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RELATIONSHIP WITH GOD AS A SECURE BASE IN RELATIONAL PSYCHOTHERAPY

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Abstract

The formation of a secure and safe attachment relationship with God is an essential element in the process of religious coping with distress. This is a crucial aspect that must be integrated into the psychotherapeutic process. This paper presents an interdisciplinary approach that emphasises the importance of the spiritual element in therapeutic work. It draws on the theoretical foundations of attachment theory and religious coping to explore how a relationship with God can become a safe starting point in relational psychotherapy and how spirituality can be integrated into the therapeutic process. In doing so, it opens up a discussion on the relationship between faith, psychological well-being and effective therapeutic approaches that can enrich the understanding and practice of relational psychotherapy.

Key words: psychotherapy, religious coping, attachment to God, relationships, attachment theory

Introduction

Recent decades of research have demonstrated that a significant proportion of individuals who believe in God perceive themselves as having a personal relationship with the divine. For example, people frequently seek divine guidance¹, perceive positive occurrences as divine gifts², and engage in discourse

Cf. Kenneth I. PARGAMENT – Harold G. KOENIG – Lisa M. PEREZ, The Many Methods of Religious Coping: Development and Initial Validation of the RCOPE, in: *Journal of Clinical Psychology*, 56 (2000) 4, 519–543.

² Cf. Jenae M. NELSON – Sam A. HARDY – Philip WATKINS, Transcendent Indebtedness to God: A New Construct in the Psychology of Religion and Spirituality, in: Psychology of Religion and Spirituality, 15 (2023) 1, 105–117.

with the divine³. Such individuals engage in discourse with the divine⁴ and seek forgiveness from the divine after committing wrongdoing⁵.

This is particularly evident in Christianity, which places a relationship with the living God at the centre of its belief system. The concept of a personal God is central to the Christian faith, whereby the believer establishes and maintains a personal and interactive relationship with this entity. The concept of a relationship with the divine is a pervasive one in the context of religious belief. However, within the Christian tradition, this relationship is characterised by a distinctive set of features. These include the notion that God has entered the human realm in a particular manner, thereby establishing a relationship with humanity. This relationship is further defined by the capacity to engage in communication with God, to behold the divine, and to serve him through the agency of Jesus Christ.6

Many theorists and researchers in the field of relational psychology of religion have observed that the inner image of God possesses psychic energy and dynamism comparable to that of a living person. This psychic reality is experienced as real and alive, and it is possible to establish a real and living relationship with it.⁷ For a considerable number of individuals who adhere to a religion, the concept of a higher power, whether it be God or another transcendent entity, is not abstract or distant, but rather a significant and personal presence in their intimate world. Even in moments of stress and vulnerability, this relationship provides a sense of comfort and healing8, which is also a crucial aspect in the field of relational psychotherapy.

To gain a deeper understanding of the underlying mechanisms shaping our relationships with others in moments of distress, including our relationship with God, we will draw on the principles of attachment theory. Attachment theory emphasizes the significance of relationships in situations char-

Cf. Urška JEGLIČ, The Impact of Sleep on the Effectiveness of Meditation and Contemplative Prayer, in: Studia Gdańskie, 50 (2022), 137–148.

⁴ Cf. Joshua A. WILT – Julie J. EXLINE, Receiving a Gift from God in Times of Trouble: Links between Gratitude to God, the Affective Circumplex, and Perceived Closeness to God, in: Mental Health, Religion & Culture, 25 (2022) 3, 362–379.

⁵ Cf. Julie J. EXLINE – Joshua A. WILT, Not Just Love and Safety, but Excitement, Energy, Fun, and Passion: Relational Predictors of Gratitude to God and Desires to 'Pay It Forward', in: *Journal of Positive Psychology*, 19 (2024) 1, 107–120. Cf. Tomaš ŠPIDLIK, *Osnove krščanske duhovnosti*, Maribor, 1998.

Cf. Ann BELFORD ULANOV, Finding Space: Winnicott, God, and Psychic Reality, Louis-

⁸ Cf. Kenneth I. PARGAMENT, The Psychology of Religion and Coping: Theory, Research, Practice, New York, 1997.

acterised by extreme emotional distress, feelings of isolation, and separation.⁹ These insights also underpin religious coping theory, which elucidates the use of spirituality as a strategy for coping with stress.¹⁰ This perspective can serve as an integral component in the process of relational psychotherapy, which prioritises transformative relational experiences as catalyst for therapeutic change. Such transformative processes are grounded in secure and authentic relationships, which may include both the therapeutic relationship and individual's relationship with God.

1. Relationship with God through the prism of attachment theory

Attachment can be defined as a lifelong developmental system, comprising physical, cognitive and communicative strategies, employed by individuals to form strong emotional bonds, thereby protecting themselves from real or potential threats. The foundations of this system are established in childhood, particularly through attachment (especially with parents or other primary caregivers). The quality of these relationships serves as a model for how people perceive themselves, others, and the world in all subsequent relationships.¹¹

Attachment constitutes an integral component of the adaptive behavioural system that a child establishes during the earliest stages of development. This mechanism elucidates how a child, particularly during periods of distress or stress, establishes and maintains contact with a parent or primary caregiver and how they response to the disruptions in that contact.¹² These foundational patterns persist into adulthood.¹³

In the case of secure attachment, a child can establish proximity to the attachment figure, perceive a sense of security in seeking comfort during distress, and develop the understanding that the caregiver will provide reassur-

Gf. Susan M. JOHNSON – Judy A. MAKINEN – John W. MILLIKIN, Attachment Injuries in Couple Relationships: A New Perspective on Impasses in Couples Therapy, in: *Journal of Marital and Family Therapy*, 27 (2001) 2, 145–155.

Cf. Kenneth I. PARGAMENT – Harold G. KOENIG – Lisa M. PEREZ, The Many Methods of Religious Coping: Development and Initial Validation of the RCOPE, 519–543.

¹¹ Cf. John BÖWLBY, Attachment and Loss: Vol. III, Loss, Sadness and Depression, New York, 1973.

¹² Cf. Wade ROWATT – Lee A. KIRKPATRICK, Two Dimensions of Attachment to God and Their Relation to Affect, Religiosity, and Personality Constructs, in: *Journal for the Scientific Study of Religion*, 41 (2002) 4, 637–651.

¹³ Cf. Colleen DOYLE – Dante CICCHETTI, From the Cradle to the Grave: The Effect of Adverse Caregiving Environments on Attachment and Relationships throughout the Lifespan, in: Clinical Psychology: Science and Practice, 24 (2017) 2, 203–217.

ance and alleviate anxiety. Concurrently, the child forms an internal representation of a secure base, an internal schema of the self in relation to the other (the attachment figure). This schema allows the child to feel confident in exploring the world, both during childhood and in later life.

In contrast, insecure attachment patterns (avoidant, ambivalent, or disorganized) emerge when a distressed child fails to establish consistent mechanisms for seeking recourse from caregivers. This manifests in two primary ways: the child may either become overly self-reliant due to a lack of trust in their caregivers or perceive caregivers as unreliable, which intensifies feelings of distress and anxiety.¹⁵

From a lifelong perspective, the quality of attachment formed in early childhood profoundly influences the formation of subsequent relationships and responses to moments of distress, whether in broader social contexts or intimate relationships. This influence extends to individual's relationship with God. Scholars have explored the notion that humans can form a relationship with God analogous to the parent-child attachment. Granqvist and Kirkpatrick argue that God can function as an attachment figure, meeting the criteria typically associated with such a role. Individuals exhibit quantifiable attachment styles in their relationships with God that consistently mirror their interpersonal attachment styles. Parallels between divine and interpersonal relationships encompass dimensions of intimacy and frustration, and a relationship with God can provide support and guidance, thus enhancing well-being. Company of the provide support and guidance, thus enhancing well-being.

¹⁴ Cf. Mary D. S. AINSWORTH – Mary C. BLEHAR – Everett WATERS – Sally WALL, Patterns of Attachment, New York, 2014.

¹⁵ Cf. Mario MIKULINCER – Phillip R. SHAVER, Attachment in Adulthood: Structure, Dynamics, and Change, New York, 2007.

¹⁶ Cf. Barbara SIMONIC, Antropološko-psihološke in teološke osnove prenašanja vrednot: zgodnja navezanost na starše in temelji religioznosti, in: *Bogoslovni vestnik*, 66 (2006) 1, 123–136.

¹⁷ Cf. Lee A. KIRKPATRICK, Attachment, Evolution, and the Psychology of Religion, New York, 2005.

¹⁸ Cf. Pehr GRANQVIST – Lee A. KIRKPATRICK, Attachment and Religious Representations and Behavior, in: Jude CASSIDY – Phillip R. SHAVER (eds.), Handbook of Attachment: Theory, Research, and Clinical Applications, New York, 2008, 906–933.

¹⁹ Cf. Pehr GŘANQVIST – Mario MIKULINCER – Phillip R. SHAVER, Religion as Attachment: Normative Processes and Individual Differences, in: *Personality and Social Psychology Review*, 14 (2010) 1, 49–59.

²⁰ Cf. Kristin LAURIN – Karina SCHUMANN – John G. HOLMES, A Relationship with God? Connecting with the Divine to Assuage Fears of Interpersonal Rejection, in: *Social Psychological and Personality Science*, 5 (2014) 7, 777–785.

Attachment theory offers a framework for conceptualizing different forms of religious experience. Religion can be conceptualised as an attachment relationship, as it fulfils the two main criteria of attachment: secure base and safe haven. This dynamic is particularly evident in moments of difficulty, vulnerability, or crisis when individuals turn to God for protection, security, and comfort. In such moments, God is perceived as a source of emotional support, akin to a safe haven. Moreover, attachment provides a sense of security and a foundation for exploration. From this perspective, God is seen as a constant, watchful and supportive presence. In this way, God is conceived as a person of attachment who is always present and omnipotent, thereby providing the most reliable foundation of security. Believers can venture forth into the world with the assurance that they can always return to Him.

From an attachment perspective, a relationship with God offers individuals security and confidence to navigate daily life, enhancing their capacity to cope with stress and adversity. The attachment system serves as a fundamental coping mechanism, whereby individuals seek security and support from another entity.²⁵ It functions as an emotion-regulatory system, with distinct coping strategies associated with each attachment pattern in response to stress.²⁶

2. Spirituality and coping with stress

The effective management of problems and stress is a fundamental aspect of living a successful life. Coping behaviour can be defined as conscious and

²¹ Cf. Richard BECK – Angie MCDONALD, Attachment to God: The Attachment to God Inventory, Tests of Working Model Correspondence, and an Exploration of Faith Group Differences, in: *Journal of Psychology and Theology*, 32 (2004) 2, 92–103.

²² Cf. Pehr GRANQVIST – Lee A. KIRKPATRICK, Attachment and Religious Representations and Behavior, 906–933.

²³ Cf. Lee A. KIRKPATRICK, Attachment, Evolution, and the Psychology of Religion, 53–74.

²⁴ Cf. Pehr GRANQVIST – Mario MIKULINCER – Phillip R. ŠHAVĚŘ, Řeligion as Attachment: Normative Processes and Individual Differences, 49–59.

²⁵ Cf. Roger KOBAK – Jude CASSIDY – Karlen LYONS-RUTH – Yair ZIV, Attachment, Stress, and Psychopathology: A Developmental Pathways Model, in: Dante CICCHETTI – Donald J. COHEN (eds.), Developmental Psychopathology: Theory and Method, Hoboken, 2006, 333–369.

²⁶ Cf. Richard BECK – Angie MCDONALD, Attachment to God: The Attachment to God Inventory, Tests of Working Model Correspondence, and an Exploration of Faith Group Differences, 92–103; Tsachi EIN-DOR – Mario MIKULINCER – Phillip R. SHAVER, Attachment Insecurities and the Processing of Threat-Related Information: Studying the Schemas Involved in Insecure People's Coping Strategies, in: Journal of Personality and Social Psychology, 101 (2011) 1, 78–93; Mario MIKULINCER – Phillip R. SHAVER, Attachment in Adulthood: Structure, Dynamics, and Change.

adaptive efforts to manage stressful events or situations and the emotions associated with them. This process begins with an evaluation of the situation, which includes identifying the stressor, assessing the intensity of the threat, estimating the time required to address the challenge, and determining the degree of control over the situation. Subsequently, individuals utilise cognitive, affective and behavioural strategies to manage stress.²⁷ A variety of coping strategies exist, each with a distinctive approach. Those experiencing distress tend to adopt one of three strategies: modifying their environment, modifying themselves, or a combination of both.²⁸ An individual's coping style is not static but rather evolves in response to changing circumstances. To understand how an individual copes with stress, it is essential to consider the nature of the stressor, the individual's perception of it, and the resources.²⁹

The approach to coping is also shaped by the values, beliefs, and goals of the individual or family members involved. Spirituality plays a significant role in this process, with varying degrees of influence. Spirituality constitutes an integral component of an individual's broader orientation system, influencing their perception of situations, actions and goal-pursuits. Spirituality is a fundamental aspect of human existence, essential to daily functioning and the core of what it means to be human. It is particularly evident at pivotal moments in an individual's life, when circumstances call for a deeper understanding or a sense of the mysterious. In times of crisis and catastrophe, spirituality often becomes intertwined with efforts to comprehend the incomprehensible and to manage the unmanageable. Spirituality has the potential to influence a number of different areas, including thoughts, emotions, actions and relationships. It transcends the boundaries of psychological, social, and physical existence, serving as an essential part of daily life and the essence of humanity.

It is a common for individuals experiencing distress to turn to religion, employing religious coping strategies to manage challenging emotions. Religious coping involves integrating religious or spiritual dimensions into the coping process.³² Kenneth I. Pargament, a leading researcher on religious cop-

²⁷ Cf. Barbara NEWMAN – Philip R. NEWMAN, Development through life, Wadsworth, 2003.

²⁸ Cf. Bernard SPILKA – Ralph W. HOOD – Bruce HUNSBERGER – Ralph GORSUCH, The Psychology of Religion, New York, 2003.

²⁹ Cf. Barbara NEWMAN – Philip R. NEWMAN, Development through life, 52.

³⁰ Cf. Kenneth I. PARGAMENT, The Psychology of Religion and Coping: Theory, Research, Practice.

³¹ Cf. Kenneth I. PARGAMENT, Spiritually Integrated Psychotherapy, New York, 2007.

³² Cf. Richard BECK – Angie MCDONALD, Attachment to God: The Attachment to God Inventory, Tests of Working Model Correspondence, and an Exploration of Faith Group Differences, 92–103; Sara JEREBIC – Drago JEREBIC – Josip BOŠNJAKOVIĆ, Duhovnost

ing, identified various forms of religious coping with stress, ranging from active to passive, problem-focused to emotion-focused, positive to negative, and cognitive-behavioural to interpersonal and spiritual. These strategies affirm that spirituality or faith is not merely passive but can be a significant element of successful stress management.³³

Pargament and colleagues³⁴ identified three principal religious coping strategies, with the *collaborative* strategy being the most prevalent. This strategy entails the formation of a collaborative problem-solving partnership with the divine, with both the individual and the deity actively participating. In the *self-directing* strategy, individuals rely on their own initiative, perceiving themselves as capable of solving problems with the resources provided by God. The *deferring* strategy involves placing one's trust in a higher power to control and resolve the issue at hand. Subsequent research has identified two additional strategies: *surrender* and *active surrender*. The former involves aligning one's desires and intentions with God's will, while the latter entails actively seeking solutions in accordance with this alignment.

These strategies can be classified into two distinct categories: positive and negative religious coping. The positive dimension of religious coping encompasses forming secure relationships with the divine, connecting with one's religious community, finding meaning from one's existence, and learning from experiences. Those who use positive religious coping tend to view God as a benevolent partner, which enhances their sense of hope and coping ability.³⁵ In contrast, negative religious coping is characterised by a fearful attitude towards God, an anxious worldview, internal spiritual tension, and conflicts with oneself, others, and God. Those who utilise negative coping strategies may perceive God as distant, judgmental, and unresponsive, leading to feelings of disappointment and existential doubt.³⁶ Effective coping strategies

kot pozitiven način spoprijemanja s težkimi življenjskimi (pre)izkušnjami in travmami, in: *Edinost in dialog*, 78 (2023) 2, 355–367.

³³ Cf. Kenneth I. PARGAMENT, *The Psychology of Religion and Coping: Theory, Research, Practice;* Kenneth I. PARGAMENT, The bitter and the sweet – An evaluation of the costs and benefits of religion, in: *Psychological Inquiry*, 13 (2002) 3, 168–181.

³⁴ Cf. Kenneth I. PARGAMENT – Joseph KENNELL – William HATHAWAY – Nancy GREVENGOED – Jon NEWMAN – Wendy JONES, Religion and the problem-solving process – Three styles of coping, in: *Journal for the Scientific Study of Religion*, 27 (1988) 1, 90–104.

³⁵ Cf. Kenneth I. PARGAMENT, The bitter and the sweet – An evaluation of the costs and benefits of religion, 168–181.

³⁶ Cf. Amy P. WEBB – Christopher G. ELLISON – Michael J. Mcfarland – Jerry W. LEE – Kelly MORTON – James WALTERS, Divorce, religious coping, and depressive symptoms in a conservative protestant religious group, *Family Relations*, 59 (2010) 5, 544–557.

typically alleviate maladjustment, while maladaptive strategies may exacerbate it.³⁷

Overall, positive religious coping is more prevalent than negative, which is encouraging given the substantial evidence linking spirituality with effective coping with psychological and physical challenges. Research demonstrates that positive religious coping mechanisms confer numerous benefits, including reducing emotional distress and enhancing overall well-being. Individuals who predominantly utilize positive religious coping strategies tend to exhibit lower stress levels and improved mental health, as evidenced by a reduction in depressive symptoms and anxiety.³⁸

3. Relational psychotherapy and the relationship with God

A secure and safe attachment relationship to God is a vital component of religious coping with distress, and an important element to be integrated into psychotherapeutic practice. A personal and profound relationship with God can play a key role in relationally oriented psychotherapy, where relationships constitute the primary therapeutic instrument.

3.1. Relation-oriented psychotherapy

Unlike classical psychoanalysis, relation-oriented psychotherapy examines the individual within the context of a relational matrix, where interpersonal dynamics shape the individual's psychological structure. Humans are not primarily creatures of drives and instincts; instead, they are inherently relational beings. Drives and instincts serve relational functions. Numerous researchers and psychoanalysts, including Winnicott, Klein, Fairbairn, Sullivan, Bion, Kohut, and Bowlby, have emphasized the innate social nature of the child's world and the critical role of relationships in human development. Primary relationships within the family unit hold particular significance, as their dynamics profoundly influence how individuals establish, maintain, and navigate relationships throughout life. This is now a widely accepted psychological par-

³⁷ Cf. Elizabeth J. KRUMREI – Annette MAHONEY – Kenneth I. PARGAMENT, Spiritual stress and coping model of divorce – a longitudinal study, *Journal of Family Psychology*, 25 (2011) 6, 973–985.

³⁸ Cf. Kenneth I. PARGAMENT – Nalini TARAKESHWAR – Christopher G. ELLISON – Keith M. WULFF, The relationships between religious coping and well-being in a national sample of presbyterian clergy, elders, and members, *Journal for the Scientific Study of Religion*, 40 (2001) 3, 497–513.

adigm from which numerous contemporary authors and psychotherapeutic models derive when discussing and researching family dynamics and the causes of behavioural disorders and dysfunctional relationships.³⁹

The initial steps in the development of relation-oriented psychotherapy can be traced back to the first generation of post-Freudian therapists, who challenged the suitability of the medical or classical psychoanalytic linear conceptualisation of the individual. They sought to explore the influence of primary relationships on the development of an individual's psychic structure. As a result of these discoveries, the relational paradigm was born, facilitating a shift in our understanding of the human psychic structure and its functioning.⁴⁰ The fundamental premise of relational psychotherapy is that the individual cannot be fully understood in isolation, but rather within the broader context of their interpersonal relationships. In such a context, the psychotherapeutic relationship between the therapist and the person undergoing psychotherapeutic treatment also undergoes a transformation, with the therapist's willingness to engage in a personal manner with the relationship assuming greater significance. The relational turn frees the psychotherapist from the constraints of traditional models, allowing for a more human and accessible approach. It establishes new boundaries and self-regulation within the therapeutic relationship, necessitating the recognition of verbal and nonverbal communication. Furthermore, it emphasises the co-creation of the therapeutic relationship between therapist and client.41

'Relational psychotherapy' represents various psychotherapeutic approaches that are based on the relational paradigm, which highlight the critical role of interpersonal relationships and the dynamics that occur between therapist and client. The premise of this approach is the recognition of the pivotal role that interpersonal relationships play in human development, mental health, and well-being. The approach is based on a synthesis of diverse schools of psychotherapy, with particular reference to psychoanalytic theory, object-relational theories and attachment theory.⁴²

³⁹ Cf. Christian GOSTEČNIK, Sodobna psihoanaliza, Ljubljana, 2002.

⁴⁰ Cf. Katarina KOMPAN ERZAR, Vlóga primarnih odnosov in navezanosti v razvoju posameznika, in: *Bogoslovni Vestnik*, 66 (2006) 1, 137–150.

⁴¹ Cf. Beatrice BEEBE – Frank LACHMANN, The Relational Turn in Psychoanalysis, in: *Contemporary Psychoanalysis*, 39 (2003) 3, 379–409.

Cf. Christian GÖSTEČNIK – Tanja REPIČ, Relational Marital Paradigm, in: American Journal of Psychotherapy, 63 (2009) 1, 2–12; Christian GOSTEČNIK – Tanja REPIČ SLAVIČ – Tanja PATE – Robert CVETEK, Sanctity of the Body and the Relational Paradigm, in: Journal of Religion and Health, 54 (2015) 6, 2073–2085.

The fundamental principle of relational psychotherapy is that an individual's development and character are shaped by the relationships they form with others. This implies that past experiences, particularly those with primary caregivers during early childhood, are pivotal in determining an individual's personality and behavioural patterns. These early interactions influence an individual's capacity to form and sustain healthy and fulfilling relationships in adulthood.⁴³

In relational psychotherapy, the therapeutic relationship between therapist and client is of paramount importance. The therapist aims to create a secure and confidential space where clients can express their thoughts and feelings without fear of judgement or criticism. This safe environment allows clients to examine early relational experiences and identify maladaptive patterns of behaviour and emotion. The therapist's own responses and feelings serve as valuable tools for understanding the client's inner world and the dynamics within the therapeutic relationship.⁴⁴

Furthermore, the concept of 'mutuality' between therapist and client is a fundamental tenet of relational psychotherapy. This signifies that the therapist is not merely an observer and analyst, but also an active participant in the therapeutic process. This approach permits more profound and genuine interactions, during which the client may acquire novel approaches to interpersonal relationships.⁴⁵ The tenets of relation-oriented psychotherapy place significant emphasis on the value of authentic contact, empathy, and compassion, as well as the recognition and understanding of the client's subjectivity. The therapist's capacity to establish a secure and supportive relationship in which the client feels heard, understood, and accepted is pivotal to the efficacy of the therapeutic process.⁴⁶ Relational psychotherapy, therefore, offers a more profound comprehension of the individual's inner world and interpersonal dynamics, which can potentially facilitate enduring transformation and personal growth.

A therapeutic relationship based on genuine contact and empathy facilitates change in the client by providing them with the perception that they are understood at any given moment. This is complemented by the sense that

⁴³ Cf. Stephen A. MITCHELL, Relationality: From Attachment to Intersubjectivity, Hillsdale, 2000.

⁴⁴ Cf. Lewis ARON, A Meeting of Minds: Mutuality in Psychoanalysis, Hillsdale, 2001.

⁴⁵ Cf. Jessica BENJAMIN, Beyond Doer and Done To: An Intersubjective View of Thirdness, in: *The Psychoanalytic Quarterly*, 73 (2004) 1, 5–46.

⁴⁶ Cf. Lewis ARON, A Meeting of Minds: Mutuality in Psychoanalysis.

the therapist is genuinely present open to connection, not only through verbal communication but also through non-verbal cues. The unconscious experience is made conscious, thereby facilitating change.⁴⁷ This experience serves to diminish the client's existential loneliness, as they come to perceive that, despite the experiences they have accumulated throughout their lifetime, it remains possible to form a connection with another individual, a possibility that may have been absent in their previous relationships. Furthermore, when an individual experiences another person as genuinely present and available for connection, their experience undergoes a spontaneous transformation. In this process, new feelings are awakened, which often become more intense, are then transformed and finally resolved in the experience in a less intense form.⁴⁸ It could be argued that a person does not have to externalise such painful feelings in a disruptive manner in other relationships. By translating feelings into words, these difficult feelings become less overwhelming and destructive because they become more manageable, and thus relationships become more mature.49

3.2. Relationship with God in therapy

In the context of relational psychotherapy, an individual's relationship with God can play a significant role, particularly for those whose spirituality is a central aspect of their lives. Relational psychotherapy recognizes the multifaceted nature of human relationships, encompassing not only interactions with other individuals but also with higher entities, such as a higher power or a spiritual entity. Spiritual relationships have the potential to serve as a source of strength, comfort, and meaning, particularly in times of distress. Consequently, the relational therapeutic process often involves exploring how a client's relationship with God affects their emotional and psychological well-being.⁵⁰

It is imperative that therapists respect their clients' spiritual perspective and, when relevant, integrate this dimension into therapy. Therapists can sup-

⁴⁷ Cf. Daniel N. STERN – Alexander C. MORGAN – Jeremy P. NAHUM – Louis W. SAND-ER – Nadia BRUSCHWEILER-STERN – Karlen LYONS-RUTH, Change in Psychotherapy: A Unifying Paradigm, New York, 2010.

⁴⁸ Cf. Diana FOSHA, Dyadic Regulation and Experiential Work with Emotion and Relatedness in Trauma and Disorganized Attachment, in: Marion F. SOLOMON – Daniel J. SIEGEL (eds.), Healing Trauma: Attachment, Mind, Body and Brain, New York, 2003, 221–281; Allan N. SCHORE, Affect Regulation and the Repair of the Self, New York, 2003.

⁴⁹ Cf. Christian GOSTEČNÍK – Tanja REPIČ, Relational Marital Paradigm, 2–12.

⁵⁰ Cf. Kenneth I. PARGAMENT, Spiritually Integrated Psychotherapy, 10–11.

port clients in examining how their faith and relationship with God influence their interpersonal relationships and contribute to their healing and personal growth. In this process, spirituality is regarded as a vital component of the individual's identity and life experiences.⁵¹ The therapeutic dialogue may include exploring how feelings such as trust, love, forgiveness, and belonging – attributes the client ascribes to God – affect their relationships and emotional healing. ⁵²

For clients who have experienced profound relational trauma, it is vital that they are able to engage in a relationship that is characterised by safety and acceptance. This experience may be provided by the therapist, another individual in the client's life, or a spiritual entity, such as God. This is particularly crucial for those who have a profound and enduring relationship with God and have integrated this into the core of their identity (e.g., an ordained person, a religious individual undergoing therapy). A secure relationship with God within a therapeutic setting frequently entails episodes of loss, rejection (such as divorce), the overcoming of addictions, the healing from abuse and violence etc.⁵³

In this journey of recovery, clients often turn to God for support, employing positive religious coping strategies.⁵⁴ During moments of vulnerability, in their relationship with God, from the perspective of attachment activation, they seek a secure base and a safe haven.⁵⁵ A sense of acceptance, and thus of worth and dignity, enables the establishment of a new sense of security and self-reliance, and greater strength to take further steps in life.⁵⁶ The act of turning to spirituality brings people into contact with a higher power, which

⁵¹ Cf. Jeanne M. SLATTERY – Crystal L. PARK, Meaning Making and Spiritually Oriented Interventions, in: Jamie D. ATEN – Mark R. MCMINN – Everett L. WORTHINGTON Jr. (eds.), Spiritually Oriented Interventions for Counseling and Psychotherapy, Washington, 2011, 15–40.

⁵² Cf. Kenneth I. PARGAMENT, Spiritually Integrated Psychotherapy, 12.

Cf. Saša POLJAK LUKEK – Tanja PATE – Christian GOSTEČNIK, Physical Violence and Scapegoating Within the Family: An Exploration of Biblical Texts and Contemporary Psychology, in: Journal of Religion and Health, 62, (2023) 4, 2638–2655; Saša POLJAK LUKEK – Barbara SIMONIČ, Spiritual and Religious Factors of Recovery from Alcoholism, in: Bogoslovni vestnik, 82 (2022) 2, 469–483; Barbara SIMONIČ, The Importance of Dignity and Faith in God in Women in the Process of Coping with Intimate Partner Violence, in: SOTER: Journal of Religious Science, 76 (2020) 104, 41–52; Barbara SIMONIČ – Nataša RIJAVEC KLOBUČAR, Experiencing Positive Religious Coping in the Process of Divorce: A Qualitative Study, in: Journal of Religion and Health, 56 (2017) 5, 1644–1654.

⁵⁴ Cf. Kenneth I. PARGAMENT, Spiritually Integrated Psychotherapy, 260–270.

⁵⁵ Cf. Lee A. KIRKPATRICK, Attachment, Evolution, and the Psychology of Religion, 52–74.

⁵⁶ Cf. Ivan PLATOVNJAK, Divorce and Remarriage of the Divorced as a Step toward Engaging in a Life with Christ and the Church? In: Bogoslovni vestnik, 75 (2015) 3, 475–485;

is perceived as being in control. This provides a greater sense of security and certainty about the future.⁵⁷ This sense of unconditional acceptance from a higher power can be profoundly transformative.

In this context, it is crucial to understand how the client experiences a genuine and personal relationship with God and how this relationship contributes to their sense of relational healing. Those with a secure attachment style tend to view God as a source of security, love, protection and support. Furthermore, they may also make progress in addressing unmet relational needs, including those related to security, a sense of significance in the relationship, acceptance by a stable and protective person, validation of personal experience, increased self-awareness, a sense of mutuality and the expression of love.⁵⁸ In the course of recovery in this personal relationship with God, individuals seek assistance from God through the utilisation of positive religious coping strategies.⁵⁹ In instances of vulnerability, they seek a secure base and shelter. A sense of acceptance, worth and dignity facilitates the establishment of a new sense of security, self-reliance and strength for future endeavours.⁶⁰ The act of turning to spirituality serves to connect individuals with a higher power, thereby providing them with a heightened sense of security and certainty regarding the future.⁶¹ Such individuals experience a sense of unconditional acceptance from a higher power, despite their imperfections and shortcomings. They perceive this entity as a source of support, elevation, and salvation. A secure and profound relationship with God cultivates self-esteem and positive emotional states, such as feelings of being loved and forgiveness.⁶² Simultaneously, an individual may experience a sense of reliance on unwaver-

Barbara SIMONIČ – Nataša RIJAVEC KLOBUČAR, Experiencing Positive Religious Coping in the Process of Divorce: A Qualitative Study, 1644–1654.

⁵⁷ Cf. Janice Bell MEISENHELDER, Terrorism, Posttraumatic Stress, and Religious Coping, 771–782.

⁵⁸ Cf. Saša POLJAK LUKEK – Barbara SIMONIČ, A Healing Relationship: The Role and Meaning of Spirituality in the Recovery Process from Alcohol Addiction, in: Josip BOŠNJAKOVIĆ – Drago JEREBIC (eds.), U kakvog Boga ljudi danas vjeruju odnosno ne vjeruju? / V kakšnega Boga ljudje danes verujejo oz. ne verujejo?, Đakovo – Osijek, 2023, 203–217.

⁵⁹ Cf. Pehr GRANQVIST – Lee A. KIRKPATRICK, Attachment and Religious Representations and Behavior, 906–933.

⁶⁰ Cf. Barbara SIMONIČ – Nataša RIJAVEC KLOBUČAR, Experiencing Positive Religious Coping in the Process of Divorce: A Qualitative Study, 1644–1654.

⁶¹ Cf. Janice Bell MEISENHELDER, Terrorism, Posttraumatic Stress, and Religious Coping, 771–782.

⁶² Cf. Melissa L. MILLER – Stephen M. SAUNDERS, A Naturalistic Study of the Associations between Changes in Alcohol Problems, Spiritual Functioning, and Psychiatric Symptoms, in: *Psychology of Addictive Behaviors*, 25 (2011) 3, 455–461.

ing guidance (e.g., through listening to God's Word) and the belief in support even when courage is depleted.⁶³

Nevertheless, this relationship is not without its challenges, particularly when the individual exhibits a non-secure attachment to God. This can manifest in various ways, such as a lack of trust in God's benevolence, a perception of divine retribution, and a sense of undeserved suffering. In such instances, it is also appropriate to incorporate elements of spiritual guidance for spiritual growth, with the objective of facilitating the transformation of the distorted perception of God's love.⁶⁴

The relationship with God and His image is not solely formed at the doctrinal level; it is also formed at the experiential level.⁶⁵ The individual's relationship with God is not solely a conscious experience; it is also an emotional one, based on implicit perception and influenced by affect and action, rather than on words or symbols. During periods of vulnerability, such as recovery from traumatic experiences, consciousness and the body are particularly susceptible to new explicit and implicit experiences.⁶⁶ In such moments, individuals are aware of their relationship with God and are open to forming a new implicit relationship with Him. The interpretation and understanding of conscious information results in its reorganization, while the alteration of experiential experience gives rise to a shift in implicit relational awareness and the so-called »shared implicit relationship«.⁶⁷

In relational psychotherapy, the recovery process fosters the development of a new explicit understanding of spirituality and an intrinsic, implicit relationship with the divine. A secure relationship with God enables clients to regulate inner distress, respond to painful emotions, cope with stress, and meet relational needs. This results in a transformation of early models of regulation and the autonomic nervous system, integration of consciousness, brain

⁶³ Cf. Wendy WADE, Catholic Mass and Its Healing Implications for the Addicted Person, in: Substance Use & Misuse, 48 (2013) 12, 1138–1149.

⁶⁴ Cf. James L. GRIFFITH, Religion That Heals, Religion That Harms, New York, 2010.

⁶⁵ Cf. Edward B. DAVIS – Pehr GRANQVIST – Carissa SHARP, Theistic Relational Spirituality: Development, Dynamics, Health, and Transformation, in: *Psychology of Religion and Spirituality*, 13 (2021) 4, 401–415.

⁶⁶ Cf. Robert CVETEK – Christian GOSTEČNIK – Tanja PATE – Barbara SIMONIČ – Tanja VALENTA – Tanja REPIČ SLAVIČ, Spirituality and Psycho-Organic Regulation, in: The Person and the Challenges, 8 (2018) 2, 147–166.

⁶⁷ Cf. Daniel N. STERN – Alexander C. MORGAN – Jeremy P. NAHUM – Louis W. SAND-ER – Nadia BRUSCHWEILER-STERN – Karlen LYONS-RUTH. Change in Psychotherapy: A Unifying Paradigm, 1–5.

and body⁶⁸, and formation of new implicit relational perceptions.⁶⁹ It can therefore be posited that a relationship with God in the context of relational psychotherapy facilitates a transformation in behaviour and emotional experience, culminating in a novel state of consciousness and spiritual awakening.⁷⁰

3.3. Case illustration: Processing the pain of rejection and the relationship with God in relational psychotherapy

The following case illustrates the application of relational psychotherapy in addressing the pain of rejection and its relationship with spirituality. It presents a description of a therapeutic process with a client who was experiencing the pain of rejection after a divorce. In the client's therapeutic process, the exploration of attachment wounds proved instrumental in elucidating her past patterns of behaviour. Furthermore, her relationship with God constituted a vital source of inner support, security and transformation. The separation from her partner triggered a deep personal crisis for her, as the relationship was already closely linked to her past attachment wounds and patterns. The exploration of relationships and emotional patterns in therapy revealed that her life had been characterised by a search for security, pursued at any cost, which had resulted in her involvement in violent relationships and the repetition of traumatic patterns from her childhood.

3.3.1 Description of the client's situation

The client, aged 34, sought therapeutic treatment following a divorce from her husband, with whom she had been in a long-term violent relationship. The couple separated following a prolonged period of severe physical and psychological abuse. By leaving her partner, she had taken an important step towards her own security. However, she was still plagued by deep-seated feelings of defeat and inadequacy, which led her to believe that her efforts to love were in vain. Concurrently, her desire for security was becoming more pronounced in her relationship with God, where she found solace and a sense of security. Her spiritual practice, comprising regular attendance at Mass and prayer, en-

⁶⁸ Cf. Diana FOSHA, Dyadic Regulation and Experiential Work with Emotion and Relatedness in Trauma and Disorganized Attachment, 221–281.

⁶⁹ Cf. Daniel N. STERN – Alexander C. MORGAN – Jeremy P. NAHUM – Louis W. SAND-ER – Nadia BRUSCHWEILER-STERN – Karlen LYONS-RUTH. Change in Psychotherapy: A Unifying Paradigm, 1–5.

⁷⁰ Cf. Helen DERMATIS – Marc GALANTER, The Role of Twelve-Step-Related Spirituality in Addiction Recovery, in: *Journal of Religion and Health*, 55 (2016) 2, 510–521.

abled her to connect with a higher meaning, thereby providing her with hope and a sense of belonging that she was unable to find in her relationships with people.

3.3.2. The Experience of relational trauma and emotional distress in the context of divorce

The client's distress following her divorce was profound, rooted in a pervasive sense of rejection that had accompanied her throughout her life. In the psychotherapeutic process, it became evident that the pattern of attachment to her partner was closely linked to her childhood experiences and her difficult relationships with her parents, particularly her mother, who was physically and psychologically abusive. She frequently sought solace in her religious beliefs and in her relationship with God, where she felt a sense of acceptance. "In my relationship with God, I experience a sense of acceptance and belonging. It is a source of gratitude that God is incapable of rejecting us." In the therapeutic process, these spiritual experiences played a vital role in her healing process, as they enabled her to transcend her previous dependency on relationships that had caused her pain and to redefine her self-worth through the lens of God's unconditional acceptance.

Despite her firm decision to divorce, the client initially exhibited emotional distress, manifesting as idealisation, characterised by repeated assertions that her situation might finally improve, a form of optimism regarding the future that had previously shielded her from confronting her pain. Therapy gradually dismantled this protective mechanism, encouraging her to face the reality of her anguish. The client's relationship with God played a pivotal role in this process, as she was able to surrender her suffering to Him, entrust it to God's love, and find the strength to face her feelings of betrayal and rejection. »It's as if I've been throwing my whole life into one barrel, and now when I look into it, there's nothing there... it's as if there's one black hole where everything has been sucked in and lost.« When she expressed this sadness and shared it with God, she found comfort and slowly began to free herself from the false responsibility she bore for the abuses she had experienced.

3.3.3. Past abuse and trauma

The therapeutic process was primarily focused on exploring the client's family relationships, which were characterised by abuse and manipulation, particularly from the client's mother. She was unable to establish a healthy sense of

security and self-worth in these relationships, which resulted in the development of a pattern of seeking validation "at any cost" in adulthood, even in relationships that exploited and abused her. Amid profound loneliness, she found solace in her religious beliefs. The act of offering her suffering to God became a source of reassurance for her. "If one does not wish bad things and yet bad things happen to one, then there must be some meaning in it." Her faith enabled her to ascribe meaning to her suffering, which alleviated the burden of her experience while simultaneously enhancing her resilience.

3.3.4. The therapeutic process

In therapy, the client and therapist began to identify unconscious patterns in her behaviour and thinking, many of which were driven by a fear of rejection. The therapeutic process, with its spiritual perspective, enabled the client to confront her grief and shame, which she had been avoiding for years. A critical moment in the therapeutic process was when the client reached a point where she was able to move beyond the role of victim and embrace the identity of a survivor, a person who is capable of love and respect. Having recognized that she was already cared for by a higher power, she found a new sense of belonging, no longer in submission but in inner strength and acceptance.

3.3.5. Conclusion of the therapeutic process

Upon completion of the therapeutic process, the client exhibited significant stability, maturity, and empowerment. Throughout the course of treatment, her relationship with God served as a foundational element, upon which she was able to establish a sense of self-worth that she had previously lacked. As a result of the therapeutic process, the client developed a sense of self-worth and the capacity to form and maintain healthy relationships. She commenced the process of consciously protecting her vulnerability, thereby realising that this was not a sign of weakness but, rather, constituted the most precious aspect of her being. Her faith, which had sustained her during challenging times, continued to be her primary source of security, acceptance and spiritual solace. She articulated this by stating, *»If I believe that God loves me, that is good for me.«*

3.3.6. Interpretation

The client experienced her relationship with God as a source of comfort and strength, facilitating from personal and relational wounds. In relational psy-

chotherapy, this relationship was identified as a key source of safety, acceptance and meaning, enabling her to navigate difficult emotions, including feelings of rejection and insecurity that may have resulted from past traumatic experiences. As spirituality was central to her life, the therapist contributed to a holistic approach by integrating her relationship with God, recognising that her recovery was also based on recognising God's unconditional love and forgiveness.

In this process, the therapist respected her spiritual perspective and encouraged her to explore how her faith and connection to God provided a secure base in moments of vulnerability, enabling her to transform her own image of worth and dignity. The therapeutic process enabled her to establish new implicit relational perceptions, where the sense of acceptance she experienced in her relationship with God was implicitly carried over into her interpersonal relationships. Thus, the therapeutic integration of her relationship with God fostered her inner self-reliance and spiritual security, leading to a greater sense of stability, strength and purpose for the next steps in her life.

Conclusion

A relationship with God can serve as a secure foundation for the practice of relational psychotherapy. Integrating spirituality and a personal relationship with God into the therapeutic process can enhance the understanding and practice of relational psychotherapy. The psychological benefits of this perceived relationship often include feelings of safety and security. Research indicates that many individuals perceive their relationship with God as a secure attachment base, providing them with a profound sense of love and safety. Moreover, attachment theory posits that once fundamental security requirements are met, individuals may pursue growth, exploration, and activities oriented externally. This is also relevant for religious coping with stress, which also plays a key role in the recovery processes in relational psychotherapy.

Of. Pehr GRANQVIST – Lee A. KIRKPATRICK, Attachment and Religious Representations and Behavior, 906–933; Pehr GRANQVIST – Mario MIKULINCER – Phillip R. SHAVER, Religion as Attachment: Normative Processes and Individual Differences, 49–59; Lee A. KIRKPATRICK, Attachment, Evolution, and the Psychology of Religion, 52–74.

Cf. Pehr GRANQVIST – Mario MIKULINCER – Phillip R. SHAVER, Religion as Attachment: Normative Processes and Individual Differences, 49–59; Julie J. EXLINE – Joshua A. WILT, Not Just Love and Safety, but Excitement, Energy, Fun, and Passion: Relational Predictors of Gratitude to God and Desires to 'Pay It Forward', 107–120.

Sažetak ODNOS S BOGOM KAO SIGURNA BAZA U RELACIJSKOJ PSIHOTERAPIJI

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Formiranje sigurne privrženosti s Bogom bitan je element u procesu religioznog suočavanja sa stresom. Ovo je ključni aspekt koji se mora integrirati u psihoterapijski proces. Ovaj rad predstavlja interdisciplinarni pristup koji naglašava važnost duhovnog aspekta u terapijskom radu. Oslanja se na teorijske temelje teorije privrženosti i religijskog suočavanja kako bi istražio kako odnos s Bogom može postati sigurna polazna točka u relacijskoj psihoterapiji i kako se duhovnost može integrirati u terapijski proces. Pritom otvara raspravu o odnosu vjere, psihološkog blagostanja i učinkovitih terapijskih pristupa koji mogu obogatiti razumijevanje i praksu relacijske psihoterapije.

Ključne riječi: psihoterapija, religijsko suočavanje, privrženost Bogu, odnosi, teorija privrženosti