virgin Heart." Massignon (1955) quoted Hallaj: "You live there, in my heart, where Your secrets reside. You are welcome to live there . . .Because inside my heart nothing is more than You, there I recognize the supreme secret." (as cited in Buck, 2002, p. 97) and again: "When God seizes a heart, He empties it of all that is not Him (Massignon, 1957, as cited by Buck, 2002, p. 100).

Buck (2002) explained further: The ultimate manifestation of Massignon's sacred hospitality is the divine Guest seeking hospitality in the center of every human soul . . . .

Massignon wrote that to recognize the sacredness of life and of every human being, regardless of their differences, means to be capable of recognizing oneself in everyone... (p.207).

The contemporary Christian Trappist monk/mystic Thomas Merton corresponded with Massignon and was influenced by him and his work.

Merton (1968) wrote: The first chirps of the waking day mark the "point vierge" of the dawn under a sky as yet without real light, a moment of awe and inexpressible innocence . . . All wisdom seeks to collect and manifest itself at that blind sweet point . . . . Here is an unspeakable secret; paradise is all around us and we do not understand (pp.131-132).

Again, Merton (1968) wrote: There is no way of telling people that they are all walking around shining like the sun . . . . At the center of our being is a point of nothingness which is untouched by sin and illusion, a point of pure truth, a point or spark which belongs entirely to God . . . this little point. . . is the pure glory of God in us. . . It is like a pure diamond, blazing with the invisible light of heaven. It is in everybody, and if we could see it we would see billions of points of light coming together in the face and blaze of a sun that would make all the darkness and cruelty of life vanish completely . . . (pp. 157-158).

I believe it to be possible to access that sweet point within myself and to help my clients access the same point within them. It is the source point, where life enters, where the breath originates, where I can remember my connection with all that is. It is a place very simple yet very wise within. It is the exact point where the divine and the human meet. At such a virgin point, there is no guilt or fear. It carries a kind of inner knowingness, which is mostly absent of emotion. It is characterized by a gentle pleasantness and clarity. It is peaceful, quiet and unobtrusive, with an absence of drama. Some of the ways it has been described are as follows: gut feeling, inner knowingness, clarity of thought, something I know deep inside, a gift, Christ

within, Buddha nature. To the extent that I can connect to that point, I transform both the subconscious and the conscious. I move to a place beyond both but without losing either. I am more conscious than I was before that connection. Even small successes in this regard propel one into the spiritual realm.

Spiritual Intuition: An Integration

As described above, Baylor (2001) developed a U-shaped model that illustrated how the novice utilizes "immature intuition" because he or she has little intrinsic knowledge from which to draw. The intermediate expert abandons intuition as he or she is immersed in and at times distracted by rational thought. The expert returns to intuition, but it is quite different from the immature intuition of the novice. It brings together a rich source of data and organizes those data in a more creative and accurate way. Having done so, the expert is then able to draw on rational analysis to explain what he or she did and why.

Baylor's model in many ways mirrors Wilber's (2000, p. 103) understanding of the spiritual growth process as going from subconscious (pre-rational) to self-conscious (rational) and finally to superconscious (trans-rational). In Wilbur's system, each step includes the previous steps, so the rational step continues to incorporate subconscious elements as he or she uses more analytical reasoning. Finally, the trans-rational step will incorporate both the preconscious and the conscious as he or she develops a spiritual life that is richer and more encompassing. This appears to be similar to the process of going from novice (pre-rational) to intermediate expert (rational) and finally to expert (trans-rational).

According to Baylor's (2005) model, immature intuition used by the beginner is quite different than the mature intuition used by the expert. In Wilbur's (2000) model pre-rational is also very different than trans-rational. He also pointed out that since pre-rational and trans-rational are both non-rational, they are easily confused. He called this the "pre/trans fallacy" and argued that this results in a "narcissistic immersion taking the place of the demanding process of genuine growth and transformation" (p. 103). He noted that the therapeutic process

usually involves a regression from the rational to the pre-rational, at least for a time, in order to re-work some traumatic experiences. Once that is accomplished, however, the way is paved for a movement toward the trans-rational. He also warned that it is easy to get stuck in the pre-rational and to elevate it to a trans-rational status. (p. 104).

For the social work practitioner to learn to access "le pointe vierge" within themselves, "mature intuition" can be experienced as "trans-rational," thus bringing together Baylor (2005) and Wilbur (2000). These understandings present a major challenge for practitioners who may wish to share these methods with their clients. If successful, such a methodology would open the door for an emergence of the spiritual experience into the secular environment.

# **Assisting Clients**

I have identified a number of steps that I have found useful in assisting clients to identify and utilize intuition in their daily life and specifically in dealing with complicated problems and struggles:

- 1. Identify a moment of clarity
- 2. Negotiate terms/language
- 3. Making distinctions, especially between intuition and impulse
- 4. Inner work
- 5. Follow-up: test in real world

As I am listening to the client tell their story I listen intently for "moments of clarity," when the client states something strongly and confidently. I worked with Bill, a single male in his 40's who was diagnosed with Schizoaffective Disorder around the age of 30. He is on Social Security Disability and struggles with depression as well as perceptual distortions. He is also a recovering alcoholic and a member of Alcoholics Anonymous. He also struggles regularly with familial conflicts where he ends up in the middle of struggles between his parents or his mother and siblings. At one point in our conversation when discussing a particular request of his sister he said, "I really do not want to get involved in moving that piece of equipment for my sister."

I noticed that when he said that his face brightened and he seemed to be strong and clear, so I asked him about that. Was he aware of how it felt inside when he made that statement? He said it was a "free feeling." This encompasses step number two: "Negotiate terms/language." So we use the term "free feeling" until and when we discover a better term for intuition. I ask him what might happen if he were to honor that "free feeling" and he replies: "I would like that much better and I would be happier and feel freer."

He told me that in Alcohol Anonymous someone he respected told him: "Don't ever cut off from your family because you will regret it the rest of your life." He then started to feel guilty when he thought of saying no or pulling back from his sister or mother. He told me how he often gets confused because different people give him different advice. We have now completed number three: "Making distinctions" as he is very clear about the differences between the confusion and uncertainty he feels when trying to please the people who advise him and the feeling he has when he allows himself to feel the "free feeling."

As we talked, he made it clear that he would like to make that "free feeling" stronger and more frequent. I then asked him if he had any ideas about how to strengthen his connection with his "free feeling." He told me how it is so easy to get distracted from it due to all the pressures he feels from people in his family. I then invited him to participate in a little exercise to explore this and he indicated he would be willing.

I then walked him through an internal imaging exercise, which constitutes number four: "Inner Work" in which he was able in a very powerful way to go into a deep relaxed free place within himself and consult with that "free feeling" as to how to proceed with this particular problem. He concluded that he would tell her that he couldn't do the task.

This leads us to the fifth step: "Test in real world." In our next session two weeks later he reported that he informed his sister and eventually his mother (who was involved in this conflict as well) that he decided not to move the equipment. His mother called back a few days later to tell Bill that she had dislocated her shoulder doing a task related to this. Bill noted that he

initially felt guilty, but told himself that it wasn't his responsibility, and was able to let go of the guilt. A short time after these conversations his sister and mother found another method of getting the task done.

Since doing this work with Bill, as future conflicts, problems, or choices come up in our sessions, it will be easy to refer to the "free feeling" and invite him to consult with it. He is now able to do so very quickly and be very clear about what he needs to do in order to remain healthy and happy.

Another example involved Emily who is in her mid-forties and was diagnosed with Borderline Personality Disorder around the age of thirty. She has been involved in many courses of therapy with many different therapists since then. Her past therapy focused on issues related to experiences of abandonment, getting caught in abusive relationships, marital conflicts and other serious day-to-day problems. However she did not report significant changes in her functioning or quality of life through these interventions.

At the end of our fourth session, she talked about wanting to have a cure, that she was tired of repeating the same old problems over and over again. I was intrigued by this idea and told her that perhaps we could start in a new way in our next session. She came into the next session very upset about her struggle to convince her sister to quit smoking. Remembering our previous conversation and her desire to find a new way, we began with step four: "Inner Work," in which I led her to find an inner place of calm, which she called "Tranquility." In this case, her connection with this inner place served the function of the first step of identifying a moment of clarity and the second step of negotiating terms. From this place of Tranquility she was able to bring in the question of what to do about her desire to convince her sister to stop smoking and the answer she received was that she could not be in charge of her sister's decisions. Once she came to this realization, she was overcome with sadness and grief, as she considered the possible loss of her sister, and the loss of her hopes and dreams of having a better relationship with her, including her memories of challenging times growing up dealing with abuse.

The final step of testing these skills in the real world was more difficult with Emily due to the emotional intensity of many of the dramatic relationships in her life. However, the work we are doing in focusing on intuition has clearly changed the quality of our work. I will continue to consult with Emily as we proceed to see if continuing with this style of work suits her goal of making major changes in her life.

Another effect of this work, as seen in both of these examples, is that it creates a powerful pathway for clients to consult with their own inner selves rather than with the social worker or family or friends about important decisions. This will hopefully result in these clients taking a greater responsibility for their decisions and their lives, and reduce the tendency to view the social work practitioner as having some kind of authority or expertise over their life decisions.

Both Bill and Emily have certainly had many and varied experiences of suffering through dramatic human interactions, and expert status could easily be conveyed to them in this regard. I cannot say with any degree of certainty whether Bill's "free feeling" or Emily's "tranquility" can thus be classified as "mature intuition." I do not know for sure if they were successful in accessing "le pointe vierge," or whether their experiences can be confidently classified as transrational according to Wilber's system. However these experiences were clearly helpful to them, and resulted in some significant positive changes in their lives and in our work together. I did not name the experience as spiritual, nor did they. By the fact that such a naming was not necessary, I believe we were successful in integrating the spiritual into the secular setting of the consulting room.

### Conclusion

In preparing a stew, the bay leaf starts out as a big obvious thing that is a bit obtrusive. Once it has done its thing, one can actually remove it, and the flavor has permeated the entire dish. Similarly, with intuition, since it has lain dormant for so long with most people, it must first be recognized, which may require some spiritual practice such as prayer or meditation, or some sort of internal imaging exercise, in order to find that hub of the wheel, that sweet point

within the heart. When we have had sufficient experience with it, we find that it is able to permeate our lives. The flavor of intuition can then influence all our decisions. Intuition is never absent from our lives, although we can easily choose to dismiss it or ignore it completely. When we are living on autopilot, like unconscious robots, intuition will find it almost impossible to get through. Even though intuition appears without drama, ironically drama will sometimes take us to a place where we are willing to listen to this inner voice. We get so frustrated with the drama that we let go. In that instant, the hub of the wheel opens up, and intuition has a door into our consciousness. That door is the center of our heart and is called "le pointe vierge."

Mahatma Gandhi's grandson Gopalkrishna Gandhi (2008) wrote to his grandfather: Gifted with an ability to test your powerful intuition against the touchstones of love and reason. The test cleared, you turned those intuitions into convictions and, whenever needed, you "walked alone."

Those who decide to pursue some form of work with intuition in their social work practice may have moments when it is necessary to walk alone. More often than not, however, they will be walking more closely with their clients who are the ones who gently lead them away from certainty and the pretense of objectivity toward an awareness of the powerful potentialities that all share as humans on this planet.

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