Using Prayer as an Intervention With Clients Who Are Substance Abusing and Addicted and Self-Identify Personal Faith in God and Prayer as Recovery Resources

Gerald A. Juhnke, Richard E. Watts, Norma S. Guerra, and Peggy Hsieh

This article describes how the authors use prayer with clients who self-identify their personal faith in God and who have used prayer as a helpful recovery agent or who believe prayer would be helpful to their personal recovery.

Spirituality is in vogue. A cursory review of recently published counseling books related to spirituality reveals a plethora of professional offerings (Benda & McGovern, 2006; Cashwell & Young, 2004; Miller, 2002; Morgan, 2006; Sori-Ford, 2008; Wiggins-Frame, 2002; Young, Wiggins-Frame, & Cashwell, 2007). Refereed journal articles that combine spirituality and mental health treatment topics are now commonplace and published in many refereed professional outlets (Bostwick & Rummans, 2007; Krok, 2008; Sorajjakool, Aja, Chilson, Ramirez-Johnson, & Earll, 2008; Watlington & Murphy, 2006; Watts, 2000, 2001; Wortmann & Park, 2008). The same holds true for additions counseling and spirituality. Many well-respected, refereed journals publish these key articles. More important, however, the articles have one overriding theme: Spirituality must be addressed and integrated into additions treatment (Brome, Owens, Allen, & Vevania, 2000; DiLorenzo & Bussey, 2001; Moser, Sowell, & Phillips, 2001; Sanchez-van der Meer & Nappo, 2008).

Further emphasizing spirituality’s perceived importance among professional counselors, and the counselor educators who train them, are the new Council for Accreditation of Counseling and Related Educational Program (CACREP; 2009) addiction standards. Specifically, CACREP now requires newly accredited programs to help the student understand “the role of spirituality in the additions recovery process” (CACREP, 2009, p. 18). Clearly, spirituality has come to the forefront of the counseling profession. Similarly, the American Counseling Association (ACA; 2005) ACA Code of Ethics addresses issues of spirituality. The ACA Code of Ethics indicates counselors

© 2009 by the American Counseling Association. All rights reserved.
should not discriminate based on the client's spiritual beliefs and should consider the client's spiritual beliefs when using an assessment.

Despite this relatively new publication direction, and the insights related to the importance of integrating spirituality and addictions within the counseling profession and counselor education communities, reliance on God and prayer have long been central components within Alcoholics Anonymous and recovery circles (Alcoholics Anonymous World Services, 2001; Anonymous, 1987). Spiritual slogans specific to God abound within these circles. Clients have reported the helpfulness of slogans such as "Let go and let God," "Trust God, clean house, help others," and "I can't, He can, I think I'll let Him." Clearly, when half of the 12-steps specifically address the recovering person's interactions with God, one would minimally agree that spirituality is a critical theme within the 12-step community.

Prayer is a spiritual activity (Beach, Finchman, Hurt, Mcnair, & Stanley, 2008). It connects recovering clients with God. Ellison and Taylor (1996) stated, "Prayer and meditation often involve the act of engaging and interacting with a divine other in a quest for guidance and solace" (p. 113). Such prayer is required within all traditional 12-step programs. Step 11 requires active prayer to God. It states, "[We have] sought through prayer and meditation to improve our conscious contact with God as we understood Him, praying only for knowledge of His will for us and the power to carry that out" (Alcoholics Anonymous World Services, 2001, p. 59). One of the addictions prayers most often cited by clients is Niebuhr's (Niebuhr & Brown, 1987) Serenity Prayer, which states, "God give us grace to accept with serenity the things that cannot be changed, courage to change the things that should be changed, and the wisdom to distinguish the one from the other" (p. 19).

We have found that clients want to pray when they believe God (a) exists, (b) is invested and desires their successful recovery, and (c) responds to personal prayer. Concomitantly, when clients actively integrate prayer within their addictions counseling, they experience recovery as a developmental opportunity for themselves and their relationships with God and others. Hence, they view prayer as a personal resource that can aid their recovery experience. As one client said to the first author, "Man, I don't need you. I can pray to The Almighty [God] and He will show me how to get through [my alcohol cravings]."

Finally, unlike other spiritual activities, such as meditation or participation in sweat lodges, the prayers used by clients within sessions rarely take more than 3 minutes. Thus, they can be quickly and easily implemented at the beginning and end of sessions. Clients have reported prayer beneficial when they experience cravings or stressors outside of treatment sessions as well. Therefore, because prayer has been reported as desired and beneficial by a number of clients within their addictions recovery, we describe as follows how we have assessed clients for prayer inclusion and the manner in which prayer interventions were implemented.
Prayer Treatment Intervention

Assessment

Five questions are used to assess whether prayer would be potentially helpful to clients presenting for counseling services:

1. Do you believe in God or a higher power?
2. Do you believe God or your higher power desires you to discontinue ________ (e.g., “drinking to intoxication,” “using cocaine,” “alcohol consumption,” etc.)?
3. Do you pray to God or your higher power?
4. Some of our clients report an interest in utilizing pray within counseling sessions. Would integrating prayer and counseling be something you might be interested in further discussing?

Each of the questions is asked in the order presented. Similar to a Guttman Scale (Drummond & Jones, 2006), the questions form a one-dimensional continuum. Therefore, if a client provides a negative response (e.g., “no”) to any single question, further questioning specific to the integration of prayer within treatment is contraindicated. Should the client positively respond to each of the questions, the counselor would (a) describe how other clients have used prayer in session, (b) address any client questions, (c) identify potential modifications or adaptations the client may wish, and (d) jointly make a determination with the client whether or not prayer is a viable option.

Intervention

If the client desires integration of prayer within addictions counseling, and prayer is deemed clinically appropriate by the addictions counselor (e.g., prayer is not part of a client’s delusions or hallucinations), there are four methods we have found helpful and have used.

Method 1. The method is specific to establishing useful treatment goals. Here the counselor may say something like,

   Earlier you stated that you often find it helpful to pray, and you believe praying would be helpful to your recovery. Would you like to take a moment before we get started and ask God to help you identify the best treatment goals to work toward within your recovery?

At no time do we force clients to pray. Instead, we merely restate their previously noted perception that prayer is a resource they could use within their recovery process. Then, we ask if they would like to pray.

We have experienced a broad range of responses to this question. Many times, clients report relief that we would allow prayer within the parameters of counseling. Those who verbally report such relief will often thank us for the opportunity and immediately pray aloud. Others will sometimes report
they would like to pray but feel awkward or embarrassed praying in our presence. When such a statement is made, the counselor often responds by saying something like,

I certainly can understand those feelings. Praying in front of others can be a little anxiety provoking. Sometimes folks tell me that although they find prayer helpful, they only feel comfortable praying by themselves. So they ask that we not pray in session. Others ask if I would pray for them the first couple times and then begin praying when they feel comfortable. And still others say things like they just don’t know if they really want prayer to be a part of their counseling experience. Are any of those a match for you or is there something different that you would prefer?

The intent here is to provide a list of options. At this point, clients who endorse prayer as a resource but feel uncomfortable about praying typically ask if we would be willing to pray. When that happens, the counselor responds affirmatively and says a prayer something like,

God, we thank you for Karl. He has really been struggling with his alcohol abuse and has come to the point in his life where he wants to stop his drinking and drugging. Please make today’s session helpful to Karl. Speak to Karl. Help him identify the specific things we need to do within counseling to help bring about the successful recovery that both he and you, Karl and I thank you for hearing our prayer and answering. Amen.

In this prayer, the counselor briefly and simply states the facts. The client is struggling with an addictions problem and wants to stop. Praying that God will make the session helpful establishes Karl’s expectation that the session may be helpful and that Karl will be able to successfully identify helpful treatment goals. (It should noted that the client names used in this article are for hypothetical clients.) Once the prayer is made, the counselor simply moves forward with the client and jointly establishes treatment goals.

Method 2. Similarly, depending on the client’s desires, we often use prayer at the beginning of individual treatment sessions. Here, for example, the counselor might say,

Maria, last week when we met, you wanted to pray and ask God to help you identify useful treatment goals that would help you attain your sobriety. Based on the goals that you created, it seems as though prayer was helpful. Would you like to begin today with prayer and ask God to help us create a session where you feel comfortable and a session that would be productive in moving you toward the alcohol abstinence that you want?

Here, the client is in full control and establishes the session’s course. Should she wish to pray, the counselor simply allows her to do so, or should she wish for the counselor to pray for her, the counselor will pray something like,

God, Maria wants today’s session to be helpful. Please give Maria and me wisdom and clarity to understand exactly where to begin today’s session and what to discuss. Thank you for making today’s session productive and keeping us focused on what we need to do as we help Maria achieve her desire of alcohol abstinence.
Although the client was originally given the opportunity to pray at the session’s onset, the client may wish to eliminate prayer from the sessions. Occasionally, clients who initially prayed during counseling choose to discontinue prayer in subsequent sessions. This is completely acceptable, and we typically laud them for their truthfulness. Then we provide the option of prayer should they desire to use prayer in the future. For example, the counselor would say,

Maria, thank you for your truthful and direct answer. It sounds as though you don’t want prayer to be included in session. Should you ever wish to utilize prayer within future sessions, just let me know. However, right now let’s focus on what would be most helpful to you in today’s session. Where should we begin?

Again, the client remains in full control related to the use of prayer.

Method 3. A third way we have used prayer occurs at the conclusion of the individual treatment session. Here, the goal is to help the client pull together the things he or she has learned from that day’s session and to anchor these insights and experiences in the client’s memory so he or she can use them in the days prior to the next meeting. The counselor would say,

Maria, we have accomplished a lot today. Would you like to summarize what you learned today in a prayer and ask God to show you how to effectively use the things you learned today as you move toward your goals for abstinence in the upcoming week?

Or should the client ask to pray, the counselor might pray something like,

Lord, we thank you for Maria’s productive session today. She and I have learned a lot. She has learned that being with her former drinking friends Carla, Nora, and Peter often leads to her drinking and getting drunk, even when she doesn’t want to. Maria has also indicated that she has a new recovering friend, Laura, who lives in Maria’s apartment complex. God, Maria has found that when she is with Laura that Maria doesn’t drink. Maria has also learned of a 12-step weekend getaway being sponsored by her church. Maria wants to invite Laura to go with her. We would pray that you give Maria the courage and strength to ask Laura to go on the recovery weekend and do the things she needs to do to stay on her recovery track. We thank you for helping Maria do these things and for leading her recovery. Amen.

This prayer reinforces Maria’s perception that she has gained knowledge and insight. It further reminds Maria that she has identified the fact that associating with former drinking friends typically results in her relapse into former drinking behaviors. Concomitantly, the prayer reinforces the insight that when Maria is with Laura and other nondrinking friends, Maria stays alcohol abstinent. Furthermore, the prayer reminds Maria of an option to participate in an upcoming nondrinking event being sponsored by her church. Finally, the prayer reinforces the expectation that God will give Maria the courage and strength to initiate steps she identified within session that will be helpful to her recovery maintenance.

Method 4. The final manner in which we have used prayer with clients is specific to out-of-session cravings and stressors. Here, the counselor discusses prayer as a resource to use when clients who are abusing or ad-
dicted experience cravings or stressors. For example, Julian had reported that, although he found the Serenity Prayer helpful and often prayed for ill family members, he had never prayed for wisdom on how to respond to his cravings or pressing stressors. The discussion went something like the following:

**Counselor:** Julian, I guess I’m a little confused. You say that you have found the Serenity Prayer very helpful when dealing with your mother’s cancer and your job loss. However, you said you haven’t prayed about your marijuana use.

**Julian:** Right

**Counselor:** Why is that?

**Julian:** I don’t know. I guess I never really thought about it before.

**Counselor:** Do you think asking God for wisdom on how to respond to your cravings would be helpful?

**Julian:** I guess.

**Counselor:** Is that something you would consider doing? I know some of my clients tell me that when they experience cravings or start to get uptight because of problems, they find it helpful to pray and ask God for wisdom and help.

**Julian:** Makes sense. What would I pray?

**Counselor:** Well you might say something like, “God, I need your help right now. I feel overwhelmed and like I want to use. Give me wisdom on what I should do right now so I won’t use. Help me to know who to call or what to do so that instead of using I can do something else that would honor you. Thank you for answering my prayer. Amen.” What do you think? Would you be willing to make a prayer like that if you began to feel cravings?

**Conclusion**

Spirituality has been acknowledged within existing literature and the helping professions as important to clients’ successful recovery from substance abuse and addictions. Prayer is a spiritual activity that has long been used within the recovery community and is an intervention that can be easily integrated within typical addictions treatment. For the majority of clients who self-identify a personal faith in God, the construct of prayer is familiar and something that they have previously used and found helpful. Frequently, however, clients have not used prayer as an active way to focus their treatment agenda, summarize and crystallize insights and new knowledge resulting from individual counseling sessions, or respond to immediate cravings or situational stressors. This article describes how we have used prayer as a means to help clients identify overall treatment goals, initiate and conclude individual counseling sessions, and respond to cravings and stressors. Clearly, prayer would be contraindicated when
deemed clinically inappropriate by addictions counseling professionals. Potential examples of contraindication may include instances where (a) severely disturbed clients may experience delusions or hallucinations; (b) clients do not believe in God, God's interest in their recovery, or God's willingness to hear and respond to prayer; or (c) clients may have significant impairment resulting from personality disorders, such as dependent personality disorder. Nevertheless, for a significant portion of the clients we have counseled, prayer has been reported as a helpful intervention that has augmented their overall treatment success.

References


Author: Your article has been edited for grammar, consistency, and to conform to ACA and APA journal style. To expedite publication, we generally do not query every routine grammatical or style change made to the manuscript, although substantive changes have been noted. Note, the issue is not finalized, so page numbers of your article may change. Pay careful attention to your tables (if any) and proof carefully as information has been re-keyed and edited for APA tabular style. Please review article carefully and provide answers to the following specific queries:

[AU 1: Title OK as edited for APA style on sensitivity in language? Can the title be shortened per author guidelines?]
[AU 2: This author bio has been edited according to APA and ACA style. Please indicate any corrections or changes in information since the study was written.]
[AU 3: Should the underlined word be “meditation”?]
[AU 4: The underlined text in the quote seems incomplete. Is something missing?]
[AU 5: Text OK as added for clarity?]
[AU 6: The underlined references were not found in the text. OK to delete them?]