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The purpose of this Association shall be:

a) To promote fellowship, foster communication, enhance personal and professional development, and promote a forum for counselors and psychotherapists whose common bond is membership in and adherence to the principles and standards of The Church of Jesus Christ of Latter-day Saints, both in their personal lives and professional practice.

b) To encourage and support members’ efforts actively to promote within their other professional organizations and the society at large, the adoption and maintenance of moral standards and practices that are consistent with gospel principles.

*Article 1, Section 2, AMCAP By-laws (as amended Sept. 30, 1981)*
Editor       Burton C. Kelly
            Brigham Young University

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Burton C. Kelly, Editor
AMCAP Journal
149 SWKT
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We are delighted to bring you this issue with a variety of thoughts and theory that we trust you will find stimulating and personally and professionally strengthening. From three of the deans of the helping professions, we bring you some of the gems of wisdom gleaned by them over the years that was shared with us at the last AMCAP semi-annual convention in April. Next, Sister Kay Edwards has prepared for our Journal a version of the Virginia F. Cutler Lecture she delivered at BYU last Fall. Again we are pleased to bring an article from one of our committed graduate students, Lynn Roundy, and encourage other students to contribute. We are grateful to Lynn Johnson for taking the thought, time and effort to give a detailed response to an address by Terry Warner given at the October, 1981 AMCAP Convention and later published in the April 1982 AMCAP Journal. We appreciate such attention and invite and encourage others to respond to Journal articles. Then thanks to Brother Warner for his willingness to give an extended response to Brother Johnson and an amplification of his own ideas. We believe such critical thinking and interchange is a very valuable facet of the Journal. If you think so, too, let us hear from you.

BCK

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I am neither a social worker, psychologist, nor psychiatrist. I operate from no single, scientific theory, or combination of theories. There are a few ideas that work for me in my relations with people which I pass on for your critical review. I have no trouble living by the following well-known counseling principles:

1. I am a good listener.
2. I keep confidences.
3. I am not judgmental. (People expect that of me in my role as bishop, but that doesn’t change my methodology.)
4. I am never shocked, and only occasionally surprised.

I try to help people to solve their own problems instead of solving their problems for them. There are rare exceptions. One of my Institute students, who was hustled into marriage by the first girl he had ever known, came to my office one day and asked in a plaintive tone, “Brother Bennion, I got married ten days ago, do you think I did the right thing?” I replied, “You surely did. Never doubt it.”

One of my parishioners, a professional man, told me of his plan to take out a second mortgage on his home to invest in a business that would return 30% interest on his money. Without wasting a second, I warned him against borrowing money to speculate with and in a business he knew nothing about.

But, in most instances, I find it wiser to let people work through their own problems. Along the way I will try to clarify options and help them foresee consequences but leave the decision to them.

Professor Cowles commented to me years ago: “I encourage people to do what they decide to do unless there is a strong reason against it.”

I have learned to try to strengthen the individual so he/she can cope with life. This seems more important than concentrating on the problem—which is often impossible for me or the client to resolve anyway.

I recall a young married woman with two children whose husband was carrying on with another woman. She wanted him back. I encouraged her to hold her head high, to be friendly and respectful, but independent—to face the situation with pride and courage and not to go begging for his return. In this way, I thought she had a chance to win him back or, if not, she was on her way towards self-sufficiency.

Some years ago a married woman told me how her husband was either an angel or a devil at home and was destroying her and the children. I said something to her which she interpreted as meaning that she was in control of her life and no one was going to determine her state of mind and feeling but herself. She said it worked wonders.

One of the distressful things in the lives of some LDS women is their inability to be a perfect wife, mother, teacher, neighbor, Latter-day Saint.

In strengthening the individual, we should not encourage them to be perfect, in the literal meaning of the word, for three reasons:

1. As human beings, we don’t know what perfection is.
2. We are bound to fail and carry a burden of shame or guilt.
3. Or, worst of all, we might think we are succeeding. (Luke 18)

The passage in Matthew 5:48 “Be ye therefore perfect...” is stated in the context of love. It is urging us to love as Christ did. I like the wording in the New English Bible: “Let there be no limit to your goodness even as there is no limit to the goodness of God.”

Let us help people strive for improvement, encourage them to live the gospel and love God and fellowmen—be good mothers, loving wives and husbands, not perfect ones.

Counseling alone is often helpful but not enough. We need to help individuals meet their basic needs by buttressing counseling with life experiences. I try to help people satisfy the following basic psychological needs:

1. Belongingness—to give and receive love.
2. Creative self-expression.
4. A faith or feeling that gives meaning to life.

A boy came to me at the Institute carrying the burden of the world on his shoulders. He had been advised to see a psychiatrist, but didn’t wish to go.

I listened to him, encouraged him to keep his integrity, do what he thought was right day by day. I maintained a warm relationship with him, put him on a vital standing committee. He was made an officer in a Lambda Delta Sigma Chapter. He began to function well, got through school, became a teacher, then a business man. The Institute was (is) a wonderful setting in which to supplement counseling with experiences which meet the needs of young people.

The basic psychological needs previously mentioned are best fulfilled by fundamentals of the gospel. Jesus "completed on page 34"
FROM THE YEARS
Louis G. Moench,* M.D.
Presented at the AMCAP Convention
1 April, 1983

Sitting between 2 “old” friends, I am reminded of Cicero’s observation: “In old men there is wisdom. Without them, no state could exist.” But, as I rise to speak, I am reminded that years alone do not make men sages, any more than laying eggs makes hens judges of omelets.

What are some of the ideas gathered in a professional lifetime? From where did they come? Borrowing from Ulysses, “I am part of all I have seen.” Five thousand years of wise and thoughtful Egyptians, Greeks, Romans, Jews, and Christians have left a wealth of noble ideas, if we will only search for them. And we enjoy a multiplier effect: a Pygmy standing on the shoulder of a giant can see farther than the giant.

Borrowing from Santayana, “We must welcome the future, knowing that soon it will be the past. But we must respect the past, knowing that once it was all that was humanly possible.”

And we have the privilege of learning from current wise men, which brings up the story of the Primary teacher asking the children to draw a picture of the lesson. One young fellow industriously scribbled a picture of an airplane, complete with passengers visible in the windows.

Teacher: “What has that to do with the lesson?”
Pupil: “Teacher, that is the lesson, ‘The Flight into Egypt.’”
Teacher: “Who are these three?”
Pupil: “They are Jesus, Mary and Joseph.”
Teacher: “Fine! And who is this person up front?”
Pupil: “Oh, Teacher. That is the pilot, Pontius Pilot.”
Teacher: “And who are these three in the rear?”
Pupil: “Oh, Teacher. Those are the three wise guys.”

In following the teaching of wise men and women, beware of wise guys.

I was educated in the Medical Model.

In my student years, advances were coming so fast I was optimistic that illnesses would be eradicated so promptly there would be no need for doctors. The first time an antibiotic substance was used in the United States, I was the lowly medical student on the case. I was sure that infectious diseases would be conquered. Excitement followed the isolation of the germ, the Schizococcus. An unfortunate laboratory accident destroyed the culture, and the disease, Schizophrenia, persists. Chlorpromazine (Thorazine™) promised to eradicate a wide variety of mental illnesses, and the antidepressants have saved thousands of lives and millions of days of suffering.

But we are left with tardive dyskinesia from the phenothiazines, and suicides by the very substances designed to prevent suicides, and we have been given, in the name of science, phrenology and the cruel hoax of multi-vitamin treatment of mental illness, and the amino acid treatment of retardation. The science of today may become tomorrow’s myth. The old warning, Primum non nocere (engraved in bronze in every delivery room at my medical school), needs to be kept before us. Above all, do no harm.

Leaving some of the student optimism, the poem from Holland sober us:

_How can you hope to stop the leak
in this great wall.
The water is so cold, the night so bleak
the hand so small._

Jastrow, in _God and the Astronomers_, reminds us, “The scientist has scaled the mountains of ignorance; he is about to conquer the highest peak; as he pulls himself over the final rock, he is greeted by a band of theologians who have been sitting there for centuries.”

In the great pilgrimage city of Santiago de Compostella, the patron saint is Saint James the Apostle (San Diego), portrayed riding a white horse, and chopping off the heads of the Moors (infidels). Sometimes religiosity became fanatic. With the rise of humanism, compassionate programs were developed to take care of the mentally ill, and the “lunatics” who had been out under the influence of the moon (Luna) were given “asylum” in the old, good sense of the term, and no longer chased from village to village and stoned by the little boys.

The first psychiatric asylum in London was named after the birthplace of the Savior, Bethlehem—what nicer name could one imagine—but pronounced in Cockey English, “Bedlam,” which became the name for uproar. In the United States, state hospitals were established to take care of the “long-term” mental illnesses. There we learned what treatment was available was tried. Behavior modification (token economy) was started here, as well as the organic therapies, Insulin, Metrazol, ECT, Psychosurgery. The “Therapeutic Community” of Maxwell Jones was established at the Utah State Hospital. Some of us thought it became a Procrustean bed for many.

Then state hospitals fell into disrepute, were crippled and emasculated, and often the drawbridge was raised, placing fantastic burdens on patients, families and communities.

But we have learned lessons from the state hospitals. Asylum, in the good sense of the word, includes a sign on the front door, “This Door Closes on Both Sides at the Same Time.” Organic treatments still have a viable

*Brother Moench is a psychiatrist in private practice in Salt Lake City.
place in the armamentarium. The therapeutic community is a wonderful concept, if not used exclusively. And the hospital still represents the corporate responsibility concept of the ancient Israelites. Psychoanalysis almost became a new religion in psychiatry, called by one wag, “The Gospel according to St. Sigmund, complete with priests and high priests, acolytes, rituals, shrines, and rituals. In the order of ascendancy, purity, morality, and analysis became equated with the Celestial Kingdom, with electrotherapy and psychosurgery relegated to the nether regions (where the city of Berkeley recently tried to relegate electrotherapy by ballot).

Analysis became the Procrustean bed, used for neuroses, psychoses, substance abuse, artists experiencing blocks in creativity, residents in training. As medicine began placing less stress on analysis, schools of psychology and nursing, literature and the theater adopted it, and Broadway replaced the Chicago Analytic School’s couch as Mecca. But we do acknowledge our debts to analytic theory. The royal road to the unconscious is open to all of us, the family romance (for those who are offended by the genital implications of the Oedipus Complex) helps understand some semi-eternal truths, and the reliving of pathological events and relationships, with new role casting, provides another effective therapeutic tool.

In the 1950’s, a multifactorial revolution took place. President John F. Kennedy’s interest in mental health gave great impetus to the movement. The discovery and widespread use of phenothiazines made it possible to treat many in-patients on an out-patient basis. Demographic studies added energy to the jumping up and down of the political activists. Simplistic solutions were brought out for the world’s ills, including mental illness, and egalitarian political and economic systems were invented (run by people under 30, of course.) Mental illness became a popular cause, and the State Hospital system was a ready-made villain. Sloganism became the popular pastime: “Treat the crisis, prevent long-term illness,” sounds great, and it may lower the incidence of hospitalization. But some illnesses are long-term—schizophrenia, the bipolar affective disease, and others.

“The major cause of hospitalization is previous hospitalization,” ignoring that the cause of the previous hospitalization was an episode of illness. A dedicated neighborhood activist is worth two professionals any day.” With all respect to the neighborhood activist, there is no good substitute for sound training, experience, skill and expertise, with a wide variety of therapeutic arrows in one’s armamentarium.

“Treatment in one’s own community is best.” Of course it is best, if the treatment available in one’s own community is best. “Human warehouses.” Pejorative rhetoric solves nothing.

We have learned some lessons from the Community Mental Health Center revolution:

We are politically highly vulnerable; in times of political conservative extremism, mental illness is lumped with communism, sex “perverts,” murderers who get away with murder. Cutting budgets is the order of the day, a politically safe activity because it hurts principally those with the least clout. President Nixon’s classical cutting of CMHC funds by presidential fiat was justified with the statement that the CMHC system was working so well it did not need further funding. Congress had to restore the funding. President Reagan, when Governor of California, wrecked the California State Hospital system, prematurely, before provisions were made for community care. President Nixon, the current Justice Department, and a Utah Senator propose abolition of the insanity defense, taking God’s position in His admonition, “I will forgive whom I will forgive, but you must forgive all men.”

Regardless of the culture or form of government, the incidence of schizophrenia is uniform throughout the world.

We are slow to learn the lesson that the world is far too kind to the aggressive and the predatory, and far too cruel to the gentle and the non-demanding.

We need to stop hiding our political convictions behind professional aloofness, and remember the definition of the idiot, in ancient Greece, as one who refused to participate in politics.

Pastor Martin Niemoller brings us up short, with his observation:

“When they came to get the Communists, I was not a Communist and I did nothing. When they came to get the Jews, I was not a Jew, and I did nothing. When they came to get the Catholics, I was not a Catholic, and I did nothing. When they came to get me there was no one left to do anything.” Speak out when your budget is threatened, your precious assets of staff persons are threatened with release, the meager ration of services to your clients are confiscated!

The roster of bright people behind the Family Interaction Model include Lidz, Minuchin, Wynne, Satir, Bowen, Haley. They have given us such terms as “The Identified Patient,” “Schizophrenogenic Mother,” and sometimes we have lost track of the “sickie” in the family, and conducted intake interviews by sending the child into the playroom to break up a few toys while the poor, penitent parents present their psyches for punishment. “What did we do wrong?” (And, in sadistic glee, we often tell them what they did wrong.)

Recent genetic evidence should soften some of the sense of guilt of spouses, and maybe we have to move guilt back one step to God.

We have learned valuable lessons, however:

People grow up and get sick (and sometimes well) in families.

Family members send some clear-channel messages, some ambiguous messages, and some paralogical and metamessages that can be responded to only with craziness.

Return of a recently ill schizophrenic to a family with one or more obnoxious members is an almost guarantee of recurrence within the year.

continued on page 14
FROM THE YEARS
Veon G. Smith,* M.S.S.A.
Presented at the AMCAP Convention
1 April, 1983

I consider this a marvelous opportunity to respond from mind and heart about my forty years of professional experience. I particularly relish the opportunity to summarize experience, thoughts, feelings, and observations without the constraints so often imposed by statistical calculations for determining significance, or a need to comply with the rigors of sound research methodology. What I shall say may, in a scientific way, be pure, or even impure, nonsense. My observations are the results of experiencing life in a number of roles, each of which has been meaningful to me. In order of importance to me, my roles have included husband, family man, religious adherent, psychotherapist, professional educator, and administrator. Each of the roles has a separateness, yet there are many points of overlap.

So, today, what I say may derive from my experience as husband, father, grandfather; or church leader, student of religion; educator; professional social worker. Most likely what I say will be a convergence of all these roles focused at the moment to what might be of particular interest to Mormon psychotherapists.

My format is to give you some of my reactions to a few issues, ideas, or points which might help us as Mormon psychotherapists sharpen our focus in our work. First, I shall comment on a point of optimism about people. Then I should like to comment about our theories of human behavior and the notion of integrating them. Next I should like to comment on what I consider to be a point of optimism about people. Time permitting I shall make some observations pertaining to how we coordinate and clarify our work as therapists with the Church, its administration, its doctrine, its practices.

First, I am optimistic in my work with people because I believe human beings are geared for learning and growth mentally, physically, emotionally, socially, and spiritually. This push from within every person is the energy source for growth and change. If we can facilitate this push for growth, we are on the channel of change for our clients.

Second, the learning and application of therapy requires cognitive and feeling dimensions. These two parts of the human system (the left brain and right brain functions) need to be integrated and facilitated if we are to relate to and understand the people who come to us for help. As we better understand ourselves and our learning processes, we enhance our capacity to tune in to the human struggles of our clients. So, what is said or observed about our learning has relevance and applicability to the learning and growth processes of our clients.

I wish to use two brief quotations to affirm the “heart and head” issues of efforts to be helpful to others. Last June in the University of Utah graduation exercises Dr. Lowell L. Bennion said among other things, “Compassion alone will not meet the needs of the disabled. Knowledge alone will not change society. But knowledgeable and compassionate men and women can improve almost any situation”. In an article in Social Work last September, Stanley L. Witkin addressed the issue of “Cognitive Processes in Clinical Practice.” (Vol.27, #5, p. 394) He summarizes the issue of cognitive elements versus intuitive or clinical wisdom. “Although this discussion has argued that the seemingly natural and implicit cognitive strategies employed by the practitioner, often referred to as clinical judgment or intuition, are frequently synonymous with self-deception, this should in no way be construed as advocating uninspired or mechanical practice. The social worker whose behavior is rigidly determined by prescriptive rules and techniques is as likely to go astray as the totally intuitive practitioner. As is often the case, the ideal seems to be somewhere between these two extremes. It is hoped that the arguments presented here will encourage collaboration of the most useful intuitive and nonintuitive techniques among social workers.”

The Mormon therapist needs to acquire knowledge and skill but he must not be averse to the use of the heart, the feelings, the Spirit, in learning and plying his profession. He needs to avoid the extremes of thinking without feeling or the feeling without thinking.

A third point about people is the potential within every human being. It is a major item for our awareness and constitutes the base of our hope for improvement even when the prospects seem limited. We can all cite instances of human growth which exceeded even our wildest expectations for the individual or the family. Our task of therapy is to help free the person’s potential from the psychological, emotional, social, spiritual shackles and impediments which are interfering with the personal or family growth process. We are truly, as Elder Boyd Packer pointed out to us last fall, treading on sacred ground when we enter the parameters of another’s life as a helper, and our task is to capitalize on the client’s growth potential.

I suspect I often underestimate the potential existing in a client. I have on occasion mentally relegated someone to the psychological scrap heap and to my amazement they have proved me to be patently in error in my judgment. There are times when the healing power of a therapeutic relationship will bring the client

* Brother Smith is Professor Emeritus, Graduate School of Social Work, University of Utah where he taught for 32 years. He is now in private clinical practice and consultation in Salt Lake City.
to transcend his and the therapist's wildest positive expectations. When a person or family wishes to move forward toward greater light and maturity, they have all the forces of nature, nurture, and heaven on their side. Human weakness, ignorance, stagnation, incompetence, and even poor motivation readily give way to the forces of light and growth. Without elaboration or exemplifying, suffice it to say: don't underestimate the human capacity to rise above its current level of operation.

Another human behavior puzzler for the conscientious therapist is the old, and yet new, nurture-nature issue. How much of what the client is and does relates to his physical, genetic, heredity, or constitutional make-up and how much relates to the family, social and cultural environment in which the person has experienced his life thus far. I believe I have erred at times in ignoring or to a degree denying the extent of the impact on behavior deriving from genetic or hereditary factors. I have tried to treat out of social systems theory and interactional theory to alter behavior which had its origins and its resolutions in physical, emotional deficits totally unrelated to interactional elements in the individual's daily living experience.

The April copy of *Science* 83, the journal published by the American Association for the Advancement of Science, devotes twenty-two pages to the nature-nurture issue. Margaret Mead's work which leaned the direction of establishing a social and cultural determinism, is seriously questioned by Australian anthropologist Derek Freeman who says Mead's book on *Coming Of Age in Samoa* is wrong in its observations and conclusions. He spells out the details of his position in a book, *Margaret Mead and Samoa--the Making and Unmaking of An Anthropological Myth.*

Edward O. Wilson of Harvard, a sociobiologist, maintains that nature and nurture combine to impact on human behavior. Wilson and co-author Charles J. Lumsden presented their first book on their theory two years ago and have now published *Promethean Fire* to affirm and expand their view. They give elaborate data to show the process and to example how their theory works.

Why do I mention this? One example may illustrate my point. A middle-aged client of mine was taken to the hospital by ambulance with a heart reaction and the doctors also discovered a fairly serious stomach ulcer condition. Her upset was directly related to pressures her behaving so unpredictable and irrationally. The guilt this woman felt was being accentuated, in my judgment, by a misdirected focus on interactional theory which totally ignored the boy's physiological and genetic background. He was an adopted child and information about his natural mother indicated she had a host of serious disabling characterological elements in her patterns.

Two other areas where I think professionals at times inappropriately assign interactional and psychological causation are in premenstrual tension and reactions during the climacterium.

Another challenge in understanding human beings is the dilemma we face in rationalizing the universality of man versus the uniqueness of man. There is a distinctiveness for every individual, every couple, every family, every cultural group. Yet there are common elements in the behavioral patterns of all people: use of music; smiles to express pleasure or happiness; body movement and facial expression to convey acceptance or rejection; expressions of grief, for example, seem to cross cultural and social bounds; need for love, acceptance, and a method of teaching the culture to the next generation seem to be universal. The challenge for us here is that we do not universalize when we should be particularizing to allow for individual or family distinctiveness and that we do not particularize when we should be focusing on universals. In other words, all people, for their emotional, psychological and spiritual well-being need certain ingredients to be present in their lives. The hunger and the need for love likely transcends individual differences, familial variations and cultural patterns. Lowell Bennion suggests we might think of integrity and love as being at the base of human development and interaction. Psychologist Jack Gibb lists his TORI (Trust, openness, realization or integrity and love as being at the base of human development and interaction. Psychologist Jack Gibb lists his TORI (Trust, openness, realization or integration) as expanded in the scriptures and from the pulpit propose qualities which will transcend individual, couple, familial, and cultural differences. Humility, honesty, love, self-expansion through service to others, and the losing oneself in the process, are the elements which help us to ascend to our maximum usefulness in mortality.

So, in some way, we can generalize some needs, desires and strivings of all people. This being so, then as we sit with a client we may assume he needs love, recognition, acceptance and whatever our list includes regardless of his distinctiveness from all other human beings. But, in addition to these common needs, there is the uniqueness with which we must contend in our clinical practice, our theory building, and our research. Failure to be clear on this issue may lead us astray in our professional functions.

A few comments now about theories of human behavior. Truth is so powerful that discovery of a piece of truth can so captivate us that we take it to be the total truth pertaining to the area of our discovery. For example, we discover a force from beyond the individual's consciousness which influences human behavior or thinking and we hasten to a totally unwarranted conclusion that we have discovered the source of all behavior and thinking. Psychoanalytic theory does not explain all human behavior. Each of the many theories of human behavior has in my judgment discovered a *partial truth* and our challenge is to understand the partial truth and not mistake it for *total*
One need only hear an enthusiastic rational emotive therapist, or any other person imbued with a particular theoretical framework, expound his view and we observe partial truth elevated to a full, complex, system with applications to every nuance of life with designated gurus, doctrinal position, strategies for any and all ills of mankind and, of course, suitable missionary tactics to enlist new adherents. So it is with social behaviorists, a rational emotive therapist, a reality therapist, transactional analysis, or any of the other discovered partial truths which identify a segment of human construction and operation. We become to a degree like the blind men discovering the elephant. Each personality theory or distinctive therapeutic approach becomes a description of a part of the elephant but where, when, and how are we able to stand back far enough to acquire perspective and see not only the total elephant but the ground he stands on, the vegetation around him and the other animal life with which he interacts. For me, the Gospel of Jesus Christ is the base for providing the full perspective.

Because of the absolute distinctiveness or uniqueness of each human being one could find a few examples of persons to fit any theory he might propose. Again, it is the uniqueness of every person with distinctiveness of mind, feelings, traits, characteristics, etc., which complicates our understanding and our practice to help a given individual, couple, or family. Almost any theory or any therapy can find persons who will fit it. Every therapeutic approach can be affirmed by examples of success in its use. This attests more to the great range of human differences than to efficacy of an approach being used. Every person coming to us for help can be understood, analyzed, and helpful efforts instituted from at least four to ten different approaches. We may approach the situation as a planned short term therapist, a behaviorist, a rational emotive therapist, a reality therapy advocate, or any one of almost innumerable approaches including astrological and chiropractic. Our approach the situation as a planned short term therapist, and see not only the total elephant but the ground he stands on, the vegetation around him and the other animal life with which he interacts. For me, the Gospel of Jesus Christ is the base for providing the full perspective.

A depressive reaction of a husband or wife is most expeditiously managed when the spouse is included in the treatment program. My treatment unit is more frequently a couple or a family rather than an individual. The major treatment resource or its nemesis is often the spouse, the parent, the child of the person with the symptom. A depressed family member is best treated in a combination of sessions alone and with other significant family members rather than being seen alone exclusively.

Since, as therapists, we are our equipment, it well behooves us to make certain our equipment is properly prepared through adequate education and skill development. In addition, we need a level of emotional and spiritual maturity for assurance of ability to maintain a focus on the client's growth and development and not be easily diverted into a side trip into our own unfinished childhood struggles, nor should we be easily distracted into working on our muddled failures to fit the pieces of our life together, while we are attempting to lead others out of the morass of social, psychological, or spiritual confusions.

Coupling the uniqueness of each individual with the distinctiveness of each of us as therapist renders it impossible to build a formula for therapy that always works. We might observe that a poor therapist can achieve a notable success with a client when positive factors converge in a purely happenstance pattern. The best of therapists can experience a failure in therapy with a client when negative factors converge to counter his skill and experience. Self-sufficiency or arrogance that one can be helpful to any and all people is a sure sign of shortages in clinical know how. Humility is not only a profound and marvelous religious concept, it is a necessary condition to help us avoid the "closed mind" and judgment. At worst they can divert us from a fuller discovery of truth by assuming adequacy where they have little; or lulling us to a static complacency about the need for continued learning and research. John Stuart Mill made this pertinent statement--"the fatal tendency of mankind to leave off thinking about something when it is no longer doubtful is the cause of half their errors."

Now I should like to comment about the process of therapy. First, whom shall we serve? I mention this item because some social workers see the practice of social work as focusing on the economic or other disadvantaged people to the exclusion of all persons who do not fit some category of being socially disadvantaged. I personally dislike any exclusionary policies which close the door of help on any person, family, or group. Level of education, monetary status, racial characteristics, sex, age, as criteria for including or excluding people from our services, are any and all objectionable to me. If we have knowledge and skill useful in helping others achieve their potential, I see little valid logic to selective humanitarianism. As LDS therapists our doors should be open to anyone and everyone who can use our services.

I am convinced that in our therapy we should include the persons who are impacting most on the individual with the symptom. A depressed family member is best treated in a combination of sessions alone and with other significant family members rather than being seen alone exclusively.

All theories and therapeutic strategies are tentative. At best they deal with partial truths to be used with care and judgment. At worst they can divert us from a fuller discovery of truth by assuming adequacy where they have little; or lulling us to a static complacency about the need for continued learning and research. John Stuart Mill made this pertinent statement--"the fatal tendency of mankind to leave off thinking about something when it is no longer doubtful is the cause of half their errors."

Now I should like to comment about the process of therapy. First, whom shall we serve? I mention this item because some social workers see the practice of social work as focusing on the economic or other disadvantaged people to the exclusion of all persons who do not fit some category of being socially disadvantaged. I personally dislike any exclusionary policies which close the door of help on any person, family, or group. Level of education, monetary status, racial characteristics, sex, age, as criteria for including or excluding people from our services, are any and all objectionable to me. If we have knowledge and skill useful in helping others achieve their potential, I see little valid logic to selective humanitarianism. As LDS therapists our doors should be open to anyone and everyone who can use our services.

I am convinced that in our therapy we should include the persons who are impacting most on the individual with the symptom. A depressed family member is best treated in a combination of sessions alone and with other significant family members rather than being seen alone exclusively.

Since, as therapists, we are our equipment, it well behooves us to make certain our equipment is properly prepared through adequate education and skill development. In addition, we need a level of emotional and spiritual maturity for assurance of ability to maintain a focus on the client's growth and development and not be easily diverted into a side trip into our own unfinished childhood struggles, nor should we be easily distracted into working on our muddled failures to fit the pieces of our life together, while we are attempting to lead others out of the morass of social, psychological, or spiritual confusions.

Coupling the uniqueness of each individual with the distinctiveness of each of us as therapist renders it impossible to build a formula for therapy that always works. We might observe that a poor therapist can achieve a notable success with a client when positive factors converge in a purely happenstance pattern. The best of therapists can experience a failure in therapy with a client when negative factors converge to counter his skill and experience. Self-sufficiency or arrogance that one can be helpful to any and all people is a sure sign of shortages in clinical know how. Humility is not only a profound and marvelous religious concept, it is a necessary condition to help us avoid the "closed mind"
syndrome or the arrogance of a “know-it-all attitude” pertaining to the helping processes.

Acknowledgment of the healing power of a good relationship is a base from which we can safely work in therapy. It seems clear that every person, client and otherwise, wants a relationship in which trust and understanding constitute the mode. Love and caring is a potent balm for psychological pain and misery. As therapists we can help the client overcome the shortages and lacks in their lives by helping them experience trust, understanding and unconditional caring in the relationship with us.

The main task of therapy is to create an atmosphere wherein the individual, couple, or family can acknowledge to himself and to another person existing imperfections, without being judged. This creates the atmosphere in which the client can then focus on issues of personal growth and development.

As clients approach therapy it is useful to know that most clients are struggling with a bedeviling ambivalence as to whether he is relinquishing his management of himself as he requests help of another person. The struggle is typified by such client statements as: “I must do it myself else I shall be giving up my free choice to another; yet, I need the help so I can better understand how I can most successfully achieve my goals.” As a therapist I must be very certain that both the client and I are perfectly clear that it is the client who is in charge of his growth and the therapist’s role is to facilitate the client’s efforts. The goal of therapy is always to help the counselee achieve a greater degree of self-sufficiency coupled with a sense of responsibility in the process and for the outcome. A significant corollary of this point is the advisability of involving the clients in the information seeking, the planning of treatment strategies, and the pursuit of the process by which goals are to be achieved. Also the client needs to know what the therapist thinks he is doing to accomplish the treatment objectives. In other words, treatment is not imposed on the client but conjointly planned and operated with the client.

I shall identify an additional eight points which I think are useful in creating an atmosphere in which the client is encouraged and free to focus on his growth. The first point is an obvious one which is largely in control of the client but can be discussed and influenced by the therapist. The client needs some desire to grow, alter, improve. Motivation for change is an item which the client needs to feel that the therapist is a real person, not a professional robot. The client wants to interact with and to have a relationship with another caring and concerned human being. Inconstancy, phoniness, deception, lack of self-awareness, are all counter to the conditions conducive to fostering growth in clients. As therapists we must be capable of a sustained focus on the inner and outer workings of the client and not permit our own struggles to contaminate the process of therapy.

A sixth condition for client growth is confrontation of discrepancies in the client’s attitudes, thinking, or behavior. When there are cognitive-perceptual, affective, or behavioral discrepancies, the client must be helped to face the discrepancy, decide if a shift is wanted, then take responsibility for bringing about the desired change. Confrontation is the operationalized expectation that the client do something constructive in improving certain dimensions of his life.

A seventh element needed in the steps for client growth is the effective use of suitable strategies and procedures for implementing the desired improvements. The therapist’s armamentarium of strategies needs to be extensive. Prescriptive application of reframing, behavioral rehearsal, reinforcement, intensifying transference, using a therapeutic bind, seeing couples singly or together, sculpting the family, reprogramming scripts, empathic responding, giving home assignments, developing expression of feelings and better communication, etc., etc., etc., constitute the nuts and bolts as it were of the therapeutic process.

Last but foremost there must be therapist capacity for perceptiveness, patience and persistence. In our efforts to be efficient, to accelerate treatment, to economize or to produce a better record, we often attempt to short-circuit the growth process of the client(s) by pursuit of a totally unrealistic goal to help someone with thirty years of unproductive habits into a new life style and pattern in three easy lessons. I tell my clients that I am intent to work myself out of a job as fast as I can, but I would commit a serious error of clinical judgment if I try to do in three sessions what the client and I know with even a cursory review will require upwards of thirty sessions.
Just as unfortunate would be a therapist who settles in for a program of therapy to last at least one full calendar year when a correct assessment and precise focus could redirect the client into a personal growth cycle in fewer than eight sessions. I use the word perceptiveness to identify the assessment activity. Every client has room for growth in innumerable areas of his life and always will, so our goal of therapy is not to clean out all the debris in the client's mind, spirit, heart, attitudes, and body, but to focus on the most crucial elements. Helping the client(s) evolve effective problem solving methods may slay many dragons with one arrow. Selecting a core issue among a plethora of complaints requires exceptional therapist perspicacity. Clinical judgment and discernment must be at its zenith as the therapist sifts and sorts his way through the debris to find the most crucial or core area for therapeutic focus. Errors of judgment pertaining to accurate assessment can detour the client and the therapist into psychological labyrinths from which they may never get disentangled. The key here is assessment, assessment, assessment.

Patience with the client's efforts and rate of growth is a must if the therapist is to maintain his own mental health. The client is in charge of his growth and the therapist may need a plaque on the wall as a constant reminder of this reality. The therapist is unquestionably in charge of the process of therapy but it is the client who must be in control of his growth. A very real dilemma exists for the therapist. If he encourages, persuades, pushes, confronts at a more vigorous or faster pace than is tolerable for the client, the client feels overwhelmed and likely becomes immobilized. If the therapist doesn't encourage, persuade, push, confront at a suitable pace, the client does very little or nothing. So, patience must be connected to timing, timing, and timing of the intervention. In general it appears to me that professionals may incline to be overly patient and accepting while family members and church leaders are inclined to be too impatient about the rate of the client's growth and development.

The third item of unit number eight--persistence--also requires judgment and careful application. Rome was not built in a day, nor are clients able to realign attitudes, feelings, habits, behavioral patterns, or thinking in a flashing burst of psychic insight. We live in a world of the quick fix, fast foods, and demands for instant happiness. We must be careful to avoid the error of attempting to push therapy into a quick fix approach. The therapist must realize that relinquishing a bad habit is just as agonizing and stressful as giving up a good feature of oneself. We misfire if we assume that because of attempting to push therapy into a quick fix approach. Growth and change sometimes must evolve from a life time of collected psychological and social struggles, so let us be patient and perform miracles when we can, but at other times be satisfied with a more prosaic and slower moving rate of progress.

In many areas of health care service we consider prevention as a major key to better health. In mental health we have areas of active prevention but they constitute a minimal investment of energy, money, and skill by the professional community. We are so busy with the mental health alligators that little thought and planning is devoted to draining the swamp.

I wish to mention two areas where effort and energy could very likely reap extensive prevention rewards. At the base of society is the home and family. At the base of the home and family is the relationship between the husband and wife. The forming, maintaining, and enhancing of this relationship could impact extensively on family adjustments and the mental and physical health of all the family members.

My perceptions are in part gleaned from the experiences my marriage partner and I have had in running marriage preparation seminars and marriage enrichment seminars. I am thoroughly convinced from experience that as a couple move toward marriage it is possible for a trained professional to gain sufficient understanding of the premarital couple to help them learn about and understand marriage, but even more significantly anticipate many if not most of the areas where conflict may arise between them.

I also believe that properly conducted marriage enrichment sessions can open doors of growth for most couples. I see marriage enrichment as an option for reasonably healthy couples to greatly improve the quality of their marriages. I also see marriage enrichment as a possible option to supplement or complement therapy with malfunctioning couples.

The last area about which I wish to comment pertains to reconciling functions of the Church as a change oriented structure for its members and the change oriented function of psychotherapy. The goals of each area have much in common although the specific steps in efforts to achieve the goals have significant differences. Limits of time and space allow for only a few reflections. Some of the guiding principles of helpfulness as espoused and practiced by Church leaders and by psychotherapists are the same or at least have some overlap. The atmosphere, the procedure, the techniques or the knowledge and skills of the helper are often significantly different. Let it suffice for today that I simply list a few dilemmas which I have experienced in trying to differentiate, coordinate, collaborate, and apply my experience and knowledge of the Church area and the professional area.

I shall identify a few hazards of either Mormon leader or Mormon psychotherapist if he is careless in his efforts. First is the hazard of trying to short circuit the arduous work to be done by the client with a simple instruction to live the gospel, pay your tithing, become active, go to church. The advice is good but not very feasible for many persons as a resolution for psychological problems which are rendering the person incapable of experiencing any of the solace and comfort available through religious commitment and practice.

Another hazard is to mix the two processes in random ways just to cover all angles of what might be useful. A shotgun approach is good for shooting pheasants, but it has danger in helpfulness efforts. The inappropriate
AGENCY AND CERTITUDE:
THE DICHOTOMY IN FAMILY DECISION-MAKING
Kay P. Edwards,* Ph.D.
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There appears to be an increasing emphasis on rule-making and prescription as the preferred means for problem-solving and avoidance of decision risk in individual and family life, and by the institutions which impact on us in our families. Such an approach to family decision-making and the decision-making which affects families is evidence that the principle of agency is losing ground as individuals and families turn increasingly toward certitude in their personal and group decisions. The purpose of this paper is to examine these two approaches to decision-making in families and their relationship to decision context.

AGENCY AND CERTITUDE
IN FAMILY DECISION-MAKING

Definition of Terms
Agency. Webster (1970) defines agency as “a faculty or state of acting or of exerting power; an instrumentality or means by which something is performed or effected.” Agency is often qualified by the adjective “free”, a term which means that an individual is “choosing or is capable of choosing for himself or herself.” Free does not mean an “absence of all restraint”, but “denotes absence of external compulsion or determination.” “Free agency”, therefore, means that the decision-maker is exerting power through choosing for him/herself, absent of any external compulsion or influence, but in accordance with his/her “own nature and being.” Such action is, by its very nature, full of risk and prone to failure unless one has internalized the appropriate restraints, i.e., information and rules.

Certitude. Certitude, on the other hand, is a “quality or state of being or feeling fixed, settled, destined or sure (Webster, 1970).” In contrast to choosing for one’s self, certitude, as I am using it here, is related to obedience. That is, the decision-maker attempts to make certain of the outcome by being submissive to restraint, control, or command from an external power. Such action is, by its very nature, more secure and prone to “success” if one accepts and, therefore, believes that the prescribed behavior will yield a predicted outcome, which is also the desired outcome. If the influence of the external source is powerful enough, the decision-maker may not even question outcome or behavior or connection between the two, but simply do what he/she is told or thinks that he/she was told.

A Decision-Making Continuum
These two, then, agency and certitude, seem to be at opposite ends of a decision-making continuum along which the decision-maker moves in any choice situation.

Agency <-----------> Certitude

At one end of the continuum, choice is based solely on whatever internal restraints exist within and influence the decision-maker. At the other end of the continuum, action is less decision than a response to whatever command is given or perceived to be given by the external source which holds power over the decision-maker, either literally or figuratively.

Certitude in decision-making is associated with obedience to specific instructions, for example, doing what we are told to do by parents, religious or government leaders, or so-called experts. Such a basis for decision-making grows out of fear of failure. It allows the decision-maker to transfer the risk of failure or to shift responsibility for the decision outcome from self to some “other”. Although certitude provides a certain amount of protection, it also limits growth. Creativity and uniqueness are stifled by this approach to decision-making. The search for certitude leads to decision-making by prescription and recipe. The result will be “cookie-cutter” families.

In a very real sense, our own internalized acceptance of these two principles—agency and certitude—helps to keep the movement in either direction from getting out of hand. There is always a tension between the opposite ends of the continuum. If we move too close to a full emphasis on agency, our lives begin to seem chaotic and unsettling; we begin to feel insecure. We respond by seeking more certitude, thereby moving away from the agency end of the continuum. However, as we move back along the continuum toward certitude, our lives become increasingly constricted and stifling; we begin to feel apathetic and, eventually, rebellious. As we fight against the objects or elements in our environment which cause these negative outcomes, and which we may perceive with varying amounts of accuracy, we push against the pull of certitude and move back toward greater exercise of agency.

PHILOSOPHICAL BASE

In the language of philosophy, this dichotomy between agency and certitude has its foundation in reason as opposed to dogmatism. As Brown (1982, 91) has noted, “rationality (in decision-making) requires the grounding of individual beliefs or actions in underlying reasons.” She goes on to say that reason “is what others have called 'intuitive reason'; the capacity of humans to grasp meanings and the relation between meanings. Reason is
spontaneous as contrasted both with passive receptivity in receiving information and with habitual and mechanistic ways of thinking." The use of reason leads to enlightenment or a gain of rational insight.

To be a rational decision-maker requires concepts--language terms relevant to the decision being considered--and critical reflection about both the context and content of that decision. This critical reflection involves the decision-maker in a "search for clarity of comprehension" that "requires looking beneath the surface of appearances for what is really there." (Brown, 1982, 92) The decision-maker must also seek "the logical relationships between and among (these) comprehensions"--i.e., is the argument which supports a position, belief, or action logically relevant? Is there logical contradiction? As Brown (1982, 92) points out, "we can not rationally hold two beliefs which contradict each other nor can we rationally say we believe one thing but practice another which contradicts the belief."

Through childhood, critical reflection develops from the concrete toward the critical consciousness and reflection we associate with mature adult autonomy. Habermas (1979) has shown that the use of critical reflection expands as the social environment encourages and uses the reflective learning capacities of its members.

Dogmatism, as opposed to reason, "involves uncomprehending and blind, uncritical acceptance, rejection, or revision" (Brown, 1982, 92) The dogmatic decision-maker does not use his/her capacity to reason and "merges his/her views, beliefs, and values with some existing set(s) of views, beliefs and norms...without critical consciousness of their meaning and their consequences." (Brown, 1982, 92) Habermas (1971) said that dogmatism shows both moral lack and theoretical incapacity. An adequate conceptual framework within which to exercise reason is absent, and the individual refuses to recognize the capacity for autonomous reason within the self or to respect the potential for that capacity in others.

In the closed system of dogmatism, we encounter fear of criticism of existing beliefs or views, fault-finding rather than rational criticism, and self-deception as to the adequacy of existing beliefs or views reflected in attitudes of distrust and impatience with theoretical knowledge or conceptual frameworks which could enlighten. (1982)

Dogmatic decision-making is reflected in such styles as voting, technocratic selection of a course of action, and activism (merely doing). Rationality requires an effective response to a decision situation based on intelligent insight which results in the production of some kind of value. Such decisions are made according to principles.

THE APPLICATION OF PRINCIPLES IN FAMILY DECISION-MAKING

Religious scripture is our oldest source of recorded history. Two approaches to decision-making appear to have been implemented since the beginning. The first emphasized the agency of human beings. Scriptural reference indicates that the notion of agency was elevated from a level of possible behavioral direction to an eternal principle underlying the behavior of Deity, and of such significance that its operation took precedence over the accomplishment of other significant goals held by Diety for humankind. Agency also appears to have been given preeminence over the second emphasis in decision-making, also supported by religious dogma, that of obedience. Obedience, or its reflection in the decision-maker's desire for certitude, is the high road which permits one to avoid error and its resulting consequences and, perhaps more importantly, to "please" God. (Moses 3:16, 17)

Both agency and certitude are important principles in family decision-making. It is probably unnecessary to point out that one cannot always implement both principles simultaneously. They appear to compete often as spouses, parents, and children engage in the daily struggle to develop and maintain the functioning of a viable and strong family unit.

Agency is at the heart of the very meaning of decision-making choosing among alternatives. The rational decision-making model describes a process of sequential steps--(1) recognition that a need for decision exists; (2) seeking alternatives; (3) seeking information about those alternatives; (4) evaluating each as a potential for choice; and then, finally, (5) selecting one. The concept of choice requires that one be free to select among alternative modes of behavior, purposes, and communication methods. Inherent in this concept is the element of personal responsibility for decision outcome.

Certitude, on the other hand, focuses on the human desire to learn from the past and to avoid the pain and discomfort associated with failure. Reluctance to pay the price of choosing for one's self when one lacks full information is understandable. Perhaps even more understandable is the desire that a loved one, spouse or child, benefit from our understanding and experience. We reason that if they are obedient to direction, they will thereby avoid the possibility of making a mistake, which is inherent in every act of agency. However, Paolucci et. al. (1977) have pointed out that

If the opportunity, responsibility, freedom, and burden of making decisions are fully accepted, individuals can build a foundation for healthy family membership and effective citizenship, for choice making is a basic human endeavor.

A family decision environment in which family members are discouraged from questioning, trying, making mistakes, and risking failure through the exercise of agency would seem to limit the development of autonomous behavior in family members. As children reach young adulthood, this lack of development may become manifest in a reluctance and/or inability to assume personal responsibility for making decisions, to accept the outcome when it is somehow disappointing, and to assume personal responsibility for the consequences.

Carried to the extreme, people may develop a condition called decidophobia, the fear of making decisions. Their reluctance to accept autonomy and its attendant responsibility causes them to crave a life without choice,
a life of certitude. (Paolucci, 1977, 12-14)

The Development Process

An oft-quoted statement in L.D.S. dogma is “I teach them correct principles and they govern themselves.” A principle is a fundamental truth functioning as a primary law or doctrine which serves as a general and essential guideline for conduct. The application of this philosophy maximizes development of human potential. Choice is dependent upon agency. The process of internalizing principles upon which choices will be made is life-long, and begins with the birth of the child. A schema for this process has been proposed by Vygotsky and explicated by Wertsch (1979, 19) as occurring in four stages:

1. The child may fail to interpret adults’ utterances in terms of the task situation.
2. The child will be able to respond to specific questions and commands of the adult in connection with the task, but his/her interpretation of adults’ utterances will be limited because he/she does not understand the full implications of these utterances in light of the task demands.
3. The child will be able to follow quite nonexplicit directives (e.g. hints) in such a way that it will be obvious that he/she is operating in a sophisticated manner in the language-game.
4. The problem-solving activity shifts from the intersocial to the intrapsychological plane and the transition from other-regulation to self-regulation is completed.

Dr. A. Lynn Scoresby has labeled this process the development of moral wisdom. I am indebted to him for providing me with the insight to see that the agency-certitude dichotomy is essentially a moral development issue. That characteristic is reflected in the umbrage I take at excessive use of certitude in decision-making. I feel moral outrage; it violates my view of “right” behavior; in other words, both personally and professionally, I view inappropriate use of certitude and dogmatism as immoral.

The progress of the individual through the stages enumerated above leads to the maximum development of human potential. Part of the progress in the developmental process is to experience the results of failure. Paolucci et. al. (1977) addressed this essential component of freedom in families:

True freedom requires acceptance of responsibilities as well as a degree of maturity. When an individual is free to choose, unwise and unsound decisions as well as sound decisions may occur. The mature decision-maker recognizes this possibility, tries to minimize the number of poor decisions made, and accepts responsibility when the outcome of decisions are disappointing.

Responsible individuals recognize limits to freedom; they are concerned about how their behavior will affect the well-being of family and society. To a considerable extent we are free to choose what we will be involved with and how responsible we will be for our environment.

...the “free family” can make choices based on a consideration of what they want and a recognition of the consequences of the decision for others and for the future of society.

Paolucci et. al. (1977) caution us that family roles may be overemphasized, thereby limiting awareness of alternatives and the action that is really possible in a decision situation. As they (Paolucci et. al., 1977, 13) point out, “...an autonomous person chooses with open eyes, accepts the possibility of error, and has the courage to stand by his or her own beliefs.”

The development of autonomy in children is one of the most important contributions the family can make.

The total family group, acting in support of the individual member, can provide security for autonomy. Life is autonomy in action, it provides freedom to choose coupled with responsibility. The family is a basic setting for exercising this autonomy. (Paolucci, 1977, 13)

If the pain of making mistakes is emphasized or allowed to congeal into fear of failure at any point in life, development toward autonomy stops. If choice is made by exercising agency, mistakes will sometimes occur, and the result will be disappointing or painful to a greater or lesser degree. Parent or spouse and, I might add, teacher or administrator, may rush forward to prevent pain by circumscribing choice so no or few mistakes can be made. But now, growth slows or is stopped altogether. Again, the dichotomy—too many mistakes or too serious a mistake slows or stops growth. On the other hand, excess limitation on choice slows or stops growth. In the first developmental stage described by Vygotsky (1977), agency must be highly restricted and certitude given preeminence. As the individual moves through the various stages of development, or if the individual is to move through these stages the emphasis alters, slowly and subtly, until agency is preeminent and certitude or restriction of alternatives declines and becomes largely inactive. Ideally, by the time a child reaches age 18, he/she should be well accustomed to making choices, using parents as a source of counsel and information when he/she desires, but essentially autonomous decision-makers.

Baumrind (1977) points out that we share in Western culture a general consensus that an internal locus of causality and its associated attributes reflects a higher level of development than does an external locus. Persons with high personal agency or intrinsic motivation are advantaged in our society. Such persons appear to be better adjusted, have greater cognitive competence, and possess traits that are rewarded by higher social status. Personal agency results in more political and social engagement, and more tolerance. The development of personal agency enables the individual to become increasingly independent of immediate situations and stimuli, attain greater capacity for planned action, and become better able to exercise choice and manipulate, rather than passively respond to, the environment. Personal agency, Baumrind says, is developed through practice. Children learn what they can do by having an opportunity and receiving encouragement to attempt tasks that test the limit of their abilities. Her research findings suggest that self-direction and self-reliance are developed through different parental behaviors in daughters and in sons. Daughters show greater development of personal agency when they experience parental demandingness, particularly when they have rather directive fathers. Sons, on the other hand, develop personal agency to a greater extent when parents use rather noncontrolling
practices. This minimal parental control, however, is also associated with lack of social responsibility and altruism.

It appears from Baumrind’s research that different parental styles are required in parental interactions with children depending upon their sex if they are to develop the ability to exercise agency when they reach maturity. But what about after they reach the age of 18 and begin to move away from the family of orientation, both figuratively and literally? If the family did its socializing job well, a child will have learned the complexity of decision-making, the different types of rationality required, and the appropriate principles to apply in any given decision context, and will be able to move forward confidently to full autonomy.

**Types of Rationality**

Diesing (1962) described five types of rationality (which he did not intend to be inclusive), all of which have relevance in family decision-making:

1. Technical rationality involves decisions which lead to the efficient achievement of some goal.
2. Economic rationality includes allocation decisions which lead to the maximum achievement of a plurality of goals.
3. Social rationality incorporates those decisions which establish the social relationships, values, goals, and high purposes in a family and/or its individual members.
4. Legal rationality refers to decisions made through the application of rules when conflicts occur in the realm of social rationality.
5. Political rationality encompasses all the decisions which are made about family decision-making structures and outcomes.

**Technical Rationality.** The rational principle in technical decision-making is to “choose means adapted to ends”. Technical rationality applies “whenever one is deciding about the means to be used in achieving an end.” The value derived is “utility or the satisfaction of a desire or goal achievement”. Technical rationality applies to any goal.

**Economic Rationality.** Economic rationality is engaged in by any system which is able to develop and maintain a set of goals as a “common good” for its members. A family which has a set of goals which are recognized and receive the commitment of family members can specify, compare, and choose among its own goals as to how it will allocate its scarce resources. The rational principle in economic decision-making is maximum goal achievement. “All goals demand achievement” and the “goals which are sacrificed should be the least important ones.” In addition, “if only partial achievement is possible, the most important parts of each goal should be achieved.” Both technical and economic rationality are completely impersonal.

**Technical and Economical rationality are associated with certitude.** As Maslow (1963, 29) said,

It seems very clear to me that in an enterprise, if everybody concerned is absolutely clear about the goals and directions and far purposes of the organization, practically all other questions then become simple technical questions of fitting means to ends.

It is these two types of rationality which have been the major focus of study by family resource management scholars.

**Social Rationality.** In contrast to technical and economic rationality, social rationality is carried out by a process that is almost unconscious. The pattern of shared experience in a family includes both the things family members do together and the feelings they express and share with each other. There is also a conceptual component—“how each person involved thinks of the relationships—their beliefs, obligations, expectations, and ideals,” as they are institutionalized in roles. The unique development of social relations and roles in families are manifest in their individuality. Diesing says, and I agree, that social relations are the very core of life.

The relative isolation in which each family functions brings about a stability and resistance to change that integrates family members. A part of that integration will be assumed “right” ways for making technical and economic decisions. As conflicting ways of acting, thinking, and doing are encountered, family members are exposed to forces of change. These conflicts create instability in relationships, roles, values, and goals.

A disorganized family is one that cannot communicate effectively because of the conflicting values and beliefs and lack of trust generated by these forces of change. Information will be withheld or misinterpreted. The decisions that are reached do not adequately account for the values and resources of misunderstood members; such family members may be isolated from the family group or begin active opposition to the decisions of the family. Factions may develop and the family may vacillate as to who is in control of the family unit. Decisions cannot be reached and carried out.

Rational social organization in the family makes action of all kinds possible. The rational principle underlying social decision-making is self-realization for every family member, i.e., a sense of belonging, of inner security, and of the meaningfulness of life. The social actions which occur in families are an expression of not only the self, but also of solidarity with other family members. It is in social decision situations that agency can be given full expression. Social rationality has long been the focus of concern for scholars in the family relationships field. It is essential that family scholars recognize that social and economic rationality presuppose each other and are completely dependent on each other’s existence. Economic rationality is possible only in a socially rational family. Conversely, a socially rational family cannot survive if it is not economically rational.

As Gardner (1965, 47) points out, this symbiotic relationship between social and techno-economic rationality creates one of the real dilemmas we face:

But goals are achieved by some means, and sooner or later even the most impulsive man of action will discover that some ways of achieving the goals are more effective than others. A concern for how to do it is the root impulse in all great craftsmanship, and accounts for all of the style in human performance. Without it we would never know the peaks of human achievement.

Yet, ironically, this concern for “how to do it” is also one of the diseases of which families die. Little by little preoccupation
with method, technique, and procedure gains a subtle
dominance over the whole process of goal seeking. How it is
done becomes more important than whether it is done. Means
triumph over ends. Form triumphs over spirit. Method is
enthroned. [Family members] become prisoners of their
procedures, and [families] that were designed to achieve some
goal become obstacles in the path of that goal.

A concern for "how to do it" is healthy and necessary. The fact
that it often leads to an empty worship of method is just one of
the dangers with which we have to live....

As scholars, historically we have tended to address the
rationality of our chosen disciplines as if it were all-
embracing and monolithic in construct. Diesing's
work exposed the multiplicity and interdependency
which exists in a decision-making system such as the
family. As family scholars, we face the challenge of
developing an integrated approach to investigating
family decision-making that will allow for this
complexity.

Legal Rationality. The legal rationality described by
Diesing also has relevance for family decision-making,
although it has been largely ignored by family scholars in
the past. The result of legal rationality is a set of
fundamental rules which are appealed to for the
guidance of family members when conflicts occur. The
value produced for the family, or the rational principle
being applied in its exercise of legal rationality is
"justice", i.e., a system of rules which are clear,
consistent, detailed, and technically administered with
impartiality, fairness, or equality. Such rules
differentiate classes of family members and demand
different things from them. Inherent in the notion of
legal rationality is the assurance that other family
members can be depended on to perform at least their
basic duties. This is accomplished by specifying duties
for each family member so everyone knows what is
expected, calling the family's attention as a whole to each
member's duties, teaching these duties to the relevant
person, and imposing sanctions of various sorts on those
family members who fail to perform. Rules should
provide family members with a clear guide to conduct.
However, every family need not and, in fact, should not
have the same rules. The issue is not that there is some
ideal set of rules, but that each family develops a set of
rules to help guide the conduct of the members of that
family. Neal Maxwell (1978, 55) referred to this when he
said,

We must bear in mind that while there are obvious
differences as to what all the basic truths and values are, having
such tactical differences is very unlike the sad conclusion that
there are no basic truths at all....If we are not committed to
certain truths, ambiguity will replace absolutes, tentativeness
will replace truth, regulations measured by the pound instead of by
principles will replace liberty, a tenured bureaucracy will
replace democracy, and hesitancy will replace heroism.

Once a family loses its capacity to declare that some things
are wrong, per se, then it finds itself forever building temporary
defenses, revising rationales, drawing new lines...but forever
falling back and losing its nerve. A [family] which permits
anything will eventually lose everything.

It seems to me that legal rationality offers the
potential for the most extreme expression of certitude in
family decision-making.

The question family members must constantly ask is
whether, through dependence on rules, as Brown says,
we are refusing "1) to accept the capacity for
autonomous reason in oneself, and 2) to respect that
potential capacity in others." As Brown (1982, 92-93)
points out,

Dogmatism is a closed system in that the substance of beliefs
and ways of thinking and acting are not open to
question;...Closed systems become habitual and, therefore,
create a form of life where the force of habit prevails rather than
the force of reason. Therefore, dogmatism often shows itself in
fear of criticism of existing beliefs or views and in the
conceptual confusion of mere fault-finding with rational
criticism. Related to the fear of criticism, dogmatism is also
often shown in self-deception regarding the adequacy of one's
own existing beliefs and views. It is reflected in distrust of and
impairment with theoretical knowledge or conceptual
frameworks which could be enlightening....What other people
say or do is unconsciously distorted to conform to an absolute
interpretation. Because of the habit of avoiding the grasping of
relations in meaning, dogmatism is shown in unconsciously
accepting contradictions;...reading,...listening, as well as
speaking are conducted...without logically placing the parts in
the context of the whole.

Legal rationality is an area of family decision-making to
which family scholars must give greater attention.

Political Rationality. The political rationality described by
Diesing is an area of decision-making which has
frequently been addressed by family scholars in both the
resource management and relationships areas. This is
the rationality of the decision-making structure in the
family itself, how decisions get made. The structure is
made up of (1) discussion relationships, in which talking,
listening, asking and answering questions, suggesting
courses of action, and accepting them take place; (2) a set
of common beliefs and values; and (3) the set of
commitments which have already been accepted by the
family and the courses of action in which it is already
engaged. Within this decision-making structure, the
family engages in problem-solving, persuasion,
bargaining, and "politics", such as forming coalitions,
marshalling resources, or diverting an opponent's
resources.

As a family decision structure is able to consider a
greater variety of presented facts, values, goals, norms,
and variety of alternatives, the more effective its
decisions are likely to be. In addition, the more intricate
and subtle the ways in which the presented factors are
unified, the more effective the decision is likely to be.
Since these two characteristics are likely to be in conflict
with one another, a family would be considered
functionally rational if it yielded adequate decisions for
complex situations with some regularity. The
integrative decisions required by the family system
require a central authority figure who encourages
participation, is accepting, supportive, and sensitive to
half-expressed feelings, and interprets and transmits
the more hesitant statements of other group members.
The task of the authority figure is to develop group
consensus. If this aspect of responsibility is not
recognized and consciously pursued by the authority
figures in a family, the consequences can be serious for every family member and for the family system. As Diesing (1962, 194) points out,

When parents pay too much attention to moral problems in relations with their children—when they are primarily concerned over whether the children's behavior is right or wrong, and when they try to guide conduct by prescribing duties—they become judicial figures and take on the detachment proper to judges. The entire family decision structure is legalized and attention is focused on the exact scope and meaning of rules, consistency of parents' judgments, rules of evidence, and so on. Attention is focused on surface aspects of behavior rather than on underlying personality (integrative) problems. Parents are too detached to enter hidden meanings of the child's life: they have become prisoners of their own moralizing.”

Decision-making structures, such as families, which must handle a variety of problems, should retain a great deal of flexibility in their decision structure. The rational decision-maker has self-mastery; he or she can be open, decisive, flexible, perceptive, and realistic in dealings with other people. This kind of rationality removes internal obstacles to decision-making, such as conflict, rigidity, and disproportionate influence. The principle in decision structure is to organize the perceptive, creative, and communicative faculties so that effective decisions can be made. The good which comes from political rationality is intelligence, and the ability to effectively solve problems.

The Results of Rationality. The outcome from the exercise of these five types of rationality in family decision-making might be called freedom. Technical and economic rationality produce freedom in an external sense through power over resources. Social rationality produces freedom in an internal sense in that one is able to act without internal hindrance. Legal rationality gives freedom in the sense of a dependable noninterference with one's rights, and political freedom comes from participation in decisions which govern one's own life (Diesing, 1962).

Kaprowski (1973, 234) urged that we consciously implement rationality in family decision-making:

Try family by objectives. Together decide what the major objectives of the family should be, and how these should tie in to the specific objectives of each family member. Periodically review progress toward these objectives.

Set up specific developmental goals for the family, and determine the necessary strategies to reach those goals. Among these goals might be becoming aware of options in life, and learning how to learn, how to make choices, how to interact efficiently with other people, how to appreciate beauty and feeling as well as logic and reason, and how to validate knowledge.

Each of the five types of rationality discussed in this paper differ in purpose and principle. When we try to make decisions in a social context using technical rationality, or vice versa, only confusion, delay, misunderstanding, and conflict can result. If decisions are made, they are frequently unsatisfactory and implementation is problematic if it can be achieved at all.

The core decisions in the family are social and political decisions. However, social and political decisions cannot be implemented; goals cannot be achieved; values cannot be realized if we ignore technical, economic, and legal rationality. The achievement of ultimate ends and purposes established through the exercise of agency depends on the effective managerial decision-making associated with certitude. Families must take great care, however, not to allow these "means" decisions to assume preeminence over the goals decisions and decisions about the distribution and exercise of power and authority. Resource management decisions should be subservient to relationships decisions in family life, just as the scriptures indicate that Deity made certitude (obedience) subservient to agency. This does not mean, however, that they are less important as a focus for research and teaching among family scholars. Either without the other is meaningless and an ineffective way to exercise decision-making in families.

THE FAMILY UNIT AND DECISION-MAKING

The family system is an integrated (united into a cohesive whole) and interdependent (mutually dependent) group of people. One purpose which the family system serves is the preparation of its younger members for independence or autonomy--freedom from control by others and the exercise of self-government. It is my judgment that family decision-making is not a simple homogeneous activity. It should not be confused with the process model of rational decision-making. Family decision-making is complex. It has many facets, each of which must be understood and integrated with other components to make up the behavior we tend to lump together and call decision-making. Relationships scholars have usually not seen this diversity and have tended to focus their attention on the types of task decisions most frequently associated with or assigned to specific family roles. Resource management specialists, on the other hand, have paid lip service to social decision-making by accepting goals as given and have then focused on the technical and economic decision-making required to bring about goal achievement. A comprehensive view of decision-making in families with a simultaneous awareness of its various parts is necessary if we are to understand the division between the relationships and resource management views of decision-making, reconcile, and integrate them.

In summary, the words of John Steinbeck (1952) from East of Eden are appropriate. As you may recall, Lee and the Chinese scholars had deliberated for several years about the true meaning of the Hebrew word timshel in Jehovah's admonition to Cain. In the King James version, the translation had been "thou shalt rule over him," while the American Standard Bible said "Do thou rule over him." Lee tells Samuel,

After two years we felt that we could approach your sixteen verses of the fourth chapter of Genesis. My old gentlemen felt that these words were very important, too—"Thou shalt" and "Do thou." And this was the gold from our mining. "Thou mayest. "Thou mayest rule over sin." (Steinbeck, 1952, 348-349)

But the Hebrew word, the word timshel—"Thou mayest"--that gives a choice. It might be the most important word in the world. That says the way is open. That throws it right back on a completed on page 35
GAINING AN ETERNAL PERSPECTIVE: MAKING "MOLEHILLS" OF LIFE'S "MOUNTAINS"¹
Lynn M. Roundy,* B.A.

At times, mortality, with its challenges, trials and difficulties, seems to be more than we thought we had "signed up" for in our pre-mortal "enlistment ceremony." Our earthly sojourn, with its problems and adversities, might be metaphorically compared to a long and arduous climb into the ravines and up the ridges on the slope of a very high mountain. When these "mountains" of life appear too high to surmount, perhaps the following principles, if properly applied, may be helpful in reducing them to more manageable "molehills."

PRINCIPLE NUMBER ONE: DEVELOP AN "ETERNAL PERSPECTIVE."

As we resolutely ascend the first ridge of our "mountain," we may assume that our arrival at the top will bring an end to the struggle. Out of breath at the summit we experience a thrilling sense of accomplishment. We can look back down and realize the significance of our achievement. Momentarily, however, our reverie is disturbed as we discover that, rather than being complete, our journey is just beginning. Looming in the distance is another, higher peak. The excitement over our present achievement now fades in the face of this new challenge. Our determination to continue upward is only minimally decreased by the realization that between where we stand and the next ridge is a deep ravine which must be traversed. Gazing intently at the distant summit, we begin the descent into the rugged terrain below, reasoning to ourselves, "Sometimes the only way UP is DOWN!"

How differently our earthly troubles would appear if we could rise above the here and now and see them from an "eternal perspective." If our pre-mortal spirit selves could look through a window into mortality and see our current struggles, how different from ours might their reactions be? If these former selves could then speak, what would they say to us? "Be patient. This trial will soon pass. You can make it! The challenge is very hard, but remember how much you did here to prepare for your chance in mortality!"

If we only knew what trials and difficulties we faced and overcame in the pre-mortal life (Battling the forces of Lucifer, for example), how much more confident and determined we might be now!

PRINCIPLE NUMBER TWO: DON'T BLAME GOD FOR ALL OF LIFE'S TRIALS

We often attribute our misfortunes to our Heavenly Father, when, in reality, He does not deserve all the "credit." There are at least four basic causes of our suffering:

1. Some are the simple consequences of sin. Just as blessings are "irrevocably decreed" for obedience (D&C 130:20, 21), so too, are the "wages of sin" unavoidable.
2. Some are the results of "non-sin" free agency choices. Building a house literally on a foundation of sand rather than rock (Matthew 7:24-27) would likely soon result in "adversity." If we fail to maintain properly the automobile engine, we may one day find ourselves "suffering" through the expense of a major overhaul.
3. Still other trials and tribulations come merely as part of living. A rainstorm, for example, falls on both the just and the unjust. If, in that rain, my home is flooded along with others in my neighborhood, that is simply a portion of the experience of mortality, not necessarily an attempt by God to single me out for punishment.
4. There are some experiences in mortality that are "given" by the Lord to school us. In what must be considered one of the great "teaching moments" in earthly history, the Lord, apparently seeking to strengthen and instruct His prophet, deliberately tested Abraham in an agonizing manner, commanding that he offer up his only son Isaac as a sacrifice. (Genesis 22) (Adapted from Maxwell, 1979, pp. 29-31.)

As Elaine Cannon suggests, at one time we had a clear awareness that difficulties and trials would be a part of our mortal experience, and not necessarily an evidence of God's punishment for wrongdoing. Despite our prior knowledge regarding the challenges of earth life, we exercised our agency to leave the relative peace and safety of Heavenly Father's presence:

It is our understanding that in the world before this one we all heard the plan of life presented by the gods. We had our agency-and each of us voted to come down to earth to be proven and to learn. To me that means something like: "I will go down and I will take up my life no matter what comes. I will go down and suffer a learning disability or watch the man I love marry someone else; or I'll endure a frustrating relationship; or I'll take up life as the only Latter-day Saint in my high school, or the only Latter-day Saint in my family; or I'll live my life working hard all my years without apparent success. But I will go down to earth to be proven and to learn." (Abraham 3:25)

One certainty of life is that each of us will meet some mighty test. This is part of the plan. Another thing that we can count on is that neither here nor hereafter are we suddenly going to emerge with qualities we haven't developed or a pattern of living for which we have not prepared ourselves. (Cannon, 1982, p. 95)

¹ This article was written from a lay perspective for use by the non-professional. It is anticipated that therapists may adapt it for use with their clients.

*Brother Roundy is a graduate student in the Department of Educational Psychology, Counseling and Guidance emphasis, Brigham Young University.
PRINCIPLE NUMBER THREE: AVOID BEING CAUGHT UP IN TYPICAL PATTERNS OF MORMON “NON-THINK.”

Some of us, as members of the Church, have come to believe falsely that if we live righteously we will not experience any trials or suffering. Members in difficulty sometimes hear well-meaning, but grossly misguided statements such as, “If you read your scriptures every day, everything will be taken care of!”

The fallacy of such reasoning can easily be illustrated by the lives of such highly faithful individuals as Job, Joseph, the son of Jacob, Abraham, Paul the Apostle, and especially Jesus Christ, all of whom, despite exemplary living, suffered greatly.

All of us will have our own personal problems to deal with, as explained by Elder James E. Faust (1979):

Into every life there come the painful, despairing days of adversity and buffeting. There seems to be a full measure of anguish, sorrow, and often heartbreak for everyone, including those who earnestly seek to do right and be faithful (p. 53)

PRINCIPLE NUMBER FOUR: UNDERSTAND THE PLACE AND PURPOSE OF ADVERSITY.

There is in the eternal plan of God divine wisdom, which requires each of us to take our turn in the “refiner’s fire” of affliction. Elder Faust described the purposeful nature of this fire:

In the pain, the agony, and the heroic endeavors of life, we pass through a refiner’s fire, and the insignificant and the unimportant in our lives can melt away like dross and make our faith bright, intact, and strong. In this way the divine image can be mirrored from the soul. It is part of the purging toll exacted of some to become acquainted with God. In the agonies of life, we seem to listen better to the faint, godly whisperings of the Divine Shepherd.

The thorns that prick, that stick in the flesh, that hurt, often change lives which seem robbed of significance and hope. This change comes about through a refining process which often seems cruel and hard. In this way the soul can become like soft clay in the hands of the Master in building lives of faith, usefulness, beauty, and strength. For some, the refiner’s fire causes a loss of faith and belief in God, but those with eternal perspective understand that such refining is part of the perfection process. (Faust, 1979)

The comforting words of the Lord to the Prophet Joseph Smith at the time of his duress in Liberty jail, “all these things shall give thee experience, and shall be for thy good,” (D&C 122:7) suggest that afflictions have significant value in the divine scheme. There is a purifying effect in adversity which both tempers the “metal” of our souls, and, paradoxically also softens us, increasing our patience, sensitivity, and kindness. As explained by Orson Hyde, “The spirit of rebellion could not be made to bow to mild and affectionate means; but it yielded under the hammer of adversity.” (1966, Vol. 6, p. 338)

If we are willing to be schooled by our trials, we may, like the Savior, come to be filled with compassion for the pains experienced by our fellows, and having suffered much ourselves, we can better attend to their needs:

And he shall go forth, suffering pains and afflictions and temptations of every kind...

And he will take upon him death, that he may loose the bands of death which bind his people; and he will take upon them their infirmities, that his bowels may be filled with mercy, according to the flesh, that he may know according to the flesh how to succor his people according to their infirmities. (Alma 7:11, 12)

Mortality was designed by a loving Father as a testing period—a furnace for the soul, which would separate the “gold and silver” from the “dross.” “And we will prove them, herewith,” (Abraham 3:25) indicates that one purpose of this probationary second estate is to find out what kind of “metal” we are composed of.

PRINCIPLE NUMBER FIVE: LEARN TO SEE PAST THE PAIN AND BEYOND THE SORROW.

It is difficult, in the midst of our suffering, to step “outside” ourselves, and catch a glimpse of how things may change with the dawning of a new day. When we can successfully accomplish this perceptual expansion, the pain of the moment may become somewhat more bearable.

One method of increasing our awareness beyond the now, is to look at the experience of our own lives. Each of us has already suffered through much difficulty, and our presence now indicates that we survived.

For many of us there is a tendency during and after a crisis to emphasize the negative effects of the trial while ignoring the positive outcomes. We would do well to make necessary effort to redirect our focus: What have our pains taught us? In which character attributes are we stronger? In how many ways are we better suited for the rigors ahead? How do our patience, compassion, and empathy compare with their pre-adversity levels? How much has our capacity to endure increased?

Most likely, if we have been able to “endure it well,” (D&C 121:8) the refining fire of adversity has purged us of at least some of the dross in our soul. We are closer to pure metal than before, and consequently our ability to endure the stresses ahead has increased as well. We will undoubtedly find that the challenges faithfully met in our past will be of significant value at some future testing point, when in fact, we may need the additional spiritual “muscle” thus developed to carry the burden ahead. Other, less weighty, trials will be all the easier to shoulder.

Even the devastation of a crippling injury can be looked beyond, as illustrated in the stirring words of a teenager who, after an accident left her paralyzed from the waist down, was able to say:

I’m so glad that I know what I do. Some people go all their lives searching and they never find the answers. I know. I’m sixteen, but I know, and I’ve got a beautiful life to live, if I will. Or I could be bitter—but then life would have no meaning.

No, I’ve got too much to get out of life, too much living to do. I can’t quit because of a minor thing like being paralyzed. I owe it to God and myself to live life the best way I can, and I’m going to try. And trying is half the fight; and this is one battle I want to win!

Every night in my prayers I thank God for just being alive, and still having my hands and eyes and mind and heart and soul. The rest will come in time. Until then, I’m going to make the most I can out of life. I know how much it means now, and I’m going to make the most of it and not muffle up my second chance. This has
PRINCIPLE NUMBER SIX: RECOGNIZE YOUR PLACE IN THE “FELLOWSHIP OF HIS SUFFERING.”

In any difficulty it is comforting to realize that we are not alone—that others share similar miseries, and that they, having faced and overcome their own painful challenges, can empathize with our situation. All around us are individuals who have or are now struggling with their problems. In history we can find case after case of mortals tested to their limits, as in the lives of such prophets as Job, Abraham, Joseph Smith, and Spencer W. Kimball.

If we focus on our own challenges, they seem to be magnified in dimensions, and may soon appear wholly beyond our capabilities. When we turn our focus outward, toward others, forgetting ourselves, and become compassionately concerned over their welfare, our own burdens will seem to gradually dwindle in magnitude.

By accepting our membership in the “fellowship of his suffering,” (Philippians 3:10) we can fully appreciate the ultimate example given of endurance by Christ, who with reference to life’s trials, “hath descended below them all.” (D&C 122:8) The Savior, having shown us how to bear faithfully mortality’s greatest burdens, beckons to us: “Come, follow me.” (Luke 18:22) His shining example will even illuminate our troubled path: “I am the light of the world: he that followeth me shall not walk in darkness, but shall have the light of life.” (John 8:12)

PRINCIPLE NUMBER SEVEN: DECIDE TO HAVE A CUP “HALF-FULL.”

We will seldom make better use of our God-given agency than in deciding to perceive our tribulations in something other than negative terms. Is the “cup” half-empty, or half-full? Our response will have a significant impact on our emotional reaction. That we all have a valid choice in answering this question is suggested by Obert C. Tanner (1955):

> It is a strange fact that there is no correlation, no one-to-one ratio, between the amount of satisfactions we gain in life and the amount of happiness we enjoy. All around us are cheerful and happy people with few of life’s satisfactions and also unhappy people with many of life’s satisfactions. (p. 219)

Elaine Cannon (1982) further explains the nature of our agency decision:

> In adversity we can complain bitterly, “Why me? Why now?” and wallow in self-pity, thus denouncing God. Or we can find our way by asking that all-important question: “Which of my Heavenly Father’s principles will help me now?” And when we find that appropriate principle, the next step is to live that law, “irrevocably decreed” upon which the particular blessing that we need is predicated (D&C 130:21). (p. 95)

One effective method of reframing our perception of the difficulties that beset us is to develop a healthy sense of humor. Whoever coined the phrase, “Laughter is the best medicine,” may have experienced the curative effects of attempting to see the humorous side of even the most trying circumstances.

I suspect that even God may have been amused by the reported prayer of Moses when the children of Israel, following their prophet, were led between two mountain ranges to the shore of the Red Sea. With their “backs to the wall” they turned to discover that Pharaoh was now approaching with his soldiers and had blocked their only apparent way of escape. The Jewish historian, Josephus (1867, p. 63), tells us that in this desperate moment Moses turned in supplication to the Lord:

> Thou are not ignorant, O Lord, that it is beyond human strength and human contrivance to avoid the difficulties we are now under; but it must by thy work altogether to procure deliverance to this army, which has left Egypt at thy appointment. We despair of any other assistance or contrivance, and have recourse only to that home we have in thee; and if there be any method that can promise us an escape by thy providence, we look up to thee for it. And let it come quickly...

We may have little opportunity to determine for ourselves the number and severity of life’s adversities, except, of course, those that follow the commission of sin. With an awareness of this reality, we are individually left with the opportunity to exercise our final freedom: “the ability to choose [our] attitude in a given set of circumstances.” (Viktor Frankl, cited in Hillman, 1981, p. 165)

PRINCIPLE NUMBER EIGHT: USE YOUR “PROVED WEAPONS.”

When young David, having heard the challenge of Goliath to the armies of Israel, suggested that someone should kill this “uncircumcised Philistine,” for defying the armies of the living God, word got back to King Saul, who sent for the young man. Upon being favorably impressed with the faith of David, and being convinced that God might indeed assist this youngest son of Jesse with the Philistine giant as He had with the lion and the bear that threatened the young man’s sheep, Saul put his own armor on the boy and gave him his own sword. Saul was a very large man (1 Samuel 9:1, 2), and his armor and sword probably engulfed young David, rendering him incapable of going to battle. At any rate, David removed the armor and returned it to the King saying, “I cannot go with these; for I have not proved them.” (1 Samuel 17:39)

So, if he wasn’t proved with the king’s sword and armor, what was he prepared to use? His sling, of course. Hour after hour, day after day he had practiced with his sling as he watched over his father’s sheep. Goliath fell to the “proved weapon.” David went with his strength, and he won!

We too may each have a sufficient quantity of “proved weapons,” if we will recognize and develop them, and if we are wise enough to use them.

PRINCIPLE NUMBER NINE: TELL A FRIEND.

There will be times, for each of us, when we need to unburden our souls with a trusted friend—one who will not quickly jump in with “quickie” solutions, but who will simply listen intently and be with us in our grief and difficulty. Often just talking about and expressing our
sorrows and frustrations will ease the pain they cause us.

While there are benefits in sharing our burdens with others, there is danger in indiscriminate repetition of these trials to “the whole neighborhood.” We may develop an unhealthy habit of bemoaning our problems in order to evoke an expected reassurance, or expression of pity from the listener. On the other hand, our companions may soon tire of our continual complaining and eventually turn a deaf ear.

Occasionally we will require more than a listening ear and understanding. At these times it is wise to seek the assistance of a quorum leader, auxiliary head, or bishop. In some cases we may find it necessary to seek the professional help of a competent therapist.

The Lord, knowing that we may all have need of help beyond ourselves, established His Church to provide a support group of individuals who are “willing to bear one another’s burdens, that they may be light;... and are willing to mourn with those that mourn; yea, and comfort those that stand in need of comfort.” (Mosiah 18:8, 9) We are wise when we can recognize our need for assistance and accept the help that is available.

**PRINCIPLE NUMBER TEN: DEVELOP AN EFFECTIVE “HOLDFAST.”**

There is in the stagnant ponds and slow-moving streams near my boyhood home a species of very small multi-celled animals called the hydra. Its body consists of a hollow, tubular stalk, and a number of tentacles at one end. To move from place to place the hydra will simply “tumble” end-over-end, allowing the current to provide impetus. When a new living site is found, the hydra utilizes the same currents to bring smaller animals within reach of its “stinging cell” equipped tentacles which catch the organism and push it into the hydra’s “mouth.”

To keep from being “blown” about, the tiny hydra has, at its base, a “holdfast” structure, which enables it to adhere to the bottom of the pond or stream. In its natural habitat the hydra can be seen securely waving in the shifting currents.

This situation in nature strikes me as parallel to the position we have in the gospel, as we struggle to remain “steadfast and immovable” (Mosiah 5:15) in the face of strong and often unfriendly “currents.” The prophet Helaman, sensing the tide of difficulties, challenges, and trials in which he and his sons were required to travel, gave the following wise counsel:

> And now, my sons, remember, remember that it is upon the rock of our Redeemer, who is Christ, the Son of God, that ye must build your foundation, that when the devil shall send forth his mighty winds, yea, his shafts in the whirlwind, yea, when all his hail and his mighty storm shall beat upon you, it shall have no power over you to drag you down... (Helaman 5:12)

By forming our personal foundation on the “rock of Christ,” on the gospel, and by resolving any personal sins through the process of repentance, we are in a position to “bind” the Lord to help us in our moments of grief when our own resources are not sufficient, and we need the added strength of his grace. He will not rescue us from our growth-causing challenges, but He will stand by us providing encouragement and an extra shoulder to lean on. “Come unto me, all ye that labour and are heavy laden, and I will give you rest.” (Matthew 11:28)

Sincere and fervent prayer seems to be an essential element in this process of securing divine assistance with our mortal miseries, as it was for the people of Alma:

> And it came to pass that so great were their afflictions that they began to cry mightily to God.
> And it came to pass that the voice of the Lord came to them in their afflictions, saying: Lift up your heads and be of good comfort, for I know of the covenant which ye have made unto me; and I will covenant with my people and deliver them out of bondage.
> And I will also ease the burdens which are put upon your shoulders, that even you cannot feel them upon your backs....
> And now it came to pass that the burdens which were laid upon Alma and his brethren were made light; yea the Lord did strengthen them that they could bear up their burdens with ease, and they did submit cheerfully and with patience to all the will of the Lord. (Mosiah 24:10, 13-15)

The promise of the Lord is not that the way will always be easy, but that it will be endurable, with His help:

**What God Hath Promised**

- God hath not promised skies always blue,
- Flower strewn pathways all our lives thro’.
- God hath not promised sun without rain,
- Joy without sorrow, peace without pain.
- God hath not promised we shall not bear Many a burden, many a care.
- He hath not promised we shall not know Toil and temptation, trouble and woe.
- But God hath promised strength for the day,
- Rest for the Labourer, light for the way,
- Grace for the trials, help from above,
- Unfailing sympathy, undying love.

(Anonymous)

**PRINCIPLE NUMBER ELEVEN: REMEMBER WHO’S “IN CHARGE.”**

We sometimes forget that God is in His heavens, that He is completely aware of all that has occurred, all that is occurring, and all that will occur on the earth, and that He is also very aware of our individual plights.

As a young married father, having suffered with a debilitating illness for several months, and seemingly headed for even greater health problems, I found myself overcome with self-pity, and in a moment of solitude I cried out my angry frustrations to the Lord: “Dear God! This is not the way I wanted my life to go!” This outburst, punctuated by several moments of anguish and sobbing, was interrupted by an unexpected answer to my “prayer”: “That is the problem, my son! You are not in charge—I am! Trust me!”

By deciding to let God be “in charge” we should not assume that we must then abandon our own agency choices in how our lives will go. One of the most significant purposes of our mortal probation is to provide each of us the opportunity to assume increasing responsibility for ourselves and our destinies. We are
OLD WINE IN NEW SKINS: A COMMENT ON WARNER

Lynn D. Johnson, Ph.D.

I have often thought that in psychotherapy we tend to rediscover the wheel each generation. We never tire of declaring how far we have come. Considering Santayana’s dour prediction about the fate of those who ignore the past, it is useful for us to examine new developments in our field with an eye to history.

Warner (1982) conveys in his article this sense of discovery. Such a sense is exciting and, to the experienced psychotherapist, familiar. Warner postulates that he and his associates have developed a remarkable new approach to mental health which is based on eternal principles applied to everyday life. This application, they suggest, leads to a qualitatively different and better way of experiencing one’s self and the world.

Warner suggests persons experience emotions and feelings as things which occur spontaneously (at least those experienced subjectively as “genuine” and not contrived or exaggerated), over which they have no control. Therefore, changes in strong, deeply felt emotions are experienced as miraculous—perhaps due to divine intervention. People experience themselves as receiving, not initiating, emotions.

Warner then postulates that feelings are actually self-serving and determined more by the advantage they offer as a defense than by circumstances. He postulates that long-term, deeply held, unpleasant feelings experienced as “happening to” the person are a lie. The person actually has an active part in creating those feelings through choosing to perceive and construct reality in certain ways. A person is motivated to create this distortion because it helps shield him from the fact that he has been untrue to his own self, his own sense of right and wrong. Warner terms this process “self-betrayal.” Negative feelings, in summary, are caused by perceptual distortions rooted in our desire to justify ourselves for not doing what we ought.

Warner then outlines a “standard theory and treatment” which he claims represents “mainstream psychology.” This he describes as the therapist encouraging the acceptance of deeply held feelings, the congruent expression of those feelings, and the search for means of legitimately achieving the needs and wants expressed in those feelings. Warner suggests that “mainstream psychology” (more accurately, psychotherapy) fails to be helpful by failure to attend to the self-serving, self-justifying, defensive functions of emotions.

Obviously, what Warner has done is to take the contemporary Church doctrines about repentance and apply them to psychotherapy. The process of acknowledging the error of one’s behavior, the acceptance of responsibility, and the subsequent change of heart are clearly rooted in a model of the gospel. As LDS counselors read Warner’s theory and application, then, they will be impressed with these efforts.

In this article, I intend to question whether the gospel can be applied to mental health issues across the board. I do accept the concept that many people who are unhappy might well benefit greatly from Warner’s concepts. However, I intend to question whether those people are suffering from mental disorders in the sense of qualifying for a DSM III diagnosis.

I also intend to demonstrate that Warner’s portrayal of “standard theory and treatment” is a straw man, set up for the purpose of being knocked down. Warner’s idea that therapists are promoting acceptance of feelings rather than change of feelings is naive from a theoretical point of view. Many therapy systems do in fact promote actual changes in feelings and behavior, not merely acceptance and negotiation. While it may be true that many counselors practice what Warner has described, this is not an indictment of theory but of the practitioners.

As to the straw man point: Cognitive therapy (Beck, et al., 1979) is probably the most effective psychotherapeutic approach for depression which has been evaluated carefully. In therapy outcome trials, psychotherapy typically falls far behind psychotropic medications in effect. The Beck studies, reviewed in the volume cited above, suggest cognitive therapy has as much or more effect as medication (imipramine) and lower relapse rates. In the cognitive therapy model, feelings are viewed as outcomes of information processing, usually auditory. In other words, what I say to myself will determine my feelings, or more accurately, what I believe about myself and the world will determine my feelings. For example, if I believe I am bad and have no value as a person, I will naturally feel depressed. Beck and his associates postulate all feelings are understandable and reasonable, given the underlying assumptions and beliefs the person has about the world. However, these beliefs and assumptions are faulty, over-generalized, and not empirically tested. The standard technique in this system is to challenge feeling states through testing of underlying beliefs. The feelings are not “lies,” but they are mistaken.

Strategic therapy is a system of therapy which is rapidly growing in popularity (Smith, 1982). Milton H. Erickson, M.D. is considered the dean of strategic therapists. He was the father of the concept of strategic

1 I would like to thank Addie Fuhriman for her constructive comments about this paper. All responsibility for the ideas in it, however, is mine alone.

*Brother Lynn Johnson is a psychologist in private practice in Salt Lake City, Utah.
therapy, and originated many of the concepts and techniques (Haley, 1973). Erickson was famous for appearing to totally accept the beliefs and feelings of his patients, only to cause profound changes to happen to those beliefs and feelings through the therapy process. In Smith’s 1982 survey, Haley and Erickson figured among the top ten psychotherapists in terms of influence on the thinking of clinical psychologists, so we may assume this approach represents to some extent a “standard therapy.” Haley, Erickson’s main proponent, has consistently pointed out the interpersonal aspect of communication (Haley, 1963). Feelings, for example, are very powerful ways of communicating, and Haley has recommended therapists view feelings as attempts to communicate and influence others. The idea that feelings should be expressed in therapy is discouraged in Haley’s work. He emphasizes the need for the therapist to have clear, understandable goals for the patient, and to give directives which accomplish those goals. Haley’s directives may be compliance-based, meaning that the patient should do them in order to benefit; or resistance-based, meaning that only through resisting the directive will the patient benefit. More commonly, Haley advocates the double-bind—in which, no matter what the patient does, he will benefit.

The interesting thing about the strategic therapy is that the “cures” tend to be dramatic and almost unbelievable. Haley (1973) describes Erickson’s therapeutic strategies and results; Palazzoli, 1978; Palazzoli, et al. 1978 describe the application of strategic psychotherapy to two extremely difficult populations, anorexia nervosa and schizophrenia, with similar dramatic results. Weeks and L’Abate (1982) describe paradoxical interventions and follow a case throughout a complete course of therapy. Fisch, Weakland, and Segal (1982) outline treatment within the Palo Alto brief therapy model of six sessions or less, and demonstrate impressive results. Haley (1980) details his work with heroin addicts and early-onset schizophrenics, and even gives a case-by-case outcome, a truly astonishing and moving work.

A third example of therapy which is certainly “mainstream” among graduates of the University of Utah psychology program is Ernst G. Beier’s communications-analytic therapy. Beier’s books (1966, 1975) detail his theory of behavior which claims that so-called involuntary behavior, such as symptoms and emotions, are actually in service of the strategic advantage those involuntary behaviors give, especially in interpersonal relations. Beier argues that the child learns very early that emotions of a certain class have great power in his particular environment, and these emotions will then be displayed whenever the child needs the unique advantage they confer. The emotions are subjectively felt as genuine. To the impartial observer, however, they seem to be useful ways of manipulating the self and others. This concept is close to Warner’s idea of the emotion as a “lie” although Beier would repudiate the use of such a word as “lie” or “sin” as unnecessary and judgmental. Beier believes the nonjudgmental stance the therapist takes gives him the power to make the changes in the neurotic character of the patient. If, however, the patient can find out what the therapist values and desires, the patient will begin to involuntarily manipulate the therapist as he manipulates everyone else around him.

Langs (1978) argues as a psychoanalyst that whenever the therapist accepts as genuine the feelings or perceptions of the patient, he excuses the therapeutic efforts of the analyst and patient. In other words, there is no need to analyze that material since it is genuine. Langs argues that this constitutes an unholy alliance, so to speak, in which the patient’s defenses are reinforced rather than worked through. Langs argues that when this happens, the patient, while consciously grateful, will unconsciously perceive the therapist as corrupt or incompetent, probably both. Langs postulates the proof of such unconscious perceptions will be always present in the verbal material the patient produces in therapy, in derivative (disguised and indirect) forms, and will form a continuous thread to meaning through the therapeutic relationship.

While the above weaken Warner’s bold assertion (“No one in mainstream psychology believes a feeling can be genuine, i.e., really felt, and at the same time dishonest, i.e., a lie about its own character.” p. 25), the most powerful example of the error of this position is taken from Transactional Analysis (TA). TA is certainly a popular approach to psychotherapy, at least from the point of view of the self-help books sold. Every well-stocked paperback bookstore will feature several TA books in its “psychology” section.

A standard work in TA is Berne’s 1966 volume, Principles of Group Treatment. Berne says, “Self indulgence in feelings of guilt, inadequacy, hurt, fear, and resentment are colloquially called ‘rackets.’” ...The problem of legitimacy in connection with such feelings has not been completely solved by the transactional analyst... (but) the transactional analyst starts from the basic position that there is no such thing as Adult anger, that anger is a “racket” indulged in with Parental permission or encouragement. ...To the Adult, pain and frustration are problems to be solved; to the Child they are provocations to be taken advantage of. (Now I’m entitled to hit you, he says) ...The same applies to disappointment...” (pages 308-9) Beier was often scornful of therapists who advocated free expression of negative feelings, and would ask how throwing a typewriter out the window would improve your relationship with your boss.

It should be clear now that many therapists expect to change feelings in their patients. Acceptance of feelings may be present, but often as an intermediate step, with the goal of change in the mind to the therapist. Further, the strategic, Beierian, and TA therapists view repetitive, strongly held negative feelings as strategies of methods used by the patient to influence others. This, according to these thinkers, is especially effective, since the patient can disclaim responsibility for the feeling while using it to his advantage. (“I just can’t help being so difficult when I’m depressed.”)

While the reader at this point may appreciate that
Warner is misinformed about his concept of "standard theory and treatment", he might ask, "But hasn't Warner described a powerful approach to mental health, one which incorporates the gospel ideals of repentance of sins and a change of heart? And what about the idea that mental health services can be delivered to neurotic populations through the use of group seminars, conveying these ideas through examples and parables?"

The first point implies that bad feelings are sins. Some would argue that feelings are resources God gives us to help ourselves experience free agency. I have some reservation with such a view, as it ignores the points alluded to earlier—namely that feelings can be used manipulatively. I rather want to raise the question whether mental and spiritual health are the same. To believe they are the same implies all mentally healthy persons are living righteous lives. Some may not take that view, but would take the view that all spiritually healthy persons are mentally healthy.

I am not aware of any data which suggest all spiritually healthy persons are mentally healthy. How would we decide such a thing? I have seen persons in treatment for psychosomatic disorders who seem to be righteous. In the treatment of psychosomatic disorders, the problem is not the existence of unpleasant feelings; on the contrary, the problem is more often the absence of unpleasant feelings. Psychosomatic patients seem to lack the cognitive and conceptual tools necessary to experience unpleasant feelings. The term "alexithymia" has been coined to describe these patients, meaning "no words for feelings." The patient has no idea there is a problem, although through counseling they can become aware of the underlying problems and address them. The process of helping a patient arrive at that point, however, is pure psychotherapy. I would guess that no amount of seminars could be helpful to that population, since it is through the interactive therapy process that the patient "gets in touch with" the feelings, to use a cliche. (We will not address the question of paradoxical or family therapy approaches to this disorder.)

Can it be possible to imagine a person living a life pleasing to God and not being mentally healthy? This seems unknowable, since we can't make accurate judgements for one of the dimensions. Nevertheless, let us construct an hypothetical 2 x 3 table.

Since we cannot know how to classify persons along the dimension of whether God is pleased with their lives, let us instead substitute the judgment of such criteria as "active in Church affairs" and "appears to live a Christian life."

As you can see from Table 1, my examples are somewhat simplistic. Nevertheless, I am sure we can think of people who fit into each of the six classifications. As workers in mental health, we tend to judge people along the dimension at the top of the table. God, on the other hand, being higher in his understandings and perceptions than we are, judges along the dimensions at the left of the table, or in eternal terms. Clearly the only dimension we can actually judge is high versus low mental health; the elaboration into a table of levels of righteousness is conjecture. Nevertheless, we can at least question whether mental and spiritual health might be orthogonal.

<table>
<thead>
<tr>
<th>High Mental Health</th>
<th>Low Mental Health</th>
</tr>
</thead>
<tbody>
<tr>
<td>Saints Ministering Angels</td>
<td>Active, faithful saints with psychosomatic disorders, depressions, etc.</td>
</tr>
<tr>
<td>Liars</td>
<td>Psychopaths, severe impulse disorders, suicides, etc.</td>
</tr>
</tbody>
</table>

What about the second point, that teaching through example and metaphor is a more effective way of delivering mental health service? I believe this idea has much to commend it, not the least of which is the observation that Jesus did much of his teaching through parable. Actually, the telling of stories is one of the oldest ploys to bring about change, with roots in the Old and New Testaments. Zen Buddhists and Hassidic Jews are famous for their teaching through story. More currently, Milton Erickson was well-known for his use of stories and anecdotes, and his use of them has been analyzed from several perspectives. Haley (1973) used them to illustrate Erickson's systems orientation to therapy, Bandler and Grinder (1975) looked at linguistic patterns, Gordon (1978) extended linguistic and matching operations analysis of metaphorical therapy, Zeig (1980) illustrated the interpersonal outcomes of Erickson's metaphors, and Rosen (1982) catalogued the embedded messages in the metaphors into themes. Bandler and Grinder point out that the process of listening to a story creates an involuntary "transderivation search," or in other words, a process of applying the story to the self. Haley (1982) tells humorously of this process.

"When some of my trainees visited Phoenix and met with Erickson as a group, ... (he told them stories). When they returned, one of them mentioned a story Erickson had told about him. One of the others said, no, the story was actually about her; ... (another) of them said the story applied to his particular experience. It turned out that all of the group thought they had received a personal metaphor from Erickson designed just for them. ... Yet the metaphors were stories and cases that Erickson had told many times before. ... Some of the stories were ones I had heard many years before and I knew they applied personally to me." (p. 6)

Warner and his associates tell seminar participants they are not being asked to identify with the stories. I believe this to be an excellent way of achieving a more profound identification with the story; so did Erickson. He would never admit a story was aimed at anyone in
poor method of actualizing them in the lives of clients. Where may these techniques be read or heard about them and proceed to try them out on their clients. What Warner and his group can do, others may not be able to do. Certainly much harm has come from therapists trying to be Milton Erickson when they are not. A similar problem can arise from Warner’s work. For example, it would be easy to try to reframe a clinical depression with Warner’s techniques, and I agree, and convinced the woman it was because she did a much better job than anyone else, and they were trying to learn from her how they could do better. Her symptoms then began to resolve.

Warner’s reframing of feelings from inevitable and justified (“Well, doc, wouldn’t you feel the same way?”) to lies about their own nature and coverings for self-betrayals accomplishes the requirements for the definition above. He has certainly proposed a set of concepts which also fit the situation, and by doing so has changed the meaning of the situation for the person being reframed.

My fear about these techniques is that counselors will read or hear about them and proceed to try them out on their clients. What Warner and his group can do, others may not be able to do. Certainly much harm has come from therapists trying to be Milton Erickson when they are not. A similar problem can arise from Warner’s work. For example, it would be easy to try to reframe a clinical depression with Warner’s techniques, and I predict the results could be disastrous. The depressive person is clever at twisting things into statements of self-blame, and could reply that now he feels guilty about feeling depressed. Where may these techniques be applied safely?

Herein lies the major problem with Warner’s presentation. While his stories are inspiring and enlivening, they fail to provide scientific proof of efficacy. In a field like psychotherapy, where everything from Reality Therapy to Primal Scream can legitimately be practiced by professionals, a basic problem is to find out what works. My professional experience makes me leary of people who want to impose any value system on others, even the true one—not because the values are not true, but because of the methods usually used to impose them. Few counselors, in my experience, have the integrity needed to impose values successfully, and tend to use guilt and pressure in place of love. A therapist with a good system of values (espoused) and a poor method of actualizing them in the lives of clients becomes a noxious counselor.

We are unable to evaluate the present techniques. It is irresponsible and lazy of us to believe in a method which offers only testimonials. Such proof is the mark of the quack, and in medicine we would properly shy away from it. How can we accept it in psychotherapy? Warner has apparently done no follow-up to his seminars, or at least he hasn’t reported any. We do not know whether 5% or 95% of the people attending his seminars experience significant personal gain. We do not know whether 5% of those who gain maintain that gain once home. A useful contrast is found in Watzlawick, Weakland, and Fisch (1974) where they report the percent of persons who resolved the presenting complaint after six sessions of strategic therapy. They also discuss their failures and possible reasons for them. Similarly, I have referred to Haley (1980) where he published a case-by-case follow-up of his therapy with young schizophrenics and young heroin addicts.

A second problem is in the lack of impartial observation of the seminars. Argyris (1978), in his work with organizations, has come to the hypothesis that people cannot adequately verbally model their own behavior. Argyris has observed a striking difference between how people describe their behavior and what they actually do. The first he calls the espoused theory and the second the theory of action. Argyris argues we are always blind to our own theory of action; thus we profit from feedback from others. Similarly, a talented psychotherapist can gain much from others observing his work.

A third problem lies in the choice of population to serve. Persons who seek help from seminars may be very different from people who seek help from psychologists or psychiatrists. Personally, I am sure they are, since I have conducted numerous marriage communication skills seminars. I find the people who attend these seminars are much less disturbed than couples I see in my practice. I find that with the former group it is easy to significantly help them, while with the clinical group much more energy is needed. If the people who attend Warner’s seminars are good, cooperative, bright people, it may be quite easy to achieve significant gains.

A fourth problem is with diagnosis. Warner claims his approach is useful for the neuroses, but as pointed out above, we do not know that his population would satisfy diagnostic criteria for neuroses. If neurotics benefit, which type of neurotic in particular? A bright obsessional might accept this model, a depressive might be worsened, and an hysteric might not understand a word of it. The model may fit the person who blames others for his feelings; what about the person who blames himself?

A fifth problem is parsimony. William of Occam, I believe, forbade the unnecessary multiplication of entities. This article has suggested that remarkable success in changing behavior and feelings is available from other therapeutic interventions. Many of these models do not accept the concept of the defensive and/or intrapsychic role of feelings. Palazzoli (1978) detailed her unsuccessful work with anorexics in which she used.
the model of character defenses. She then shifted to a strategic model of family therapy, in which she utilized the idea that all anorexic behavior was really an attempt to help the family. Oppositional, self-destructive behavior was defined in the family therapy sessions as not only helpful, but positively necessary for the family to survive as a unit. This technique of positive connotation is used to change feelings in the family in an indirect, paradoxical way. In fact, the technique might be termed a restraint from change technique, since the positive connotation suggests the family cannot get along without the problem.

Now if such paradoxical and strategic methods work powerfully in family therapy, and with difficult problems without using interventions based on moral choice or renunciation of defenses, why are the latter methods necessary? I believe such methods most often simply produce resistance and resentment in many clients. We end up asking our clients to learn our language. Erickson, in contrast, always instructed his students to speak the language of the patient. With Joe, the florist suffering unbearable pain from terminal cancer, Erickson never mentioned pain relief or relaxation or acceptance. Instead he spoke to Joe about the growth of plants, tomato plants, and the comfort and satisfaction a tomato plant might feel in growth, in rest, in the cycles of living. Joe achieved the results of pain relief, acceptance, and the giving up of his bitterness and fear without having to learn any new concepts or language. Erickson instead learned Joe's language, and used it to help Joe very economically.

Warner's program involves people learning new language and concepts. Again, this may not be necessary from a pragmatic perspective. Warner is locked into this position, however, by his assumption that mental and spiritual health are the same, and that mental suffering from a pragmatic perspective. Warner is locked into this position, however, by his assumption that mental and spiritual health are the same, and that mental suffering is caused by spiritual factors. That may be. It is also likely that mental suffering is caused by a variety of other factors, including inadequate utilization of personal resources, genetic factors, physical diseases, the interaction of physical and mental processes, and so on. If we can cure many of the patients we see without attending to supposed spiritual causes, have we performed a valuable function? Or could it be we are merely making well-adjusted sinners? In that case we are doing great harm.

But let us pursue this farther. If we admit that we have cured a person and made a well-adjusted sinner, we are admitting that sin and suffering are independent. Once we admit that, we must also admit that this notion that feelings are sins must be rejected. If individuals, families, and groups can be happy and well-adjusted without accepting the sinful nature of bad feelings, then Warner is in the uncomfortable position of Pope Urban, who insisted Galileo recant his idea that the earth moved. (“ Nevertheless,” he muttered, “ it does move.”) Scientific ideas must be tested against scientific criteria, not religious ones.

Warner has performed a valuable service by expressing these ideas. I enjoyed the article and am grateful for the incentive it has given me to think about these issues. My intention has been to challenge and propose, not to attack, and I hope this dialogue may continue.

Postscript: Just before this article was to be mailed to the editor of this journal, Warner was kind enough to send me a copy of his talk given to the BYU Alumni College on January 24, 1979. (Warner, 1979) The material in this talk answers some of the points I have raised. For example, he has begun to do follow-up, and estimates that 40% of those attending his seminars are benefiting. He also suggests others may benefit slowly.

In this paper he also makes the point that many psychotherapists do not consider their patients responsible for what they feel and do. Again, I believe from my experience with Beier and Erickson, that this position does not fairly represent the strategic therapy model. In psychotherapy supervision, I have heard Beier respond to a husband who feels his wife is unfailing, “And what do you do to deserve an unfailing wife?” The principle of shifting responsibility back to the patient underlies all of his work, although it is often more subtle and at times understated than in Warner's work.

Perhaps the reason Warner hasn't been challenged on his assertions about psychotherapy relieving the individual of responsibility is that, sadly enough, so much therapy is done precisely the way Warner describes. Of the theories of psychotherapy now around, aside from the strategic therapy model (more precisely, models), I have the idea I would be most comfortable with Warner's. Like strategic therapy, it involves a genuine (second-order) change; that is, a change in the way of being, and explicitly states that class of change as a purpose. I continue to assert that the strategic model is more parsimonious, and hope, again, this dialogue my continue.

REFERENCES


1. Some Thoughts About Outlooks

The editor of this journal asked me to respond to Lynn Johnson’s critique of my lecture “Feelings, Self-deception, and Change.” Doing this requires an excursion into an abstract, philosophical realm that may be unfamiliar to some. I hope this excursion will be worth the readers’ trouble, for it will provide a perspective from which aspects of human behavior can be seen that might otherwise escape us.

In order to express some complex thoughts as simply as I can, I will expand two ideas that Johnson mentioned. One of these ideas is that there is a discrepancy for most people between what they say they are doing (their ‘espoused theory’ of their conduct) and what they are really doing. We collect, formulate, devise, derive, elaborate, and defend ideas and think that what we have arrived at is what we believe. But it may not be. For example, open-minded observers may be able to see clearly that in arriving at and maintaining these ideas we are promoting or defending ourselves. In a situation like this our real, operative beliefs may include the following: that we are being threatened in some way that makes self-promotion or defensiveness necessary or important, that unless we watch out for ourselves serious difficulty will befall us, etc. Our real beliefs are not necessarily what we claim to believe but instead are beliefs that are embedded in the way we actually perceive our world, that motivate our conduct, and that we manifest, for all open-minded people to see, in our behavior.

This self-misunderstanding can work in the opposite direction. An individual may have an outlook on life and people that is loving—an outlook much like the Lord’s own. This individual’s family and associates may then respond in kind, freely abandon any self-protective feelings they might have had and be encouraged to put their energies into productive work and service. Yet if you ask him to explain why he is successful, he may invoke a theory of behavior quite unlike his actual operative outlook. And others who try to rely on the theory he says he believes, but who lack his love, cannot replicate his results. Here too his operative beliefs are manifest in his conduct, and anyone who has no interest in interpreting his conduct distortedly will, like children, be able to discern what his beliefs really are. Whether our operative beliefs and intentions are good or evil, we may be among the last to realize what’s obvious to many of our acquaintances.

This means that whenever we are inclined to say, “I’m right and you’re wrong,” we are probably wrong. Behind this kind of self-serving judgment is an attitude that puts all the weight on what the other person claims and none upon his real beliefs, his attitude, the condition of his heart.

The second idea I want to expand upon—it is closely related to the first—is “reframing.” This is an idea that, in one form or another, has played an important part in contemporary philosophy. A “frame” or “outlook” or “paradigm” or “world,” as I shall use these terms, can be thought of as more basic than a theory, or it can be thought of as a very basic theory. Ordinarily, a theory is a set of principles that helps us explain what we see going on in the world of our experience, that we would not otherwise understand. A person’s theory can change while his world of experience, or basic outlook, remains substantially the same. But that world or outlook too may change: one’s presuppositions can become altered so profoundly that what in the former world of experience were hard, incontrovertible facts may in the new world be insignificant or non-existent. In the Newtonian world-system light is propagated in a straight line; it was not just our theory of the world but facts we accepted that Einstein changed when his work on the General Theory of Relativity correctly predicted that light would bend conformably to the gravitational field of a heavenly body. When a theory is so fundamentally different from its rivals that adopting it would alter our world of experience entirely, we may call it an outlook or paradigm.

Characteristically our operative beliefs are continually being revised in this small particular or that, but only on rare occasion is a clean sweep, a ‘conversion,’ made, in which one’s entire operative outlook is transformed, new categories of thinking come into play, previously conspicuous objects and events acquire new significance, go unnoticed or disappear, and new ones emerge. ‘Reframing’ is a metaphor too weak to capture this profound transformation of outlook, in which not just the frame but the angle of vision, the lighting, the ranges of the various senses, the classification scheme, the interests, the meanings of the words with which we talk about ourselves and others—in short, every factor affecting the way we apprehend our world—all undergo change. As a consequence one world of experience, or outlook, may have little or nothing in common with another.

Faith is one kind of frame or outlook; the kind of science that takes itself to be “objective” is another. From within the “objective” frame the world of spiritually minded people is inaccessible, and the reports and conduct of these people are construed as being very different from what they themselves understand. The experience-world of the spiritually minded likewise precludes the “objective” outlook. Their understanding of the reports and conduct of people with the “objective”
outlook is not at all like the understanding that those people themselves have. The greatest discrepancies between what an individual thinks he is doing and what he is really doing come when "what he is really doing" is observed, however open-mindedly, from a frame or paradigm different from his own.

The reader can now understand why a point-by-point response to Johnson's analysis of my lecture would be misleading. That analysis implicitly reframes what I had to say, and hence applies to some other view than my own. A point-by-point response would suggest that it erred in its particulars, when what needs to be said is that, at least in the beliefs that we espouse, we are operating from different outlooks.

But how, then, can one individual respond to another when theirs seems to be a diversity of paradigms rather than a diversity of facts? For me, there can be only one answer to this question--an answer that modifies and brings a new dimension to what I have just said about outlooks. It is that though our espoused and even our present operative outlooks may be different, potentially at least there is an operative outlook that we share. This is the common ground upon which we can come together. In what we think we believe we may misrepresent or even try to repudiate these deepest beliefs. But we can just as easily give up our efforts to insist upon our separateness and our freedom from others' claims upon us, and look past the transitory divergencies of our views to the day when we will see eye to eye because we are of one heart.

To respond in the standard, argumentative way would be too much like taking up the sword to dissuade others from taking up the sword. If we live by theory we shall die by theory. Where we meet is holy ground, and we come there not to die, but to live. Consequently that ground is not a projected ideal limit of scientific agreement toward which we sometimes think we are tending but will never achieve. It is love, and it is available to us now and in every moment just as readily as honesty with ourselves is available. When we meet on common ground it is as sisters and brothers, beyond considerations have their uses, in the long run, I think, to comprehend the pitfalls and limits of theory or the gains and losses accompanying a shift in one's operative outlook.

Consistent with this conclusion, the somewhat theoretical, somewhat autobiographical remarks that follow are meant not to oppose any particular position but to say we must get beyond all positions. The ironic and sobering thing about my saying all this is that those who disagree with my espousal of this agency view (the view that we need to respond to one another not as theorists but as sisters and brothers) may be more agentive in their real, operative beliefs than I.

2. Sin as a Scientific Concept

After I had been working for some time on the theoretical problems I will describe in a moment, and had begun to think of disturbed feelings as the responsibility of those who have them, I realized that the thoughts I was having were ancient rather than modern. They can be found in Confucian and Buddhist texts, in Sophocles and Plato, in the Gospels and the letters of Paul. The wine I recommend is not simply old, but vintage, and I have had nothing to do with pressing it.

Contemporary versions of this idea are generally not as good as the ancient ones. I'll mention three examples. Some people say that disturbed feelings are not just similar to, but in fact are purposive behaviors--though they are experienced as involuntary. They may be manipulative, protective, or simply communicative. Others say such feelings are not just experienced as involuntary, but are involuntary, yet at the same time are used somehow to accomplish manipulative, protective, or communicative purposes. There is a third group who maintain that disturbed feelings are involuntary products in our affective lives of mistaken beliefs about ourselves and our world.

What I had found about disturbed feelings is different from each of these contemporary views, and yet it
explains why perceptive individuals would formulate such views. It explains why people would appear to be purposive in their feelings, why there is nevertheless a legitimate sense in which these feelings are involuntary, and why there is, as the more cognitively oriented mentalities (like Aaron Beck) suppose, a perfect correlation between feelings and deepest beliefs.

Thus my view—or I should say, the vintage view, for it did not start with me—is a comprehensive one. It unifies these other views of emotional problems, each of which if taken by itself is not only partial but also misleading. For as we shall see presently, if the purposive view were correct, disturbed feelings could not be experienced as involuntary, and if either the involuntary or the cognitive view were correct, these feelings could not have the defensive and resistant qualities that they have. The contemporary versions of the ancient idea consist of alert observations that are as sound as they can be given the general outlook from which they are made. But that outlook is inadequate. The vintage view “reframes” these observations, both preserving them and transforming them so that they are consistent with one another and part of a complete outlook on behavior.

Consider the idea that disturbed feelings are voluntary and purposive, though experienced as involuntary. (Later I will mention the other views in passing.) I am told that if Milton Erickson and other “strategic therapists” hold this idea, their version of it is different from the standard version; therefore I will defer discussion of them until later. What I want to say about the standard version is that contrary to what its advocates intend, it presupposes that our deepest beliefs are both disturbed and not our responsibility—nor purposive at all. To see this, consider the following situation. A certain therapist regards his client, Jane, as manipulating her parents by the angry way she feels. It appears that employing this feeling is, in a certain broad sense, something Jane is doing; the feeling is purposive, a kind of behavior on Jane’s part. But let us try to find out more about this feeling. What has motivated Jane to employ it in order to manipulate her parents? The answer can only be that, apart from her manipulative feeling, Jane has found it necessary or advantageous to manipulate them in order to achieve or protect some interest of hers. In other words, in her eyes her parents have been threatening to that interest. This means that completely apart from her purposive feelings, Jane must have been having some other, deeper, disturbed feelings—feelings of being threatened in some way—for which she could not be responsible. So sooner or later the purposive view leads us to deepest motivations which cannot be voluntary and purposive. Thus the purposive view ultimately undercuts itself. It is but a variation of the view it thinks it is denying, precisely, that we are not responsible for our disturbed feelings.

There is another problem with the purposive view. If disturbed feelings were if fact purposive it would be impossible for us to experience them as involuntary, which we do. For under these conditions the individual who is purposefully doing things by means of his feelings would have to undertake some action of deceiving himself about what he is doing. But if the intrapsychic situation were set up in this way, self-deception could not take place. As Jean-Paul Sartre once wrote, the self-deceiver “would have to know the truth very exactly in order to hide it from himself the more carefully.” He would have to know the truth in order to keep himself from knowing it. And this is impossible. Beginning with Freud, who first wrote about repression and the unconscious nearly a century ago, many ingenious attempts have been made in several fields to construct a model of the psyche in which self-deception would not incur this contradiction and therefore be possible; but as I have shown in my theoretical work* these models have failed. The idea of someone adopting or employing a feeling purposefully and independently deceiving himself about what he is doing is an impossible idea.

For the better part of a decade I sought a solution, knowing that with it would come a view of human beings that is wholly unlike any thing available in the scholarly world. The kind of solution that was required gradually became clear. It would not do at all to think of self-deception as a two-stage act consisting first of perceiving about oneself something threatening or intolerable and then, in a separate act, deceiving oneself about it. There had to be a kind of act the very performance of which would be a self-deception, in that one could not both perform it and understand it. Nor could that misunderstanding be merely accidental; it had to be in the nature of the act that by it the individual systematically deceives himself about it.

Sartre wrote an important book in which he tried to show that every human act whatsoever fits these qualifications, including basic acts of consciousness like perception, desire, belief, etc. Every act whatever, he said, is a striving that we who perform it cannot understand; hence, just to be a human being is, unavoidably, to be self-deceived. Thus Sartre began with the difficult problem of how self-deception is possible but ended by creating the even more difficult problem of how being out of self-deception is possible. What is more, his analysis breaks down at a crucial point. But it is an important analysis and I mention it here because Sartre is the only other writer in this field to realize that self-deception cannot happen unless there is a kind of act that in its very nature is a self-deception, without any further effort on the agent’s part.

After a protracted, systematic analysis marked by many failures, I finally was able to isolate the properties that self-deceiving behavior must have. And then I realized that the only kind of act that possessed all the required properties was what I came to call “self-betrayal,” and what James defines as “sin.””“To him that knoweth to do good, and doeth it not, to him it is sin.” (James 4:17) Sin (in James’ sense) is the act which cannot be performed and understood by one and the same person at the same time. For as I discovered, it is not possible for a person to sin without trying to evade responsibility for doing so (except perhaps in the extraordinary case in which an individual chooses evil.

* A draft of this work is available from the author.
for its own sake). He may feel accusingly toward others or the circumstances—feel he is their victim—and see them as responsible for what he is doing and feeling. Or, he may evade responsibility by blaming something he thinks is uncontrollable in himself—his laziness, unworthiness, etc. In other words, it is not possible for a person to sin and simultaneously to comprehend the significance of what he is doing (again, with the possible exception of the extraordinary sort of case I mentioned). Because of his accusing heart, it is not possible for him to sin and simultaneously to see either himself or others as they are. In short, it is not possible for him to love them purely. He becomes a victim striving to make himself justified in his compromise of himself, and in so doing cannot simultaneously comprehend that this is what he is doing. Indeed, if he “confesses” his sin without a broken heart and contrite spirit the words he uses will not mean to him what they would have meant had he, being repentant, given up his sin.

The agency outlook is not a new piece of information about human behavior, but instead an outlook on the whole of the human character and situation, and this outlook comprehensively takes in all of the alert observations about behavior that various thinkers have emphasized in a manner that transforms each of them in a single coherent totality. This is what a good paradigm or outlook should accomplish.

Let us look at an example of the transforming power of this outlook. It preserves all the observations suggesting that having disturbed feelings is voluntary or purposive, and yet it preserves all of the observations that suggest that having these feelings is involuntary. In the standard paradigm these two kinds of observations don’t fit together, and so some thinkers feel bound to say that the feelings are voluntary or purposive and others feel bound to say that the feelings are involuntary. From the perspective of the agency outlook they are neither voluntary nor involuntary, but possess properties that explain why they appear to be both voluntary and involuntary. Let us see why this is so.

Agentively speaking, the individual sees the world distortedly at the same time and in the same act as he maintains his disturbed feelings about it. The reason for this is that his feelings and his perceptions are identical; they are aspects of a single attitude; the one does not precede the other. Consequently, he is disturbed in his perceptions as well as his feelings. (That is why we would expect cognitive therapists to obtain the results that they do obtain and repeatedly to find confirmation of their views.) There is no space of time or mediation between the individual’s perceptions, imaginations, or memories and his affective response; there is no point at which he deliberates, plans, or decides what feelings he will have. The people whom he seems to indulge or punish, protect or manipulate, are perceived by him as provoking, arousing, or deserving his response. Thus he need not be either cunning or malicious; from his point of view, he is certain that the circumstances are calling forth his reactions and that he is therefore not being false to what he perceives. It would be wrong to say that his feelings are purposive, planned, intentionally adopted, or voluntary, and on the other hand it would be just as wrong to say that they are involuntary—that is caused by external circumstances as he thinks they are. And yet, the observations that have led people to say that they are purposive and voluntary are alert observations and can be preserved, and so are the observations that have led people to say that they are not voluntary. Thus does the agency outlook, which holds that disturbed feelings are the responsibility of the individual who has them, explain why observers are able to gather evidence of an involuntary dimension in those feelings.

This also explains why the disturbed individual cannot realize that he is ultimately responsible. It is because he has access to no other world than his self-deceived one, in which he experiences himself as not responsible, and thus cannot compare the way he sees things to “the correct” way. Even his attempts to “look into his own heart”—to examine his feelings while he is having them—are distortions. Any evidence that otherwise might lead him to realize that his perceptions are distorted is also distorted. With every new experience he reinforces himself in his self-deception. This, I think, is what Jesus called the bondage of sin.

Given this bondage, in which the individual is convinced his disturbed feelings are caused by the circumstances, it is not surprising that, to many observers, human beings appear to be motivated primarily by self-protective and self-seeking needs and instinct—needs that the circumstances can deprive and insticts that the circumstances can arouse. To these observers, the insensitivity, cruelty, and emotional suffering in this world result from the way we are—from our “natures.” Shortage of goods and opportunities means that all cannot be simultaneously satisfied and that those deprived will tend to act aggressively. It means too that others, provoked or aroused, will react aggressively or defensively, and will in this way provoke those who provoked them. Ultimately, the daily human calamity that is life on this earth unfolds simply because that is “the way we are.” This is the explicit opinion of those who say that our disturbed feelings are caused by external circumstances, and, as we have seen, the implied opinion of those who say that our feelings are purposive.

But this widespread “naturalistic” outlook leaves us unable to account for all the observations that have led people to say that disturbed feelings are purposive. It leaves us at a loss to explain the counterexamples to the thesis that human beings are ultimately self-serving mechanisms. The people whose love and forgiveness are uncompromised even by severe deprivation and abuse are ignored by this view. Ignored also is Christ’s doctrine that not only allows for the possibility of unreciprocated and unrewarded love but actually stipulates that each of us ought to have it. Even under the most extreme conditions, He both expects of us and promises to us, peace, love, and forgiveness. Therefore it is not enough to explain the antisocial behavior of human beings; an adequate outlook must also account for their goodness. And this, as I have suggested, cannot be done by any
outlook in which we are not responsible for our feelings, and it cannot be done by any outlook in which we are responsible for them in the sense that we adopt or utilize them to accomplish our purposes.

I can summarize by saying that only the vintage outlook, of which the agency outlook is a diluted form, can do this. It does this by making use of the concept of sin (in James' sense). By means of this concept we can say how it is that people can appear for the most part to be motivated self-seekingly, being in the bondage of sin, and yet be able, by repentance, to live completely free of such motivation. On this view, too, self-seeking dispositions, while patently in play, are not an inherent part of us, but instead are what we or our forebears have set up in us through sin. This is how "the natural man" can be "an enemy to God," but not unchangeably. By obedience we can "(put) off the natural man" and become again, what we once were, "as a child, submissive, meek, humble, patient, full of love"--in short, "a saint through the atonement of Christ the Lord." (Mosiah 3:29) Thus in my quest for understanding I have come to an outlook in which the concept of sin, about as unpalatable as it can be in the world of behavioral science, is indispensable for constructing any theory from which the properties of troubled and even much "mentally ill" behavior can be deduced.

This is not any sort of new discovery. When the solution to the venerable problem of self-deception finally emerged, I and my associates in the Moral Studies Group at BYU reflected frequently on the fact that what we had come to believe was not new. We were well aware that long prior to our project many others had pointed out that observations about the behavior of fallen human beings is to be derived from the concept of sin. My work has consisted in showing how these observations can be thus derived.

If it is supposed that our self-seeking is to be explained by instincts that are permanently part of our personalities, then it must also be supposed that we will be permanently self-seeking and that eternal life will be a matter of perpetual self-control. (Unless, of course, we look upon our bodies as the source of those instincts and therefore long for the day when we can be rid of them: but of course this is doctrinally false.) If on the other hand we think that self-seeking dispositions are purposefully adopted, then we will also tend to believe that they can be summarily abandoned, by ceasing the behavior in which we adopt them. (But this view too is doctrinally false, it makes redemption unnecessary.) Only a view in which the bondage of sin is real and yet not necessarily permanent both allows for the possibility of pure love and makes it contingent upon redemption.

3. "Objectivity" and Faith, Two Outlooks

I did not set out to apply gospel concepts to the solution of problems in the theory of behavior. Instead, I set out to consider such problems on their own terms. And I discovered, as I pushed deeper and deeper into the conceptual puzzles that are widely recognized in the literature, that what was needed to solve those puzzles was not new information or a fresh bit of cleverness, but an entirely new outlook at the center of which is a kind of behavior that is indiscriminable from what James called "sin". Ironically, then, the concept of sin, rejected by many behavioral scientists, turns out to be indispensable for an adequate understanding of the observations that all of them make daily.

The reader can see why I would think of myself as moving toward unification in the human sciences--toward a theory which would bring the disparate hypotheses and data of may different researchers and practitioners into a single, simple, elegant, and comprehensive order--and why at the same time others might suppose that I had crossed into forbidden and highly unscientific territory. I would like briefly to consider this odd situation.

In a strict sense, my use of the concept of self-betrayal or sin violates no scientific canon. It does not introduce any theorist's or scientist's or therapist's personal values or value judgments. It does not say of any individual that he or she is morally right or wrong. The concept of self-betrayal restricts itself altogether to the violation by an individual of his own values, not anyone else's. This concept therefore has neither bias nor subjectivity associated with it. It merely recognizes the fact that human beings often do have values and in their conduct may either conform to these values or violate them. Hence the concept of self-betrayal or sin, so defined, is not "unscientific," and whether it ought to be utilized in the explanation of behavior should, scientifically speaking, be determined solely by whether a theory or outlook of which it is an indispensable part is a better theory than its rivals--whether it is simpler, more predictive, etc. To approach the matter in any other way--to rule out in advance a legitimate potential solution to a scientific problem--is the quintessence of the antiscientific attitude. From this point of view, ironically, behavioral scientists who disallow my position out of hand are acting prejudicially against science. Everyone, even those who think of themselves as the purest of scientists, is eligible to wear the robes of Pope Urban.

Many professionals in the fields of behavioral and social science do sustain this prejudice, refusing to think that the moral and spiritual dimensions of their lives are relevant to the explanation of conduct. (Indeed, they typically think of those dimensions as needing to be explained by more "scientific" factors). These professionals sometimes deal with "objectively identifiable behaviors" presumed to be associated with morality or spirituality, e.g. church activity, philanthropic contributions, assessments made by others on a benevolence scale, etc. There are two problems with this. The first problem may be expressed in the form of a dilemma. Either it is presumed that such behaviors correlate with moral or spiritual qualities or else that they are being studied solely for their own sake. If the latter, then moral or spiritual qualities are avowedly not being studied. If the former, then it must be admitted that it is an extra-scientific enterprise, and a matter of the researcher's own conception of morality or
spirituality (or the conception of others on whom he is relying), to suppose these behaviors represent morality or spirituality. But they may not. Indeed—and this is the second problem—in any given sample, any or all of these behaviors may be self-righteously hypocritical and therefore actually immoral and sophisticatedly lacking in faith. Hence, insofar as behavioral scientists work within the prevailing paradigm, they may acquire information bits about behavior, which they suppose relevant to the moral and spiritual dimensions of life, without comprehending either what these bits may mean or what these dimensions might consist in.

But this is not all of the story. There is, I think, a powerful reason (which is not to say that it is a good reason) why many behavioral scientists would reject the agency outlook without consideration—in other words, a reason why there is an antiscientific prejudice lying at the heart of contemporary behavioral science. I would like to say what I think this reason is. If we consider the notion of self-betrayal on its own terms, rather than try to substitute for it a different, behaviorally defined notion, we feel a moral summons upon our own souls. For the analysis of self-betrayal is an analysis of what happens in conjunction with an individual's violating his own values. It takes effort when working with such a notion to keep from considering how it applies to oneself. In effect, the analysis of self-betrayal says, respond not in the protective guise of a scientist who is considering behaviors from a detached, impersonal perspective, but respond as a human being! It seems to me much harder to avoid considering whether the material applies to one's own predicament when working with agency theory than when working with other theories of motivation. From this I conjecture that the operative principle behind the general refusal to think of moral or spiritual commitments as explanatory of behavior is not, as some may have thought, the sound principle that the scientist should exclude all subjective or biased factors. The principle behind this refusal seems instead to be the extrascientific and dubious principle that any idea from which the scientist cannot keep himself aloof—any idea that requires him to respond as a total human being rather than as a detached "scientist"—is not tolerable. This is a spurious version of the legitimate principle.

If what I am saying is so—even if it is only partly so—then perhaps some of what seems real to many human beings is transformed by the study of it that contemporary behavioral science tends to make. I do not mean that this reality that motivates these people is transformed by science properly so-called, but rather by a prevailing practice of science. Furthermore, if what I have said is even partly so, then this practice of science may not be so much a way of getting at the reality that motivates other people's behavior but instead as way in which the practitioner can protect himself from that reality. And if this is true, the practitioner's private life, including his personal purposes and values, plays a large part in the theory that he adopts. For it is on account of personal and private reasons that he wants to hold himself aloof and keep his science and his private life apart. But the effect is the opposite; the scientific outlook he chooses is biased in favor of his personal, evasive motivation. Insofar as the self-betrayer keeps self-betrayal out of his theory of behavior in order to exclude it as a possible explanation of his own behavior (whether he realizes that this is what he is doing is irrelevant), his personal values and commitments have entered in. It would be difficult to think of a situation more ironic than this, for it is precisely in order to avoid the influence of personal purposes and values that these behavioral scientists say they won't regard the moral and spiritual dimensions of life as fundamental.

I am not suggesting that there is another outlook in which personal purposes and values play no part. On the contrary, I think they always play a part. Whether one operates within the prevailing paradigm or from an agency point of view, impartiality or "objectivity" is impossible. Either way, the theorist, the scientist, and the therapist are required to take a stand on the fundamental issues of their own lives. The transformation of the world that comes about when we give credence to the agency outlook is a transformation of the soul, and so is the opposite transformation that comes about when we give credence to the prevailing "objectivist," paradigm. The way we see the world is what we are, and what we are is the way we see the world. Which ever paradigm one chooses, the way we understand human conduct is part of our lives generally; either it is part of living morally and spiritually, or part of another way of living.

So it is not surprising that individuals who cherish an ideal of pure objectivity in science would want to proscribe all talk of conduct like self-betrayal. In them, the spurious principle is at work; they want to keep aloof. But what they do not realize is that their own theoretical perspective cannot be objective either. Either we reframe and transform morals and religion in a futile quest for objectivity or else we reframe and transform "scientific" observations in a moral quest for rectitude. We can conduct our professional lives in the fiction that they are not part of our lives generally, or we can conduct our professional lives with the intent to live them well.

Lest anyone think that my talk of the transformation of science is preposterous, I want to make two points. We can expect that if a scientific discipline is in theoretical disarray, as the behavioral sciences are, order and coherence will be brought to it only by means of an outlook that will transform even those facts that have seemed most substantial. When a paradigm changes, the facts are also changed; sometimes they are replaced and sometimes their importance is altered. It seems to me virtually certain that our ideas about the relation of physiology to behavior (and perhaps even physiological theory itself), about motivation and morality, about nurture and learning, and about mental health, must all undergo significant revision if order is to be brought to our understanding of human beings. The very possibility of such revision will always meet with resistance, because the data against which it is evaluated have been formulated from the perspective of another, previously held paradigm. So we should expect revision.
and we should expect ourselves to be resistant to it. My second point follows from what I have already said. Ultimately, this revision will not result in the sort of thing we now call a theory. It will produce instead the outlook we acquire when being right relative to each other becomes less important to us than doing right by each other. To this kind of revision, therefore, there will be a different, more trenchant kind of resistance. It is resistance to repentance. It seems to me that if there ever is to be a time when behavioral science passes from its now proverbial and prolonged infancy to maturity by means of a general theory that unites its disparate data and conflicting schools of opinion, it will be because behavioral scientists individually open their minds to the spiritual dimensions of life that their subjects live in but that many of them, in quest of a will-o’-the-wisp objectivity—and perhaps to cover their own sins—have wanted to ignore, reinterpret, or disavow. There will be this transformation in the understanding of men only insofar as there is a transformation of the spiritual outlook we acquire when being right relative to each other. To this kind of revision, therefore, there will be a different, more trenchant kind of resistance.

Outlooks and Therapy

Let us consider some implications of the ground we have covered. Agentively speaking, the client’s operative outlook, including the values in terms of which he sees his world, is not simply the most significant determinant of his behavior; it is his behavior. By espousing this viewpoint I reject the ‘objectivist,’ essentially positivist viewpoint that says the client’s behavior can be understood without reference to his outlook and the values that are part of it.

In the objectivist model it is presumed that any sufficiently trained observer using the right technical language will be able to identify the client’s behavior correctly. Ideally the observer is a kind of scanning machine, applying predicates to behavior according to specified, validated criteria. Thus, the observer’s own operative outlook and values are irrelevant in this model. Such a model, then, in which the values of the subject are held aloof, is also a model in which the values of the observer can be held aloof.

You can see at once that in this objectivist model the behavior of an individual is separated from his mental life. Behavior is public and “objective.” Mental life is private and “subjective.” Faced with the choice whether to refer to subjective factors in explaining behavior, in which case he would not be proceeding scientifically, the objectivist seeks to explain it by other, “objective,” “measurable” factors. What I am anxious to have the reader see is that the subjective status of an individual’s values is created by the objectivist model. If one does not employ that model, these values need not be thought of as subjective.

In the agency outlook, on the other hand, an individual’s behavior is not separate from his perception and evaluation of his world. We cannot hide what we are. Our operative intentions are manifest for all to see who are not caught in their own self-deceptions. Hence, if we can see what another person is doing we will already understand it. And we will see it if we are living true to our own values and not betraying them, so that we are not self-deceived. This means (and we have already discovered this) that in the agency outlook we cannot hold our moral and spiritual lives separate from our professional work, even if we try.

Someone might say, “Surely this is false. A therapist or counselor obviously can withhold his own ideas and feelings from his clinical work by refusing to theorize about behavior altogether, and by concentrating instead on the techniques that ‘work,’ i.e., those that help the client solve his problem.” This pragmatic approach can draw support from the objectivist outlook, for in that outlook a therapist’s own operative outlook and values can be presumed irrelevant, just as they are in the theoretical use of the model that I just mentioned.

But even the meaning of “what works” depends upon the outlook one has. Consider a therapist who thinks “works” means that immediate psychic pain has been relieved. Suppose that he has in mind a client who in fact has so adapted his expectations and behavior to his particular experience of the social reality in which he lives that he is now receiving affirmation and support from it rather than rejection and abuse. He is, as they say, “well-adjusted.” A therapist in this position is systematically blind to the possibility that this accommodation of the client to his surroundings and the temporary hope that it brings, mask a deeper despair—a despair whose toll will not be felt for a long time, and perhaps not fully felt until the next generation. Though I disagree with R. D. Laing’s conception of human beings, his analysis of the politics of the family and the fallacy of “adjustment” throws light on this subject.

From the agency point of view, the right kind of help may be given a client or a friend, but may be rejected by him. The best thing we can do for another person may not result in positive change in his life. This is true of the Lord’s own dealings with people. And what frequently may relieve symptoms may be something the Lord would not do, and it may backfire in six months, twenty years, or a generation down the line.

So a therapist is a theorist after all; his own operative outlook makes a difference even if, adopting the pragmatic posture, he is determined that it will not. The very possibility of the agency outlook implies that the “objective” outlook is not objective, but instead one alternative outlook among others.

In this connection, the few remarks I promised on the so-called strategic therapists are in order. It is not easy to fit these therapists neatly into this discussion. I’m told that generally they disclaim theoretical and diagnostic ambitions and are more concerned with bringing about change. This is in spite of a general agreement among them that people’s problems are social (and especially familial) in nature, and a matter of dysfunctional interactions, (rather than individual and psychopathological) and also an agreement that individuals’ intentions in such dysfunctional interactions are not necessarily malevolent but often protective of others. This puts these strategic therapists in this interesting theoretical position: they can think of disturbed feelings as purposive without presuming that the motives behind these feelings are deeper threatened.
and accusing feelings—in other words, without being forced to the position that disturbed feelings are in fact not purposive at all.

Yet some may say that these generalizations are not meant to be theoretical, but are held simply because it is therapeutically useful to hold them. But I doubt that the principals of the movement would think this way. Historically what they have chosen to discount are psychologies of the individual, not theory as such. I can see no reason why they would be uncongenial to the agency outlook, in which individual problems and social problems are one and the same. In fact, I think it may be the only theory in which the members of a group conspire to produce the problems of each, while each remains responsible for himself. Such a theory avoids the pitfalls to which strategic therapists are rightly sensitive. Perhaps it could give them a means of considering again the individual's role in the interactive social process which seems to have his problem as one of its objectives.

As it is with the strategic therapists, so it is with therapists generally. Whether the therapist endorses a theory of therapy or eschews all such theories, he in fact operates with an attitude—an operative outlook—of his own. This attitude comes across to his clients, no matter how properly methodical he is. And it is to this that the client primarily responds. The attitude or outlook dictates the categories in which the client is perceived and the categories in which the client is encouraged to perceive the therapist. The wholeness and the love of the helper are just about everything that matters; without these, collusion will probably result—collusion that on the client's part may even include disappearance of the presenting problem, but at the cost of new (albeit more "normal") symptoms introduced by the collusion. No one is more committed than I to the proposition that methods are not sufficient, and if used by a disturbed therapist, dangerous. Nor is anyone more committed to the proposition that no particular method is even necessary. Seminars and stories are not necessary, and neither is hearing the client's story (or not hearing it). Neither theorist nor therapist can hold himself aloof. They who think that they can understand their own. This attitude comes across to his clients, no matter how properly methodical he is. And it is to this that the client primarily responds. The attitude or outlook dictates the categories in which the client is perceived and the categories in which the client is encouraged to perceive the therapist. The wholeness and the love of the helper are just about everything that matters; without these, collusion will probably result—collusion that on the client's part may even include disappearance of the presenting problem, but at the cost of new (albeit more "normal") symptoms introduced by the collusion. No one is more committed than I to the proposition that methods are not sufficient, and if used by a disturbed therapist, dangerous. Nor is anyone more committed to the proposition that no particular method is even necessary. Seminars and stories are not necessary, and neither is hearing the client's story (or not hearing it). Neither theorist nor therapist can hold himself aloof. They who think that they can understand their own work poorly.

Let us tie this discussion back to the remarks that have been made about values and religion, which in an agency framework are not subjective and unscientific, but important aspects of the client's experience, the therapist's experience, and their relationship.

"Objectively" it may be believed that regarding people in terms of values and spirituality is condemnatorily judgmental. But agentively we can understand how the helper who possesses pure love can see disturbed souls in terms of the moral categories in which they live without making any kind of condemnatory judgment of them. Indeed, in not colluding with them he has no accusing feelings, no matter what they may be trying to do to him. In his eyes, they are hurting themselves, not him, and this means that he sees them compassionately.

I do not see how anyone who in his heart denies this possibility—the possibility that approaching life in moral terms is compatible with never condemning anyone—can understand Jesus. He came, as He said, not to condemn the world but to save it: yet for Him the fundamental categories of experience were Good and Evil. It is He whom we must emulate. The reports I have encountered of those who have stood unresistingly in His presence have spoken above all of the cleansing, healing, and unspeakably sublime love that they felt from Him. When finally we know the truth, I think, we will understand how intimate is the connection between righteousness and all absence of condemnatory feelings. Only the unrighteous hold unrighteous judgments in their hearts. This conception of moral categories and judgment is exactly contrary to the prevailing beliefs that are part of the prevailing, objectivist paradigm. Here we have yet another example of how everything changes when one's outlook changes.

In connection with this, it is often supposed that we can measure therapeutic outcome. But perhaps the best "therapies"—those that help the honest individual go the farthest—do not help everyone and would not look impressive on an outcome test. We have had professional evaluators monitor the seminars of which I have spoken, and they've arrived at very encouraging conclusions. We might be tempted to publicize these conclusions. But we have chosen not to do this generally, because these results are beside the point—and they encourage the audience to miss the point. For we want each individual to consider the ideas on their own merit, since the only real evidence we can have of the truth of things pertaining to spirituality is its effect within our own hearts when we are being completely true to ourselves.

This individual confrontation with the truth by each person, lay or professional, is vital for yet another reason. Even those good people in the helping services, if they do not have a gospel understanding, run the risk of not appreciating and acknowledging the real source of their success, which is the ever-available Spirit of Truth. And not understanding this, they will sooner or later make a false move, misleading those who are trusting them. "In nothing doth man offend God, and is against none is his wrath kindled, save he who doth not recognize his hand in all things." In short, lacking the appropriate operative outlook a person will inevitably transform and despiritualize morality and religion, and then think he is on good ground when he does not turn in that direction for answers to human problems—when the position he is taking prevents him in advance from understanding the source upon which he has unknowingly relied.

It is curious that professionals rarely find in the gospel its profound relevance to psychological problems. Sooner or later someone has got to exclaim: It is not because reality is divided into compartments that they do not find this relevance, or because the spirit and the psyche operate independently. It is instead because the prevailing vision of these things is defective. The traditions by which fallen men have come to explain their own behavior have served us poorly. What can be our motivation for clinging to them? I say there is a
power in the truth, spiritually understood, a power of both outlook and influence. Beside this the present theories and helping disciplines are pale.

When we enter into another person’s life with aspirations to help, we tread upon holy ground. Joseph Smith wrote, “None but fools will trifle with the souls of men.” (Teachings of the Prophet Joseph Smith, p. 137) With such aspirations it behooves us never to accept uncritically what we have been taught or to be content with the understanding we have when our own are anxious and unsure. Our own souls are on the line with every soul we counsel. I cannot conceive of anything more important in this enterprise than that our understanding, feelings, and intentions be unselfdeceived and pure.

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made love the heart of his gospel and it is a human being's greatest need. Creative self-expression is free agency in action. And I know no one who had as great a feeling of the worth of the individual as did Jesus of Nazareth. Our religion—-if we only knew how to express it and help others to internalize it—is a great resource in our efforts to build lives.

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We place some atrocious burdens on a family or community by refusing hospitalization of the “identified patient.”

A Conspiratorial Model has been developed by the “anti-psychiatry psychiatrists,” such as Szasz, who writes such books as “The Myth of Mental Illness.” In essence, they say that there is no such thing as mental illness; we lock up people whose political or social ideas are offensive to our present systems. Seymour Kety’s observation pleases me: ‘Well, if mental illness is a myth, it is a myth with a high genetic component.’

We have been aware of the use of psychiatry to suppress political dissent in Eastern European and South American countries. The Russians label political dissent as “Soft Schizophrenia.”

But we must be scrupulously honest ourselves. Remember what the Nixon administration tried to do to silence Martha Mitchell, and the “moral crusades” of our present administration. From a New York Times editorial: “But what kind of crusade is it to condemn sick persons if Jesus had anything to say about such matters. Since many of the conflicts are sexual, I often remind the person of the story of the woman being stoned for adultery. (I always thought the travelling salesman, not the woman, should have been stoned, but that was not the way it was done in a male-dominated society in those days.) Jesus first told those who were without sin to cast the first stone. And no more stones were cast. Doesn’t that tell us that no one is perfect? And then Jesus said, in effect, “Go your way, but don’t do it any more.” Isn’t that a milestone, a beacon light in moral history?

I often ask, “Did you learn anything by what you did? Isn’t our purpose on earth to learn, even by mistakes.” Perhaps the sin is less if we learn something by it, greater if we don’t.

To Elder Neal Maxwell, I am indebted for the wise and gentle admonition, “Our yesterday should not be permitted to hold our tomorrows in hostage.” I have some hopes still, even as I grow older and know less but suspect more. I hope we will continue to grow and learn. I hope the number of Procrustean beds will diminish. I hope for increasing cooperation within our various helping disciplines, and that we will remember Wapole’s request for good faith, good sense, good manners, good humor.

And, from the thirteenth Article of Faith, “If there is
anything virtuous, lovely, or of good report or praiseworthy, we seek after these things.”

mixing of the two areas often leads to confusion and bewilderment for both client and therapist.

Another hazard for us is to substitute one method for the other because we are more comfortable with it. Prayer is a powerful motivator, analgesic, spiritual booster, and many other things, but as a substitute for communication training when a distressed couple cannot talk together seems like adherence to the notion that faith without works is alive and well and a suitable approach to salvation. The alternative error would be to go on an archeological expedition into the person’s psyche when his first step to improvement might well be to start doing something in religious participation.

We should, I think, continue our search for partial and full truths about the human condition and how it can be improved, but I think we have identified many truths from scriptures, experience, research, shared knowledge and skills. We should reach for productive synthesis of what we do know and greater knowledge and understanding in areas we don’t know. We are ready, I think, to set new bases or foundations from which to move forward with new and better understandings on how we can provide better service to our fellowmen.

You are now privy to many significant concerns which have and still do challenge me as ongoing issues to which we as professionals must continue to address ourselves. I have tried to simply identify a few areas of partial ignorance and partial truth and my hope is that we can expand the truth dimension and lessen the ignorance area as we pursue our quest for the Holy Grail of therapy sufficiency.

not intended to become sophisticated humanoid robots, programmed by God to do His bidding, without individual volition. However, while some of us might wish to proclaim, “I am the Captain of my soul,” we would, by so doing, fail to comprehend, as Elder Maxwell states, that “‘corporal of my soul’ would be at least somewhat closer to the truth.” (1979, p. 25)

We may seek to take over, usually in ignorance, and try to assume total control of our own destiny, when we would be better off to relinquish at least partial control to an infinitely wiser Father, who knows just what we need, and how much of it, for our optimum growth. We can benefit greatly by following the wise counsel of Solomon: “Trust in the Lord with all thine heart; and lean not unto thine own understanding.” (Proverbs 3:5, 6)

Nothing will come into our lives, except it can become a growth experience, and often, even a blessing. Even our sins, when properly repented of, and learned from, can be useful as a stimulus for improvement and avoidance of further transgression: “And we know that all things work together for good to them that love God;” (Romans 8:28) and, “all these things shall give thee experience, and shall be for thy good.” (D&C 122:7)

Adversity loses much of its horror if we know God is real, in charge, that he loves us, and if we trust him!

SUMMARY THOUGHTS

As we are able to develop our “eternal perspective” we gradually see more and more of the value and purpose in the tribulations we experience:

Referring to the imprisonment and other terrible injustices suffered by Joseph Smith, President Brigham Young said that the Prophet progressed toward perfection more in thirty-eight
years because of the severe tribulation through which he successfully passed than he would have been able to do in a thousand years without it. (Church Education System, 1981, p. 296)

If we now return to the metaphor comparing our journey through mortality to the long and difficult climb up a mountain with successive ravines and peaks, we can discover significant meaning in the words of Elder Bruce R. McConkie (1980): “As we view the endless course ahead, the glory and wonder on each succeeding peak seems to swallow up the shadows and sorrows of the valleys below.” (p. 73)

We can reduce our “mountains” into “molehills” by comprehending the part these mountains play in our eventual happiness:

Could I be Truly Happy?

Could I be truly happy
If all my problems went away?
If I never had to worry,
And I didn’t need to pray?

Could I be truly happy
If everything turned out right?
If all men loved everyone
And there never was a fight?

Could I be truly happy
If I slept the whole day long?
If I never did do anything,
And nothing ever went wrong?

No, I could never be truly happy
If I never had to choose;
If I never had to struggle,
And I never had to lose.

If I would be truly happy,
The only way for me
Is to have the trials needed
To set my spirit free.

(Dori Witbeck, unpublished work, 1981, used by permission.)

In conclusion, we can gain inspiration from the life and example of President Spencer W. Kimball, who has faithfully endured more than his “share” (it would seem) of life’s problems. Despite the number and severity of his trials, he does not dwell on the past, but with a view to the future, he is able to say:

There are great challenges ahead of us, giant opportunities to be met. I welcome that exciting prospect and feel to say to the Lord, humbly, “Give me this mountain. Give me these challenges.” (Kimball, 1979, p. 79)

REFERENCES

Kimball, Spencer W. “Give me this mountain.” Ensign, November 1979, pp. 78-79.


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