

# Facilitating the Emergence of the True/Divine Self

Mariah Callison

EDUCATION THEORY

Jack Mezirow is the founder of transformative learning theory, which proposes that adult learning is “the process of using a prior interpretation to construe a new or revised interpretation of the meaning of one’s experience in order to guide future action.”<sup>1</sup> The theory explains that as we are born and experience the world, we create *meaning perspectives*. These are the basis of what we understand about ourselves and the world. Our interpretations of these experiences are the *meaning schemes* that allow us to articulate our values, beliefs, and assumptions. These include what we have learned and, as adults, guide our responses to and our interpretation of new knowledge. They impact what we know about ourselves and how we respond to life events.

When confronted with new information or experiences that are incongruent with a student’s meaning perspectives and meaning schemes, a disorienting dilemma occurs. Transformative learning occurs as adults move through a series of steps toward an ever-deepening self-reflection. As they examine their emotions and consider their assumptions, they can or may

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move to incorporate new knowledge into what they know and how they move in the world. This reflection also allows for exploration of complexes that may arise and how they may be hindering a student's formation as a chaplain.

Students begin clinical pastoral education (CPE) with varying degrees of a desire or sense of call to provide spiritual care to others. As they are exposed to new information and the skills of chaplaincy, they respond from their own established habits and unconscious complexes. Disorienting dilemmas may arise as they begin to learn ways that spiritual care is different from what they had believed it to be. They may discover an inner fear of meeting strangers or a bias about a personality trait, culture, or religion different from their own. They may face the truth of their own personal dynamics in a group or a change in long-held theological beliefs. These disorienting dilemmas provide opportunities for self-examination. My work is to invite students into a critical reflection on their past and present experiences that allows for consideration of their beliefs, values, and assumptions in the midst of new knowledge. The potential for transformative learning occurs when students are supported in reinterpreting their established meaning perspectives and integrating what they have learned into their way of thinking, feeling, or behaving and into their clinical work.

While I find Mezirow's steps of transformative learning helpful in assessing where the student may be in their work of transformation, my critique of the limitations of this theory is that the road through these steps is rarely straightforward or rational. For critical purchase, I rely on the work of bell hooks to guide my interactions with students. Her theory of engaged pedagogy helps me to keep a balance between the headiness of transformative learning theory and the heart of the work that is the key to CPE education. Students are supported in integrating new knowledge in a way that nurtures or "cares for the soul" of the student.<sup>2</sup> This means beginning a new unit or residency with opportunities to share stories from their lives and to hear mine. This helps me to understand the lives and the needs of the students. It also recognizes that I, as the teacher, by modeling vulnerability and openness, learn from the students as well.<sup>3</sup>

I practice *engaged pedagogy* when I offer care and hospitality when we meet. I invite students to begin our hour together in a way that is meaningful to them, with either centering or prayer. When I encourage their voice in the discussion or challenge them as they reinterpret long-held beliefs, I

am practicing engaged pedagogy. These two theories support the clinical model of education.

*Nancy, a Euro-American Christian woman in her forties, shared a distressing encounter in the emergency room with a woman who was shouting and seemed out of control. Nancy shared that she immediately “froze.” Her disorienting dilemma arose around her confusion about what her role as a chaplain might be for this person. Offering empathy and care, I encouraged her to talk about the visit and what emotions were arising for her in that moment. She spoke of fear and how she connected with many aspects of the trauma the woman had experienced. This created, she said, “a loop in my head—I just couldn’t get past how I was supposed to fix this.” Assessing her as being in the grip of a complex, I focused first on caring for Nancy and the pain and suffering she was experiencing. As she processed her own emotions around the experience, we began to discuss ways that she might approach a similar situation in the future. Nancy considered her underlying assumption that to be a chaplain meant to “fix” the person’s situation. She experimented, in individual education and then with her peer group, with different techniques and skills she could bring to similar encounters in the future. By transforming her assumption that to be a chaplain is to “fix,” Nancy was able to develop skills that might bring peace or comfort in the midst of a traumatic moment and learned the importance of self-awareness in chaplaincy.*

### *Group Process*

Gerald Corey maps out the formation of an effective group. In the *initial* or *orientation* stage, each member of the group will bring their own expectations, wonderings, and anxieties. Students will often manage their anxieties by keeping their “public image.” It is a time to build trust and encourage *cohesion* to form between members and myself. I model empathy and authenticity to help to *normalize* the concerns they may have about the work ahead. My goal is not to resolve the disorienting dilemmas that can occur in new experiences but to assure them of my trust in them to do this work.<sup>4</sup>

In the anxious *transition* stage, I rely on Corey’s techniques for group facilitation. By *reflecting feelings, empathizing, restating, linking, and disclosing* my own reactions or experiences, I *model* healthy communication styles and techniques so that they can become part of clinical work as well. My goal is to create a safe atmosphere in which students can challenge themselves and one another.<sup>5</sup>

When conflicts emerge, I encourage Marshall Rosenberg's "nonviolent" communication techniques.<sup>6</sup> I find that these techniques allow for more direct communication about emotional responses rather than storytelling about the encounter.

My goal for the *working stage* is to support continued trust and encourage experimentation. When a group comes to know that they are working together for each other's growth, feedback on these experiments in behavior support the work of transformative learning. Confrontation and conflict will still happen, and in this stage the group has developed skills to work together and grow through them. My goal in this phase is to continue modeling appropriate behavior and communication styles and to support group and individual goals by observing common themes. My work of supervision is relational, respectful, and caring.

#### *Culture and the Educational Process*

Cultural competence begins with understanding and valuing our differences. Using elements from the VISIONS model for cultural competence, I begin a residency by providing opportunities for students to name how they are similar and how they are different. As the group strengthens and trust is built, I encourage personal stories of the impact of difference, particularly times that the students may have felt "less than." By understanding the power and the emotional pain of being "targeted" because of difference, students begin to move toward a way of relating to difference in a healthy, perhaps healing way.<sup>7</sup>

This learning also supports students' curiosity about their patients' cultural experiences and the impacts of their lives and experiences. Students are encouraged to consider various aspects of culture, in particular experiences of marginalization, and how that may be impacting their communication with the patient or each other. Coming to an awareness of a particular bias or assumption, a student can experience a disorienting dilemma and thus an opportunity to consider how this developed and how it impacts their lives and the lives of others.

Another way I think about culture and difference is in relation to my practice of process painting. Georgia O'Keeffe once said, "The arts take us out of our heads and into our bodies, hearts, and souls in ways that allow us to connect more deeply with self and others."<sup>8</sup> When I face a blank piece of paper, I allow my creativity and, in my theology, the spark of the Divine

within me to show me and to help me to love my differences. As part of their formation as chaplains, I often invite students to explore their CPE experience in paint. I stress that they alone can interpret the image they create. It is their conversation with themselves and with God or however they understand the Ultimate. Two students might each create an image of a bird when considering their symbol for who they are as a chaplain, but the meaning behind those two birds is as different as the students themselves. The difference comes from each student's lived experiences, which makes the symbol unique.

### *Evaluations*

Self-evaluation is a critical component of evaluating a student's transformative learning. I design self-evaluations so the students are writing directly to the Association for Clinical Pastoral Education Level 1 or Level 2 outcomes, which helps them realize their own potential and areas of growth and supports them as they integrate what they have learned.<sup>9</sup> To aid in this, I ask students to keep a journal or notes to discuss in individual education sessions. These notes are their own evaluation of what they have learned in relation to their goals through their interactions with patients, staff, and peers. Periodically, I invite students to create a collage of images depicting themselves and their work. This gives a visual of their learning, growth, and transformation throughout the year. I take all of this information into consideration when preparing final evaluations, which include my observations, affirmations, and suggestions for potential opportunities for continued learning. My goal is to assure myself, the student, and future employers or committees that the student has done the work of transforming into the chaplain they are meant to be.

### PERSONALITY THEORY

My work as an educator is informed by depth psychology, which comes out of the work of Carl Jung. I turn to Murray Stein for a clearer and more modern understanding of Jung's concepts. Noting, as many others have, the inconsistencies in Jung's writings, Stein has worked to make accessible Jung's map of the human psyche.<sup>10</sup> Depth psychology is nonpathologizing and affirms the strengths of the individual as it encourages the exploration of the *unconscious* aspects of human experience.

The concepts I rely on as a CPE educator to both assess and join students in their formation as spiritual care providers are the *ego-consciousness*, the *unconscious* mind, the *persona* and *shadow*, and the *complexes*. Jung defined the *ego-conscious* as the part of our personality that is aware of and interacts with our environment and the *unconscious* as “everything of which I was once conscious but have now forgotten.” In other words, the *unconscious* holds all thought, memory, and emotion not currently in use by the *conscious* mind.<sup>11</sup> Our *persona* is how we understand and present ourselves to the world. Jung referred to this as our “mask.” Our *shadow* is that which our conscious mind rejects or is ashamed of, and yet it is part of who we are as a whole person. Jung’s theory of *complexes* came out of the word association experiments he developed early in his career. This theory explains a reaction or habit of behavior that arises from our *unconscious* when faced with similar experiences that trigger an emotional response.

All human beings have at our very center the *True Self*. As an educator, I support the student as they become more aware of the interactions of all aspects of their personality and begin to live more consciously from their True Self. Connected to my education theory, the *disorienting dilemmas* experienced as part of CPE are vehicles toward using more of one’s True Self in the work of spiritual care. Connected to my theology, this is the *Divine Self*, the place where God resides within us and connects us to God and one another. When spiritual care providers are able to interact with patients, staff, and family members from their True Self, they are able to be more empathetically present, make clearer spiritual assessments, determine creative interventions, and create space for healing relationships.

### *Personality Development*

“Consciousness is awareness,” writes Stein. “It is the state of being awake, of observing and registering what is happening around us.”<sup>12</sup> A child’s conscious mind gathers and interprets all that it sees, hears, feels, and tastes. Our ego, what we think of as “I,” forms at the very center of our conscious mind. It is rational and responsible, and its main motivation is to survive. The ego uses information from the conscious mind to make moment-to-moment interpretations or decisions.

Our unconscious mind holds all memories, images, symbols, and emotions not in use by the ego in the conscious mind. The ego can “forget” information that is not necessary at the moment and then retrieve it when the

information may be helpful in interpreting a situation. It can also repress memories, images, symbols, and emotions that are too painful. These repressed contents of our unconscious come together to form complexes and have a significant effect on our behavior. When triggered by conflict, an image, emotion, or experience similar to those associated with the complex creates a disturbance in the conscious mind. Behavior usually moderated by the rational ego is hijacked, and the person acts out of the emotions surrounding the unconscious complex. The behavior can appear “out of character” and leave the person confused about their own actions.

*Mary is a Euro-American cisgender woman who had a long career as a Presbyterian minister. I often use role plays in group supervision because they offer the opportunity to consider the encounter from a different point of view. Mary led a role play in which she played the patient. Her portrayal was of a man with a strong personality wanting to show her pictures of his own life in ministry. Her reaction to this was fear and anger that this man was belittling her. Since she wanted to work toward her goal of greater self-awareness when offering spiritual care, this disorienting dilemma led to confusion about her reaction. I assessed that her emotional response had triggered a complex. In individual education, I encouraged her to stay with the emotions that arose on this and on other similar experiences by asking empathetic questions and encouraging reflection on the emotions both somatically and creatively. Mary's complex arose from several childhood experiences with her father that had left her feeling inadequate and afraid. Our work together in understanding this complex allowed her to include what had been unconscious in her conscious mind. Mary drew on this experience in subsequent patient visits by becoming more aware of her own emotional experience and being more curious about the patient's life and experience. She also learned the value of seeking support and consultation when such complex behavior arose.*

At its core, this work is what Jung called *individuation*. Individuation is a journey or a return to wholeness and the True Self. It refers to the process through which each person integrates their persona and shadow functions more and more from their true, unique self. This is a life-long journey that begins with the exploration of one's own way of being. It moves toward a way of being which includes both conscious and unconscious thought.<sup>13</sup> Each human being's process of individuation is as unique as they are, and each will progress on this journey as far as they are able given their personal experiences and development. As a CPE educator, supporting this work in my students helps them to be more aware of how their own emotional re-

sponses impact a patient visit. Conscious engagement of a chaplain's own emotions creates space for their patients to feel and to know that they are not alone in their own emotions.

While depth psychology gives me an overview, the Enneagram is a tool that helps to point me toward possible complexes that may impact spiritual care functioning. Similar to depth psychology, the Enneagram acknowledges that our wholeness, our unique self, is with us from the moment we become conscious but we lose connection to this because of childhood experiences.<sup>14</sup> The Enneagram goes in a somewhat different direction, exploring the unique gifts that we bring with us into creation and the basic fears that pull us into particular *habits of behavior*.<sup>15</sup> Only the student themselves can identify their particular Enneagram type. However, understanding the patterns of response as outlined in Enneagram guides my assessment and gives me a sense of direction toward the student's underlying motivation and mode of being. The Enneagram supports my assessment of a student's habits of behavior—those that may inhibit or enhance their growth as they develop their chaplain skills.

#### *Goals, Assessments, Strategies, and Interventions*

My goal for all of my students is that they become competent in the skills of spiritual care giving. Self-awareness is an integral part of this process, and therefore exploring complexes and habits of their personality guides students to consider their own emotions so they will be more present to their patients. Awareness of their complexes and habits brings more of their unconscious behavior into their conscious mind, including more of their True Self into their spiritual assessments and the interventions they offer. This work also encourages curiosity about the uniqueness of the patients they care for, and thus they learn to meet the patient where they are and avoid making assumptions based on their own personality or experiences.

As I begin to work with a student, my goal is to gain insight into their personality. I look at ways they thrive in their work as chaplains. I observe gifts of strengths that they bring with them into CP—particular gifts of groundedness, for example, or authenticity, or a capacity for joy. I also note patterns of behavior—how they respond to the stress that often accompanies the orientation phase of CPE, for example, or how they interact with their peers. I listen for clues to their upbringing and experiences they share

with their peer group and those they share with me individually. When I share my observations with my students, the intended result is that they know that they are seen and cared for and that trust is built. This creates a safe space in which the student can explore their own experiences and their impact on the care they provide.

As a unit progresses, I use these initial assessments to consider what patterns of behavior may be clues to complexes that can interfere with their work and their learning to become spiritual caregivers. Reflecting on their strengths and challenges, I can consider the patterns of behavior I observe that may shape how I invite them into reflection on the complex. If a student is becoming overwhelmed with their emotions while providing spiritual care, a pattern of behavior common to an Enneagram 4, for example, my goal would be to keep them connected to the present moment while they explore the past. I would do this by inviting them to stay with the emotion that is arising and consider how it is connected to or similar to an emotional experience in the past. Interacting with my students in a variety of ways aids in my assessment of them.

*Dan is an African American cisgender male in his fifties. He is a Baptist minister and has had careers in both the military and in sales before pursuing chaplaincy. My observations of Dan's interactions throughout the first unit of the residency mirrored the patterns of behavior common to an Enneagram 6. The Enneagram teaches that this type brings with it an innate knowledge that because all beings are deeply connected to God all will be well. However, experiences as children can pull someone identified as an Enneagram 6 into habits of self-preservation at all costs because of a great fear that all will not be well. This may result in someone hiding away from what might cause fear (phobic 6) or running toward that which causes the fear as a way to deny it (counter-phobic 6). Dan self-identified as a counter-phobic 6, which was clear in how he had developed a way of managing his fear by denying it at all costs. The result for Dan was an inability to sit with his patients in their own fear and pain. Rather than attend to their emotions, Dan focused on the practical details of chaplaincy and "checked out" during education.*

*When I addressed this pattern behavior in individual education, Dan became angry and defensive. He appeared to be unaware of the impact of his behavior, which informed my assessment that his emotions were coming from unconscious rather than conscious thought and that a complex had been triggered. Earlier episodes in his life, in particular the uncertainty that is prevalent for an African American male in our society, led him to run from the idea of "having done anything wrong" by*

*explaining away his behavior. If he could explain it away, he might not have to feel the emotions. I listened to Dan calmly and then noted the complex-related behavior I was observing. Because of the work we had done to build trust in our relationship and my empathetic questions, Dan was able to explore these emotions. This painful encounter led him to include his peer group in his grief and anguish. As time went on, I was pleased to observe Dan's relaxed presence with his patients, even in the midst of challenging emotions. The result of this work has been deepening, supportive relationships of care with staff, patients, and his peers.*

One of the most important tools used by Jung that has become integral to my work as an educator is *active imagination*. Jung recognized that complexes are often tied to a symbol or image and that using one's imagination either in conversation or creatively helps uncover unconscious or complex behavior. I often invite my students to consider the shape, color, or sensation of their emotional response. Using creative activities such as paint or collage can give more insight as well as an opportunity to consider how complexes might be impacting their patient care.

#### THEOLOGY/SPIRITUAL PERSPECTIVE

##### *Nature of God and Persons as Creatures of God*

Alfred North Whitehead, a mathematician and philosopher, was the first to offer the idea that God is both creator of the world and intimately involved in the ongoing process of creation. The nature of God is relationship, both within creation and toward the ongoing movement of creation. God exists in relationship with us and in our relationships with one another. It is through these relationships that humanity is "lured" toward what Whitehead regards as the "primordial nature of God," the potential, the possibility, the availability of goodness and well-being for all aspects of creation.<sup>16</sup>

Catherine Keller develops more fully the relational aspect of creation. The moment of creation not only connected all aspects of the universe, it also set in motion the potential for what our relationships with God and with one another might become. Not only is creation in constant movement, it is the interconnectedness of all creation and the relationships among us that can encourage our work with God in the ongoing process of creation.<sup>17</sup> God desires the well-being of all of creation, and through our relationships with God and one another we move ever toward this reality.

The openness of possibility that is process theology brings a sense of freedom to my life. It also brings a sense of “not knowing” that requires deep faith in God’s love because it eschews the idea that there is a right way and a wrong way to live as someone made in God’s image. Growing up, I struggled to understand what seemed to be a set of rules that the Church told me I must follow to have everlasting life or be damned. Keller refers to these as “absolute truth-claims which wash out our vital differences.”<sup>18</sup> Clinging to absolutes impinges on the possibility of growth and what can happen through relationship and the recognition of difference. This thinking helps me to consider more deeply what Christ says in the Gospel of John: “I came that they may have life, and have it abundantly” (John 10:10b NRSV). To me this means a focus on living our life fully *now* and being open to what can happen rather than focusing on what might come after our death. When our life is simply a means to an afterlife, we ignore our responsibility to creation. In this way, Christ invites us to recognize ourselves as part of a divine community, each made in God’s image and bringing our own gifts to creation.<sup>19</sup>

Each human being is uniquely made in the image of God. We are born with our distinctive gifts, viewpoints, and potential. Embracing this truth means recognizing our *Divine Self* and the invitation to live in relationship with our creative God, bringing our creative gifts to the care of all of creation. Invitations into relationship from this divine center are invitations to know ourselves more fully and affirm the wholeness of one another. Our interconnectedness invites us to interact and care for another from our Divine Self that reflects the image of God. This is what I hope to encourage as a CPE educator: to provide space for students to come to see and know that they too are unique blessings. In encounters with me, with patients, and with their peers, students may come to embrace their wholeness and so be present to the wholeness of those they care for.

#### *Human Suffering, Sin, and Relationship with God*

Suffering is present. Always. And a world in process, a world in constant movement, is a world in chaos. Informed by Keller, I’ve come to see that God does not cause suffering but is present with us in it, always. God did not create the brokenness in my family of origin. God didn’t make my brother succumb to his pain. God doesn’t punish humanity with suffering but has offered a creation that is “a living, whirling, open-system of

a world."<sup>20</sup> This world is deeply alive and deeply interdependent. There is celebration of the science in this creation, from "weather patterns to ostrich wings."<sup>21</sup> This whirlwind of creation allows for bad and good to coexist, but within the chaos, new life can emerge. God participates with us in the chaos as we navigate it. God desires the well-being of all creation and offers us the opportunity to live from that place as well when we lean into our interconnectedness and are in community with one another.

Sin has the potential to be an uncomfortable word in progressive Christian churches. I have witnessed parishioners and patients struggle with the idea that God has punished them for their "sin." Informed by Keller, I've come to know that while God does not punish humanity, there are consequences to not caring for any and all aspects of creation. Holding oneself or another back from the potentiality of our individual journeys certainly leads to suffering. The hope, the possibility remains that we might follow the "lure" of God toward new possibility. This informs what I know about the importance of giving and receiving feedback.

This is a theology I live with. It does not give a pat answer, however, to the experience of one of my students, an African American male who, because of systemic racism in our society, lives every day with the knowledge that he could be beaten, arrested, or killed. Or to another student, who spent her childhood standing between her drunk, fighting parents feeling that she alone could fix the family. To offer explanations like "this suffering leads to our growth or brings us closer to God" means we are following a God who somehow needs us to suffer in order to fully participate in creation. I believe that God does not cause suffering any more than God creates joy. God is always present. In the depth of our suffering, God is present. Rather than simply accept the good and the troubling, God invites us to be "co-creators and co-revealers" of what creation is becoming.<sup>22</sup>

### *The Interplay of Theology and Education*

Clinical pastoral education is an opportunity to dwell closer to our *Divine Self* through the oft-times *disorienting dilemmas* that come out of encounters with patients and peers.

*Kathy spent her life responding to messages from her childhood that told her she must not fail; she must succeed at all costs. And, if she didn't succeed it was because she didn't try hard enough. Interactions with patients brought the voice of this*

*“inner critic/inner cheerleader” into the care she provided and created distance between her and the patients. Her fear connected to it kept her from being truly present to the emotions of the patient. Out of my theology, I sought to join with Kathy in addressing both her fear of failure and her desire to further her education by supporting her ability to connect more closely with her patients.*

*My theology informed my supervision with Kathy from our interconnected center, and I recognized her disorientation as a complex (a concept from my personality theory) born of fear of failure. By asking empathetic questions and inviting her to use her creativity in drawing to explore her emotional experience, she was able to consider the feelings that arose at the thought of failing. As the educator, I was able to accompany Kathy as she reflected on these painful emotions from a more conscious place. Incorporating these challenging emotions also created space for her to see her own place of connection and expanded her sense of the Divine within herself. Our work together on integrating her complex into her conscious thinking resulted in growth of her skill of being more present with the pain of others.*

#### *Spiritual Care in a Multicultural, Multifaith Environment*

“Made in the image of God” is an integral part of my theology. If we are all made in God’s image, we need only to look around the circle of a CPE group or walk into an emotionally charged family meeting to recognize that God’s image is nothing if not diverse. Looking different is one thing, but the differences in how we were brought up—our cultures, our faiths, our day-to-day experience of living in this creation constantly in process—is another. We are deeply connected, and it is through our interconnectedness that we are in relationship with each other and God for the well-being of creation, and our difference is part of our connection. The importance of CPE in a multicultural and multifaith environment isn’t just naming our difference. It is understanding the impact of that difference on one another’s life as well as appreciating that difference.<sup>23</sup> This is important for the learning environment but also for the work that the students will do as chaplains.

As we open ourselves to all the ways we are different, we also open ourselves to how we have attached judgment to these differences and how that has created pain in our own lives and caused pain in other lives. Most of us carry aspects of both privilege and power and areas of our lives where we are thought of as “less than.”<sup>24</sup> In a recent CPE group, each person in the circle identified as Christian and yet they held very different theologies, showing the diversity of beliefs even within a particular faith group.

I led activities at the beginning of the residency that created opportunities for students to see both their similarities and their differences. Close relationships and conflict came out of these activities. Both had potential for learning. My theology supported me in recognizing the diversity reflected in each student's Divine Self and helped me to name unrecognized assumptions and places of privilege. These potentially disorienting dilemmas, when met with empathy and care, can help students to name differences without judgments and come to a place of appreciation of one another.

#### CONCLUSION

Central to my theology and all of my theories is my belief that God resides within each person, within each student with whom I join in the work of CPE. This divine or True Self is the embodiment of our uniqueness and our gift in creation. The True Self in my personality theory is how we strive to be in relationship with ourselves and the world. The True Self in my education theory is the place where new knowledge become integrated. My work as a chaplain and as a chaplain educator is to be in relationship from my individual Divine Self.

## NOTES

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