Traditionally, religious and spiritual topics have not been a welcome part of the psychotherapeutic dialogue. Therapists and clients alike avoided the topic, allowing it to be an unspoken and often untreated issue. At best, therapists addressed more implicit forms of their clients’ religiosity or spirituality, such as sources of meaning and hope. At worst, therapists pathologized their clients’ religion or spirituality and made them a target of the treatment. However, this pattern began to change several decades ago and now both research and clinical practice have matured in this area. Ken Pargament’s book *Spiritually Integrated Psychotherapy* is both a product of and a testament to this growth. In his book, Pargament builds the case for psychotherapy practice that integrates an understanding of and respect for the many forms of religion and spirituality that clients might have.

Pargament uses a clear and effective structure for his book. There are two main sections. The first deals with “understanding the sacred,” which he describes with the qualities transcendence, boundlessness, and ultimacy. To help the reader understand the sacred, Pargament provides a theory for the ways that people use their spirituality to cope during difficult times. The primary ways he identifies are spiritual coping to conserve the sacred, that is to maintain valued objects and ideals, and spiritual coping to transform the sacred, or to come to a new understanding of what is transcendent, boundless, and ultimate. Also in this first section is a discussion of problematic spirituality that leads to difficulty, poor coping, and ultimately hinders an individual’s growth. Pargament identifies two categories of problematic spirituality, the objects (“destinations”) of devotion and practices (“pathways”) of devotion. Within each of these categories he provides several ways that spirituality can become problematic for people. For example, under problematic objects of devotion he argues that many peoples’ gods are too small, meaning that they cannot account for and help people understand the full range of human potential and experience. When one’s object of devotion or “spiritual destination” (137) cannot account for the pain and suffering of the world, or does not allow for the
natural and uninhibited joy that can flow from human experience, then that god is too small.

The second main part of the book discusses more specifically how to address spirituality in psychotherapy. This part of the book begins to get more specific, providing more concrete detail for the mental health provider. It starts with a thorough overview of spiritually integrated psychotherapy, which is a useful orientation for both novice, and experienced clinicians. It contains some practical information, basic assumptions and beliefs of a spiritually integrated therapy, and a summary of the connections between certain types of psychological distress (e.g., depression) and different elements of spirituality (e.g., feeling punished by God). There is also a useful section on spiritual assessment that includes methods and suggestions for implicit and explicit assessment. Pargament argues that spiritual assessment in therapy not only provides useful and rich information for the therapist, but also opens the door to future discussions, in essence informing the client that “it is okay to talk about your religious and spiritual life in therapy.”

The rest of the book deals with addressing spirituality as a resource and as a problem. Pargament describes several areas that therapists can help their clients access spirituality as a strength, including spiritual strivings, knowledge, experience, practices, relationships, and coping methods. He also describes ways to address spiritual problems, both problems of “destination” and “pathways.” For example he provides ideas to help clients whose spiritual practices are too shallow, for example prayers or rituals that are mere rote and meaningless. In this case, Pargament argues that therapists can help their clients by having them develop new elements or responses to their rituals, or to write out their prayers, giving voice to not only their concerns but God’s responses as well.

The style and content of the book are excellent. Stylistically, Pargament weaves into the content material clinical vignettes, personal stories, and specific examples that capture the reader’s attention and make the academic information more understandable in specific, real-world situations. This makes the book accessible to many different audiences, even though it is written with the mental health student or professional in mind. The quality of content is also first rate. Pargament pulls on years of experience as one of the premier researchers in the field of psychology and religion. He uses empirical evidence to support his claims and sticks closely to the research, not making too much or too little of the findings. His scholarship is also not narrowly defined. He pulls from various fields, from sociology
to theology, and makes strong arguments for why, how, and when to integrate spirituality into therapy. The depth of his analysis is also a strength of this work. Pargament provides some of the best theory, research, and practice in the area of religion, spirituality, and counseling. In this way the book is well balanced and the conclusions and suggestions rest on a multifaceted and strong scholarly foundation.

_Spiritually Integrated Psychotherapy_ is a rich, multi-dimensional book of theoretical and clinical value. This book has already made a rich contribution to the understanding of how to integrate spirituality into psychotherapy. It is poised to become one of the classics in this area.