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It is nice to note that while Brother Parker and I disagree on many issues, we do appear to agree that it would be inappropriate for AMCAP or any other organization to devise a “canned” dialogue to be used by LDS therapists in rendering counsel. In recent years, the Church has appeared to come to a similar conclusion in the publication of Missionary Discussions. While the Church continues to be totally committed to maintaining the integrity and accuracy of the message, it has recognized that the divergent needs and circumstances of the “investigator” together with the divergent personalities, gifts, and skills of the “presenters” call for versatility, flexibility, and adaptability. Therefore, missionaries today have been granted, what Brother Parker might call “greater artistic license,” and may be considered, in this limited sense, to apply different “therapies.” But regardless of the order of discussions presented, scriptures quoted, questions asked and addressed, ultimately a remission of sins, Church membership, and the Gift of the Holy Ghost can only be obtained by baptism followed by the laying on of hands by those in authority. In this sense there is only “one true therapy.”

Similarly, while skillful architects do not use the same blueprint for all buildings, they do use the same set of sound architectural fundamentals in creating unique edifices which address divergent needs, materials and environments. Of course, some architects do build flawed edifices due to a failure either to understand or stay true to sound architectural fundamentals. So it is with us.

Brother Parker and I, however, strongly disagree on the central point of this debate, namely the appropriateness of a search for gospel-based theories and intervention strategies. In his rejoinder Brother Parker indicates that the first three points made in his
October address in support of his central argument are “not crucial to it,” and he presents a new line of reasoning in the closing paragraphs of his rejoinder. I would suggest that this new line of reasoning is fallacious and extreme, and I hope that it falls outside of the mainstream of thinking of AMCAP members.

I am perplexed, for example, that Brother Parker would state in adjacent sentences, “I have no objection to persons seeking consistency between their religious convictions and their behavior as therapists,” and “... for me such a pursuit [of gospel-based therapy] is erroneous to start with, misleading to many, and, to some, ultimately destructive.” These two statements appear inconsistent, if not contradictory.

Why does our President believe such a pursuit is erroneous, misleading and destructive? He explains:

1. Some patients perceive religion as a magical solution.
2. To provide therapy which purports to be gospel-based may seduce these individuals, who are prone to seek magical religious solutions, into abandoning the hard work required to achieve recovery.
3. Therapists often become disciples of a particular theoretical school because they, too, are looking for “magical therapies.”
4. Therapists who believe in an organized set of principles (theoretical school) often become mere followers and may challenge the credentials, motives or expertise of others not sharing the same views.

These arguments deserve close scrutiny. It is true that many patients seek to magically escape their pain via “short cuts” and “quick fixes.” This will always be true whether a therapist points to scientific research, a particular theoretical framework, personal experience, revealed truth, or personal charisma to support, legitimize, or market his services. I believe this issue is a “red herring” in the current debate. For regardless of the source we have chosen for our beliefs and intervention strategies, most of us strive to give our clients what we believe they need rather than capitalizing upon their vulnerabilities by satisfying their craving for “magical solutions” with offerings of snake oil.

Certainly no LDS practitioner who understands gospel principles such as agency, honesty, stewardship, faith, obedience, sacrifice, repentance, forgiveness, sanctification, consecration, fasting, prayer, scripture study, . . . would view them as either seductive means of
avoiding hard work or as “magical solutions.” Furthermore, in striving to discover and master the use of gospel-based theories and intervention strategies, we do not become followers or mere disciples of Rogers, Skinner, Parker, or Westover. We strive to be followers and disciples of Jesus Christ. It is precisely this focus of our “followership” that sets us apart from other professional organizations. As followers, we seek to increasingly approximate His standard of truth, and as members of AMCAP, we share with each other our best efforts to draw from gospel truths in the work we do. In this way we learn from each other. In this way we refine our understanding and skills.

There is always the danger that when individuals of divergent opinions express their views while attempting to persuade others, that some may become inappropriately hostile, vindictive and even slanderous in their efforts to influence the thinking of others. This unfortunate reality has never prevented thinking men and women from searching for the truth. Inasmuch as we believe: (1) That all truth is subsumed into one great whole; (2) That the gospel of Jesus Christ is true; and, (3) That the central purpose of gospel principles is to enable the transformation of individuals into eternal beings (who we assume enjoy excellent mental health), it is difficult, to say the least, to understand how the pursuit of gospel-centered theories and intervention strategies would be erroneous, misleading, and destructive.

The debate is not merely an interesting discussion between two opinionated, stubborn members of AMCAP regarding a peripheral philosophical issue. This debate examines the very identity and purposes of AMCAP as an organization. It is my hope that most members of AMCAP will choose to participate in the resolution of this controversy by making known the values and purposes which they wish to guide their organization.

_Clyde A. Parker, Past President of AMCAP, is with the Center for Counseling, Institute of Behavioral Medicine, Ogden, Utah_

_L. Alan Westover, is a practitioner with the Oregon Salem Agency of the LDS Social Services._