Toward a Bahá'í Concept of Mental Health: Implications for Clinical Practice

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The author highlights the emerging interest in understanding religious beliefs as a resource for more fully conceptualizing clients' psychological functioning. Although various authors have explored religious theories of mental health in an effort to increase understanding of clients' problems, there is a dearth of information on the Bahá'í client and how this particular religion conceives of mental health. The purpose of this article is to create an initial formulation for a Bahá'í concept of mental health and to discuss its clinical implications to aid in counseling Bahá'í clients.

Many people have a significant interest in spiritual concerns as it relates to their well-being, and a large portion of Americans rate religion as a "very important" ("Religion and Morality," 2001, p. 7) factor in life. One study revealed that more than 90% of the American public believes in God (Baker, 1997). Despite the public's interest and involvement in the religious realm, exploration of an individual's religious beliefs is often ignored in the context of clinical assessment and treatment (Koenig, George, & Peterson, 1998; G. Miller, 1999). It is interesting, however, that religious traditions through the centuries have had their own theories of human nature and strategies for wellness, whether explicit or implicit, within their dogma, orthopraxy, or sacred texts (Spilka & Bridges, 1989).

Some researchers have maintained that although the focus of counseling practice is on diversity issues, particularly race, factors such as religion are largely ignored (Langman, 1995; Schlosser, 2003). Because of religion's pervasive and influential impact on a person's life, it has been suggested that studying the effects of a religious denomination just as one would study socioeconomic factors could be helpful in therapy (Donahue, 1989). Propst (1980) argued that not taking into account a person's religious beliefs may actually impede the efficacy of the counseling process. If a client is involved in a particular religion, investigating how that religion may affect his or her personal problems could be a useful component within the therapeutic process (W. R. Miller & Thoresen, 1999).

Although it is often unclear the extent to which a client identifies with a particular religion or how those beliefs may affect his or her psychological functioning, understanding various religions and their corresponding views of mental health can help counselors increase their sensitivity in clinical practice. Despite the evident increase in studies examining religious traditions,

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spirituality, and religiosity in the context of psychology and counseling (Bergin, 1994; Jacobs & Capps, 1997; Koenig & Pritchett, 1998; Rizzuto, 1996), the Bahá'í Faith has been absent in the literature.

Currently, the Bahá'í Faith is the second most widely geographically spread religion in the world, with more than 7 million members inhabiting 205 countries, with approximately 750,000 Bahá'ís living in the United States (Barrett, 2001). Thus, the purpose of this article is to (a) examine briefly the history and basic tenets of the Bahá'í Faith, (b) propose a theory of mental health within the Faith, and (c) discuss clinical implications.

A Brief History of the Bahá'í Faith

In 1844, in Persia (modern-day Iran), a man known as the Bab claimed to be a herald to the coming of the Promised One. The Bab, meaning "the Gate," was seen as the precursor of a new messenger of God who would fulfill the prophecy of the Bible and the Qur'an. Born in 1817, in Persia, Mirza Husayn Ali, known as Bahá'u'lláh (meaning "Glory of God" in Arabic), declared in 1863 that He was the Promised One of all ages and the fulfillment of religious prophecy. Bahá'u'lláh's teachings were voluminous and focused on such issues as the nature of humans and God, the role of divine revelation in humanity, and the purpose of life (Cameron & Momen, 1996). In a large portion of the sacred texts, Bahá'u'lláh focused on spiritual solutions to specific economic and social problems and ultimately devised an administrative order. This administrative order consists of individuals elected by their respective communities to serve on local and national assemblies and an international assembly, known as the Universal House of Justice, in order to work toward uniting all of humankind. Following His death in 1892, He commissioned His son, Abdu'l-Bahá, to succeed Him and carry on the Faith. Abdu'l-Bahá continued to teach the Faith and disseminate its doctrines. At the time of his passing, he chose his grandson, Shoghi Effendi, to become the Guardian of the Faith in order to interpret the writings and guide the emergence and construction of the Administrative Order.

The Basic Tenets of the Faith

The overarching tenet of the Faith is the unity of existence: the oneness of God, the oneness of religion, and the oneness of humanity (Momen, 1991). The purpose of civilization, then, is the uniting of the world as one global family in order to know and love one God. A component of this unity is the belief in the equality of women and men (Hatcher & Martin, 1984). The Faith is explicit about this stance and perceives both men and women as necessary components to achieving world unity. Furthermore, individuals are called to reflect on the teachings and the writings of the Faith, known as the *independent investigation of truth,* in order to come to their own understanding of the Faith, because there are no clergy or established rituals. Although unity is the goal, religion cannot be imposed externally, and true faith is gained only by studying the writings and looking inward. Religion is "one" because all traditions contain elements

of truth, and although the Faith is pluralistic in that sense, there is also an underlying, unifying structure within all religious traditions, revealing a common purpose for humanity. In keeping with the idea of unity, the Faith espouses an inherent harmony of science and religion. Along with this tenet is the belief in a universal education, including spiritual education, which should be made available to everyone. Finally, as part of the construction of a unified, divine civilization, universal peace is pursued, with the goal of eliminating extremes of wealth and poverty and creating a world commonwealth of nations.

Furthermore, the unity or oneness of all aspects of the world, its people, and God is reflected in the concept of *progressive revelation*. Bahá'u'lláh wrote that throughout history, there have been divine messengers or educators, disseminating to humanity the purpose of existence. Zoroaster, Buddha, Moses, Jesus, and Mohammed were all divine and virtuous human beings, revealed to humanity in order that people may come to some limited understanding of an unknowable God. Human beings are never left without a messenger, and in each era, a new Manifestation of God appears with relevant messages for that period. Bahá'ís believe that Bahá'u'lláh is the divinely chosen messenger and manifestation for this period. Consequently, a portion of religious truth is historical, and thus not absolute but relative to the readiness of humankind as a whole and to each person's own cognitive and spiritual capacities. However, some aspects of religious truth are absolute and eternal (e.g., "loving one's neighbor as thyself"). Thus, humanity evolves spiritually, materially, and intellectually over time, just as an individual child develops into an adult.

A Bahá'í Concept of Mental Health

Essentially, the Faith conceives of two levels of existence: the material realm and the spiritual realm, where the spiritual realm undergirds the inferior, material kingdom. Change and decay characterize the material world; wholeness and perpetuity describe the spiritual realm. Similarly, individuals can be characterized as having two natures: the material self and the spiritual self. Despite the simplified description of these dual natures in some of the writings, the Faith does espouse a multidimensional unity of self, recognizing the biological, psychological, spiritual, moral, and transcendental/teleological aspects of the human being, which will be explored later in this article. In simple terms, however, the material or natal self, often described as Satan in other sacred writings, characteristically exhibits "natural emotions." Thus, the concept of Satan is equated to the material or natal self. Bahá'u'lláh (1935/1976) described these emotions as "covetous desires, passions, jealousy, greed, the struggle for survival, deception, and hypocrisy" (p. 98). If an individual is consumed by such natural emotions, he or she becomes imprisoned in the world of nature and is likened to an animal.

In contrast, an individual's higher nature (i.e., his or her spiritual self) is capable of gaining supremacy over the lower, material self with the purpose of reflecting divine attributes, thus establishing a true connection with God. Hell does not exist in the Faith; individuals only strive toward degrees of close-

ness with God. Distance from God becomes the self's own punishment. According to Bahá'u'lláh (1935/1976), "the purpose of God in creating man hath been, and will ever be, to enable him to know his creator and to attain his Presence" (p. 33). Individuals are able to accomplish "nearness" through divine grace and God's bestowal of a rational soul or intellect.

This divinely given rational soul or intellect has many powers—reason, intuition, and understanding—and finds expression in the mind through the conduit of the brain. Essentially, the rational soul is a bridge between the material self and the spiritual self. In this way, the rational soul "discovers the innermost essence of all things and comprehends realities which cannot be seen" and "discovers the realities of the things and understands universal principles" (Abdu'l-Bahá, 1978b, p. 121). Despite the apparent duality of the spiritual and the material battling for supremacy, this tension between the two is a necessary component for growth and learning. A purposeful unity does exist between the material and spiritual, and through a dynamic dialectic and multidimensional unity, the self continues to be transformed and enlightened in an effort to approach God.

Knowledge, Love, and Will

When exploring the psychology of spiritual growth within the Bahá'í Faith, one also encounters the concepts of knowledge, love, and will. These concepts are in some sense hierarchical, with knowledge as the preeminent component. This knowledge is the knowledge of God and, in essence, is equivalent to the knowledge of the self. True knowledge of the self is accomplished by reflecting on one's own self-image and questioning the degree of accuracy or distortion of one's self-perception. This exploration is achieved via the rational soul. Knowledge of the self is not gained through reason via sense perception but through intuition, and individuals are inherently capable of achieving this knowledge through contemplation of the writings despite any physiological or cognitive limitations. However, this knowledge, in order to be achieved, must be coupled with God's bestowal of divine love as well as an individual's commitment to transcend the natal self and to act righteously in the world.

The level of tension that an individual experiences when in contact with external reality corresponds exclusively with the degree of distortion of his or her self-image. This level of tension, depending on the degree of distortion, can breed negative, or natural, emotions of anger, rage, or jealousy. This theory is quite similar to Carl Rogers's (1961/1995) view of the human personality and its degrees of congruence.

The increase in self-knowledge will allow the individual to discard false portions of the self, leading to growth and to the emergence of the spiritual self, which can then connect with the Divine reality. As more self-knowledge accrues, more energy is available for love. Through a feeling of freedom and release of one's false image, love can flow freely. This love is both inwardly and outwardly directed, as an individual comes to accept his or her genuine self and, as a result, more easily accepts other selves in the world. This love is also

vertically directed and helps the individual obtain connection with God and understand his or her ultimate purpose in life. The energy that is freed as a result of love is transformed into intentionality (will), which gives the individual a direction and provides a springboard for courage to act within the world, contributing to unity and spiritual progress. Abdu'l-Bahá (1978a) stated "spirituality is ... love in action" (p. 112). At this point in an individual's growth process, divine virtues are manifested, and he or she is capable of inner vision and understanding life's purpose and God. At this level of growth, an individual "receives illumination from the light of God and reflects it to the whole universe. ... [The illumination is] a source of life, and the agency of constructiveness in the infinite field of existence and ... irradiate[s] the Divine light and ... illumine[s] the world by his words, action, and life" (Abdu'l-Bahá, 1971, p. 234).

Origins of Suffering

In the Bahá'í Faith, it is acknowledged that origins of mental or psychological suffering may come from the physiological components of the individual (i.e., the brain). In this case, the soul is to some extent dependent on the body for its expression in material reality. However, it is also true that much human suffering originates from the material self or self-centeredness. Abdu'l-Bahá (1977) stated, "If a man be imbued with all qualities but be selfish, all the other virtues will fade or pass away and eventually he will grow worse" (p. 78). As a result, such self-centeredness can lead to estrangement. Estrangement is another obstacle for individual growth. Cooperation of all individuals despite different ideas and opinions is the vehicle for individual and collective transformation in the world. Thus, it is incumbent on the individual to develop his or her talents to accomplish unity in society. Finally, *exceeding in words* is another significant barrier to growth and cause of suffering. An individual "whose words exceed his deeds know verily his death better than his life" (Bahá'u'lláh, 1978, p. 78). Words that are not translated to action are obstacles and are essentially useless and empty. Action becomes the ultimate expression of an individual's faith and is necessary for the growth and advancement of civilization.

Clinical Implications

Psychotherapeutic Approaches and the Bahá'í Faith

Although no psychotherapeutic orientation is completely antithetical to the Bahá'í Faith, psychoanalytic theory's highlighting of the instinctual life and one's early childhood experiences as a powerful determinant of adult behavior can be seen as reductionistic and shortsighted. In contrast, Alfred Adler's (1931) theoretical underpinnings, which incorporate some elements of Freud's focus on early childhood events, convey the powerful components of one's social life and are in keeping with the priority of the social self in the Bahá'í Faith. In addition, the importance Adler placed on laying aside selfishness and embracing human responsibilities in society fits well with the Faith. Likewise, Jung's (1938) psychological theory, being somewhat theological in nature, characterizes human awareness in levels. Self-actualization occurs at Level 5, where

the self becomes transformed with the abandonment of the ego (Jung, 1938). The liberation of this ego can be equated to the discarding of the material or natal self to embrace the higher self in the Bahá'í Faith.

Additionally, cognitive therapy in its various forms is not necessarily incongruent with the Bahá'í outlook on mental health. An exclusive cognitive approach, however, with its focus on evidentialism (i.e., evaluating one's distortions based only on factual evidence and sense perception), is seen as limited, because intuitive knowledge ultimately leads to understanding. Moreover, using this approach in a formulaic manner can be seen as militating against the spontaneous flow of consciousness that leads to true understanding of oneself and of God. Healing is thought to begin through contemplation and experiential awareness, leading to increased insight, intuitive knowledge, and understanding, of which reason and logic from the sensible world should be only a part. A purely behavioral approach, with its emphasis on conditioning and its debasement of subjective experience, might also be perceived as limited. Humanistic–existential theories that highlight the ideographic aspects of human beings are most harmonious with the Faith where the aim of psychotherapy is to guide clients toward discovery of an authentic self. Furthermore, its philosophy of well-being that highlights a person's development of courage, a willingness to encounter the unknown, and participation in the community in a genuine manner parallels aptly the definition of psychological health in the Faith.

A primary focus on pathology and etiology of problems, rather than current options and personal strengths, might be seen as pessimistic and reductionistic. Although no psychotherapeutic modality in itself is inappropriate, one should possibly avoid overly confrontational techniques, such as those in Gestalt therapy, or avoid a purely behavioral or physiological approach to difficulties. Any of the psychotherapeutic techniques, if used with a Bahá'í client, should include contemplation of the Bahá'í sacred writings or other sacred texts and prayer because the Faith teaches that religious writings provide a necessary and helpful source of inspiration and guidance.

As explicated by McCullough and Larson (1999), prayer for Bahá'ís is seen as means for healing and can encompass meditative, colloquial, or intercessory types. Specifically, meditative prayer is important for inner vision of truth and the emergence of the spiritual self. Colloquial prayer may also be used in the context of a Bahá'í praying. This type of praying is used when guidance on making life decisions is needed and involves reading from the writings of Bahá'u'lláh or other religious texts (e.g., the Bible, the Qur'an, or the Bhagavad Gita). Finally, Bahá'ís believe in the power of intercessory prayer to help heal others and guide others.

Potential Issues of Bahá'í Clients

Therapists may encounter heterogeneity within the Bahá'í Faith, with persons at varying stages of spiritual development and commitment to the Faith. It should also be recognized that Bahá'í individuals of Middle Eastern descent might manifest different issues than an American Bahá'í because of the

merging of cultural values with religious beliefs. If mental health profession-als counsel a Bahá'í who is from the Middle East, they should also explore that person's cultural values.

Furthermore, despite a growing number of Bahá'ís in the United States, Bahá'í individuals often feel somewhat estranged from the dominant Christian culture and may fear judgment by the public as well as by mental health practitioners (Schlosser, 2003; St. Rain, 1999). Bahá'í clients of Iranian descent also have faced grave prejudices within Iran and have come to the United States for free expres-sion of their religious beliefs (Bureau of Democracy, Human Rights, and Labor, 2004). Although Bahá'ís are not considered a homogeneous population, it may be helpful to explore clinical issues that may potentially affect these clients.

In general, therapy for a Bahá'í should examine the whole person and, in so doing, affirm the unity of biopsychosocial processes with the inclusion and exploration of an individual's spiritual development, the Faith's moral teach-ings, and humanity's purposeful life within a world community. In addition, it might be helpful for counselors to keep in mind the concepts of moderation and balance when helping a Bahá'í with various problems. Any behavior in excess can be perceived as dysfunctional, irrational, or unhealthy in the Faith.

It is clear that the Faith is action oriented. In this sense, there is a call for indi-viduals to teach actively and to act in accordance with the teachings. Although this action can be manifested through various means, individuals who lack con-fidence or who have social anxiety may feel as though they are not contributing to the Faith. Perfectionism also may be an issue because of the demands of per-sonal action through Bahá'í administrative activities and personal strivings for peace within the larger community. Concurrent with this perfection may be a corresponding perception of failure manifested as guilt and shame. In this case, a Bahá'í client should be reminded of the Faith's focus on "becoming"—that human beings live within a dynamic process of growth toward perfection but are not expected to achieve it completely.

Another potential issue for a Bahá'í client is the struggle to avoid contention, which, according to the Faith, disunites individuals and prevents them from learn-ing from each other and growing as a community. "Therefore must all souls be-come as one soul, and all hearts as one heart. Let all be set free from the multiple identities that were born of passion and desire, and in the oneness of their love for God find a new way of life" (Abdu'l-Bahá, 1978b, p. 56). With the exhortation to establish Local Spiritual Assemblies and participate in administrative activi-ties, many individuals with divergent views are thrust together in order to fulfill a united purpose. Establishment of a united purpose, however, may be difficult given that clients may have differing opinions and strong convictions.

In the Faith, a person who has conflict with others is encouraged to look inward to evaluate the distorted aspects of the self and avoid outward evalu-ation of others' actions. Conversely, despite such potentials for contention, individuals in the Faith also might not feel comfortable in asserting their own opinions. Because Bahá'ís typically attempt to avoid any demonstration of the ego or material self, there may be some difficulty on the part of the Bahá'í client in distinguishing contention from the appropriate expression of one's

viewpoint. In this case, it can be helpful to teach the distinctions between assertiveness and aggression and to have the client practice assertiveness through role-play exercises.

In general, the Bahá'í community encourages consultation when individuals are faced with disagreements. Consultation is defined as a method of consensus building, not compromise. The ultimate goal of consultation is to reach a synthesis of dialectical viewpoints (Momen, 1991), which usually consists of two or more parties praying together and resolving differences by letting go of their attachments to their respective opinions. Consultation is perceived as an efficacious method of finding solutions to personal and interpersonal problems and is also an instrument for administrative affairs within the Faith. Unfortunately, consultation is most effective when individuals are highly spiritually developed, and as a consequence, many Bahá'ís might find themselves frustrated and feeling guilty or helpless when this consultative process is stymied by growing dissension and egotistical strivings of the individuals involved. In this case, counselors should help clients gain understanding and acceptance of the limitations and shortcomings of themselves and others. Counselors can also encourage clients to examine the utility of relinquishing expectations and perfectionistic strivings, thereby regaining awareness of the true purpose in resolving differences.

Because Bahá'í individuals define their lives through spiritual development, they seek to achieve growth through introspection and intuition via prayers, contemplation on the teachings of the Faith, or meditation. This spiritual development also includes living a purposeful life and engaging in altruistic, interpersonal interactions with others and the Bahá'í community. The extent to which a client is accomplishing these tasks may become a therapeutic issue. Second, in the Faith, an individual's ability to achieve spiritual and emotional maturity partly lies in his or her accordance with behavioral restrictions. (Alcohol and drug consumption is prohibited, as well as gambling and premarital sex.) Clients may have concerns regarding their behavior and may experience subsequent guilt because of violations of behavioral prohibitions.

The Counselor's Role

A counselor is seen as an expert who is worthy of respect as well as a facilitator of self-awareness at the cognitive and emotional level of change. Because all individuals are connected spiritually, such a therapeutic relationship can also be seen as having many positive, transformative benefits. A counselor's skill is limited, however, in the sense that true human transformation occurs at the level of the soul through the embrace of the spiritual self. The counselor, though, can be an integral influence in enabling a client to find his or her genuine self, which propels and fosters love, leading to intentionality and, ultimately, to positive action.

Initial Conceptualizations and Assessment

If a Bahá'í client enters therapy and asserts his or her involvement and belief in the Faith, a counselor might wish to address the client's difficulties from a

multidimensional unity. At least at the first stages of therapy, a nonjudgmental, neutral, passive stance is appropriate to allow rapport to develop and permit the client to disclose information (Rogers, 1961/1995). In addition, a biopsychosocial assessment would be in keeping with the Faith because it takes into account the whole person. Furthermore, it may be useful to help clients conceptualize their difficulties in terms of the spiritual, moral, and transcendental/teleological elements of their lives. Clients may wish to explore the development of their spiritual selves or their struggles with making moral decisions. Finally, the elements of transcendence, universality, and teleology may be important to explore, given that individuals are called to examine their place in the world, their ultimate purpose, and their connection to others. Clients may be experiencing a variety of emotions, including frustration, in determining their higher purpose in the world.

Case Example

A 37-year-old Caucasian woman of the Bahá'í Faith enters counseling, having been married for 10 years with two children, ages 5 and 7. She asserts her involvement in the Faith and that she follows its principles and precepts. Her presenting problem is difficulty in her marriage and feeling depressed because of her conflicts with her husband. The client reports that she does not feel her husband shares equitably in the household duties. She also states that she feels unfulfilled without full-time employment. She reports some history of several recurrent depressive episodes before and after marriage during her early adult years.

Therapy should begin with a nonjudgmental stance, and the clinician should examine the extent to which the client wishes to use the elements of the Bahá'í Faith in the therapeutic process. In keeping with the Faith's natural affiliation with the existential–humanistic approach, a counselor should attempt to seek understanding first without imposing a particular theory or intervention. In addition, attention should be made not only to the intrapsychic issues of the client's depression and her self-worth but also to her relationship to her environment and her transcendental role in life. In accordance with the Faith, balance needs to be achieved between the fulfillment of her own needs and her increase in self-knowledge and the fulfillment of her social self in the context of her marriage during the therapeutic process. The exploration of the degree of distortion of her self-image is crucial, but the exploration should, at some point, refer to how her distorted self-perceptions affect her ability to attain harmony in her relationship and to fulfill a role in her community. To attain a more accurate self-image and authentic self, she must increase her intuitive knowledge of her higher self, her inherent worth, and her higher purpose. This self-knowledge is increased through meditating and praying, reading sacred writings, reasoning and reframing her thought processes, and reflecting on the source of her negative emotions. The client's ability to attain harmony in her marriage, the next step in therapy, is achieved through mutual prayer and the practice of consultation.

Because marriage in the Faith is seen as a universal principle, an opportunity for greater spiritual development, and a conduit to "an ever advancing civilization" (Bahá'u'lláh, 1935/1976, p. 125), the client may want and expect to have her husband participate in some of her counseling sessions. The Bahá'í marriage itself represents a vehicle for the spiritual elevation of both individuals and thus addresses the interaction of souls. A healthy marriage in the Faith is partly defined by the couple's ability to inhibit the egotistical strivings of an isolated self through shared prayer and through a life of spiritual harmony. Systemic orientations emphasizing the married couple as an entity unto itself and the corresponding interactive and reciprocal processes are congruent with the Faith's view of marital relationships. Although Virginia Satir's (1983) systemic orientation is appropriate in understanding the Bahá'í marriage, Haley's (1984) ordeal therapy may be perceived as too manipulative and Bowen's (1985) focus on differentiation may be seen as devaluing the need for relatedness.

Because consultation is considered the optimal manner in which to resolve differences, there may be an expectation to use this approach. Although elements of the consultation strategy parallel the mediation process, interventions to improve communication and mediation techniques in and of themselves are limited as language itself is considered imperfect. Consequently, exploration of the spiritual dimension of achieving consensus, which encompasses the element of prayer, may need to be included in the process of conflict resolution.

The clinician should also remember that Bahá'í Faith's focus on unity may serve as a source of guilt for the client because of her frustrations in the marriage and the lack of consensus regarding household duties. Although divorce is not prohibited in the Faith, it is strongly discouraged. Conversely, the client, because of her belief that one should not be contentious, may not be sharing legitimately some of her frustrations with her husband. In this case, the clinician can help the client define healthy and unhealthy means of expressing oneself and asserting one's needs without forgetting the needs of others.

The clinician should also keep in mind that the Faith espouses the qualities of generosity, purity of motive, service to others, and deeds over words. The Faith also deems work as a form of worship, and as a result, those not working may experience some sense of uselessness. Because the client is not currently employed, she may feel as though she is not contributing to society and worshipping in the way that she would like. This client can be reminded that although there is a responsibility to give to others and to serve, service to others is not limited to full-time employment; it can include volunteer activities, both inside and outside her own Faith. Helping the client develop concrete goals toward which to work in order to serve others could help alleviate her feelings of uselessness.

According to the Faith, all individuals have potential for growth, and life's tests, paradoxically, are the means that lead to greater happiness, a greater capacity for loving, and the development of character and spirituality. Additionally, it is thought that the individual can be transformed if these tests are seen as gifts or opportunities. Tests within this client's marriage can be reframed as an opportunity for greater spiritual development and for a stronger relationship. The client's depression might be viewed as an opportunity for the

client to discover more about who she is and what her potential is as a human being. In the Faith, being free from difficulty equates to boredom; happiness, by contrast, is obtainable by directing one's energy toward concrete goals to increase one's capacity to love and know oneself, others, and God.

Therapy for the client might include a variety of cognitive–behavioral techniques, existential–humanistic approaches, and systemic therapy combined with encouragement to read from the Faith's teachings, meditate on them, and participate in prayer, both by herself and with her husband. The multidimensional unity of this client's issues, including her spiritual aspects and her transformative abilities to improve her difficulties, should be kept in mind throughout the therapeutic process.

Conclusion

In this article, I have attempted to provide an initial model for understanding how the Bahá'í Faith conceives of mental health, emotional suffering, and the purpose of humankind. It is clear that individuals of the Bahá'í Faith, like other religious traditions, focus on the higher nature of the individual, espouse a purposeful meaning of psychological suffering in the world, and highlight the importance of a spiritual focus in the finite realm of life (Olson, 2002). An initial understanding of the basic tenets of the Bahá'í Faith was also introduced to provide some preliminary guidance for counselors and psychotherapists who may counsel individuals of the Faith. Clinical implications were discussed that might illuminate a counselor's understanding of these clients and help guide treatment interventions.

Research has indicated that religion often has significant influence on people's life functioning. The relationship and connection between religious beliefs and mental health will be more evident only through the context of treatment as psychotherapists explore relevant religious material with clients. Information within this article serves to provide a small resource for this exploration.

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