

CLARIFICATIONS TOWARD THE RAPPROCHEMENT BETWEEN RELIGION AND PSYCHOLOGY

WILLIAM P. ANGERS

Fordham University

The rapidly increasing literature, both popular and professional (6), concerning the relationship between religion and mental health, and the fact that many universities are offering courses in psychology of religion, and divinity schools have added pastoral counseling to their curricula, bear witness to concentrated efforts toward cooperation between the two disciplines. Since religion and psychology both concern themselves with man's mental processes and actions, although for different reasons, and since an ever greater number of both clinical psychologists and clergymen are concerned with helping individuals toward a more positive attitude to life, very considerable common ground is given the two approaches. But before a more complete rapprochement can be achieved, more mutual knowledge of the two disciplines is needed, together with a clearer distinction between the fields of guidance appropriate to each and an appreciation of their common ground. It is the purpose of this paper to point out some of these needed clarifications.

NEED FOR MUTUAL KNOWLEDGE AND UNDERSTANDING

1. There is a considerable lack of knowledge of one discipline about the other, and between differing factions within each discipline. There are not only different concepts within each field, but also multiple variations of interpretation of these concepts.
2. There is the semantic difficulty. A word may be used by both, psychologists and theologians, but have two entirely different meanings, and such differences in meaning may be found among members of the same discipline as well (3, 4).
3. Though members of either discipline may be aware of the great range of opinions within their own field, they often assume unanimity within the other field and apply a blanket judgment to it.
4. Personal prejudice may be another hindrance. If, for example, the psychologist is unable to be objective about his own religious beliefs or lack of them, his ability to respect the religion of others is open

to question. The psychologist prejudiced against a particular religion can complicate matters detrimentally for the client of this faith and for himself if he allows this prejudice to operate in his therapy. The same is true if a psychologist tries to force his beliefs upon a patient.

DIFFERENTIATION AND COMPLEMENTATION OF THE TWO DISCIPLINES

The role of religion and its variations in the life of the individual must be understood by the psychologist so that he can distinguish between a healthy and a sick religious expression. The definition of religion given in the psychological dictionary is: "a system of attitudes, practices, rites, ceremonies, and beliefs by means of which individuals or a community put themselves in relation to God or to a supernatural world and often to each other, and from which the religious person derives a set of values by which to judge events in the natural world" (5, p. 456). An individual who understands and lives his religion makes God the focal point of his life. Thus oriented, the individual has a positive goal and usually finds the strength and patience to cope with life's problems. This gives him the means of promoting his own mental health. Jung goes even so far as to consider religion the *sine qua non* of mental health. "Among all my patients . . . there has not been one whose problem in the last resort was not that of finding a religious outlook on life. It is safe to say that every one of them fell ill because he had lost that which the living religions of every age have given their followers, and none of them has really been healed who did not regain his religious outlook" (7, p. 334).

1. The psychologist and the clergyman should be trained to identify a personal problem as psychological or religious. As professionals in each field know, there is a grave danger to the individual when the psychologist sets himself up as a religious adviser, and vice versa. The psychologist's role is to help the individual discover within himself his constructive capacities to give his life added meaning. This can be best achieved by helping the individual to regain his own moral and religious values rather than imposing a new set on him. For instance, sin, guilt, and grace are very real to people of some faiths and must be respected by the psychologist, whatever his own faith.

2. Psychologists and clergymen must at times work together. For instance, a psychologist might be counseling a delinquent to help him become an asset to the community. The technique of the Adlerian psychologist would revolve around strengthening the delin-

quent's social interest (2, Chapt. 13), but he would not present him with a blueprint of how to act. To do so is the role of the clergyman. The delinquent would no doubt be helped through the psychological process to gain insight into the reasons for his behavior. When this is not enough to keep him from repeating the same mistakes that brought him to the counselor, then religious elements would be indicated in the therapy to continue the strengthening process at the point where psychology left off.

3. On the other hand, religion is of therapeutic aid only to those individuals who have a definite belief and practice it, or who are seeking a belief. However, psychologists must be cautious in evaluating the presence or absence of religion in a given individual.

4. The problems of ethics may be common ground for the psychologist and the clergyman. While every religion includes by definition a set of ethics, the converse is not always true, in that ethics may be conceived and practiced independently of religion. An ethical person is not always religious, and a religious person is not always ethical. It is therefore possible for the psychologist and the clergyman, in their respective approaches, to help the individual toward an ethical system which will guide his life in healthy and virtuous ways (8).

5. The question often arises whether psychological guidance could be substituted for religious guidance. Adler has been quoted as having said: "Psychology makes a very good religion if one is unfortunate enough to have no other" (9, p. 254). Psychology as used here must be understood to mean a set of attitudes and beliefs based on psychological insights. The psychologist can say that the idea of God is a psychological phenomenon which can be generally observed. It corresponds to the human need to set for oneself a goal of perfection in the future to which one can aspire. Thus Adler could say: "Whether the highest effective goal is called God or . . . as we call it, the pure idea of social interest, it always reflects the same ruling, completion-promising, grace-giving goal of overcoming" (2, p. 461). Besides Adler's views on the substitution of one guidance for the other, there are, of course, other answers offered by the different schools of thought in both disciplines.

In conclusion, both psychologist and clergyman have an invaluable contribution to make to the understanding of the psychological processes of man's approach to God and to socially constructive goals (1). Thus, the achievement of the clarifications pointed out in this paper

would bring about not only a rapprochement between the two disciplines but also a fuller comprehension of the total personality, the whole man. And this would be in keeping with the *Zeitgeist*.

REFERENCES

1. ADLER, A. Religion und Individualpsychologie. In E. Jahn & A. Adler. *Religion und Individualpsychologie*. Vienna: Rolf Passer, 1933. Pp. 58-92.
2. ADLER, A. *The Individual Psychology of Alfred Adler*. New York: Basic Books, 1956.
3. ANGERS, W. P. The challenge of Individual Psychology to Catholic psychologists. *Amer. Cathol. Psychol. Ass. Newsltr. Suppl.*, 1958, 36, 1-2.
4. ANGERS, W. P. Individual Psychology and Catholics. *Homiletic pastoral Rev.*, 1958, 58, 1057-1059.
5. ENGLISH, H. B., & ENGLISH, A. C. *A comprehensive dictionary of psychological and psychoanalytic terms*. New York: Longmans, Green, 1958.
6. FEIFEL, H., BECKER, R. J., BOISEN, A. T., MORTIMER, O., WATSON, G., JOHNSON, P. E., & MOWRER, O. H. Symposium on relationships between religion and mental health. *Amer. Psychologist*, 1958, 13, 565-569.
7. JUNG, C. G. *Psychology and religion*. New York: Pantheon, 1958.
8. PAPANEK, HELENE. Ethical values in psychotherapy. *J. Indiv. Psychol.*, 1958, 14, 160-166.
9. RASEY, MARIE I. Toward the end. In C. E. Moustakas (Ed.), *The self*. New York: Harper, 1956. Pp. 247-260.