Psychotherapy and the Gospel

Genevieve De Hoyos

Follow this and additional works at: https://scholarsarchive.byu.edu/irp

Recommended Citation
De Hoyos, Genevieve (1991) "Psychotherapy and the Gospel," Issues in Religion and Psychotherapy: Vol. 17 : No. 1 , Article 6. Available at: https://scholarsarchive.byu.edu/irp/vol17/iss1/6

This Article or Essay is brought to you for free and open access by the All Journals at BYU ScholarsArchive. It has been accepted for inclusion in Issues in Religion and Psychotherapy by an authorized editor of BYU ScholarsArchive. For more information, please contact scholarsarchive@byu.edu, ellen_amatangelo@byu.edu.
Why should the gospel be implemented into our professional practice? This is the question for this session. We all go through our own process of sacred/secular dissonance resolution. To resolve my own dissonance I went through three distinct stages: (1) Mormonizing of secular models; (2) Practicing secular therapies with the help of God and of the gospel; and, (3) Developing my own Mormon psychotherapeutic model. Let me briefly describe these three stages of my personal experience.

**Mormonizing of Secular Models**

Early in my life, I filtered everything I read and heard through my belief in God and the awareness of a plan of salvation. At that time I could look at and explain my reality through these emerging “Mormonized” models, with no sense of dissonance.

I am sure I still do that. But I can no longer feel totally comfortable doing it. This is because so many of us are Mormonizing any and all models even when these models are based on basic assumptions that are totally inimical to Mormon thinking. When I hear other professionals present their Mormonized versions of Humanism, of Behaviorism, and of the Conflict school, totally ignoring their false theoretical underpinnings, I shudder—I shudder because I strongly suspect that I do the same. I have no problem with the story of the broken mirror which explains the presence of some truth everywhere in the world. However, by now I feel that,
as a group of Mormon psychotherapists who believe that the whole truth has been given to us through the gospel, we could do better than simply distorting secular knowledge to make it fit, one way or another into our idea of truth.

**Practicing secular therapies with the help of God and of the Gospel**

Consequently, I have more recently used the Gospel more liberally in my practice. Having a great desire to use my therapeutic skills to help others, but also holding a teaching job, I felt I had to pray for clients. And they came. Then, very naturally, whenever I felt my client and I had hit some impasse, I quickly and silently prayed for inspiration, for some direction. When I saw my clients facing difficult decisions, or struggling in pain with some crucial issue, I prayed for them. And I saw the results of my pleadings.

Many of the problems brought to me by my clients required understanding the true purposes of life, required repenting, forgiving, healing, changing one's heart. I became aware of the many scriptures that indicate that there are therapeutic models built into the gospel itself. *Doctrine and Covenants* 9:8 helped me teach how to make good, inspired decisions. Ether 12:27 gave hope that we can give up on our hang-ups and change. And everywhere I found that God inspires our minds and changes our hearts, and that he willingly and lovingly forgives and forgets our trespasses.

In the process, I felt I was becoming more loving, more emotional. At first this worried me: I was afraid I was losing the rationality, the professionalism of which I had always been so proud. But unable to deny the empirical evidence that my clients were helped, I could not go back.

**Developing My Mormon Psychotherapeutic Model**

So I developed a model that helped me become aware that I was moving from a more rational, secular realm to a more emotional, religious realm. In turn, this model provided me a framework and rationale which helped me identify and evaluate the quality and appropriateness of my moving from one realm to the other.
This model is not a theoretical model since it does not explain. It is a conceptual model that simply describes and defines three realms and three types of therapies, based on the terms explained in “The Vision” of Doctrine and Covenants 76.

**The Telestial Realm**

Some clients have immediate, hedonistic, and selfish goals. They want gain and pleasure without regard to others. They are willingly following Satan, but they hate to pay the consequences that follow.

**Telestial-oriented Therapy**

Telestial-oriented therapy lets, perhaps even encourages, these clients to work toward their telestial goals while escaping their consequences.

**The Terrestrial Realm**

Most of our clients have Mosaic goals. In an atmosphere of fairness, they want peace and happiness. They may be quite troubled and mixed up, but basically they are the honorable men and women of the world.

**Terrestrial-oriented Therapy**

Terrestrial-oriented therapy is to use our therapeutic skills, our rational, professional knowledge, thinking and common sense to promote with our clients, resolutions that bring peace and contentment to all involved, while upholding our societal norms, mores, and laws at their best.

**The Celestial Realm**

Some of our clients strongly desire the goals of Christ. Eventually they want to gain the joys of eternal life. They may experience all types of negative feelings, yet ultimately, they want to do what is right, even if it hurts.

**Celestial-oriented Therapy**

Most of us therapists, barely hang on to the terrestrial realm, with occasional dips in the telestial and celestial realms. However, when we do act as celestial-oriented therapists, we occasionally and appropriately, (1) use the scriptures to teach eternal principles; (2) if needed, help clients re-establish a working relationship with
God; and, then, (3) help them seek God's help to modify their negative feelings.

**Function of the Model**

By using this model, I can hopefully ascertain when I am near to doing something remotely like celestial-oriented therapy. With this framework, I can quickly see that I spend most of my time doing terrestrial-oriented therapy. And I can also easily identify the moment when I go into celestial-oriented therapy. With that awareness, I can consciously choose to go back and forth between realms.

How do I know when I need to use celestial-oriented therapy? I typically start a session by asking the question: How is your relationship to God these days? Then, depending on the answer I get from the client, I can go ahead, I can back down, or I can help repair my client's relationship with God. Asking this question has taught me that many non-LDS clients depend on God through prayers, and that life crises often impair our relationship to God. It has also taught me that many clients want help to repair their relationship to God, because they see their own healing as depending on it. These clients can apply the following eternal principles:

- Only God can change feelings; we can only repress or deny.
- Sin cannot bring happiness.
- We need to forgive, then move on with our lives.

In the same way we develop social skills, we need to develop spiritual skills to identify basic eternal principles of life, to obtain answers, to get closer to God. As we do so, we will, no doubt, often switch between the roles of facilitator and teacher.

**Conceptual Challenges to the Model**

The main problem is that our training has taught that we should always be based on scientific knowledge, and always professional, meaning rational. In reality, whether we are aware of it or not, the gospel (or the lack of it) is implemented into our professional practice, because psychotherapy cannot be value-free. Our values get in the way, even the value of being value-free. As an example, a student who prided himself on being value-free was
observed making the assumption that a client wanted to be an overt homosexual, when, in fact, he was very obviously coming for help not to become homosexual. The student, wanting to prove that although he was LDS he would never want to impose his values on somebody else, could have done a lot of damage.

We are afraid of being branded as too emotional, too subjective, of pushing our values on our clients, and therefore of being "unprofessional." We are afraid of losing our credibility and legitimacy as responsible professionals and psychotherapists.

**Practical Challenges to the Model**

The major practical and professional barrier to using this model is our lack of rational models. We need rational models. Many of us develop our own models. We need to share them so that we can eventually come up with a functional one. They must be rational and professionally sound. These models need to set boundaries, provide awareness and insight, be professional—and when they gain legitimacy, they should be passed on to students.

In this panel, two major sides were represented. One side suggests using secular principles to live better Christian lives. The other side suggests using the gospel and the scriptures to derive principles of life. Perhaps both voices should be identified and respected. For myself, the time to Mormonize secular models is past. I would prefer going to the gospel and the scriptures first. So many models could be created. However, both sides must be respected and can work together to make us as Mormon psychotherapists attain our present and eternal potential.

*Genevieve De Hoyos is Professor Emeritus of the School of Social Work, Brigham Young University*