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From the Individual to Individualism: A Critique of the Helping Professions

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Individualistic values characterize contemporary society and many popular approaches to mental health treatment. This paper critiques the individualistic values embedded in the helping professions that implicitly contradict the teachings of Jesus Christ, the surest foundation for mental health interventions. Members of AMCAP are encouraged to search out and replace problematic values that contradict gospel teachings which have been integrated into contemporary mental health practice.

Elder Richard G. Scott (1998) has emphasized the need to evaluate traditions and practices associated with our cultural heritage against the standards taught in the gospel of Jesus Christ:

You have the responsibility to determine if there is any part of [your] heritage that must be discarded because it works against the Lord's plan of happiness ... there is serious danger in placing [your] heritage in priority above membership in the Church of Jesus Christ ... Where [your] traditions or customs conflict with the teachings of God, set them aside. (Scott, 1998, pp. 85-87)

Though obviously different from the cultural social diversity to which Elder Scott referred, the general traditions and practices of the helping professions may be said to reflect the "cultural heritage" of training institutions steeped in the history of social science. Applying Elder Scott's admonition to the "culture" of the helping professions, this paper addresses one aspect of the cur-

rent culture of therapy – individualism – in light of both scriptural evidence and modern critics of psychology. It is hoped that the reader will proceed to evaluate additional assumptions or perspectives of the field that may also contradict gospel teachings.

FROM THE STUDY OF THE INDIVIDUAL TO THE PROPAGATION OF INDIVIDUALISM

The scientific study of the individual was legitimized through the work of the founders of psychology and other helping professions. Indeed, the uniqueness of

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nineteenth century psychology was not so much its content as its approach to the subject. Psychologists attempted to objectively study the individual – particularly the individual in contrast to the group. The aims of objectivity and experimental control seem to have been worthwhile goals, giving rise to many notable findings across the decades. But in addition to increasing the precision of the study of human behavior, psychology's focus on the individual has had an interactive relationship with the social, moral and ethical systems of society. Thus this focus on the individual has reinforced and solidified individualistic values characteristic of Western society.

Individualistic values reflect the tenor of our modern age. Some authors have even gone so far as to call individualism a “disguised ideology” in psychology and psychotherapy (Richardson, Fowers & Guignon, 1999). A great deal of psychotherapy practice assumes the appropriateness of the individualistic ethic, and promotes individualism as an ideal both explicitly and implicitly:

We in America have become a society devoted to the individual self ... Rarely does [therapy] speak of duty to one's society – almost everyone in psychotherapy is concerned with individual gain, and the psychotherapist is hired to assist in this endeavor. (Rollo May, 1994)

The exclusive focus on the individual in psychology, however, has two consequences. First, such a focus limits the utility of the resulting theories and research findings for practice in the mental health professions because it does not take into account the interactive and contextual nature of human nature and well-being. Second, an individualistic focus may also perpetuate problematic ethical and moral positions that may be contrary to the moral systems and practices of many clients as well as the teachings of Jesus Christ.

The focus on individual happiness to the exclusion of other ideals arises due to the subtly held belief that “the basic unit of human reality is the individual person, who is assumed to exist and have determinate characteristics prior to, and independent of, his or her social existence” (Richardson & Zeddies, 2001, p. 5). One of the effects of this view is a sharp division between public and private domains, and a lack of moral understanding beyond the individual's desires (Bellah, et al., 1985). An example of this is the oft-heard refrain “What I do behind closed

doors is my business.” Even marriage can fall victim to this process, with some individuals assuming that marriage is only about whether or not their spouse or the relationship makes them happy, completely overlooking the broader moral issue of responsibility to others and coping during difficult times.

In some ways our modern society has tempered such sharp individualism by adding a deeply held doctrine that people are inherently worthwhile, with certain undeniable and unalienable rights that should not be violated. This modern understanding of individualism is called “liberal individualism” (Sandel, 1996). Liberal individualism adds an element of respect and dignity to the rights of all, arguing that it is very important to not intrude on the rights of others. An example of this might be a teenager's attitude of “I should be able to do what I want if I'm not going to hurt anybody.” This combination of self-interest and respect for the rights of others results in reluctance for anyone to proclaim the superiority or inferiority of various ways of life, in order to best protect the rights of others. Psychotherapy, in an interesting way, also participates in this process. A good deal of behavior that psychotherapists see or hear about in their practices could be considered problematic if not blatantly immoral by those holding traditional values. Yet rather than discussing behavior such as promiscuity, homosexuality or abortion in moral terms, psychologists tend to label them in terms of “healthy” or “unhealthy” depending on the political climate of the time (Fancher, 1995). In accordance with modern political culture, many issues that were formerly pathologized are now no longer considered problematic, often under the individualistic assumption that what one does behind closed doors is nobody else's business. The practice of psychotherapy has followed this individualistic (and morally ambiguous) trend, seeking to help people become free from constraint and obstacles to happiness, both internal and external. Psychotherapist training emphasizes removing the causes of discomfort or unhappiness, so that the client's “self” might function or feel better.

Paul Vitz (1994), one critic of this trend in psychotherapy, calls this preoccupation with the self “selfism.” He quotes Herbert Hendin (1975) from his book *The Age of Sensation* to describe one aspect of selfism:

This culture is marked by a self-interest and egocentrism that increasingly reduces all relations to the question: What am I getting out of it? ... Society's fascination with

self-aggrandizement makes many young people judge all relationships in terms of winning and losing points. For both sexes in this society, caring deeply for anyone is becoming synonymous with losing. Men seem to want to give women less and less, while women increasingly see demands men make as inherently demeaning. (Hendin, 1975, as quoted in Vitz, 1994, p. 121)

The most worthwhile goal in modern society is providing for individualistic needs and wants without looking to greater social or moral obligations. Even familial and marital relationships are understood in terms of what happiness they can provide for the self, eroding the traditional values of self-sacrifice, self-control and duty to others necessary for strong marriages and healthy families (Vitz, 1994).

The clash between the moral practices of clients and the assumptions of psychotherapy, however, is pervasive and can take forms ranging from obvious to subtle. For example, both social constructivism and positivism (philosophies of science) deny the possibility of universal principles of morality.¹ This shift away from universal ethics may be noted in the widespread "value neutral" stance taken by mental health professionals² on issues such as homosexuality and abortion. Thus, more often than not, individual morality and individualism, with their more popular synonyms of self-appreciation and self-acceptance, characterize mental health practice – as well as the progressively disconnected social fabric of this country. As Doherty (1995) has noted, "Therapists since the time of Freud have overemphasized individual self-interest, giving short shrift to family and community responsibilities" (p. 7). Such psychotherapy is "self-ish" and unlikely to aid clients who value the importance of family, community, and moral responsibility to others.

Due to the potential clash between non-individualistic beliefs held by some clients and the individualistic ideology of many therapy theories, therapists need to be very careful in their interventions. Psychotherapy, holding the values of personal fulfillment, freedom from misery, awareness and validation of one's own feelings, can be very attractive to those who suffer, regardless of their backgrounds and beliefs (Richardson & Zeddies, 2001). However, by focusing exclusively on the feelings of the individual, and by focusing primarily on the issues of self-esteem and self-acceptance, the therapist may inadvertently perpetuate greater misery. Individuals may

begin to believe that they are at the center of their moral universe, and that if they were truly mentally healthy they would not suffer misery in life. This may build even greater grief and misery when the inevitable disappointments in life do occur. Traditional virtues that help people cope, such as "the redemptive power of suffering, acceptance of one's lot in life, adherence to tradition, self-restraint and moderation" can become lost by the wayside in the face of individualism (Frank, 1978, pp. 6-7). Individualism does not offer an understanding to therapists or their clients about the ways in which society might perpetuate certain inevitable miseries, how they might better live up to their social and moral obligations, or how to fight for societal change rather than just individual happiness.

LDS DOCTRINE AND INDIVIDUALISM

Steeped in the traditions of therapy training, therapists may find it incomprehensible that the scriptures contain no³ references to *self* that support the use of terms such as *self-esteem* or *self-appreciation*. Although some might attribute this to differences between ancient and modern languages, a more likely alternative is that terms that particularly emphasize the *self* inaccurately depict the very nature of existence: people do not live in isolation from one another. Rather, the scriptures repeatedly emphasize the connections and relationships people have with one another. Individualism of any form (pride, self-preoccupation, etc.) is always associated with unhappiness. This unhappiness is destined to grow in the Last Days as modern culture's intense preoccupation with the self also grows (Draper, 2001). Indulging in the wants and needs of the self, at first, breeds increased sensation and increased satisfaction. But over time, sensation alone only provides satisfaction for the body, whereas to the soul it all seems senseless, leading to feelings of hopelessness and eventually nihilism.

When a people have drunk too deeply of the wine of selfishness, they care for nothing, not even themselves. They see no value in anything. In fact, they do not see at all; thus they cannot perceive the light as it pulsates through God's people (Draper, 2001, p. 36).

Selfism (or selfishness) breeds iniquity as Christ's love leads to service. Iniquity begets selfishness as selfishness

begets iniquity in an ongoing and destructive feedback loop (Draper, 2001). People become increasingly closed off from others, focusing only on their own wants and desires, walking progressively away from the Gospel of Christ. Their relationships fragment, and they become increasingly isolated. In contrast, successful relationships are the hallmark of happiness because they increase our trust in others (faith), our vision of possibilities (hope), and our level of personal sacrifice (charity). The more that relationships are brought in line with correct principles, the more trust, vision and sacrifice are required, leading to corresponding increases in mutual joy and fulfillment.

Hence the importance of *The Family: A Proclamation to the World* issued by the First Presidency (Hinckley, 1995). In an age of unbridled consumerism, decreased social cohesion, and increased self-absorption, the *Proclamation* reminds that family bonds, if appropriately nurtured, offer essential support. Family bonds increase stewardship and talent development – with a challenge to be better, rather than to just accept one’s self as is.

At the apex of this principle is an individual’s relationship with God. Over and over the scriptures affirm that personal identity is eternal – and connected with Him. It is the relationship with God and His family, rather than any individual accomplishment that is the very essence of existence (John 17: 2-26).

But all this should not be taken as an argument against individuality. The scriptures clearly affirm the ability to act independently. However, they also affirm that one’s actions are connected with other people. And this is the essential part missing from many approaches to therapy – as well as from terms such as *self-esteem*.

PSYCHOTHERAPY PRACTICE AND THE “SELF”

The *individualistic culture* of the psychotherapy profession may prevent recognizing inaccurate principles that can pervade theories and practices of psychotherapy. For example, a theoretical orientation that emphasizes the “self” over a relational perspective of optimal mental health may be utilized. Individualistic practices are found in most of the popular approaches to therapy, including Behavioral (Kitchener, 1991), Cognitive (Prilleltensky, 1990), Gestalt (Saner, 1989), and Rogerian (Usher, 1989). If socially-connecting, unifying

aspects of life are left out of the therapeutic perspective, the support available from non-clinical relationships may unwittingly be minimized. Or therapy may actually encourage a self-focused perspective in clients by placing excessive emphasis on introspection, or by making no intervention or interpretation when a client repeatedly or exclusively focuses on his/her own concerns without consideration of how they relate to others.

Indeed, Vitz (1994) states that the problems of individualism, and the many related issues, are not for psychology to cure but rather for religion to cure. He states that people must lose themselves, and allow themselves to become objects “in the love and service of God” (Vitz, 1994, p. 160). That is, rather than seeking one’s own freely-chosen ends, the love of men can be prevented from waxing cold (Matt. 24:12) by looking for opportunities to serve. Clients can even be encouraged to find a purpose in life outside of themselves in a way that connects them with others through service and the process of relating to others. This is a very difficult process, especially in modern culture; Vitz (1994) states that

in order for this to happen, one must let go of the selfist self and of its controlling will, bloated from constructing the interior apparatus of secular competence ... With the preparation of mind and will, transcendent awareness of God’s love and will is possible by God’s grace. (Vitz, 1994, p. 160)

In sum, clinicians need to look beyond the “self” to the connectedness and interactive relationships that truly characterize existence, and to divine spiritual sources that facilitate those connections.

Clearly, inaccuracies besides individualism could be discerned through further careful comparison of current practices with the teachings of the Savior. This paper has merely focused on one of several potential conflicts between the culture of psychotherapy and the Gospel of Jesus Christ. All psychotherapy practices can gain significantly by reevaluating their utility and compatibility with the Gospel (Scott, 1998).

As the one who has the most interest in and knowledge of mental health, the Savior can lead us to truths beneficial to clients and to our own relationships. He can be our Mentor in creating or redefining the culture of our work with his children.

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ENDNOTES

1. Advocates of positivism state that morality is a social convention and only the forces of nature can be spoken of scientifically. Empirical science is viewed as the pinnacle product of human existence and the only oracle of truth (i.e., Comte, 1896). In contrast, advocates of social constructivism (i.e., Gergen, 1991) indicate that laws and mores are merely shared beliefs that change as society changes – that there are no *universal moral truths*.
2. Bergin (1980) was among the first to make this point. It has since been repeated and amplified by others (e.g., Jones, 1994).
3. The word *self* appears 17 times in the standard works. All 10 occurrences in the *Book of Mormon* are in Jacob 5, with the Lord referring to Himself. Three of the occurrences in the Bible also refer to God (Exodus 32:13, John 17:5, 1 Peter 2:24). Two occurrences refer to people being spoken to (1 Kings 20:22, Philemon 1:19), and two refute the importance of the *self* (John 5:31, 1 Corinthians 4:3). [In the JST, the words *self-will* (Genesis 49:6) and *self-willed* (Titus 1:7, 2 Peter 2:10) also appear, but these have clearly negative connotations.]