The integration of diverse perspectives in counselling practice

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Abstract

This article examines interviews with practitioners and teacher-practitioners who draw from diverse traditions in their counselling practice. Interviewees described areas of commonality and areas of dynamic tensions between the traditions applied. The study examines the ways in which they translated meanings from both contexts. Interviewees appeared, at times, to dichotomise aspects of differing traditions, and at other times, to build effective translations. Implications for educators include the need for teaching and supervision approaches that encourage culturally sensitive and coherent translations.

Key Words: Integration, Translation, Diverse Traditions, Counselling

Introduction

This article examines the themes and questions that emerge from interviews with counselling practitioners who draw from diverse theoretical frameworks. It focuses on how practitioners talk about the integration of conventional counselling practices and approaches that may be broadly described as complementary (such as yoga, meditation, and acupuncture).[1] One of the larger questions to be addressed is how does one create coherence between traditions that are built on a number of both contradictory and compatible foundational assumptions. In other words, how do practitioners build effective translations between disparate paradigms when more than one paradigm informs their work?

The research describes practitioners who will work out of multiple contexts. The study takes as one assumption that current models of intervention informing counselling practice are grounded in (although not exclusively limited to) a Western medical model of health. It further assumes that those practitioners integrating complementary approaches are working from a different tradition when these processes are employed, and that a conversation between traditions would allow for a more coherent integration of practices, and open up both traditions to

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[1] As further delineated below, the term complementary does not suggest complete compatibility or commensurability. The term is adopted here as perhaps the most satisfactory description, out of a host of popularly used terms to describe approaches that have been applied in conjunction with Western medicine, and that have grown out of non-industrialised cultures as part of a healing tradition.

constructive questioning. Because complementary approaches are not out of a dominant tradition, it has often led to a kind of "closeting"[2] or semi-secrecy about their use.

The ability to integrate diverse traditions serves a number of ends. Our clients are entering counselling from increasingly diverse traditions. Multicultural counselling theory points to the importance of integrating the elements of these diverse traditional orientations, if the process is to be meaningful for our clients (Appleby, Colon, & Hamilton, 2004; Sue & Sue, 2003).

The process of meaning-making across traditions has implications for the maturation of the counselling profession. Both Perry (1998) and Belenky, Clinchy, Goldberger, and Tarule (1996) describe the maturation of learning as engaged conversations between contexts, conversations that involve both open listening and building of connections. As the counselling profession matures, it will increasingly become a conversation across multiple contexts.

Flores, a practitioner-educator who participated in this study, pointed to a principle she learned from a mentor: "I do what my patients believe in … not necessarily what they ask for." Respect and inclusion of "what patients believe in" is seen as critical for culturally aware practice (Smith, 2004; Sue & Sue, 2003). The present study investigates the importance of a dialogical process, and the process of translation, in order to fully understand "what clients believe in", as well to integrate that understanding in the counselling process.

The initial question, then, is what kinds of conversations lead to productive understanding rather than defensive posturing, aggressions, and retreat? It is suggested here that hermeneutics, as described by Gadamer (1984), offers an applicable model for understanding, enabling a conversation between traditions that arise out of fundamentally different worldviews. Hermeneutics is at the foundation of the qualitative methodology applied in this study. It is also suggested that a translation process, much like the one developed in hermeneutical investigation, could deepen the understanding of diverse traditions applied in practice.

Both Belenky et al. (1996) and Perry (1998) point out that without building connections between diverse contexts, one cannot maintain a fully integrated position from which to take action. Without metabolising differences, one may articulate theories coming out of each context, never comprehending how they may work together.

The current study builds upon the findings from a pilot study that examined the interviews of practitioners who used both complementary and conventional practice. Those pilot interviews focused on the nature of work done, and on the process of communication about the work with colleagues and clients. The practitioners were chosen because of their use of practices that are rooted in what may be broadly described as "wisdom traditions" or esoteric traditions that are

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[2] The descriptor of "closeting" occurred to me as I observed relative dearth of dialogue, as well as the hesitancy of practitioners to discuss these approaches in formal collegial contexts. It was also used by one of the teacher-practitioners in the study, within the context of a lecture on the integration of Buddhist and Western counseling traditions.

focused on the acquisition of a state of wisdom in adulthood[3], as well as their training and experience in conventional Western counselling practices.

The themes generated out of these initial interviews were used to inform the interviewers of the present study, including re-interviews of several pilot study participants, as well as new interviews with teacher-practitioners who use these integrated approaches.[4] For the current study, interviewees were asked to offer their views on the themes generated from the initial pilot interviews. They were also asked to reflect on their understandings of wellness, maturation, and integration.

Literature review

The literature for this study appears to focus on four areas of inquiry. (a) What differentiates the traditions of Western counselling approaches from the traditions of complementary approaches? (b) Is there a broad compatibility between these traditions? (c) What are the incompatibilities between these traditions? And in a related question, are they incommensurable given that these traditions emerge from substantially different paradigms of self and universe? The term "incommensurability" was suggested by Kuhn (1970) when he spoke of a shift in paradigms: "The normal-scientific tradition that emerges from a scientific revolution is not only incompatible but often actually incommensurable with that which has gone before" (p. 103). Bernstein (1983) later suggested that incommensurability is associated with different problems and standards within different paradigmatic contexts. (d) Finally, what is the possibility for dialogue between these traditions?

For the purpose of this study, the literature primarily focuses on how practitioners understand the integrative process, and on the practice implications of their understandings.

Traditions of psychotherapy and complementary practices

When comparing the traditions of psychotherapy and complementary practices, a number of theorists have noted the similar origin of these traditions (Deikman, 1982; Epstein, 1995). For instance, Deikman points out that psychotherapy and the meditative traditions were born out of similar questions around human suffering.

Others have argued that while psychotherapy and wisdom traditions may share fundamental aims and purposes, they also diverge in important ways. Epstein (1995) noted that while both psychotherapy and meditative practices seek to reorient various ego functions "away from attempts at possessions of 'things' and toward the achievement of discriminating awareness", he sees the means toward this end as significantly different for each set of practices. While psychotherapy

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[3] Here, wisdom traditions are seen as traditions that evolved from indigenous, non-industrialised belief systems. They do not include, for instance, body centred approaches that grew out of Western counselling approaches.

[4] Teacher-practitioners is used as the most fitting descriptor of individuals coming out of a broad range of mental health practice, who have developed an educative role for themselves, around the application of diverse traditions in practice.

seeks to free ego functioning by strengthening mature defences, some of the wisdom traditions, such as Buddhism, seek to grow beyond ego concerns.

From a different perspective, Rubin (1998) argues that psychotherapy more fully charts the possibility of "enriched engagement", a kind of "buoyed and passionate involvement" which Buddhism does not. He asserts that one can get beyond narcissism through relationship to others which is informed by awareness and supported by secure ego functioning.

Wellwood (2002) differentiates spiritual practice out of wisdom traditions from psychological practice by noting that spiritual practices tend to focus on an exploration of our "essential natures." Rubin (1999) described this exploration as the experience of "no self centered aspects of our self experiences" (p. 15). Golden (1999) and Walsh (1983) asserted our Western approach to a historical understanding has been conventionally delimited by the attempt to find "acute diagnosis, identifiable causes, and precise remedies" (Golden, p. 28), while many of the wisdom traditions have focused on how an individual changes from moment to moment.

The compatibility of traditions

One of the ways in which both traditions are described as compatible to each other is the similarity of motivation which drives an exploration of both wisdom traditions and psychotherapy (Golmen, 1988; Horney, 1952; Wellwood, 1983). Wellwood focused on the motivational drive away from fragmentation and dispersal, while Horney focused on a drive toward a more "authentic self" and its concomitant condition of "wholeheartedness." Golmen likened this wholeheartedness, which he described as the core of meditative techniques, to the condition described by psychologists as "flow." He described both meditative approaches and work in a "flow state" as potential sources of "an exquisite internal flexibility to adjust to a wide range of demands." Epstein (1995) linked the wholeheartedness of the meditative state and authentic creation with their shared reliance on the process of the sublimation of desire.

Early in the psychoanalytic tradition, Jung also associated the insight of psychotherapy, which allows the conscious sublimation of desire and the relinquishment of the nidana chain (the unnecessary suffering fostered by lust, desire, and passion) in Buddhism (Jaffe, 1998). However, Parsons (2001) has pointed out that Jung, along with other Neo-Freudians, may have engaged in a naïve reading of Buddhism, seeing it as "a culturally variant healing exercise" (p. 233).

Morvay (1999) asserts that Horney may have moved beyond simple assumptions by focusing on the practices that generate receptivity and powers of observation. Rubin (1985) has similarly described meditation as a systematic approach "for cultivating exactly the state of mind that Freud recommended" (p. 602). Epstein (1995) has noted a similar emphasis, in both traditions, on relaxed attention as facilitative of an expanded consciousness, which allows for sublimation.

Walsh (1983) noted that in addition to potentially augmenting therapists' effectiveness, meditation may be "a self-regulation strategy for a variety of disorders" (p. 21). Indeed, Shear (2001) points out that a review of the experimental literature on the effects of meditation reveals that meditation reduces somatic arousal (and that reduction is significantly greater than eyes closed rest).

He also found that the experimental literature points to a "statistically significant effect … of self actualization" among meditators (p. 298).

Kumer and Raj (1999) point out that there are some aspects of one's internal apparatus that are strengthened in meditative traditions, while others are discouraged. They maintain that the development of "budhi" is encouraged in yogic meditation, which functions to refine powers related to decision making and discrimination, while "ahamkara", which functions as a subjective frame of reference for one's experiences, is discouraged.

Wellwood (2002) maintained that before one can become liberated from a deficient ego structure, one must "address the interpersonal dynamics that are embedded in the fabric" (p. 222). Rubin (1998), on the other hand, has suggested that Western psychoanalytic thought offers an "advance" to meditative practice, in that it offers the possibility of the expansion of consciousness in the context of relation rather than in withdrawal from others.

The incompatibility and the incommensurability of the traditions of complementary practice and psychotherapy

Much in the literature which focuses on the differences between the two traditions focuses on the individual's differing relationship to ego identity and unconscious process (Epstein, 1998; Golman, 1988; Wellwood, 1983). At first glance, at least, the Western psychotherapeutic traditions seek to strengthen ego identity while Eastern tradition seeks to move beyond ego identity.

Several authors have pointed to those elements of both traditions that are fundamentally incompatible, most notably Wellwood (2002) and Rubin (1989, 1999). Rubin pointed out that Buddhism, in particular, has an ambivalent relationship to emotional life: "Affective emotions … [such as] greed and hatred are viewed … as defilements [which] establish an aversive relationship to experience" (p. 16). Wellwood noted the ways in which a spiritual way may be used to avoid facing unresolved issues of the conditioned personality (p. 13). Both Wellwood and Rubin addressed psychotherapy's limitations as well. They point to psychotherapy's tendency to reify particular perspectives on development, and indeed to treat "self-examination as the ultimate journey" (Wellwood, p. 13). Walsh and Shapiro (2006) have pointed out that when complementary approaches have been studied by researchers trained in Western psychological traditions, they tend to ignore variables valued by meditative traditions, such as "the cultivation of compassion and wisdom, maturation to post conventional stages, and the attainment of 'enlightenment' or 'liberation'"(p. 234).

Wellwood (1983) suggested that the ground of understanding is so different between these two traditions that when one tradition borrows concepts from the other, they may be applying the concepts in a manner that is quite foreign to the original intention. However, Parsons (2001) argues that we have become more sophisticated and discriminating than the early New-Freudians: "No longer are Buddhist and Hindu categories of self, development, and maturity unreflectively reduced to … psychological categories" (p. 246). If we move beyond reductionist categories, then what is the potential for continued discussion?

The possibility of dialogue between traditions

A number of theorists suggest ways in which each tradition might enrich the other through the questioning which arises through dialogue (Christianson, 1999; Epstein, 1995; Rubin, 1996, 1999; Wellwood, 2002). Rubin (1999) proposes that

Buddhism might suggest to psychoanalysis the ways in which the goal of self-integration may be a limiting self-experience.

Ruben pointed out that psychoanalysis might provide a more global investigation of Buddhism's "unconscious attachment to the project of disengaging from [human misery]" (1988, p. 208). Epstein (1995) looked at the common goal of the examination of emotions and suggests that one process of examination may enrich the other. Nadja (2005) noted that the experience of meditation, for practitioners, enhanced "awareness of their own reactiveness" (p. 333). Christian (1999) and Christianson and Rudnick (1999) present several case examples in which meditative attention enabled them to better respond to counter transference issues as they arose.

Mulvay (1999), Kumer and Raj (1999), Epstein (1995) and Rubin (1996, 1999) suggest that there may be fertile opportunities for dialogue around conceptualisations of the self and ego in meditative traditions and Western psychology. Mulvay points out, for example, "although the representation system of the ego becomes altered through mindfulness, its 'stability' is strengthened and maintained via the 'synthetic' activity within the functional domain. This allows the ego to stand apart from itself and observe" (p. 31). This suggests that meditative traditions have been discriminating about which ego functions become mutable over time and which become strengthened.

Rubin (1999) points out that psychoanalysis "can help the Buddhists detect where they neglect the unconscious and are being self deceptive" (p. 14). However, he also suggests that Buddhism can challenge the view of self (represented in psychoanalysis) that is "excessively self centered and restrictive" (p. 14). Collinge et al. (2005) point out that "mental health clinicians have learned from complementary practitioners about somatic and energetic paradigms of intervention. Complementary practitioners have benefited from the insights of mental health practitioners about the psychological and emotional aspects of trauma" (p. 573).

Field (2009) has examined a number of studies focusing on the integration of complementary and conventional approaches. While she cites a paucity of thorough research in this area, she does note studies documenting the facilitative effects of combining cognitive therapy with mindfulness-based approaches, as well as group psychotherapy combined with massage therapy.

In conclusion to this section, it is clear that there are substantial differences in both theoretical assumptions and approach between the wisdom traditions and conventional counselling traditions. However, the experimental literature and theoretical literature point to important areas of compatibility. The literature also suggests that the traditions may be incommensurate; in addition, it suggests that there are significant areas of incompatibility. Within this context, the literature points to a number of ways in which the traditions may provide enriching dialogue, especially around issues involving unconscious motivation, attentional focus, the examination of emotional states in the client and therapist, and the connections between self and others.

Methodology

The methodology proposed for this study is a hermeneutical analysis of the qualitative data, informed by Kvale's (1994) collaborative action research model.

In this approach, the researcher is seen as an interpreter of the social context. It assumes, as Geertz (1979) argues for the ethnographic process, that we cannot know what goes on in informants' minds, but rather we can arrive at one translation of his or her words coupled with our observations. This translation process is seen as an attempt to build intersubjective understanding between the researcher and subject.

Kvale (1994) points out that the model of researcher as interpreter is built out of a conception of "knowledge as a linguistic and social construct of reality" (p. 24). In this context, he asserts that one may still seek validity, on different terms from a positivistic social science, as "defensible knowledge claims" (p. 24).

Negotiated meaning

Kvale (1995) points to a hermeneutically based research model in which researchers and informants interactionally develop an understanding of the social context and "apply this knowledge by new actions in the situation, thus, through praxis, they test the validity of the knowledge" (p. 34). As a researcher, I seek to enter into this dialogic process with my preconceptions, but also with a willingness to put my original preconceptions at risk within a conversation that leads to understanding. Schwandt (2000) points out that hermeneutic investigation starts from the assumption of a tradition that informs interpretation. It also assumes that the researcher has a willingness to question his or her horizon of understanding.

The building of intersubjective meaning requires several layers of conversation. There is initially the back-and-forth conversation of the interview, which permits "a multitude of subjects' views" of a theme "to picture a manifold and controversial human world" (Kavale, 1996, p. 7). After the initial conversation with the interviewees, there is another "conversation" with the interview texts to seek out relevant themes. These emerging themes may be brought back into conversation with the interviewees so that the researcher's interpretations of the texts are tested and renegotiated.

The current research project is informed by the themes drawn from a pilot study of practitioners working within differing traditions. The analysis of these themes is brought into reinvestigation and renegotiation in two ways. A discussion of my analysis is brought back into re-interviews with three of the original pilot study participants. Additionally, I brought the emergent analysis to conversations with practitioners who have identified themselves as experts in the integration of conventional and complementary traditions. I saw these "new" conversations as opportunities to further test and expand my interpretations of practitioner accounts.

Incommensurate conceptual webs

The review of the literature around the integration of healing traditions brought forth the possibility that counsellors who integrated conventional and complementary approaches may be working out of incommensurate traditions. I also began my data analysis with a working assumption that there is incommensurability between the conceptual webs that inform my presuppositions and those of my informants (Taylor, 1982).

The testing and retesting of explanatory accounts were not seen as separate from the process of inquiry. I was seeking to understand a horizon different from my own; therefore, my interpretations were brought into ongoing dialogue with

interviewees (Packer & Addison, 1989). Bernstein (1983) suggests that the dialogical process encourages us to work toward asking the "right questions."

Georg Gadamer (1984) offered a model for the building of understanding so that the researcher/interpreter may move closer to a thorough and (defencibly) valid description of a social situation. What is put at risk, within an interviewing process that seeks to understand the meanings of those being interviewed, is the weight of one's own opinion. Contrary to naturalistic and positivistic assumptions, that opinion is best not set aside (because of the impossibility of that project), but rather it is best challenged openly, in conversation.

Data collection

There are three partially overlapping kinds of data collected for this study. The first set of interviews focused on three re-interviews of pilot study participants described earlier. In our dialogue, I simply shared some of the terms that came directly out of the interview texts, such as "translation" and "tradition" or "union" and "boundaries"; and I asked whether these themes represented significant aspects of their counselling experience.

I also interviewed six teacher-practitioners who train other practitioners in the integration of conventional and complementary approaches. The initial sets of questions in these interviews were similar to those put forth to the pilot study participants. While each interview varied, the following four questions were addressed at some point:

1. I am interested in the ways counsellors interpret their use of complementary approaches with conventional approaches. Can you tell me how you might introduce the idea of using (yoga, meditation, etc.) within your sessions?

2. Do you encounter resistance to using complementary approaches?

3. Are there times when you might choose not to integrate complementary approaches?

4. How do you talk about the integration of approaches with your colleagues?

In addition, I asked questions that were generated out of a review of the literature on the integration of complementary and conventional practices. I also asked questions focusing on two or three themes that emerged out of the analysis of the pilot study:

- In a preliminary study of the integration of approaches, some counsellors spoke of a process of translation between traditions. Do you see yourself translating between traditions?

- Do you see yourself engaging a spiritual dimension in your work? If you do, how do you talk about it with clients?

- How would you describe wellness or emotional maturity to your clients?

- How would you describe your role in the achievement of wellness or emotional maturity?

The final set of data was gathered from being a participant-observer in four workshops led by teacher-practitioners (determined by the same criteria for expert as described above). I analysed the texts of these lectures and workshops to see

whether the themes identified in the original study reappeared in the teaching process in any significant way. I also searched for new themes; and any new themes were brought into question in my conversations with expert practitioners.

Among both the teacher-practitioners interviewed, as well as the practitioners re-interviewed, there was a wide variety in their training and approach to practice. The defining criterion for 'complementary practice' was that it was practice based on one of the "wisdom" traditions described in the Introduction.

The coding process

During the coding process, the examination of core categories and subcategories helped to generate a broad analysis; and the hermeneutical process led to more refined questioning and conversation. For instance, the phrase "walking the walk" appeared several times in my conversations with practitioners in the pilot study. I understood it to mean that the effects of the practice of complementary approaches were observable to others. I also understood the phrase to imply that those practitioners who were observably influenced by the practice of these approaches were seen as most effective in applying complementary approaches in their work.

I tested these understandings in three ways. I engaged in further dialogue with practitioners. I also shared my reading of the implications of the phrase so that my understanding became further refined. In addition, I applied my understandings in my observations of workshop settings, to see whether "walking the walk" appeared to be influential in the educational work. In this way, research categories were developed involving a translation process between interviewer-observer and practitioner.

Research participants, current study

Re-interviewed practitioners

- **Murray** is a social worker currently working in an outpatient clinic and in private practice. He is trained as a musician, dance, yoga and martial arts instructor.

- **Paul** is a hypnotherapist, student and teacher of Buddhist meditation, and a Reiki master.

- **Warren** is a social worker and acupuncturist.

Interviews with teacher-practitioners

- **Amy** is the clinical director of a centre for mind-body medicine.

- **Florence** is on the faculty and administration of a school of social work. Her teaching and professional work focus on the integration of indigenous practices in counselling work.

- **Fred** is a psychologist and adjunct instructor of psychology, and he also conducts workshops using meditative processes.

- **Lisa** is a registered nurse who has directed a complementary medicine centre for a hospital.

- **Mary** coordinates training for professionals for a centre for mind-body medicine.

- **Sam** is a physician who directs a centre for mind-body integration where he treats and counsels clients on health and stress related issues.

Teacher-practitioners offering lectures/workshops on integrated approaches

- **Barry** is a physician who lectures on the connection between heart health and non-physiological factors.

- **Janice** is a psychologist who integrates Buddhist meditation into her private practice.

- **Margie** is a psychologist and has directed a centre for complementary medicine at the National Institute of Health.

- **Richard** is a psychiatrist and founder of a holistic education centre in Massachusetts.

Results

Figure 1 maps out the areas of dynamic tensions as well as the areas of broad consistency within two counselling domains. These domains, intervention and client and collegial communication, are familiar categories to both practitioners and teacher-practitioners. The descriptions of dynamic tensions and common conceptual applications are generated directly from the words and phrases of interviewees. Both areas of commonality and areas of dynamic tension in each domain are summarised. It is important to emphasise that the tensions and applications in each domain represent the perspectives of the practitioners and teacher-practitioners; and they are not an attempt at an objective evaluation of these areas.
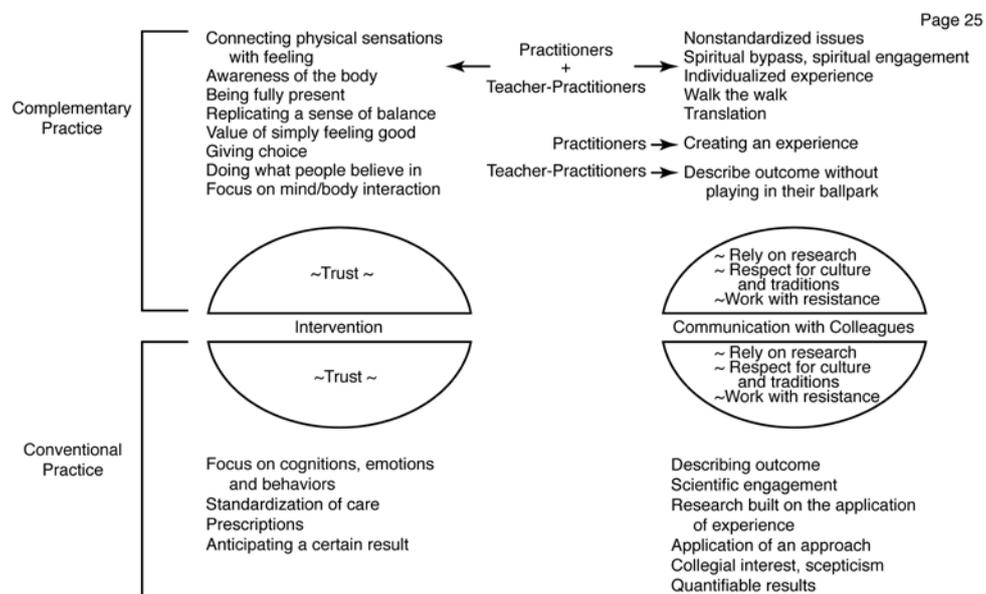

Figure 1   Areas of dynamic tensions and commonalities between traditions in counseling practice

Interpretive model

One of the central foci of this article is an examination of the ways in which diverse traditions are understood and integrated by practitioners and teacher-practitioners. Both the theory that informs the methodology behind this study (Gadamer, 1984) and the interviewees themselves suggest that understanding is rooted in the process of translation. Demonstrated in this section are examples of the translation process. There appears to be variety in the thoroughness of translation not only from interviewee to interviewee, but the same interviewee appeared to describe areas that were dominated by dichotomisation as well as areas of openness.

Gadamer (1984) suggested that we can be free from the weight of dominant opinions, and therefore we can be further from ignorance, to the degree to which we are open to arguments originating from different horizons. In this Findings section, I attempt to identify indications of openness to the horizons of differing traditions, as well as to identify examples of dichotomisation.

Interventions

The category of Interventions includes the examination of dialogue focusing on what a counsellor does in concert with a client to bring about desired changes (treatment) as well as treatment goals. Areas focused on in the course of treatment are discussed as well as treatment approaches. In most conventional as well as complementary counselling contexts, intervention comprises a central piece of the counselling work.

Areas of difference and commonality

Focusing on the social and cultural beliefs of the client was emphasised by the practitioners interviewed in the current study. This foundational perspective is similar to the approach of culturally-sensitive conventional approaches. Building a connection to the body and offering choices were described as different from a prescriptive approach or one that focused on client or patient compliance to recommendations, in conventional practice.

Achieving a state of balance and well-being was emphasised rather than a relaxed state, emphasised in the pilot study. The use of touch and efforts to move the client from bodily sensations to feelings were deemphasised in these interviews as compared with the pilot study interviews. The focus appeared to be on the client's immediate experience, and tailoring the intervention to that experience. Reliance on trust within the client-counsellor relationship was described as an essential element of both conventional and complementary approaches.

Giving choice

Several practitioners spoke about a process of "giving choices" to clients during ongoing work with them. These choices were described as being related to a state of "balance" for client as well as the ongoing and particular needs of the client. Walter described his work with acupuncture as "giving the person the experience of being in balance." His consultations with clients involved steering them "into activities and choices that can replicate the feelings of balance."

Fred described his work with clients and the use of meditation as giving clients the opportunity or choice of responding in a loving way, even when hurt. He stated that

clients had more of a choice in their response once they learned to control their parasympathetic nervous system response through meditative approaches. Fred also stated that he encourages clients to use meditation as a mild antidepressant or a mild tranquiliser, one without side effects:

> *So I would teach people how to meditate and I would say that they would use it instead of Prozac or Paxil, for instance, which comes with a wide range of side effects ... and chemical dependencies.*

Doing what people believe in, not necessarily what they want

Francis stressed the importance of tailoring an intervention to fit well with the belief system of the individual. She talked of training her students to know both Western diagnostic systems and how to understand a client's belief system. She emphasised that working within the context of a client's belief system does not always mean that you intervene with "what a client asks for."

> *... That's why I trust Dr. T so much ... Because before he decides that he is going to act as a physician – he believes in people ... He says, "I do what my patients believe in," and that has become my mantra. He says, "I do what they believe in, not necessarily what they ask for."*

Sam spoke about offering choices to clients based on an understanding of the meaning of "well-being" from each client's perspective. He describes a "questioning" process through which he can initiate a discussion around possibilities.

> *[I look at other options for a client] by cultivating an understanding of what well-being is to them. Then I might offer a more expanded suggestion around their goals relative to well-being.*

Teacher-practitioners in this second set of interviews stated the role of trust was more frequently emphasised than direct work with energy. However, they repeatedly pointed to a change "in energy levels" as one of the results of their work (**Steve**, **Walter**, **Paul**).

Bridging the disconnection between mind and body

When I asked teacher-practitioners about the connections made between emotions and bodily sensations, they spoke of an emphasis on establishing bodily awareness, especially for clients new to the work.

> **Q**: How do you build connections between bodily awareness and what is going on with feelings?

> **Amy:** *There are a lot of ways to bring awareness to the body – with meditation you can build an awareness of physical sensation and emotions. If a client is new to this work, I will not usually ask them to go to a place of feeling.*

Communication about the practice

This category includes an examination of interviewee comments about formal and informal conversations with colleagues and clients about the integration of complementary approaches. Discussion of research approaches and the documentation of outcome are included in this section.

Areas of commonality: Working with resistance, respect for traditions, reliance on research

In my interviews, I wondered how teacher-practitioners coped with resistance to aspects of diverse traditions. When I asked Amy how she works with resistance when she encounters it in workshops, she talked about adjusting her focus: "When people say, 'I don't want to do any of this', I take a different focus. I look at the resistance – often the resistance is equally as valid as to what else is going on."

The reader may wonder why the findings on the category of resistance were not included in the previous section focusing on intervention. Most of the responses to questions about resistance focused on ways in which the teacher-practitioner talked about practices based in wisdom traditions. Matty spoke about building "legitimacy at both ends." Teacher-practitioners from her training institute presented complementary practices and the "scientific research" behind them:

> **Q**: Do you ever experience resistance or struggle around people accepting the techniques – either from people in groups or from colleagues?

> **Matty**: *I think it's the way it's introduced. In our groups a new technique is introduced according to the leader's intuition of what appears to be right for now. But yes, there is always some resistance to the approaches. In the case of people who don't know the science behind them…the centre has worked hard to build legitimacy at both ends, in traditional medicine and complementary medicine.*

Fred talked about using medical terms with those who are accustomed to using that paradigm. "If I have scientific types or religious types, I am careful that I phrase that with Western medical terms." Later in our conversation, he gave an example of the kind of research he points to when clients or colleagues look for "external effects."

> *When the U.S. Navy teaches all the people that go on the nuclear submarine to meditate so that they can look at the screen for three hours instead of one hour. (laughter.) And they find that that's what happens, and their visual acuity and their ability to concentrate goes up markedly with the ability to meditate … Likewise goes up socialization among the crewmembers – all kinds of measurable, nice things.*

Name these two energies/walk the talk

Jan spoke about an effort to heal a split between psychology and practice in her own life; and she describes this effort as "coming out" as a Buddhist practitioner.

> *One of the things I'm up to is trying to come out as a Buddhist practitioner and to heal my own split between psychology and practice in my life and find a way to name these two great energies in my life.*

"Coming out" implies taking an external or public position regarding using approaches based in wisdom traditions. Several teacher-practitioners also spoke of the need to "walk the talk", echoing a theme articulated by the practitioners. This integration enabled more effective communication about the work.

> *The focus [in training groups] is on learning this for yourself before anyone goes out to teach it. The best teachers are those who know about this stuff from their own experience. (***Matty***)*

Q*: One of the themes that has come out of earlier interviews is that
practitioners have to "walk the talk."*

Matty: *Yes, that's what I mean.*

As a trainer, Amy talked about the difference between "learning a technique" and
integrating the approach. She likened the integration to living a religious tradition
not only expressing it on the day one attends church.

Collegial interest and translation

Several teacher-practitioners described little interest in complementary approaches
from their conventionally trained colleagues. Will stated that those who were
interested tended to have "something else" about the way they worked.

> *[Samuel] has been involved in biofeedback – so I find it easy to talk to him.
> But a lot of my old psychotherapist friends are not particularly wanting more
> information about this … The people who are most open are the ones that
> have something else about the way they work.*

Florence noted that while some conventionally trained practitioners expressed little
interest in learning about approaches from complementary traditions as they might
relate to their ongoing work, many practitioners are curious about these approaches
as they may provide alternative treatments to family.

> *Well, at my school, the director of Health Sciences said that he really wasn't
> that interested in all these complementary approaches. And I told him that he
> had to be interested because all of his (medical) students were interested …
> every day I have doctors stopping by the back door of my office and asking
> about these approaches … They are asking about their relatives.*

When speaking with colleagues, Sam described his efforts to talk about
complementary practices as a process of translation. Practitioners tended to
describe the translation process as a comparative process ("This is what it looks
like in the tradition I draw from. What does it look like in your tradition?"). Sam
described his efforts of translating the modalities used by setting it in the context of
a universal principle.

> *With Ayurvedic medicine, this [medical] system may not be accepting of
> bloodletting through leeches. At the same time, the notion of purification is
> extremely applicable, especially when kidney and liver function start to break
> down. So I look for the universal principle that the disparate modality is
> exemplifying; and I point to that principle.*

Walter spoke about beginning his conversations with interested colleagues using a
context that was familiar territory. A conversation that begins with anger and
depression may lead to a discussion about energy.

> *The kind of thing I might start with in these conversations is that with
> depression, often the individual is turning all the energy inward. All the
> physicians know that with depression it is all inward … so they will
> understand that part – and then it will be easier to understand when I begin
> to talk about overheating and congestion.*

Areas of difference between practitioners and teacher-practitioners

Francis emphasised the questionable value of providing extraordinary examples of healing, because those examples are also difficult to duplicate.

> *You know, when I do my groups, I do a very simple Chi Gong exercise ... And maybe there is lots of value in simply feeling good, because it helps you ward off other things ... If you only attach to the extraordinary, people want you to duplicate it ...*

If the evidence cannot be duplicated, complementary approaches and research involving the approaches may not gain full credibility from a conventional medical perspective. In this lecture, Barry stated that "doctors are trained to look at the evidence … if another researcher can't duplicate it, it's bull."

He contrasted the research around stress, "Type A behaviour" and heart disease, which he described as inadequately standardised, using "imperfect and variable diagnostic tools." With clinical trials for pharmaceuticals, the effects of drugs are replicable. He pointed out, "Even though you have to pay for the drugs, you know that drugs work and they're being tested."

However, this position appeared to leave him in a quandary about how to understand research (while imperfectly designed) that finds association between stress and heart disease: "There's something … There is increased stress and isolation … associated with heart disease but don't ask me why … I don't know why or how any of this stuff works".

Sam, trained as a physician, but also interested in integrating traditions outside the Western scientific mode, spoke of the need to be "respectful and aware of the person you are talking to":

> **Q**: Is it difficult to be operating under a different system, for instance, when you're working at a hospital?
>
> **Sam:** *I separate it. When I am there, I operate from that framework. I may raise possibilities, whether it's letting people know about the possibilities for their care of something else... We have to be open-minded to the multiple dimensions of who we are – we don't want to be so "ethical" that we can't integrate the resources of alleopathic medicine ...*

He spoke of a need to exercise adequate restraint and respect in relation to other traditions so that a practitioner does not risk sounding "evangelical."

A few of the teacher-practitioners spoke about efforts by some integrative practitioners to make distorted claims, with an eye to making a lot of money from their claims. Fred saw some of the recent scientific research by sceptical practitioners as efforts to "disentangle" some of these claims.

> *... there were a lot of Eastern people making money and vise holds out of teaching this stuff. Transcendental meditation was half bullshit and half wonder, if you can hear what I'm trying to say. It was a political thing, a social thing, as well as a technical skill.*

However, none of the teacher-practitioners mentioned or picked up on the issue (when asked directly) of the risk of clients using the approach as an interpersonal

or spiritual escape. Several practitioners in the pilot study referred to the possibility, indeed the risk, of using approaches and practices out of the wisdom traditions to avoid engaging in interpersonal or intrapsychic issues. In the literature, Wellwood (2002) refers to this as a "spiritual bypass"; and at least two practitioners stated that they had observed this dynamic occurring, with both colleagues and some clients. When asked directly about this, several teacher-practitioners stated that this kind of avoidance did not occur in their experience or their practice.

Amy did speak of working with clients who were "disconnected" between their physical and emotional selves. But she also spoke of shifting that disconnect by "teaching them ways of being present to themselves."

> *There are so many approaches out there that will take you out of your experience ... But all the approaches that we use focus on awareness of your experience ... They either bring them back to their experience or back to their body ... Then things start to shift.*

This absence of any discussion around the potential or misuse or distortion of complementary practices by clients was notable. The teacher-practitioners did talk about the use of a number of translation strategies they used when talking about their work with conventionally trained colleagues.

Sam demonstrated a wish to look beyond easy labels and the dichotomisation of approaches when he pointed out that "you can have a very reductionistic herbal approach … Holism has nothing do with the modality. You can have allopathic holism. It sounds like a contradiction. But you can have an allopathic approach that has integrated the social and cultural world of the individual they are seeing."

Implications

There are several implications for counselling theory and counsellor education that can be drawn directly from the examination of the data from interviews with practitioners and teacher-practitioners. The first, and perhaps foundational implication is the understanding that working out of diverse traditions will engender an approach that involves working within the tension of a range of differences, some resolvable and some fundamentally irresolvable. Working with irresolvable differences suggests the need to engage in a dialectical process so that a synthesis may unfold. The second implication grows out of observations of practitioners working from diverse traditions and finding areas of common ground from which to work. These observations suggest the need to discern and apply areas of commonality between traditions. Both implications suggest a number of issues relating to counsellor education and supervision.

Learning to work out of a dialectical tension

A great deal of informal individualised learning, especially for adults, in wisdom traditions, focuses on the understanding and toleration of differing, and at times contradictory, assertions. Much of the emphasis of our educational system focuses on finding the best answer to a clearly stated question.

If practitioners out of diverse traditions are necessarily going to gain understanding through the application of differing truths, how will they be prepared for this venture? Counsellors-in-training need models for understanding that discourage the

search for the "right" answer and encourage the ability to withstand and learn from differing and, at times, paradoxical assertions.

One opportunity for this learning comes within the context of supervision. Most good supervisors, consciously or not, model some ability to use dialectical tension in a productive manner. The data in this study suggest that supervisors training students to work in cross-cultural contexts would enrich supervising practice by the conscious articulation of this experience. When a student articulates the difficulty of working within the context of differing assertions, supervisors have an opportunity to frame the productive use of this tension. If contradictory approaches, values, and experience present themselves, supervisors may offer case study examples, preparing students to understand and work productively with dialectical tension.

Finding common ground

As important as understanding and working with fundamental differences may be, the data suggest that discerning common ground out of differing traditions is essential for counselling in this context.

Finding common ground can be a laborious process. For counsellor educators it requires that we train counselling students to understand the client's worldview, understand their own worldview, and learn to translate between these worldviews until common areas of understanding are identified.

The translation process

Finding common ground and working productively with dialectical tension are fundamental aspects of a hermeneutical process of interpretation. This process involves awareness of one's own preconceptions as well as a willingness to put those preconceptions at risk through open dialogue (Gadamer, 1984).

The translation process, as engaged in by teacher-practitioners and practitioners in this study, is characterised by varying degrees of openness to the preconceptions of the differing traditions. An interesting finding of this study is that many practitioners exhibit both a tendency to dichotomise and build open dialogue depending on the issue being examined.

Practitioners and teacher-practitioners using integrated traditions may find enriched dialogue, not through out-arguing the preconceptions of conventional approaches, but by thinking together with conventional practitioners. Similarly, counsellors working in multicultural contexts may enrich dialogue between traditions by bringing out strengths of each tradition.

Discussion

One area for continued discussion and research is the emotional maturity required for the appreciation of differences and the toleration of paradox. Vaillant's (1993, 2002) longitudinal research posits the evolution or devolution of emotional maturity depending on a combination of facilitative conditions and individual capacities. His research suggests that the ability to respond creatively to new situations, and to withstand the tension of paradox, is enhanced by emotional maturation. It also suggests that opportunities to promote emotional maturation in

supervision, through modelling and consistent support, may promote competencies in the integrative process.

The ability to find common ground and to work productively with sometimes paradoxical differences are capacities that encourage dialogue between traditions. Learning to work within the dialectical tensions of incommensurate assertions, as well as finding areas of compatibility and commonality, allows for the integration of elements from formal counselling traditions and a client's cultural tradition in a meaningful and coherent way.

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