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# EMOTION AND TRANSFORMATION IN THE RELATIONAL SPIRITUALITY PARADIGM PART 3. A MORAL MOTIVE ANALYSIS

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Meaning-system analyses presently dominate the literature on religious conversion and spiritual transformation (Paloutzian & Park, 2005). To complement (not contradict) meaning-system analyses this three-article series proposes the construction of a new approach to the study of the affective basis of spiritual transformation, moral motive analysis. The objective of this final article is to outline a specific moral motive analysis of transformation, a “social intuitionist” (Haidt, 2001) approach that both complements and elaborates the theological tradition of *orthokardia* (Runyon, 1998). This article first summarizes the central hermeneutic and defining features of *orthokardia*, and then relates them to concepts in contemporary moral motivation theory. Second, following the Murphy-MacIntyrean framework (telos, problem, purpose), it proposes three core postulates concerning the role of moral emotions in spiritual transformation: moral *telos as emerging love and the capable character*; moral problem as the *duplicitous heart and diminished capacity to love*; and moral process as implicit relational transformation. Collectively, these postulates delineate an approach to relational affect transformation (virtue-acquisition and vice-diminishment) that is consistent with the sensibilities of Aristotelean virtue ethics (MacIntyre, 1984), contemporary moral motive theory (Emmons & McCullough, 2004), and the apophatic approach to change (Jones, 2002), thus providing a metapsychology of implicit relational spirituality for theory, research, and practice.

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Enormous confusion is bred when purity of intention (love of God, love of the Good) is demanded of man without a compassionate and workable psychological knowledge of everything in the individual human being that resists or covers over such purity of heart.

—Jacob Needleman, *On the Way to Self-Knowledge*

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Recent reviews of the psychological literature concerned with the affective basis of spirituality (Emmons, 2005; Emmons & Paloutzian, 2003; Hill, 2002) suggest that while the role of emotion in spiritual transformation has long been acknowledged in religion and psychology, the scientific and interdisciplinary study of emotional processes that mediate spiritual transformation is still in a fledgling state. Hill (1995, 2002) has suggested a number of times and places that “there are no general overarching theories of affect guiding research on religious experience” (1995, p. 355). The objective of this article is to suggest a trajectory for the development of a certain type of approach, a *moral motive analysis* that gives theoretical and methodological priority to motivational factors related to prosocial (loving) action.

One of the problems in the study of affective processes has been definitional, both with respect to the terms *emotion* and *spiritual transformation*. Concerning emotion, as the meaning and measurement of emotions (or affects) has improved considerably in recent years, particularly the class of emotions we are most concerned with here, the “moral emotions” (Haidt, 2003), researchers are now in a better position to study the role of emotions in personality change and spiritual transformation. Recent reviews suggest that such research might profitably focus on the role of positive (Fredrickson, 2002) and moral emotions both as “motivators of and consequences of” spiritual transformation (Emmons, 2005, p. 247). A first objective of this article is to respond to this call, offering a preliminary analysis of *how* moral emotions might be related to spiritual transformation.

A second question of importance in formulating theory and research in this area is the issue of specifying why moral emotions are believed to be important, to what end. Hill (2002) has encouraged investigators

to avoid the tendency to “decontextualize” the study of human meaning and value, to theorize without some explicit philosophical or religious *ethos* that helps define the significance the emotions. He highlights the need to clarify at the outset one’s metapsychological assumptions about the goal of spiritual transformation. Is, for example, the “ultimate concern” (Emmons, 1999) of spiritual transformation to be understood as an increase in subjective (felt) nearness to God (emphasizing religious experience), or as greater characterological likeness to God who has revealed an essential nature to humanity (emphasis on virtue acquisition)? While not necessarily mutually exclusive, these two spiritual visions—‘nearness with’ (focus on subjectivity) and ‘likeness to’ (focus on virtue)—suggest two different foci and trajectories for spiritual transformation, and likely yield different responses to the question of the role of emotion in spiritual transformation. Many definitions of religion, religious conversion, and spiritual transformation have been offered, and I will not here review these (Paloutzian, 2005). Rather, in this article, following the theological tradition of *orthokardia* (Runyon, 1998), I conceptualize the moral task of spiritual transformation as *expansion of the motive and capacity to love from an increasingly pure (less conflicted, divided) heart*. This becomes the critical hermeneutic from which to conceptualize the telos, problem, and process of spiritual transformation and flourishing. The task of a moral motive analysis, then, is to model “compassionate and workable psychological knowledge” of what this means, particularly some of the factors that “resists or covers over such purity of heart” (Needleman above).

As reviewed in previous articles, in Murphy’s MacIntyrean analysis (Dueck & Lee, 2005) she suggested that in constructing various tradition-informed psychological models to guide theory and research, doctrine *should* make a difference in how one thinks about the ultimate purpose, problem, and process of spiritual transformation. Applied in this context, it will affect how we view the significance of emotion in spiritual transformation. In light of this issue, a second objective of this article is to briefly summarize selected aspects of the theological tradition sometimes known as *orthokardia* (re: “the right heart”). To date, while numerous treatises in the theological literature exist (Clapper, 1989; Lodahl, 2003; Maddox, 1994; Runyon, 1998), there have been fewer presentations addressed to the therapeutic community, and applied specifically to the study

of emotion and spiritual transformation. This article briefly correlates three doctrinal areas from this tradition, its moral affectional anthropology, relational hamartiology, and therapeutic soteriology, with contemporary moral motive theory (McCullough, Kilpatrick, Emmons, & Larsen, 2001; Shulman, 2002) and dynamically informed psychotherapeutic theory (Gabbard & Westen, 2003). As discussed in previous articles, the goal is a theology-driven, “psychodynamically informed” (Westen, 1998) metapsychology (“story”) of the affective basis of transformation framed within the relational spirituality paradigm (Hall, 2004).

A third objective of this article is to now more systematically spell out a specific moral motive approach, a “social intuitionist” (Haidt, 2001; Shweder & Haidt, 1993) account of the role of the moral emotions in spiritual transformation. As noted in Part 2, meaning-system analyses presently dominate the explanations of spiritual transformation and religious conversion (Paloutzian & Park, 2005). Meaning-system analyses argue that the central function of religion is the provision of life meaning and that “the thing that undergoes transformation in a religious conversion is the person’s meaning system” (Paloutzian, 2005, p. 333). Accordingly, these analyses focus on constructs at the global- and mid-levels of personality. Global-level constructs refer to self-definition and identity (narrative identity) and propositional beliefs (attitudes); mid-level constructs refer to personal values (standards), personal goals (strivings), and subjective well-being (Park, 2005). In recent meaning-system models, while the potential roles of motivation and emotion variables and other “core” (Five-factor) personality traits are recognized, these lower-level constructs are less well modeled (Paloutzian, 2005).

Thus, to complement (not contradict) meaning system analyses, this article outlines a particular moral motive analysis which derives from the tradition of *orthokardia*. Since it is suggested here as only one plausible approach to emotion and spiritual transformation, not as an established fact, the article concludes by making several suggestions for future theory and research related to this approach.

### A MORAL MOTIVE ANALYSIS IN THE “SOCIAL INTUITIONIST” TRADITION

Following Jonathan Haidt’s (2001) social intuitionist model of moral judgment, the central claim of this

moral motive approach is that moral action (love) is caused (amplified) by moral emotions which themselves are part of an implicit and procedural associative network which constitutes the “heart” of moral character. According to this view, moral emotions constitute but one facet in a multi-component psychology of prosocial moral action that includes: 1) preconscious moral intuitions, 2) moral emotions (motives), 3) conscious moral judgments, 4) moral virtues and vices, and 5) moral action (Haidt, 2001; Haidt & Bjorklund, 2006). Here, for limitations of space, I focus only on the role of the moral emotions. A growing body of scholarship points to the importance of emotion in prosocial action (Emmons & McCullough, 2004; Shulman, 2002). The emerging picture seems to be that both positive and moral emotions are part of the moral decision and judgment-making apparatus that leads to prosocial action (Fredrickson, 2004), and that a diminished functioning of the moral emotions leads to “motivational deficits” in prosociality (Shulman, 2002). Considering the role of the emotions in the moral life, Shweder & Haidt (1993) note that there are more options than Humean emotivism or Kantian-Kohlbergian cognitive rationalism. They suggest that the mark of cognitivist theory is the assumption that mental states serve a representational function, rather than emotivist theory that assumes mental states serve primarily nonrepresentational functions (1993, p. 361). In the “cognitive intuitionist” view, emotions re-present (sometimes inaccurately) a fact or truth about some object or event. The main tenet of cognitive intuitionism is that: “moral appraisals (this is good, that is right) are grounded in self-evident truths (intuitions), saturated with local cultural meanings, and activated by means of the emotions” (p. 360). By this view, moral emotions are cognitions invested with motivating force; they are “embodied thoughts, thoughts seeped with the apprehension that ‘I am involved’” (Rosaldo, 1984, p. 143). They are a type of cognition (meaning), but not a kind of reasoning (Haidt, 2001). Thus, cognitive intuitionism holds that emotion is essential both for moral judgment and for the “conversion” of thoughts (reasoning) into moral (prosocial) action.

Following this social intuitionist approach, this first section does two things. First, as noted in previous articles, neither the Murphy-MacIntyrean framework itself, nor the relational spirituality paradigm, specifies particular or unique theological content for the facets of purpose, problem, and process. As the interest of Murphy and her colleagues (Dueck &

Lee, 2005) was application of the Murphy-MacIntyrean framework to a “radical reformation perspective,” here I situate a moral motive approach within the tradition of orthokardia. Second, this section also defines moral emotions as conceived in this model. Since the construct of moral emotion is central to this approach a clear definition is needed.

### *Moral “Affections” in the Tradition of Orthokardia*

The emphasis on formation of a “right” or “pure” heart (Ps. 51:10) as the central focus for practical theology is not to be identified solely with any one particular tradition in Judeo-Christian thought; but is likely more characteristic of some than others. Foster (1998), for example, identifies this emphasis as one of the strengths (and in its distortion, one of the weaknesses) of the Holiness tradition, but traces this perspective through other traditions as well. Within the broader tradition of orthokardia, John Wesley’s vision of Christian spirituality is a quest story centrally concerned with transformation of one’s affective-motivational dispositions of heart, “affections” and “tempers” as he referred to them. Wesley used the term *affection* and the more characterologic term *temper* as referents for the “motivating dispositions of the person” and considered these dispositions the *heart* of the person (Maddox, 1994, p. 69). In this conception, unlike the cognitive rationalist view, the human *will* is not regarded as a self-regulatory “muscle” which must be exerted in order to enact moral behavior or overcome obstacles to initiating prosocial action (Baumsister & Exline, 2000). Rather, the primary motivator of moral action “is a set of responsive holistic ‘affections’ that must be engaged [primed] in order to incite us to action” (Maddox, 1998, p. 40). This emphasis on affections as moral motivators of prosocial action is referred to as Wesley’s *moral affectional psychology* (see Leffel, 2004; Maddox, 2004; Strawn & Leffel, 2001 for reviews).

Three statements help clarify the nature and significance of the affections/tempers for present discussion. First, affections and tempers are inclusive of what we refer to as emotions, but they are more than discrete feeling (phenomenological) states or moods. That is, to have the temper of love as a stable disposition does not mean one always experiences the subjective feeling identified as “love” (or peace, joy, patience, etc.). A temper may dimly register in consciousness as a felt urge (*action tendency* in

contemporary terms) or feeling state, but the phenomenal experience itself is not to be identified as *the* temper. Second, they are motivational units of personality. As Maddox (1996) summarizes, "Affections integrate the rational and emotional dimensions of human life into a holistic inclination toward particular choices or acts" (p. 153). These dispositions are the affective 'roots' of attitudes, choices, and actions. Third, they are wholistic response tendencies, patterned tendencies to perceive, experience, and move towards others and events in a particular way (e.g., to mistrust). The dispositional nature of affections and tempers makes them more like "character virtues" than feelings (Clapper, 1989), reminiscent of Aristotle's notion of virtue as "deliberative deciding states of soul" (Lear, 1988) or "wise emotions" (Sherman, 2000). Wesley's version of orthokardia emphasizes that while spiritual formation is a journey guided by a sacred mind, it is centrally aimed at the birth and development of a mature character—one increasingly *capable* of ever creative and mature forms of compassion-hearted love (Maddox, 1994). This emphasis on the primacy of heart has led various scholars to characterize Wesley's model of orthokardia as a *eudaimonist* model of moral and spiritual development (Clapper, 1989; Maddox, 1994), and in this it shares similar features with certain models of psychological well-being, for example, Erikson's (1950; 1980) psychosocial virtue approach.

### *"Heart" as Associative Network of Moral Affective Capacities*

An important issue for those wishing to theorize in this theological tradition is identification of a correlative set of psychological constructs. While various approaches could be taken, almost certainly one construct is the notion of moral emotions (Haidt, 2003) or moral affects (McCullough, Kilpatrick, Emmons, & Larsen, 2001; McCullough, Emmons, & Tsang, 2002). Recent moral character theory (see Lapsley, 1996, esp. Chs. 10-12) posits that the moral self is largely constituted of affectively represented implicit knowledge structures. This moral heart of personality is variously referred to as a system of "preconscious moral knowledge" (Kitwood, 1990), the prerepresentational "moral self" (Emde, 1983), or the "moral motivational system" (Tangney, 2000). In a *connectionist* and *parallel distributed processing* model, this moral core may also be conceptualized as an implicit associative network (Westen,

2002) or relational deep structure (Jones, 1996) comprised of 'how to' knowledge of prosocial (caring) skills and procedures. Contemporary moral affect theory (McCullough et al., 2001) has identified a constellation of moral affects (e.g., gratitude) believed crucial in motivating or energizing prosocial motives and altruistic actions (further discussed below). Consistent with positive emotion theory in general (Fredrickson, 2002; 2004), certain affects are understood to function as innate activators of moral behavior. For example, McCullough and colleagues (2001) suggest that various affects function as: 1) a *moral barometer* that tells a person when there has been change in one's social relationships, 2) a *moral motive* which prompts one to behave prosocially toward another, and 3) a *moral reinforcer* which produces greater effort to behave prosocially toward the other.

Six additional propositions clarify the sense in which various investigators refer to moral affects as motives. First, it is not that affects themselves are "moral," rather that certain feeling states typically result from and stimulate moral (prosocial) action. Feeling states (affect) put the person into a motivational and cognitive state in which there is an increased tendency to engage in certain goal-related actions, e.g., gratitude activates an action tendency for altruism (Haidt, 2003).

Second, moral affects are related to but not identical with either affective traits or emotional states. Moral affects (e.g., gratitude), affective traits (e.g., extraversion and neuroticism in the Five-factor model), and emotions represent different levels of analysis in the lower-level "story" of personality (Fredrickson, 2004). Fredrickson (2001) has noted that working definitions of emotion and affect vary somewhat across research traditions. However, there seems to be a consensus that emotions are a subset of the broader class of affective phenomena. Affect, the more general concept, refers to consciously accessible feelings. Affect is present within an emotion (the facet of subjective experience), but is also present within attitudes, moods, and even affective traits.

Third, moral affects may also be regarded as "affective capacities" (Tangney, 1991). For example, the moral affective capacity (MAC) of empathy has been defined as a "shared emotional response between an observer and stimulus person"—a holistic response that requires three interrelated skills or capacities (Feshbach, 1975). Empathy is: a) the cognitive ability to

take another person's perspective (role-taking or perspective taking); b) the cognitive ability to discriminate or accurately read cues regarding another person's particular emotional experience (affective cue discrimination); c) the affective capacity to personally experience a range of emotions (because empathy involves the sharing of another's affective experience in one form or another).

Fourth, as illustrated by empathy, a MAC may also be viewed as an implicit and procedural associative network, a type of nonconscious knowledge system (or module) that re-presents knowledge of 'how to' to be with and relate to another person. Here, I am following the lead of cognitive neuroscience research that suggests there are likely different types of knowledge structures and memory systems, the *implicit* (vs. explicit) and *procedural* (vs. declarative) memory systems (Siegel, 1999; Westen, 2002). By this view MACs are non-declarative, affectively charged networks that guide social interactions (Clyman, 1991; Emde, Johnson, & Easterbrooks, 1988). Emotions are often analyzed into component features, such as an eliciting event, a facial expression, a physiological change, a phenomenological experience (affect), and an action tendency (Haidt, 2003). In the language of *connectionist* or *parallel distributed processing* models of mind, these facets constitute an associate network in the brain such that the activation of any facet in the network may activate other facets (Westen, 2002). In this view, the feeling (affective) component of the MAC is connected to other implicit and procedural components in an associative network. The feeling component is but the tip of the nonconscious iceberg below, which when primed can initiate a cascade of activation throughout the network. And, once engaged, the network automatically executes its content values much like a procedural skill or capacity.

Fifth, *virtues* are sometimes also considered "capacities" (Woodruff, 2001) or "wise emotions" in the Aristotelean conception of virtues (Sherman, 2000). Thus, MACs can be conceptualized as affective virtues. Joining the above literatures, MACs may be defined as implicit and procedural capacities of character that incline persons toward attitudes and actions of mature relationality, or not. The moral affects of greatest interest in this analysis are those referred to as the "other-suffering" and "other-praising" emotions (Haidt, 2003), or "other-regarding virtues" (McCullough & Snyder, 2000), or sometimes the "warmth-based virtues" (Worthington & Berry,

2005). All three lists usually include the constructs of: empathy, sympathy, compassion, gratitude, and forgiveness (further discussed below). Sixth, Lear (2000) has also cleverly coined the term "neurtue" to represent the opposite of a virtue, defining it as a type of negative affective activity or vice. We could also give the term "afflictive emotion" (Goleman, 2003) to this same notion of affective vice, e.g., the moral emotion of *hubris* (Lewis, 2003).

With this correlative construct in view, we can now begin to tell a "good story" of the telos, problem, and process of spiritual transformation.

### A GOOD QUEST: IMPLICIT MORALITY AND SPIRITUAL TRANSFORMATION

Attempting to be invitational, not sufficiently descriptive, the following discussion outlines a theology-driven metapsychology of relational affective transformation, now conceptualized in the paradigm of *relational spirituality* and in the *apophatic* and *orthokardia* theological traditions. A central tenet of the RS paradigm is that spiritual transformation involves changes to implicit relational structures of personality, Hall's (2004) "implicit relational representations." Further, it is assumed that such changes mediate changes in representations and experiences of the Sacred, and that these changes involve affective processes. The following analysis extends this proposition to positive emotions and moral affects, suggesting how certain moral affective capacities are integral to the story of character change and spiritual transformation.

In organizational form, this analysis roughly follows Murphy's description of Imre Lakatos's (1978) account of the structure of a research program. First, he says that a psychological research program should specify basic "core postulates" that contain the "hard core" of a theory. This hard core is often of a metaphysical nature and describes the basic nature of the subject matter. A second set of additional statements or "auxiliary hypotheses" then spell out the content of the core theory in such a way as to make it empirically testable. The core postulates of the program make claims about the aspect of reality under investigation (e.g., the goal of the Good life is theosis—participating in the life and purposes of God). The *auxiliary hypotheses*, in turn, must bear most of the explicit theoretical content of the program (e.g., theosis is successively approximated as human beings grow in their capacity to love others).

Following Murphy's framework, Postulate 1 below concerns moral purpose and therapeutic *telos*, and proposes that the central goal of psychospiritual transformation is *emerging love and the capable character*. Postulate 2 concerns moral problem and therapeutic dilemma, and suggests that the central issue in achieving this end is a *duplicious heart and diminished capacity to love*. Postulate 3 concerns moral process and therapeutic praxis, and describes *implicit relational transformation* as the process which addresses the problem in order to achieve this *telos*.

### Core Postulate 1:

#### Moral Purpose and Therapeutic Telos

##### *Emerging Love and the Capable Character*

*The telos of spiritual transformation is the capacity to construct and freedom to express a mature form of personal relatedness (love) from an increasingly capable character. Capable character is defined in terms of prosocial moral affective capacities, and a mature capacity to love is further conceptualized in terms of the master virtue of generative care.*

I suggest the above hermeneutic provides a point of conceptual convergence for psychotherapeutic and spiritual formation models of change, a principle of interdisciplinary "consilience" (Wilson, 1998) around which these disciplines complement and critique one another. It emphasizes that religion is not merely a "quest for meaning" (Paloutzian, 2005), but that spiritual transformation plays a more fundamental role in moral development (virtue acquisition). Outlined below, spiritual maturity whether facilitated in religious, therapeutic, or natural helping settings, is viewed as expansion of the motive and capacity to love, where love is understood as a mature mode of prosocial relatedness, not simply a "feeling" state. Envisioned here, the motive and capacity to love consists of an associative network of moral affective capacities or "other-regarding virtues" (McCullough & Snyder, 2000) of one's character. Further, I propose (but will not here develop) the idea that the more ambiguous term "love" can be meaningfully re-conceptualized in terms of Erikson's (1950) master virtue of generative care (Leffel, 2006). Thus, these moral affective capacities also become virtues of a generative caring character. In spelling out the auxiliary hypotheses, for limitations of space, I focus here on three related concepts:

1) care as emergent psychological capacity for emotional investment; 2) the construct of moral affective capacity (MAC); and 3) a proposed model of the virtues (MACs) of capable character.

#### *Caring as Emergent Psychological Capacity for Emotional Investment*

What I have in mind in referring to love as a *capacity* is described in the contemporary ego psychology construct of "psychological capacity" (Zilberg, Wallerstein, DeWitt, Hartley, & Rosenberg, 1991). I quote at some length since this construct is central to this moral motive approach, and will be used as a reference point in future discussion:

[we] use the term "capacity" as a psychological resource serving a particular purpose. Its function is to contribute toward the achievement, given a good enough external environment, of adaptive and rewarding intrapsychic and interpersonal functioning. A capacity is a resource in the sense that it can be drawn upon, along with other resources (not all of which are psychological capacities) to serve this function. It is "accessible" in the sense of being available for use without any undue effort. It contrasts with *psychological resources that are latent and for some reason blocked to accessibility*. It also contrasts with *potential resources that have been delayed in their development*. Psychological capacities are conceived to have an important and a complex relationship with development. At some point in normal development, a capacity becomes very stable over time. At what point in time this occurs may vary for different capacities ... A psychological capacity is theorized to be present in differing degrees, from fully present to virtually absent, with different individuals ... Once a particular level of stability has been reached in development, each psychological capacity is an attribute of a person that is an enduring essence, a *predisposition* that is not simply reflected in average or typical behavior in any simple way. (pp. 327-328; *emphasis added*)

Further, the psychological capacities of particular interest are those that facilitate *emotional investment* in the strengths development of self-selected others (Westen, 1985). Psychodynamic theory of various schools (especially object relations models) suggests that the capacity to emotionally invest in other people is an individual difference variable of great importance in a psychology of caring (love). Emotional investment theory (Westen, 1985, 1991) is a literature that seeks to integrate theory and research in contemporary psychoanalytic object relations and social cognition concerned with how individuals develop the ability to endow goals shared with another person "with personal significance such that one's emotional state becomes a partial function of the relative attainment or nonattainment of those

goals" (Westen, 1991, p. 437). Applied in the context of Erikson's theory of generativity (Erikson, 2000) the stated goal becomes participation in the task of "mutual strengths development" (i.e., emotionally participating in the interests and goals of another person so as to develop their personal strengths). A person's investment capacity is understood to be a function of one's interactive history, a history structurally represented in the brain in the form of non-conscious, affectively colored, implicit and procedural networks of self-in-relation-to-others.

### *The Construct Moral Affective Capacity (MAC)*

Second, consistent with this view, recent approaches to the study of personality and motivation emphasize the importance of nonconscious (implicit and procedural) aspects of personality, and the linkage of these processes to affective-motivational subsystems of personality (Peterson & Stewart, 1996; Westen, 2002). The following understanding of the capable character is consistent with and builds upon this suggestion.

Recent theory and research in moral development suggests that many of the most important moral affects (MACs) are based on acquired, experiential knowledge that is *implicit* and *procedural* in nature (Clyman, 1991; Emde et al., 1988; Stern, 2004). Specifically, developmental theory and research suggests that the capacity for moral relatedness with another is almost exclusively built upon and emerges as a consequence of prior social interactions that have come to be procedurally encoded in memory, e.g., implicit "rules" of reciprocity, empathy, altruism, trust (Emde et al., 1988; Stern, 2004). These capacities become available as "resources" in the personality (or not) because of having experienced these kinds of interactions. One can later represent (enact) the components of this interactive experience to another, only if one has first experienced it and encoded it in associative memory, not because a moral principle dictates it. Furthermore, it is likely that experiential knowledge acquired early in life translates itself later (through cognitive maturational processes) into a "set of propositions" about the "rights and responsibilities of human living" (Kitwood, 1990, p. 118). That is, in this cognitive intuitionist account, form (principle) follows function (skill), not vice versa. Thus, if the capacity to feel and act upon concern for others is satisfactorily nurtured

in the early years, it is likely to grow in later years to include an ever widening circle of concern for others in the community and larger world. Consequently, acquiring the motives and capacities for care, not just "propositional" values, standards of behavior, and ability for moral reasoning (cognitive facets of morality) is the more crucial part of the formation of a child's identity and character. Following this theoretical trajectory, a functional capacity to care involves: 1) a person who 'possesses' the virtues that are associated with and facilitative of generative care (the issue of *motivational capacity*), and 2) a person who is sufficiently "free" of other afflictive (negative) motives and emotions that obstruct one's capacity to invest in self-selected others (the issue of *functional freedom*). I consider the first issue here, leaving the second for Core Postulate 2.

### *Virtues of the Capable Caring Character*

Third, this postulate proposes that implicit moral character be meaningfully conceptualized as an associative network of moral affective capacities (other-regarding virtues). By this view, spiritual transformation is centrally about the "amplification" (Tomkins, 1970) of these affect-laden capacities such that the likelihood of 'converting' moral thought-action tendencies into caring behavior is enhanced.

To my knowledge, however, there is no definitive consensual conceptual or empirically derived model of the virtues of capable *caring* character. But I suggest that recent theory and research is converging on one such model. A preliminary virtue model of the caring capable character would include the following moral affective capacities: *trust* (Zilberg et al., 1991), *empathy* (Davis, 1983), *compassion* (Underwood, 1999), *gratitude* (Emmons & McCullough, 2004), *positive pride* and *guilt* (Tangney, 1995), *forgiveness* (McCullough, 2000), and *humility* (Sandage, 1999). I have elsewhere referred to this as a "Big Eight" model of caring character or *emotional investment capacity* (Leffel, 2006). This virtue model fits MacIntyre's (1984) three criteria for "quest" virtues as discussed in Part 1. First, they are virtues organized around a particular philosophical *ethos*; they are virtues that enable a good quest; and these virtues specify practices for further development that move us further along the quest.

While a variety of empirical studies tend to support the construct validity of this conceptual model (McCullough et al., 2002), further research is needed

to demonstrate the interrelations of these virtues (MACs) and their relationship to various indices of prosocial attitudes and actions, including measures of generative care. Additionally, envisioned in this model MACs are not regarded (primarily) as physiologically based trait entities, but as emergent relational capacities that have developed (or not) in a facilitating intersubjective matrix of relationships (Stern, 2004). Thus, virtue potentialities perhaps originally poorly formed or malformed can (theoretically) be newly formed, at least within the parameters of biological and socio-cultural constraints.

### Core Postulate 2:

#### Moral Problem and Therapeutic Dilemma *Duplicitous Heart and the Diminished Capacity to Love*

*The central moral problem for spiritual transformation is the person's diminished capacity to construct and freedom to express love (generative care). This dilemma results from motivational deficits and structural deficiencies of character. Collectively, intrapsychic factors that diminish one's capacity to care are summarized with the construct implicit relational character (IRC).*

Recent philosophers suggest that the central moral problem in the Kantian-Kohlberg moral tradition ("duty ethics") is a person that *won't* love (Rachels, 2003). In the language of recent moral psychology this means that the Kantian moral person has not yet developed strong enough "moral muscle" (self-regulatory capacity) to consistently practice virtue and avoid vice (Baumeister, 2005). Thus, in this cognitive rationalist, Enlightenment-based conception of moral development it is "self-control" (willpower) that becomes the critical master virtue. In contrast, the central moral problem in the Aristotelean virtue tradition ("virtue ethics") is a person that *can't* love, or at least is diminished in his or her capacity to do so (MacIntyre, 1984). The present analysis follows this latter tradition, and suggests that the dilemma of diminished capacity is a consequence of "moral motivation deficits" (Shulman, 2002). In turn, motivational deficits (e.g., too little empathy) derive from structural deficiencies in the implicit and procedural associative networks (modules) of relationality. While both dilemmas—*won't* love (self-regulatory capacity) and *can't* love (structural capacity)—are important for a comprehensive model of prosocial motivation and action, in the pre-

sent model greater emphasis is placed on motivational-structural capacity. Each of three central concepts related to this postulate are briefly considered below: 1) the duplicitous heart as implicit relational character; 2) the dilemma of motivational deficits; 3) the dilemma of structural deficiencies.

#### *Duplicitous Heart and Implicit Relational Character (IRC)*

First, this postulate proposes that various characterological factors place constraints on one's functional freedom to love, i.e., the motive and capacity for prosocial action (care). It proposes that these motivational and structural limitations can be summarized with the term *implicit relational character*. At the outset two clarifications are important to note. First, consistent with contemporary dynamic theory, IRC is understood to represent "attractor sites" consisting of both good (virtuous) and bad (vicious) associational networks, thus 'it' is not regarded as the problem (Westen, 2002). Second, this postulate does not suggest that dispositional or developmental factors alone are the only causative factors in moral motivation and behavior. It affirms that situational variables are always involved in the moral judgment and motivational context, and are powerful determinants of behavior (Doris, 2002). Nevertheless, as a practical objective for therapy and spiritual development, this model places greater emphasis on internal motivational variables that determine one's moral judgments actions, especially negative experiences represented in the associational links. In contrast to some positive approaches, such an emphasis is not regarded as "negativity" but as "psychological realism" (Flanagan, 1991) that focuses on factors which limit the development of virtue.

Theologically, I suggest that the Judeo-Christian construct *duplicitous heart* (impure, divided) well captures the nature of this Aristotelean moral dilemma. In this view, contrasting with an Augustinian-type (Hick, 1978) story of sin and symptom that envisions the moral problem as a singular self ("will") in self-conscious rebellion against the Creator (Burns-Smith, 1999), and the correlative cognitive rationalist view of human will as moral muscle (self-regulatory capacity), this model depicts the moral dilemma in terms of a duplicitous heart. Duplicity [re: "cunning; double-dealing; deceptive"] need not imply conscious intent or malevolence. Following



recent moral motive theory, the theological construct duplicitous heart may be re-conceptualized as a configuration of relational representational systems that are *divided* (multiple), *deficit* (functionally restricted), and *deficient* (structurally mis-formed). A divided, deficit, and deficient “heart” functionally restricts one’s capacity to construct and freedom to re-present care from a (relatively) pure heart, where “purity” here denotes congruence between explicit and implicit motives and actions, i.e., *implicit attitude* problem (Haidt, 2001; Westen, 1998).

Thus, this model follows a more semi-Pelagian and Irenaean-type theological trajectory with respect to sin and symptom, and consistent with recent Wesleyan conceptions of sin (Maddox, 1994, esp. Ch. 3), places *relatively* greater priority on the relational and developmental origins of the “inbeing” nature and condition of sin. Various scholars have noted that when Western and Eastern discussions of salvation are compared, it becomes evident that they place emphasis on different dimensions of the sin problem (Clendenin, 1994; Maddox, 1994). The Christian West typically places greater emphasis on the person’s obligations to God and others, and the *guilt* that results from failing to fulfill these obligations (forensic focus). Saving grace is then predominately understood as *pardon* and forgiveness from guilt through one’s acceptance of Christ’s sacrificial death. The Christian East, on the other hand, has focused more attention on the condition of the sinner (“contrary” *affections* and *tempers* in Wesley’s terms), particularly the nature of one’s character that is both the result and source of unloving behavior and impure intentionality (therapeutic focus). In general, the tradition of *orthokardia* endeavors to integrate this *double vision* of sin and salvation—the *forensic* (juridical) and *therapeutic* visions (Lefel, 2004). Borrowing from the Eastern Christian tradition, Wesley believed that God remains as interested in our *healing* from the “condition and power” of sin (therapeutic focus) as in our *pardon* from acts of sin (juridical focus). By this view, the progressive work of salvation (sanctification) is a “salving” or *salve*-ation (Lodahl, 2003) of the wounds of existence inflicted upon us first by “depraved” (unloving) others, and then as a consequence enacted toward self and others (Maddox, 1994). On many occasions, Wesley characterized the very essence of religion as a “therapy” by which the “Great Physician” heals our “sin-diseased” souls, restoring the vitality of life that God intended for us (Maddox, 1994, esp.

pgs. 112-113, 121-122). In this tradition, grace is construed primarily in terms of *power* to heal fallen nature that is affected as we “participate” with God, and substantially as mediated through loving interactions with others (Lodahl, 2003, esp. Ch. 6). Wesleyan scholars generally recognize that while Wesley was interested in both the juridical and therapeutic conceptions of salvation, “the emphasis on pardon was incorporated into the larger theme of empowerment for healing” (Maddox, 1994, p. 85).

Thus, without inflicting too much interpretive damage on the Scriptural construct of heart, I believe the following moral motive analysis provides an instructive and scientific update of the Judeo-Christian psychology of the duplicitous heart. Further, I suggest that this dynamically informed, Irenaean-type “mixed” model is consistent with contemporary “neo-dissociationist” conceptions of consciousness (Hilgard, 1997), with psychoanalytic accounts of the “multiple and discontinuous nature” of psychic structure and motivation (Mitchell, 1993), and with neurocognitive models of the “modularity of mind” (Siegel, 1999). It also addresses Flanagan’s (1991) concern for a more “realistic” account of the dynamics of moral character. Each aspect of this moral dilemma is further described below.

### *Diminished Capacity and Sources of Motivational Deficit*

First, deriving from a more dynamic interpretation of virtue and vice (Lear, 2000; Symington, 1994), this postulate suggests that the diminished capacity results from motivational deficits and structural deficiencies in the collective of associative networks that enable prosocial motivation and action. *Motivational deficit* refers to limitations in the range and strength of one’s repertoire of moral affective capacities (e.g., too little empathy). *Structural deficiency* refers to the content and affective tone of one’s working models or implicit relational representations of self and other (e.g., dismissive avoidant attachment).

Zilberg and colleagues (1991) likewise offer a helpful discussion of the varieties and conditions of moral motivational deficits. They suggest that three broad factors can diminish a psychological capacity (as defined above). First, a relatively developed moral affective capacity can be *defensively blocked*, i.e., not given functional expression because of defensive factors. When there is evidence

of some level of development of a capacity, they write: “whether or not it is manifested in any particular situation does not in itself alter the ongoing existence of it as an attribute of the person” (p. 328), because “unconscious intrapsychic conflict may perpetuate the inability to actualize what may otherwise be latent” (p. 330). This re-states the classical psychodynamic view that previously developed implicit and procedural sub-capacities (virtues) can be defensively obstructed or obscured from operation by multiple and competing “states of mind” (Gabbard & Westen, 2003; Siegel, 1999).

Second, a moral affective capacity can be relatively *deficit*, i.e., dispositionally weak or insufficiently developed, where ‘insufficient’ is defined in terms of generative care (e.g., diminished capacity for empathy). Psychodynamic theory recognizes various factors may lead to a poorly or insufficiently developed affective capacity. 1) Inborn, possibly genetic, hard-wired predispositions. For example, if an individual is born with a limited autonomic and emotional reactivity, this may set limits on the level of empathy that the person can achieve. 2) Factors that involve biological sensitive periods in normal development are also related to range and strength of one’s capacities. 3) Factors related to the processes involved in the *internalization* of others, e.g., availability of adult models who themselves possess adequate levels of certain capacities. These authors suggest that “if a person has a less than optimal level of a psychological resource, the upper limit inherently set on future improvement is a function of the processes that determined the limiting of the level in the first place” (p. 331).

Stern’s (2004) recent interpretation of this aspect of diminished capacity casts new light on its significance. He suggests there is a type of “nonexistent past” that continues to radically influence the present “by imposing initial constraints and degrees of freedom on what are possible experiences” (p. 207). For example, certain ‘missing pieces’ of relational experience are implied in early socioaffective deprivation or hurtful attachment experiences (e.g., the “disorganized” attachment style). Relational experiences that did not occur (what some writers call *deficits*), restrict the range of what is now possible, until “new expansions” (p. 179) of experience are made possible by new interactions. While Stern prefers not to think of these expansions as filling in deficits from the past, he does believe such expansions create new experiences that can be carried forward and built upon in the future.

### *Structural Deficiencies: Illustration with Dismissive-Avoidant Attachment Style*

Third, this model suggests that motivational deficits may result from structural deficiencies in a particular network, and/or from competing associational networks which operate simultaneously and parallel with more virtuous networks (e.g., pride competing with empathy). For example, where a love-enabling moral capacity (virtue) for empathy could or *should* have developed, we sometimes encounter its opposite as *vice*—what dynamic therapist Symington (1994) refers to as “negative emotional activity” or what Lear (2000) refers to as a *neurtue* (neurotic virtue). In connectionist dynamic theory some negative networks (vices) are believed to have developed as compensations for missing interactions, resulting in “distorted” (Ford & Urban, 1998, Ch. 7) or malformed structural constellations (sometimes referred to as *introjects*). Thus, recent dynamic understandings of therapeutic action (Gabbard & Westen, 2003) emphasize the importance of structural changes to these nonconscious associational networks, particularly those that trigger 1) negative (“afflictive”) emotional states (e.g., envy or pride), 2) defensive strategies (e.g., over-idealizing self), and 3) cyclical self-defeating patterns (e.g., dismissive-avoidant attachment style).

To illustrate, for sake of argument consider the *neurtue* (negative emotional activity) of *cold-discounting* to be the functional opposite of empathy. Present research suggests that cold-discounting emotional activity is characteristic of persons who are dismissive-avoidant in their working model of self and other (Bartholemew & Horowitz, 1991). A primary characteristic of this dismissive attachment style is the avoidance of emotional closeness through the discounting of the importance of intimacy (“it’s no big deal”). In general, dismissing avoidants report a high level of self-esteem and self-acceptance (working model of self), with a uniquely low level of subjective distress, but then tend to have interpersonal problems characterized by hostility and coldness (working model of other) (Bartholemew & Horowitz, 1991). This pattern of results suggests that dismissive avoidants tend to protect themselves through idealizing the self and discounting the importance of closeness with others. Thus, in this person the potential for empathy is either functionally weak (not easily primed) or obstructed from functioning because of the more “automatized” (Bargh &

Chartrand, 1999) cold-dismissive working model. While this same person may also have acquired (at least) some limited capacity for empathy, and may be observed in other situations and with other persons to exhibit the capacity, it may be presently (perhaps *characterologically*) obstructed from operation by a simultaneous and competing working model.

The practical implication of this postulate concerning the duplicitous heart is that methods of psychotherapy and means of practical theology must actively target this implicit and procedural “level” of personality. To my view, this would be the special province of theory, research, and practice in a sub-discipline of spiritual transformation we might refer to, following Hall (2004), as *implicit relational spirituality*. The following postulate further addresses how we might model this process of relational affect transformation.

### Core Postulate 3: Moral Process and Therapeutic Praxis *Implicit Relational Transformation*

*The process of spiritual transformation involves structural changes to the moral “heart” of character. Transformation of the capacity to love (generative care) involves three inter-related goals and strategies targeted at implicit relational character (IRC) and associated afflictive emotions (vices).*

The particular focus of this model of “transformational change” (Brown & Miller, 2005) is structural change to the implicit and procedural networks related to prosocial (caring) motivation and action, rather than to higher-level meaning constructs (e.g., beliefs) that are sometimes dissociated from implicit experiences (Bucci, 1997; Hall, 2004). Consistent with other virtue approaches to psychotherapy (Doherty, 1995; Nicholas, 1994) and spiritual formation (Shults & Sandage, 2003) moral-spiritual development is likewise viewed as a virtue-acquisition process. But in contrast to some simple spiritual and positive psychology approaches (as discussed in Part 1), the process envisioned here involves multiple principles of change emphasized in the apophatic tradition. In sum, the logic of this model is to expand relational virtue (moral affective capacities) by diminishing the power of motivational *deficits* and structural *deficiencies* that obstruct one’s capacity to care, i.e., implicit relational character. To that end, this model argues not only that spiritual prac-

tices are important, but also that we must carefully specify in terms of emotion processes *which* practices and *why*. Each of two central concepts in this postulate is briefly considered: 1) an apophatic model of three change processes; and 2) a model of implicit transformation goals and strategies (ITGS).

### *Which Practices and Why: Three Processes of Implicit Change*

The apophatic tradition commends a multi-process approach to change that is more complex than the “moral muscle” and *decisionist* model of prosocial motivation and action suggested by many contemporary positive approaches (Sheldon & Lyubomirsky, 2004). In particular, various apophatic writers emphasize a subtractive principle of change: *less is more* (Jones, 2002). Jones reminds us that *via negativa* (“way of negation”) is not primarily a metaphysical statement about the impossibility of knowing anything (about God or one’s self), rather a “transformational strategy or spiritual discipline” (p. 109). He suggests that, psychologically, the apophatic way involves the process of going beyond existing forms and into the ‘void’ of the strange and unfamiliar, in order to ‘open’ one’s self to new capacities (emerging love). In this virtue quest, negating old images and concepts involves relinquishment and loss, and loss is automatically connected to mourning.

In order to theorize and conduct research at this implicit level of personality, we need a model of the kinds of processes that lead us into new territory. As a start, I have elsewhere proposed a psychodynamically informed *revised* model of the apophatic “doctrine of three ways” (Leffel, 2004; Strawn & Leffel, 2001). Table 1 provides a brief synopsis of this model. Summarizing, in psychodynamic theory, particularly within the relational psychoanalytic camp (Loewald, 1978; Pollock, 1981; Settlage, 1992), a number of therapeutic “actions” (*what* happens) and related “processes” (*how* it happens) that are believed essential for structural change are consistently referenced. Deliberately blurring the theoretical technicalities of particular schools or approaches to therapy, there are three actions and related processes of particular relevance to implicit relational transformation: *illumination* (insight as identification of core relational affective themes), *subtraction* (grief and mourning as disclosure and processing of negative affects), and *addition* (structure-building as internalization of new affective experiences with

**TABLE 1**  
**Overview of a Three-Action Meta-Model of Implicit Transformation**  
**Goals of Illumination, Subtraction, and Addition**

Action of "Illumination" (Goal of Discovery)

First, in the *action of illumination*, the goal is to become more aware of the connection between past hurtful relationships and present unloving motives, attitudes, and relational patterns. Persons discover (*via illuminata*) how certain relational motives and styles, likely deriving from the past, now continue (consciously, nonconsciously, or un-consciously) to affect their present capacity to love.

Action of "Subtraction" (Goal of Detachment)

Second, in the *action of subtraction*, the goal is to diminish the affective-motivational power of hurtful relational history to shape (over-determine) present relationships. Through subtractive strategies there is a detachment from (weakening of) the compulsion to repeat unloving motives, attitudes, and relational patterns. As persons loosen their emotional attachment to certain internal structures (e.g., self as unworthy of love), old motives are "purged" (*via purgative*) and more mature forms of relatedness begin to emerge.

Action of "Addition" (Goal of Relational Embodiment)

Third, in the *action of addition*, the goal is to form new and better representations of self and others, in order to replace less adequate internal representations: "absences of good" (*things that should have been done, but were not*) and "presences of bad" (*things that should not have been done, but were*). This change in representational experience is effected by more mature interactive experiences with others. A more mature relational interactive environment provides opportunities for the embodiment of loving qualities (virtues) of character, e.g., internalizations of the patient and compassionate responses of a therapist (*via unitiva*).

Corresponding "Processes" (Strategies) of Transformation

In this *three-action model*, the action of illumination is facilitated (primarily, but not exclusively) through the process of *transference* (Loewald, 1978); the action of subtraction by the process of *mourning-liberation* (Pollock, 1981); and the action of addition by the process of *internalization of more mature others* (Settlage, 1992). In this view, implicit personality change is understood to be a cyclical (not linear or sequential) process, wherein these actions and processes provide different kinds of "moments" of experience (Pine, 1990). Pictured in spatial terms, personality change and therapeutic progress is like ascending and (sometimes) descending a spiral case, i.e., problematic themes from one's history are re-experienced and enacted at different times and at different levels of developmental maturity (e.g., at the beginning of a new relationship). Each new cycle provides an opportunity for the re-working of less mature relational-motivational structures and for the internalization of more mature motives and capacities.

others). In my reading of this literature, so fundamental and essential are these actions and processes to motivational and relational change, collectively they could be viewed as a process meta-model of transformist change. This model corresponds with two recent meta-models of psychoanalytic therapeutic activity, Stark's (1999) model of therapy as a three-fold process of *enhancement of knowledge*, *provision of experience*, and *engagement of relationship*, and Gabbard & Westen's (2003) model of the three "primary vehicles of change" consisting of fostering insight, provision of new relationship, and

facilitating internalization of functions. In "three-way" terms: *via illuminata* corresponds with enhancement of knowledge (insight principle of change); *via purgativa* with grief and mourning in a relational "holding" experience (subtractive principle); and *via unitiva* with internalizations of new experiences in a more mature relationship (additive principle). This depiction of transformational change yields a model of three inter-related implicit transformation goals that are aimed (primarily) at the structural and motivational development of implicit relational character.

**TABLE 2**  
*Three Facets of Implicit Transformation and Corresponding Goals, Processes, and Strategies*

<i>Theoretical facets of implicit transformation</i>	<i>Goals of implicit transformation</i>	<i>Processes of implicit transformation</i>	<i>Specific Strategies of implicit transformation</i>
Illumination (Insight)	<i>Discovery goal</i> (Awareness of IRC)	Identifying affective transference themes	CCRT (Luborsky & Crits-Christoph, 1990)
Subtraction ("Letting go")	<i>Detachment goal</i> (Diminishing the power of IRC)	"Mourning-Liberation" (Pollock, 1981)	Narrative Emotion Disclosure (Pennebaker, 1997)
Addition ("Building on")	<i>Embodiment goal</i> (Embodying new relational experiences in IRC)	Internalization of "more mature" others (Settlage, 1992)	Confessional small group interaction

***Implicit Transformation Goals and Strategies:  
 An Assessment Strategy***

Further, it is possible to translate these goals into operational constructs of transformation *strategies*, collectively the term implicit transformation goals and strategies (ITGS). The goal of this assessment strategy is to identify various methods of change that mirror the types of therapeutic interactions which take place in vivo in psychodynamically informed therapies. Table 2 outlines each goal and related strategy with its corresponding principle of change: *discovery* (insight), *detachment* (subtraction), and *relational embodiment* (addition). The general logic of this approach is suggested by recent research concerned with "intentional" self-development (Brandtstadter, 1999) and different types of personality growth (Bauer & McAdams, 2004). These authors define "growth goals" as things that people want in their lives (goals) and how they intend to obtain them (strategies). They reason that if people can intentionally guide the development of their own personalities to some degree, then different types of growth goals and associated strategies ought to relate to different forms of personality develop-

ment, specifically to social-emotional well-being (SWB) and social-cognitive maturity (PWB).

The present model suggests that in order to illuminate, weaken, and then strengthen various associational networks one must: 1) discover the vice (insight, primarily through *self-reflection*), 2) detach from the vice (subtraction, primarily through *mourning-liberation*); and 3) embody virtue (addition, primarily through *internalization of more mature others*). I suggest that a variety of extant research programs are consistent with this general model, and offer practical assessment methods for future research on this approach. Consider first the ITGS of *discovery* (illumination through self-reflective insight). The literature on various "mindfulness" (Baer, 2003) practices (reminiscent of some methods of apophatic contemplative prayer) demonstrates that persons can improve their capacity for self-reflection, becoming more attuned to their own emotions, as reflected, for example, in higher concordance between their self-attributed (explicit) emotion states and nonconscious (implicit) emotions (Brown & Ryan, 2003, Study 3). These results suggest that enhanced mindfulness may help persons attune to their habituated implicit emotions, to

reflect that knowledge in their explicit affective self-descriptions, and thus grow in affective self-knowledge (awareness of their impact on others around them). A number of studies also demonstrate that mindfulness can be cultivated and enhanced (Brown & Ryan, 2003). Future research in implicit relational spirituality might consider ways to more systematically model intentional discovery strategies (like this one), whereby persons are able to gain clearer insight into the affective dynamics of their moods and relationships. One of the challenges will be to develop innovative ways to measure the “insight” that results from various types of guided self-reflection, particularly awareness of core transference themes (also see the CCRT method of Luborsky & Crits-Christoph, 1990).

Second, consider the ITGS of *detachment* (subtraction, primarily through mourning-liberation). The narrative self-disclosure paradigm illustrates this approach (Lyubomirsky, Sousa, & Dickerhoof, 2006; Pennebaker, 1997). These research programs have discovered that writing about one’s negative life experiences and emotions, such as “worst” life experiences is helpful in reducing the impact of negative emotions, including providing long-term benefits for physical and subjective well-being. Similar results are obtained when persons reflect upon positive life experiences and goals, such as “personal strivings” (Emmons, 1999) and “best possible selves” (Sheldon & Lyubomirsky, 2004). One of the mechanisms of change likely associated with these methods is a reduction in “goal conflict” that persons may experience (Emmons, 1999). Another explanation, highlighted by Pennebaker’s (1997) research, identifies three additional factors as significant for expressive writing benefits: emotional content (both positive and negative), reflective style (“insight”), and narrative structure (coherence). The common mechanism of change in each of these explanations—at least in the initial stages of the process—seems to be the *amplification* (intensification) of emotion, whether positive or negative, which then leads to a weakening in the intensity of negative emotions and motive states. Unfortunately, since much of this research is conducted within the SWB paradigm (subjective outcome measures) it is not yet clear that these interventions might also lead to the strengthening of already established or the construction of (relatively) new virtues. For example, does the disclosure of regret *also* lead to increases in gratitude, as well as enhancing happiness and bolstering the immune system?

The assessment of both change principles - subtraction of vice and addition of virtue—through the disclosure of negative emotions, promises to be an intriguing area for future research.

Third, consider the ITGS of *relational embodiment* (addition, primarily through internalization of others). For example, the forgiveness interventions described in the work of Witvliet and colleagues (2001, 2002) illustrates this goal and strategy. In a first study, persons were asked to imagine forgiving and unforgiving responses, and subjective emotions and emotional physiology during various conditions of imagery were assessed. They found that when participants visualized forgiving responses toward others who had offended them, they experienced significantly less anger, sadness, and overall negative arousal, compared to when they rehearsed the offense or maintained a grudge. In a second study of transgressors (2002), these researchers found that when transgressors imagined seeking forgiveness from their victims, they reported lower levels of sadness, anger, and guilt, and higher levels of hope and gratitude, but only if the transgressor imagined the victim genuinely forgiving them. Again, since the outcome measures in this emotional imagery paradigm derive from the subjective well-being model, we do not know the longitudinal impact of imagery interventions on virtue-acquisition, whether imagery translates into an expanded capacity to forgive *in vivo*. Other methods that track increases in virtue as a consequence of prolonged interactions with others are even more relevant to the process of relational embodiment as envisioned here. I suggest that research of this nature, expanded to include different virtues (the proposed Big Eight model) and with implicit well-being (IWB) outcome measures holds promise to help us understand the processes of relational virtue acquisition.

### CONCLUSION AND FUTURE DIRECTIONS: A PROGRAMMATIC AGENDA FOR RELATIONAL SPIRITUALITY

Previous articles offered several suggestions for how we might continue to work toward a more “psychodynamically informed” (Westen, 1998) yet *positive* model of virtue acquisition, one that gives theoretical and methodological priority to emotions “both as motivators and consequences of transformation” (Emmons, 2005, p. 247). Based upon further discussion in this article, I offer three additional

directions for future theory and research on emotion and spiritual transformation in the relational spirituality paradigm.

First, I believe the “multi-level interdisciplinary paradigm” suggested by Emmons and Paloutzian (2003) provides a helpful route toward an integrative model (see the example of Emmons & McCullough, 2004 on gratitude). Following this theoretical path, in this article series I have offered an approach that attempts to integrate the insights of Aristotelean virtue ethics, contemporary moral motive theory, and the apophatic approach to change. This approach recognizes the value of “multiple levels of analysis” (here both the *meaning-system* and *moral motive* levels), and invites contributions from multiple disciplines while attempting to integrate teachings of sages from various wisdom traditions and data from the scientists. In future work, the ongoing questions will concern which theories and what data? Here’s one map for entering this new conceptual territory.

Second, for further development of moral motive models I suggest we begin with the positive emotions, then incorporate theory and research concerned with moral emotions and moral motivation. Toward that end, I envision a future multi-level, moral motive model of spiritual transformation that looks something like this. Deriving from the terminology of Fredrickson’s (2001) broaden-and-build theory three affective processes of spiritual transformation can be delineated: *broaden*, *build*, and *transform*. These terms describe three processes likely involved in enlarging one’s capacity to love, each centrally focused on the consolidation of implicit and procedural capacities required for mature relationality (generative care). These processes include: 1) *broadening* thought-action repertoires of care through the intentional *intensification* of positive emotions; 2) *building* virtues of care through intentional *expansion* of moral emotions (moral affective capacities), and 3) *transforming* “afflictive” negative states (affective vices like *hubris*) through the intentional *disclosure* of negative emotional experiences. (This third process ‘broadens’ Fredrickson’s use of the term transformation yet remains an excellent descriptive term.) Also included in this model would be a fourth “meaning level” growth process focusing on the elaboration of global-meaning constructs (declarative beliefs, values, and strivings): *renewing* a sacred mind through the

intentional *narration* of spiritual identity. In sum, the processes of *broadening*, *building*, *transforming*, and *narrating* suggests a potential synthesis of theory and research that better represents lower-level constructs of emotion, while retaining a place for global- and mid-level constructs.

Third, concerning future research, in Hall’s (2004) discussion of methodological issues involved in studying Christian spirituality and mental health, he suggested the need to study spiritual transformation and mental health outcomes, not just in between-subject designs, but in within-subject designs. He also suggested that we need better outcome or criterion measures of change than simple symptom measures often employed, and further, within-subjects longitudinal designs that allow us to track change over time. I concur with these recommendations, and specifically, encourage a more judicious selection of methods and measures that “map” different models of well-being: subjective well-being (SWB), psychological well-being (PWB), and the proposed level of implicit well-being (IWB). Presently, research in this area would benefit greatly by systematic assessment of processes and outcomes of PWB (acquisition of virtue) and IWB (diminishment of vice), not just happiness-enhancement (SWB). The revised “three-way” model proposed above suggests an assessment strategy that is more psychodynamically informed than many positive models, yet incorporates many of the lessons and strategies of this research.

Fourth, perhaps the most critical empirical issue in establishing the validity of moral motive analyses will be demonstrating the “linkage” between moral emotions (motivation) and increased prosocial action. Supposing that certain persons do ‘possess’ the virtues (moral affective capacities) suggested by the Big Eight model, and that there are methods that enhance expansion of these virtues, the question will be whether increased motivation leads to consistent enactments of caring behavior, i.e., whether the link between motive and action is a reliable one (McCullough, 2000). Likely, not all persons who experience prosocial motives will “convert” these emotions into actual behavior. Thus, other questions for moral motive analyses will concern those factors that obstruct or limit the conversion of emotional states to caring action. The proposed model takes an initial step in that direction in suggesting that certain duplicitous (vice-related) states of “heart” are likely to be important variables. Are there, for example, vices antagonistic to specific

virtues that merit particular attention (e.g., the vice of hubris with the virtue of humility)?

This article began with an expressed concern of philosopher of Jacob Needleman (1976) who cautioned that “enormous confusion is bred”—even by well-intended therapists and Christian educators—when we do not “possess a compassionate and workable psychological knowledge of everything in the individual human being that resists or covers over such purity of heart.” I take Needleman’s admonition to be something of a charge to those of us in the therapeutic Christian community who labor to fashion such a model of psychotherapy and spiritual formation. To my mind, the relational spirituality paradigm suggests an approach to psychotherapy and spirituality that directs attention to a critical *implicit* moral dimension of personality, and invites clearer study of some of factors operating in the human being that resists and obstructs such purity of heart. I remain hopeful that through continuing interdisciplinary conversation we might work toward greater clarity in what it means to expand our capacity to love from an increasingly pure heart—for ourselves, and for the benefit of those we have opportunity to “care for” and “take care of” (Erikson, 2000).

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