

Marleen S. Williams, W. Dean Belnap, and John P. Livingstone.  
*Matters of the Mind: Latter-Day Saint Helps for Mental Health.*

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Reviewed by James D. MacArthur

**M**ental health continues to be difficult for many people to understand. We seem to grasp physical ailments; bruises and cuts and headaches are pains we all have experienced. More serious health troubles—diabetes, cancer, or the physical pain associated with a broken arm or surgery—are still in the realm of the tactile and thus are fairly easy to grasp conceptually, even by those who have not gone through any such trauma. But when it comes to the realm of mental illnesses—bipolar disorder, schizophrenia, or even more common ailments like dysthymia—we may find ourselves scratching our heads. What is the nature of mental disorders? Are they considered diseases? Or are they the byproduct of poor choices?

This is not to say that the general population is any better off, but most Latter-day Saints have very little direct understanding of mental illness. Many feel confused by mental health in general, and that confusion certainly does not get any better when they attempt to understand specific disorders. Their knowledge of mental illness usually ends at the rudimentary level of “I have heard a few things about it.” Predictably, such informal understanding helps to promulgate inaccuracies and myths, which obviously are not helpful to those who are suffering or looking for answers.

Home teachers, visiting teachers, and even bishops and stake presidents are not immune to a certain amount of confusion on the subject. How will a bishop, for example, counsel a young woman struggling with an eating disorder when he has no knowledge on the subject? He may give invaluable spiritual advice, but with no frame of reference, he is unlikely to point her in a direction that can directly address her problem.

A bishop or stake president may assume that an individual who visits his office full of heaviness and sadness is suffering spiritually—a sorrow for sin is the likely cause of the disturbance. The one suffering may assume the same thing, even in the face of clinical depression. (A depressed individual often has a special talent for feeling guilty even when he or she is not.)

So Church leader and member work together to fix the problem through traditional Church interventions like prayer, fasting, and scripture study. While these spiritual ways of helping are a great blessing to members struggling with mental challenges, many times they only address certain parts of the human condition and thus professional skill is also needed.

Of course, bishops and stake presidents are primarily spiritual leaders and cannot reasonably be expected to give any sort of professional, clinical diagnosis for a mental disorder. The same can be said of all nonprofessional members. So how do members and their loved ones—parents, leaders, friends, or spouses—determine when it is necessary to reach out to professional services provided by psychologists, psychiatrists, social workers, and professional counselors of one type or another? The answer is found in education; if Church members and leaders had a basic working knowledge of common mental disorders, those seeking relief for their problems would more often be pointed in the right direction.

Beyond knowing where to point members, Church leaders do better work when they have a more adequate understanding of common mental health challenges. For example, a stake president and high council sitting in judgment over an elder's bizarre and outrageous behavior are more likely to show more judicious mercy if they understand that he, being bipolar, suffered a severe manic episode and did not commit a willful and premeditated sin against God. In my own experience as a Church leader, I have seen mistakes made due to the inadequate understanding of bishops and stake presidents in the area of mental health.

*Matters of the Mind: Latter-Day Saint Helps for Mental Health* can go a long way in remedying some of these misunderstandings. The book provides an excellent and competent understanding of a complex array of mental disorders and problems along with insights into treatment possibilities that leaders and lay members of the Church can readily understand. Chapters 1 through 3 give an overview of mental illness and the basics of brain function; Chapters 4 through 8 discuss issues concerning mental illness that relate particularly to Latter-day Saints; and chapters 9 through 18 explore the particulars of mental illnesses, such as mood and anxiety disorders, cognitive disorders, eating disorders, Asperger syndrome and autism, depressions peculiar to women and men, and psychotic disorders. Chapters 19 through 24 conclude the book with methods for coping with mental illness.

*Matters of the Mind* is the best book I am acquainted with to provide Latter-day Saints much-needed insight and understanding about mental health. Among the book's most outstanding contributions is a perceptive spiritual insight into the traditionally secular field of mental health.

A great potential of this book is to link mental health professionals and Church members with leaders through mutual understanding. The book shows how mental health and spiritual health can and should grow together; Latter-day Saints and mental health professionals can work hand in hand rather than in competition with each other.

I highly recommend this book and feel it will help members, leaders in the Church, and professional mental health workers bring many to greater mental and spiritual health—as a result, many more will find their journey of coming unto Christ filled with greater stability, peace, and joy.

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