Contemporary Perspectives on Religion, Spirituality

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As in so many areas of psychiatry, it was Freud who set the tone. The title of his book The Future of an Illusion left little doubt about his views of the nature of religion, which he regarded as a developmental relic to be outgrown. Nor were Western religions the only ones dismissed. In a well-known text, The History of Psychiatry, Alexander and Selesnick pointed to “the obvious similarities between schizoidic regressions and the practices of yoga and Zen.”

Such views were understandable, given the mental practitioners were seeing disturbed individuals whose relationships to and use of religion were often also correspondingly disturbed. Moreover, this dismissive trend reflected a larger, centuries-old trend in Western culture. Beginning with the Enlightenment, the rise of science had performed the healthy and much-needed function of freeing European civilization from stifling grip of the church’s dogmatic control. While a mere evolutionary blink of the eye, the dominant arbiters of reality shifted from church and clergy to science and scientists.

The peak and nadir of this shift were symbolized by French philosophers Auguste Comte, founder of positivism. To satisfy the needs of the unsophisticated masses, Comte proposed a new church complete with scientists as saints. Comte modestly allowed that he would be willing to serve as pope, however he became increasingly grandiose and died deranged.

Comte notwithstanding, science continued to pour forth an ever-increasing cornucopia of marvels. Knowledge exploded. Medicine advanced. Life span increased and the scope of human vision of the universe expanded from leagues to light years, from countries to cosmos.

Diminished Vision

Yet in other ways the human vision of the universe and of ourselves was curiously diminished. Whereas the scope of the known universe kept expanding, its meaning and significance kept contracting. Comforted by the great religious myths, humans had once felt themselves to be children of God, at home in a coherent, divinely ordered world designed expressly for their well-being. Now they saw themselves as meaningless blobs of protoplasm, adrift on an uncarcin speck of dust in a remote, uncharted corner of one of uncountable billions of galaxies. Human beings were increasingly demoted to mere sophisticated machines: the “stimulus-response machines” of behaviorists, the “wet computers” of artificial intelligence, or for evolutionary biologists “a peculiarly baroque example of the lengths to which nuclear acid is prepared to go copy itself” (Chedd, 1973).

Mind and transcendental experiences were similarly deflated. Mind came to be regarded as merely “an epiphenomenon of the neuronal machinery of the brain” and transcendental experiences were dismissed as the disordered fireworks of that machinery. Biophysicist Francis Crick, discoverer of the nature of DNA, epitomize this view with his suggestion that belief in the existence of God might be due to mischievous mutant molecules that he named “theotoxins.”

Consequently, all meaning, purpose and values—no matter how venerated or venerable—suddenly seemed groundless. The net result was what architect Lewis Mumford called “the disenchantment of the world.” This disenchanted world was now reduced, as Nobel laureate philosopher of science Alfred North Whitehead lamented, to merely “a dull affair, soundless, scentless, colorless; merely the hurry of material, endlessly, meaninglessly.”

As Whitehead pointed out, however, “this position on the part of the scientist was pure bluff.” Scientists had made the understandable but disastrous mistake of sliding from science into scientism; from believing that science was superb way of gaining some information about some things to believing it was the best or only way of obtaining information about all things; from saying that what science can’t observe it can’t exist (Wilber 1983).

Views, Sophistication

The times are changing, and with them our views both science and religion. It is now increasingly clear that the reductionistic dismissal of religion by science and its pathology by psychiatry are largely based on unsophisticated views of both science and religion. While there is much in religion that is problematic, there is also much that is beneficial.

Science is only one way of obtaining valid information. Any comprehensive view of ourselves and the world must be complemented by experiential, interpretive (hermeneutic) and introspective modes of knowing. In addition, a materialistic, reductionistic, disqualified world view of nature and humans—so long assumed to follow naturally and necessarily from science—is only one of many possible views.

For religion, it is now clear that the terms “religion” and “spirituality” can refer to so many different behaviors, values and institutions that understanding them and their psychological significance requires bringing order into this semantic chaos. One useful approach is to look at religion and spirituality from a developmental life span perspective.

Researchers increasingly divide development into three major phases: preconventional, conventional and transconventional; or prepersonal, personal and transpersonal. Whether it is the development of cognition, morality, faith, motivation or a self-sense, it is clear that we enter the world unsocialized (at a preconventional stage) and a gradually acculturated into a conventional world view and modus operandi.
A few individuals develop further into postconventional stages of postformal operational cognition (e.g., the work of Flavell and Arieti), transconventional morality (Kohlberg), universalizing faith (Fowler), self-actualizing and self-transpersonal self-sense (Wilber). For a remarkably comprehensive theory of this research and of transpersonal development in general, see Wilber (1981, 1986).

**Modern Understanding**

What is crucial for a contemporary psychological understanding of religion is the recognition that religious belief, behavior and experience can occur at any stage—preconventional, conventional, or postconventional—and can very dramatically in form, function and value accord to the stage. There is no question that religion can be tragically misused in the service of, for example, egocentricity, bias and fanaticism. But the great mistake of many scientists and mental health practitioners who dismissed religion wholesale was to mistake parts of preconventional or conventional religion for all of religion; to equate dogmatic mythical or magical thinking with all religious thinking to fixate on religion as a defensive maneuver and overlook religion as a developmental catalyst; to confute preconventional regression with transconventional progression; and to confuse the schizophrenic’s prepersonal loss of ego boundaries with the mystic’s transpersonal recognition of the unity of existence.

The net effect is what is now known as the “pre/trans fallacy.” This is the confusion and conflation of preconventional/prepersonal developmental stages with the transconventional/transpersonal stages of psychological and spiritual development that are the source and contemplative goal of the great religions. Henceforth, we will need to be far more precise in identifying the function and developmental level of religious behavior, belief and experience. Fortunately, relevant research on religion and spirituality is expanding dramatically and includes some of the following helpful background findings.

- Growing numbers of contemporary psychoanalytic thinkers are forging new psychoanalytic perspectives of religion and authentic spirituality as incompatible.
- People who have mystical or peak experiences, far from being necessarily pathological, score above average on multiple measures of wellbeing.
- Several hundred studies of meditation confirms that it can produce wide-ranging psychological, physiological and biochemical effects and therapeutic benefits. Intriguing findings include evidence for enhanced creativity, perceptual sensitivity, empathy, marital satisfaction, lucid dreaming sense, self-control and self-actualization.

Developmentally, several studies suggest meditation may foster maturation on scales of ego, moral and cognitive development. Clinical research suggests that it can be therapeutic for several psychological and psychosomatic disorders including anxiety, phobias, post-traumatic stress, insomnia and mild depression. Regular meditation seems to reduce legal and illegal drug use, blood pressure, cholesterol levels and the severity of asthma, migraine and chronic pain (West 1987; Walsh and Vaughn 1993).
- Near-death experiences, whatever their precise nature, are not signs of severe pathology, as once widely assumed. Rather, they seem to be followed by surprisingly large, long-lasting and beneficial psychological changes, especially associated with decreased concern with materialism and increased interest in love and learning.
- In the new DSM-IV, a diagnostic category (V62.89) for religiously based difficulties that do not reflect pathology. This new code is an important step in institutionalizing the recognition that religious interests and concerns are no synonymous with pathology. A paper by Lukoff and colleagues argued that the need for this new category and documented the vital importance of religious and spiritual issues in most people’s lives. They pointed out, however, how poorly trained and poorly informed most mental health practitioners are about these issues. Indeed, “exploring spiritual or religious issues in psychotherapy has been considered an unspoken taboo for many years...[this taboo] appears to be first introduced during the therapists’ professional training and is thereafter continued in clinical work” (Meyer 1994).

Given our profession’s previous misunderstanding of religion, this taboo and our consequent lack of edu-

**References**