



Issues in Religion and Psychotherapy

Journal of the Association
of Mormon Counselors
& Psychotherapists

2008
VOLUME 32

EDITOR

Rachel E. Crook Lyon, PhD
Brigham Young University

ASSOCIATE EDITOR

John M. Rector, PhD
Brigham Young University–Idaho

Lane Fischer, PhD
Brigham Young University

CONSULTING EDITOR

Sharon J. Black, MA
Brigham Young University

EDITORIAL BOARD

Victor B. Cline, PhD <i>Salt Lake City, Utah</i>	S. Brent Scharman, PhD <i>LDS Family Services</i>
Susan L. Ericksen, RN, MS, LMFT <i>Utah State University</i>	Russ Seigenberg, PhD <i>Logan, Utah</i>
Melissa K. Goates Jones, PhD <i>Brigham Young University</i>	Thomas D. Sevy, MSW <i>Taylorsville, Utah</i>
Michael D. Howard, EdD <i>Jacksonville, North Carolina</i>	Marilyn J. Simpson, PsyD <i>Pepperdine University</i>
Ronald W. Jacques, EdD <i>Brigham Young University–Idaho</i>	Timothy B. Smith, PhD <i>Brigham Young University</i>
Ian S. Kellems, PhD <i>West Virginia University</i>	Esben S. Strodl, PhD <i>Queensland University of Technology</i>
P. Scott Richards, PhD <i>Brigham Young University</i>	Wendy Ulrich, PhD <i>Alpine, Utah</i>

ASSISTANT TO THE EDITOR

Candilyn Newell, BA
Brigham Young University

Issues in Religion and Psychotherapy is published biannually by the Association of Mormon Counselors and Psychotherapists and is archived at <http://www.amcap.net>. Subscription prices are \$35.00 per year for members (paid as part of Association dues). Single issues are available for \$20.00. Subscriptions and changes of address should be sent to: AMCAP, AMCAP P.O. Box 225 Kaysville, UT 84037 or email mail@amcap.net. Periodical postage paid at Salt Lake City, Utah, and additional entries.

Contributors need not be members of the Association of Mormon Counselors and Psychotherapists. All manuscripts, books for review, and other editorial matter should be sent to: Rachel E. Crook Lyon, PhD, Editor, AMCAP_JOURNAL@byu.edu, 340 Q MCKB, Brigham Young University, Provo UT 84602. Manuscripts should be submitted in accordance with the Instructions for Contributors in this Journal.

Printed by the Brigham Young University Press, Provo, Utah. Copyright © 2008 by AMCAP. Graphic design by Kelly Dyches.

TABLE OF CONTENTS

ARTICLES AND ESSAYS

- Explaining Religion to Death:
Reductionism, Evolution, and the Psychology of Religion
Edwin E. Gantt and Richard N. Williams3
- Doctoral Education among LDS Mothers:
A Phenomenological Study of Making the Decision
While Considering Church Counsel
Jonathan Glade Hall14
- Perceptions of Jesus Christ's Atonement Among Latter-day Saint Women
with Eating Disorders and Perfectionism
*Shawn Edgington, P. Scott Richards, Martin J. Erickson,
Aaron P. Jackson, and Randy K. Hardman*25
- Meditation, Christian Values and Psychotherapy
Kristin Hansen, Dianne Nielsen, and Mitchell Harris41
- Relationships Among Literacy, Church Activity
and Intrinsic/ Extrinsic Religiosity in a Utah Sample of Latter-day Saints
Bruce Brewer, Lane Fischer, Dennis Wright, Guy Dorius, and Richard Cluff52

The full searchable electronic archive of the Journal is available at this address:
<http://www.amcap.net>

Explaining Religion to Death: Reductionism, Evolution, and the Psychology of Religion

EDWIN E. GANTT AND RICHARD N. WILLIAMS

Recent thinking suggests that the time is right for a reconsideration of the interface between psychology and religion. We argue that most accounts of religion in contemporary psychology (especially as typified by evolutionary theory) have been toxic to the phenomena of religious experience. This toxicity results from the adoption of a naturalistic explanatory framework that renders religious phenomena as merely results of mechanical forces and material conditions. This approach fails to take religious phenomena seriously and, thereby, dismisses their meaningfulness before any serious investigation has begun. We argue that only by taking religious experience seriously--that is by treating religious phenomena on their own terms as fundamentally meaningful expressions of human experience--can a fruitful scientific psychology of religion be possible. We propose the phenomenology of Emmanuel Levinas as a viable perspective from within which to develop such a psychology of religion.

Even the most cursory review of the history of the psychology of religion reveals that there has never been a shortage of perspectives in psychology from which to render an account of religious phenomena and of religion itself (see, e.g., Forsyth, 2003). However, the great majority of such accounts—for example, accounts found in psychoanalysis, behaviorism, neuroscience, and evolutionary psychology—have been fundamentally toxic to religion itself. This toxicity is, we believe, the inescapable result of various theories and methods of psychology that are grounded firmly in a philosophy of naturalism, a philosophy that is incapable of allowing any phenomenon (religious or otherwise) to be other than the merely natural outcome of non-agentic forces and material conditions (Slife & Whoolery, 2006). We say this not from the perspective of religious persons who want to defend religion qua religion (although we

freely admit that we are such persons and that we do want to defend it), but rather as psychological scientists. As such, it is our firm belief that any science, although its essential business is critical analysis, should not announce the “nonexistence” of its subject matter until after careful analysis and experimentation have shown, to the satisfaction of sophisticated and open-minded scholars, that there really is nothing to the phenomena being studied.

In the field of psychology of religion, however, we fear that far too many scholars have simply begun their investigations of religious experience and behavior

Correspondence regarding this article should be addressed to Edwin E. Gantt, Ph.D., Department of Psychology, Brigham Young University, Provo, UT 84602; email <ed_gantt@byu.edu>

with an unexamined intellectual commitment to a philosophy of naturalism that is incompatible with, and too conceptually narrow to afford an understanding of religion, and have then explained religion, literally, to death. This, of course, is not a problem unique to the psychology of religion, reflecting as it does the more general reductive strategy that has characterized the discipline of psychology since its inception (see Slife & Williams, 1995). Given this general commitment to reductionism, it comes as no surprise that behaviorists have sought to explain religion as reinforcement history gone wrong, psychoanalysis as a superego on guard, neuroscience as the result of brain activity, humanism as a means of satisfying personal needs, cognitivism as primal thinking in the face of anxiety, and evolutionary psychology as a strange sort of counterintuitive survival tactic (for a more detailed treatment, see Browning & Cooper, 2004; Forsyth, 2003; Wulff, 1997). Despite their theoretical and practical differences, all of these approaches nonetheless share a common commitment to explaining religion and religious phenomena *as experienced* out of existence.

Psychology's explanatory tactic of reducing religious phenomena to categories of nonreligious phenomena has two origins. The first is a general disciplinary failure to carefully explore in self-critical ways the presumptive philosophical grounds of the psychological theories typically deployed to explain religion. The second is the related failure to intellectually tackle religious phenomena from a conceptual grounding that is both fundamental enough and rich enough to offer an adequate or "thick" account of religious phenomena in the first place (Geertz, 2000). Thus reductions of religious phenomena, by means of which such phenomena are dismissed as epiphenomenal if not illusory, are, in the final analysis, questions begging: that is to say, religious phenomena are judged by the dominant theories to be unreal primarily because they do not fit the metaphysical categories native to the theories themselves. We believe as a discipline that aspires to scientific status, psychology can and must do better than this. For, as Rolston (1999) reminds us about the nature and aims of scientific inquiry generally, "We often forget how everyday experience can demand certain things of the sciences. Science must save the phenomena . . . [and if a scientific theory cannot] . . . so much the worse for that theory" (p. xv).

Similarly, as sociologist of religion Douglas Porpora (2006) has recently pointed out:

In any proper experience, the object of experience contributes something to the content of experience. The object, in other words, is part of what explains the content. Yet if objects of experience—whether in religion or science—are methodologically bracketed out of consideration, they are disallowed a priori from doing any explanatory work. The unavoidable implication is that there are no genuine experiences of anything so that the very category of experience dissolves. (pp. 58-59)

In agreement, we would argue that only by taking religion and religious experience seriously—that is, by treating the phenomena of religious life on their own terms as fundamentally meaningful expressions of human social and moral experience—will a fruitful scientific psychology of religion emerge. To adequately understand the behavior of people, in this case religious behavior, we believe that psychologists must understand their experiences. "Minimally," as Porpora (2006) notes, "that means not to rule out *tout court* what people say they are experiencing" (p.59). Thus we propose here that the field needs to find a metaphysical ground upon which both psychology and religion can be taken seriously and investigated without dismissive reductions when the categories do not fit well. We propose that the phenomenological work of Emmanuel Levinas provides just such a metaphysical grounding and thereby offers the real possibility—one that will need to be thoughtfully investigated—of a real psychology of religion.

THE INTERFACE OF PSYCHOLOGY AND RELIGION

In examining the question of how and where psychology and religion meet, Parsons and Jonte-Pace (2001, p.1) refer to the *and/or debate* as one of the defining features of the field of psychology of religion from its earliest years. The term aptly reflects the central question of whether the two disciplines can ever be integrated in such a way that the psychological does not simply replace the religious, or whether the two fields (at best) just come together briefly in the context of pursuing answers to more particular and limited

questions. These same authors (Parsons & Jonte-Pace, 2001, p. 2) ultimately adopt the term “religion and psychological studies” to characterize the field in its current form with its current *modus operandi*. They also observe that in the early stages of the psychology of religion religion was regarded principally in terms of “a series of cultural phenomena” so that the field was focused on the “analysis of the psychological meanings, origins, and patterns in religious ideation and practice” (Parsons & Jonte-Pace, 2001, p. 2). Thus religious behavior became the subject of study and psychology became the method.

In a very significant article in *American Psychologist*, Stanton L. Jones (1994) argues that the dialogue between psychology and religion has in fact been a monologue conducted in “one of three classic modalities,” each of which is unidirectional and leaves “psychology being unaffected in any substantive way by the interaction” (p. 184). Thus whether establishing a psychology of religion to study religious experience scientifically, co-opting psychological concepts and mental health resources for pastoral counseling or religious education, or employing the findings of psychological research to critique or modify religious concepts and practices, “religion is treated as an object, either of study, for education and provision of services, or for reform” (Jones, 1994, p. 185). In none of these forms of interaction, however, is religion considered to be a peer discipline or an equitable partner with psychology. Clearly, as Browning and Cooper (2004) point out, the underlying assumption is “that while religion has very little to offer psychology, religion can serve as an interesting object of psychological study” (p. 246).

Shedding some historical light on this state of affairs, Wulff (2001) has shown that the psychology of religion emerged during a period marked by the secularization of religion and by the application of psychological methods to the understanding of many human phenomena not previously studied or explained in scientific (i.e., naturalistic) terms. Wulff (1997) also makes it clear that “the psychological science that evolved in twentieth-century America was strongly influenced by positivistic philosophy, according to which most if not all religious statements are philosophically meaningless,” and thus it is “comprehensible why many students, teachers, and practitioners of psychology view religious faith as an outdated and perhaps regrettable phenomenon” (p. 17).

EVOLUTIONARY THEORY AND THE CONTEMPORARY INTERFACE OF PSYCHOLOGY AND RELIGION

Perhaps nowhere do we see more clearly the dismissal of the lived reality of the religious in the context of an apparent conflict between experiential and explanatory categories than in the emerging field of evolutionary psychology. This theoretical approach has become so popular that we will here devote substantial attention to current evolutionary explanations of religion and religious behavior. This treatment will illustrate the long-standing tension between psychology and religion and put in bold relief the contrast between contemporary naturalistic, reductionistic approaches to the psychology of religion and an approach we find much more promising—one informed by the phenomenology of Emmanuel Levinas.

The past two decades have witnessed an explosion of scholarly interest in and publications about evolutionary psychology (see, e.g., Buss, 1999; Cartwright, 2000; Palmer & Palmer, 2001; Pinker, 2002; Stanovich, 2005). Chapters on evolutionary psychological theory have become a prominent feature of many recent texts (see, e.g., Gaulin & McBurney, 2001; Westin, 2002). Many of its advocates have argued that evolutionary theory is not just a model for explaining certain specific features of human behavior, but rather represents “a new paradigm for psychological science” (Buss, 1995, p. 1)—one that “provides the conceptual tools for emerging from the fragmented state of current psychological science and linking psychology with the rest of the life sciences in a move toward larger scientific integration” (Buss, 1999, p. 411). Such claims have led some critics to suggest that evolutionary theory is, in essence, a “theory of everything” and that “sociobiology and evolutionary psychology are but the latest efforts to develop a unifying theory that will explain the meaning of ‘life itself’” (Nelkin, 2000, p. 19).

Given such lofty aspirations, it is not surprising that among the areas of human experience that evolutionary psychologists have been most interested in exploring are religion and religious experience, especially in terms of their origins (see, e.g., Atran, 2002; Boyer, 2001; Dennett, 2006; Wilson, 2002). Religious experience and expression are, for the evolutionary psychologist, not fundamentally unlike any other chance adaptive

behavior in which human beings might engage for purposes of survival and reproductive opportunity. Indeed, as reflected in the title of his most recent book, Rue (2005) argues that *Religion Is Not About God*, but rather “is about manipulating our brains so that we might think, feel, and act in ways that are good for us, both individually and collectively” (p. 1). The basic assumption behind such theorizing, noted by Pearcey (2004) is:

Religion is merely an idea that appears in the human mind when the nervous system has evolved to a certain level of complexity. That is, a brain complex enough to imagine hidden predators, like saber-toothed tigers hiding in the bushes, may also malfunction by imagining unseen agents that are not real, like gods and spirits. (p. 55)

For example, according to some evolutionary psychologists, religious belief in supernatural agents (i.e., gods, angels, spirits, etc.) initially arose because “some inference systems in the mind are specialized in the detection of apparent animacy and agency in objects around us” (Boyer, 2001, p. 144). Barrett (2000), for example, has argued that the human mind has been programmed by natural selection to infer the presence of intentional agents from among the events of the surrounding environment. Presumably, in our early evolutionary history it was vitally important for the day-to-day survival of our ancestors that they be able to quickly detect both danger and promise in the sounds and movements of the objects around them because such sounds and movements might well signal the presence of either predator or prey. However, according to Boyer (2001), this innate “agency detection system” is naturally “biased toward overdetection” and thus tends to “jump to conclusions” (p. 145), causing us to infer the presence of intentional agents in certain events in the world when, in fact, no such intentional agents are present. Possessing an agent detection system that is biased toward overdetection presumably conveys an evolutionary advantage:

The expense of false positives (seeing agents where there are none) is minimal, if we can abandon these misguided intuitions quickly. In contrast, the cost of not detecting agents when they are actually around (either predator or prey) could be very high. (Boyer, 2001, p. 145).

Religion, then, is the result of not abandoning our “misguided intuitions quickly,” but rather allowing them to fester into full-grown superstitions and irrational ritual practices, whereby we attribute supernatural origins or theological meaning to what are in reality merely happenstance occurrences in the natural world. In short, according to such an evolutionary psychological perspective, religion is by its very nature an irrational obsession with false positives.

In this vein, Boyer (2001) argues that the light of evolutionary theory has now shown us “how the intractable mystery that was religion is now just another set of difficult but manageable problems” (p. 2). The manageable problems to which Boyer refers are the problems of how something that seems fundamentally irrational and counter-productive (i.e., religion) could, despite considerable evolutionary costs, not only survive through the centuries but even flourish. Given the “substantial costs of religion’s material, emotional, and cognitive commitments to factually impossible, counterintuitive worlds,” explaining religion is a “serious problem for any evolutionary account of human thought and society” (Atran, 2006, pp. 302-303).

Despite its ultimate origins in biological necessity and evolutionary happenstance, and despite various claims regarding the possible existence of a “God gene” or a neurological basis for religious belief (see, e.g., Hamer, 2004), evolutionary psychologists are quick to point out that now “religions are transmitted culturally, through language and symbolism, not through genes” (Dennett, 2006, p. 24). What matters to the evolutionary psychologist of religion, therefore, is not so much knowing whether there might be a “god center” in the brain, but rather “Why did those of our ancestors who had a genetic tendency to grow a god center survive better than rivals who did not?” (Dawkins, 2004, p. 14).

MEMES NOT GENES

Currently, the most popular answer to that question for advocates of an evolutionary psychology of religion is to be found in the study of memetics, an approach to the question of the evolutionary origins of cultural and social phenomena “that invokes not just biochemical facts but the whole world of cultural anthropology” (Dennett, 2006, p. 140). Memetics, as a conceptual approach, posits the existence and studies the replication, spread

and evolution of “memes”—a sort of mental or cultural analogue to genes. A meme is a cognitive or behavioral pattern that is thought to be transmitted from one individual to another. However, since individuals who have transmitted the meme continue to carry it themselves, the transmission is in reality more along the lines of a replication. As Pearcey (2004) notes, “Just as genes are the carriers of physical traits, so memes are hypothetical units of culture that are said to be carriers of ideas” (p. 61).

Oxford zoologist Richard Dawkins, who coined the term in his 1976 book *The Selfish Gene*, suggested:

Examples of memes are tunes, ideas, catch-phrases, clothes fashions, ways of making pots or of building arches. Just as genes propagate themselves in the gene pool by leaping from body to body via sperms or eggs, so memes propagate themselves in the meme pool by leaping from brain to brain via a process which, in the broad sense, can be called imitation. (p. 192)

Religion is memetic: Whatever the particular biological and environmental origins of religion happen to be, it has managed to attain a significant level of penetrance and perdurance in the cultural environment that has allowed its continued survival as a stable social practice (Blackmore, 1999). And as Dawkins (1976) has argued:

The survival value of the god meme in the meme pool results from its great psychological appeal. It suggests that injustices in this world may be rectified in the next. The “everlasting arms” hold out a cushion against our own inadequacies which, like a doctor’s placebo, is none the less effective for being imaginary. These are some of the reasons why the idea of God is copied so readily by successive generations of individual brains. God exists, if only in the form of a meme with high survival value, or infective power, in the environment provided by human culture. (p. 193)

On this model then, religion originates in some set of naturally selected genetic tendencies to behave in particular ways—which, in turn, provide for a cultural context within which certain sets of genes can further propagate themselves and are propagated by the transmission of memes in a process analogous to genetic

transmission (Blackmore, 1999). The utility of religion, then, is that it serves “as a structure supporting and mechanism promoting moral codes” that, in turn, help to stabilize society so as to better ensure individual and group survival (Broom, 2003). Religious talk of meaningful experience, truth, or the transcendent and ineffable is really just so much talk, spurred on by nothing more than simple genetic necessity packaged as memes.

The sort of biological and mechanical reductionism being advocated here by so many evolutionary psychologists has, however, been subjected to considerable criticism by thinkers both in and out of the discipline (see, e.g., Gantt & Reber, 1999; Johnson, 1995; Menuge, 2004; O’Hear, 1997; Poulshock, 2001; Rose & Rose, 2000; Williams, 1996). Because this critical literature is so vast and so varied, we will not attempt to recount it all here. Rather, we will simply note that the main thrust of these critiques has been that the biological reductionism and necessary determinism inherent in evolutionary explanations do not so much explain religion as explain it away. That is to say, because evolutionary theories in psychology tend to reduce all human social behaviors to nothing more than the necessitated byproducts of impersonal natural forces acting on the brute physical matter of the brain and body, they ultimately destroy the possibility that such behaviors (religious or otherwise) can be social or meaningful in any genuinely substantive way (see, e.g., Gantt, 2002; Slife & Williams, 1995). For although individuals may well experience their religious lives as personally vital, morally significant, and intensely real, once the evolutionary psychological story is in place, religious experience can only be seen as the merely subjective impression one happens to be left with in the wake of essentially impersonal, a-meaningful, and non-social biomechanical processes operating in the service of entirely contingent genetic ends. The meaning of religious experience of any kind, then, is just an illusion—useful in some evolutionary way perhaps but nonetheless an illusion. Thus once the inescapable Darwinian conclusions have been drawn, religion can be seen to be really just the necessitated “by-product of several cognitive and emotional mechanisms that evolved under natural selection for mundane adaptive tasks” (Atran, 2006, p. 302). This is not to say religion is “an evolutionary adaptation per se, but a recurring cultural by-product of the complex evolutionary

landscape that sets cognitive, emotional, and material conditions for ordinary human interactions" (Atran, 2006, p. 304). Despite the ardent and deeply held beliefs of its practitioners and defenders, in the final evolutionary psychological analysis, religion is really nothing more than a complex set of irrational myths and bizarre rituals that processes of natural selection have curiously produced in us so that we can cope with the fundamentally arbitrary and meaningless nature of existence as we get on with the vital business of reproduction.

PSYCHOLOGY AND RELIGION

The foregoing discussion of evolutionary psychological approaches to religion brings clearly into focus the context in which Wulff (2003) offers a description of the field of psychology of religion as being in crisis and calls for a return to an older tradition which sought to get at the meaning of religious experience (see also Belzen, 2001; Richardson, 2006). Wulff (2003) and others perceive a need to avoid the co-opting of the field of "psychology of religion" by those interested principally in religious apologetics and at the same time avoid those whose only interest is in mapping religious behaviors as just another class of behaviors generally. Based on the analysis presented above, we maintain that the field has gone too far in the latter direction. Similar concerns seem to be at the heart of the recent turn in the field toward interest in spirituality.

Richard Gorsuch (2003) takes up the topic of spirituality in a recent volume to which he gave the interrogatory title *Integrating Psychology and Spirituality?* Gorsuch (2003) defines psychology as "the scientific study of human behavior in its immediate context" (p. xx). Obviously, in employing this definition it is still entirely possible to have a psychology of religion that mainly employs traditional scientific methods to understand religiously relevant behaviors. Under such a regime, for example, religiosity is simply a personality variable—one source of influence among many. Belzen (2001), however, is critical of such a "problematic, or at least short-sighted . . . application of psychological reasoning to religion" (pp. 45-46). He argues that such an approach narrows the definition of religion to a "sentiment" or "personality trait" or some "inherent property" and ignores the cultural, social, and historical aspects of religion. An approach

which relies only on the traditional analytic approaches of mainstream psychology of religion, Belzen (2001) argues, would be incapable of dealing with a phenomenon like spirituality in its richness.

In addition to offering a definition of *psychology*, Gorsuch (2001) defines *spirituality* in the following manner:

Spirituality consists of our relationship to the broader reality of which we are a part, our role in this reality, and how we align ourselves, including our behavior to be consistent with that reality . . . [It] is the quest for understanding ourselves in relationship to our view of ultimate reality, and to live in accordance with that understanding. (p. xx)

He further points out that spirituality in this sense does not require belief in or the existence of any deity.

Although one might, and many certainly would argue that the conception of spirituality without a deity is ultimately unsatisfactory, if not impossible, it seems clear that spirituality is an important and widespread human phenomenon, and that it is of increasing interest to psychology, to other social sciences, and to contemporary culture. Furthermore, Gorsuch (2001) has taken us to the heart of the matter, to what we believe to be the central question for any psychology of religion, and to the heart of its current crisis as described here. It is simply this: Psychology and religion will always be at odds and any interface between them—as in a "psychology of religion"—will be deeply problematic unless the psychology and the religion (a) can be understood—even potentially—from the same intellectual grounds and (b) are both established on grounds that take us past methods and models to metaphysics, and that (c) those metaphysical grounds are sophisticated enough to allow both for rigorous intellectual analysis of the psychology of religious phenomena and for the existence of genuinely meaningful spiritual (or religious) behavior. In line with Porpora (2006), the case we are making here is not that psychologists of religion *must necessarily* admit or even *presuppose* supernatural realities. It may be an entirely empirical matter that there are no supernatural realities out there to be experienced and that all are mistaken who think they do experience such things. The argument of this paper is instead that such

assessment should be an empirical conclusion rather than an a priori disciplinary assumption, which as such forever remains equally beyond either support or contestation. (p. 59; italics in the original)

In short, we are claiming that religious experience should be considered in its own right as what it claims to be in the very experiencing of it, not reduced to something other than what it claims to be because of the incompatible metaphysics forced upon it by the naturalistic assumptions of an alien psychology.

It is precisely in the consideration of these issues that we believe the work of Emmanuel Levinas can make its greatest contribution. His work has the potential to produce both a sophisticated psychology and a non-reductive understanding of religion and to set them on the same metaphysical grounds. Because his work is uncommon in this respect, we consider it possible that his position not only provides a new and creative psychology of religious behaviors along the hermeneutic lines Wulff (2003) and others (e.g., Browning & Cooper, 2004; Richardson, 2006) have called for, but because it grounds psychology and religion in the same metaphysics, it may possibly offer a psychology of religion itself.

PSYCHOLOGY OF RELIGION AND THE WORK OF EMMANUEL LEVINAS

The work of the French phenomenological philosopher, Emmanuel Levinas¹, has recently stirred considerable interest in academic circles. Levinas's work is firmly rooted in the phenomenological tradition of such thinkers as Husserl, Merleau-Ponty and Heidegger (Spiegelberg, 1994).

Over the course of a career spanning most of the 20th century, Levinas produced a careful explication of the experience of what it means to be a human being. In this essay we will deal briefly with two of the aspects of his work that most directly address the issues we have introduced regarding the interface between psychology and religion and the possibility of a psychology of religion. Central to any understanding of Levinas is the concept of *otherness* (Levinas, 1969). The Other stands as a contrast to and antidote for the individual ego that is assumed by much of contemporary psychological theory to be at the core of our identity as persons. The absolutely other is that which is absolutely other than I—

in general terms, other than the ego—that which escapes or exceeds my ability to capture, conceptualize and explain by my own mind. This “otherness” is sometimes referred to as “alterity”—that which “overflows” the self and the self’s conceptualizations (Levinas, 1969, 1985). For Levinas the absolutely Other is God (Levinas, 1985; see also Bloechl, 2000). There is a religious feel to much of Levinas’s writings, in part because he produced some overtly religious works, and in part because he freely mixed religious language and metaphor into his phenomenology.

The field of psychology of religion has struggled at times with defining its subject matter because doing so would necessitate a definition of “religion” itself. In a discipline such as psychology—a discipline which does not readily embrace theistic positions—this has created more than a few problems. However, if theism is not seen as necessary for religion, one is not only left to wonder just what religion is, but one also becomes quite hard pressed to distinguish religion from any other cognitive or emotive activity (Belzen, 2001). In such an intellectual climate—where religion has no status different from any other source of behavior, and religious experience and religious behaviors are not inherently different from any other types of behaviors or concepts—a psychology of religion cannot help but lose its identity and become indistinguishable from psychology in general. It has been a matter of some discussion in the field of psychology of religion just how religion ought to be defined in order to include all perspectives and yet retain its identity as a distinct factor in attitudes, personality, and behavior.

In the context of the foregoing discussion, Levinas’s work makes a singular contribution. With the exception perhaps, of those who wish to concoct a “religion” and allow it to spring fully formed, not from the head of Zeus, but from their own heads, and ground it in their own subjectivity and preferences, none should argue against the idea that the very essence of any religion is a recognition of otherness and even, perhaps, an absolute otherness. This recognition and quest to understand absolute otherness may or may not involve theism: i.e., explicit reference to a god. This same recognition—of the importance of otherness—is also entirely compatible with contemporary notions of spirituality (see, e.g., Gorsuch, 2003). Thus it appears that Levinas’s work provides a foundation for a psychology of religion. If

otherness is at the heart of our experience of being human and also at the heart of religion and spirituality, any psychology that seeks to understand human beings in terms of how they act and find meaning in a world infused with otherness is indeed a psychology of religion, since religion is likewise infused with otherness. Thus a psychology grounded in Levinas's work will necessarily focus considerable attention on the fundamental fact and the resultant praxis of being confronted both in the particular and in general with otherness. It might be said that this is the fundamental fact and praxis of religion as well. Thus Levinas's work puts religion and psychology on the same grounds: i.e., both involve carefully examining our lives as we live in the face of otherness. And we must recognize these as legitimate intellectual grounds.

Two additional points should be kept in mind in regard to this common ground for religion and psychology. First, the great potential for Levinas's work to produce a rich and intriguing psychology of religion and to succeed where others have failed derives from the fact that religion—as the confrontation with absolute alterity—is not just an idea or cultural tradition among many similar ideas and traditions. Thus a thoughtful scholar of religion who is grounded in a Levinasian perspective will not be drawn off by the inevitable and banal questions of our age, such as “Whose religion?” and “Why do you claim your religious perspective is right?” Rather, in following Levinas, such a scholar would recognize that the alterity which underlies religion is the very wellspring of human identity and self-consciousness (Narbonne, 2007). Thus religion is not to be studied as a mere idea or social institution which an individual ego encounters somewhere along the road of life and must evaluate for him or herself. On the contrary, the alterity that is the essence of religion is also the seed bed of the human psyche, and it is the core reality in terms of which we become who we are (Cohen, 2002). Thus any psychology of religion that takes Levinas seriously will be at once a fundamental psychology—not at the periphery, but at the heart of the entire psychological enterprise.

Second, Levinas's position is a strong one in the context of today's skepticism because religion is not a matter of ideas; it does not exist first or even essentially as ideas. Levinas takes us immediately away from ideas toward the world of lived experience—from questions

such as “What do I think about God or about my religion?” to the essential question: “How do I respond to the Other?” For Levinas, the absolutely Other (God) is always reflected in what he refers to as the face, meaning that any encounter with an other person reveals to me in some sense otherness. In addition, it is this very encounter with an other (person—infused with otherness) that calls me into being as the being that I am—since before any such encounter there would be no particular reason for awareness of a self. Thus “religion” (as an encounter with absolute alterity) brings us into being as the kind of beings we are, and, since otherness always comes to our attention in engagement with concrete other persons, “religion,” as the encounter with alterity, also takes us immediately to moral response and calls us to social action. We are called into being by the presence of the particular face of a particular other. We are drawn therein into the ethical world. This is important to note because it is the concern for the ethical that draws many to the psychology of religion in the first place. Indeed, many have argued that ethical concern is the essence of any religion (see, e.g., Eliade, 1959; James, 1905; Taylor, 2007).

Because Levinas maintains that our very coming to be as persons—and thus what is most essential and basic in us—is occasioned by a fundamentally ethical situation—the encounter with another person whose very face reflects to us otherness and even God, putting us in a state of ethical obligation to respond to them—his account of us is “metaphysical” (i.e., it says something about what is essential in us). Thus his work is often described as an “ethical metaphysics,” or a “metaphysics of the ethical” (see, e.g., Wyschogrod, 2000). Levinas's “metaphysics of the ethical” arises from the fact that otherness is the fundamental ground from which any analyses of our understanding of our own humanity must begin. The fact that our contact with otherness is always and at once an ethical call viz a viz concrete others makes it an ethical metaphysics. Here again, in the sphere of ethics, Levinas's position is stronger than those which have usually informed contemporary ethical discourse. Following Levinas's thrust, the ethical does not derive from the rational powers of the individual ego, nor from that ego's brain chemistry or its history of contingent reinforcers—which puts that ego in a position of trying to figure out how obligated it is and then what would be the ethical but

not too costly course of action. For Levinas, the ethical call or impulse is not principle driven at all. The ethical has its roots in the primitive encounter with the other in the context of the simultaneous emergence of a keen and piercing recognition of the Other—otherness itself (Levinas, 1968, 1998). The “other person” or “other mind” has always been a “problem” for philosophy and certainly for psychology because the encounter of the ego with the other is the encounter of two self-contained subjectivities (see, e.g., Robinson, 1998). In such an encounter ethical obligation becomes equally problematic because each mind must assess its rational obligation, derive principles for responding, etc., and the very principles that guide such deliberations are never sure, self-evident, or obviously universal. Any ethical claim or obligation must first pass a cognitive test based on rational analysis, then it must be inculcated into solitary minds as a rational imperative; finally we must overcome the “weakness of the will.” All must be done in a context of uncertainty about the rightness of either the obligation or the process of responding.

However, if Levinas is right, neither the other person nor ethical obligation constitute “problems” in the philosophical or rational sense; nor is the ethical itself based first in abstract rational principles. Rather, the encounter with concrete other persons in one’s own lived experience is the occasion for coming to be as a person. The ethical obligation is not engendered by rationality, but arises non-deliberatively in that very coming to be. Principles are generated as guides to action (rather than serving as motivations for action) as we make our way through a world of infinite asymmetrical ethical obligation (Williams & Gantt, 1998). From a Levinasian perspective, psychology of religion does not need to join the battle around issues of moral theory, nor does it need to justify the ethical as a topic of study. The ethical is already at the very core of both psychology and religion.

CONCLUSION

Thus in conclusion, we believe that the work of Emmanuel Levinas has the potential to contribute significantly to a careful re-examination of the investigatory priorities of the psychology of religion. For example, when informed by his work psychologists of religion might well be drawn to the investigate their understanding of the meaning of otherness and the strategies and effects of living in and responding to a world saturated with ethical obligation in the face of otherness. We would hope such research priorities might replace the current preoccupation with finding the evolutionary purposes served by religion and the biochemical origin of sophisticated beliefs and even of spirituality. We hold such a change in research priorities to be profoundly desirable to prevent religion from being explained to death.

Levinas’s work also has the potential of turning psychology of religion into a fundamental psychology—fundamental in the sense that to understand the essence of “religious” behavior is to understand the essence of human behavior itself. This is because the metaphysical foundation of human behavior (behavior in the face of otherness) is the same as the metaphysical foundation of religion (behavior in the face of otherness). Such behaving in the face of otherness is a far cry from behaving at the whim of memes, genes, and whatever survival strategies might be in vogue in this era. A psychology of “religion” as understood from the perspective of Levinas’s work may very well be *the* psychology of human beings. By requiring psychology of religion to attend more directly to our actual lived experience of alterity encountered in the face of the other, Levinasian phenomenology offers a common metaphysical ground upon which a genuinely scientific psychology of religion and a truly religious psychology of religion can—perhaps for the first time—meet.

REFERENCES

- Atran, S. (2002). *In gods we trust: The evolutionary landscape of religion*. New York: Oxford University Press.
- Atran, S. (2006). Religion's innate origins and evolutionary background. In P. Carruthers, S. Laurence, & S. Stich (Eds.), *The innate mind: Vol. 2: Culture and cognition* (pp. 302-317). Oxford, UK: Oxford University Press.
- Barrett, J. L. (2000). Exploring the natural foundations of religion. *Trends in Cognitive Science*, 4(1), 29-34.
- Belzen, J. A. (2001). *The future is in the return: Back to cultural psychology of religion*. In D. Jonte-Pace & W. B. Parsons (Eds.), *Religion and psychology: Mapping the terrain* (pp. 43-56). New York: Routledge.
- Blackmore, S. (1999). *The meme machine*. New York: Basic Books.
- Bloechl, J. (Ed.) (2000). *The face of the Other and the trace of God: Essays on the philosophy of Emmanuel Levinas*. New York: Fordham University Press.
- Boyer, P. (2001). *Religion explained: The evolutionary origins of religious thought*. New York: Basic Books.
- Broom, D. M. (2003). *The evolution of morality and religion*. Cambridge, UK: Cambridge University Press.
- Browning, D. S., & Cooper, T. (2004). *Religious thought and the modern psychologies*. Minneapolis, MN: Augsburg Fortress Publishers.
- Buss, D. M. (1995). Evolutionary psychology: A new paradigm for psychological science. *Psychological Inquiry*, 6(1), 1-30.
- Buss, D. M. (1999). *Evolutionary psychology: The new science of the mind*. Boston, MA: Allyn & Bacon.
- Cartwright, J. (2000). *Evolution and human behavior*. Cambridge, MA: The MIT Press.
- Cohen, R. A. (2002). Maternal psyche. In E. E. Gantt & R. N. Williams (Eds.), *Psychology of the Other: Levinas, ethics, and the practice of psychology* (pp. 32-64). Pittsburgh, PA: Duquesne University Press.
- Dawkins, R. (1976). *The selfish gene*. Oxford, UK: Oxford University Press.
- Dawkins, R. (2004). What use is religion? Part I. *Free Inquiry*, 24(4), 13.
- Dennett, D. C. (2006). *Breaking the spell: Religion as a natural phenomenon*. New York: Viking.
- Eliade, M. (1959). *The sacred and the profane: The nature of religion*. New York: Harcourt, Inc.
- Forsyth, J. (2003). *Psychological theories of religion*. Upper Saddle River, NJ: Prentice-Hall.
- Gantt, E. E. (2002). Agency, embodiment, and the ethical: On saving psychology from biology. In H. Atmanspacher & R. C. Bishop (Eds.), *Between Chance and Choice: Interdisciplinary Perspectives on Determinism* (pp. 447-467). Exeter, UK: Imprint Academic.
- Gantt, E. E., & Reber, J. S. (1999). Sociobiological and social constructionist accounts of altruism: A phenomenological critique. *Journal of Phenomenological Psychology*, 30(2), 14-38.
- Gantt, E. E., & Williams, R. N. (2002). *Psychology for the Other: Levinas, ethics and the practice of psychology*. Pittsburgh, PA: Duquesne University Press.
- Gaulin, S. J. C., & McBurney, D. H. (2001). *Psychology: An evolutionary approach*. Upper Saddle River, NJ: Prentice Hall.
- Geertz, C. (2000). *The interpretation of cultures*. New York: Basic Books.
- Gorsuch, R. L. (2003). *Integrating psychology and spirituality?* Westport, CK: Praeger.
- Hamer, D. (2004). *The God gene: How faith is hardwired into our genes*. New York: Doubleday.
- James, W. (1905). *The varieties of religious experience*. New York: Longmans, Green, and Company.
- Johnson, P. E. (1995). *Reason in the balance: The case against naturalism in science, law, and education*. Downer's Grove, IL: InterVarsity Press.
- Jones, S. L. (1994). A constructive relationship for religion with the science and profession of psychology: Perhaps the boldest model yet. *American Psychologist*, 49, 184-199.
- Levinas, E. (1969). *Totality and infinity* (A. Lingis, Trans.). Pittsburgh, PA: Duquesne University press. (Original work published 1961)
- Levinas, E. (1985). *Ethics and infinity* (R. A. Cohen, Trans.). Pittsburgh, PA: Duquesne University Press. (Original interview series by Philippe Nemo, Radio-France Culture, February and March, 1981)
- Levinas, E. (1987). *Time and the Other* (R. A. Cohen, Trans.). Pittsburgh, PA: Duquesne University Press. (Original work published 1947)
- Levinas, E. (1998). *Otherwise than being or beyond essence* (A. Lingis, Trans.) Pittsburgh, PA: Duquesne University Press. (Original work published 1974)
- Menuge, A. (2004). *Agents under fire: Materialism and the rationality of science*. Lanham, MD: Rowman & Littlefield Publishers.
- Narbonne, J. M. (2007). God and philosophy according to Levinas. In J. Bloechl (Ed.), *Levinas studies: An annual review* (Vol. 2, pp. 29-48). Pittsburgh, PA: Duquesne University Press.
- Nelkin, D. (2000). Less selfish than sacred? Genes and the religious impulse in evolutionary psychology. In H. Rose & S. Rose (Eds.), *Alas, poor Darwin: Arguments against evolutionary psychology* (pp. 17-

- 32). New York: Harmony Books.
- O'Hear, A. (1997). *Beyond evolution: Human nature and the limits of evolutionary explanation*. Oxford, UK: Clarendon Press.
- Palmer, J. A., & Palmer, L. K. (2001). *Evolutionary psychology: The ultimate origins of human behavior*. Boston, MA: Allyn & Bacon.
- Parsons, W. B., & Jonte-Pace, D. (2001). Introduction: Mapping religion and psychology. In D. Jonte-Pace & W. B. Parsons (Eds.), *Religion and psychology: Mapping the terrain* (pp. 15-29). New York: Routledge.
- Pearcey, N. R. (2004). Darwin meets the Berenstain Bears: Evolution as a total worldview. In W. A. Dembski (Ed.), *Uncommon dissent: Intellectuals who find Darwinism unconvincing* (pp. 53-73). Wilmington, DE: ISI Books.
- Pinker, S. (2002). *The blank slate: The modern denial of human nature*. New York: Viking Press.
- Porpora, D. V. (2006). Methodological atheism, methodological agnosticism, and religious experience. *Journal for the Theory of Social Behavior*, 36(1), 57-75.
- Poulshock, J. (2001). The problem and potential of memetics. *Journal of Psychology and Theology*, 30(1), 68-80.
- Richardson, F. C. (2006). Psychology and religion: Hermeneutic reflections. *Journal of Psychology and Theology*, 34(3), 232-245.
- Robinson, D. N. (Ed.). (1998). *The mind*. New York: Oxford University Press.
- Rolston, H. (1999). *Genes, genesis, and God: Values and their origins in natural and human history*. Cambridge, UK: Cambridge University Press.
- Rose, H., & Rose, S. (Eds.). (2000). *Alas, poor Darwin: Arguments against evolutionary psychology*. New York: Harmony Books.
- Rue, L. (2005). *Religion is not about God: How spiritual traditions nurture our biological nature and what to expect when they fail*. New Brunswick, NJ: Rutgers University Press.
- Slife, B. D., & Whoolery, M. (2006). Are psychology's main methods biased against the worldview of many religious people? *Journal of Psychology and Theology*, 34(3), 217-231.
- Slife, B. D., & Williams, R. N. (1995). *What's behind the research? Discovering hidden assumptions in the behavioral sciences*. Thousand Oaks, CA: Sage Publications.
- Spiegelberg, H. (1994). *The phenomenological movement* (3rd ed. rev.). Dordrecht, The Netherlands: Kluwer Academic Publishers.
- Taylor, C. (2007). *A secular age*. Cambridge MA: The Belnap Press.
- Westin, D. (2002). *Psychology: Brain, behavior, and culture* (3rd Ed.). New York: John Wiley and Sons.
- Williams, R. N. (1996). Science or story telling? Evolutionary explanations of human sexuality. In B. D. Slife (Ed.), *Taking sides: Clashing views on controversial psychological issues* (10th ed., pp. 79-87). Guilford, CN: Dushkin/McGraw-Hill.
- Williams, R. N., & Gantt, E. E. (1998). Intimacy and heteronomy: On grounding psychology in the ethical. *Theory and Psychology*, 8(2), 255-270.
- Wilson, D. S. (2002). *Darwin's cathedral: Evolution, religion, and the nature of society*. Chicago: University of Chicago Press.
- Wulff, D. M. (1997). *Psychology of religion: Classic and contemporary* (2nd ed.). New York: John Wiley & Sons.
- Wulff, D. M. (2001). Psychology or religion: An overview. In D. Jonte-Pace & W. B. Parsons (Eds.), *Religion and psychology: Mapping the terrain* (pp. 15-29). New York: Routledge.
- Wulff, D. M. (2003). A field in crisis: Is it time for the psychology of religion to start over? In, R. H. M. P. Roelofsma, J. M. T. Corveleyn, & J. W. van Sanne (Eds.), *One hundred years of psychology and religion: Issues and trends in a century long quest* (pp. 11-32). Amsterdam: VU University Press.
- Wyschogrod, E. (2000). *Emmanuel Levinas: The problem of ethical metaphysics*. New York: Fordham University Press.

ENDNOTE

- 1The reader is referred to the introductory chapter in Gantt and Williams (2002) for a brief biographical sketch of Levinas. The analysis of Levinas's work presented here is taken chiefly from his best known works (e.g., Levinas, 1969, 1985, 1987, and 1998).

Doctoral Education among LDS Mothers: A Phenomenological Study of Making the Decision While Considering Church Counsel

JONATHAN GLADE HALL

Members of The Church of Jesus Christ of Latter-day Saints (LDS) have been compellingly counseled by Church leaders that motherhood should be women's greatest ambition, and that as such it should demand mothers to be full time in the home; at the same time they have been taught to get all of the education that they can. Mothers with young families must decide if they should continue their educational pursuits or spend their full time in the home. This study sought to research how LDS mothers with young children experience the decision to achieve doctoral education, given LDS Church counsel. A phenomenological approach was selected to study seven LDS women's experiences of deciding to achieve doctoral degrees as mothers of young children. As a theoretical perspective, Women's Ways of Knowing informed this study. It appears that doctorate-achieving LDS mothers likely viewed the world from an epistemological position that allowed them to take part in the process of making meaning from authoritative directives.

How women answer questions about what they perceive as truth, authority, and evidence, along with how women know these answers is, according to some scholars, relative to the way women view the world and their part in the world (Belenky, Clinchy, Goldberger, & Tarule, 1986). Answers to these questions reveal how women define themselves, interact with others, conceive morality, and identify a sense of control during life events. Women develop various ways of understanding the world in which they live. In *Women's Ways of Knowing*, Belenky and colleagues share five epistemological perspectives that they believe women utilize in coming to knowledge; they refer to these stage-like categories as *silence*, *received knowing*, *subjective knowing*, *procedural knowing*, and *constructed knowing*.

According to Belenky and colleagues (1986), women know themselves and their world according to the epistemological perspective they hold. These authors propose that a woman in the *silence* position will view herself as having no voice or control over her decisions, whereas a woman in the *constructed knowing* position can deal effectively with complex situations and interpret her world according to her terms. *The Women's Ways of Knowing* framework provided a theoretical base and informed emerging themes of this study.

Jonathan Glade Hall is an instructor for Seminaries and Institutes of the Church Educational System. Correspondence concerning this article should be addressed to Jonathan Glade Hall, EdD; 5923 Timber Ridge Lane, Highland, UT 84003; (801) 995-2765

THE ISSUE: AN LDS MOTHER'S DILEMMA

LDS women have been counseled in *The Family: A Proclamation to the World* (2001) that mothers' primary responsibility is the nurture of their children. LDS women have been admonished, "The counsel of the Church has always been for mothers to spend their full time in the home in rearing and caring for their children" (Benson, 1987, p. 26). The LDS Church has taught that mothering is women's highest responsibility and ultimate ambition. Church President Gordon B. Hinckley (1997) suggested that root consequences for mothers being out of the home include delinquency, drugs, and gang involvement for children.

President Spencer W. Kimball (as cited in E. T. Benson, 1987) counseled:

Come home, wives, to your husbands. Make home a heaven for them. Come home, wives, to your children, born and unborn. Wrap the motherly cloak about you and, unembarrassed, help in a major role to create the bodies for the immortal souls who anxiously await. When you have fully complemented your husband in home life and borne the children, growing up full of faith, integrity, responsibility, and goodness, then you have achieved your accomplishment supreme, without peer, and you will be the envy [of all] through time and eternity. (¶ 35)

EDUCATION FOR LDS WOMEN

The LDS Church has repeatedly emphasized the importance of women seeking education (Faust, 1986; Hinckley, 1999, 2000, 2007; Oaks, 1975; Young, 1862). LDS Church President Gordon B. Hinckley (1999) has stressed that men and women should get all of the education that they can. He declared that the "Lord has said very plainly that His people are to gain knowledge of countries and kingdoms and of things of the world through the process of education, even by study and by faith" (p. 4). He further stated that education will unlock doors of opportunity for those who receive it, declaring that it is worth sacrificing to receive so that LDS members will be able to contribute to society. President Hinckley taught that as members receive their education and contribute to society, they will bring honor to their church. He specifically stated that education will be of great benefit to married women. Rather than expecting married women to drift along

without improving themselves, he encouraged women to make the effort to gain education to enrich their lives and broaden their outlook.

The LDS Church has suggested many purposes for women achieving all of the education that they can. LDS Church President Harold B. Lee (1965) repeated that educating women may be more important than educating men, and he advised that education improves women's minds, bodies, cultural awareness, spirituality, ability to serve others, and capability to teach their children and wisely counsel their husbands. Education increases women's self-esteem, helps them be more interesting, and prepares them to view the world through wise, more mature eyes (Christensen, 1985).

EDUCATIONAL DECISIONS OF LDS MOTHERS WITH CHILDREN

Mothers with young families must decide if they should continue their educational pursuits; there has been a lack of research on their decision to achieve doctoral education. Former General Young Women's President of the LDS Church Ardeth G. Kapp (1985) has said:

The question has been asked, if a woman is trained in such broad areas, will she be lured away from the home? In many ways, her education can strengthen her home. Down the road, higher education may give her more opportunity to be with her family, to set her own working hours, to have the know-how to go into business, to prepare her to meet the economic needs of her family if she must become the provider. Knowledge and intelligence are tools that can be used in righteousness or unrighteousness. Proper use can help us better protect and guard our homes (p. 9).

Church leader James E. Faust (1986) was careful to note that Church directives regarding mothers pursuing endeavors outside of the home apply in a general manner to all members, but that their application involves exceptions. Pinborough (1986) urged women to consider that since circumstances vary from home to home, "every family must work out the details for themselves" (p. 22).

EXTANT RESEARCH ON LDS WOMEN'S MOTHERHOOD AND EDUCATIONAL DECISIONS

A body of research has suggested strategies LDS mothers use to think through balancing family and

education, while considering counsel that mothers are to spend their full time in the home along with counsel that they should get as much education as they can. Vance (2002) performed a content analysis of the themes and directives given in LDS periodicals to women over a hundred-year time period throughout the 1900s. Vance found disparity in the ideals that the LDS Church promoted for its women members; she concluded that motherhood has been most idealized, but education has also been a strong emphasis for women.

Beaman (2001) studied how LDS women make sense of Church directives, noting that LDS women choose how to interpret and reconcile varying Church counsel. Beaman investigated how LDS women maintain their autonomy and agency within the LDS Church and how women understand LDS Church directives regarding male authority. Using a qualitative approach, she conducted life history interviews with 28 LDS women. Beaman found a pattern of heterogeneity from the women's explanations. She stated that this topic is "complicated for LDS women, who are taught to be self-sufficient, even though they are expected to marry, have children, and stay at home" (p. 71). The author described a further tension in the expectations for women by concluding that the message of the LDS Church to women is essentially "be responsible for yourself, yet be dependent on your husbands. Be able to care for yourself, but let your husband be the breadwinner" (p. 83).

Mihelich and Storrs (2003) questioned how LDS women resisted hegemony and wondered why they remained participants in the LDS Church. The researchers interviewed 20 LDS women enrolled in an institution of higher education in the northwestern United States, thinking that they would find that the participants were resisting hegemony by achieving higher education. Mihelich and Storrs initially utilized a resistance theoretical framework, while employing an interpretive and qualitative research design to interview the women. Interviews were transcribed and coded for the degree and form of gender role resistance and adherence. Additional categories of educational goals and aspirations emerged from the women's answers. The researchers' initial expectation that the women would articulate resistance during the interviews failed, as the women did not perceive their actions as students in higher education as resistance. The researchers concluded

that LDS women incorporate higher education into the ideology of womanhood, allowing them to "mediate the potential contradictions" (p. 417).

Ozorak (1996) observed coping strategies women use to reconcile difficulties within religions. A strategy Ozorak identified was characterized by women substituting or interpreting their own ideas for those offered by their particular religion. She believed that an interpreting strategy for church directives had the "greatest potential for liberation through actual change of circumstances" (p. 25).

GAPS IN OUR UNDERSTANDING OF THIS PROBLEM

While a body of research has suggested some strategies LDS mothers use to think through the seemingly inconsistent counsel that women should spend their full time in the home fulfilling their primary responsibility of mothering and that they should get all of the education that they can, there has been a lack of research on how LDS mothers experience the specific decision to achieve doctoral degrees. Research has failed to understand how women experience the decision to achieve doctoral education as LDS mothers of young children. This is an important question because LDS women may find themselves conflicted as they consider Church directives along with their personal desires; understanding how some women experienced their decision to achieve their degree may inform other women as they come to this decision in their lives.

PURPOSE STATEMENT

This study attempted to enlighten understanding of how LDS mothers with young children experience the process of deciding to achieve doctoral education. This study informs LDS mothers who desire or are considering pursuing doctoral education by providing insight concerning the experience of making this decision and demonstrating how some LDS women have understood relevant Church directives.

DELIMITATIONS

Participants were tenure-track and tenured women professors at schools mainly in the Rocky Mountain region. Participants self-reported to be active participating members of The Church of Jesus Christ of Latter-day Saints.

METHODS

PARTICIPANTS

A qualitative research design was chosen because of its ability to examine multiple dimensions and display the complexity of this situation (Creswell, 1998). Qualitative research involves the researcher as an instrument of data collection, focuses on the meaning of data, and provides expressive description. As this study sought to shed light on women's experiences of deciding to achieve doctoral degrees as LDS mothers, phenomenology was an appropriate methodology. A phenomenological approach involves beginning with a philosophical idea and being open to learning about a phenomenon that may seem inconsistent with objective reality. Phenomenology seems to have offered a useful method of learning about the specific phenomenon of achieving doctoral education as LDS mothers.

Women's Ways of Knowing provided the philosophical idea that doctorate-achieving LDS mothers likely viewed the world from an epistemological position that allowed them to adopt a particular process of making meaning from authoritative directives (Belenky et al., 1986).

PARTICIPANTS

Purposeful sampling allowed the researcher to select participants who had experienced the phenomenon and who could contribute to the study by thoroughly articulating their experience (Creswell, 1998; Polkinghorne, 1989). Selected participants were women who reported to be active members of the LDS Church who had made the decision to achieve their doctoral degrees as LDS mothers. Information-rich cases--women who could provide the richest descriptions--were graduates, as the decision to achieve a doctoral degree is a decision that must be made continually until the degree has been achieved. As women who have previously decided to achieve their degree might eventually decide not to continue, the most information-rich cases are of those who have made and remade the decision to achieve their degree during all stages of the decision-making process, culminating in graduation.

Participants were selected from two forums of LDS women who were tenure-track and tenured professors at various universities. The forums met at least annually at national conferences or in local settings in the Rocky Mountain region. These groups of women met as a

support network of LDS mothers who had chosen to achieve doctoral degrees. Having learned about these forums of LDS women, I was able to solicit participants for this study from a large group of LDS women with doctoral degrees. As professors' religious affiliation can be a sensitive topic and is protected information, these forums of women allowed convenient access to potential participants.

Seven participants who were able to provide information-rich cases of LDS mothers who had achieved their doctoral degrees were selected and assigned pseudo-names. No two participants had achieved their doctoral degree within the same state. Angie, Beth, Carol, Donna, Faye, and Ginny were married, and Emily was a divorced, single mother. Ages of the participants as they had initiated their doctoral studies ranged from Donna at age 24 to Angie at age 37. Angie had eight children, while Donna had one child and was expecting a second. Faye had her fourth child four days before she achieved her doctoral degree, and Carol had her fourth two months after achieving her degree. Each participant identified herself as a lifelong member of the LDS Church; a description of each follows.

Angie. Angie reported to have been a 36-year-old, married, lifelong member of the LDS Church when she began her doctoral program in the 1990s. She graduated at age 43 from a school in the Rocky Mountain West. Angie made the decision to apply for a doctoral program as the mother of six children, and she was pregnant with twins during the application process. She began the program 5 months after the twins were born, as a mother of eight, with five children who were 5 years old or younger. Her husband was a stay-at-home father while she had been the breadwinner for the previous 10 years. Her experiences provided rich insight as she was the mother of a large family who was the sole financial support of that family while in a doctoral program over a period of 7 years.

Beth. Beth recalled being 37 years old when she enrolled in her doctoral program in the late 1990s as a housewife who had been a lifelong member of the LDS Church. She graduated 3 years later at age 40 from a university in the Midwest. The youngest of her four children had been 3 years old when she decided to begin her doctoral program; when she graduated her children ranged from age 6 to 11. Beth informed this study as a mother in her 30s with four children at the time she

decided to achieve her doctorate.

Carol. Carol was a married, active member of the LDS Church when she decided to enroll in a doctoral program at age 29 during the early 1970s. She graduated 4 years later from a university in the southern states. She had three children when she began her doctorate, and had her fourth child 2 months after she defended her dissertation. Carol informed this study as a mother who was in her twenties and was still bearing children when she decided to achieve her doctoral degree.

Donna. Donna shared that she was 24 years old when she decided to enroll in a doctoral program in 2001. She was an active member of the LDS Church, and was not yet married. She got engaged a month into her program and got married during spring break of her first year. She graduated at age 30 with one child, expecting her second. Donna informed this study from the viewpoint of a younger woman, who wanted to be a mother, but was not one until after she began her program. Her decision to achieve her degree was made when marriage was imminent and continued through the process of having a first child.

Emily. Emily was an active member of the LDS Church when she decided to enroll in a doctoral program at age 25 in the 1980s. She was divorced and had one child. She graduated at age 30 from a university in the Midwest. Emily informed this study from the perspective of a divorced mother. Her experience of moving to a new part of the country with a young child to begin her doctoral program as a single mother provided another rich perspective of achieving a doctorate.

Faye. Faye was an active LDS Church member when she decided to enroll in a doctoral program at age 29 in the 1970s. She graduated 3 years later from a university in the Midwest. She had three young children when she began her doctoral program and graduated four days after her fourth child was born. Faye provided information from the viewpoint of someone who decided to achieve her degree when she already had children; a further challenge was added to the necessity of balancing motherhood and education as she had a fourth child during the final year of her program.

Ginny. Ginny was 35 when she decided to enroll at a university in the Midwest in the 1990s. She graduated at age 41. She reported to be an active lifelong LDS Church member who had four children. She informed this study as the mother of four children who decided she wanted

to go back to school after having been out of school for some time while she worked in her community.

DATA COLLECTION

Prior to the interviews questions were tested with three LDS mothers with doctoral degrees and were found to satisfactorily probe the women's experiences and perceptions. In an effort to build rapport, the researcher contacted each of the 7 women, discussed the study individually with her, and left a copy of initial interview questions. Providing the questions in advance so that the participants could preview what they would be asked was intended to help them feel comfortable with the interview questions, as well as allow more time for them to recall their most meaningful answers.

The researcher then met individually with each participant for an interview, which was tape recorded for transcription and transcribed by the researcher within a day of the interview to promote accuracy. Following the interview, each participant was contacted and asked if she had thought of anything that she would like to add to her answers. One participant added information at this time. Participants were sent a copy of the interview transcription so they could check for accuracy; 5 of them chose to clarify comments they had made or add insight. Depending on emerging themes and their personal answers, the participants provided continual clarification throughout the analysis stage.

DATA ANALYSIS

Procedures for analyzing the data were based on the writings of Creswell (1998), Moustakas (1994), and Colaizzi (1978). These major procedures for data analysis are generally accepted, and a similar sequence of steps is used by all psychological phenomenologists (1998).

After transcribing the interviews, the researcher read all of the descriptions in their entirety.

The participants' answers were divided into statements during a process called horizontalization. During this step, each statement was tagged with a code that identified the participant and provided unique information. The data were then coded for themes and categories that emerged. Themes were identified by using a color code system, and significant statements from each description were extracted.

These statements were combined to create clusters of meanings. Color-coded sheets identified clusters of data from all of the participants.

The clusters were tied back together to make a general description of the experience. This included a textural description of what the experience was and a structural description of how it was experienced.

Follow-up interviews were utilized to clarify the participants' experiences and offer additional insight until saturation was reached.

VERIFICATION

Data were verified using techniques prescribed by Creswell (1998) and Polkinghorne (1989). A bracketing interview was carried out prior to data collection, allowing the researcher to suspend (bracket) pre-study suspicions.

Member checking strategies were employed to allow participants to verify that the written transcription accurately represented the oral interview and to request that they check the data analysis at progressive steps to verify that their experiences were reflected accurately. An audit trail and a research journal were also kept, and an audit was performed to verify the accuracy of the analysis.

RESULTS AND ANALYSIS

Data analysis is divided into two sections. The first section identifies what participants believed that the LDS Church counseled about education. The subsections are organized as (1) the perception that the LDS Church counseled women to achieve education, (2) the perception that the LDS Church counseled that even mothers should achieve education, and (3) the perception that the LDS Church counseled single women to seek education, but was wary of married women achieving education if they have young children. The second section identifies differences between others' experiences and personal actions. Subsections include (1) the perception that the Gospel stands independent of Church members' counsel, (2) the perception that women are all different and follow different paths, (3) the perception that LDS women may make their own choices, and (4) the perception that personal revelation may direct women in making their choices.

WHAT PARTICIPANTS BELIEVED THE LDS CHURCH COUNSELED ABOUT EDUCATION

Most of the mothers in this study seemed to indicate that they believed that the LDS Church counseled

that women should pursue education as a primary objective in this life. The women's perceptions differed on whether being married and having young children changed the Church's counsel as to the acceptability of achieving education. Beth related that she had had the blessing of her religious leaders to achieve her doctorate as a mother with young children, while Carol and Faye disclosed that they had felt opposition from their religious leaders. Emily illustrated how she and a fellow student felt that they were treated differently by Church members based on their marital status while in their doctoral program.

Perception that the LDS Church counseled women to achieve education. Several of the women alluded to the idea that they believed that the Church has supported women in their efforts to pursue education, teaching the importance of all women obtaining education. Angie remembered from her childhood when her father had taught her that the Church expected her to seek education. She recalled that her dad had emphasized that "Brigham Young said something like 'if I had to choose between educating my sons and my daughters, I'd educate my daughters because they would educate my grandchildren.'" Beth commented regarding her education, "I never doubted that choice. . . . I never felt guilty about the education." Referring to times she had heard LDS Church leaders teach about the importance of achieving all of the education you could, Carol said, "I always took that 'getting an education' seriously." Donna reflected on counsel that had influenced her as she grew up. She related a teaching which she believed was particularly meaningful and influential for her: "Whatever intelligence you attain in this life will carry with you unto the next." Ginny recalled that the Church's support for education "clearly was a factor" in her decision to pursue her doctoral degree.

Emily indicated her belief that teachings from the LDS Church about the importance of education for its members seemed particularly influential to her. She felt strongly "that we were expected to be as intelligent a people as possible." Emily continued, "The Lord doesn't want us to look like a bunch of ignorant hicks. He wants us to be the most successful, the most intelligent, the most creative, the most ambitious people on earth, and we should confidently pursue excellence in whatever we do."

Emily explained that she did not believe that the LDS Church counseled that achieving education necessarily

meant achieving specific degrees, but did believe that if formal school was available, it should “definitely be pursued.” She stated, “It should not be a secondary thing. It should definitely be a primary pursuit to be as educated as you possibly can and to take every opportunity in your life to increase your education.”

Perception that the LDS Church counseled that even mothers should achieve education. Beth articulated that she felt that the Church discouraged employment for mothers with young children, but felt like the importance of achieving education seemed like a constant teaching of the Church. She stated, “Going to school kind of gave me, in a strange kind of way, permission to achieve. When working full time didn’t seem like a choice for me. . . going to school seemed like a choice.” Beth appeared emotional as she reflected on the influence of the Church’s counsel that mothers with young children should be in the home. She explained:

If I did not have that testimony, I would have done things different because being a mom and being in the home is the hardest thing in life. I love my children, but doing domestic stuff sucks. I find no fulfillment in those duties and responsibilities. Changing diapers and cooking dinner is not rewarding for me. I spent a lot of years feeling like I wasn’t right because I didn’t like that stuff . . . I even had a hard time reading stories to my children and just doing kid stuff.

Perception that the LDS Church counseled single women to seek education, but was wary of married women achieving education if they had young children at home. Donna reflected that she was single when she initially made her decision to achieve a doctoral degree, but that she continued to carry out her decision after she got married during her first year in the program. She indicated that as a single woman, she felt especially encouraged by the Church to seek advanced education. She laughed, “They’re supportive, especially if you’re single. It’s like they say ‘well, you better think of something to do with your life since you’re not married.’” Concerning mothers with young children, Donna shared her feelings about how her perception of the Church’s teachings influenced her choice:

I don’t think that it would be such a dilemma in my mind if I weren’t a member of the Church and had the perspective of the eternal ramifications of how you raise

a person. So because of that, throughout my PhD and working, I would hope that anything that takes me away from full-time motherhood, causes some kind of internal turmoil. I would say that is directly related my belief in the Gospel and understanding of an eternal perspective of why we’re here and the capacity for human potential and divine nature of kids. That affected me throughout in terms of how I balanced my time and even how I balance my time now.

Though Carol seemed to believe that the LDS Church had always taught that “women need an education,” she expressed that she felt that the Church emphasized family even more. She noted that she believed that the Church taught, “Family’s always more significant, and I agree it is . . . I’m not denying the importance of being a mother. . . . Nobody ever taught about the idea of balance.” Recalling her own experience, Carol shared, “It would have been okay if I would have been single or childless, or if my children had left the nest. All of those are acceptable. I was in the unacceptable range, or the range where one is viewed with suspicion.” Faye seemed vigorously challenged by her local Church leaders as to her decision to achieve her doctoral degree.

Having been a recently divorced mother as she began her doctoral program, Emily recalled

I had a good friend when I was getting my doctorate at [a Midwestern university]; she was getting her doctorate in English, and she had three kids, and was a member of [my church]. She was a good friend. She was probably my closest friend there. I remember one day she turned to me and she said, “You’re so lucky.” And I go, “What, so lucky?” And I go “why?” She goes, “Well, because you can pursue your doctorate degree with [your child] being watched over by other people, and no one in the Church criticizes you for doing that. In my case, I even have my husband watching my kids, but I get criticized for doing that.” I felt really bad for her, and I thought, “Well, who would have the audacity to judge her like that?”

PERCEPTION OF DIFFERENCES BETWEEN OTHERS’ EXPECTATIONS AND PERSONAL ACTIONS

Many participants in this study seemed to recognize differences between what they perceived as LDS Church counsel or norms and their own personal decisions as

LDS mothers. Several of the women recalled learning to separate their understanding of the Gospel from what Church members sometimes counseled. They seemed to do this on occasions when they did not understand or agree with the counsel. Participants also shared their belief that there is not one single path through life that is right for everyone, but that after hearing counsel, women may choose what is best for them. Participants seemed to indicate that they were especially confident when they felt that their choices were based on personal revelation.

Perception that the Gospel stands independent of Church members' counsel. Three participants seemed to indicate that they had heard discouraging counsel regarding their decision to achieve higher education as mothers of young children, but they separated that from their personal understanding of the Gospel. Carol remembered that during her experience of deciding to achieve her doctoral degree, she felt like she was acting contrary to what "was being taught at the pulpit." She clarified her decision as she explained, "Now, did I feel that was the Gospel? Not necessarily. Did I feel that was how the brethren were interpreting things? Yes. But I felt the Gospel was true."

Angie explained, "I separate the Gospel from people, and so I didn't feel any tension as far as the Gospel is concerned. I didn't feel any tension like that." Angie candidly added, "But then I don't know if I was setting up barriers psychologically. I mean, I think I probably should have because a lot of people do, but I didn't." It is interesting that Angie apparently noted that other people may sense a tension in what has been said regarding the roles of LDS mothers of young children, yet she did not feel that way.

Faye related, "The biggest challenge, of course, was the Church. [The problem was] how I interpreted Church doctrine . . . A mother doesn't do this, and a mother doesn't do that, and so on." She continued, "But once I got beyond that, then the biggest challenges were from the Church authorities, and that was really quite severe." Faye explained that she did not feel that these challenges were wasted. She said:

One good thing that happened was my testimony of the Gospel grew. I could tell how I felt about it, and I could tell that what was important to me was the Church's definition of what God is. I wanted to stick with it for that reason.

Some of the women felt it was important to share their belief that all members of the LDS Church are different and may pursue different directions, and different directions may be right for each individual. Donna shared, "There are so many different routes and careers that might allow us to fulfill our mission in life. It may not matter what context we ultimately choose, but more how we act around people wherever we are."

Emily explained, "We are not cookie cutters in the Church. We are all unique and have unique paths and unique opportunities." Referring to statements made by LDS Church leaders regarding the role of women and her assumption that women would apply teachings individually, Ginny intimated, "You have to consider the whole range of women they are talking to."

Emily further discussed that achieving doctoral degrees may likely lead to women being out of the home as they pursue careers. Regarding the Church's concern for this, Emily reflected, "I think very few women selfishly pursue careers. I don't think it is selfish to develop a talent. I think that's what is expected of us." She further stated:

I really do think that it's important for people to have a life that extends beyond their family. I think men kind of naturally have that, but a lot of times women don't. I do think it's very important to be well rounded, and being well rounded also includes time developing your own talents and your own identity--your own self. To me it's just building on the talents that are given to us, and there are lots of ways that can happen.

Perception that LDS women may make their own choices. A majority of the women described their belief that they chose their own actions after receiving counsel. Angie referred to the decision she and her husband made that she achieve her doctoral degree to assist her in being the bread winner to their family of ten:

Over the years, almost every time we'd get a new bishop they'd call my husband in and talk to him about that. And then they'd call me in. I think that they thought that I was somehow kind of being mistreated. And I'd say this is a very conscious decision that we made.

Reflecting back on her decision to achieve her doctorate to assist her in providing financially for the family while

her husband stayed home with the children, Angie stated, "I know it's odd. I know all that kind of stuff. I understand the Church doctrine, and I believe 100% in that. For our situation, this is what works, and this is the right thing for us." It appears that Angie felt comfortable making her own choices after having received counsel from the Church.

Carol remembered Church leaders and members who expressed that they did not approve of her decision to achieve her degree. As she thought about things that were said to her, she recalled:

None of it was directed against me personally. Well, sometimes it was me personally but not usually. Usually it was just [that] I didn't have my priorities straight. I felt very comfortable with my priorities. My husband felt very comfortable with my priorities—our priorities—because they had to be the family's priorities.

Donna shared her belief:

Within the Church there's a fine balance: We really want educated women. We want our members being leaders in the world and all this, yet we also want strong families. Frankly, I think that even within the Church, people aren't sure where their alliances are and how you manage them practically. So I think they just stay out of your personal business.

Faye shared:

I mean the doctrine was troublesome, but I got over it. I had such profound spiritual experiences that for me personally it would have been unthinkable to have denied those experiences. You just couldn't do it. So, for that reason, I didn't know how the doctrine could reconcile with it, but I just decided not to worry about it.

Faye related how she was able to come to the point of not worrying about it, while she remained a faithful member of the Church. She explained:

I just did a lot of study of the Church's doctrines, and was just struck over and over again that the Church was developed on the premise that a person had to exercise his free agency and his freedom of thought in order to develop the Church, and that was an eternal principle.

So if it applied then, it applies now. Actually there was a scripture. . . .that really helped me get beyond the doctrine, or beyond the colloquial version of the doctrine. That scripture said if you study things out, then if you act on your own accord, you can't be held accountable if you're trying to do what is right, and if you're honestly trying to follow true pathways.

Ginny discussed her perception of the teachings of the LDS Church as she said, "You know we have this 'be a stay-at-home mom, put your primary focus on your children,' but 'develop your talents.' It's kind of contradicting, and so I put things together that worked." Ginny further explained that she felt it was important for women to be able to figure things out for themselves. She shared, "It is so important for each individual woman, mother, to have their own testimony, their own sense of self" so that they can have a "sense of their own faith to be able to stand on their own." Ginny shared that the LDS Church's "support for education clearly was a factor" in her achieving her doctoral degree. Yet despite this support for education, she recalled, "I clearly felt like I was doing something counter-normative" within the Church.

Even though Ginny may have felt like her decision to achieve her doctoral degree was counter-normative, she did not feel that her decision was counter to what the Lord wanted her to do. She related, "I have to make some of these decisions myself. The Church can give general advice, and then I have to decide for myself. So I felt no guilt, in terms of going against the Church."

Perception that personal revelation may direct women in making their choices. Participants in this study identified contributing factors that seemed to lead them in deciding to achieve doctoral degrees. Participants identified that they felt a deep need, had a drive or strong desire, and felt spiritually led to achieve doctoral education. Six participants independently stated that their patriarchal blessings influenced them to achieve their doctorate. These contributing factors seem to indicate that participants' perception of personal revelation has been an important reason that these mothers decided to achieve their degrees.

When Faye was challenged by local Church leaders who did not feel that it was appropriate for her to pursue her doctoral degree as a mother of young children, she

responded, "Well, the last time I checked, the Church was built on personal revelation." Faye recalled another occasion, during a Church meeting, when she said:

I think this is probably a good time to say that I made my choice based on personal revelation, and I will not answer any more questions about it. I won't talk about it, and I don't want any of you to talk to me about it because I've made my choice. This is the way it is.

DISCUSSION

It appears that the women in this study perceived that the LDS Church asserts the importance of education for women, but the participants perceived the counsel regarding mothers seeking education differently. The women seemed comfortable separating their own situations from their perceptions of Church teachings. It appears that participants value their membership in the LDS Church and recognize the authority of Church leaders, while at the same time, they feel comfortable making their own personal decisions when considering general Church counsel. In this way, participants seemed to participate in finding personal meaning in LDS Church directives, claiming to rely on personal revelation in their decisions.

These participants confidently claimed to have taken part in finding meaning in Church directives regarding their lives. As Women's Ways of Knowing proposes, women's epistemological perspectives may enable them to find personal conclusions and direction in complex situations as they contribute personally to the meaning of the directives. The women expressed their ability to apply Church directives in their own lives in their own terms without a feeling of acting contrary to the actual directive.

CONCLUSIONS

The goal of a phenomenological study is that the reader understands the essence of the experience and comes away thinking, "I understand better what it is like for someone to experience that" (Polkinghorne, 1989, p. 46). Because of this study, readers better understand how LDS mothers consider Church counsel while deciding to achieve doctoral education. It appears that the participants shared an epistemological perspective

which allowed them to participate in finding the meaning of LDS directives in their lives. The LDS mothers expressed their dependence on personal revelation in applying Church directives. This study found that participants identified spiritual promptings and deep personal desires as important factors affecting their decision to achieve doctoral education.

As this was a qualitative study, the researcher was the primary instrument in data analysis. Readers may determine the transferability of this study based on how representative they consider this sample to be (Bogdan & Biklen, 1998). The results and analysis sections detail the feelings and experiences that capture the essence of the participants' experiences.

This research may be useful to those who care for LDS Church members in understanding the experiences of a segment of its members. It may be useful to institutions of higher education in understanding this group on their campuses and in attracting additional students. This research may be particularly useful to LDS mothers who have decided to achieve doctoral degrees or are in the process of deciding to achieve doctoral education; insight may assist individuals in understanding themselves and relating to others.

It would be fascinating to interview women who made a conscious decision not to pursue doctoral education while their children were young to discover what factors lead to that decision. Do these women stay home because of authoritative directives, or do they feel empowered to make this decision for themselves? Would they cite spiritual promptings and deep personal desires as reasons for their decision?

REFERENCES

- Beaman, L. G. (2001). Molly Mormons, Mormon feminists, and moderates: Religious diversity and the Latter-day Saints Church. *Sociology of Religion*, 62(1), 65-86.
- Belenky, M. F., Clinchy, B. M., Goldberger, N. R., & Tarule, J. M. (1986). *Women's ways of knowing: The development of self, voice, and mind*. New York: Basic Books.
- Benson, E. T. (1987). *To the mothers in Zion*. Salt Lake City: The Church of Jesus Christ of Latter-day Saints.
- Bogdan, R. C., & Biklen, S. K. (1998). *Qualitative research in education: An introduction to theory and methods*. Boston: Allyn and Bacon.
- Christensen, L. P. (1985 January). Happily ever after? *New Era*, 15, 36-37.

- Colaizzi, P. F. (1978). Psychological research as the phenomenologist views it. In R. Vaile, & M. King (Eds.), *Existential phenomenological alternatives for psychology* (pp. 48-71). New York: Oxford University Press.
- Creswell, J. W. (1998). *Qualitative inquiry and research design: Choosing among five traditions*. Thousand Oaks, CA: Sage Publications.
- Faust, J. A. (1986 September). A message to my granddaughters: Becoming "great women." *Ensign*, 16, 16-20.
- Hinckley, G. B. (1997). *Teachings of Gordon B. Hinckley*. Salt Lake City, UT: Deseret Book Company.
- Hinckley, G. B. (1999, June). Inspirational thoughts by President Gordon B. Hinckley. *Ensign*, 29, 4.
- Hinckley, G. B. (2000, June). Recurring themes of President Hinckley. *Ensign*, 30, 18.
- Hinckley, G. B. (2007, May). Let virtue garnish thy thoughts unceasingly. *Ensign*, 37, 115-117.
- Kapp, A. G. (1985, January). The treasure you will take with you. *Ensign*, 15, 9-10.
- Lee, H. B. (1965, January). Quotes. *Relief Society Magazine*, 52, 8.
- Mihelich, J., & Storrs, D. (2003). Higher education and the negotiated process of hegemony: Embedded resistance among Mormon women. *Gender & Society*, 17, 404-422.
- Moustakes, C. (1994). *Phenomenological research methods*. Thousand Oaks, CA: Sage.
- Oaks, D. H. (1975, March). Women and education. *Ensign*, 5, 56-57.
- Ozorak, E. W. (1996). The power, but not the glory: How women empower themselves through religion. *Journal for the Scientific Study of Religion*, 35, 17-29.
- Pinborough, J. U. (1986, March). Working double time: The working mother's dilemma. *Ensign*, 16, 22-25.
- Polkinghorne, D. E. (1989). Phenomenological research methods. In R. S. Valle & S. Halling (Eds.), *Existential-phenomenological perspectives in psychology* (pp. 41-60). New York: Plenum.
- The Church of Jesus Christ of Latter-day Saints. (1995). *The family: A proclamation to the world*. [Brochure].
- Vance, L. (2002). Evolution of ideals for women in Mormon periodicals, 1897-1999. *Sociology of Religion*, 63, 91-112.
- Young, B. (1862). Call for teams to go to the frontiers. In G. Q. Cannon (Ed.), *Journal of discourses* (Vol. 9, pp. 186-191). London: Latter-day Saints' Book Depot.

Perceptions of Jesus Christ's Atonement Among Latter-day Saint Women with Eating Disorders and Perfectionism

SHAWN EDGINGTON, P. SCOTT RICHARDS, MARTIN J. ERICKSON,
AARON P. JACKSON, AND RANDY K. HARDMAN

A qualitative study was conducted to research the perceptions and lived experiences related to Jesus Christ's Atonement among Latter-day-Saint women who have struggled with perfectionism and eating disorders. Semi-structured interviews were conducted with 20 women suffering from eating disorders, 19 of whom were in an inpatient treatment program. Findings indicated that when participants were deeply entrenched in perfectionism they had little sincere interest in or desire to learn about the atonement, finding the atonement to be a source of emotional pain and guilt. Participants who confronted their perfectionistic beliefs and actions with openness, vulnerability, and sincerity became more accepting of themselves, more accepting of God's and others' love and support, and more accepting of God's grace offered through the atonement. Clinical implications are suggested.

Latter-day Saints are commanded to be perfect¹ but are also taught that they are flawed and inherently sinful². This apparent contradiction may strongly influence their mental health issues. LDS doctrine teaches that Jesus Christ is able to bridge the gap created by these paradoxical ideas. Jesus Christ's suffering in the Garden of Gethsemane, crucifixion, and subsequent resurrection--the atonement--is the central theme of LDS doctrine. The atonement involved merciful acts designed to compensate for the sins, mistakes, pains, afflictions, temptations, sicknesses, and suffering of all people³. Latter-day Saints believe that it is only through the atonement of Jesus Christ that people can be reconciled to God and thus gain salvation⁴. Presumably, Latter-day Saints would find both spiritual and emotional comfort, peace, and hope in the compensating and redeeming effects of the atonement.

LDS doctrine teaches that in order to access the Savior's grace to overcome sins, people are required to perform certain works demonstrating faith in Jesus Christ, repentance, and obedience to the commandments taught within the Gospel (see LDS Bible Dictionary, p. 617). Some researchers have indicated that the requirement

of human works for accessing God's grace may create emotional or spiritual difficulties for some Latter-day Saints depending on how they personally make sense of this (Barlow & Bergin, 1998; Fischer & Richards, 1998). Latter-day Saints who ascribe to perfectionism likely face unique dilemmas regarding their perceptions of God's attitude toward and judgment of them.

CONCEPTS COMMON TO PERFECTIONISM

Researchers and clinicians alike have found perfectionism to significantly influence the lives of those suffering from various forms of psychopathology (Blatt, 1995). While there is not a clear consensus in the literature on one all-encompassing definition for *perfectionism*, the four themes below are the most prominent characteristics associated with perfectionism.

Correspondence regarding this article should be addressed to P. Scott Richards, Ph.D., Counseling Psychology and Special Education, Brigham Young University, Provo, UT 84602; scott_richards@byu.edu

Excessively high standards (Blatt, 1995; Burns, 1980; Frost, Marten, Lahart, & Rosenblate, 1990; Hamacheck, 1978; Hewitt & Flett, 1991a, 1991b; Pacht, 1984), including extreme rigidity, mercilessness, relentless striving to meet unrealistically high goals and expectations, and inability to recognize limitations and set expectations according to one's limitations.

Intense fear of failure and need for approval from others (Frost, Lahart, & Rosenblate, 1991; Hamacheck, 1978; Pacht, 1984), including feelings of low self-esteem, low self-worth, and resultant attempts to be or present perfectly so as to avoid others seeing one's flaws.

Sensitivity to parental influence and need for approval (Frost, Lahart, & Rosenblate, 1991; Hamacheck, 1978; Pacht, 1984; Rice, Ashby, & Preusser, 1996; Sorotzkin, 1998), including experience with non-approving or inconsistently approving parenting styles, conditional positive approval from parents, and unresolved emotional issues from family of origin that result in drive for perfectionism.

Self-critical "all or nothing"/dichotomous thinking (Burns, 1980; Pacht, 1984), including all-black or all-white thinking, seeing only the extremes of the continuum, unable to recognize that there is a middle ground, along with a tendency to interpret negatively and/or be self-critical.

PERFECTIONISM AND MENTAL HEALTH ISSUES AMONG LATTER-DAY SAINTS

In spite of LDS doctrinal statements about the need for both God's grace and human works, Koltko (1990) observed that in practice Latter-day Saints overemphasize the role of "works" in the "grace and works" issue. He illustrated his point by stating that "in practice. . . much emphasis is placed on good works and obedience to commandments as demonstrations of faith. Indeed, Mormons may act as if 'working out one's salvation' meant earning one's place in heaven through overtime" (p. 136). Fischer and Richards (1998) interviewed leaders from six different religious denominations, including an LDS leader, to explore their varied belief systems and their possible association to sources of guilt. They observed, "Mormons may be more likely to suffer from

guilt associated with perfectionism than other groups that emphasize that perfection is not possible" (p. 151). This tendency toward perfectionism among Latter-day Saints was corroborated by Barlow and Bergin (1998). In a chapter titled "Psychotherapy with Latter-day Saints," Ullrich, Richards, and Bergin (2000) devoted a section to LDS tendencies toward perfectionism. They noted the LDS emphasis on the Biblical injunction to "Be ye therefore perfect" (Matthew 5:48) and theorized that some Latter-day Saints tend to interpret that scripture to mean, "not only . . . should they become perfect, but that they should be so now" (p. 197), and rather than "accepting their inevitable imperfections, they conclude that they are bad, worthless, and eternally flawed" (p. 197). In one of the very few empirical studies examining the role of religiously oriented group interventions, Richards, Owen, and Stein (1993) observed a tendency toward perfectionism among their LDS clients.

In contrast, Williams (1999) conducted a study comparing levels of depression, intrinsic versus extrinsic religiosity, perfectionism, and traditional family role values among LDS and Protestant women. Latter-day Saint women were not found to be significantly different in levels of depression or perfectionism than the Protestant comparison group. Thus there is literature supporting a tendency toward perfectionism among Latter-day Saints and at least one study indicating no difference with regard to perfectionistic tendencies between LDS and Protestant women. The body of literature that addresses perfectionism among Latter-day Saints indicates that it is a compelling issue, both religiously and psychologically.

PERFECTIONISM AND EATING DISORDERS

A number of researchers and clinicians have concluded that those struggling with eating disorders are likely to exhibit perfectionistic attitudes and ways of thinking (e.g., Ashby, Kottman, & Schoen, 1998; Fairburn, Cooper, Doll, & Welch, 1999; Halmi et al., 2000; Hewitt, Flett, & Ediger, 1995; Vohs, Bardone, Joiner, Abramson, & Heatherton, 1999). Fairburn et al. (1999) compared risk factors with eating disordered patients, a group of general psychiatric patients, and a control group. They found that adherence to perfectionistic ideals and negative self-evaluation were the only risk

factors that distinguished patients with eating disorders from those with general psychiatric problems. Vohs et al. (1999) concluded, "Perfectionism long has been associated with eating disorders. Indeed, the very nature of eating disorders—relentlessly striving toward an impossible standard of thinness—is perfectionistic" (p. 695). Based on their clinical work in an eating disorders inpatient treatment center, Hardman, Berrett, and Richards (2003) concluded that women with eating disorders often struggle with issues of perfectionism.

PURPOSE OF THE STUDY

The primary purpose of the study was to learn more about how Latter-day Saint women with eating disorders interpret, experience, and apply Jesus Christ's atonement in their lives. Given the frequently observed link between eating disorders and perfectionism, we assumed that LDS women with eating disorders would interpret their beliefs in the atonement of Jesus Christ through the lenses of their eating disorder and their perfectionistic ideals. We decided that a qualitative interview study of LDS women receiving treatment for eating disorders could give us some insight into how LDS women's beliefs about the atonement might be related to both perfectionism and eating disorders. We hoped that such understanding might help psychotherapists more effectively assist LDS women with eating disorders and perfectionism as they heal.

METHOD

PROCEDURES

The Center for Change, an inpatient treatment facility for women struggling with eating disorders, located in Orem, Utah, was selected as the primary site of the study, and the Brigham Young University counseling center in Provo, Utah, was selected as a secondary site in order to speed up data collection. As it turned out, 19 women at Center for Change and 1 woman at the BYU counseling center participated.

All 20 participants were LDS, attended church at least once a month, and had been diagnosed with an eating disorder—*anorexia nervosa*, *bulimia nervosa*, or eating disorder not specified (NOS). Interviewing 20 participants increased the likelihood of reaching the point of saturation "where further interviews yield little

new knowledge" (Kvale, 1996, p. 102).

Interviews of the 19 patients at Center for Change were conducted in a private office at the treatment center. The participant at BYU was interviewed in a private office at the BYU counseling center. Audio recordings were made of all interviews. Interviews lasted an average of about 60 minutes. The following list of likely interview topics and key questions was used to guide the interviews—to minimize leading questions and maximize the range of responses.

1. What do you understand and believe about Jesus Christ's atonement?
2. Do you believe that the atonement applies to your life? If so, in what way?
3. Do you feel that Jesus Christ forgives you of your sins and imperfections?
4. What do you feel you need to do to receive God's forgiveness and love?
5. What effort, if any, do you feel you need to exert to receive God's grace?

Reflective listening skills were used to foster open communication about the issues being studied. No efforts were made to limit responses. An external auditor was employed to verify that data gathering and interpretation were as free of bias as possible. Following the transcription of the interviews, member checks were conducted wherein participants were contacted by phone and a brief summary of the information they had shared was given. Participants then had an opportunity to corroborate or refute the summary they heard.

INTERPRETATION AND ANALYSIS

The interview process itself was a key part of the analysis, as a general sense of participants' perceptions of the atonement was gained in this way (Kvale, 1996)⁵. All interviews were transcribed and read multiple times to gain this overall sense and identify initial themes. This process was repeated later to identify additional concepts and relevant themes that might have been missed in the initial review. During this and subsequent stages of analysis, the interviewer attempted to suspend or bracket (Creswell, 1998) his presuppositions about the narrative, attempting to draw meaning exclusively from the interviewee's responses; thus assumptions were continually being challenged.

Meaning units were identified and arranged thematically, after which dominant themes could be discerned. Qualitative methods of phenomenology and hermeneutics were used to identify themes. Ten specific content themes evolved, focused on the specific content from transcripts. Themes were grouped as two major divisions: positive and negative. Interpretive analysis of the specific content themes and the entire interviews in general yielded meta-themes, focused on broader aspects of interviews and some interpretive analysis in order to consider more deeply participants' perceptions and attitudes not spoken explicitly. All themes and meta-themes are described below.

The final step was to find appropriate language to portray the themes representing participants' experiences and perceptions. Another member check was done with the themes identified. Participants who were contacted⁶ reported that the themes as expressed to them were largely consistent with their feelings and perceptions of the atonement at that time, with some minor modifications.

RESULTS

The specific content themes categorized as "negative" included participants' perceptions and attitudes that were consistent with traditional views of perfectionism as outlined above. Those considered to be "positive" were inconsistent with the traditional outlooks and behaviors associated with perfectionism.

NEGATIVE THEMES

Self-loathing/inherent badness. Self-condemnation and criticism were some of the most frequently reported attitudes among participants. They seemed to have a general sense of being unworthy and undeserving. These attitudes were often held in spite of participants' level of accomplishments or the strength of their support network. They reported feeling unworthy of God's mercy as offered in the atonement. Participants also reported feeling undeserving of almost anything good, such as love from others, forgiveness, or self-confidence. The following is an example from the interviews:

Participant: I just thought I had an inherent badness and that I was just flawed. Something was wrong with me. I was sent to earth bad (laughs). I felt I had done

so many things wrong and so many things bad, despite knowing what was right, that I was done. I felt like I had used up all of my repentance processes, so I was not worthy of the atonement.

Unidentified needs/unclear boundaries. Participants reported having little or no ability to ask for their needs/wants or to say no to others. They also seemed to feel a strong obligation to meet the needs of those around them and to protect others from any potential harm. The very idea of having needs was viewed by some as evidence of some shortcoming and was therefore seen as inappropriate. The following participant statement illustrates this perception:

Participant: I think mostly it is that we are told to be perfect. I think especially women take that [commandment to be perfect] too literally because it does not mean now. (Laughs) I think that we do, we feel we have to be everything. We have to do everything and be everything. Granted, people who are not members of the Church can think the same thing, but I think that [members of the Church] get that messed up. ... I feel I need to be that perfect person and be strong . . . I think a lot of times especially women and mothers feel "I have to be perfect and I have to be the one here to help everyone." They lose themselves and don't deal with their issues and their emotions.

Negative views of God. Participants reported feeling fearful of God's feelings toward them. Some reported feeling that God would be critical and harsh toward them, particularly when they made mistakes. Others feared God would be distant and uninterested in their lives. One participant expressed it somewhat humorously:

Participant: Every once in a while [God] will glance over His shoulder and see that "Oh, she's fallen again. Well, she'll have to get back up on her own." That's the way it was before [beginning her recovery]; no help offered. . . . [Later in interview] If you did something and repented, you weren't supposed to do it again. If you did it again, in my mind that was really bad, even worse than the time before. Heavenly Father would be even more mad at you then and ya know, smack you in the back of the head.

Extreme self-reliance. Perhaps the theme that best represented perfectionistic ideals was a seemingly exaggerated desire for self-reliance. Participants reported an unrelenting drive to do everything they did exceptionally well and to rely solely on themselves and their own efforts in doing so. There was a consistent push to do things better or to do more than they had before. One of the interviewees expressed the following:

Participant: I knew what I was supposed to be doing, and if I know it, then why am I not doing it? If I'm sitting here right now and I have the choice between watching TV and reading the scriptures and I choose watching TV, then I'm not doing all I can. I remember thinking that always, even as a little girl. I remember hearing that in a talk, "Are we doing all we can?" . . . I remember that heavily impacting me and thinking, "Whoa! I'm really not doing everything I can." . . . So it was too overwhelming. It was just too hard. There were too many things. . . . It seemed like everything was monumental and how can I do it all?! It seems impossible."

Avoidance/numbing out. A theme mentioned by participants was to avoid emotions, their own weaknesses, and painful realities through emotionally escaping or "numbing out." The difficulties they faced led them to avoid their real concerns through a variety of escape strategies. Participants mentioned faking happiness to themselves and to others; some became involved in various addictions and destructive behaviors in addition to the eating disorder. A participant responded to the interviewer's probe as follows:

Interviewer: Let's suppose for a minute that you do mess up. Aside from the primary answer, what role would Jesus Christ's atonement play in your screwing up yet again?

Participant: I think I'd be numb to it right now. I wouldn't allow myself to feel it. I have desensitized myself to it right now.

Interviewer: Why is that?

Participant: Because I'm just not wanting to acknowledge anything right now. I don't know. . . . I'm tired of feeling so drained and so--on a yo-yo.

Burn out/hitting rock bottom. Participants reported feeling deep discouragement and feeling "burned out" with their frequent failures in trying to perform perfectly. Many reported "hitting rock bottom" when they did not have energy to keep trying the same old approach, knowing it would fail. However, they also did not know how to proceed. Some reported that only after they had hit rock bottom were they genuinely open to alternative approaches. An interviewee expressed this discouragement:

Participant: At first I was able to improve myself, as I thought, so things were going great. Then it just became too much, and I couldn't handle it anymore. I was so tired and run down. I was running on three to four hours of sleep a night and exercising like a mad woman. I just couldn't do it any more. I was the relief society president twice during that time and had some pretty tough stuff. I thought I was going crazy (laughs). I'm like, I can't take this anymore!

POSITIVE THEMES

Positive themes were identified representing participants' genuine perceptions of Jesus' atonement as they made progress in their recovery from the eating disorder. It was clear during the course of the initial and follow-up interviews that participants continued to struggle with perfectionism even as they reported these positive themes. Experiencing these positive feelings was for most participants quite contrary to what they had felt for so long and continued to feel much of the time.

Personal openness/sincerity. A willingness to be open, vulnerable, courageous and genuine accompanied clinical progress for many participants. It was clear that women who were willing to sincerely and openly face their difficulties and make efforts to improve made significant progress. One participant explained her progress in this way:

Participant: I'm open with my parents and with my family. I try really hard to tell people how I'm feeling, to let them know how I really feel or how I really am doing, so that I can point that out and change it if it's not what should be going on. . . .

When I'm not keeping secrets, I feel like I can grow or I can move forward, and so I feel like it has brought me closer to God, being honest, being willing to search for help and stuff.

Acceptance of self and mistakes. Participants who were tolerant of their mistakes reported and demonstrated more feelings of peace and happiness in their lives. They showed an ability to take a step back and see mistakes from a balanced perspective rather than blowing them out of proportion. An interviewee affirmed her personal journey toward self-acceptance:

Participant: I think a huge part of it was realizing that I am not a terrible person. Figuring out that those [mistakes] were separate [from her core] and really figuring out that the core was not the mistake, helped me a lot. Just realizing that I'm not, really internally, I'm not a bad person. Tolerance. . . . having tolerance for [others] and empathy for them, you realize maybe I'm not so terrible and I'm doing it for the right reasons.

God is Loving/Caring/Merciful. Participants spoke of feeling that God was behind them and cheering them on, whether they made mistakes or not. They reported feeling that God was patient and loving rather than harsh and critical. Several participants reported experiences of feeling their prayers answered and perceiving God's love and understanding of them in their struggles. Although only peripherally mentioned in the data, participants reported an increase in feelings of support, not just from God, but from family and friends as well. A participant shared the joy of these feelings:

Participant: Heavenly Father and Christ are more of a friend to me now. I can talk to them like I can talk to anybody else because they do care about me and they do love me. I like to be able to just talk to them, even about what I did during the day, letting them know how I felt about things, even if I made mistakes. I can say, "Oh! I did this and I wish I wouldn't have done it this way."

Surrender/acceptance of grace. Participants' responses represented in this theme showed that they were willing to admit their shortcomings and acknowledge their inability to overcome them alone. This surrender required humility, which opened participants to accept help from God rather than leaving them alone in their efforts to change. This experience seemed to have been quite important in their ability to change. A participant expressed the struggle and the progression:

Participant: I decided it was His will and I really believed it. Before, I would hit rock bottom and I would say, "OK, I really do need Your help." Then for a little while I would try to focus on that and really seek His help. Then two weeks later I was back trying to do it my way again. So the difference was that I said, "OK, it's Your will" and I meant it. I was serious about it. You can fall back again, but you have to get right back on track. I would have a bad day, and then I would pray to Him and say, "OK, I'm not doing this again. I'm not going back to my way so help me get back to yours," and I really meant it. I really wasn't looking for other solutions at all. I wasn't looking for other people's way of healing or getting better. . . . I couldn't do it until I really turned it over.

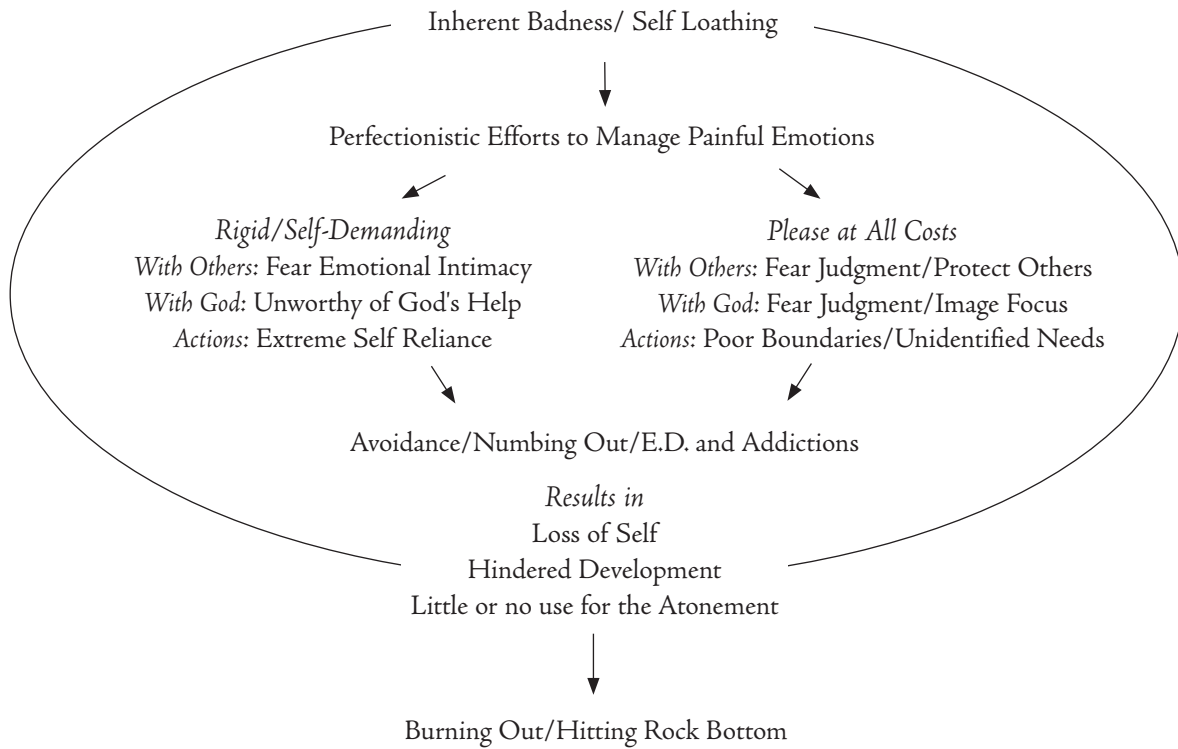
DISCUSSION

The flowchart model presented in Figure 1 was created by interpretive analysis considering the specific themes and content described above. It is also based on the perceptions and attitudes that the participants shared about the process of change. During the interviews participants tended to speak in "before/after" language. When asked questions, many responded, "Do you mean how I feel now or how I used to feel?" Participants spoke of their life before they started their recovery in contrast with their life after they began their recovery. These contrasting perspectives, shared throughout the interviews, gave the researchers considerable insight into the participants' perceptions of the process of healing and recovery. Although it is not identified above as one of the themes to be discussed, the researchers regard the before versus after pattern as a major meta-theme of the interviews.

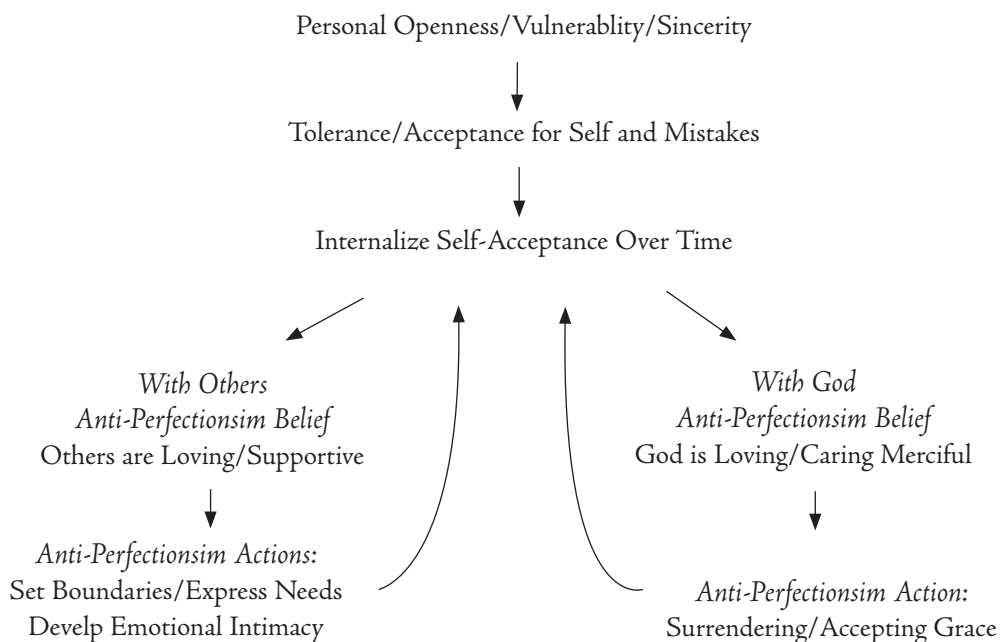
The flowchart in Figure 1 should not necessarily be interpreted as a linear model that flows cleanly from a starting point to an ending point. For example, many participants cycled through some stages of this process numerous times before moving on to later stages. This model was not necessarily represented in every participant's responses; rather, the model is an overview of a pattern of responses that represents participants' common perceptions and beliefs about perfectionism, the atonement, and themselves as they struggled with their eating disorders and worked through the process of recovery.

FIGURE. 1: CYCLE OF PERFECTIONISM AND RECOVERY FROM PERFECTIONISM CYCLE MODELS

Cycle of Perfectionism



Recovery from Perfectionism Cycle



THE CYCLE OF PERFECTIONISM

Inherent badness/self-loathing. There was no theme more consistently reported or more meaningful to the participants' current feelings than self-criticism, self-doubt and intolerance for failings. The present study lends strength to the notion that those ascribing to perfectionistic ideals have strong tendencies toward self-deprecation that often foster deep feelings of inadequacy and unacceptability. The findings from this study indicate that this tendency was much more than a peripheral issue to these women as it influenced their self-perceptions. It was one of the core components of their perceptions of themselves and their role in the world.

It seemed that no effort was ever sufficient to compensate for their feelings of failure. This feeling caused participants to have difficulty accepting the atonement in their lives and to feel uncomfortable being benefited by something they did not believe they deserved. Ulrich et al. (2000) spoke of such beliefs among perfectionists. These authors reported that "perfectionistic tendencies in most clients, LDS or not, often mask deep seated feelings of shame, low self-esteem, worthlessness, and deficiency originating in shaming and abusive experiences in childhood" (p. 197).

Relative to self-deprecation, Frost et al. (1990) reported that "the psychological problems associated with perfectionism are probably more closely associated with these critical evaluation tendencies than with the setting of excessively high standards" (p. 450). The practice of holding to high standards and striving to meet them was not necessarily as problematic as the self-perceptions participants held. Having such negative feelings about themselves was understandably painful and often left participants believing they were doing something wrong to foster the emotional pain they were feeling.

Perfectionistic efforts to manage painful emotions. Participants all believed perfectionism was the answer to their feelings of inherent badness, a belief common to any who endorse perfectionism. But participants responded in various ways as they attempted to alleviate their pain and to take control of what many believed they were doing wrong that was causing that pain. Some became very rigid and demanding of themselves, while others turned to pleasing God, family, and peers as a means of feeling personal value. Many participants combined both approaches. These two reactions to perfectionism are somewhat similar in that they both

focus on accomplishments and excellence, either as evaluated by themselves or as seen by others, as a means of managing their painful emotions and fostering a greater sense of control. These approaches are also similar in that both are exhausting and offer no long-term hope for change, often leaving participants feeling greater discouragement.

Rigidity/self-demanding emotions and behavior. Rigidity was perhaps the most common behavior participants used to manage painful emotions. This rigidity seemed to be an attempt to prove to themselves and possibly to others that they could effectively manage their lives, temporarily reducing feelings of self-deprecation.

In this rigidity, relationships with others seemed burdensome. Participants tended to close themselves off from others, fearing more demands would be placed on them if they were open to others. Some participants felt a certain pride in being isolated and alone in their perfectionism efforts. Inevitably, this would result in fears of emotional intimacy—fears of being genuine, open, and vulnerable with others, increased emotional isolation from others. In their relationships with God, the extreme rigidity and self-demands seemed to be centered on their strong feelings of being unworthy of God's love, help, and grace. They needed to prove their worth through being perfect. This resulted in distance from God—feeling that he was disapproving of them at a core level increasing their feelings that they were inherently bad.

Having extreme expectations also requires extreme vigilance; these women never allowed themselves to let their guard down. They never allowed themselves any real peace. It seemed this approach only kept feelings of self-deprecation at bay for as long as they were succeeding or felt energy to continue striving toward the standard. Since each new situation held potential for failing, participants felt compelled to reach unrealistically high standards yet again so they could avoid painful feelings of shame and inadequacy.

Interviewees often reported feeling they could and should do more than they were doing. This perspective placed them in a no-win situation. If they continued to work at an impossible goal, they would clearly fail; if they quit, they would fail. As participants inevitably fell short of their expectations of themselves, they felt more defeated, seeing that even their extreme efforts were insufficient. This left many of them struggling

between impulses to heighten efforts even more or to simply give up and accept the painful notion that they were inadequate and undeserving of happiness and contentment. Ulrich et al. (2000) made note of this tendency when they wrote, "More conservative Saints in particular are apt to presume that all problems can be solved by increasing one's devotion to the minutia of the moral code, and that their problems must therefore reflect some moral failure or inherent spiritual deficit" (p. 197). Striving to reach impossibly high standards was a salient theme in this study, which adds more support to the body of research indicating this pattern among women struggling with eating disorders.

Drive to please at all costs. The second approach participants took in their efforts to manage their painful feelings was to gain a sense of self vicariously, through others' opinions of them. In this way, negative feelings about themselves could be challenged by others' praise. The underlying belief seemed to be "I need to be certain I please others at all cost so they will like me, and then I will feel worthwhile and be happier." Participants reported going to great lengths to make sure those they associated with had only positive experiences with them, thereby increasing the chance they would receive positive feedback and reducing the chance they would be received negatively. Of course, given the intent of the pleasing behaviors, the instinct to take care of others was somewhat selfish, although few would have been aware of this. With such a need for validation, participants would almost never turn down an opportunity to help someone, no matter what was asked of them.

Participants' inability to set limits and say "no" was closely associated with their desires to please and protect others at all costs. Some reported feeling a need to rescue or protect those they cared about, such as their parents. Extreme awareness of parental expectations, fears of disappointing parents, and desire to protect parents from painful realities were deep concerns to most participants. This theme in the findings is consistent with findings of numerous researchers (Frost et al., 1990; Frost et al., 1991; Hamachek, 1978; Pacht, 1984; Rice et al., 1996; Sorotzkin, 1998), who reported a similar need among perfectionistic clients to have validation and approval from their significant others, particularly their parents.

This dynamic extended in the same way to participants feeling a strong impulse to please God at all costs. Just as they feared judgment from others, they feared judgment

from God. Since the perfectionistic pleasing at all costs has much to do with image, one way that participants attempted to please God was to try to reach unrealistic standards they felt were imposed by fellow Church members. Participants often spoke of feeling pressure to be the ideal Latter-day Saint by being exceptional in their church callings, in their roles as wife and mother, as well as in their physical appearance. Having no genuine connection with God, they seemed to believe that by meeting the ideal Latter-day Saint image they would please God. Participants were quick to mention that it was not Church doctrine that created this pressure; rather it was a pressure they felt socially and culturally from members of the Church.

There was so much focus on pleasing and being approved by others that even neutral interaction with fellow church members could be interpreted as disapproving. Wanting to avoid potential disapproval, these women felt pressure to change. Lost in these efforts to please others and to meet culturally prescribed expectations was a sense of themselves and their own needs. They had created such sensitivity to others' feelings and needs that they gave almost no attention to their own, expecting any needs they might have to be met vicariously through pleasing others. To focus on themselves was to risk displeasing others. Thus the only sense of self and connection with God was obtained through others' perceptions of them. Feeling social or cultural pressure to excel is consistent with Hewitt and Flett's (1991a) report that "socially prescribed perfectionism entails people's belief or perception that significant others have unrealistic standards for them, evaluate them stringently, and exert pressure on them to be perfect" (p. 457).

Avoidance/numbing out/eating disorder and addictions. These two approaches to managing painful emotions are somewhat similar in that both are motivated out of a desire to compensate for negative feelings participants have about themselves and to maintain at least some sense of competency and control. However, both fail to honestly address the primary concern of emotional pain and feelings of inadequacy, leading participants to even greater discouragement and exhaustion. Interviewees did not want to slip back into old patterns but also feared the emotional pain associated with addressing their concerns openly. It was at this stage that, they reported, they were inclined to become somewhat numb or detached from

the pain associated with seeing no rewarding options.

Hafen (1989) wrote of these tendencies among young Latter-day Saints attending Brigham Young University campuses in both Utah and Idaho. He reported that students were inclined to set for themselves either unrealistically high standards, very low standards, or no standards at all. By denying the existence of high standards, participants were protected from the painful guilt associated with not reaching the standard. Of course, as they worked to shut off the possibility of pain, they also shut off the potential for joy, leaving them emotionally detached and numb. Hafen continued:

Our culture has become as skillful in the art of neutralizing emotional and spiritual pain as in sedating physical pain. . . . Some people have developed an instinctive inclination to chart their course by choosing alternatives that will minimize their exposure to the uncomfortable consequences of taking life as it comes. Avoiding or escaping discomfort becomes a guiding purpose of life, as if getting around such pitfalls were the essence of a happy life. (p. 82)

In many ways an eating disorder, similar to most addictions, serves the function of numbing and/or avoiding emotional pain (Apostolides, 1998; Siegel, Brisman, & Weinshel, 1997). Thus perfectionism may be an important causal influence or at least a significant risk factor in the development of eating disorders. It must be clearly noted that eating disorders are complex biopsychosocial syndromes that are not unilaterally caused by any one risk factor such as perfectionism. For those who participated in this study, the role of perfectionism in the etiology of their eating disorders was beyond the scope of this study. But it is consistent with their responses to conclude that their eating disorder behaviors represented, at least in part, various ways to both strive for perfectionism and to numb emotional pain.

In continued efforts to avoid emotional pain, participants sometimes slipped into additional, sometimes more destructive, forms of avoidance through other addictions such as alcohol/substance abuse, self-harm, and sexual promiscuity. They seemed to seek out some form of short-term gratification to escape their emotional pains, with little consideration for damaging consequences. In extreme cases, they attempted to escape through suicide attempts.

While the two perfectionism approaches and the avoidance/numbing out process may appear to be opposites at first glance, they serve similar purposes. Each allows the individual to avoid painful emotions regarding self-worth. Perfectionism and pleasing others avoid by proving, through efforts, accomplishments, and perceptions of others, that the person is adequate and worthwhile. Becoming emotionally numb avoids increasing feelings of guilt and inadequacy simply by shutting off the possibility of feeling them. Neither perfectionism, pleasing, nor numbing really allows for an honest consideration of the potentially paradoxical issue of self-worth in the face of failings and shortcomings. For the participants interviewed, these strategies seemed to provide a distraction to help them avoid facing the problems.

Burn-out/hitting rock bottom. Participants reported that when they could no longer avoid the painful realities of their lives, they felt burned out and exhausted, that they had "hit rock bottom" and saw no way out of their current situation. After numerous cycles of greater efforts followed by failure, they would reach a point where they would give up trying—at least temporarily. But among the participants in this study, the period of burn-out and defeat was only temporary and proceeded either heightened efforts to approach things the old way, or efforts to begin moving toward more openness and vulnerability in recovery.

Blatt (1995) observed the tendency to feel exhausted and discouraged in the face of inadequacies among those who are highly perfectionistic. Burns (1980) also observed that given their exceptionally high standards, perfectionists are likely to fall short and feel "plagued by a sense of helplessness to achieve desired goals" (p. 41). He described these feelings of helplessness as "motivational paralysis," comparing them to the learned helplessness observed in dogs exposed to shocks they were unable to control (p. 41).

This tendency toward burn-out may have implications for perceptions of the atonement as well. Hafen (1989) reported:

The person most in need of understanding of the Savior's mercy is probably one who has worked himself to exhaustion in a sincere effort to repent, but who still believes his estrangement from God is permanent and hopeless. Some may simply drop out of the race, worn

out and beaten down with the harsh and untrue belief that they are just not celestial material. (p. 5-6)

Interviewees indicated that placing so much importance on flawlessness placed them in a very difficult situation. When they made mistakes, they had no tolerance for those mistakes or expectations of God's grace and mercy in correcting them. They had no path of recourse to have their failings corrected and forgiven, thus having to face the painful reality of their failings alone, with only their heightened efforts as a means of recovery—which generally led to burn out and/or hitting rock bottom. In spite of their LDS beliefs in the atonement, at this stage few participants looked for or expected to receive help from God in any real or meaningful way, even though it was their most desperate time of need. Many participants reported feeling unworthy to ask God for help.

Hesitating to seek God's help kept some of the participants emotionally safe from the risks involved with trusting and relying on God and others. Some spoke openly about their fears of really trusting that the Lord would help them. They felt that if they did not rely on Him, they would not be disappointed if He did not help them. Also they feared that by relying on Him they would be required to do more than they might be able to handle, which was very painful for those who desperately wanted to do all that was asked of them. There seemed to have been such a fear of things getting worse that avoidance was generalized, even to those things that held potential for growth and progress, such as the atonement.

RECOVERY FROM PERFECTIONISM CYCLE

Personal openness, vulnerability, and sincerity. The first stage for participants who began making real progress was to become more open, vulnerable, and sincere in their efforts to face past difficulties and genuinely work to make changes in their lives rather than remaining avoidant. Some of them spoke of coming to therapy to appease parents or peers but not really being invested in making changes they needed to make. When they developed genuine willingness to face their fears, to consider new ideas, and to make meaningful changes, they entered a distinct stage of recovery. They reported making real and meaningful progress only after they began to be sincere and earnest in their efforts to address problems. Thus the change from avoidant to vulnerable

may have been the most significant change of all.

Latter-day Saints' scriptures contain numerous references to the importance of doing things in earnest rather than just going through the motions. For example, the Book of Mormon teaches that disciples of Jesus Christ should follow "with full purpose of heart, acting no hypocrisy and no deception before God, but with real intent" (2 Nephi 31:13)⁷. LDS scriptures further indicate the importance Church doctrine places on being genuine and open specifically in the repentance and change process. When participants did not act with sincerity or willingness, they found little real hope in the atonement. However, when they were open and genuine, they tended to view the atonement as a real and meaningful resource they could use to help them face their challenges.

Tolerance/acceptance for self and mistakes. One of the first things participants had worked to change was how they viewed themselves. In the destructive cycle, many saw mistakes as a natural by-product of being a bad person. As they progressed they began to understand that a worthwhile and good person sometimes makes mistakes. Mistakes no longer seemed to be devastating setbacks, but to be normal happenings in life-learning tools necessary for progress. Some participants even reported learning to see personal characteristics that had caused them shame in the past (e.g. sensitivity) as strengths. These new, more positive and tolerant views of themselves were dramatically different than views they had held most of their lives. Thus internalizing those ideas was a process that took time.⁸

God as loving/caring/merciful. As study participants were able to see themselves differently, they were also able to understand God and His views of them differently. While they had once feared God would be harsh and critical of them, they reported an increased trust in God's love and support of them, even when they made mistakes. This view of God provided a powerful nurturing and strengthening antidote to destructive perfectionism.

Others as loving/supportive. Participants reported increased feelings of support, not from God alone, but from family and friends as well, although this was only peripherally mentioned in the data. They indicated being increasingly able to accept the anti-perfectionism position that significant others in their lives can be and often are genuinely loving and supportive regardless of failings and weaknesses.

These findings are consistent with Kirkpatrick's (1999) work, which affirms:

Beliefs about what God is like (e.g., loving and caring vs. controlling and wrathful) appear to correlate with mental models of the self, suggesting that people who see themselves as worthy of being loved and cared for are likely to view God as loving and caring. (p. 811)

Like the authors of this study, Kirkpatrick explained that relationship attitudes and styles with God are influenced by and similar to individuals' relationships with their significant others:

Beliefs about whether God is "someone" with whom one has, or possibly could have, a personal relationship are related . . . to one's model of others—that is, the degree to which attachment figures are perceived to be trustworthy and reliable relationship partners, and the degree to which close relationships are highly valued and desired. (p. 811)

Anti-perfectionism actions with others: Setting boundaries. As participants were increasingly able to trust their own judgment rather than basing their sense of worth on others' views of them, they also seemed to have an increased ability to set appropriate boundaries. For example, where they may have once felt obligated to cater to everyone around them, they were better able to set reasonable limits and say "no" when appropriate. As they did so, they reported occasional lingering feelings of guilt, but significantly less than they had in the past. Having their sense of self based in themselves rather than others seemed to give them permission to take care of their emotional needs in more healthy ways.

Anti-perfectionism actions with others: Expressing own needs. Reaching out to family, peers, and God and expressing the need for support were new and often uncomfortable experiences for participants. But as they became more accepting of themselves, they seemed to feel permission and even entitlement for expressing their struggles and needs to others.

It may be that relationship dynamics could function similarly in the reverse direction. The fact that participants began fostering loving and accepting views of themselves might have enabled them to genuinely accept that family, friends, and God could also love them and be tolerant

and accepting of them. As they began to experience those positive and accepting feelings from themselves, family, peers, and God, they began feeling real happiness in their lives. LDS scriptures teach that the love of God "is the most desirable above all things" and that it is "the most joyous to the soul" (1 Nephi 11:22, 23). Most participants reported feeling supported by God in ways they had not felt before.

It seemed that the atonement, the greatest demonstration of God's love for His children, became much more real and meaningful in participants' lives when they allowed themselves to accept the love that had been offered by God all along. The greater openness to receive God's love came not by doing more or being more perfect. It seemed to come when participants gave up the notion of being perfect and began accepting themselves in spite of their flaws, rather than waiting until after the flaws were corrected. As they let go of their pride and need for control and accepted themselves in the midst of their failings, they seemed to feel more peace, happiness, and hope. Many reported having had meaningful experiences in which they felt truly loved and supported by God.

Anti-perfectionism action with God: Surrendering/accepting grace. Feeling an increase in tolerance for themselves and their mistakes as well as an increase in love from God and others seemed to provide participants with a framework for taking risks such as trusting God and accepting His help. As they were increasingly able to open up emotionally and take risks of trust, they also felt increased peace and happiness.

One benefit was that participants were not required to make all of their desired changes alone. They could actually allow themselves the freedom to let their guard down and rely on God, family, friends, and therapists to get the help they needed. Of course, they had to be willing to give up some of their independence/self-reliance efforts, which are fundamental components of perfectionism. Many reported real difficulty turning issues over to God rather than falling back into old patterns of avoidance and trying to fix problems through perfectionism. Participants spoke openly about fearing they were unnecessarily troubling God and others, feeling that they should not lean on others to help them through their concerns.

The ability to overcome perfectionistic instincts from the past and accept God's grace and help was a very meaningful change for participants. One reason

it seemed difficult was that it inferred entitlement to that help, independent of their ability to earn it or deserve it, a belief quite contrary to perfectionism. Participants were required to adopt what was for many a completely new view of themselves, including that they were of great worth, just as they were, independent of accomplishments or failures. An LDS church leader spoke of this philosophy, asserting, "Our individual worth is already divinely established as great; it does not fluctuate like the stock market" (Maxwell, 2002).

As they surrendered their own will and began to accept grace from God, participants reported that their burdens were lightened and they were able to make meaningful progress in their efforts to overcome their difficulties. They experienced powerful and strengthening emotions when they were able to feel the love of God and others in the midst of their vulnerability and trials. This deep self-acceptance was internalized over time through their recovery. As these changes occurred, participants were able to feel more trusting of God's role in their lives and His ability to help them in real ways. This heightened their feelings of support from God, allowing them more freedom to continue to turn their troubles over to God in the future. It seemed they were experiencing something wonderful they had not experienced for years or possibly ever.

LIMITATIONS OF THE STUDY

The participants were all females, and almost all of them (95%) were in inpatient therapy at a facility that treats women with eating disorders. They were spending most of their waking hours in various types of therapy. During the research interviews, participants often spoke of things they had learned in the course of therapy that had made an impact on their religious views. Thus some of their responses during interviews may have been primed from their extensive therapy experiences. Consistent with their perfectionistic symptoms, the notion of offering the "correct" response, even though it may not have been fully internalized, was not uncommon among them. Thus their responses may to some extent reflect views of those involved in their therapy more than the broader population of women with eating disorders.

Additionally, some of the issues identified by women in this study, such as "hitting rock bottom," may have been more representative of the severity of their eating

disorders than of women with a broader range of eating disorder contexts. Before entering inpatient care, participants had usually been suffering significantly, and they had lost many freedoms in their lives by entering the facility. They may thus have been closer to hitting rock bottom due to the eating disorder disrupting their lives than to its perfectionism alone.

The length of participants' stay at the treatment facility at the time of the interviews was not examined when analyzing the results. Participants who had been there for a short time may have responded differently than those who had been there longer.

It should also be noted that this treatment facility uses a non-denominational spiritual approach to treatment. This spiritual focus may have influenced participants' responses to some degree.

It should be noted that the 95 percent of the participants who were enrolled in tightly controlled inpatient therapy were not able to engage in their destructive and avoidant behaviors (i.e. eating disorders, substance abuse, and self harm). Also they were being presented with healthy options in more powerful ways than they would in almost any other situation. This unique setting may have altered the process of change from what persons in less intensive situations would likely experience.

Several participants reported a history of physical and/or sexual abuse, which is common for those diagnosed with eating disorders, but not necessarily as common with those who endorse perfectionism. Participants who had been abused may have felt more self-critical than those who were not; thus the feeling of inherent badness/self-loathing may have been influenced more by their abusive history than by perfectionism. Finally, all of the interviews were conducted by a male, and all of the participants were female. The participants might have responded somewhat differently to a female interviewer.

CLINICAL IMPLICATIONS

Despite the limitations of this study, its findings have a number of important implications for practice. As noted previously, several theorists have suggested that Latter-day Saints can have inclinations toward perfectionism (Barlow & Bergin, 1998; Fischer & Richards, 1998; Koltko, 1990; Ulrich et al., 2000). Previously no studies have been conducted to assess attitudes and beliefs about the atonement and grace of Jesus Christ among Latter-

day Saints inclined toward perfectionism. This study offers additional insight into how perfectionism and recovery from perfectionism may play out in Latter-day Saints' attitudes toward the atonement—particularly among women struggling with eating disorders.

Clinicians observing perfectionistic tendencies among their LDS clients might first consider that perfectionism and pleasing others may be used to avoid core feelings of inadequacy and/or actual shortcomings. Clinicians may find it helpful to draw out aspects or even provide a copy of Figure 1 to clients to help them explore and better understand their own cycle of perfectionism. In addition, clinicians may find it useful to help clients take risks toward becoming more vulnerable, genuine, and sincere in their efforts to change.

The pattern of participants genuinely valuing the atonement only after they began facing their concerns was a meaningful clinical finding. Prior to genuinely facing concerns, participants seemed either to give little thought to the atonement or to consider it with such strong feelings of guilt and shame that it was an unappealing option. Before facing issues openly, participants felt almost no benefit from the atonement, and, depending on the level of guilt and shame in their relationship with God, may have even felt hindered by reminders of the help offered to God's children that they did not feel worthy to receive.

Many of the participants believed that God's help was to be earned. When they were already feeling overwhelmed, they had little interest in or ability to work harder to earn God's help. Their understanding that they must do all that they could do before receiving God's grace kept them from accessing the promised grace because they never felt like they had done all they could do. Thus clinicians may find it necessary to help perfectionistic LDS clients understand that Jesus Christ's atonement can help them change and heal even when they are imperfect. Helping such clients fully face their fears and their dysfunctional perfectionistic beliefs may be crucial to their recovery and growth.

REFERENCES

- Apostolides, M. (1998). *Inner hunger*. New York: Norton.
- Ashby, J. S., Kottman, T., & Schoen, E. (1998). Perfectionism and eating disorders reconsidered. *Journal of Mental Health Counseling*, 20(3), 261-271.
- Barlow, S. H., & Bergin, A. E. (1998). Religion and mental health from the Mormon perspective. In H. G. Koenig (Ed.), *Handbook of religion and mental health* (pp. 225-243). San Diego: Academic press.
- Blatt, S. J. (1995). The destructiveness of perfectionism. *American Psychologist*, 50(12), 1003-1020.
- Book of Mormon*. (1981). Salt Lake City, UT: The Church of Jesus Christ of Latter-day Saints.
- Burns, D. D. (1980). The perfectionist's script for self-defeat. *Psychology Today*, November, 34-52.
- Creswell, J. W. (1998). *Qualitative inquiry and research design: Choosing among five traditions*. Thousand Oaks, CA: Sage Publications.
- Denzin, N. K., & Lincoln, Y. S. (2000). Introduction: The discipline and practice of qualitative research. In N. K. Denzin and Y. S. Lincoln (Eds.), *Handbook of qualitative research* (2nd ed.; pp. 1-28). Thousand Oaks, CA: Sage Publications.
- Doctrine and Covenants*. (1979). Salt Lake City, UT: The Church of Jesus Christ of Latter-day Saints.
- Fairburn, C. G., Cooper, Z., Doll, H. A., & Welch, S. L. (1999). Risk factors for anorexia nervosa. *Archives of General Psychiatry*, 56, 468-476.
- Fischer, L., & Richards, P. S. (1998). Religion and guilt in childhood. In J. Bybee (Ed.), *Guilt and children* (pp. 139-155). San Diego: Academic press.
- Frost, R. O., Lahart, C. M., & Rosenblate, R. (1991). The development of perfectionism: A study of daughters and their parents. *Cognitive Therapy and Research*, 15(6), 469-489.
- Frost, R. O., Marten, P., Lahart, C., & Rosenblate, R. (1990). The dimensions of perfectionism. *Cognitive Therapy and Research*, 14(5), 449-468.
- Hafen, B. C. (1989). *The Broken Heart*. Salt Lake City, UT: Deseret Book Company.
- Halmi, K. A., Sunday, S. R., Strober, M., Kaplan, A., Woodside, B. D., Fichter, M. et al. (2000). Perfectionism in anorexia nervosa: Variation by clinical subtype, obsessiveness, and pathological eating behavior. *American Journal of Psychiatry*, 157(11), 1799-1805.
- Hamachek, D. E. (1978). Psychodynamics of normal and neurotic perfectionism. *Psychology*, 15, 27-33.
- Hardman, R. K., Berrett, M. E., & Richards, P. S. (2003). Spirituality and ten false pursuits of eating disorders. *Counseling and Values*, 48, 67-78.
- Hewitt, P. L., & Flett, G. L. (1991a). Perfectionism in the self and social contexts: Conceptualization, assessment, and association with pathology. *Journal of Personality and Social Psychology*, 60(3), 456-470.

- Hewitt, P. L., & Flett, G. L. (1991b). Dimensions of perfectionism in unipolar depression. *Journal of Abnormal Psychology*, 100(1), 98-101.
- Hewitt, P. L., & Flett, G. L. (1993). Dimensions of perfectionism, daily stress, and depression: A test of the specific vulnerability hypothesis. *Journal of Abnormal Psychology*, 102(1), 58-65.
- Hewitt, P. L., Flett, G. L., & Ediger, E. (1995). Perfectionism traits and perfectionistic self-presentation in eating disorder attitudes, characteristics, and symptoms. *International Journal of Eating Disorders*, 18(4), 317-326.
- Bible Dictionary. (1979). In *The Holy Bible*. Salt Lake City, UT: The Church of Jesus Christ of Latter-day Saints.
- Kirkpatrick, L. A. (1999). Attachment and religious representations and behavior. In J. Cassidy & P. R. Shaver (Eds.), *Handbook of attachment: Theory, research, and clinical applications* (pp. 803-822). New York: The Guilford Press.
- Koltko, M. E. (1990). How religious beliefs affect psychotherapy: The example of Mormonism. *Psychotherapy*, 27(1), 132-141.
- Kvale, S. (1996). *Interviews: An introduction to qualitative research interviewing*. Thousand Oaks, CA: Sage Publications.
- Maxwell, N. A. (2002, May). Consecrate thy performance. *Ensign*, November, 36-38.
- Pacht, A. R. (1984). Reflections on perfection. *American Psychologist*, 39(4), 386-390.
- Packer, M. J. (1985). Hermeneutic inquiry in the study of human conduct. *American Psychologist*, 40(10), 1081-1093.
- Rice, K. G., Ashby, J. S., & Preusser, K. J. (1996). Perfectionism, relationships with parents, and self-esteem. *Individual Psychology*, 52(3), 246-260.
- Richards, P. S., & Bergin, A. E. (2000). *Handbook of psychotherapy and religious diversity*. Washington, DC: American Psychological Association.
- Richards, P. S., Owen, L., & Stein, S. (1993). A religiously oriented group counseling intervention for self-defeating perfectionism: A pilot study. *Counseling and Values*, 37, 96-104.
- Siegel, M., Brisman, J., & Weinshel, M. (1997). *Surviving an eating disorder: Strategies for family and friends*. New York: HarperCollins.
- Sorotzkin, B. (1998). Understanding and treating perfectionism in religious adolescents. *Psychotherapy*, 35(1), 87-95.
- Srinivasagam, N. M., Kaye, W. H., Plotnicov, K. H., Greeno, C., Weltzin, T. E., & Rao, R. (1995). Persistent perfectionism, symmetry, and exactness after long-term recovery from anorexia nervosa. *American Journal of Psychiatry*, 152, 1630-1634.
- Ulrich, W., Richards, P. S., & Bergin, A. E. (2000). Psychotherapy with Latter-day Saints. In P. S., Richards & A. E., Bergin (Eds.), *The handbook of psychotherapy and religious diversity* (pp. 185-209). Washington, DC: American Psychological Association.
- Vohs, K.D., Bardone, A. M., Joiner, T. E., Abramson, L. Y., & Heatherton, T. F. (1999). Perfectionism, perceived weight status, and self-esteem interact to predict bulimic symptoms: A model of bulimic symptom development. *Journal of Abnormal Psychology*, 108(4), 695-700.
- Williams, M. (1999). Family attitudes and perfectionism as related to depression in Latter-day Saint and Protestant women. In D. K. Judd (Ed.), *Religion, mental health, and the Latter-day Saint* (pp. 47-66). Provo, UT: BYU Religious Studies Center.

Endnotes

- 1 "I would that ye should be perfect even as I, or your Father who is in Heaven is perfect" (3 Nephi 12:48). "I the Lord cannot look upon sin with the least degree of allowance" (Doctrine and Covenants 1:31). See also: 1 Nephi 10:21, 1 Nephi 15:34, Alma 7:21, Alma 11:37, & Helaman 8:25.
- 2 "The natural man is an enemy to God, and has been from the fall of Adam" (Mosiah 3:19). "We know that thou [God] art holy and dwellest in the heavens, and that we [mankind] are unworthy before thee; because of the fall our natures have become evil continually" (Ether 3:2). See also 1 Corinthians 2:11-14, 2 Peter 2:12, Mosiah 16:13.
- 3 See Alma 7:11-13.
- 4 See Acts 4:12, 2 Nephi 9:41, 2 Nephi 25:20, 2 Nephi 31:21, Mosiah 3:17, Alma 34:9-10.
- 5 Some of the impressions from the interviews were written down by the researcher shortly afterward to help with recall about specific aspects of participants' responses.
- 6 Due to disconnected or different phone numbers, only 7 participants were actually contacted to receive feedback.
- 7 Other scriptures in Moroni within the Book of Mormon use the terms "real intent" and "sincere heart" to describe the way people should pray when asking for God's help. The Doctrine and Covenants also teaches that "the Lord requireth the heart and a willing mind" (D&C 64:34).
- 8 It should be noted that some of these altered self-perceptions were the focus of their therapy and may have been coached or primed responses rather than being representative of their genuine feelings. It was impossible to accurately assess the role therapy may have played in participants' responses, and therefore, their responses were assumed indicate their personal feelings.

Meditation, Christian Values and Psychotherapy

KRISTIN HANSEN, DIANNE NIELSEN, AND MITCHELL HARRIS

In recent decades meditation has been studied in psychotherapy literature and incorporated into psychotherapy treatments (see Walsh & Shapiro, 2006, for review). As therapists who find meditation compatible with our Christian-based treatment approach, we have struggled to describe the integration of meditation and psychotherapy. In this article we first describe what meditation is, then consider its mechanisms of change, use in therapy or as a complement to therapy, and utility for therapists. The authors believe, consistent with Richards and Bergin's (1997) view, that meditation is a spiritual intervention that can be used in theistically framed therapy. Ongoing research continues to explore the role of meditation in bringing emotional healing (Hamilton, Kitzman, & Guyotte, 2006) and in encouraging openness to spiritual truths, values, and connection with God (Wachholtz & Pargament, 2005).

The application of meditation to mental health treatment has increased in recent years (Epstein, 1995; Kabat-Zinn, 2003; Walsh & Shapiro, 2006). The term *mindfulness*, derived from meditation practice, now appears in several mainstream psychotherapy approaches such as Marsha Linehan's (1993) Dialectical Behavior Therapy (DBT) and Steven Hayes' (2005) Acceptance and Commitment Therapy. Kabat-Zinn (2003), Dimidjian & Linehan (2003), and others (Sega, William, & Teasdale, 2002; Shapiro & Austin, 1998) have reported benefits of meditation as a therapeutic tool for enhancing psychological health.

Meditation can be used as a solitary exercise, as an adjunct to therapy, or as a component within therapy sessions (Walsh & Shapiro, 2006). The authors of this article use and teach meditation in therapy groups and teach mindfulness in DBT groups. We also teach mindfulness and meditation skills to clients for use outside of individual therapy, and on occasion we

use it in session with our clients. As therapists with a Christian value system who utilize meditation and mindfulness skills as part of our therapeutic practice, we want to describe where we see meditation fitting into our psychotherapy in a way that does not compromise our guiding moral framework.

We begin by describing meditation. We then discuss meditation's mechanisms of change in contrast to those of psychotherapy; explore some of the ways meditation can be used within and as complement to therapy; and describe the benefits of meditation use by therapists.

Kristin Hansen, PhD, is an assistant clinical professor at Brigham Young University in Provo, Utah. Dianne Nielsen, PhD, is an associate clinical professor at Brigham Young University in Provo, Utah. Mitchell Harris is a doctoral candidate in clinical psychology at Brigham Young University. Correspondence concerning this article should be addressed to Kristin Hansen, PhD, Counseling and Career Center, 1500 WSC, Provo, Utah 84602. Email: Kristin_hansen@byu.edu.

We also provide case examples. Our discussion is from the perspective of Christian-centered therapists using meditation in, and as an adjunct to, psychotherapy. However, the content is likely to be relevant to therapists of other faiths and to secular therapists, who may, like Christian therapists, want to comfortably integrate meditation into their practice with greater awareness.

MEDITATION: EAST AND WEST

Siddhartha Gautama, the 5th Century B.C. founder of Buddhism, was believed to have achieved enlightenment through a process of inner self-understanding. For this reason he was known as the Buddha, or the "Awakened One." He did not claim divine revelation, nor did he promote a specific religion (Richards & Bergin, 1997). Rather, he preached the process of inner self-exploration in order to uncover the true self, or the *Enlightened Mind*, using the tool that has come to be known as meditation (Epstein, 1995). Buddha's following developed over time into the present day religion known as Buddhism. Buddhism, like most Eastern religions, does not promote the existence of a single Supreme Being. Instead Buddhists teach the importance of following moral and ethical pathways to find happiness and enlightenment (Richards & Bergin, 1997). Buddhism encourages followers to ask the question "Who am I?" to discover their true nature and to meditate to relieve suffering (Epstein, 1995).

At the turn of the twentieth century, William James appreciated the psychological sophistication of Buddhism and predicted it would be the psychology studied in the future (cf. Epstein, 1995). During the last century, especially since the 1960's, Western intellectuals have increasingly incorporated Eastern philosophies and practices, including meditation into psychology. In addition to James, discussants include Carl Jung, Aldous Huxley, Alan Watts, Thomas Merton, and Joseph Campbell (Epstein, 1995). Psychology has been influenced by this interest in Eastern thought, with responses that were initially wary, then were cautious, and are currently explorational, including a focus on the complementarity of meditation and psychotherapy (Walsh & Shapiro, 2006).

Walsh and Shapiro (2006) express concern that meditation birthed from an Eastern philosophy loses sophistication when interpreted through the

lens of Western theories grounded in individualism and naturalism. Even within the Western tradition, some psychologists have questioned individualism and naturalism as an appropriate grounding for psychology. These psychologists propose psychological theories that are more consistent with a spiritual rather than a material understanding of human nature (Richards & Bergin, 1997; Slife & Williams, 1995). Sharing these concerns, we, as authors, find meditation to be a valuable tool for deepening spiritual values while also deepening the therapy experience.

We utilize meditation in psychotherapy by drawing on traditions of both Eastern meditation and Western psychology, taking what we believe is truly Christian while discarding what is not. To be more specific, we utilize the meditation process toward a Christian end that *does affirm a single Supreme God of the Universe*, in contrast to an Eastern perspective that does not. We also embrace the Eastern philosophies that reject ego attachments and encourage harmonious relationships, which are strengthened by meditation. This allows us to recognize and go beyond Western materialism and individualism (Richards & Bergin, 1997; Slife & Williams, 1995).

MEDITATION: DEFINITIONS AND APPLICATION

In the research literature on meditation, Walsh and Shapiro (2006) define meditation as "a family of self-regulation practices that focus on training attention in order to bring mental processes under greater voluntary control and thereby foster general mental well-being and development and/or specific capacities such as calm, clarity, and concentration" (pp. 228-229). Holland (2004) describes two main forms of meditation. Concentrative meditators attempt to achieve calm through focusing on an object, thought or sound to the exclusion of all else. This singular focus allows the mind to become steady, to rest, and to avoid wandering. Mindfulness meditators, in contrast, emphasize insight through awareness of the present moment, a process of self-awareness that nonjudgmentally accepts everything that arises in the mind and body. Mindfulness meditation uses a changing but observable process, such as the breath, as an anchor to steady the mind.

Mindfulness skills are different from mindfulness meditation. Mindfulness skills are taught and applied to

activities of life such as eating, conversing with others, and going about daily activities (Linehan, 1993). They involve paying full attention to whatever is occurring in the present moment, observing it but not holding onto it, and then paying complete attention to the next moment (Deger, 2007). Mindfulness skills, for example, help a client in distress think and feel before engaging in self-harm (Linehan, 1993). Mindfulness skills can be taught in DBT groups, but are more easily cultivated through a regular meditation practice.

We use mindfulness meditation in our individual therapy or in our groups. When we meditate, we are mindful of our Father in Heaven and His guiding influence in our lives. We seek to meditate in His presence. Meditation involves an internal listening or observing process—in contrast to prayer, which is a conversation. When meditating we are still for as little as a few minutes or as long as hours or days depending on our goal. For example, in our meditation and anxiety group we have students meditate for 25-30 minutes before processing the experience for an hour. Miller (1993) recommends such an approach. In addition to weekly meditation in group, students are encouraged to practice 5-10-minute meditations every day when convenient.

Meditation begins by getting into a comfortable position: sitting on the edge of a cushion on a chair, lying down on the floor, or sitting with one's back pressed flat against a wall for support. Position becomes more important with a serious practice of meditation, because certain postures facilitate the flow of energy in the body, and blocked energy can be felt. The longer a person practices meditating, the greater his sensitivity to blocks in energy becomes (Flickstein, 1998). Once in a comfortable position, the meditator closes their eyes. Turning the gaze inward focuses the attention to inward experience. Senses become heightened. Initially, the meditator may at first hear every small noise in the room. Eventually, attention is turned inward toward the breath with its rhythmic flow. Efforts are made to let go of any control of the breath. The meditator directs their mind to observing the breath with a nonjudgmental attitude.

As the meditator continues to sit still, thoughts and feelings rise to the surface of awareness. To the extent that thoughts and emotions are noticed, they are labeled and let go. Any attempt to hold on to or avoid thoughts or emotions is discouraged. Instead, the meditator is encouraged to greet all that arises from within with

equanimity. A frequent experience in our meditation and anxiety group is to have students tell us, "I could not stop worrying about how I was breathing" or "I couldn't stop thinking about an exam I know I am not supposed to be thinking about." When students share these types of experiences, we express gratitude to the student for recognizing this internal experience and encourage the student to continue to observe and notice thoughts and feelings, even if the thoughts are "I shouldn't be thinking this" or "I don't want to be anxious." In summary, the practice is to simply sit still, observe, label and learn about oneself.

La Torre (2001) claims that every type of meditation practice has two similarities: focusing attention and maintaining a passive attitude towards feelings and thoughts as they arise. La Torre's emphasis on the meditator's passive attitude towards awareness, in our opinion, can create some concern for Christian therapists wanting to use meditation. Passivity implies a lack of agentic control and perhaps a giving over of one's self to forces beyond one's control. However, in our experience "passive" gives an inaccurate depiction of the meditational attitude. In fact, meditation is a completely active, agentic process. Deger (2007) describes it as "paying attention on purpose" and states that meditation is not "going into a trance, zoning out, a religious ritual, a psychedelic trip, [and] *not not thinking*" (p.2). The meditator uses agency to actively focus attention, and also uses agency in actively observing, acknowledging, and labeling thoughts and feelings. As meditation is practiced over an extended period of time, patterns of thought and emotion emerge (Epstein, 1995). Counterfeit emotion (McCullough, Kuhn, Andrews, Kaplan, Wolf, & Hurley, 2003) or negative patterns of thinking (Hamilton et al., 2006) that entice one away from a loving God become apparent as meditators shed light on their internal experience. Meditation used on one's own can be used to connect to God on a regular basis, as a ritual of sorts. When used in a Christianity-based psychotherapy treatment, it is used to help a person learn more about thoughts, feelings, behaviors and spiritual values.

MECHANISMS OF CHANGE

Psychotherapy and meditation practices have similarities and differences. Both psychotherapy and meditation are tools for improving emotional well-

being, relationships, and the ability to find meaning in life (Epstein, 1995). Meditation and psychotherapy also share common mechanisms of change from both a secular and a spiritual perspective.

Goldfried and DaVila (2005, p. 426) describe some of the key mechanisms of change in psychotherapy that transcend particular schools of thought (e.g. psychodynamic or cognitive behavioral) and allow the therapist to both facilitate relationships and utilize appropriate techniques. Positive change in a client is achieved through the use of a few or many of the following practices—a list that the authors acknowledge is most likely not exhaustive—(a) instilling positive expectations for change in the client, (b) creating optimal therapeutic alliance, (c) helping the client increase awareness as feedback is received, (d) allowing corrective emotional experiences to occur, and (e) maintaining the client's learning through continued reality testing.

Unlike psychotherapy, meditation is a solitary exercise involving individual self-reflection rather than self-reflection with the therapist or other selected individual(s). The mechanisms of change in psychotherapy occur in the context of and because of a therapeutic relationship, while in meditation changes occur in the self because of the self. Relationship factors are not relevant to the practice of meditation unless meditation is used as an intervention during, or as an adjunct to, psychotherapy. In such cases, a therapist needs a strong alliance with a client to encourage him or her to try meditation and have hope that it will be productive. Meditation provides feedback for the meditator because he is looking for feedback, knowledge, and insight gained from watching his internal world. Through such inward observing, meditators experience corrective emotional experiences (e.g., learning to sit with unpleasant feelings and not push them away), and through continued practice these experiences occur over and over again, solidifying the learning (Miller, 1993). Positive expectations are created by corrective emotional experiences. The corrective emotional experiencing that occurs during meditation requires a more detailed explanation, but first we will examine how meditation produces change on a spiritual level.

Richards and Bergin (1997), in describing a theistic approach to therapy, emphasize the use of psychotherapeutic interventions that will "help clients affirm their eternal spiritual identity, follow the influence

of the Spirit of Truth, and use the spiritual resources and influences in their lives so that they can better cope, heal, grow, and change" (p. 128). They suggest that change occurs along six dimensional constructs.

The first construct focuses on clients gaining access to their eternal spiritual core. Each of us has a mortal overlay that can obscure our *eternal core* through family and social abuses, biological deficiencies, and conditions of this mortal life. Theistically oriented therapists can help clients access their eternal spirit and gain the peace, happiness, and healing that come with such knowledge.

A second construct focuses on a client's gaining access to his or her agency when use of agency has been impaired by bad choices, others' actions, or biological influences. A third construct focuses on clients developing *integrity* rather than living in self-deception.

A faithful intimacy construct emphasizes clients developing relationships of loving intimacy, avoiding infidelity and boundary problems, which allows them to build positive mental health. Within the intimacy construct, therapists help clients and families form healing kinship ties rather than creating or living in isolation.

A fifth construct focuses on clients learning the positive use of power, influencing others for benevolent means rather than for authoritarian means that seek to control others and take away their agency. Within the power construct, therapists help individuals find opportunities for *group* and community identification and support rather than encouraging social disintegration.

A final construct supports clients developing health and human welfare values, values that lead to positive mental health outcomes rather than promoting a therapeutic climate that considers all values relative and promotes uncertainty rather than knowledge, growth, and healing. Each of the above constructs allows an individual to be open to the influence of the Spirit of God for guidance and to direction in living a mentally healthy life (pp. 101-109).

From a theistic perspective, meditation produces change along many of the dimensions Richards and Bergin propose. Meditation helps strip an individual of his "mortal overlay" or ego so he experiences greater access to his eternal spiritual identity. Through this process, many of the other qualities Richards and Bergin identify as change promoting may also occur: increased access to agency, increased integrity, increased faithfulness in

relationships with a better understanding of benevolent power, a greater desire for kinship, increased respect for the agency of others, and a greater sense of truthful values which can be guiding influences for happiness and greater connection to God.

How then does meditation help to bring about such profound changes in both spirituality and psychological functioning? We will describe the mechanisms of change in more depth. To do so, we must first discuss emotional regulation.

Theories about emotional regulation teach that healthy emotional expression brings relief (McCullough, 2003). McCullough distinguishes between adaptive, or true emotional expression, which brings relief, and maladaptive, or counterfeit emotional expression, which leaves a person feeling worse for its expression. A person who can regulate his emotions well and is successful at experiencing and expressing true emotion, can use his emotions as a signal to know how to behave effectively on both an individual and an interpersonal level. For example, he knows how to mourn when experiencing loss or how to express anger in a productive and humble way when he feels it.

McCullough (personal communication, 2004) compares emotions to water in a tap, with the tap being our ability to regulate emotion. The right amount of water coming out of the tap represents the expression of true emotion, while a flow that is too strong or too weak can be compared to the counterfeits that result from too much or too little emotional expression. Water (or emotion) that is flowing too quickly from the tap cannot be modulated cognitively and leaves a person acting impulsively. A person who has the tap too far open (over-identifying with emotion) tends to create chaotic relationships. A tap that is shut off or just dripping (too little emotional expression) leaves a person unable to connect to others on an emotional level. A person who has difficulty experiencing and expressing emotion also has difficulty experiencing the feelings of others and thus tends to have difficulty connecting in relationships. A corrective emotional experience with feedback received in meditation or in therapy helps a person learn how to better adjust the tap and gain control over emotional expression - learning to open the tap if a person has difficulty experiencing emotion or to close the tap if emotions overflow.

The research literature suggests that mindfulness

meditation enhances emotion regulation skills (Hamilton et al., 2006). In our experience, attention to thought patterns is part of what allows for corrective emotional experiences in meditation. Ruminative thought patterns can keep emotion suppressed (McCullough et al., 2003), they are a way of closing the tap. By recognizing a ruminative pattern, whether it is pleasing or distressing, the meditator is making the pattern conscious (Epstein, 1995). This allows the meditator to step outside of the ruminative dialogue and allow the blocked emotion to come to the surface. For example, the meditator might be avoiding a good feeling because of a belief that she is unworthy of good feelings, or she may be avoiding anger that might mean an unwanted confrontation. Allowing the emotion to come to the surface brings relief, healing, and a corrective emotional experience, which can also occur in therapy (McCullough et al., 2003; Miller, 1993). The only way for the meditator to continue blocking a feeling that the ruminative pattern has made conscious is to continue to consciously engage in the blocking thought pattern. This is like the rejected young woman who says she "just needs to stop thinking about her previous boyfriend" but doesn't want to stop thinking because then she will feel the sadness associated with the loss.

Sometimes becoming aware of emotion during meditation does not bring relief because the meditator has over-identified with an emotion: The tap is too far open. The emotion is functioning as a defense or counterfeit against the experience of deeper, more painful true emotion (McCullough, 2003). For example, a person may be attached to feeling sorrow as a defense against loneliness, fear, or anger. In this type of situation, rather than letting go of thought and allowing emotion, the meditator must allow the emotion to come and go, recognizing its impermanence. When a defensive or counterfeit emotion is released, a true emotion can surface that brings relief as it is experienced. In our experience we have found that meditation makes conscious links between thought patterns and emotion regulation. Other researchers are exploring similar ideas (see Hamilton et al., 2006), but further research in this area is warranted.

Experienced meditators talk of arriving at the "space between thoughts." They appreciate that training the mind through inward observation allows for a different experience of the contents of the mind and consequently

a different relationship to one's thoughts and emotions (Walsh & Shapiro, 2006). As we have described, this different relationship allows for a conscious observation of thought patterns and emotions. Walsh and Shapiro (2006) describe how awareness is refined by the "disidentification" process "by which awareness (mindfulness) precisely observes and therefore ceases to identify with mental content such as thoughts, feelings and images" (p.231). Learning to disidentify with and observe the contents of the mind is akin to what Freud called the "observing ego" (Epstein, 1995). We also compare this to Richards and Bergin's (1997) description of how the mortal overlay can cover and obscure an individual's spiritual identities. Bare attention is another term used by Mark Epstein (1995) to describe the disidentification process.

As with therapy, the improvement in emotion regulation and the disidentification with ruminative thought patterns produced by meditation have many spiritual implications for healing. Unhealthy attachments to positive and negative thought patterns may be what Paul is referring to when he discusses the "vain imaginings." (Romans 1:21; 2 Nephi 12:18). When the meditator can lay these vain images or idols aside, previously unexperienced emotion is brought to awareness. The meditator learns how to move from a state of being disconnected emotionally, or "hard-hearted" (Mark 16:14; 1 Nephi 7:8), into increased emotional sensitivity. Healthy regulation of emotion allows for the experience of "true" God-given emotions. Having access to one's true emotions helps the individual to be guided by their emotions in relationships, for example, by avoiding harmful situations and comforting those in pain. Experiencing true emotions helps one know what brings the self and others joy. Improved emotion regulation and healthy thinking bring the individual closer to the Creator, allowing her to feel the influence of the Spirit of Truth guiding her life towards those things that will bring her joy, happiness, healing, and mental well-being.

Consistent with Richards and Bergin's (1997) constructs, agency and integrity provide healing in a theistically oriented therapy. With practice, the meditator gains more ability to use his agency to engage in healthy patterns of thinking and feeling. In turn, greater access to his own agency helps him appreciate how to respect the agency of others. Intimacy is improved. Integrity is also

improved, as reality is continually tested and knowledge gained. Increased awareness makes it difficult for the meditator to go against the knowledge gained.

For example, a young woman in therapy recognized through meditation a deep loneliness she had been blocking through thinking pleasing thoughts and overindulging in pleasing foods. She was significantly overweight. Once she recognized her loneliness, the client then recognized her unhealthy pattern of thinking and eating and began to make changes. She was able to experience her loneliness rather than block it. When feeling lonely she would do something social rather than privately overeat. She experienced greater integrity as she became motivated by true feelings rather than self-protective thoughts and feelings that harmed her.

Another young woman in one of our meditation groups reported discomfort with being still and focusing inward during the meditation. Another group member shared with her his similar experience and told her how he silently screamed into the stillness while meditating. He encouraged the young woman to try this, and on another occasion she did. Afterwards, she reported to the group that she felt tremendous relief. In processing her experience with the group she recognized she had been afraid to be still and look inward because she had been repressing many angry feelings about her family. Looking inward meant recognizing her anger. Until she joined the meditation group she was constantly busying herself with distracting social activities. Silently screaming during meditation was the way she observed, experienced, and expressed her anger. Most likely this young woman's parents did not know they were causing her anger, but with this new information, she had newly acquired knowledge and could decide how she wanted to relate with her family around her anger.

Through the meditation process the mind becomes still, though the levels of stillness that can be achieved seem to be infinite. Judeo-Christian scripture teaches, "Be still, and know that I am God" (Psalms 46:10). With each meditative corrective emotional experience, the meditator gains hope and trust that more and more layers can be peeled away, and with this process greater integrity can be developed along with a increased access to the spiritual self. The meditator learns how to be still in the presence of God, and learns of God's stillness and rest, which is often hard to experience in a hurried, busy life. Thoughts and emotions come into awareness

but are no longer equal to, or capable of, consuming awareness. They are observable. The stillness allows the individual to experience truth and to know the goodness of being still.

When we ask clients to meditate, we ask that they do so with the intent of opening themselves up to their own divinity and to Heavenly Father. As they do so, meditation becomes an active yielding of their awareness to what is occurring in every moment in God's presence. The meditator begins to see what God is placing before him in every moment. Such a process changes him because he can allow himself to be changed by God and to be open to the reality God wants him to see rather than false images he creates. Such a process of yielding to God's Spirit of Truth is encouraged throughout modern day scripture, in helping us become sanctified (Helaman 3:35) and in helping us take off the "natural man" (Mosiah 3:19), or the mortal overlay referred to by Richards and Bergin (1997).

APPLICATION OF MEDITATION TO PSYCHOTHERAPY

According to Walsh and Shapiro (2006), many secular therapies combine mindfulness meditation with psychotherapeutic techniques, for example, Kabat-Zinn's (2003) well known mindfulness-based stress reduction (MBSR). Kabat-Zinn pioneered use of relaxation and stress reduction programs to treat chronic pain patients at the University of Massachusetts Medical Center (Kabat-Zinn, 1990). He uses meditation to teach patients to live more fully in the moment, not resisting pain but embracing it. Some other therapies that combine mindfulness meditation with psychotherapeutic techniques are mindfulness-based cognitive therapy for depression, dialectical behavior therapy, relapse prevention for drug abuse, mindfulness-based art therapy, acceptance and commitment therapy, and control therapy (Walsh & Shapiro, 2006). All of these therapies make some use of meditation or mindfulness as a part of their treatment.

Lau and McMain (2005) explored how cognitive and behavioral therapies can be enhanced by mindfulness meditation. MBCT (mindfulness-based cognitive therapy), which teaches mindfulness in the context of cognitive behavioral therapy, can help with depression by bringing to light negative thought patterns that lead to

relapse. MBCT "changes the awareness of . . . thoughts, rather than changing thought content" (p. 865).

DBT (Linehan, 1993) helps clients with a diagnosis of borderline personality disorder to become more accepting of their emotions and thoughts through mindfulness. Linehan describes mindfulness as a core skill, foundational for enhancing other skills, such as emotion regulation, distress tolerance, and interpersonal effectiveness. She describes a maladaptive cycle in which an individual experiences environmental overload, feelings of being overwhelmed, mindlessness, and unskillful action, which commonly result when an individual is unaware or in denial of herself or her world. All aspects of this undesirable pattern negatively impact all other components, with a self-maintaining and highly frustrating result. In contrast, an adaptive cycle includes mindfulness, skillful action, and feelings of empathy, compassion, or validation toward self and others, and helping an individual build "a life worth living." Mindfulness (self-awareness, presence and participation in the moment) allows an individual to make more adaptive choices and exercise agency more skillfully.

Meditation can be applied to psychotherapy by using it in session with a client. According to Bogart (1991), meditation serves as a "primer" for therapy, spurring "the desire for deeper self-understanding through therapy and actually leads...to an intensification of the therapeutic process" (p.385). A brief meditation, when used at the beginning of a session, can help to deepen the session by increasing a client's "here and now" focus. Clients become more present as the relaxing effects of meditation decrease anxiety and stress (Miller, Fletcher, & Kabat-Zinn, 1995; Shapiro, Schwartz, & Bonner, 1998). Being more present and less anxious can lead to a decrease in defensiveness and an increase in emotional vulnerability. Meditation and psychotherapy reinforce each other: as patients recognize thought patterns and experience their feelings in meditation, they are able to discuss those thoughts and feelings during the therapy session (LaTorre, 2001).

Meditation raises many questions that can facilitate spiritual growth in therapy: Where do thoughts and feelings come from? How can they be created? What is a person's relationship with the Divine? How can a person develop greater agency over her thoughts, feelings and behaviors? How can a person develop greater respect for the agency of others? What is the

difference between true emotion and a counterfeit emotion? Discussion of these and similar questions can help build a client's relationship with God and help the client gain more access to God's healing truth.

Clients can be taught in session how to practice meditation on their own, thus carrying the benefits of meditation into their lives outside the therapy room. A therapist can spend the first five minutes of a session briefly teaching meditation, then ask the client to meditate for about ten minutes, then describe the experience. A client's experience can provide the medium for in-session processing. Every session can begin with a brief meditation if client and therapist find it helpful.

Therapists can often be lured into a desire to appear insightful or intelligent to clients. Teaching meditation to clients puts knowledge and insight in the hands of the clients, rather than the therapist. Furthermore, the therapist will not be as likely to get in the way of knowledge and insight given to the client through God's grace and healing. Rather than offering intelligent insights to clients--insights that might even take clients away from God--therapists can teach clients to become self-introspective and to gain knowledge for themselves through this process. Therapists can teach clients to develop bare attention and to break patterns of thinking and emotion that are self-defeating and self-serving.

Aside from its use within or without the therapy relationship, a meditation practice can and does influence relationships. We have alluded to this in our prior discussion, but we want to make this point explicit. As a client develops a meditational attitude, they approach life with less judgment and more focus. Rather than engaging with others in a reactionary manner and being triggered by another's comments, a meditator is able to listen with more detachment and can be more present to another than if he were consumed by his own thoughts and emotions. The meditator's relationships improve with practice as he gains insights into how to increase intimacy with others. For example, learning to sit with silence in meditation produces an increased ability to allow silence in relationships, thus increasing awareness of the other. The therapist can extend the client's developing meditational attitude and mindfulness skills to discuss relationships and explore how to improve them. The

spiritual importance of relationships also becomes more evident to clients as they have better relational experiences resulting from meditation practice.

USE FOR CLINICIANS

Meditation is not only beneficial for clients in psychotherapy, but is also useful for clinicians. Clinicians who engage in their own meditation practice receive all of the benefits of meditation that clients do: clearer thinking, decreased stress and anxiety, increased access to emotion, increased ability to be vulnerable, increased creativity, greater access to their own psychological process without becoming self-involved, increased here and now focus, and increased ability to be attuned to clients. Mindfulness meditation may also help clinicians both model and "respond to patients with a relational attitude of acceptance and nonjudgment" (Lau & McMain, 2005, p. 867).

Maslach and Jackson (1981) have observed that clinicians in caregiving and service professions are especially vulnerable to compassion fatigue or therapist burnout. Two identified symptoms of this syndrome include emotional exhaustion and depersonalization of clients. Mindful meditation may directly reduce or prevent these symptoms. Meditation training can help therapists with burnout to revive their joy and energy in sharing more intimately with clients. They may also enjoy a deeper, more attentive level of caring for their patients, which we believe is rewarded with spiritual knowledge concerning the benevolent use of power and respect for another's agency. Approaching therapy with a meditational attitude can become a practice of mindfulness for the therapist.

Epstein (1995) discusses the benefit of meditation in developing "bare attention" for increasing a therapist's attunement to himself and to a client. When a therapist brings bare attention--the ability to better utilize his own observing ego--to a client, he becomes less reactive, as well as more impartial, nonjudgmental and open-minded. He can notice his thoughts without getting caught up in them, and he can observe emotions without running away or pushing them away. More energy is freed up to be purely present for the client, who feels relief when she experiences the bare attention of her therapist. The client can let down her guard and non-defensively share her experiences. While a skilled

therapist can help a client move past defensiveness, meditation easily helps the client feel safe. Many clients will become curious about their own nondefensiveness. Held by the therapist's bare attention, the client has the emotional space to look at their own internal patterns of thinking and feeling, thus increasing their ability to use their agency to act, think, and feel differently. As clients learn to receive this gift, they become better at giving it, and their relationships begin to improve.

Epstein (1995) gives an example of a client, Maddie, who feared her impulse to cry. She felt crying was a sign of weakness, that it was unacceptable, inappropriate, and humiliating. Consequently she had retreated into an angry, defensive position. She had become her fear. Epstein used bare attention with Maddie to observe her anger and her unwillingness to be his patient. Epstein shared this observation with Maddie, who became ashamed of her feelings and began to cry. Crying with her therapist gave Maddie a genuine experience with her emotion. Since Maddie had expressed her true feelings, she accepted them and the fact that she was resisting her sorrow and her anger at being Dr. Epstein's patient. Through Epstein's ability to model the use of bare attention, Maddie became more vulnerable, more able to sit with unwanted emotion, more humble, and more capable of intimacy. With unwanted emotion brought to the surface, Maddie now had increased choices about how she responded: she could choose to stay in therapy or she could leave.

One of the authors of this article recently used "bare attention" with a highly anxious client. The therapist chose a stance of nonjudgmental observation to help the client stay with a sadness that she had been blocking by keeping very busy. The therapist engaged the client in a short meditation to help her continue to stay with the sadness. The therapist suggested that the client both be present to herself and feel herself in the presence of Heavenly Father as she began the meditation. The client later reported that both of these suggestions provided a great relief for her. She was relieved to have permission to be with the sad part of herself and at the same time to feel the peace of being still in the presence of Heavenly Father. Always on the move, always doing, the client was surprised to consider for the first time that perhaps Heavenly Father would have wanted her to slow down, to be still, and to feel her sadness. In her hectic, sadness-avoiding lifestyle, she identified only

with her happy feelings, rather than experiencing the full range of her emotions. The client repeated things that made her feel unhappy because she could not come to terms with the real sadness she was experiencing. Once the sadness was noted, she was aware of new possibilities for new choices. She had greater freedom to change her way of thinking and behaving and to bring about a truer happiness, where sadness was truly not present. For this client, the key to greater joy was paradoxically to recognize the denied sadness.

SOME CAUTIONS

Engaging in the type of mindfulness meditation we have discussed requires some cautionary notes. The literature mentions some side effects that have been recorded, including relaxation-induced anxiety and panic, paradoxical increases in tension, decreased motivation in life, boredom, pain, impaired reality testing, confusion and disorientation, feelings of being "spaced out," depression, increased negativity, tendency to be more judgmental, and feelings of addiction to meditation (Shapiro, 1992). As one would expect, these side effects reflect where a person has become stuck in his own meditation process. For example, a person may not be able to disidentify with certain thoughts or emotions and simply observe them. Or a person may paradoxically become more judgmental or prideful due to knowledge gained from the process. Therapists should exercise caution in using meditation with clients who have a history of sexual or severe abuse, as painful memories may surface more rapidly than would be helpful to the client (Miller, 1993).

Meditation can provide a means for those who have been traumatized to access and work through memories and painful associated emotion. Should memories or strong emotion be unveiled, the therapist's form of intervention should depend on the client's level of functioning and ability to integrate the surfacing memories and emotion. Meditation may be continued, halted, slowed, or even stopped, and interactions with a therapist may be increased (Miller, 1993) depending on client needs. With any client, the therapist must exercise caution and be prepared to journey with that client along the road to healing; recognizing when the client is mired in identification with a particular thought or feeling or is tormented by a memory that unexpectedly surfaces.

Despite the cautions, the side effects of meditation

are not surprising. As one begins to meditate, an inward journey begins. As emotions or thought processes are brought to light through the discipline of meditation, a painful awareness of unhealthy patterns of thought and/or the realization of denied emotion can surface. Such awareness can lead to change if the meditator is seeking to learn from his or her experiences. Such growth, as we have noted, can be a powerful tool for therapeutic change and spiritual insight. Furthermore, recent research shows that adding a spiritual component to meditating, such as repeating a phrase like "God is peace" or "God is good", rather than repeating the phrase "I am good" or "I am happy", can lead to less anxiety and more positive moods, spiritual health and spiritual experiences (Wachholtz & Pargament, 2005). Care should be taken in how one opens oneself up in the meditation process. From our Christian perspective, we reiterate our recommendation to meditate keeping God in mind, and, as demonstrated in this paper, research shows the benefit in doing so.

CONCLUSION

Contemplating, pondering and meditating can be spiritual means for connecting with God and being present with God without the same focus of attention we have described here. We hope that the reader has understood that the type of meditation we describe is to be used as a therapeutic intervention or in personal practice with care and acknowledgement of one's values.

From our perspective, healing can only happen through the power of our loving Heavenly Father, and meditation is a gift we can bring to our clients and to ourselves for greater closeness with God. As Paul states,

Whatsoever things are true, whatsoever things are honest, whatsoever things are just, whatsoever things are pure, whatsoever things are lovely, whatsoever things are of good report; if there be any virtue and if there be any praise, think on these things (in Philippians 4:8).

Fortunately today's global communication allows access to Eastern meditative techniques. Such knowledge enhances understanding of Christian contemplative traditions, which have not been discussed here, and scriptural references to meditation, pondering, and contemplation. Meditation provides a tool or spiritual intervention (Richards & Bergin, 1997) that can be

used to enhance psychotherapy outcomes, increase therapists' mental well-being, and bring value conflicts to the surface; its effectiveness demonstrates the need for discernment of Christian values in Eastern philosophy and Western psychotherapy.

REFERENCES

- Bogart, G. (1991). The use of meditation in psychotherapy: A review of the literature. *American Journal of Psychotherapy*, XLV, 383-413.
- Craven, J.L. (1989). An analogue study of the initial carryover effects of meditation, hypnosis and relaxation using native college students. *Biofeedback Self-Regulation*, 16(2), 157-165.
- Dimidjian, S., & Linehan, M. (2003). Defining an agenda for future research on the clinical applications of mindfulness practice. *Clinical Psychology: Science and Practice*, 10, 166-171.
- Deger, P. (2007). *Mindfulness: Principles and applications for healthcare professionals*. Wisconsin: PEPSI, LLC.
- Epstein, M. (1995). *Thoughts without a thinker*. New York: Basic Books.
- Flickstein, M. (1998). *Journey to the center*. Boston: Wisdom Publications.
- Hamilton, N. A., Kitzman, H., & Guyotte, S. (2006). Enhancing health and emotion: Mindfulness as a missing link between cognitive therapy and positive psychology. *Journal of Cognitive Psychotherapy: An International Quarterly*, 20(2), 123-134.
- Hayes, S.C. (2005). *Get out of your mind & into your life: The new acceptance & commitment therapy*. Oakland, CA: New Harbinger Publications, Inc.
- Holland, D. (2004). Integrating mindfulness meditation and somatic awareness into a public educational setting. *Journal of Humanistic Psychology*, 44, 468-484.
- Kabat-Zinn, J. (1990). *Full catastrophe living: Using the wisdom of your body and mind to face stress, pain and illness*. New York: Delacorte.
- Kabat-Zinn, J. (2003). Mindfulness-based interventions in context: Past, present, and future. *Clinical Psychology: Science and Practice*, 10, 144-156.
- La Torre, M. (2001). Meditation and psychotherapy: An effective combination. *Perspectives in Psychiatric Care*, 37(3), 103-106.
- Lau, M. A., & McMain, S. F. (2005). Integrating mindfulness meditation with cognitive and behavioral therapies: The challenge of combining acceptance- and change-based strategies. *Canadian Journal of Psychiatry*, 50 (13), 863-867.
- Linehan, M. (1993). *Cognitive-behavioral treatment of borderline personality disorder*. New York: Guilford Press.

- Maslach, C., & Jackson, S. E. (1981). The measurement of experienced burnout. *Journal of Occupational Behavior*, 2(2), 99-113.
- McCullough, L., Kuhn, N., Andrews, S. Kaplan, A., Wolf, J., & Hurly, C. (2003). *Treating affect phobia: A manual for short-term dynamic psychotherapy*. New York: Guildford Press.
- Miller, J. J. (1993). The unveiling of traumatic memories and emotions through mindfulness and concentration meditation: Clinical implications and three case reports. *The Journal of Transpersonal Psychology*, 25(2), 169-180.
- Miller, J., Fletcher, K., & Kabat-Zinn, J. (1995). Three-year follow-up and clinical implications of a mindfulness-based intervention in the treatment of anxiety disorders. *General Hospital Psychiatry*, 17, 192-200.
- Perez-De-Albeniz, A., & Holmes, J. (2000). Meditation: Concepts, effects and uses in therapy. *International Journal of Psychotherapy*, 5(1), 49-58.
- Richards, P. S., & Bergin, A. E. (1997). *A spiritual strategy for counseling and psychotherapy*. Washington DC: APA.
- Segal, Z., William, J.M., & Teasdale, J. (2002). New York: Guildford Press.
- Shapiro, D.H. (1992). A preliminary study of long-term meditators: Goals, effects, religious orientation, cognition. *Journal of Transpersonal Psychology*, 24, 23-39.
- Shapiro, D., & Austin, J. (1998). *Control therapy*. New York: Wiley.
- Shapiro, S., Schwartz, G., & Bonner, G. (1998). Effects of mindfulness-based stress reduction on medical and premedical students. *Journal of Behavioral Medicine*, 21, 581-599.
- Slife, B. D., & Williams, R. N. (1995). *What's behind the research? Discovering hidden assumptions in the behavioral sciences*. Thousand Oaks, CA: Sage Publications.
- The Holy Bible*. (King James Version).
- The Book of Mormon: Another Testament of Jesus Christ*. The Church of Jesus Christ of Latter-day Saints.
- Wachholtz, A. B., & Pargament, K. I. (2005). Is spirituality a critical ingredient of meditation? Comparing the effects of spiritual meditation, secular meditation, and relaxation on spiritual, psychological, cardiac, and pain outcomes. *Journal of Behavioral Medicine*, 28(4), 369-384.
- Walsh, R., & Shapiro, S.L. (2006). The meeting of meditative disciplines and western psychology: A mutually enriching dialogue. *American Psychologist*, 61(3), 227-239.

Relationships Among Literacy, Church Activity and Intrinsic/ Extrinsic Religiosity in a Utah Sample of Latter-day Saints

BRUCE BREWER, LANE FISCHER, DENNIS WRIGHT,
GUY DORIUS, AND RICHARD CLUFF

The authors conducted two studies of the relationship between literacy and LDS church activity. Consistent with existing literature, Study 1 revealed a significant positive zero-order correlation between reading ability and church activity. The authors concluded that lower reading ability might be a deterrent to church attendance. Study 2 added the predictors of intrinsic and extrinsic religiosity in a multiple regression format. Study 2 revealed that in the presence of the other predictors only intrinsic religiosity significantly predicted church activity. Intrinsic religious motivation was found to overcome the barrier to church activity associated with poor literacy.

Why should a client's church attendance be of concern to a psychologist or psychotherapist? One reason is that church activity has been identified in epidemiological studies, meta-analyses, and consensus reports as a predictor of numerous physical and mental health variables (Gillum, King, Obisesan, & Koenig, 2008; Hackney & Sanders, 2003; McCollough, Hoyt, Larson, Koenig, & Thoresen, 2000; Matthews, Koenig, Thoresen, & Friedman, 1998). Musick, House and Williams (2004) analyzed the mortality rates of 3,617 respondents over an eight-year period and found church attendance to be associated with a 30-35% lower rate of mortality than non-attendance. After analyzing a wide range of mediating and moderating variables, they concluded that their estimates and those of others concerning the positive effects of church attendance on mortality were not unrealistically high—that church attendance could be shown to benefit physical and mental health. They stated,

Whatever the rationale for the effect, these findings suggest that failure to adjust for private religious activity

and other religious factors may underestimate the effect of service attendance on mortality. We must consider whether there are special attributes of attendance at religious services per se that are protective against mortality. (pp. 208-209)

Musick et al. (2004) proposed several aspects of church worship that might contribute to the documented health benefits. One hypothesis was that church services in which congregants participate actively and actually

Bruce Brewer is a US Army chaplain and principal at Maeser Preparatory Academy in Lindon, Utah. Lane Fischer is an associate professor of Counseling Psychology and Special Education at BYU. Dennis Wright is a professor of Religious Education at BYU. Guy Dorius is an associate professor of Religious Education at BYU. Richard Cluff is a professor of Psychology at BYU-Idaho. These studies were supported by a generous grant from Religious Education at Brigham Young University. Correspondence concerning this article should be addressed to Lane Fischer, PhD; 340 MCKB; BYU, Provo, UT 84602; (801) 422-4200; lane_fischer@byu.edu

produce the service rather than merely observe it result in greater sense of community, self-esteem, and well-being. Such a hypothesis has particular application to a church with a lay ministry like the LDS church in which every member is expected to accept designated responsibilities within their ecclesiastical unit.

It is probable that the variable church attendance is a complex construct consisting of multiple mechanisms and pathways that enhance health. Research findings generally suggest that church attendance predicts good mental health, but the relationship is not always so simple—an observation apparent for the past 40 years. Early research on church activity was very confounding. For example, Allport and Ross (1967) were puzzled to find that churchgoers were more prejudiced toward African Americans and Jews than were non-churchgoers (Adorno, Frenkel-Brunswik, Levinson, & Sanford, 1950; Allport & Kramer, 1946; Gough, 1951; Rosenblith, 1949). Additional studies revealed that these findings were not related to education level (Demereth, 1965; Stouffer, 1955; Struening, 1963).

Activity in a church where equality, brotherhood, compassion, and human-heartedness are taught seemed incongruous with prejudice. Allport and Ross' first contribution to resolving the paradox was to note the curvilinear nature of the relationship: Non-churchgoers and frequent churchgoers who attended more often than once per week were less likely to be prejudiced. It was the irregular churchgoers who were more likely to be prejudiced. Allport and Ross defined frequent churchgoers as those "people who receive something of special ideological and experiential meaning." They explained the contrast, "Irregular, casual fringe members, on the other hand, regard their religious contacts as less binding, less absorbing, less integral with their personal lives" (p.434).

From that construction, Allport and Ross then introduced the concepts of extrinsic and intrinsic motivation to attend church. The term extrinsic motivation was used to indicate motivations which are instrumental and utilitarian, possibly serving as a bridge to the core values and ultimate interests of the person. "Persons with this orientation may find religion useful in a variety of ways—to provide security and solace, sociability and distraction, status and self-justification" (p.434). The contrasting motive, intrinsic motivation, is characteristic of people who "find their master motive in religion." Allport and Ross explained:

Other needs, strong as they may be, are regarded as of less ultimate significance, and they are, so far as possible, brought into harmony with the religious beliefs and prescriptions. Having embraced a creed, the individual endeavors to internalize it and follow it fully. It is in this sense that he lives his religion. (p.434)

While church attendance may be generally associated with health, naturally occurring barriers to church activity exist as well. For example, Gruber and Hungerman (2008) very cogently demonstrated that the repeal of blue laws prohibiting Sunday commerce decreased religious attendance, with a concomitant increase in risky substance use among adolescents who had previously been active in church.

Poor literacy may be another naturally occurring barrier to church activity. Literacy and religion are historically linked. Sacred texts contain high levels of symbolism, the interpretation of which requires literacy abilities beyond simply reading words on a concrete level. Thus high functional literacy is necessary for full participation by churchgoers in most denominations. In 1993 the National Adult Literacy Survey (NALS) sampled over 26,000 American adults' literacy in three domains and found that roughly 20% of adults had minimal literacy abilities (as cited by Irwin, Kirsch, Jungeblut, and Kolstad; p.13). Later, in 2007, Kutner, Greenberg, Jin, Boyle, Hsu, & Dunleavy found that prose literacy among adults ages 25-49 had notably diminished since the 1993 NALS.

Further, they cited the National Assessment of Adult Literacy (NAAL), which sampled over 19,000 American adults and concluded that 5% of those sampled were "non-literate" Poor literacy may be a particularly notable barrier to church attendance in denominations with lay ministries that require significant participation by their members. By limiting an individuals' ability to function fully within the church, minimal literacy or non-literacy may impede access to the mechanisms that enhance health.

A few studies have investigated the relationship between religious activity and literacy. Stark (1963) found a negative relationship between perceiving oneself as being an intellectual and attending church among graduate students in America. In contrast, Marty, Rosenberg and Greely (1968) found that in their American sample 41% of those with a college education attended church every Sunday, while only 33% of

those with less than an eighth grade education did so. Albrecht and Heaton (1984) investigated the question among Latter-day Saints and reported a significant positive relationship between higher education (which is associated with literacy) and LDS church activity. Albrecht and Heaton concluded:

The idea in the Mormon Church [LDS] is for every capable member to have a calling. Successful performance in these callings requires a great variety of skills including bookkeeping, teaching, organizational management, and interpersonal relations. Some of these skills are acquired through the educational system. All things being equal, we would expect education to be positively associated with the acquisition of these types of skills. As a result, people with more education may be among the first to be considered for any given calling, and they may also have greater success in their callings. Since success in one's calling is such a central aspect of church participation, the link between education and participation comes as no surprise. (p.56)

It has been questioned whether poor literacy might impede full participation in LDS religious activities. Allred (1997) investigated that question and concluded that the religious behaviors of LDS church members in a low literacy group were consistently on a lower level than those in the rest of the sample. However, Allred was unable to obtain a robust sample of the critical low-literacy group. Because only 4% of respondents were in the target group, she questioned whether she had measured lower levels of literacy very well. Given the methodological concerns involved with Allred's study, the purpose of this investigation was to more accurately ascertain the relationship between literacy and LDS church activity. Two studies were conducted to clarify the relationships.

STUDY 1

Study 1 was conducted to obtain an estimate of the correlation between literacy and LDS church activity.

METHOD

Participants. Springville, Utah was selected as the site for the initial sampling because it has a high proportion

of LDS citizens, with a wide range of socio-economic levels, educational attainments, and employment categories. Using an area probability technique, the city map was sectioned into a grid of 125 numbered blocks. A random table of numbers was then used to select blocks for sampling with the goal of surveying 200 respondents. Undergraduate research assistants went door-to-door in each selected block during the daylight hours (for purposes of safety). While the researchers did not tally how many subjects refused to participate, their anecdotal report was that the majority of people contacted in each block were willing to respond to their questionnaires.

The 200 participants included 121 females (65.5 %) and 79 males (39.5 %). In this community, door-to-door daylight-hours sampling was probably the cause of the imbalance. The age of participants ranged from 18 to 90, with a mean of 42.7 and a standard deviation of 19.9

Procedures. Following a script, the research assistants introduced themselves as conducting a 30-minute survey for the College of Religious Education at BYU. They followed a prescribed pattern. (1) They introduced themselves as student researchers from BYU and showed an identification badge and letter of introduction on university letterhead. (2) They asked if the respondent at the door was a member of the LDS church. (3) They attempted to alternate between male and female respondents at each home if at all possible. (4) They explained the religious nature of the survey, the reading skills test, and the time required to complete the survey. (5) They explained that responses would be anonymous and that no one else from the church or university would be contacting them after completion of the survey. (6) Respondents who agreed to participate were each given a copy of the survey. (7) The student researchers read every survey question orally, and respondents marked their answers privately on the hard copy. (8) Researchers then administered the reading test. (9) They placed the reading test and survey in an envelope and sealed it.

Measures. Researchers administered a questionnaire that included demographic information and 14 questions regarding church activity to be marked on a five-point (1-5) Likert scale. Activity items included such questions as "I attend Priesthood Meeting or Relief Society" (Very Often, Often, Sometimes, Rarely or Never). Activity items were summed to create a total activity score, with

higher scores representing higher church activity.

The Wide Range Achievement Test (WRAT3) reading subtest was also administered to each of the 200 participants. The WRAT3 reading subtest is a standardized word recognition test that is commonly used in research settings as a measure of general reading ability (Wilkinson, 1993). During the WRAT3 reading subtest respondents were handed a card with 42 words ranging in difficulty from the word in to the word terpsichorean. Respondents then orally read each word while the researchers assessed the accuracy of their decoding and pronunciation. The total number of words decoded and pronounced correctly was converted to a standard score for each respondent.

RESULTS

All 200 participants completed the WRAT3 and the demographic section of the questionnaire. Because they omitted one or more of the activity questions, 15 of the respondents were excluded from some analyses. An adequate range of literacy was represented in the sample. Participants' reading scores on the WRAT3 ranged from 27 (second grade equivalent) to 57 (post high school equivalent), with a mean of 47.4 (high school equivalent) and a standard deviation of 5.9. The average reading ability in this sample is similar to the WRAT3 norm of 48.9 for the median age group of 35 years (Wilkinson, 1993: p 93). Activity values ranged from a minimum of 14 to a maximum of 60, with a mean of 44.97 and a standard deviation of 11.84.

To test for possible bias in reading ability according to age, a Pearson Product Moment Correlation Coefficient was calculated and found to be not significant [$r(198) = 0.05$, $p = 0.48$], indicating no systematic bias.

To test whether there was a correlation between reading ability and church activity, another Pearson Product Moment Correlation Coefficient was calculated. This resultant coefficient was strong and positive [$r(183) = 0.45$, $p < 0.001$], indicating significant association between reading ability and church activity. Better readers were significantly more likely to have higher church participation and vice versa.

CONCLUSIONS

The results of Study 1 were consistent with the findings of Albrecht and Heaton (1984) and Allred (1997). Literacy was shown to be strongly related

to church activity. Poor literacy could certainly be interpreted as a barrier to church attendance. The high demand to read privately in preparation for church services or aloud during services could lead to resistance to attend. The likelihood of embarrassment could easily lead to decreased attendance. It would be difficult to interpret the correlation in the other direction, that low attendance was a barrier to literacy. The authors then questioned whether religious motivation (intrinsic and/or extrinsic) would be significant covariates that might further clarify the findings in Study 1.

STUDY 2

Study 2 was conducted to assess the relationship between literacy and LDS church activity in the presence of intrinsic and extrinsic religious motivation.

METHODS

Participants. Rather than resample blocks or skew the areas sampled, the researchers reviewed the cities in Utah County to identify a city that would have demographics similar to Springville. After they had evaluated several cities, Spanish Fork, Utah emerged as the best match. The same procedure for randomly identifying blocks and interviewing LDS volunteer participants that was used in Study 1 was employed also in Study 2.

Because the questionnaire had been extended with a new variable, religious motivation, not all participants completed every item on the survey. Using a conservative list-wise deletion of data, only the 157 participants who completed every item were eventually included in the final analysis. Of the 157 participants, 106 were female (67.5%) and 51 were male (32 %). As with the earlier study, the daylight-hours sampling procedure probably resulted in over-representation of females in this community. The ages of participants ranged from 18 to 82, with an average of 35.41 and a standard deviation of 14.69.

Measures. Using classical item analysis procedures, researchers evaluated the questionnaire to refine the activity variable. Of the original 14 activity items, 12 clustered together with good item-to-total correlations. Thus, two items were discarded as not fitting with the others. The items removed were "I read the scriptures by myself" and "I pray privately."

Respondents were administered the demographic questionnaire, the revised 12-item church activity instrument, and the Wide Range Achievement Test (WRAT3) reading subtest, as in Study 1. In addition, all participants completed the Religious Orientation Scale (ROS; Allport & Ross, 1967), a widely recognized measure of religious motivation. The ROS results in two scores: intrinsic orientation and extrinsic orientation. Respondents can score high or low on either or both the intrinsic and extrinsic scales. A two-by-two matrix of types can be produced, but most research considers the scores separately. Intrinsic religiosity is characterized by an interest in religion for its own sake, reflecting an individual's response to the spiritual meaning of life's experiences without regard to any particular doctrine per se. Extrinsic religiosity is characterized by religious observance motivated by a sense of social obligation or viewed as a means to further one's social or political interests. Extrinsic religiosity tends to be more instrumental in achieving some non-religious goal. The ROS intrinsic subscale has been shown to be psychometrically sound, with internal consistency coefficients ranging from .79 to .84. The ROS extrinsic subscale is less psychometrically sound, with internal consistency coefficients ranging from .54 to .62 (Richards, 1994). Concurrent validity studies of the ROS have resulted in validity coefficients as high as .76 (Donahue, 1985; p. 405).

RESULTS

Respondents in this study showed an adequate range of literacy. Participants' reading scores on the WRAT3 reading subtest ranged from 32 (third grade equivalent) to 58 (post high school equivalent), with a mean of 49.9 (high school grade equivalent) and a standard deviation of 4.2. The average reading ability in this sample was similar to the WRAT3 reading norm for the median age group of 35 years. Activity scores ranged from a minimum of 12 to a maximum of 60, with a mean of 45.72 and a standard deviation of 11.64. Participants' intrinsic scores ranged from 11 to 45, with a mean of 36.55 and a standard deviation of 6.15. Participants' extrinsic scores ranged from 14 to 47, with a mean of 27.76 and a standard deviation of 6.03.

To test whether there was any bias in reading ability according to age, a Pearson Product Moment Correlation Coefficient was calculated. The resulting

coefficient was not significant [$r(198) = -0.13$, $p = 0.06$] and indicated no systematic bias.

Regression analyses were conducted which included zero-order correlations, multiple regression, and partial correlations to understand how literacy and religious orientation might predict church activity separately, together, and in the presence of each other. As seen in Table 1, the zero order correlation between WRAT3 reading scores was consistent with the outcome of Study 1: A significant positive relationship was found between literacy and church activity [$r(155) = 0.242$, $p < 0.001$]. Similarly, at zero-order both intrinsic and extrinsic ROS scores were significantly related to church activity. Intrinsic scores were positively related to church activity [$r(155) = 0.730$,

$p < 0.001$], while extrinsic scores were negatively related to church activity [$r(155) = -0.258$, $p < 0.001$]. A multiple regression analysis was conducted with WRAT3 reading scores and intrinsic and extrinsic ROS scores entered as a block of predictors. A significant regression equation was found [$F(2,154) = 61.76$, $p < 0.001$], with an R^2 of 0.54. When scores were considered in the presence of each other, however, only the ROS intrinsic score carried any significant predictive ability [Partial $r = 0.70$, $t = 12.28$, $p < 0.001$]. Neither ROS extrinsic scores nor WRAT3 reading scores provided significant predictive weight in the presence of intrinsic religiosity.

DISCUSSION

Church activity has generally been associated with good physical and mental health outcomes. However, there may be naturally occurring barriers that impede church activity and access to the benefits of attendance. The simple zero-order correlations between literacy and church attendance in the present studies seem to indicate that low literacy has been such a barrier.

In both of these studies, lower literacy predicted lower church attendance at the zero-order. Because many functions and activities of the LDS Church involve high literacy demands, one might predict that a low level of literacy would be accompanied by a feeling of social discomfort and fear of exclusion from the group. However, including a measure of religious orientation in the second study clarified the picture. The partial correlations revealed that intrinsic religious motivation substantially overshadowed whatever zero-

order correlation existed between literacy and church attendance.

It might be argued that the zero-order correlation of 0.73 between activity and intrinsic religiosity is so strong that the instruments were almost identical in their language. A content analysis of the two instruments, however, revealed that the questions were in fact quite dissimilar. For example, the activity scale included items like "I participate in Church social activities" or "I attend Priesthood Meeting or Relief Society." The ROS asked participants to respond to statements like "What religion offers most is comfort when sorrows and misfortunes strike" or "Religion is especially important to me because it answers many questions about the meaning of life." If the instruments are measuring the same constructs, they are doing so from different perspectives. It might be argued that by definition intrinsically religious individuals would be expected to be more active as a result of their religiosity. However, intrinsic religiosity is rationally characterized by private worship and private meaning-making rather than public church participation. People with a primarily intrinsic religious orientation find their controlling motives in religious and spiritual experience. The principles of brotherhood, self-discipline, and communion with the Infinite are central across the ecologies of their lives.

The results of Study 2 suggest that although literacy is involved with aspects of worship and participation in the LDS church, less literate members will maintain their church activity if their religious motivations are intrinsically driven. However, the fact that intrinsic motivation overwhelmed the predictive ability of literacy at the zero-order should not be interpreted to mitigate the need to enhance literacy among church members to

facilitate their activity and engagement in the salutary benefits of church attendance. Beyond pragmatic functions like accessing the correlated curriculum, policy and procedures manuals, and the "code" of the group, enhanced literacy also allows access to the sacred texts which may enhance members' spiritual experiences. In the interest of members' overall development, advances in literacy are not contraindicated. It is likely that internally motivated members of the church who enhance their literacy will tend to enhance their overall social and religious experience as well.

Given the nature of regression analysis, no causal statements are justified here. However, in efforts to enhance the probabilities of increased health through whatever mechanisms are actually operating, some efforts are reasonable. Perhaps the easiest place for the LDS Church to effect change would be to enhance literacy among its members and thereby enhance access to church activity for those with low literacy skills. This would seem to increase opportunities to those who possess high intrinsic religious motivation and would remove a potential barrier for those who are less intrinsically motivated. It does not appear to be as easy to directly manipulate intrinsic religious motivation. As the Bible states, "The wind bloweth where it listeth, and thou hearest the sound thereof, but canst not tell whence it cometh, and whither it goeth; so is every one that is born of the spirit" (John 3:8). Since efforts to increase literacy enhance access to sacred texts as well as the probability of successful leadership experiences and group membership in a lay church, strengthening literacy may be a way of using something that can be observed and manipulated to influence and enhance something which cannot.

Table 1
Prediction of Church Activity by Literacy and Religious Orientation

	R^2	F	p	Zero Order Correlation	p	Partial Correlation	t	p
Model	0.54	61.76	.000					
ROS Intrinsic				.730	<0.001	.703	12.28	<0.001
ROS Extrinsic				-.258	<0.001	-.122	-1.525	0.129
WRAT3				.242	<0.001	.092	1.141	0.256

REFERENCES

- Adorno, T. W., Frenkel-Brunswick, E., Levinson, D. J., & Sanford, R. N. (1950). *The authoritarian personality*. New York: Harper.
- Albrecht, S. L., & Heaton, T. B. (1984). Secularization, higher education and religiosity. *Review of Religious Research*, 26, 43-58.
- Allport, G. W., & Kramer, B. M. (1946) Some roots of prejudice. *Journal of Psychology*, 22, 9-39.
- Allport, G. W., & Ross, J. M. (1967). Personal religious orientation and prejudice. *Journal of Personality and Social Psychology*, 5, 432-443.
- Allred, E. R. (1997). Literacy and church activity: A study of adult members of the Church of Jesus Christ of Latter-day Saints in the United States (Doctoral dissertation, Brigham Young University, 1997). *Dissertation Abstracts International*, 58, 03.
- Demereth, N. J. (1965). *Social class in American Protestantism*. Chicago: Rand McNally.
- Donahue, M. J. (1985) Intrinsic and extrinsic religiousness: Review and meta-analysis. *Journal of Personality and Social Psychology*, 48, 400-419.
- Gillum, R. F., King, D. E., Obisesan, T. O., & Koenig, H. G. (2008). Frequency of attendance at religious services and mortality in a U.S. national cohort. *Annals of Epidemiology*, 18(2), 124-129.
- Gough, H. G. (1951). Studies in social intolerance: IV. *Journal of Social Psychology*, 33, 263-269.
- Gruber, J., & Hungerman, D. M. (2008). The church versus the mall: What happens when religion faces increased secular competition? *The Quarterly Journal of Economics*, 123(2), 831-860.
- Hackney, C., & Sanders, G. (2003). Religiosity and mental health: A meta-analysis of recent studies. *Journal for the Scientific Study of Religion*, 42, 43-55.
- Irwin, S., Kirsch, A., Jungeblut, L. J., & Kolstad, A. (1993). *Adult literacy in America: A first look at the findings of the National Adult Literacy Survey* (NCES 93275). Washington, DC: U.S. Department of Education. Retrieved May 20, 2008, from <http://nces.ed.gov/pubs93/93275.pdf>
- Kutner, M., Greenberg, E., Jin, Y., Boyle, B., Hsu, Y., & Dunleavy, E. (2007). *Literacy in everyday life: Results from the 2003 National Assessment of Adult Literacy* (NCES 2007-480). Washington, DC: U.S. Department of Education, National Center for Education Statistics. Retrieved May 20, 2008, from <http://nces.ed.gov/Pubs2007/2007480.pdf>
- McCollugh, M. E., Hoyt, W. T., Larson, D. B., Koenig, H. G., & Thoresen, C. (2000). Religious involvement and mortality: A meta-analytic review. *Health Psychology*, 19, 211-222.
- Marty, A., Rosenberg, S., & Greeley, A. (1968). *What we believe? The stance of religion in America*. New York: Meredith Press.
- Matthews, D. A., Koenig, H. G., Thoresen, C. E., & Friedman, R. (1998). Physical health. In D. B. Larson, J. P. Swyers, M. E. McCollough (Eds.), *Scientific research on spirituality and health: A consensus report* (pp.31-54). Rockville, MD: National Institute for Healthcare Research.
- Merrill, R. M., & Salazar, R. D. (2002). Relationship between church attendance and mental health among Mormons and non-Mormons in Utah. *Mental Health, Religion & Culture*, 5(1), 17-33.
- Muskic, M. A., House, J. S., & Williams, D. R. (2004). Attendance at religious services and mortality in a national sample. *Journal of Health and Social Behavior*, 45, 2, 198-213.
- Richards, P. S. (1994). Religious devoutness, impression management, and personality functioning in college students. *Journal of Research in Personality*, 28, 14-26.
- Rosenblith, J. F. (1949). A replication of "Some roots of prejudice." *Journal of Abnormal and Social Psychology*, 44, 470-489.
- Stark, R. (1963). On the incompatibility of religion and science: A survey of American graduate students. *Journal for the Science of Religion*, 3, 3-20.
- Stouffer, S. A. (1963). *Communism, civil liberties, and conformity*. Garden City, NY: Doubleday.
- Struening, E. L. (1963). Antidemocratic attitudes in a Midwest university. In H. H. Remmers (Ed.), *Anti-democratic attitudes in American schools*. Evanston, IL: Northwestern University Press.
- Wilkinson, G. S. (1993). *Wide Range Achievement Test*. Wilmington, DE: Wide Range, Inc.

*The Mission of the Association of Mormon Counselors
and Psychotherapists is to provide information and support
for the LDS mental health professional*

THE ASSOCIATION OF MORMON COUNSELORS AND PSYCHOTHERAPISTS

Rebecca Jorgensen, PhD – *President*
Shane Adamson, LCSW – *Vice-President*
Rebecca Gray – *Treasurer*
Lorilee Critchfield, PhD – *Board Member*
Robert L. Gleave, PhD – *Board Member*
A. Dean Byrd, PhD – *Board Member*
Dianne Nielsen, PhD – *Board Member*
J. Douglas LeCheminant, LCSW – *Board Member*
Lisa Leavitt, PhD – *Board Member*
Michael D. Howard, LPC, LMHC – *Leadership Council*
Michael Boman, LCSW – *Leadership Council*
Rick Hawks, EdD – *Website*
Burton C. Kelly, PhD – *Historian*
Jonathan Chamberlain, PhD – *Assistant Historian*
Jan Scharman, PhD – *General Authority Representative*
Vera Ivie – *Convention Photographer*
George Paulsen, MEd – *Area Coordinator Assistant*
Dana Templeman, MSW – *LDSFS Representative*
Dennis Ashton, LMSW – *Convention AV Representative*
John Livingstone, EdD – *Convention AV Committee Chair*
Kristine Plummer, LCSW – *Convention Consultant*
Kristin Douglas, MA, LPC, BCIAC – *Network Editor*
Matt Reiser, MA – *Student Representative*
Andrea Davis – *Executive Secretary*

AMCAP Bylaws, Article 1, Section 2, as amended October, 2007: AMCAP shall exist: a) As a non-profit (501c(3)) corporation that provides education as well as professional development and interaction for mental health professionals who adhere to the principles and standards of The Church of Jesus Christ of Latter-day Saints (hereafter "the Church") in both personal life and professional practice. b) To teach and promote ethical standards, models, theories, therapeutic methods, and research consistent with the doctrines of the Church. c) To promote fellowship and facilitate collaboration among LDS mental health professionals in advancing the mission of AMCAP. ***AMCAP supports the principles and standards of the Church of Jesus Christ of Latter-day Saints; however, it is an independent professional organization which is not sponsored by, nor does it speak for, the Church or its leaders.***

Disclaimer: All methods, techniques, procedures, applications, theories, research findings and other information described in this Journal, and the views and opinions expressed by the authors, are their own and do not necessarily represent those of the Association of Mormon Counselors and Psychotherapists, nor does their publication in the AMCAP Journal represent or constitute endorsement or promotion of the methods, techniques, procedures, applications, theories, treatments, research or findings by the Association of Mormon Counselors and Psychotherapists. The Association of Mormon Counselors and Psychotherapists expressly disclaims any warranties or guaranties, express or implied, and shall not be liable for damages of any kind in connection with the methods, techniques, procedures, applications, theories, treatments, research findings and other information described or the views and opinions expressed.



Association of Mormon
Counselors and Psychotherapists
P.O. Box 225 Kaysville, UT 84037

<http://www.aamcap.net>

PRESORTED
STANDARD
U.S. POSTAGE PAID
SLC, UT
PERMIT NO. 5407