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P. SCOTT
RICHARDS

*The
Spirit of
Truth in
Personality*

IMPLICATIONS FOR COUNSELING
AND PSYCHOTHERAPY

The light and the Redeemer of the world; the Spirit of truth, who came into the world, because the world was made by him, and in him was the life of men and the light of men.

—D&C 93:9

During most of the twentieth century, religious and spiritual perspectives were excluded from mainstream psychological theory and practice (Bergin, 1980). The major therapeutic schools, including the psychodynamic, behavioral, humanistic-existential, cognitive, and family systems traditions, ignored the possibility that theistic spiritual influences could promote healing and change. The central dogma of the behavioral sciences was naturalism, the belief that human beings and the universe can be understood and explained without including God in scientific theories (Honer & Hunt, 1987; Leahey, 1991; Richards & Bergin, 1997).

During the 1980s and 1990s, a new, more spiritually open zeitgeist, or “spirit of the times,” arose in science, medicine, and the mental health professions (Appleyard, 1992; Benson, 1996; Richards & Bergin, 1997; Templeton & Herrmann, 1994). Numerous professional articles and books were published by mainstream publishers on the topics of religion and mental health and spirituality and psychotherapy (e.g., Bergin, 1980, 1991; Emmons, 1999; Jones, 1994; Kelly, 1995; Lovinger, 1984; Miller, 1999; Pargament, 1997; Richards & Bergin, 1997, 2000; Richards & Potts, 1995; Shafranske, 1996; Worthington, Kurusu, McCullough, & Sandage, 1996; Wulff, 1997). Professional ethical guidelines were revised and for the first time included religion as one type of the diversity that mental health professionals are obligated to respect and obtain competency in (APA, 1992; ACA, 1995).

In an effort to help bring spiritual perspectives into the mainstream mental health professions, my colleague Allen E. Bergin and I proposed a spiritual strategy for psychology and psychotherapy that is based explicitly on a theistic view of human nature and of the world (Bergin, 1980, 1991; Richards & Bergin, 1997). Our strategy is consistent with Latter-day Saint theology and doctrine but is written in ecumenical language so that hopefully it proves helpful to colleagues from diverse religious traditions.

The most important assumptions of our theistic spiritual strategy are that “God exists, . . . human beings are the creations of God, and . . . there are unseen spiritual processes by which the link between God and humanity is maintained” (Bergin, 1980, p. 99). We elaborated nine additional assumptions as follows:

First, God exists; is [our] Creator; embodies love, goodness, and truth; and acts on people’s behalf and for their sakes. Second,

human beings are beings of body and spirit, both temporal and spiritual. They are the offspring of God, created in the image of God, and carry within them the germ or seed of divinity. Third, human existence is sustained through the power of God. Fourth, human beings are able to communicate with God by spiritual means, such as prayer, and this inspired communication can positively influence their lives. Fifth, there is spiritual evil that opposes God and human welfare. Humans also can communicate with and be influenced by evil to their detriment and destruction. Sixth, good and evil can be discerned by the “Spirit of Truth.” Seventh, humans have agency and are responsible to both God and humanity for the choices they make and the consequences thereof. Eighth, because theistic, spiritual influences exist, their application in people’s lives should be beneficial to [each individual’s] well-being. Ninth, God’s plan for people is to use the experiences of this life to choose good, no matter how painful life may be, to learn wisdom and develop their potential to become more like God, and, ultimately, [to become] harmonious with the spirit of God. (Richards & Bergin, 1997, pp. 76–77)

In my view, all of these assumptions have important implications for a theistic and Latter-day Saint view of psychology and psychotherapy. The focus of this article, however, is on the sixth assumption, namely, “good and evil can be discerned by the ‘Spirit of Truth’” (Richards & Bergin, 1997, p. 77).

I believe the Latter-day Saint doctrine that human beings have the capacity to discern good and evil through the Spirit of Truth is relevant for theories of personality development and functioning and for the practice of counseling and psychotherapy. In the remainder of this article, I will discuss why I think this is so.

The Spirit of Truth in Latter-day Saint Theology

To communicate with colleagues from diverse religious perspectives, Allen Bergin and I used the term *Spirit of Truth* in our book to refer to God or “the Divine Intelligence that governs or harmonizes the universe” (Richards & Bergin, 1997, p. 77). In Latter-day Saint theology, the term *Spirit of Truth* is a general title that can refer to Jesus Christ, to the Light of Christ, or to the Holy Ghost (Brewster, 1988; McConkie, 1966).

Latter-day Saint doctrine teaches us that Jesus Christ and the Holy Ghost can help us spiritually discern good from evil. The Book

of Mormon states, “The Spirit of Christ is given to every man, that he may know good from evil” (Moro. 7:16).

Elder Bruce R. McConkie (1966) explained:

Every person born into the world is endowed with the light of Christ (Spirit of Christ or of the Lord) as a free gift (D&C 84:45–48). By virtue of this endowment all men automatically and intuitively know right from wrong and are encouraged and enticed to do what is right (Moro. 7:16). The recognizable operation of this Spirit in enlightening the mind and striving to lead men to do right is called *conscience*. It is an inborn consciousness or sense of the moral goodness or blameworthiness of one’s conduct, intentions, and character, together with an instinctive feeling or obligation to do right or be good. Members of the Church are entitled to the enlightenment of the light of Christ and also to the guidance of the Holy Ghost. If they so live as to enjoy the actual gift of the Holy Ghost, then their consciences are also guided by that member of the Godhead. (Rom. 9:1; pp. 156–157)

In summary, human beings can receive assistance in discerning good from evil through the Light of Christ and the Holy Ghost. Through the influence of his spirit, Jesus Christ invites and entices us to “do good continually . . . and to love God, and to serve him” (Moro. 7:13). As we hearken to his invitations, we receive “truth and light, until [we are] glorified in truth and [know] all things” (D&C 93:28). Then our “whole bodies shall be filled with light, and there shall be no darkness in [us]; and that body which is filled with light comprehendeth all things” (D&C 88:67).

Implications of the Spirit of Truth for Personality Development and Functioning

I believe that such doctrines have a number of implications for personality development and functioning. Allen Bergin and I hypothesized the following:

Personality is influenced by a variety of systems and processes, but the eternal spirit is the core essence of identity. Healthy human development occurs as people hearken to the enticings of the Spirit of Truth. The Spirit of Truth helps people understand, value, and regulate their lives in harmony with universal principles that promote human growth and healthy functioning. Personality development and functioning are optimized when

*Turning
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people are able to affirm their eternal spiritual identity; follow the influence of the Spirit of Truth; and regulate their behavior, feelings, and thoughts in harmony with universal principles and values. (Richards & Bergin, 1997, p. 100)

Thus, if people listen to the enticings of the Light of Christ and of the Holy Ghost and live in harmony with eternal, universally true principles and virtues such as honesty, fidelity, love, service, forgiveness, humility, patience, and faith, they will develop and grow in a healthier manner. They will tend to enjoy better physical and mental health. This is not to suggest that a healthy personality and healthy spirit are equivalent. People who follow the influence of the Spirit of Truth will still have problems and may at times experience physical and psychological pathologies that are caused by genetic and environmental influences outside of their control, but overall they will tend to function better than they would otherwise.

People who do not hearken to the Light of Christ and the Holy Ghost will be more likely to experience problems and pathology caused by disobedience and violations of eternal moral and mental-health values and principles. Although not all psychopathology and disturbance is caused by sin, some of it is, and people will be more susceptible to those pathologies and symptoms caused by violations of their consciences. Interestingly, my colleague Tim Smith and I have found that those college students who scored lower on a measure of moral congruence tended to report higher levels of anxiety and depression than did students who were more congruent (Richards & Smith, 2000). This finding does not suggest that all anxiety and depression is caused by sin; however, sin clearly causes some anxiety and depression (Mowrer, 1967).

It is beyond the scope of this article to discuss in detail how this theistic view of personality relates with secular theories and research about conscience and morality, but there is a large body of secular literature, much of which is consistent with the hypotheses I have just described. Although I do not know of any mainstream behavioral scientists who have discussed the notion of the Spirit of Truth as it pertains to conscience or moral development, many scholars have written about the influence of congruence, authenticity, morality, sin, and guilt on mental health and personality

development (e.g., Conn, 1981; Mowrer, 1961, 1967; Nelson, 1973; Rogers, 1980). Many of them agree that congruence between our moral values and behavior is essential for healthy functioning. What most of them do *not* suggest is that there are also universally true moral values that influence healthy human functioning. Our theistic spiritual strategy is distinctive from secular theories in that it hypothesizes that healthy functioning depends on both congruence between moral values and behavior *and* congruence with universally true moral principles and values.

A belief in the Light of Christ and the Holy Ghost influences the way we work with our clients. In our book, Allen Bergin and I explained that the core therapeutic goal of our theistic spiritual strategy—a goal that logically flows from our view of personality and therapeutic change—is to “help clients experience and affirm their eternal spiritual identity and live in harmony with the Spirit of Truth” (Richards & Bergin, 1997, p. 116). We further explained:

When therapists succeed at this goal, the healing, change, and growth that clients experience will be more profound, complete, and long-lasting. Clients will grow in their feelings of self-worth, capacity to internalize healthy values, ability to regulate their behavior in healthy and productive ways, and capacity for benevolent and productive contributions to kinship and community. (Richards & Bergin, 1997, p. 116)

But how do we help our clients understand the importance of living in harmony with the Spirit of Truth in light of professional ethical guidelines that stress that we should “respect the rights of others to hold values, attitudes, and opinions that differ from [our] own” (APA, 1992, Standard 1.09)? Historically, such guidelines have often been interpreted to mean therapists should keep their values out of therapy. Many therapists have adopted an ethically relativistic stance, which assumes that all client values are equally good and valid and that therapists “should not question their clients’ values. Values, they also assumed, were irrelevant to mental health and therapeutic change” (Richards, Rector, & Tjeltveit, 1999, p. 134).

Fortunately, most therapists are now aware that the belief that therapists can and should keep their values out of therapy has been discredited. Research has provided evidence that therapists’ values

influence every phase of psychotherapy (Bergin, 1980; Bergin, Payne, & Richards, 1996; London, 1986; Lowe, 1976; Tjeltveit, 1986; Woolfolk, 1998). Many professionals now also recognize that ethical relativism, as a philosophy for guiding the practice of psychotherapy, is problematic. Ethical relativism

creates a dilemma in therapy because it sometimes becomes clear that clients' values and lifestyles have negative emotional, social, or physical consequences (e.g., a married man who values abusing drugs and engaging in promiscuous, unprotected sex increases his and his spouse's risk of contracting AIDS). Ethical relativists cannot logically challenge such values without contradicting the premise that all values are equally good. (Richards et al., 1999, p. 136)

Most mental health professionals now recognize that therapists cannot keep their values out of therapy (Bergin et al., 1996). I believe that therapists *should not* keep out their values. Rather, they should "accept [the fact] that they are value agents and purposely attempt to model and communicate healthy moral and ethical values to their clients" (Richards & Bergin, 1997, p. 131). It is possible for therapists to both respect client diversity and also adopt a strategy for therapy that helps "clients learn to listen to their conscience[s], follow the Spirit of Truth, and internalize healthy values that will help optimize their development and growth" (Richards & Bergin, p. 131). I believe

it is important for therapists to be open about the values that influence their therapeutic decisions and recommendations throughout the course of therapy. . . . They . . . should openly discuss and help clients examine the values that may be affecting the client's mental health and interpersonal relations . . . by being explicit about values and actively endorsing consensus values that promote healthy functioning, while also communicating to clients that they have the right to disagree with the therapist's values without fear of therapist condemnation, clients' freedom of choice is maximized. (Richards & Bergin, 1997, pp. 132–135)

I recognize that there are dangers in deliberately endorsing and promoting values in therapy. I agree with Bergin (1991) who cautioned that

a strong interest in value discussions . . . can be problematic if it is overemphasized. It would be unethical to trample on the values

of clients, and it would be unwise to focus on value issues when other issues may be at the nucleus of the disorder, which is frequently the case in the early stages of treatment. It is vital to be open about values but not coercive, to be a competent professional and not a missionary for a particular belief, and at the same time to be honest enough to recognize how one's value commitments may or may not promote health. (p. 399)

Value themes, therefore, should not always be the central focus of therapy. On some occasions, value discussions may actually be contraindicated. Some clients may have such severe pathology or acute symptoms that they are not capable of rationally responding to value issues.

Finally, my beliefs that there are universally true moral principles and values and that therapists should share their understanding with clients about what they do not mean I think therapists should tell their clients how to apply these values in a given situation. Ultimately, therapists must permit clients to make their own choices about what they value and how they will apply these values in their lives, but it would be irresponsible for therapists not to share what wisdom they can about values when it is relevant.

Treatment Techniques and Approaches

After making an effort to be clear about their values during the course of treatment, therapists can use a number of other techniques and strategies to help clients explore, clarify, and modify their values, as well as to help them learn to recognize and hearken to impressions from the Light of Christ and the Holy Ghost. For example, therapists can ask value-related questions during assessment. What gives your life meaning? What is most important to you in life? What moral, ethical, or spiritual values, if any, do you use to guide your life? Do you feel that your behavior and lifestyle are consistent with the values you profess? Do you think moving in with your boyfriend would be a healthy choice for you (emotionally, spiritually, physically)? If you move in with your boyfriend, is this a decision that will feel congruent with who you are and what you value? Does this decision feel morally right to you?

Therapists may also wish to invite clients to rank-order the values they give priority to in their current lives, using the following

list of values (see Miller and C'de Baca, 1994): achievement, attractiveness, career, care for others, equality for all, fame, family, forgiveness, fun, God's will, growth, happiness, health, honesty, intimacy, justice, knowledge, love, pleasure, popularity, power, rationality, romance, self-control, self-esteem, spirituality, and wealth. After clients have rank-ordered the values they are currently giving priority to, therapists can ask them to rank-order what values they would prefer to have the most priority in their lives. Clients can then be invited to consider where discrepancies exist between current and desired value priorities. Additional values clarification exercises described by Gerald Corey (1983) that I have found helpful with some clients include the Last Year of Your Life exercise, Write Your Philosophy of Life exercise, and Prepare Your Tombstone Inscription exercise. Steven Covey's (1989) Personal Mission Statement exercise can also be helpful.

When religious clients are struggling with difficult lifestyle choices, encouraging them to seek spiritual enlightenment by praying, meditating, reflecting upon their patriarchal blessings (if they are Latter-day Saint), and reading sacred writings can potentially help them spiritually focus and center on the values most important to them. Spiritual enlightenment about the meaning and purpose of their lives and the values that are most important may come to clients as they seek such guidance.

When clients admit confusion about what their values really are or manifest discrepancies between their professed values and their behavior, therapists can explicitly help clients examine and explore their confusion and incongruencies. As they do, therapists can encourage clients to listen to their conscience or inner feelings about what values and behaviors they feel are right, moral, and healthy. With Latter-day Saint clients, therapists may wish to share their belief in the spiritual source of such inner feelings (i.e., the Light of Christ, the Holy Ghost).

When clients lack an understanding of healthy and moral values, therapists can explicitly teach clients which spiritual values and virtues are healthy and desirable. With Latter-day Saint clients, therapists can discuss Church teachings about value issues or encourage clients to visit with their bishops about these issues. With clients of other faiths, therapists can give encouragement to seek

moral guidance from their own religious leaders and sacred writings. Therapists can also share with clients a list or description of the values that mental health professionals regard as healthy (e.g., Jensen & Bergin, 1988; Richards & Bergin, 1997).

As therapists use such interventions with religious clients, it may be appropriate to periodically encourage them to “listen to their hearts” or “consciences” about what values and lifestyle choices feel right to them. Expressing faith in clients’ capacity to spiritually discern between good and evil, right and wrong, as well as healthy and unhealthy choices, may be appropriate. Above all, Latter-day Saint and other Christian clients can be encouraged to seek guidance from God and Jesus Christ about their choices.

Case Study

The following case study illustrates my belief that the Light of Christ and the Holy Ghost can play a central role in the recovery and healing of many clients. As I have worked with clients, I have often felt that they seem to have an inner sense of what they need to do in their lives in order to work through their pain, heal, and get better. I believe that this inner sense is the Light of Christ and the Holy Ghost giving them direction about what they need to do to choose between right or wrong, health and disturbance.

Client Description and Presenting Problem. Frank¹ was a 28-year-old Latter-day Saint male of average height and weight. Frank informed me that he had a history of relationship problems and had decided that perhaps the relationship failures were his fault. He said he wanted to work on himself and gain more insight into why his relationships kept failing.

Background and History. Frank had grown up in a Latter-day Saint home. He said that during high school he had become popular because he was a successful athlete. He became sexually promiscuous and had a number of short-term sexual relationships. In retrospect he recognized that “scoring sexually” had boosted his self-esteem and made him feel he was important and worthwhile. Soon after high school, he made a young Latter-day Saint woman

1. The client’s name has been changed to help protect his identity. This case study is shared with the permission of the client.

pregnant, and they got married. After a short time, this marriage ended when she divorced him.

Frank resumed his promiscuous lifestyle and was eventually disfellowshipped from the Church. A couple of years later, he remarried. His second wife was also a Latter-day Saint and had recently divorced the man she had married in the temple because she believed “God wanted her to be with Frank.” Frank and his second wife were married civilly but were separated at the time Frank started therapy. They had one child. Frank said that he felt their marriage was a mistake and that within a few months after they were married both he and his wife realized that they really did not like each other, let alone love each other.

Diagnosis. Frank was experiencing dysthymia (chronic moderate depression) when he began working with me. He also met Patrick Carnes’s (1989) criteria for a level-one sexual addiction. He used sex to boost his self-esteem and to get away from feelings of depression and from other bad feelings. He had severe marital conflict and dissatisfaction. He did not trust women. He had very low self-esteem, felt unworthy, and said that he perceived himself as morally degenerate. He felt alienated from God and from the Church. He was not happy in his blue-collar job because it did not challenge him intellectually.

Summary of Treatment Process. As I have described in detail elsewhere (Richards & Bergin, 1997), my theistic spiritual strategy is integrative in that I incorporate perspectives and interventions from some of the mainstream secular therapy traditions that can be reconciled or theoretically reframed in a manner consistent with the theistic assumptions I describe at the beginning of this article.

My core theoretical and spiritual assumptions, which include the beliefs that God lives and that my clients are children of God, were at the core of my work with Frank. Another core assumption that influenced my work with Frank was my belief that it would be important for Frank to eventually begin living more in harmony with his values. Even though Frank was not active in the Church and his membership was on probation because he had been disfellowshipped, Frank acknowledged that his sexual promiscuity and pornography addiction conflicted with his core beliefs about what was right and wrong. He felt guilt and shame whenever he engaged

in these behaviors. From the outset of therapy, I assumed these issues would need to be dealt with in order for him to fully heal and grow.

In my treatment, I used several interventions that secular schools of psychotherapy have advocated. I provided an environment of safety and acceptance and listened and responded empathetically. I also explored Frank's childhood and early experiences with his mother and with other women. I helped Frank identify and modify some of his dysfunctional assumptions about himself, women, and God. I also asked Frank to bring in his wife, but the session was a disaster. It blew up into a major conflict, and Frank refused further marital sessions. That was the least effective intervention I tried, but the other things I mentioned did seem to help.

I also used a number of spiritual interventions with Frank. We had numerous discussions about his spiritual beliefs and how he felt about his alienation from the Church. We discussed the Atonement, grace, and forgiveness, and I suggested readings on these topics, including the book *Believing Christ* (Robinson, 1992). Frank initially did not believe that he could be forgiven and found it difficult to accept that the grace of Jesus Christ could apply to him.

On many occasions, I affirmed Frank's worth as a child of God and helped him recognize the importance of living in harmony with his values. I did not have to preach. All I did was affirm what Frank was already saying to me, namely, that he did not feel good about violating his beliefs and values. I occasionally encouraged Frank to listen to his heart and inner feelings about what was right for him to do with his life, including his marriage, career, and involvement in the Church. Frank started to pray more and began to report that he did have feelings and impressions about what was right and wrong and about how he should live his life. He began to follow these inner impressions more and more often.

A major milestone for Frank in listening to the prompting of his conscience occurred when an attractive woman propositioned him. Frank was tempted by her proposition and took her phone number, saying he would call her. After he got home, he said, he had a powerful, dark feeling come over him. The feeling of darkness was so strong it frightened him, and he realized he should not see the woman. In the past, Frank had always given in to such sexual opportunities, so such self-denial represented a major change in his behavior.

A number of other important changes occurred in Frank's relationship with the Church and with God. He reported that he felt closer to God and to the Savior. He stated that he felt more peace and forgiveness regarding the many mistakes he had made in the past. He began attending church again, and a major spiritual milestone occurred when his Church court reconvened and he was reinstated in the Church. About a year later, he was ordained to the Melchizedek Priesthood, and a few months afterward, he received a temple recommend. This was another major milestone because it had necessitated that he overcome his pornography and masturbation problems.

During the course of therapy, Frank's depression became less frequent and less severe. He eventually quit his blue-collar job and went back to college. Frank did so in spite of the objections of his wife, who did not want him to quit because of the good income it provided for the family. But Frank was very unhappy in the job and felt it did not permit him to use the talents and gifts God had given him. Frank earned very high grades during his last two years of college, graduated, took the LSAT, received very high scores on it, and was admitted to several of the top law schools in the country.

Frank was not able to salvage his marriage. Despite his efforts to improve his relationship with his wife, their relationship continued to have no intimacy, no closeness, no shared interests, and no trust. Frank had no desire to go to the temple with her, nor, it appeared, did she with him. Frank believed that his wife cared more about his ability to provide financial support for her than about having a loving, close relationship with him. After over two years of agonizing about it, Frank finally decided he should get divorced. This was the toughest decision I saw Frank make, and he made it only after many months of careful deliberation and prayer. Ultimately, Frank did it because he believed it was the right thing to do.

Before we terminated therapy, Frank wrote the following, in which he shared with me his feelings about his progress:

I have gained a much greater self-esteem. I now have the confidence necessary to make difficult decisions and stick with them. Due to this increase in self-esteem I like myself more, which helps me love others more. I have also learned to be more open in my communication and to stand up for myself in positive

ways. I have learned to forgive myself and to recognize and accept my nature instead of constantly trying to fight it. Spiritually I have grown immensely. I have learned how to use prayer and recognize its answers and to trust in powers greater than mine. All of these things combined have given me a much greater peace of mind, not that things are perfect by any means, but I believe all will be well if I stick to my standards and do what I know to be right.

God lives. Through the influence of the Light of Christ and the Holy Ghost, we can receive guidance and help in our lives—help to do what is right, help in our pain and troubles, and help in our journeys of healing and growth. I hope that as professionals we can help our clients discover and affirm this wonderful reality.

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