

Co-Pilgrimage and Presence: An Eastern Orthodox Perspective for Pastoral Supervision

David W. Alexander

Summary

Writing from an Orthodox perspective, the author uses the metaphor of co-pilgrimage to identify the process of supervision and counseling with those who are looking for something—healing, or rest, or the rekindling of a relationship with God that has grown distant—in other words, a transformation.

In the Eastern Orthodox tradition, a pilgrimage is something undertaken with a distinct trajectory or *telos*. The pilgrim fixes his or her expectations on a meeting with God, most often to take place in the presence of one of his saints, who acts as a host for the meeting. The destination of this meeting is on one level a fixed geographical point, as in the home of a miracle-working icon, or a holy relic, or simply a place where a saint has lived and loved God, but on another level it is a state of being in which communion becomes possible. The journey to the meeting or destination, which obviously has a geographical trajectory, is also an inner journey in which the person is being prepared for the dialogue of the meeting itself. That preparation is the process of cultivating an inner stillness, which the Orthodox *Hesychastic* tradition describes as the transformation of a person into a “living ear,” preparing the person to hear the Beloved’s voice with all his or her attention bound together in quiet anticipation.

A pilgrimage is undertaken by those who are looking for something—healing, or rest, or the rekindling of a relationship with God that has grown

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distant—in other words, a transformation. I have been on several pilgrimages myself and I have not undertaken any of them alone. Pilgrimage most often places a person in juxtaposition with others who are moving toward the same destination in the hopes of transformation. In Orthodoxy, we call this co-pilgrimage, and it is often unavoidable even if we would choose to avoid it. Pilgrims find themselves on the same road, heading towards the same meeting, but often needing different things. In the process of walking and preparing together, fellow travelers can all be changed. Even as the pilgrims aid in the preparation of others, they themselves are aided in their preparation so that everyone together is more prepared to encounter the Beloved in the end.

The experience of being supervised is, in my experience, not unlike being on a pilgrimage with others (co-pilgrimage). The experience of walking through my supervisory encounters with a supervisory person on my left hand, helping to guide and challenge me, and a supervisee person on my right hand, whom I am attempting to guide and challenge, brings to mind the image of three pilgrims on a road. In the end, all three of us are looking for the same meeting in our work—an encounter with God in the presence of another. In this paper I would like to share some perspectives on triadic or three-dimensional co-pilgrimage in supervised pastoral supervision from an Eastern Orthodox viewpoint. The emphasis on the development of presence allows for deep encounters among the ‘supervisory pilgrims’ with the others that in turn allow for mutual growth in the entirety of the supervisory organism.

ESTABLISHING A CO-PILGRIMAGE

My primary supervisor, J. Stephen Muse, a fellow Eastern Orthodox pastoral caregiver, insists that the co-pilgrimage of pastoral supervision is not only about walking the road together toward meeting with God. For him, it is on the road that God often appears to co-pilgrims, much as he did on the road to Emmaus in the Christian tradition:

[T]he supervisor is a servant leader. She/he stands below the supervisee in terms of placing the supervisee’s welfare above her/his own. She/he stands above the supervisee hierarchically in terms of the power inherent in the evaluative relationship as well as unconsciously engendering family of origin transferences. She/he stands *beside* the supervisee, as sister or brother and friend in co-pilgrimage on the road to Emmaus.¹

According to the Gospel of Luke (24:13-35), the road to Emmaus is where Jesus appears to two people who were discussing his life and death, and whose questions came from suffering hearts turned God-wards. As Jesus, who was not initially recognized by the travelers, began speaking with them, their "hearts began to burn within them," and they ended their journey with a celebration of communion with God. This demonstration of God's willingness to meet with pilgrims not only at their destination, but also on the road, when their focus together is turned toward God, allows for the expectation of transformation in the process of the journey.

In the process of supervision, I come to a supervisee expecting that our time together will change me if I am truly present with him or her with an openness and attentiveness that will allow for a meeting of persons. My hope is that supervisees meet their clients in the same way. To really *meet* another person is to be changed in some way by the meeting, especially when one considers God present in all people. Ghandi is reported to have said once said something that is strongly resonant with the Orthodox Christian understanding of anthropology: "if you don't find God in the next person you meet, it is a waste of time looking for God any further." The encounter between co-pilgrims in pastoral supervision is made up of two parts. First, seeing oneself in the other, something we call "parallel process," is more than just avoiding transference in the relationship. It is a way to realize in our hearts the common road we are on. The second part of the meeting is centered on the chosen vulnerability of the person with power in the relationship in order to allow for true and mutual change to take place.

In their work *Psychotherapy Supervision*, Hess, Hess, and Hess discuss a fascinating perspective in "seeing" co-pilgrimage in dual and triadic processes in supervision. When working with adolescents, one of the primary tasks for clients is "learning to gain increasing levels of autonomy without losing attachment to parents..."² There is a shift toward more autonomy from and more collegiality with the supervisor that parallels the development of the adolescent client into early adulthood. The new therapist uses his or her theory and techniques in an autonomous way with the adolescent, hesitantly at first, but gaining confidence, understanding, and wisdom in the process. The new therapist cannot become too independent of the supervisor too quickly, and must be able to use supervision as a valuable tool, hopefully, throughout his or her career. As the authors say, "over the course of...the relationship [there is a] change from...unilateral authority to...mutuality and cooperation."³ The change that hopefully occurs between ado-

lescent client and parents is also happening between the new therapist of the adolescent and the therapist's supervisor. If this is true, the third level of relationship, between therapist and client, is surely moving in a similar direction also.

Although it is obvious that not all clients seen in pastoral psychotherapy are adolescents, many clients relate to their therapist in similar ways and almost all new therapists relate, at least at some level, to supervisors in an adolescent way. The supervisor, in the midst of all of these parallel processes, calls them all to mind with the therapist and works with the therapist in understanding the co-pilgrimage of supervision in which the therapist functions simultaneously as adolescent and as coach of the adolescent. As the therapist works with someone asking for help working toward a time when not so much help is needed, so the therapist in coming to the supervisor is acknowledging a need for help and working toward a time where not so much help is needed. Being attentive to this 'sandwich' process for therapists can lead to a greater awareness of co-pilgrimage with the client in which the roles between therapist and client do not degenerate in the therapist's mind toward the seductive categories of "sick person" and "expert healer," which only foster a poor therapeutic alliance and allow the therapist to *avoid* greater vulnerability with the client.

The supervisor under supervision has an opportunity to add another layer to the process by modeling this "sandwich of humility" with the therapist under his or her care, in the hope that this modeling will bear fruit at all levels of the supervisory process. As Muse writes:

Only one who receives love and care, partnering with God in tending to the wounds of others, can remain present with and for others, wielding the tools of the counseling profession without hiding behind them in order to avoid the challenge of human suffering as Job's counselors began to do after their first seven days of silent empathy.⁴

The humility of being in a parallel process with the one under one's own care is an important lesson in humility and will, if kept in mind, serve to open up greater avenues of vulnerability in the therapeutic relationship at all levels. This has been my focus in supervising Jonathan.

SUPERVISING JONATHAN

Jonathan is a very charismatic young priest who pastors a church near Washington, DC. He is physically strong and projects confidence and competence in the carrying out of his ministry. His parishioners look to him

as “expert healer” in their midst, ordained by God to wield the medicines of the Church and seemingly impervious to harm himself. In that context, Jonathan has to work very hard to cultivate and maintain a sense of co-pilgrimage with his parishioners. This has also been a central theme in his formation process as a counselor. James Pruett writes that “the central focus of both pastoral counseling and supervision is formative...developing within the context of the counselor’s faith and the supervisor’s faith, vision... and praxis.”⁵ For Jonathan, identification with the deep movement toward co-pilgrimage with humankind that God undertook in order to heal us all is something that he finds helpful in undertaking a movement in the same direction with his parishioners. In my own formation as a supervisor-in-training, my determination to model the same humility with Jonathan both forms me as a caregiver and encourages him in the same process.

Thinking about the supervisory process in its three dimensions as co-pilgrimage allows humility to be a platform in which to identify vulnerability with the other. When that happens, all kinds of growth is possible. Muse quotes a research article written by Hans Strupp entitled “The Therapist’s Theoretical Orientation: an Overrated Variable,” in which he says the following:

Techniques seem to matter less than the therapist’s personal qualities... some therapists, regardless of their theoretical orientation, length of experience, professional affiliation, etc., appeared to have these qualities, and I came to surmise (although I could not prove it) that they were better therapists. Others appeared to be noticeably deficient in this regard. They seemed to be technicians who plied a trade; they might have shrewd insights into the patient’s dynamics; they might be clever in confronting the patient with his conflicts and neurotic patterns, but they lacked a human quality I came to regard as the supreme qualification of the good psychotherapist...perhaps the principle ingredient is compassion...⁶

Compassion is not only a quality of the competent counselor. It is a distinguishing mark of a caregiver who is willing to be attentive to the client, and who is willing to stand alongside the client on the road to Emmaus as opposed to simply wielding the theories and techniques of the behavioral sciences in the therapeutic encounter. This does not always come easily to counselors, and the supervisor’s willingness and ability to model it with the supervisee can create a dyadic co-pilgrimage that encourages the supervisee to invite his or her clients to the road with attention turned God-ward. This highlights my need for co-pilgrimage exactly at all levels of care and supervision. A movement toward co-pilgrimage allows the person in a position

of power in the therapeutic encounter to really *see* the other, experiencing identification with the vulnerability of the other, and this gives birth to compassion—an essential ingredient and, perhaps, even the key to healing in the therapeutic encounter.

What holds Jonathan back from compassion? It is certainly not an unwillingness to give his time, energy, and attention to his parishioners and pastoral counseling clients. In fact, it may be just the opposite. Jonathan can sometimes give himself wildly to his flock in order to feel like a compassionate caregiver and to feel indispensable. He can often deny his own needs by throwing himself into greater and greater service to them, while all the while they praise him for doing so. Of course, in this cycle he is not truly available to them in vulnerability, which is most evident when he meets those in his care who have no choice but to come to him in their own vulnerability, broken and afraid, and feeling unable to find a place to stand in their grief, sorrow, and despair. For Jonathan, it is easy to give them hours and hours of his time, sometimes even ignoring boundaries in order to reinforce his self-image as the seemingly perfect caregiver. It is much more difficult for him to come to them in his own vulnerability, which is often clouded with the shame of having his own needs, pain, and the personal horror of not knowing how to solve every problem for every person he sees—all of which, if owned in his encounters, might allow him just the kind of openness that could foster true empathic and compassionate care to the people who need him the most.

It is in this place of shame—the shame of having his own needs and vulnerabilities—that I believe God waits for Jonathan, offering him greater healing from his own wounds. Our supervision often explores these themes when they arise, in order to increase Jonathan's awareness of the quality of his presence with clients, and sometimes in order to suggest further therapeutic exploration. However, my own ability to aid Jonathan in his attention to others is directly related to my ability to attend to him and, especially in this case, my ability to be aware of my own tendencies toward invulnerability—needing to be the seemingly perfect supervisor—when such tendencies surface. My wounds and drives are not the same as Jonathan's, but I can bring myself to our encounters in a kind of openness and focused vulnerability around areas where I might feel shame that may allow me to be in position to model the change he wants to see in himself as a therapist. Then, in turn, Jonathan can model, or "be," the change his clients want to see in themselves.

This is not easy. It takes work and it takes risk, and this is part of co-pilgrimage. The hope of change and growth is related to how I am risking, how Jonathan is risking, and how his clients are risking. I do challenge Jonathan from time to time on his application of theory and techniques, but my much greater interest lies in his presence in the counseling encounter. Consequently, it is of the greatest importance to me that my supervisory interventions take place in the context of co-pilgrimage, where I am also stretching myself to be present to him in the ways that I sense he needs to be more present with his clients. Once I have really *seen* Jonathan in his therapeutic role and moved into the pilgrimage with him, and once he has really *seen* his clients and has moved into pilgrimage with them, we are ready for the next task: an attentive presence to the other, marked with stillness, and ready for *I-Thou* dialogue.

BUILDING PRESENCE

Wicks, Parsons, and Capps teach that the “basic rule of pastoral counseling is, of course, *be there*. Be present...offer presence [as] hospitality.”⁷ They go on to explain presence as “the capacity to hear” the other in the context of an authentic dialogue.⁸ Martin Buber may have understood the concept of presence to the other in an encounter as well as any writer in modern memory, and he describes presence as not only a capacity to “hear,” but the capacity to experience oneself in relation to another and to place oneself fully into this experience, dimming awareness of all else—remaining only attentive to the encounter and the space in which the encounter takes place.⁹ The development of true presence in the counselor is complicated for many reasons; the inability to let go in the moment of thoughts of the past or thoughts of the future, tasks at hand, clinical preoccupations, and counter-transferential images and storylines that arise during the encounter. The danger in being absent or less-than-present, as Wicks et al. imply above, is to be inhospitable to the client by being internally “full to capacity” with the guests of one’s own inner dramas and preoccupations. It is to be unable to hear with all of the perception available in the present moment. It is to experience *oneself in relation to oneself* in the presence of the other, rather than truly experiencing oneself in relation to the other—a condition that Buber describes as “monologue presented as dialogue”—having the outside semblance of attentiveness, but none of the inner quality.¹⁰

In their groundbreaking image of the “clinical rhombus,” or the collection of parallel processes in the supervisory clinical environment, Ekstein and Wallerstein stress the importance of presence at all levels of the clinical supervisory process—the presence of supervisor to therapist, therapist to client, client to therapist, and therapist to supervisor—as a superstructure in which the mutual presence of three or more people “hover” together in a single space during the session.¹¹ While this concept may be overstated, it does describe the mystery of multiple levels of interested people being attentive and present to one another simultaneously in the process of a healing encounter. Just as we described the trickle-down concept of developing a sense of co-pilgrimage throughout the levels of the supervised clinical encounter, cultivating presence in his or her relationship with the therapist-supervisee is an important part of the process. This may include challenging the therapist-supervisee to practice replicating this work of presence in relationship to clients, which would hopefully work to increase the client’s own ability to be present with others in relationship.

My own supervisor is adept at noticing when I am not present. One of my “tells” of lost presence between us is that, while he is making an observation, I look briefly down and quickly shake my head before looking back up. I use the word “tell” in much the same way as a professional poker player might, referring to a non-verbal communication that betrays an inner change in disposition, alerting the observer to the change and inviting interpretation or exploration. As Dr. Muse catches my “tell,” he stops in the middle of what he is saying, draws attention to my body movements, and asked what just happened—“Where did you go just then?” I am forced to become aware of having just made these movements, to find what brought the movements on, and to search to find the context for my loss of presence in this encounter with him as a supervisee.

It is my supervisor’s constant eye on my ability to be present—coming from his presence and awareness of the tiniest changes in my body language, eyes, voice tone and texture—that prompts me to dig down and map my own subterranean struggle to be truly attentive to another human being. He understands that his work as a supervisor is “to help therapists, loaded down with counseling theories, diagnoses, and HMO requirements for demonstrating evidence-based therapeutic approaches and behaviorally-based treatment plans, reawake to the mystery of human persons by encountering others in the presence of the Living God.”¹² Informed by the work of Buber and the *Hesychastic* fathers of the early Christian desert, this

emphasis has forced me to confront the number of ways in which I am not present to clients, being concerned with other things while sitting right in front of them in a session—from making a “proper diagnosis,” to forming a proper “treatment plan,” to being distracted by all kinds of motivations outside of encountering the person in front of me with attentive, dispassionate love. Growing in understanding of how to be truly attentive—how to encounter another person as a mystery and to reach past my own busy anxieties in “trying to be helpful” long enough to actually *be* with another person in pain—goes far beyond the ability to gain an outside composure that projects attentiveness, which we as caregivers learn so quickly along the way in our training. Like a sacred pilgrimage, learning to be present is an inner journey that prepares me for the dialogue of meeting.

The constant focus on presence teaches me two things. First, I am able to become more aware of my loss of presence in an encounter because my supervisor stops to explore my “tells.” The more often and more readily, I am able to experience breaks in presence when they are happening and identify what the Eastern Orthodox tradition calls *logismoi*-like opportunities for distraction, the more I can slowly begin to grow in this area and increase my ability to be present to the other. Secondly, I am able to become more sensitive to the concept of presence in my own work of supervision. Because this technique—born from the privileged priority of presence in my supervisor’s outlook on pastoral psychotherapy—is used so often on me in supervision, I have sought to use it with my supervisees as well.

When Jonathan describes working with a young woman in his parish who has been the victim of emotional abuse, his pupils dilate and he begins slowly stroking his arm. When I observe his ‘tell’, I find myself challenging him immediately: “Where did you go just then?” As he describes his relationship with this woman, to whom he is sexually attracted during counseling sessions, we are able to connect the stroking of his arm to a feeling he was having within himself in his sessions with this woman and address these feelings directly. The hope is that Jonathan, learning to bring this same aspect of presence—attentive, proprioceptive, grounded, and embodied experience of himself and the other in the moment—to his own encounters, will in turn help his clients to experience presence in their relationships as well. Muse writes about this aspect of supervision in the following way:

Modern studies of the plasticity of the brain functions which grow toward accommodation of repeated thought patterns...[are] congruent with the perspective that change and transformation in therapy and supervision

are the result of *experiencing and owning one's experience in the presence of the other and choosing...* consciousness of one's self—body, mind, thoughts, and feelings...must occur again and again over a lifetime for growth to occur."¹³

As I learn again and again to confront my loss of presence in dialogue with the other and as I fully own my responsibility for this absence, working to overcome it, my struggle for greater presence will inevitably pass down as a legacy to my supervisees. This legacy will manifest as my increased presence with them, providing greater opportunities for challenging them in our co-pilgrimage toward greater efficacy in care and as a model for their own commitment to the struggle with presence. Pilgrims help one another be prepared by being present with one another.

One final, and crucial, piece of the puzzle in developing presence in supervision is something Archimandrite Meletios Webber describes as the divinized aspect of presence. He teaches that the person in the moment, not lost in distractions, is "capable of constant awareness of God," and is able in this sense to "experience the Kingdom of Heaven...only now."¹⁴ My supervisor, S. Muse, refers to this phenomenon as being constantly available in dialogue with the other, for those who have eyes to see. He suggests that while we are present to each other in the moment in dialogue, and when an awareness of the presence of God is available to us, a *trialogue* is formed: "It is in dialogue with others where God appears in between, making it a triologue [in which] healing occurs and meaning and purpose are restored."¹⁵ In the field of pastoral psychotherapy and supervision, the *trialogue* of the encounter is the ultimate end to which we work to be present. From the Christian Tradition, the famous Matthean passage records Jesus telling us that "where two or three are gathered in My name, there I AM in the midst of them."¹⁶ The presence that develops between supervisor and therapist-supervisee can become *trialogue* when the ever-available awareness of God is accessed, causing the relationship to become a place where true transformation and healing can occur.

SUMMARY

The success and efficacy of the three-dimensional relational process of supervision and the four-dimensional relational process of supervision under supervision (training supervisor-supervisor-therapist-client) requires much from each person involved. Each person involved must be willing, in hu-

mility and self-confrontation of egoistic passions, to join in co-pilgrimage with another human being. In the case of seeking care, whether in therapy or supervision, this includes allowing someone else to take the lead in the co-pilgrimage. Barry Estadt would call this leading by a “half step,” which I think is a helpful description of the idea.¹⁷ In the case of offering care—whether in therapy or supervision—this includes a willingness to remain very close to the co-pilgrim in relational vulnerability, and to limit the “gap” of vulnerability in such a way that allows for an openness to emerge in the other. In any case, the co-pilgrimage requires mutual vulnerability, which is difficult and itself requires perspective and constant re-inspection of motives and behavior.

If co-pilgrimage can be established, the art of presence can carry us far into the work of therapy and supervision. To give oneself to another requires self-confrontation in order to create enough space for the other to allow for real encounter. This space allows the supervisor room enough to create a setting for the birth of something new in the life of the supervisee, while realizing that his or her own transformation may be bound up with the transformation of the other. By experiencing the growth, transformative humility, and challenge of co-pilgrimage—and the humility and challenge of presence to another in therapy that leads to openness in oneself and allows for new birth—a supervisor may be able to help to create the same settings in supervisory relationships affecting all people in all dimensions in the process. This can affect a very rich potential for mutual movement and healing within a complex network of relationships, which is itself part of the work of supervision.

My first pilgrimage to a holy site in my tradition was to the ancient monastery of Saint Thecla in Ma'loula, about 50 miles northeast of Damascus. The landscape was severe, dry, and foreboding, and the weather was windy, sandy, and hot. After walking up to the site and around for the day, my feet ached, my throat was dry, my skin was pink, and I was dizzy. In the late afternoon, I sat down with a young nun who was pouring water for pilgrims to drink, and after telling her how I was feeling, she said, “But this is perfect—this is how St. Thecla felt all those years ago, standing right where you stand! Is this not pilgrimage?” I have thought about this many times since. I went on pilgrimage looking for something—looking for a connection with God—and I found myself walking in the very footsteps of a great saint of my Church, participating in the same difficulties that she had

encountered while trying to find the same connection with God some 1,900 years before. Perhaps some of the ends of my own pilgrimage were realized in discovering my co-pilgrimage with her.

This my experience in pastoral supervision: walking with others who are walking with others—and all of us searching for an encounter with the Beloved—we have the chance to see each other as co-pilgrims. Some of what we are searching for we find in each other if we are open to real encounters with each other. If we are open to real encounters, transformation is possible for all of us.

NOTES

1. Stephen Muse, *When Hearts Become Flame: An Eastern Orthodox Approach to the dialogos of Pastoral Counseling* (Rollinsford, NH: Orthodox Research Institute, 2011), 155.
2. Allen K. Hess, Kathryn D. Hess, and Tanya H. Hess, *Psychotherapy Supervision: Theory, Research, and Practice*, 2nd ed. (Hoboken, NJ: Wiley and Sons, 2008), 289.
3. *Ibid.*, 290.
4. Muse, *When Hearts Become Flame*, 158.
5. James W. Pruett, "Pastoral Counseling and Supervision Competence: A Formation Process," *Journal of Supervision and Training in Ministry* 24 (2004): 33.
6. Muse, *When Hearts Become Flame*, 159-160.
7. Robert J. Wicks, Richard D. Parsons, and Donald Capps, *Clinical Handbook of Pastoral Counseling*, Vol. 3 (Mahwah, NJ: Paulist Press, 2003), 128.
8. *Ibid.*, 129.
9. Martin Buber, *I-Thou* (London: T&T Clark Ltd., 1937), 18, 31.
10. Martin Buber, *Between Man and Man* (New York: Routledge & Kegan Paul, 1947), 38.
11. Hess et al., *Psychotherapy Supervision*, 10.
12. Muse, *When Hearts Become Flame*, 157.
13. *Ibid.*, 150.
14. Archimandrite M. Webber, *Bread and Water, Wine and Oil: An Orthodox Christian Experience of God* (Chesterton, IN: Conciliar Press, 2007), 18.
15. Muse, *When Hearts Become Flame*, 92.
16. Matthew 18:20 (NRSV).
17. Barry K. Estadt, John R. Compton, and Melvin C. Blanchette, eds., *The Art of Clinical Supervision: A Pastoral Counseling Perspective* (Mahwah, NJ: Paulist Press, 1987), 23.