Seeing the Sacred: Fostering Spiritual Vision in Counselling

*After slipping on a hike, Clare woke up paralyzed from the waist down. The damage incurred to her spinal cord made it impossible for her to live the way she once did. She spent days in bed, grieving and dejected. Well-meaning friends offered inspirational stories about paraplegics who took their physical limitations in stride. Those tales only spurred her anger and isolation. She did not know where to take her life, for all pathways looked dimly lit. Hardest of all, the hiking accident severed her connection with the sacred. Clare had always felt most a part of the universe in nature. She knew she was amidst something greater than herself while scrambling on natural terrain, her body dwarfed by great pine trees. She felt limitless atop the mountain peaks. But she could no longer find comfort outdoors. Now, the rocky landscape taunted her. Nature had asserted its power over her fate: She would never climb again. Some days, she could barely find reason to wake up.*

*In counselling, Clare’s therapist applied traditional cognitive behavioral techniques, increasing Clare’s behavioral activation and equipping her with new coping skills. Gradually her depression lifted and her functioning returned. She resumed deskwork and even joked around with colleagues again. Yet Clare’s feelings of emptiness persisted. She yearned for a connection with the sacred akin to the one that nature once provided. The last time she had seen color in the world was moments before her fall. Now all seemed black and white. The accident had shattered her spiritual lens. Without it, her days were without glory and wonder. How might we help clients like Clare who have lost their spiritual vision?*

**Spirituality as a Way of Seeing**

In this article, we offer a metaphor for understanding spirituality as a *way of seeing*. Given its numinous nature, mental health practitioners can feel stymied by spiritual matters or fail to recognize and address them as such in therapeutic settings. These difficulties approaching spirituality in counseling are not surprising. Spirituality is a fuzzy construct, lacking a standard definition among researchers and laypeople (Zinnbauer et al., 1997). The boundaries of what encompasses spirituality seem to vary from person to person. One individual engaging in a morning ritual such as breakfast can experience it as spiritual whereas another at the same table can view breakfast as entirely mundane. Both of their experiences are valid; any lived experience falls upon the continuum from spiritual to mundane. It boils down, then, to a matter of perspective.

The metaphor of ‘seeing’ is well developed among diverse worldviews. For instance, the Buddha is famously depicted as having a third eye between his brows. As philosopher Alan Watts (2004) noted in his lectures, “Zen is spiritual ophthalmology.” This third eye, or the divine eye, is also referenced in Taoism, Hinduism, and New Age spirituality. Within Islam, Sufi mysticism is heavily oriented around the language of sight and vision (Nicholson, 1914). References to spiritual vision take on a more literal tone in Saul’s dramatic conversion to Christianity, wherein a scale-like substance fell from his eyes upon a devout disciple’s touch and Saul was baptized (Acts 9:1-22). Virtually every major religion has likened spirituality to seeing the world with new eyes. In this sense, religion can be understood as established institutions that provide the support, symbols, and language to help people see.

Counsellors may find the metaphor of ‘seeing’ particularly relevant to their work with clients. As with Clare, people seeking help often struggle with envisioning the sacred dimension in life. They may encounter problems with depth perception, obstructions, and seeing in darkness. In our research and theoretical framework, we have identified several sacred qualities that facilitate the capacity to see life more deeply. They are the qualities of transcendence, boundlessness, ultimacy, and interconnectedness (Pargament & Mahoney, 2005). We describe each of these aspects below, borrowing from real-life examples to illustrate.

Transcendence refers to experiences that are perceived as extraordinary or set apart from the everyday. Consider the moment when someone significant enters into another person’s life, changing it permanently. Writer Ann Druyan (2009, p. 47), who identifies as agnostic, recalls transcendent aspects of her relationship with her late husband:

That we could find each other, as Carl [Sagan] wrote so beautifully in *Cosmos*…in the vastness of space and the immensity of time. That we could be together for twenty years. The way he treated me and the way I treated him, the way we took care of each other and our family, while he lived…I don’t think I’ll ever see Carl again. But I saw him. We saw each other. We found each other in the cosmos, and that was wonderful.

Others may find transcendence in the arts, sciences, or music. Regardless of where transcendence is perceived, the deeper dimension has the capacity to be revealed in any lived moment. As Canadian writer Lucy Maud Montgomery (2009, p. 99) noted in *Emily Climbs*, “There isn’t any such thing as ordinary life.”

Boundlessness captures what is seen as beyond time and space (Pargament, 2011). Breaking these time-space boundaries can foster a sense of oneness with the universe. The experience often involves a shift in dimensional perspective; time stretches into eternity, seamlessly binding past, present, and future together. What is seen is a holistic vision, approximating the perspective of what some would consider a Higher Power or creative force. Thus experiences of boundlessness allow a glimpse into the infinite nature of the universe. Individuals can cultivate states of boundlessness through meditation (Gillani & Smith, 2001). Spontaneous perceptions of boundlessness may be found in nature, as Clare experienced looking outward from the summit of her mountain. We note that the opposite of oneness is separateness, whether the rift is between oneself and God or other people.

Ultimacy is characterized by one’s perception of profound universal truthfulness in an experience. This deeper dimension can arise while searching for answers to ‘big questions’ related to meaning making, purpose, and the nature of the divine. These are moments of clarity. In *Man’s Search for Meaning* (1985, p. 57), Viktor Frankl describes his moment while suffering in captivity during the Holocaust:

...I saw the truth as it is set into song by so many poets, proclaimed as the final wisdom by so many thinkers. The truth—that love is the ultimate and the highest goal to which man can aspire. Then I grasped the meaning of the greatest secret that human poetry and human thought and belief have to impart: The salvation of man is through love and in love.

Interconnectedness represents another sacred quality, one that involves peering into another person’s essence, or soul, and seeing the other and oneself. What is reflected in living organisms is the presence of God or the divine, thus unlocking great reverence for all beings. Interconnectedness is woven into most religious teachings. In Buddhism, cruelty to all life forms is barred because any creature capable of feeling pain holds equivalent moral standing to human beings (Phelps, 2004). Sikhism similarly emphasizes the interconnectedness of all life forms as “the only proper starting point for ethical thinking” (Mandair, 2013, p. 148). Deep empathy and understanding is embedded in the experience of interconnectedness. Philosopher Martin Buber (1937) wrote about the significance of genuine meetings, using the term “I-Thou” encounter to describe moments of deep interconnectedness. He noted, “All real living is meeting” (Buber, 1958, p. 25). Consider the moment when a stoic client takes a risk with the therapist, inflecting honest emotion and vulnerability into their presentation. If the therapist is able to fully receive and respond to them, their shared encounter may be experienced as “really real” (Geertz, 1966, p. 112).

To summarize the above, spirituality offers a way of seeing the sacred. Transcendence, boundlessness, ultimacy, and interconnectedness comprise sacred qualities that individuals can perceive in their everyday living. Based on a growing body of empirical literature on the sacred, we propose that attention to clients’ spiritual vision is essential to enhancing wellbeing.

**The Sacred in the Everyday**

Observing the invisible force moving the needle in a compass, a young Albert Einstein (1970, p. 7) speculated, “Something deeply hidden had to be behind things.” When we speak of seeing the sacred, then, we refer to perceiving qualities such as transcendence, boundless, ultimacy, and interconnectedness interwoven into everyday experiences. Virtually any aspect of life may have sacred significance (Pargament, 2011). This capacity in every person to tap into the sacred dimension can be wholly life-enriching, as presented in the research findings to follow. Moreover, careful attention to spiritual vision is vital for those in the helping profession. Mental health practitioners are uniquely positioned to help protect and enhance client’s spiritual sight, so that they may view their life in sharper resolution, color, broadness, and depth. Later in this article, we highlight interventions concerned with restoring sacred vision and offer recommendations for counsellors.

This process of imbuing phenomena with spiritual significance has been conceptualized as sanctification in the field of psychology, which diverges from the classic theological definition of sanctification (Pargament & Mahoney, 2005). Insights into the spiritual dimension are quite common and prevalence rates vary depending on where individuals ‘look.’ For instance, over 90% of husbands and wives in a Midwestern community sample reported that their marriage was sacred to them (Mahoney, Pargament, & DeMaris, 2009). The vast majority of expecting couples also endorsed viewing their marriage and pregnancy as part of a larger spiritual plan at levels greater than ‘neutral’ and up to ‘strongly agree’ (Mahoney et al., 2009). Even sexuality can be seen through a spiritual lens. Over forty percent of married individuals reported experiences of boundlessness during sexual activity, specifically “that time stands still and I feel like I am part of something eternal” (Hernandez, Mahoney, & Pargament, 2011, p. 777). Although Pargament and Mahoney (2005) began with investigating the sanctification of everyday experiences in the domains of marriage and parenting, research has since expanded into sacred perceptions of sexuality, the body, nature, work, personal strivings, and life as a whole. Key themes from these studies are reviewed below.

It is no surprise that many people perceive the sacred in loving relationships. Myriad studies have linked greater sanctification of marriage and healthier unions. Seeing the sacred in one’s marriage is consistently accompanied by higher marital quality, marital equity, stronger commitment, more verbal collaboration, and less aggressive communication (DeMaris, Mahoney, & Pargament, 2010; Ellison, Henderson, Glenn, & Harkrider, 2011; Fincham, Lambert, & Beach, 2010; Kusner, Mahoney, Pargament, & DeMaris, 2014; Lichter & Carmalt, 2009; Mahoney et al., 2009; Mahoney et al., 1999; Stafford, David, & McPherson, 2014). Meta-analysis on the linkages between marriage and sanctification further support the above findings (Pomerleau, Wong, & Mahoney, 2015). In addition, couples who see the sacred in their relationship appear to resolve conflicts in a warmer, more validating manner, evidenced by both self-reports and behavioral observations during discussions of contentious topics (e.g., division of household labor, finances, parents/in-laws, tidiness; Kusner et al., 2014). Most strikingly, these findings appear to hold through time, such that sanctification of marriage predicted couples’ behaviors over the course of one year (Kusner et al., 2014).

The parent-child bond is also strengthened when seen through a sacred lens by either or both parties. Parents who see the sacred in their parenting role tend to use more positive parenting strategies (i.e., less verbal aggression, inductive disciplining, positive socialization), show greater involvement, and report more positive memories together (Murray-Swank, Mahoney, & Pargament, 2006; Dumas & Nissley-Tsiopinis, 2006; Volling, Mahoney, & Rauer, 2009). Interestingly, Weyand, O’Laughlin, and Patrick (2013) also found that sanctification of parenting served as a buffer for stress when encountering childrens’ behavioral problems. Moreover, both college students and their parents who saw their bond as having sacred qualities enjoyed greater spiritual disclosure and higher relational quality with one another (Brelsford, 2013).

Similarly, human sexuality has the capacity to contain sacred aspects. From the perspective of logotherapy, love finds expression through meaningful sexual activity (Frankl, 1986). Thus lovers engaging in sexual activity are poised to transcend themselves and uncover “an ultimate togetherness” (Bulka, 1997, p. 157). Religions also have much to say about sexual behavior. In Hinduism, for example, the ancient practices of tantric sex and writings of the *Kama Sutra* provide religious pathways towards sacred experiences through the senses and physical contact. Research has shown that those who experience the sacred in sexual activity report more sexual intimacy, greater sexual satisfaction, more frequent sex, and stronger romantic relationships (Hernandez et al., 2011; Murray-Swank et al., 2005).

Moving from interpersonal to intrapersonal domains, the human body may be viewed as sacred as well. Several studies have found that greater sanctification of the body is associated with more frequent exercise, getting adequate sleep, higher body satisfaction, and stronger attitudes against illicit drug use (Homan & Boyatzis, 2009; Homan & Boyatzis, 2010; Jacobson, Hall, & Anderson, 2014; Mahoney, Carels, et al., 2005). However, body sanctification is inconsistently correlated with other health behaviors, such as nutrition habits and use of preventative health services (Mahoney, Carels, et al., 2005, Homan & Boyatzis, 2010; Ellison et al., 2008; Benjamins, Ellison, Krause, & Marcum, 2011). It seems that individuals who sanctify their body appear to do so through various pathways depending on their age, gender, religion, and other aspects of their sociocultural context.

People can also perceive the sacred outside of interpersonal and intrapersonal relationships. For example, recall Clare’s sanctified relationship with natural landscapes. When nature is seen as sacred, individuals are more likely to preserve and protect the environment. In a large national sample of American Presbyterians surveyed, those who sanctified nature at higher levels endorsed stronger pro-environmental beliefs and willingness to sacrifice personal funds for environmental causes (Tarakeshwar, Swank, Pargament, & Mahoney, 2001). Moreover, Native American spirituality centers upon a sacred connection with nature. Consider the words of Chief Seattle of Squamish Tribe (Smith, 1887, p. 3):

Every part of this soil is sacred in the estimation of my people. Every hillside, every valley, every plain and grove, has been hallowed by some sad or happy event in days long vanished. Even the rocks, which seem to be dumb and dead as the swelter in the sun along the silent shore, thrill with memories of stirring events connected with the lives of my people, and the very dust upon which you now stand responds more lovingly to their footsteps than yours, because it is rich with the blood of our ancestors, and our bare feet are conscious of the sympathetic touch.

In this vein, acts of deforestation can be perceived as a desecration of Mother Earth, akin to the vandalizing of a church. It is no wonder that infringements upon tribal lands are perceived as a grave threat, mobilizing protestors who are willing to endure harsh penalties to protect the sacred. When something held sacred is indeed harmed, the depth of suffering that follows is profound. This is perhaps the greatest downside of sacred vision. Several studies have documented strong correlations between perceptions of desecration and anger, depression, and trauma-related symptoms across various life events and situations, including romantic breakup, divorce, personal injury or illness, and the 9/11 World Trade Center attacks (Pargament, Magyar, Benore, & Mahoney, 2005; Mahoney et al., 2002; Hawley & Mahoney, 2013; Krumrei, Pargament, & Mahoney, 2009). Land and nature, being tangible sacred spaces, can be especially vulnerable to encroachment by other groups.

An individual’s chosen duty may also become sanctified. People can come to view their work as sacred, as can be heard in the language of ‘calling’ and ‘vocation.’ A survey of employees in a diverse range of occupations, including management, education, sales, and administrative work, revealed that those who saw the sacred in their work were more satisfied with their job, committed to the organization, and less intent on leaving (Walker, Jones, Wuensch, Aziz, & Cope, 2008). These findings were replicated in a national sample of employees at Catholic institutions (Carroll, Stewart-Sicking, & Thompson, 2013). Interestingly, college students who see the sacred in learning were also more likely to be invested in the process, utilized advanced study strategies, and performed better academically (Phillips & Kitchens, 2016).

Furthermore, the sacred can be seen in a more abstract manner, in the form of one’s most important personal strivings. Often we encounter clients who value being a ‘good person’ in the face of their struggles. When questioned about what this means, the response naturally returns to religion, values, or other life philosophies. To be a ‘good’ Muslim, Christian, Jew, Atheist, or Humanist can have powerful implications for the trajectory of a life. Pargament (2011) observed that spirituality functions as a higher-order, organizing force for other values and goals. The more that people’s strivings were seen as sacred, the less conflicting their top-ranked personal strivings were from one another (Emmons, Cheung, & Tehrani, 1998). Sanctification of strivings has also been linked with greater commitment, life satisfaction, and purpose (Mahoney, Pargament, et al., 2005; Emmons et al., 1998). Given these findings, we infer that the spiritual dimension lends greater significance and power to one’s strivings and the journey towards them. Indeed, in a random sample of American residents, those who more fully perceived the sacred in the everyday reported greater purpose in life, less narcissism, greater self-esteem, community mindedness, and greater enjoyment of everyday pleasant events (Doehring et al., 2009).

Aggregating across all areas of research on sanctification through meta-analysis, Pomerleau et al. (2015) noted greater investment, commitment, and positive relational qualities when the sacred is seen. Thus, individuals who are able to see the deeper dimension generally exhibit greater efforts to protect and care for whatever comprises their visual field, whether the focus is on relationships, work, routine behaviors, or life as a whole. Furthermore, perceptions of the sacred are tied with better psychological adjustment, greater satisfaction derived from sanctified areas, and a greater sense of purpose.

**Practical Implications**

Seeing the sacred can help individuals flourish, or as the saying goes, to move from surviving to thriving. It follows that part of our role as mental health professionals is to become spiritual ophthalmologists. The practice of spiritual ophthalmology requires inspection of clients’ spiritual lens, checking for issues of depth perception, obscurations, and flexibility in different lighting conditions. We discuss problems that may arise in spiritual ophthalmology, offering recommendations and models to help illuminate the sacred in clients’ lives.

* Attend to problems of depth perception.

Shortsightedness is a condition that renders distant objects out of focus. As such, one’s vision is focused only on objects that are close to the viewer. This restricted focus on close objects can further strain the eyes, causing damage. In other words, what is of sacred significance to an individual becomes lost in the background. Myopic individuals are preoccupied with the mundane. For some individuals, spiritual myopia manifests as rigidity and obsessiveness with sacred matters. One clinical form of this is captured in religious scrupulosity, a subtype of obsessive-compulsive disorder. People with this condition tend to fixate upon specific religious rules to the point that their lives are governed by excessive concern about their adherence to them (Greenberg & Huppert, 2010). Although religiously devout, individuals with spiritual myopia are vulnerable to losing their deeper connection with the divine, caught in endless patterns of cleaning rituals or perseverations of seemingly insufficient prayers. Worries of moral failure and committed sins crowd their visual field, with little space for perceiving the sacred. In working with spiritual myopia, it is important to address clients’ fear of losing their spiritual connection. We are not asking individuals to change their core religious values or the centrality of the sacred to their lives, lest our challenges are misconstrued as tests of faith or clashes with supernatural evil. Rather, we work together to introduce flexibility and novel pathways to connecting with the deeper dimension, bringing the entire scene into sharper focus.

The opposite of myopia is farsightedness, a condition that renders closer objects out of focus. Only objects positioned at a distance are seen clearly. Spiritual farsightedness distorts one’s vision by excessive focus on the future, which can manifest as overwhelming anxiety about possible outcomes or events. Visions of the ‘what might be’ obfuscate the visual field from ‘what is’. Individuals with spiritual farsightedness may be fraught with indecision or self-doubt about the moral consequences of one’s actions. As such, people can lose touch with the present moment, missing opportunities to access the sacred dimension. This narrowing of one’s attention can be especially detrimental in social situations, such that other environmental cues are mis-appraised or missed entirely. McCorkle, Bohn, Hughes, and Kim (2005) developed a promising group treatment protocol targeting social anxiety by expanding participants’ perceptions of the sacred in their lives. Attuning to the sacred dimension stimulated a broadening of focus to cues both near and far. Metaphorically speaking, the intervention helped to widen the visual field in all directions. Based on participant feedback, treatment assisted in increasing flexibility in their attention to stimuli, allowing room for alternative thoughts and behaviors to be incorporated, and forming supportive relationships with group members (McCorkle et al., 2005).

Complementing the study’s direct focus on developing perceptions of the sacred, another notable component of the study was mindfulness. Mindfulness, with its roots in Eastern spirituality, represents an empirically-supported approach that helps individuals manage anxiety and stress (Hofmann, Sawyer, Witt, & Oh, 2010). Individuals are trained to gently redirect their attention to the present, non-judgmentally noticing thoughts and sensations as they arise. Secular mindfulness meditation has been widely disseminated in popular culture and integrated into various therapeutic interventions. However, there is growing evidence that spirituality plays an important role in meditation. Greeson et al. (2011) observed the link between mindfulness and increased daily spiritual experiences of transcendence. Furthermore, they found that increases in transcendent experiences predicted improved mental health following mindfulness training. The authors postulated that mindfulness training facilitates the ability to ‘see’ the transcendent in everyday life, and that this spiritual sight functions as a mechanism through which mindfulness leads to better mental health. Notably, Wachholtz and Pargament (2008) also experimentally demonstrated that meditation on God (i.e., God is love; God is joy; God is good; God is peace.) resulted in greater decreases in migraine headaches and anxiety, as well as greater increases in pain tolerance, daily spiritual experiences, and existential well-being, compared to secular meditations. Circling back to the discussion of spiritual farsightedness, we propose that soul searching need not span great distances. The sacred can unfold in front of our eyes, revealing immanence in the present moment. Individuals appear to benefit from mindfully living in the sacred dimension.

* Attend to factors that eclipse the sacred and incorporate spirituality into the healing process.

Sometimes, the spiritual dimension is rendered inaccessible to individuals. Many conditions can contribute to spiritual blindness, including trauma, addiction, and excessive self-centeredness. Individuals who have had the sacred torn from their lives may suffer adverse outcomes similar to those who perceive desecration. Revisiting Clare, we observed that her connection with nature, once held with great reverence, was ruptured. Not only was her accident physically and emotionally damaging; she had endured a spiritual trauma. This abrupt severance was a sacred loss. Her therapist was uniquely positioned to walk along with her as she grieved. Both of them agreed upon the goal of re-connecting with the sacred, but the pathways were unclear. Roads that were once familiar to Clare were no longer accessible. Then they happened upon the path of music.

*During one of her later sessions, Clare remarked that her body felt fragile and clumsy. She commented that the muscles she had used for climbing had all but disappeared. This was most evident in her weakened grip. Exercising with putty and weights, the way that climbers do, only fueled her heartache. She found those activities thoroughly de-motivating. The conversation between Clare and her therapist veered toward the idea of strengthening her hands in a different way. Weeks ago, Clare had mentioned feeling drawn to her father’s old ukulele. She brought the instrument to session at her therapist’s invitation. They carefully tuned it together. As Clare’s fingers connected with the wood of the fretboard, a genuine smile graced her face. Something deep within her had stirred. She felt connected with a loving force, humbled and vulnerable in its presence. Eventually, music would fill her home more often. She described how her soul moved when playing that little pine instrument. She held it close to her chest. She said that the sound from that ukulele came from the strength of her spirit.*

It was nature carved into the form of a ukulele that allowed Clare’s life to become revitalized. As captured in this case, there is no standard prescription that helps people see. Neither can people be forced to see the sacred. Rather, spiritual vision tends to be organically unveiled under optimal settings. Furthermore, we note that the process of spiritual healing is often entwined with one’s search for ultimate meaning, echoing tenets in Frankl’s (1985) logotherapy and Wong’s (2016) existential positive psychology approaches. Both approaches underscore creative, experiential, and attitudinal values as markers toward one’s *will to meaning* (Frankl, 1985; Wong, 2016). In our case, Clare found creative value in authentically channeling her spirit into melodies. She re-discovered experiential value in music that allowed for an ordinary therapy session to soar into the sacred realm. She attained attitudinal value in re-orienting herself towards engagement in an activity that matters to her and sustains her dignity.

As such, efforts to promote healing should attend to the sacred dimension to be effective. To this end, Murray-Swank and Pargament (2005) developed *Solace for the Soul*, a manualized individual treatment protocol for survivors of sexual abuse with spiritual struggles. Sexual abuse in particular begets a loss of trust and innocence, in addition to severe violations of the body, which may engender perceptions of sacred loss and desecration when seen through a spiritual lens. Following this spiritually-integrated intervention, participants reported increases in spiritual well-being, use of spiritual resources in coping, and positive images of God.

Addiction may also obscure one’s spiritual vision. Although anything—including substances—can be sanctified, drugs and alcohol cannot contain the sacred. Worshipping these ‘small gods’ rapidly becomes unfulfilling and life-limiting. In a study investigating the role of spirituality in twelve-step alcohol addiction recovery programs, it was found that spiritual factors mediated the association between program involvement and relapse-related outcomes (Dermatis & Galenter, 2016). Specifically, individuals who endorsed feeling God’s presence daily also reported less craving, less depressive symptoms, and abstained from alcohol for more months. Again, the ability to see the sacred appears to serve individuals well while facing inner demons.

Self-centeredness is another form of spiritual blindness. Consider a fictional example. In Abbott’s (1963) *Flatland*, the tale is told by a Square who lives in a two-dimensional plane. He is visited by a Sphere from the third dimension and it is an enlightening moment. The Square then contemplates the possibility of other dimensions. He dreams of Pointland, where each Point cannot conceive of other worlds given its limitations of being the sole inhabitant of its own universe. Each Point is effectively its own God. As a result, Points erroneously conclude that any communication from shapes of other universes actually come from themselves. Our (lower-case) point is this: The sacred is hard to see when the self becomes the center rather than the divine. Mahoney and Pargament (2004) note that the classical Christian perspective of conversion is characterized by the realization that only God can fill one’s spiritual core. The ‘antidote’ to self-centeredness may lie in experiencing the sacred, and particularly those accompanying spiritual emotions of awe, uplift, gratitude, love, humility, and even fear (Otto, 1928). Such emotions may facilitate greater awareness of something larger than oneself.

* Allow the sacred to be a visual aid.

Sacred perceptions are a powerful resource, especially in times of difficulty. The sacred readily functions as night vision goggles during life’s darkest moments. Research has suggested that sanctification can serve as a buffer against the negative consequences of stress (DeMaris et al, 2010; Weyand et al., 2013). Indeed, the utilization of positive spiritual coping resources in response to diverse stressors has been linked to better psychological adjustment (Ano & Vasconcelles, 2005). In the business of spiritual ophthalmology, it is important for helpers to attend to their own wholeness of vision while journeying with patients through the darkness. One important resource that can help therapists sustain themselves is sacred moments, or distinct periods characterized by the experience of transcendence, boundlessness, ultimacy, interconnectedness, and spiritual emotions. In a sample of mental health providers consisting of psychiatrists, psychologists, and social workers, the majority attributed sacred qualities to an important moment that they experienced with patients in the past year (Pargament, Lomax, McGee, & Fang, 2014). As a consequence of the sacred moment, these providers endorsed a greater sense of meaning in work, therapeutic gains for the client, a stronger therapeutic relationship, and provider gains, such as new insight. Similar findings emerged from Pargament et al.’s (2014) second study, which surveyed mental health patients about an important moment in therapy. Clients who perceived higher levels of sacred qualities in their chosen moment also endorsed greater changes in mental health and satisfaction with their provider. In essence, sacred moments may function as counter-weights to traumatic experiences. They can be easily integrated into memory, engage individuals with the present moment, and have long-lasting impact for both clients and practitioners.

**Conclusion**

We have presented spirituality as a way of seeing. The qualities of transcendence, boundlessness, ultimacy, and interconnectedness are windows into the deeper, spiritual dimension of life. As we have described, sacred perceptions need not adhere to theistic views of God. Nontheists can also imbue aspects of their lives with sacred qualities (e.g., Ahmadi, 2006) Research on sanctification, or the process of imbuing phenomena with spiritual significance, has consistently revealed linkages with greater commitment, investment, and positive relational qualities when the sacred is perceived. In this way, spiritual individuals benefit from a deeper sense of meaning and motivation, powerful coping resources in times of hardship, and positive affective states encompassing awe, uplift, and gratitude.

Furthermore, the sacred can penetrate every living moment, as well as various aspects of an individual’s life. What appears sacred or secular is in the eye of the beholder. In the words of Carl Jung (1969, p. 546), “It is not that something different is seen, but that one sees differently. It is as though the spatial act of seeing were changed by a new dimension.” Moreover, seeing the sacred is not merely a way of romanticizing or sentimentalizing life; it is predictive of committed actions and movement towards one’s values. Empirical findings support that the sacred is manifest in the loving relationships, nature, work, sexuality, the body, personal strivings, and life as a whole.

As mental health practitioners, we can help clients develop greater spiritual acuity in several ways: (a) attend to problems of depth perception, (b) attend to factors that eclipse the sacred and incorporate spirituality into the healing process, and (c) allow the sacred to function as a visual aid in dark moments. In Clare’s case, her great suffering resulted in spiritual myopia, reducing life to one banal exercise after another. Her therapist recognized the spiritual injury resulting from Clare’s hiking accident and together, they sought a pathway to heal. While circling in the dark, a sacred moment unfolded when Clare brought in her ukulele. Music illuminated an alternative path towards meaning in life. Her ukulele would allow her to re-connect with the sacred and transcend her pain.

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