

Psychotherapy and Religious Values

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Clinical and Pastoral Implications of the Ministry of Martin Luther and the Protestant Reformation

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Abstract: While acknowledging that many theological beliefs and religious practices facilitate mental health and emotional stability, the major purpose of this paper is to identify and demonstrate that some of these same beliefs and practices can also contribute to mental instability if understood incorrectly and practiced unwisely. The unique content of this paper is a pastoral, clinical, and historical narrative concerning the relationships of religious belief and practice with the mental health of 16th century priest, pastor, professor, and Protestant reformer Martin Luther. Specifically, this paper discusses Luther's personal experiences with mental and emotional instability, including depression and scrupulosity, and explores ways that discovering and embracing the principle of grace assisted him in dealing with his own mental and emotional crises. This paper also treats ways that both psychological and theological understanding of the relationship between the doctrinal principles of grace and human volition can assist both health care professionals and clergy to provide effective care to those they serve.

Keywords: grace, legalism, antinomianism, Martin Luther, scrupulosity, mental health

Introduction

The relationship between religion and mental health has long been an issue among social scientists, clinicians, religious leaders, and lay individuals. Religious affiliation, attitudes, and a wide range of theological beliefs and religious practices have been both praised and criticized in relation to the well-being of humankind.¹ My first experience with this dialogue was as a child being reared in a religious home with an agnostic grandfather. His goal was to train me in his image—an intelligent man who understood religious belief and practice as evidence of weakness. My grandfather would have rejoiced in the words of Albert Ellis: “The elegant therapeutic solution to emotional problems is to be quite unreligious . . . The less religious they are, the more emotionally healthy they will tend to be.”² Paradoxically, the more my Grandfather challenged my nascent faith, the stronger my interest became to understand both the positive and negative influences of religion in my own life and in the lives of others.

Another major influence in my life, especially in my academic and pastoral work, has been Professor Allen E. Bergin, whose name and career we honor with this publication. Few if any have done more to

¹ See for example Bergin, “Psychotherapy and Religious Values”; Dawkins, *The God Delusion*; Ellis, “Psychotherapy and Atheistic Values”; Freud, *The Future of an Illusion*; James, *The Varieties of Religious Experience*; Stark, *The Triumph of Faith*.

² Ellis, “Psychotherapy and Atheistic Values,” 637.

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advance the work of understanding the place of religious belief and practice in the theory and practice of psychology. After first reading Professor Bergin's article "Psychotherapy and Religious Values"³ in the early 1980's as a young graduate student, I sensed the importance of learning more from this visionary man and his work. Imagine my surprise when as a young student just beginning my graduate work I received a response to my knock at Dr. Bergin's office door with a warm welcome and invitation to come inside. His invitation has been both literal and figurative, as I have entered and continued my journey following Dr. Bergin's example to contribute to "the rising prominence of thoughtful and rigorous attempts to restore a spiritual perspective to analyses of personality, the human condition, and even science itself."⁴

Reviews of research indicate that although there is evidence for positive, negative, and neutral relationships involving diverse dimensions of religion and mental health,⁵ studies reporting positive associations have the preponderance of support.⁶ While acknowledging that many theological beliefs and religious practices facilitate mental stability, the major purpose of this paper is to identify and demonstrate that some of these same beliefs and practices can also contribute to mental instability if understood incorrectly and practiced unwisely.⁷

The unique content of this paper is a pastoral and clinical narrative concerning the relationship of religious belief and mental health in the life of 16th century priest, pastor, professor, and Protestant Reformer Martin Luther. Specifically, this paper considers Luther's personal experiences with mental and emotional instability, including ways that discovering and embracing the theological principle of grace assisted him in dealing with his own mental and emotional crises. This paper also treats ways both theological and psychological understanding of the relationship between the doctrinal principles of grace and good works can lead to both positive and negative outcomes with respect to mental health.⁸

Martin Luther

Martin Luther (1483-1546), one of the founding fathers of the Protestant Reformation, began his training in the monastery as a scrupulous and conscientious Augustinian monk:

I was a good monk, and kept the rule of my order so strictly that I may say that if ever a monk got to heaven by his monkery, it was I. All my brothers in the monastery who knew me will bear me out. If I had kept on any longer, I should have killed myself with vigils, prayers, reading, and other work.⁹

Luther's words describe his early ideas concerning what was required of him as a monk and what God expected of him pertaining to his own salvation. Perhaps most significant for the purposes of this paper, his writings describe the mental and emotional consequences of his religious beliefs and actions as he understood them at the time.

One of the many doctrinal differences between the 16th century Catholic tradition, in which Luther was originally immersed, and the Protestant belief system, which he was instrumental in creating, was the difference in belief regarding the necessity of an individual's personal righteousness in the process of

³ Bergin, "Psychotherapy and Religious Values."

⁴ Ibid.

⁵ Bergin, "Religiosity and Mental Health"; Dein, Cook, Powell, and Eager, "Religion, Spirituality and Mental Health"; Judd, "Religious Affiliation and Mental Health"; Koenig, "Research on Religion"; Koenig, McCullough, and Larson, *Handbook of Religion and Health*; Levin, "Religion and Mental Health"; Miller et al., "Religiosity and Major Depression"; Moore and Leach, "Dogmatism and Mental Health"; Sloan and Bagiella, "Claims About Religious Involvement."

⁶ Hackney and Sanders, "Religiosity and Mental Health: A Meta-Analysis of Recent Studies"; Koenig, King, and Carson, *Handbook of Religion and Health*; Payne, Bergin, Bielema, and Jenkins, "Review of Religion and Mental Health."

⁷ Ellis, "Do Some Religious Beliefs Help Create Emotional Disturbance?"; Koenig et al., *Handbook of Religion and Health*; Rix, *Martin Luther*; Stifoss-Hanssen, "Rigid Religiosity."

⁸ Some of the material in this paper was adapted from a presentation given at the American Psychological Association (Division 36) Mid-Year Conference convened in March of 2015. Several of the quotations from the writings of Martin Luther cited in this paper are also included in Judd, "Sin, Guilt, and Grace."

⁹ Bainton, *Here I Stand*, 26.

salvation. Those who privilege the place of their own “good works” in this process are described as practicing *legalism*, defined as “the belief that salvation demands or depends upon total obedience to the letter of the law . . . an excessive concern for minute details of the law coupled with a neglect of its fundamental concerns, and a preoccupation with human legal traditions.”¹⁰ The doctrinal antonym of *good works* is *God’s grace*. The antonym of *legalism* is *antinomianism*, which has been described as “a form of spiritual anarchy, which rejects the law as having any place in the Christian life.”¹¹ Antinomianism has also come to be known by what German theologian and pastor Dietrich Bonhoeffer referred to as “cheap grace,”¹² which, contrasted with the principle of genuine grace or “costly grace,”¹³ will be discussed in greater detail later in this paper.

Later in his life Luther recognized the doctrinal distortions of both legalism and antinomianism as being problematic.

Both groups sin against the Law: those on the right, who want to be justified through the Law, and those on the left, who want to be altogether free of the Law. Therefore we must travel the royal road, so that we neither reject the Law altogether nor attribute more to it than we should.¹⁴

Just as Luther described both legalism and antinomianism as having salvific liability, his descriptions of his life in the monastery and the lives of some of his fellow monks and priests demonstrate that irrational beliefs and distorted religious practices can also be associated with psychological and emotional instability. Luther was an Augustinian, a priestly order named for Saint Augustine of Hippo (354–430). The Augustinians had the reputation of being morally and physically disciplined because of their strict adherence to the teachings of scripture and to the rules of their religious tradition. The Augustinians spent much of their time studying in small unheated rooms which also served as their sleeping quarters. They participated in general worship services that began between 1:00 and 2:00 a.m. and would be held at seven different times throughout the day. In addition to vows of chastity, poverty, and obedience, Luther and his fellow Augustinians gave up any right to personal possessions, believing that they were to follow the Biblical directive to have “all things in common.”¹⁵

While Luther’s own writings describe “how peaceful and quiet Satan was wont to be in the first year of being a priest and monk,”¹⁶ he began to experience feelings of anxiety and despair soon thereafter. He also reported that he felt an overwhelming sense of guilt and a compulsive need to confess his sins:

When I was a monk, I made a great effort to live according to the requirements of the monastic rule. I made a practice of confessing and reciting all my sins, but always with prior contrition; I went to confession frequently, and I performed the assigned penances faithfully. Nevertheless, my conscience could never achieve certainty but was always in doubt and said: “You have not done this correctly. You were not contrite enough. You omitted this in your confession.” Therefore the longer I tried to heal my uncertain, weak, and troubled conscience with human traditions, the more uncertain, weak, and troubled I continually made it. In this way, by observing human traditions, I transgressed them even more; and by following the righteousness of the monastic order, I was never able to reach it.¹⁷

Luther continued his work as a monk and then as a priest, but his psychological state continued to decline over the next several years. His writings reveal that the harder he and the other monks worked at being religious, the greater their psychological and emotional problems appeared to become:

I saw many who tried with great effort and the best of intentions to do everything possible to appease their conscience. They wore hair shirts; they fasted; they prayed; they tormented and wore out their bodies with various exercises so severely that if they had been made of iron, they would have been crushed. And yet the more they labored, the greater their terrors became.¹⁸

¹⁰ Manser, *Dictionary of Bible Themes*.

¹¹ Ibid.

¹² Bonhoeffer, “Theological Education at Finkenwalde,” 431-432.

¹³ Bonhoeffer, *The Cost of Discipleship*, 45.

¹⁴ Luther, “Lectures on Galatians 1535: Chapters 1 – 4,” 343.

¹⁵ Acts 4:32, King James Version.

¹⁶ Luther, “The Christian in Society,” 387.

¹⁷ Luther, “Lectures on Galatians 1535: Chapters 5-6; 1519: Chapters 1-6,” 13.

¹⁸ Luther, “Lectures on Galatians 1535: Chapters 5-6; 1519: Chapters 1-6,” 13.

Luther's attempt to overcome his problems by working to become more righteous is typical of many people of faith for whom religious belief and practice are important. Though fruitful in some ways, focusing on one's own good works and not allowing for the influence of the divine is also one of the characteristics of legalism, which can be a dynamic of what is referred to in the research literature and will be treated later in this paper as "scrupulosity."¹⁹

Nature of the Problem

Like many people whose faith in God is a central part of their lives, Luther looked to the doctrines of his religion and to his religious leaders to help him with his concerns. Specifically, he turned to the sacraments of his Church, but found that they did not provide the peace he was seeking. Reflecting on his participation in two of the Church's seven sacraments, Luther made the following personal observation: "After confession and the celebration of Mass I was never able to find rest in my heart".²⁰

Confession became an unproductive and frustrating ordeal for both Luther and those to whom he confessed. The historical record states that Luther "confessed frequently, often daily, and for as long as six hours on a single occasion."²¹ Luther's writings also noted that he confessed to several different religious leaders in the monastery on multiple occasions. He confessed most often to Johannes von Staupitz, the vicar of the Augustinian order of which Luther was a part, a man Luther considered a trusted friend:

I often made confession to Staupitz . . . He said, "I don't understand you." This was real consolation! Afterward when I went to another confessor I had the same experience. In short, no confessor wanted to have anything to do with me. Then I thought, "Nobody has this temptation except you," and I became as dead as a corpse.²²

Father Staupitz attempted to ease Luther's guilt by explaining that the sins he was confessing were not serious: "If you expect Christ to forgive you, come in with something to forgive—parricide, blasphemy, adultery—instead of all these little peccadilloes."²³ Confession to his leaders did not appear to assuage Luther's negative feelings.

Luther also described the ineffectiveness and even deleterious results of fasting from food and drink, a practice in which he often engaged for several days at a time. He wrote, "I almost fasted myself to death, for again and again I went for three days without taking a drop of water or a morsel of food."²⁴ While Luther believed that fasting from food and water was an appropriate form of worship in which Christians should engage, he also warned others that extreme fasting could "simply ruin their health and drive themselves mad."²⁵

Luther's writings also described his obsession with prayer. In addition to the personal and public prayers in which he and the other Monks were directed to participate, Luther developed personal rituals for prayer which he described as follows: "I chose twenty-one saints and prayed to three every day when I celebrated mass; thus I completed the number every week. I prayed especially to the Blessed Virgin, who with her womanly heart would compassionately appease her Son."²⁶ Similar to his experience with attendance at Mass and confession, Luther reported that instead of bringing him the peace of conscience he was seeking, the extreme fasting and prayer, "made my head split."²⁷

¹⁹ Ciarrocchi, *The Doubting Disease*; Miller and Hedges, "Scrupulosity Disorder"; Van Ornum, *A Thousand Frightening Fantasies*.

²⁰ Luther, "Lectures on Genesis: Chapters 26–30," 157.

²¹ Bainton, *Here I Stand*, 35.

²² Luther, "Table Talk," 94.

²³ Bainton, *Here I Stand*, 36.

²⁴ Luther, "Table Talk," 339.

²⁵ Luther, "The Christian in Society," 74-75.

²⁶ Luther, "Table Talk," 85, 340.

²⁷ Ibid.

Etiology and Treatment

Erik Erikson's classic work *Young Man Luther: A Study in Psychoanalysis and History* interprets Martin Luther's obsessiveness as follows: "According to the characterology established in psychoanalysis—suspiciousness, obsessive scrupulosity, moral sadism, and a preoccupation with dirtying and infectious thoughts and substances go together. Luther had them all".²⁸ Erikson, trained in Freudian psychoanalysis, believed Luther's obsessive and compulsive behavior was only a part of a more severe condition he defined as a "borderline psychotic state secondary to reawakened infantile conflicts".²⁹ Erikson's ideas expressed Freudian theory and the extensions of the Freudian interpretations of historian Preserved Smith, who described Luther's conflicts in terms of a difficult relationship with his father and the sublimation of private and forbidden sexual energy into more acceptable behavior. Smith wrote concerning Luther's maladies and successes, "The psychologists have a special name for this diversion of these impulses from sexual to professional or intellectual interests; they call it 'sublimation.'"³⁰ Capps, Cole, Erickson, and Smith, all postulate that Luther's religious and familial conflicts were at the heart of his psychological distress and, ironically, his theological acumen and pastoral success.³¹ It is beyond the purview of this paper to discuss these various theoretical perspectives in any degree of detail, but further information can be found in the work of Miller and Hedges, who treat this psychodynamic perspective and provide an overview for the etiology and treatment of obsessive-compulsive behavior from the existential, behavioral, cognitive, process addiction, and neurobiological constructs as well.³²

Psychiatrist Ian Osborn concluded that Martin Luther "suffered from two clearly discernible psychiatric disorders during his life: obsessive-compulsive disorder and major depressive disorder."³³ Perhaps a more accurate term for Luther's experience with obsessive-compulsivity is *scrupulosity*, which Miller and Hedges (a psychiatrist) describe as "a psychological disorder primarily characterized by pathological guilt or obsession associated with moral or religious issues that is often accompanied by compulsive moral or religious observance and is highly distressing and maladaptive."³⁴ The term scrupulosity does not appear in the American Psychological Association's *Diagnostic and Statistical Manual* as a formal diagnosis, but the 2015 *APA Dictionary of Psychology* includes the following definition:

[O]verconscientiousness with respect to matters of right and wrong, often manifested as an obsession with moral or religious issues (e.g., preoccupation that one may commit a sin and go to hell) that results in compulsive moral or religious observance and that is highly distressing. Although it is often also called religious obsessive-compulsive disorder, it is more typically associated with obsessive-compulsive personality disorder.³⁵

While there are studies that argue for a biological basis for both the etiology and treatment of obsessive-compulsive disorder in general and scrupulosity in particular,³⁶ the preponderance of research supports the cognitive-behavioral explanation as being the most descriptive and most effective of the various treatment options available.³⁷

²⁸ Erickson, *Young Man Luther*, 61.

²⁹ Ibid., 148

³⁰ Smith, "Luther's Early Development."

³¹ Capps, *Men, Religion, and Melancholia*; Cole, "A Spirit in Need of Rest"; Erickson, *Young Man Luther*; Smith, "Luther's Early Development."

³² Miller and Hedges, "Scrupulosity Disorder," 1047-1049.

³³ Osborn, *Can Christianity Cure Obsessive-Compulsive Disorder?* 66.

³⁴ Miller and Hedges, "Scrupulosity Disorder," 1042.

³⁵ VandenBos, *APA Dictionary of Psychology*.

³⁶ See Abramovich and Cooperman, "The Cognitive"; Chamberlain and Blackwell et al., "The Neuropsychology of Obsessive Compulsive Disorder."

³⁷ Beck et al., "Dysfunctional Beliefs"; Ponniah and Magiati et al., "An Update on the Efficacy of Psychological Therapies"; Schwartz and Stoessel et al., "Systematic Changes"; Simpson et al., "Cognitive-Behavioral Therapy."

Luther's Search For Healing

The contrasting views of William James (1842-1910) and Sigmund Freud (1856-1939) are representative of the current arguments made for and against the efficacy of religious belief and practice in understanding and treating emotional instability and mental illness. James stated,

We and God have business with each other; and in opening ourselves to his influence our deepest destiny is fulfilled. The universe, at those parts of it which our personal being constitutes, takes a turn genuinely for the worse or for the better in proportion as each one of us fulfills or evades God's demands.³⁸

Freud's writings include the familiar description of religion as "the universal obsessional neurosis of humanity" and his prediction that the years following his remarks would include a "turning away from religion" as an inevitable, and that doing so would provide a "process of growth."³⁹ While James and Freud believed religion to be causal in opposing ways, others assert that psychological disorders are not effects of religious belief and practice, but that individuals tend to express their mental and emotional confusion through those parts of their lives that are central to their identity. Former priest and psychologist Joseph W. Ciarrocchi wrote, "Cultural backgrounds [religious or otherwise] provide the scenery around which emotional problems create the drama."⁴⁰ While it is difficult to know with certainty the origin of Martin Luther's guilt, despair, and compulsivity, his writings make it clear that he was desperate to be free of what he termed, "*Anfechtungen*,"⁴¹ or what St. John of the Cross (1542-1591) described as "*the dark night of the soul*."⁴²

Catholic theology during the sixteenth century included "an individualistic view of sin" but "a corporate view of goodness."⁴³ While his beliefs would change in the years that followed as he came to comprehend the doctrine of grace, Luther in the early days of his ministry believed that while each person must be accountable for his or her own individual sins, a person could also have access to the "collective righteousness" of the those who had died having accumulated more credit for their good deeds than would be required of them at judgment day. From this perspective, one could access the collective righteousness of others for a price. According to the religious tradition at the time, the process for accessing this righteousness was by what came to be known as an *indulgence*.⁴⁴ While Luther accepted the practice of indulgences in the beginning, he would later write, "For Christ is the Ransom and Redeemer of the world, and thereby most truly and solely the only treasury of the church. But that he is the treasury of indulgences I deny until I shall be taught differently."⁴⁵ Luther also warned that "those who believe that they can be certain of their salvation because they have indulgence letters will be eternally damned, together with their teachers."⁴⁶

The Righteousness of God

The process which would enable Luther to eventually gain the peace of conscience he sought began when the vicar of the monastery he attended, Johannes von Staupitz, invited him to study for a doctoral degree and to lecture on the Bible at nearby Whittenberg University. Luther was surprised by the invitation, but accepted the opportunity and began his work with a careful study of Biblical Book of Psalms, followed by the Pauline Epistles to the Romans and Galatians. The results of Luther's diligent study and teaching of the Bible, accomplished in the context of his ongoing psychological and emotional concerns, changed his own life and the course of religious thought and practice.

³⁸ James, *The Varieties of Religious Experience*, 516-517.

³⁹ Freud, *The Future of an Illusion*, 43

⁴⁰ Ciarrocchi, *The Doubting Disease*, 12.

⁴¹ Scaer, "The Concept of *Anfechtung*," 15.

⁴² May, *The Dark Night of the Soul*, 1.

⁴³ Bainton, *Here I Stand*.

⁴⁴ McGrath, *Christianity's Dangerous Idea*, 46-47.

⁴⁵ Luther, "Career of the Reformer I," 216.

⁴⁶ Ibid., 179.

Luther's transition from despair to reconciliation is often referred to as his "tower experience," because much of the inspiration he received came in his room in the "tower" as he studied the scriptures over a period of years.⁴⁷ Luther's study was a small room in the tower of the Black Cloister in the Wittenberg monastery, which also served as his sleeping quarters.

Luther's writings included many scriptural texts that he identified as helping him gain the peace of conscience he sought, but the text he identified as the key to his personal transformation is from the New Testament Epistle of Paul to the Romans: "For therein is the righteousness of God revealed from faith to faith: as it is written, The just shall live by faith."⁴⁸ When Luther first read Paul's words, he struggled to understand the phrase "the righteousness of God." Initially the phrase angered him because he understood it to describe God as a merciless and vengeful ruler who punished the wicked. This distorted understanding led Luther to lament,

I did not love, yes, I hated the righteous God who punishes sinners, and secretly, if not blasphemously, certainly murmuring greatly, I was angry with God, and said, "As if, indeed, it is not enough, that miserable sinners, eternally lost through original sin, are crushed by every kind of calamity by the law of the decalogue, without having God add pain to pain by the gospel and also by the gospel threatening us with his righteousness and wrath!" Thus I raged with a fierce and troubled conscience.⁴⁹

The research literature reports that a person's perception of the nature of God clearly correlates with his or her mental health. Siltan, Flannely, Galek, and Ellison summarize this research by stating, "In general, the research has found that belief in a benevolent God is associated with better psychological well-being, whereas belief in a punitive God is associated with poorer psychological well-being."⁵⁰ These studies may contribute to understanding Luther's mental condition in general and his experience with scrupulosity in particular.⁵¹

Luther's initial perception of a punitive God slowly changed as he came to understand the intended meaning of the phrase "the righteousness of God."

The words "righteous" and "righteousness of God" struck my conscience like lightning. When I heard them I was exceedingly terrified. If God is righteous [I thought], he must punish. But when by God's grace I pondered, in the tower and heated room of this building, over the words, "He who through faith is righteous shall live" [Romans 1:17] and "the righteousness of God" [Romans 3:21], I soon came to the conclusion that if we, as righteous men, ought to live from faith and if the righteousness of God contributes to the salvation of all who believe, then salvation won't be our merit but God's mercy. My spirit was thereby cheered. For it's by the righteousness of God that we're justified and saved through Christ. These words [which had before terrified me] now became more pleasing to me. The Holy Spirit unveiled the Scriptures for me in this tower.⁵²

Over a period of years, Luther discovered and articulated what has come to be known as the doctrine of "justification by faith." He came to understand that the "righteousness of God" in Romans 1:17 is a description of God's goodness, grace, and mercy, not a depiction of God's anger and intention to punish. Luther's study of Paul's writings also helped him understand that God's righteousness includes a forgiveness that was freely available to him and to all who believed in God and in God's ability to strengthen, justify, and redeem.

In the years that followed, Luther taught the doctrine of justification as the "chief article of Christian doctrine": that "we must all be justified alone by faith in Jesus Christ, without any contribution from the law or help from our works."⁵³ Protestant scholar and pastor John F. MacArthur, Jr. defined the doctrine of justification as "an act of God whereby He imputes to a believing sinner the full and perfect righteousness of Christ, forgiving the sinner of all unrighteousness, declaring him or her perfectly righteous in God's sight, thus delivering the believer from all condemnation."⁵⁴

⁴⁷ See Marius, *Martin Luther*, 212-213.

⁴⁸ Romans 1:17.

⁴⁹ Luther, "Career of the Reformer IV," 36-37.

⁵⁰ Siltan and Flannely et al., "Beliefs about God," 1286.

⁵¹ Grayson, *Freedom from Obsessive-Compulsive Disorder*; Siev and Baer et al., "Obsessive-Compulsive Disorder."

⁵² Luther, "Table Talk," 193-194.

⁵³ Luther, "Word and Sacrament I," 363.

⁵⁴ MacArthur, *The Gospel According to Jesus*, 197.

What Luther had initially failed to understand—which he eventually came to see as an error in his understanding of the gospel taught by Jesus Christ and the New Testament apostles—was that eternal salvation and the peace of conscience he so desperately sought are not rewards for one's own personal righteousness, but could come only by “the righteousness of God” (grace), made freely available through the sacrifice of the Son of God. Luther eventually came to the conclusion that all the prayers he had offered, the days of fasting in which he had engaged, the countless hours of confession he had made, and the indulgences he had received could not earn God's favor, nor could they bring him the blessings of peace and redemption he sought.

Martin Luther's experiences with depression, anxiety, and obsessive-compulsive behavior mirror the lives of individuals in religious communities throughout the world. When faced with thoughts, feelings, and behaviors that become distressing, many individuals, like the young Luther, believe the answers to their problems will come if they strive to be more religious. Striving to do all one can to solve one's own problems has some merit, but if doing so excludes the grace of God, such a strategy could lead to even greater problems. Luther's experiences reveal that extreme frequency and intensity of scripture study, confession, and other such attempts to gain peace can be evidence of spiritual and psychological instability.⁵⁵

Clinical and Clerical Alliance

As Luther sought help from his religious leaders when his suffering became unmanageable, Wang, Berglund, and Kessler report that the majority of those who seek help from mental health professionals first seek help from clergy.⁵⁶ These authors also report that the majority of people in need of mental health services “are seen exclusively by the clergy, and not by a physician or mental health professional.”⁵⁷ An obvious implication of this finding is that those in need of mental health services do not receive the clinical help they require.⁵⁸

As they become increasingly aware of the unique needs of their congregants, many religious leaders are referring those in need of psychiatric or other mental health services to those who can provide the appropriate assistance.⁵⁹ A large number of clergy, however, are still hesitant to refer congregants to mental health professionals even when they judge their own training to be inadequate.⁶⁰ While there is much work to be done in helping clergy refer members of their congregations to mental health professionals, the reverse is also a concern. Mental health professionals need to be more aware of the need many of their clients have for the assistance of clergy.⁶¹ McMinn and Dominguez assert, “Both clergy and psychologists bring important skills and training to the collaborative endeavor. A synergy results that is greater than the sum of the two professions functioning on their own.”⁶²

Martin Luther's experiences with depression, anxiety, scrupulosity, sin, and grace provided the historical and theological context for the Protestant Reformation. These experiences also provide a meaningful psychological narrative for clergy, clinicians, theorists, and other social scientists to consider as we seek to relieve the suffering of those with whom we work and serve. McMinn, Ruiz, Marx, Wright, and Gilbert have stated, “It behooves psychologists to learn the languages of faith—at least in rudimentary form.”⁶³ Being aware of such terms such as *sin*, *guilt*, *grace*, and *forgiveness* and recalling selected historical and scriptural accounts such as the history of Martin Luther can help mental health professionals understand the depth

55 Collins, “Moving Through the Jungle”; MacArthur, *The MacArthur New Testament Commentary*; McMinn, “Professional Psychology”; Rehwaldt-Alexander, “Avoiding Cheap Grace.”

56 Wang and Berglund et al., “Patterns and Correlates.”

57 Ibid., 647; see also Norris and Kaniasty et al., “Use of Mental Health Services.”

58 Farrell and Goebert, “Collaboration Between.”

59 Kramer et al., “Ministers' Perceptions of Depression.”

60 Farrell and Goebert, “Collaboration Between.”

61 Curran, “The Concept of Sin”; Gorsuch and Meylink, “Toward a Co-professional Model”; Wang et al., “Patterns and Correlates.”

62 McMinn and Dominguez, *Psychology and the Church*, 166.

63 McMinn and Ruiz et al., “Professional Psychology,” 296.

of what the religious client may be experiencing.⁶⁴ Rejecting or ignoring the religious and spiritual life of a client may be tantamount to refusing what could be the key to resolving the problems for which the individual is seeking treatment.⁶⁵

Distortions of Sin and Grace

The theological teachings of sin and grace have largely been ignored and even demeaned by some mental health professionals.⁶⁶ McMinn et al. explained the importance of understanding the meaning of these principles:

Removing notions of right and wrong may provide some temporary relief from guilt, but in a Christian worldview it also precludes the possibility of grace. . . . Therapists who strip away the language of sin from Christian clients may unwittingly be taking away a source of peace and hope by foreclosing the possibility of forgiveness and grace.⁶⁷

It is also important to recognize that the teachings and interpretations of sin and grace can be distorted and thus exacerbate the concern. One of the reasons the concept of sin has generally been dismissed from the academic and clinical communities is because it has become associated in both clinical practice and research studies with dogmatism, hypocrisy, moralism, and shame.⁶⁸ Individuals who experience guilt (a sincere sorrow for what one has done) rather than a condemning sense of shame (a loathing of who one is) have been found to do much better on outcome measures of mental health.⁶⁹

The doctrine of grace, “the gift of God as expressed in his actions of extending mercy, loving-kindness, and salvation to people,”⁷⁰ can also be distorted into a relativistic justification for unjust and/or immoral acts. Dietrich Bonhoeffer (1906-1945), a Protestant pastor, theologian, and martyr, labeled this distortion as “cheap grace” and provided the following description and contrast with genuine or “costly grace”:

Cheap grace means the justification of sin without the justification of the sinner. . . . Cheap grace is the preaching of forgiveness without requiring repentance, baptism without church discipline, Communion without confession, absolution without personal confession. Cheap grace is grace without discipleship, grace without the cross, grace without Jesus Christ. . . . [Genuine] grace is costly because it calls us to follow, and it is grace because it calls us to follow Jesus Christ. It is costly because it costs a man his life, and it is grace because it gives a man the only true life. It is costly because it condemns sin, and grace because it justifies the sinner. Above all, it is costly because it cost God the life of his Son.⁷¹

Bonhoeffer’s description provides the opposing view of the “means to salvation” that Luther believed early in his ministry, illustrating how ideas often pendulate between extremes. Commenting on how both rational and irrational ideas are often identified as opposing experiential pairs, C. S. Lewis, a noted Christian scholar and writer, made the following observation:

[The adversary] always sends errors into the world in pairs—pairs of opposites. And he always encourages us to spend a lot of time thinking which is the worse. You see why, of course? He relies on your extra dislike of the one error to draw you gradually into the opposite one. But do not let us be fooled. We have to keep our eyes on the goal and go straight through between both errors.⁷²

⁶⁴ Richards and Bergin, *A Spiritual Strategy*.

⁶⁵ Plante, “What Do the Spiritual and Religious Traditions Offer the Practicing Psychologist?”; Rosmarin and Pargament et al., “Spiritual and Religious Issues.”

⁶⁶ Menninger, *Whatever Became of Sin?*; Mowrer, “‘Sin,’ the Lesser of Two Evils”; McMinn, *Why Sin Matters*..

⁶⁷ McMinn et al., “Professional Psychology,” 296.

⁶⁸ Ellis, “There Is No Place for the Concept of Sin in Psychotherapy”; Sloan and Bagiella, “Claims About Religious Involvement.”

⁶⁹ Curran, “The Concept of Sin”; Kim and Thibodeau et al., “Shame, Guilt, and Depressive Symptoms”; Lindsay-Hartz, “Contrasting Experiences”; Tangney, “Moral Affect.”

⁷⁰ Elwell and Comfort, *Tyndale Bible Dictionary*, 550.

⁷¹ Bonhoeffer, *The Cost of Discipleship*, 44-45.

⁷² Lewis, *Mere Christianity*, 186.

Assisting those we serve to understand both sin and grace and to recognize their distortions are major objectives to be considered in meaningful ministry and effective therapy.⁷³

Knowing that his treatise on grace could cause confusion concerning the importance of an individual's own good works in the process of sanctification, Luther explained, "Good works do not make a good man, but a good man does good works; evil works do not make a wicked man, but a wicked man does evil works."⁷⁴ In this same discourse, Luther also described the relationship of works to grace: "The works themselves do not justify him before God, but he does the works out of spontaneous love in obedience to God and considers nothing except the approval of God, whom he would most scrupulously obey in all things."⁷⁵ O'Neill and Schwartz provided a review of the "recent arguments and evidence implicating free will (volition) in the phenomenology and treatment of Obsessive-Compulsive Disorder."⁷⁶ Their review underscores the importance of the client or parishioner being aware of having the capacity to change and recognizing that expended efforts are part of the process of change.

Luther's improved understanding of grace allowed him to accept God's forgiveness and to focus less on his own concerns in order to address the needs of others. The following text from a letter written by Luther to a man who was having difficulty understanding grace illustrates Luther's progression from legalistically emphasizing works to fully embracing the principle of grace:

Brother, it is impossible for you to become so righteous in this life that your body is as clear and spotless as the sun. You still have spots and wrinkles (Eph. 5:27), and yet you are holy. But you say. . . But how will I be liberated from sin?" Run to Christ, the Physician, who heals the contrite of heart and saves sinners. Believe in Him. If you believe, you are righteous, because you attribute to God the glory of being almighty, merciful, truthful, etc. You justify and praise God. In short, you attribute divinity and everything to Him. And the sin that still remains in you is not imputed but is forgiven for the sake of Christ, in whom you believe and who is perfectly righteous in a formal sense. His righteousness is yours; your sin is His.⁷⁷

Conclusion

Martin Luther came to the understanding that many of the problems he faced as a young monk and the trials he continued to endure as a mature scholar, husband, father, and leader of the Reformation were given him to bring him to despair. In this despair, he learned to trust in God. Luther stated,

Here you see the reason why God besets His saints with so many trials, so that they may learn to put their trust in God. . . . We are justified through faith in Jesus Christ, because He mortifies His own in various ways to the point of despair, and then He lifts us up again, so that by experience we are compelled to say, "I did not do this, though I expended all my strength, but the hand of the Lord did it." Therefore He thoroughly afflicts us, He purifies us well so that we may learn to rely on Him completely. But this will not happen unless our presumption has been destroyed.⁷⁸

The "presumption" Luther wrote of is humankind's reliance on their own righteousness and not the "righteousness of God" (Romans 1:17) described in scripture. This theological and religious reality has meaningful implications for those who engage in the world of religion and mental health. The grace of God that Luther discovered, which is described in detail throughout his writings, had transformative power in his life and appears to have transformative power that is yet to be embraced by clinicians, many clergy, and the majority of those whom they strive to assist.

Just as we can learn from Luther's narrative of coming to understand grace, we can also be taught from his life experiences about the relationship between legalistic belief, scrupulous behavior, mental instability, and spiritual health. Contrary to those who argue against the inclusion of good works in the

⁷³ Bassett, "An Empirical Consideration"; Berlinger, "Avoiding Cheap Grace"; Bixler, "Religious Legalism"; McMinn, *Psychology, Theology, and Spirituality*; Sisemore et al., "Grace and Christian Psychology Part 1."

⁷⁴ Luther, "Career of the Reformer I," 361.

⁷⁵ Ibid.

⁷⁶ O'Neill and Schwartz, "The Role of Volition in OCD Therapy," 13.

⁷⁷ Luther, "Lectures on Galatians 1535: Chapters 1 – 4," 233.

⁷⁸ Luther, "Lectures on Isaiah: Chapters 40-66," 49-50.

process of salvation, Luther clearly taught, “After a Christian has come to faith, good works follow.”⁷⁹ Both legalism and antinomianism (distortions of good works and grace) can lead to spiritual weakness and psychological disadvantage. The appropriate relationship can strengthen. In a discussion of the dangers of distortion, Abraham Maslow stated, “Dichotomizing pathologizes. Isolating two interrelated parts of a whole from each other, parts that need each other, parts that are truly ‘parts’ and not wholes, distorts them both, sickens and contaminates them.”⁸⁰ Carl Jung taught, “The balanced co-operation of moral opposites is a natural truth.”⁸¹ President Dieter F. Uchtdorf, an apostle in The Church of Jesus Christ of Latter-day Saints, described the relationship between the doctrinal principles of grace and obedience to law as follows:

Salvation cannot be bought with the currency of obedience; it is purchased by the blood of the Son of God. . . . our obedience to God’s commandments comes as a natural outgrowth of our endless love and gratitude for the goodness of God. This form of genuine love and gratitude will miraculously merge our works with God’s grace. Virtue will garnish our thoughts unceasingly, and our confidence will wax strong in the presence of God.⁸²

Invitations for the proper relationship between the grace of God and the responsibility of humankind for their own salvation in this world and the next are not new. From the writings of the Apostle Paul in the New Testament we read,

For by grace are ye saved through faith; and that not of yourselves: it is the gift of God: Not of works, lest any man should boast. For we are his workmanship, created in Christ Jesus unto good works, which God hath before ordained that we should walk in them.⁸³

While Paul stressed the doctrine of grace to those who were obsessed with living the law, the Apostle James wrote to those who had come to believe that the gospel of grace justifies moral liberty:

Even so faith, if it hath not works, is dead, being alone. Yea, a man may say, Thou hast faith, and I have works: shew me thy faith without thy works, and I will shew thee my faith by my works. Thou believest that there is one God; thou doest well: the devils also believe, and tremble. But wilt thou know, O vain man, that faith without works is dead?⁸⁴

While the research on the relationship between the grace of God and mental health and illness is inadequate at present, the interest in and study of this phenomenon appears to be gaining interest.⁸⁵ In addition to describing the transformative experience in the life of a fifteenth-century monk, this paper is intended to serve as an impetus for further research and study and to assist clinicians and clergy who find such challenges in the clients they serve. Perhaps this may contribute to addressing Professor Allen E. Bergin’s concern that “religion is at the fringe of clinical psychology when it should be at the center”.⁸⁶

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⁷⁹ Luther, “Sermons on the Gospel of St. John: Chapters 6-8,” 182.

⁸⁰ Maslow, *Religions, Values, and Peak Experiences*, 13.

⁸¹ Jung, “The Archetypes and the Collective Unconscious,” 36.

⁸² Uchtdorf, “The Gift of Grace,” 109.

⁸³ Ephesians 2: 8-10.

⁸⁴ James 2:17-20.

⁸⁵ See Bassett, “An Empirical Consideration of Grace”; McMinn et al., “Professional Psychology”; Sisemore et al., “Grace and Christian Psychology Part 1”; Watson, “Grace and Christian Psychology Part 2.”

⁸⁶ Bergin, “Psychotherapy and Religious Values,” 103.

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