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# PSYCHOTHERAPY AND THE RELIGIOUSLY COMMITTED PATIENT: A BOOK REVIEW

MARYBETH RAYNES, M.S.

Historically, the western world has talked easily of religion but not about the psyche and its hidden parts and passions (sex was always involved somehow). Psychiatry and psychology have helped change all of that, but now the situation is almost reversed. Religion is the new taboo—especially among therapists.

Mormons have continued to talk about religion through all of this. Mormon therapists have also kept religion in the forefront of their minds—as have a minority of other therapists. But in the broader world of psychotherapy some changes have been occurring recently. Now a major social science book club features a book on the topic of integrating therapy and religion for religiously committed patients. It not only encourages therapists to heal the split between religion and therapy but states that incorporating religious thought is crucial to treating the whole person. The best statement is a quote by another author in this book of essays:

“Our psychologizing may seem actually a theologizing, and this book is as much a work of theology as of psychology. In a way this is and must be so, since the merging of psychology and religion is less the confluence of two different streams than the result of their single source—the soul. The psyche itself keeps psychology and religion bound together” (Hellman, in Stern, p. 141-2).

But why review a book that acknowledges what Mormon therapists

have believed all along? Because we need to go further in integrating the links between our professional and religious halves, and because we too often only look to each other for new material without searching the world of religion outside of Mormonism to help us find deeper therapeutic questions and answers. This book helps in both ways, although it is only a fledgling effort and in no way covers the broad field of therapy well.

The editor, Mark Stern, tries through the vehicle of 16 articles from a variety of psychotherapists to bring the religious issues a client might have into the mainstream of concern for professionals. The book runs only 158 pages, containing a collection of short pieces that are generally the reflections of each writer. There is no unifying theme to these pieces, nor is research in this area integrated into most essays (there may not be much research to integrate). Most of the articles lean heavily on the theoretical side; only two or three focus on the bridge between the theoretical and practical in therapy. But most have several excellent ideas, or contain an interesting clarification of a therapeutic issue such as guilt, perfectionism, or the challenge of the therapist to be clear about his/her religiosity while simultaneously affirming the client's religious growth. Others wed religion and therapy with fresh concepts such as “the art of discernment” or the positive nature of some countertransference. Consonant with many Mormon therapists, the articles clearly reflect the religious commitment of the author (although institutional affiliation is usually not mentioned).

This is not to say that I would recommend you run out and order the book. Although I now think it is worthwhile, it took me two readings to grasp some

important concepts in a few of the essays. Maybe it was the vernacular of mainstream Christianity that sounds foreign to a long time Mormon like myself. Maybe it was that some of the writers were obtuse or used convoluted language or wrote about topics that held no interest for me. Maybe it was that I have just started doing some serious thinking about this topic and needed to warm up. In any case, my appreciation was earned, not easily won.

Since there is little space for a review of each article, I have chosen a few favorites for discussion that may yield some insights for Mormon therapists. In a good beginning essay, the editor sets the tone of the book by defining spirituality, outlining the role of the therapist, and acknowledging the intense dilemmas—or “psychospiritual quests”—that religiously active patients encounter. A good sample of the language of the book as well as summary of his article is the last paragraph of his piece:

Patients need to know that their respective quests are honored by the therapists they have chosen. As witnesses to psychological growth and expansiveness, psychotherapists take on the mantle of psychological as well as spiritual authority. Beholding their patients' lives as radically developmental leads to better understanding of a covenant with God's evolutionary essence within personal experience. This process is sacred since any insights a patient receives are more than an elaboration of individual psychodynamics. These insights establish a basis for the appreciation of the whispering voice of revelation making each pilgrimage into patienthood a confirmation of the worthwhileness and sacredness of the community of all human life (p. 11).

Carol Rayburn, in her essay titled “The Religious Patient's Initial Encounter with Psychotherapy”, discusses some of the vulnerabilities that religiously committed people have when coming into therapy. For example, she cites some research (a few cited are over 10 years old) in which religious students are characterized as feeling less adequate and being more anxious,

defensive and dependent with accompanying lower self esteem than non-religious students. Essentially, religious involvement does not save you from problems, and when emotionally upset it may work against you at times. “Religious patients, more than any other kind of patients are apt to experience their problems as felt punishment for some sin and to sense varying degrees of guilt for the misdeed” (p. 38). With that base, she does not deny religion, but outlines several interventions. She advocates actively supporting the patient's value system—both to the patient and to his or her family. She also suggests refining some concepts, such as perfectionism, in a new way for the client so that psychological and religious growth can occur. Additionally, she addresses the topics of guilt, anger, fear, gaps in therapist-client beliefs, and clients who are dissatisfied with parts of their religion.

In a striking essay, “The Spiritual Emergency Patient: Concept and Example,” Steven J. Hendlin discusses the need for understanding what is truly happening when spiritually active people experience psychological symptoms of distress. Most psychiatrists encourage such people to cease religious practice or at least decrease it. He does not, but suggests that emotional crises can come as the result of unmasking unresolved issues while working to achieve a personality transformation or greater level of maturity through spiritual means. “The term ‘spiritual emergency’ suggests a crisis but also the potential for rising to a higher state of being” (p. 79). He suggests methods for affirming and continuing the religious practices while dealing with the emotional and practical problems. His is the only article to include concepts and techniques from transpersonal psychology, a branch of psychology that seeks to incorporate spiritual thought and practice from Eastern religions into western schools of therapy. His is also one of the few articles to provide an effective integration of theory and practice. He gives criteria for differentiating spiritual emergencies from usual psychotic or affective breakdowns, and

also provides a treatment plan, techniques and a treatment example.

More briefly, other essays have interesting ideas that invite the reader to grapple with both spirituality and therapeutic skill. Albert S. Rossi in "Change in the Client and in the Client's God" describes how a person's concept of God gradually changes from a childhood image to a more adult image through the process of therapy. Raymond J. Stovich in "Metaphor and Therapy: Theory, Technique and Practice of the Use of Religious Imagery in Therapy" defines the nature of religious language as symbolic as well as literal and gives helpful techniques for weaving such language into therapy as stimulants for both emotional and religious growth.

In "Forgiveness: A Spiritual Psychotherapy," Kenneth Wapnick illustrates a primarily cognitive approach to understanding how and why forgiveness is helpful in working through issues in therapy. He also supplies an interesting redefinition of transference and countertransference. He says, "we all project, and all of the time. In this sense, transference and countertransference are one and the same." He continues:

Rather than seeing their reactions to the patient—annoyance, fear, guilt, concern, sexuality, discomfort, and so forth—as negative, as the term countertransference is usually understood, therapists would recognize that their patient was sent to them so that these very reactions would occur, bringing to the surface what has been repressed. When therapists' 'buttons are pushed,' the patient is no longer seen as the *cause* of these reactions, but rather as the means of bringing them to the surface. Thus therapists too are patients. Both people have been brought together to accept the opportunity offered by the Holy Spirit to join

together and be healed by Him, seeing in each other the mirror of the self they would rather deny and avoid." (p. 52)

He concludes by observing that as therapists we need to be in the role of therapists, but not of it, willing to grow and be healed ourselves.

Some of the articles were just not interesting. Two on reinterpreting Freud's "The Future of an Illusion" from a religious standpoint and one on the difficulties of priests in therapy were of little concern to me. Another on "Formation Counseling," which I interpret to mean counseling a person to form his or her own meaning of life and how to live with it, was long and could have been easily condensed.

So the sum is that I have mixed feelings about this book. It has intriguing ideas, but many are not well stated. The book's stated purpose is crucial to Mormon therapists, I believe. However, much of the material may not hit close enough to the mark for many LDS practitioners, and although the book contains some helpful ideas, there are not nearly enough. In all, the most valuable help the book might give is to stimulate other thinking, on these and other topics, within our sphere of influence. And I believe books such as this, from outside of the Mormon world can help us ask broader questions, and find more avenues to the collective spiritual growth of clients and therapists.

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## References

- Psychotherapy and the Religiously Committed Patient*, E. Mark Stern, ed., New York: The Haworth Press, 1985.  
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