

## ABSTRACT

“Made in the Image of God” – How the Tripartite Mind-Body-Spirit Structure of Humankind Mirrors the Trinitarian Structure of God, an Ontological Theory

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This thesis presents a new ontological theory of *imago Dei* (the image of God) in humankind. Chapter One analyzes in-depth what it means to be made in the image of God, and what is required of any theory of *imago Dei* to be regarded as a plausible potential theory of how the image of God is represented in humankind. Chapter Two discusses Trinitarian theology as well as accepted truths of the Trinitarian structure and functioning. Chapter Three presents a new ontological theory of the image of God in humankind. This theory purports that humans have a tripartite (three-part) structure – mind, body, and spirit – that represents a sort of trinity in humankind which mirrors the Trinitarian structure of the Godhead and serves as God’s image in humanity. Chapter Four discusses mind-body-spirit health and wellness and suggests a holistic approach to healthcare that considers the whole of what it means to be human, made in *imago Dei*.

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STRUCTURE OF HUMANKIND MIRRORS THE TRINITARIAN STRUCTURE OF  
GOD, AN ONTOLOGICAL THEORY

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## CHAPTER 1

Imago Dei – The Image of God  
“Made in the Image of God” – What could it Mean?

*So God created humankind in his own image, in the image of God he created them; male and female, he created them – Genesis 1:27*

### *Introduction*

This familiar verse in the very first book of the Bible has sparked much debate over the past several hundred years. What does it mean to be made in the image of God? How is this image expressed in humans? These are valuable questions worth considering, and their consideration must begin with the establishment of two central understandings.

### *Two Central Understandings: Inclusion of Both Men and Women in the Image and Inability to Lose the Image*

First, it is made clear in the Genesis 1:27 that the image of God applies equally to men and women: “in the image of God he created *them*; *male and female* he created *them*.” Thus, the idea that humans are “made in the image of God” in the sense that humans look physically like God can be immediately rejected on the basis that this image cannot be applied evenly to both males and females – as the sexes have uniquely distinct physical properties, both internal and external.

William Lane Craig, an American philosopher and Christian theologian and author, prepared a several-week-long program of sermons and round-table discussions that investigates the “Doctrine of Man” and how man is “made in the image of God” (Craig, 2020). In this series of sermons, Craig addresses the construal that being “made

in the image of God” could mean that humans physically resemble God, and he calls this a “popular misconception,” as well as a “crude, rudimentary understanding” of God (Craig, 2020). However, this idea was not completely without defense among some exegetes – though it has waned in popularity. Craig implies that the exegetes encouraging this interpretation may emphasize this straightforward interpretation for the sake of simplicity in understanding (Craig, 2020). After all, the goal of the religious exegete is to interpret the scripture in ways that make sense to laymen.

To further refute the idea of the possibility that God has some kind of corporeal body or face which men and women were then modeled after, Craig brings up the point that God is transcendental (Craig, 2020). He also claims that the writer of Genesis knew and believed this fact, and the idea of a corporeal God directly contradicts this transcendental property that God retains (Craig, 2020). This transcendental (nonphysical) property of God is enlightened and understood through His omnipresence. If God is present everywhere, then He must not retain a corporeal body, because such a body would confine Him to the bounds of space. God transcends and exists outside of both space and time, so a corporeal understanding of him (except for that which occurred through Jesus’ descent to earth) would stand in stark opposition to His transcendental nature.

The next understanding that is fundamental to the consideration of how the image of God is expressed in humankind has to do with the debate regarding whether or not the image is retained or destroyed in the fall of man. This issue draws upon an even deeper, and highly contentious, debate over whether or not the words “image” and “likeness” can be taken to mean the same thing in the scriptures (there are different Hebrew words for

each: *demut* [image] and *tselm* [likeness], as it is written “let us make man in our *image*, according to our *likeness*”). Craig assumes the stance that these two words are approximately interchangeable, and that there is no appreciable distinction to be drawn between them. However, classic Christian theological traditions, teachings and understandings do draw a definitive distinction between the two.

This understanding retains that the image of God in humans cannot be lost, but the likeness to God can be. As Craig explains this understanding, this teaching claims that the “likeness” of God is the original state in which humans are created, which is a state of righteousness (Craig, 2020). In the fall of humankind, this original likeness is thought to be lost, but the *image* of God in humankind is never lost, only distorted (Craig, 2020). The Roman Catholic tradition also advances an understanding of a “special image” of God (likeness) which is lost, but a “general image” of God, which is retained regardless of any action taken by any individual (Craig, 2020).

Despite any real or imagined differences between the meaning of the terms “image” (*demut*) and “likeness” (*tselm*), this thesis is primarily concerned with the “image” component – and particularly, the understanding that the “image” cannot be lost, while the likeness may be lost. Though some traditions of faith argue for or against the ability of the likeness of God to be lost, all traditions agree that the image of God cannot be lost. Craig supports this conception further by referencing a verse in Genesis which states “whoever sheds the blood of man, by man shall his blood be shed, for God made man in His own image” (Genesis 9:6). Craig claims that this verse supports that the image of God cannot have been lost in the fall of humankind, because the image of God

is still referenced as a part of humanity *after* the fall of humankind occurs in Genesis chapter three (Craig, 2020).

*Two Requirements for any Theory of Imago Dei*

These two aforementioned understandings – the fact that the image of God applies evenly to men and women, and the fact that the image of God cannot be lost – are central to the interpretation of what it means to be “made in the image of God” and these understandings set the stage for the analysis of any theory for what the image of God in humankind may be. In considering the meaning of this verse, it is now clear that any plausible interpretation of the “image of God” must be something that is common to all humans and something that is unable to be lost.

With this understanding, another misconception of what it means to be “made in the image of God” can be debunked. It is not uncommonly suggested that righteous attributes – such as a propensity for justice, a love for others, etc. – is what reflects the image of God in humans. However, with the understanding that the image of God cannot be lost, these types of interpretations clearly fall short of truly capturing the essence of the image of God in humankind. Not all individuals have these righteous attributes nor express them (such as individuals with antisocial personality disorder who lack regard for the wellbeing of others and are not interested in the pursuit of justice or fairness, just the pursuit of their own self-interest and satisfaction), yet all individuals are created in the image of God and cannot lose this image. Surely, people can act in ungodly ways, and do so quite often, but this does not remove the image of God from them – though it does remove or preclude their likeness to God.



### *Three Theological Theories of Imago Dei*

There are three primary theological theories regarding the interpretation of *imago Dei* (the Latin term for “the image of God”) in humankind and they are the ontological/substantialistic understanding, the relational understanding, and the representational/functional understanding. All three of these theories are well-studied and substantiated by scriptural evidence and theological insights. This thesis will prioritize and advance an ontological/substantialistic representation of *imago Dei* without rejecting the plausibility of the other two conceptualizations.

#### *Ontological/Substantialistic*

An ontological/substantialistic, or structural, understanding suggests that there is something about the structure or the nature of *being* (the *substance*) of humans that is similar to the structure or nature of *being* in God. There are hundreds, perhaps thousands, of ontological/structural views of the image of God in humankind. A few prominent structural proposals suggest rationality, freedom of will, and moral consciousness/conscience as the distinguishing structural feature of humans that mirrors that of God (Farris, 2015). However, since two important principles of the *imago Dei* are that it is common to all humans and it cannot be lost or destroyed, these theories appear to fall short in the wake of the realization that not all people are rational at all times, not all people can be considered to have freedom of will at all times, and not all people display moral consciousness or a conscience at all times.

First, rationality is not present in all people at all times. Rationality is defined as “the quality of being based on or in accordance with reason or logic” (Merriam-Webster, 2021). This becomes problematic when considering cognitive impairment and mental

health issues, such as psychotic disorders. Individuals with cognitive impairments – such as those caused by Alzheimer’s, dementias, Huntington’s disease, aphasia, and other diseases and disorders – often experience symptoms of confusion, impaired judgment, and impaired problem-solving ability (Donaghy et al., 2017). Thus, these people, at least at the time they are experiencing symptoms of cognitive impairment, cannot be considered to be “based in or in accordance with reason or logic,” the definition of rational (Merriam-Webster, 2021). With regard to psychotic disorders, such as schizophrenia, the defining feature of psychosis is “a loss of touch with reality” (Fulford et al., 2018). Psychological research studies have distinguished between three types of rationality – procedural rationality, content rationality, and experiential rationality – all of which have been implicated in various symptoms of schizophrenia (Gold & Hohwy, 2000). Therefore, rationality cannot necessarily be assumed to exist in all people at all times, so it violates this principle of what it means to be *imago Dei* in that it can never be lost.

Next, the issue of freedom of will being present in all individuals at all times is constrained by several factors – some physical and some psychological. Individuals with severe motor impairments and physical disabilities cannot be said to necessarily possess freedom of will, since the definition of freedom of will is “the power of acting without constraint of necessity or fate” and they are necessarily and fatefully constrained to the limits of their bodies (Merriam-Webster, 2021). In terms of psychological constraints, when individuals are threatened, their freedom of will is violated by another individual. One cannot say they have freedom of will at this moment. To some extent, there are choices that one is still capable of making – even in the most dire and threatening

circumstances – but those choices are surely constrained by the *necessity* and the *fate* of the situation, or at least the individual’s interpretation of the necessity and fate of their actions. In these situations, the fate of the individual is determined by a source outside of themselves (the threat itself, or the person imposing the threat), so one cannot reasonably be said to have freedom of will at those times, which causes this representation to fall short of the requirement that *imago Dei* cannot be lost.

Lastly, moral consciousness or the use of a conscience has been proposed as an ontological understanding of *imago Dei* in humans. This, for the same reason as the theories of rationality and freedom of will, fails as an adequate representation because it cannot evenly apply to all humans at all times. Consider Antisocial Personality Disorder (the sufferers of which are often referred to as “psychopaths” or “sociopaths” among laymen, though such terms are not used in psychological literature or clinical settings), a disorder which is marked by consistently showing a lack of regard for right and wrong, ignoring the rights and feelings of others, and failing to display guilt or remorse (APA, 2014). A large body of research indicates that individuals with Antisocial Personality Disorder tend to score low on measures of empathy and understanding, and high on measures of hostility, callousness, and manipulateness (Dunne et al., 2020). Some researchers even go so far as to say that people with Antisocial Personality Disorder do not have a conscience at all, while most others argue for an understanding of an underdeveloped or impaired conscience (Hare, 1993; Vujošević, 2014). Whether it is the case that no conscience exists at all in sufferers of Antisocial Personality Disorder, or that their conscience is underdeveloped or impaired, research has shown that, even with long-term therapy, it is not possible to cure the symptoms of Antisocial Personality Disorder –

including the symptom of a lack of regard for right and wrong (Tuck & Glenn, 2020). One group of researchers even make the claim that antisocial individuals “are so difficult to treat as to be next to untreatable” (Brazil et al., 2016). Clearly, individuals with Antisocial Personality Disorder do not display moral consciousness and do not rightly exercise their conscience, assuming they have one to begin with. Thus, this ontological explanation of *imago Dei* also fails to encompass all individuals at all times.

Despite the shortcomings of the previously mentioned ontological/structural models, I intend to advance the argument that a true and correct ontological model of the *imago Dei* must exist, whether or not it has been conceptualized correctly yet. In the forthcoming sections, I will show how both the relational and functional/representational models of *imago Dei* ultimately rely on ontological understandings and assumptions. These three models do not have to stand in complete opposition to one another, though. It is entirely possible that more than one of these theories is correct, and that there are multiple ways – including relational and/or functional/representational ways – in which *imago Dei* is expressed in humankind. What I do argue, however, is that an ontological understanding is inevitable.

An ontological model cannot be discarded as an option in favor of one of the other models alone, because the other two models rely on ontological assumptions about human nature, behavior, and functioning. Specific ontological models may surely be rejected – such as the “crude, rudimentary idea” that God looks physically and corporeally similar to humans, and the models of rationality, freedom of will, and moral conscience discussed previously – but it can be reasonably assumed that there is some true ontological likeness that humans have to God (Craig, 2020). Without accepting this

inevitability, the two other models fail to completely advance their unique arguments, since those arguments rely on ontological assumptions. By the end of this thesis, a new ontological conceptualization of *imago Dei* in humans will be presented.

### *Relational*

A relational understanding of *imago Dei* suggests that what reflects the image of God in humankind is, supposedly, not actually something inherent in the structure of humans – rather, it is a relation rooted in freedom. This relational model of *imago Dei* is the view that modern theologians, such as Emil Brunner and Karl Barth, have most frequently endorsed (Miller, 2011). As Dietrich Bonhoeffer understands it, to be made in the image of God means two things: (1) to be a creature, and (2) to be free. Freedom is a *relation* in that freedom is not something that may be possessed nor a quality that characterizes a person in the way that a person may be intelligent, talented, kind, or other qualities. Instead, freedom exists as a relation between two beings – humankind is free because God allows our freedom. “The creature is free in that one creature exists in relation to another creature, in that one human being is free *for* another human being” (Bonhoeffer, 1959).

This understanding of and participation in being “free for” God and others (rather than free *from* them) is paramount to the first of Bonhoeffer’s components of being *imago Dei*, the fact that humans are *creatures*. Being a creature implies having a creator, and no creature is capable of being their own creator. Thus, our nature as creatures, and our existence at all, is made possible only through God’s creation of humankind and God’s love for humankind, such that – in a communion of love – He is free for us and we are free for Him and for others.

The Godhead exists in Trinity – Father, Son, and Holy Spirit – and relationality as a communion of love, openness, and receptivity is found among the three persons of the Trinity. Because the persons of the Trinity exist in a relationship of love, openness, and receptivity to one another, and humankind is provided the freedom to participate also in a communion of love, openness, and receptivity to God and to others, this is what – according to the relational perspective – reflects the image of God in humankind.

While the relational understanding meets both requirements of what it means to be *imago Dei*, I argue that it is potentially incomplete. With regard to the relational understanding, it is said that

It is a question of the relationship *within* the being of God on the one side and *between* the being of God and that of man on the other. Between these two relationships as such – and it is in this sense that the second is the image of the first – there is correspondence and similarity. (Barth et al., 1936)

The relational understanding suggests that the Godhead experiences intratrinitarian relationality – a relationship based in loving communion, openness, and receptivity among the three distinct persons of the Trinity – but then suggests that the *image of God* in this way is reflected in God’s relationship with humankind. I suggest that these understandings may be separate, and that the first on its own may have a reflection (image) in humankind, as well as the second. In this way, it is possible that the relational understanding is incomplete and a structural understanding of humankind as tripartite is necessary to suggest an intrahuman relationality that mirrors the intratrinitarian relationality. An idea such as this is not without support, in fact:

God is Trinity, He is never alone, He eternally exists as Father, Son, and Spirit. The relationship of God *ad extra* is not alien to His nature, it perfectly corresponds to His inner being...“For Barth, being made in the *imago Dei* is more

specifically to be made in the *imago trinitatis*.” (Viazovski & Helm, 2015; Stephenson, 2008)

To suggest that humankind is made in the image of the *Trinity* lends itself to a potential structural interpretation of humans as tripartite (three parts; three-in-one) in a similar way that the Godhead is Trinitarian, three-in-one. Theologians such as Thomas Aquinas and Augustine have proposed that *imago Dei* may exist as some sort of structural “trinity” in humankind (Aquinas, 1912; Augustine, 2002). This will be revisited in chapter three.

#### *Functional/Representational*

Lastly, a functional, or representational, understanding suggests that the image of God is reflected in humankind in their function in the world and their God-granted dominion over the “fish of the sea, the birds of the air...and over all the wild animals and all the creatures that crawl on the ground” (Genesis 1:26). This view advocates for the understanding that humans mirror God in their functions, and this view has been frequently endorsed in modern conceptions of the *imago Dei*. Specifically, the functional understanding advances the conception that God granted humans the special privilege of having dominion over other species. Through that dominion, humankind may exercise power – but they ought to do so in a way that *mirrors* the way God would act and exercise his power.

Pastor William Lane Craig, in his “Doctrine of Man” sermon series, makes an argument for a major flaw in the functional understanding alone as the representation of *imago Dei*. He states that “a functional interpretation does not preclude, and even presupposes, a substantial interpretation” (Craig, 2020). Craig gives a summary of a functional argument made by Robert Middleton in his book “The Liberating Image of God”, and proceeds to read a footnote written by Middleton, which states “both

functional and relational interpretations of the image are substantialistic interpretations, strictly speaking metaphysical, in that they also make ontological assumptions about human nature” (Craig, 2020).

Since both the relational and functional understandings rely on ontological assumptions about human nature, an ontological interpretation is “practically unavoidable” according to Craig (Craig, 2020). Both of these theories express some kind of ontological similarity to God – namely, our capacity (and perhaps also our desire) to participate in relationships with God and others (relational), or our functionality in the world (functional) – and then suppose that the identified similarity *allows* us to serve as God’s representation or image (Craig, 2020).

#### *Coexistence of All Three Theological Understandings*

It is not necessary to reject two of these theories in favor of only one correct understanding, there is certainly a way to conceptualize of all these theories as existing, in truth, together. If a distinction is drawn between the image and the likeness of God, then the ontological assumptions of the theories might serve to represent the “image” of God, which is common to all individuals and cannot be lost, and the further understandings of the relational and functional models may represent the “likeness” to God. The likeness of God can be explained, in this light, by both of these theories because “likeness” is able to be deactivated, but the scripture definitively suggests that the “image” of God is always present in humankind. Alternatively, it is also completely possible – and even probable – that the image of God is expressed in *multiple* different ways in humankind. In this thesis, I *emphasize* an ontological understanding of *imago Dei*, but I do not reject the relational and functional understandings. In fact, none of the



three understandings may stand on their own, all three understandings inform one another and add to one's understanding of them all.

All three theories can – and do – therefore exist in harmony with one another, rather than in conflict. However, I propose that an ontological similarity is, as Craig proposed, inevitable. I posit that perhaps the correct ontological similarity that defines man as the “image of God” has not yet been proposed. Perhaps there are even multiple ontological similarities between God and humankind, all of which express a piece of what it means to be *imago Dei*. By the end of this thesis, I will propose my own ontological/structural construal of *imago Dei* in humankind – by drawing comparisons between the structure of the tripartite human (the aspects of which are: mind, body, and spirit) and the divine structure of the Trinity. While this is yet another attempt in a longstanding list of attempts made throughout history which aim to pinpoint a correct ontological explanation of *imago Dei*, and it is speculative and investigative in nature, it is crucial that any proposed ontological model is grounded in the scripture and in theological research in order to be considered with seriousness. This thesis seeks to emphasize the understanding of the ontological connection between the mind-body-spirit system of humankind as a representation of *imago Dei* that mirrors the Trinity. In the coming chapters, evidence from these sources will be presented throughout the development of this ontological thesis.

#### *Purpose of This Thesis*

My hope is, whether my particular ontological theory is necessarily correct or not, that my thesis on the whole may promote better, deeper, and more fulfilling understandings of God and of oneself. By better understanding the structure and

functioning of the Trinity, a greater understanding of our own structure and functioning may be achieved. Perhaps, also, in better understanding our own structure and functioning – and actively integrating all pieces of that structure – a deeper understanding of the structure and functioning of the Trinity can also be achieved. Throughout history, the particulars of the Trinity have been difficult concepts to grasp. It is hard to conceptualize how one God may exist as three unique, but equal and interconnected, persons. In investigating a tripartite (three in one) structure of humankind that maintains all three parts as unique, but equally important and interconnected, I hope that my ontological model may set the stage for a better understanding of the Trinitarian structure of the Godhead.

## CHAPTER 2

### The Trinity – Father, Son, and Holy Spirit Three Persons, One Essence

*Then God said, 'Let **us** make humankind in **our** image, according to **our** likeness' –  
Genesis 1:26*

#### *Introduction*

The identity of the Godhead as Trinitarian has been a hotly debated theological controversy for centuries. This controversy is clearly problematic for, and perhaps even distressing to, many Christians because the identity of God is undeniably central to one's beliefs and proclamation of their Christian faith. Indeed, Millard Erickson, a Protestant Christian theologian, professor of theology, and author, states that

[T]his doctrine in many ways presents strange paradoxes. It is very widely held...yet it is a widely disputed doctrine...It is held by many with great vehemence and vigor. These advocates are certain they believe the doctrine, and consider it crucial to the Christian faith. Yet many are unsure of the exact meaning of their belief. It was the very first doctrine dealt with systematically by the church, yet it is still one of the most misunderstood and disputed doctrines. (Erickson, 1995)

In this chapter, the contemporarily accepted views of the Trinitarian Godhead will be presented along with common misconceptions and heresies relating to the Trinity. The purpose of this chapter is to identify Scripturally-evidenced truths of the Trinitarian structure and the functions specific to the three persons of the Godhead, as well as to clarify confusions surrounding commonly-held misconceptions of God's identity that are present today and have been historically argued over.

In so doing, it is important to remember that there are reasons as to why so much controversy has existed with regard to this topic – namely, that there are apparent contradictions in the Doctrine of the Trinity, that the identity of God is widely regarded to be a mystery which is unable to be fully revealed to humans, and the fact that the term “Trinity” is not present anywhere in the Scriptures. Each of these will be addressed and expounded upon.

### *Apparent Contradictions*

First, the apparent contradictions in the understanding of the Trinity are plentiful and widely recognized. As will be discussed in the proceeding sections, the Triune Godhead is considered to be one God alone, yet three distinct persons. These persons are considered to be of the same substance or essence, and the three persons are unified in sharing the identity of being the one true God. Additionally, the three persons are unified by the relationship and communion that is shared between them. The three persons of the Trinity are *not* considered to each assume one-third of the being of God, but rather each person is wholly God individually – yet the three persons are mutually dependent upon one another and exist in mutually loving relationship to one another. The Son and the Holy Spirit are said to proceed from the Father, but are not considered to be *created* by the Father; instead, the Son and Holy Spirit are said to have always existed with the Father. These differences appear to be tough to reconcile – and even theologians agree on that – which is why so much controversy has existed over how to properly conceptualize the Triune Godhead. However, these apparent contradictions can be reconciled, as God transcends Earthly possibilities. We, as humans, cannot possibly fully conceptualize the nature of the Godhead, as we are finite and God is infinite. Still,

theologians have reflected deeply on these issues, and their reconciliations of these contradictions will be offered in the sections that follow.

### *The Understanding of God as a Mystery*

Next, as alluded to above, it cannot go unspoken that the Triune nature of God is incomprehensible to humans and widely regarded as a mystery. “The Trinity is not something we can understand, it is a mystery that we must simply believe... And yet the Trinity is not simply a mystery to be acknowledged but not understood” (Repp, 2016). Basil the Great, a Cappadocian father, clarified that the Trinity will always retain a mysterious quality, but that God’s nature and identity are not “totally foreign” to us – rather, the “extent and depth of our knowledge of the divine” is, and always will be, limited (at least until we reach heaven) (Kärkkäinen, 2017). Franz Dünzl adds that even the angels do not fully comprehend the nature of God, this information is knowable in full only to the Father, Son, and Holy Spirit (Kärkkäinen, 2017).

However, this does not mean that we ought to cease any attempt to understand God more fully – to the highest degree we are able. No human representation can fully appreciate the glory of God, and we are only capable of employing “ordinary natures and ordinary speech as our means of expressing what our mind apprehends; a means no doubt unworthy of the majesty of God, but forced upon us by the feebleness of our intellect” (Kärkkäinen, 2017). “To speak of the divine nature, then, is to stand with Moses on Mount Sinai, peering into the darkness of the mystery of God.” (White, 2017). With this in mind, this thesis will present some of the truths of the Trinity that are knowable to humankind, and those which have been supported by Scripture and sound theology.

### *Absence of the Term “Trinity” in the Scriptures*

Lastly, there exists the concern of the fact that the term “Trinity”, or an equivalent term, is never utilized in Scripture. This rightfully causes concern among Christians that the Trinitarian positions advanced and held central to the Christian belief system may be faulted or rooted in nonreality. However, even though “the Trinity is unknown in the first part of the Scripture” – that is, the Trinity is never described in the Old Testament – it has an “ubiquitous presence everywhere on the New Testament pages” (Kärkkäinen, 2017). Though the term “Trinity” is never used at any point in the Bible, references to the “Father”, “Son”, and “Holy Spirit” are plentiful throughout the New Testament, and information specific to each person of the Trinity, as well as information that unifies the three persons into one Godhead, is also present within the pages of the New Testament. Indeed, this is the “Good News about Jesus Christ...the understanding of God as Trinity, Father, Son, and Holy Spirit, flows inevitably and necessarily from the gospel’s message of salvation” (Repp, 2016). As this chapter advances, these Scriptural references will be cited and explained in an attempt to clarify what is known and what can be inferred from the Bible with regard to the truths of the Trinity.

### *One God and One God Alone*

From even the earliest books of the Bible, it is made clear that there is only one God: “Hear, O Israel! The Lord our God is one Lord” (Deuteronomy 6:4; Mark 12:29). “I am the first, and I am the last; and apart from me there is no other God” (Isaiah 44:6). These particular verses, and several others like them, have been used for centuries to defend the principle of monotheism held deeply in the hearts and minds of Christians and Jews alike. Thus, the concept of a three-part Godhead appeared to immediately

contradict this primary principle, resulting in discomfort and widespread debate over how these ideas (one God, yet three persons within the Godhead) could possibly exist harmoniously. It is important to realize that in Christian theology “the presupposition from the beginning is of the unity of God. Monotheism is a first presupposition of Trinitarian theology, not a conclusion. It is a starting point based on which we understand the rest, not a hypothesis that is up for grabs” (White, 2017). So, it is only proper to consider representations of God which do not violate monotheism – examples of polytheism are held as heretical and these ideas will be addressed further on.

With the understanding that there is ultimately only one true God, it becomes necessary that the three persons of the Trinity – the Father, the Son, and the Holy Spirit – be of equal status, each one wholly God, and in harmonious unity with one another, representing the same will, and being of the same essence (which will later be described as the essence of goodness and love). The equality of the three persons, as well as the unity and communion that is shared between them, is to be discussed in the subsequent section. However, the distinctiveness of the three persons of the Trinity is also of utmost importance; though it may at first feel contradictory to speak of differences or distinctiveness among three persons which compose just one Godhead, this apparent contradiction can be, and is, reconciled without violating the principle of monotheism, and this reconciliation will be a point of discussion as well.

*Equality, Unity, and Communion – yet Distinctiveness – within the Three Persons*

The first quality of the Trinity that necessitates recognition and discussion – and has certainly been misinterpreted, overlooked, or flat-out opposed in the past – is that of the equal status and equal divinity possessed by the Father, the Son, and the Holy Spirit.

The divinity of the Father has not been disputed throughout Christian theological history, but the divinity and equal status of both the Son and the Holy Spirit most certainly has been. Next, the unity of the three persons of the Trinity will be considered and supported, drawing attention to principles of homoousios/consubstantiality, perichoresis (mutual indwelling), and the mutual dependency of all three persons upon one another. Following this, a discussion of the relationship of communion among the three persons will be advanced. Lastly, this section will consider the distinctiveness of the three persons, including what particular experiences and roles are unique to each member of the Godhead.

#### *Equality in Divinity of the Three Persons*

As aforementioned, the divinity of God the Father is rarely, if ever, called into question by Christian theologians and scholars, but there has been considerable controversy surrounding whether or not the Son and the Holy Spirit possess such divinity as well. The Bible provides sufficient Scriptural evidence for the equal status of all three persons of the Trinity. For example, “prayer is offered to the Father ‘through Jesus Christ’ (Romans 1:8), and to the Father and Jesus together (1 Thessalonians 3:11–13); benedictions can be uttered in either name (Rom 16:20), or in the name of Jesus with no mention of the Father (1 Corinthians 16:23)” (Holmes, 2012). Surely it would be improper, even blasphemous, to pray to Jesus – especially without mention of the Father – if Jesus were not God Himself. Further, it is a central premise of Christianity that the death of Jesus Christ upon the cross is what allowed for humans to be redeemed of their sins and brought back into fellowship with God – a feat that could be accomplished only if this sacrifice in death was made by a fully divine being (Kärkkäinen, 2017). There are



several other compelling events in Scripture, particularly in the Gospels, which imply or outright claim the equality of the Son with the Father:

In the Gospels Jesus claims to perform miracles by his own will and power (Matthew 8:3; John 9:1–6, 31–32). He forgives sins (Mark 2:5–7; Luke 7:48–50, 23:43; John 8:1–11), and claims to have authority to interpret definitively and abrogate aspects of the Mosaic law, actions normally reserved only to the God of Israel (Matthew 5:17–48; Mark 2:27–28; John 5:1–23). More astonishingly, Christ claims to be one with God: “I and the Father are one” (John 10:30). He makes multiple statements suggesting that he personally pre-existed the creation of the world (John 8:58, 17:5, 18:37), that he has been sent into the world so as to be the unique savior of humanity (John 8:42, Luke 19:10; Mark 10:45). (Kärkkäinen, 2017)

The equality of the Son with the Father was more easily grasped and agreed-upon than the equality of the Holy Spirit with the other two persons of the Trinity. The examples provided in the antecedent discussion focused solely on the equality of the Son with the Father, so we will now turn to the arguments in favor of the equality of the Holy Spirit with the Son and Father. First, with regard to Scriptural evidence, Jesus instructs His disciples to “go and make disciples of all nations, baptizing them in the name of the Father and of the Son and of the Holy Spirit” (Matthew 28:19), implying the equality and the importance of all three persons as truly God. Further evidence of the divinity of the Holy Spirit can be “found in the biblical statement that Christ (whose deity had been firmly established by this time) lives in us through the Spirit of God, which implies the similarity of nature among all three Trinitarian members” (Kärkkäinen, 2017).

Several church fathers, clergy members, and theologians accepted this understanding and argued in favor of equality among all three Trinitarian persons. Basil the Great “contended that it was appropriate to glorify the Spirit along with the Father

and Son” (Kärkkäinen, 2017) and stated explicitly that “the Holy Spirit partakes of the fullness of divinity” (Basil, 1888). Basil also advanced the argument that “union between the human being and God brought about by the Holy Spirit is yet another indication of the divinity of the Spirit” (Kärkkäinen, 2017). Likewise, Athanasius “insisted that the Spirit is in Christ as the Son is in the Father” as well as “insisted on the indivisibility of the Trinity as another proof of the equal status of the Spirit” (Athanasius, 2014). These positions were affirmed at the Second Council of Nicaea and in the Nicene Creed, which formally and officially recognized the equal status of the Holy Spirit in the Godhead and asserted that the Holy Spirit is to be “worshiped and glorified together with the Father and Son” (Kärkkäinen, 2017).

Clearly, there is substantial evidence found in the Scriptures to support the equality of the Father, the Son, and the Holy Spirit in the Godhead. Additionally, with the support of several influential church fathers, clergy members, and theologians, this has become a widely-accepted principle of the Trinity. No one member of the Trinity is placed “above” another in terms of value, power, or divinity. Now, we shall turn to the unity of these persons and what ties them together as one God and one God alone.

### *Unity of the Three Persons*

The unity of the three persons of the Trinity is paramount to the identity of the Godhead, as well as the ways in which God works. Purported famously by Tertullian, “God is three in one or one in three with real distinctions, yet with no separation” (Kärkkäinen, 2017), and “the distinction between Father, Son, and Spirit” does not “imply separation or division” (Tertullian, 2012). Despite *distinctiveness* between the three persons, there is no separation between the persons and no unlikeness among the

three either – The Father, Son, and Holy Spirit “share a unity of nature and substance; there is no unlikeness between them” (Kärkkäinen, 2017). This unity of “nature and substance” is the cornerstone of homoousios (translated: consubstantiality) and is the topic which will be addressed foremost in this section. Proceeding onward from homoousios, a discussion of perichoresis and finally mutual dependency will ensue.

*Homoousios (Consubstantiality).* The term homoousios (“same substance”, “same essence”, or “same nature”) was notably used in the Nicene Creed: “We believe...in one Lord Jesus Christ, the Son of God, begotten of the Father...being of one substance [homoousios] with the Father” (Schaff, 1877). The use of this term was derived from Tertullian’s position that Jesus’ saying “I and the Father are one” ought to be taken to mean that “the Father and Son are of ‘one substance’,” not that they are one in “singularity of number” (Tertullian, 2012). This understanding laid the groundwork for conceptualizing the Godhead as one substance/essence/nature while maintaining distinctiveness as three persons in perfect unity with one another – “There is only one essence or being of God, which all three persons share completely. Furthermore, each person is God in himself” (Letham, 2016). The united substance of the Father and Son is also evidenced scripturally in the words of Jesus: “I am the way and the truth and the life. No one comes to the Father except through me. If you really knew me, you would know my Father as well. From now on, you do know him and have seen him” (John 14:6–7). Through knowing and seeing Jesus, early Christians were said to know and have seen the presence of God Himself.

But what is that substance which is shared between the Father, Son, and Holy Spirit? The substance can be rightfully appropriated as love and goodness: “God is love.

Whoever lives in love lives in God, and God in him” (1 John 4:16). One of the earliest Greek theologians and biblical scholars, Origen, pointed to this in saying “the primal goodness is to be understood as residing in God the Father...the Son...and the Holy Spirit...retaining within them, without any doubt, the nature of that goodness” (Butterworth, 1966). Augustine shared in this belief and in Book XV of his work *On the Trinity* he wrote, “when we came to treat of love, which in the Holy Scriptures is called ‘God’, then a trinity began to dawn on us a little, that is, one that loves, that which is loved, and love” (Augustine, 2002) and Augustine, being a Platonist, believed love to be a substance (Noble, 2013). In addition,

The Saviour Himself rightly says in the Gospel, “There is none good save one only, God the Father,” (Mark 10:18) that by such an expression it may be understood that the Son is not of a different goodness, but of that only which exists in the Father, of whom He is rightly termed the image, because He proceeds from no other source but from that primal goodness, lest there might appear to be in the Son a different goodness from that which is in the Father. Nor is there any dissimilarity or difference of goodness in the Son. (Butterworth, 1966)

Today the term *homoousios* is used frequently in Trinitarian theology. Indeed, the concept has become one of the centerpieces of the theological discussion and understanding of the Trinity. Also in support of the *homoousios* understanding of God, Basil the Great offered the statement, “For all things that are the Father’s are beheld in the Son, and all things that are the Son’s are the Father’s; because the whole Son is in the Father and has all the Father in Himself” (Kärkkäinen, 2017), which provides a fitting segue into the discussion of *perichoresis*.

*Perichoresis (Mutual Indwelling)*. The term *perichoresis* posits that the three Trinitarian persons are mutually indwelling within one another. As Basil the Great

stated, “The whole Son is in the Father and has all the Father in Himself” (Kärkkäinen, 2017), so too is the Holy Spirit wholly indwelling in both the Son and Father, and both the Son and Father indwelling in the Holy Spirit (Moltmann, 1993). Leonardo Boff, theologian and priest, offers the understanding that

speaking of God must always mean the Father, Son and Holy Spirit in the presence of one another, in total reciprocity, in immediacy of loving relationship, being one for another, by another, in another and with another. No divine Person exists alone for its own sake; they are always and eternally in relationship with one another...each [person of the Trinity] is itself, not the other, but so open to the other and in the other that they form one entity, i.e., they are God. (Moltmann, 1993)

This understanding of perichoresis as it applies to the unity of the Trinity has gained momentum and popularity in recent years. Beyond contributing significantly to the conceptualization of the persons of the Trinity in relation to one another and in relationship with each other, perichoresis is thought to be central to the substance or *being* of God as well. T. F. Torrance, a prominent theologian and minister wrote,

they have their very Being in mutual indwelling (perichoresis), for as the One God they are indivisible. God is three Persons, but not three individuals. In fact, we have to say that God is three Persons, but one Individual. God is an indivisible Unity of three Persons who have their very Being from and to and in each other. (Torrance, 2000)

Clearly, if these statements are accepted as truth, perichoresis then logically plays a paramount role in the understanding of the Trinity – it is central to the identity of God. This mutual indwelling of the Father, Son, and Holy Spirit leads to the question of their dependency upon one another, which is the subject of the proceeding section.

*Mutual Dependency and Relationship of Communion.* It seems strange – even counterintuitive or perhaps heretical – to suggest that God, in His infinite power, would

*depend* upon anything. No suggestion of dependence upon anything earthly or external shall be advanced, but the mutual dependency of the three persons of the Trinity is worthy of consideration. God, of course, does not depend on anything external, but the persons of God may be considered to depend inwardly upon one another. This dependency is fully expressed in the relationality of the three persons of the Trinity and in the communion that they share.

First and foremost, a clarification of the language used to describe the relationship between the persons of the Trinity, particularly the use of the word “proceeds”, is warranted. It is said that “the Son of God is the eternal Logos or Word of the Father, who proceeds from the Father and through whom the Father creates all things” (White, 2017) and in the Nicene Creed it is written, “we believe in the Holy Spirit, the Lord, the giver of Life, who proceeds from the Father and the Son” (Burn, 1909). The term “proceeds” serves simply to suggest the homoousios of the three persons and should not be confused with the false notion that the Son and Holy Spirit were *created* by God the Father, which wrongfully suggests that there was a time at which God the Father existed without the Son and the Holy Spirit. This notion of the Son or Holy Spirit being created by the Father is wholly rejected and in fact condemned by the Catholic Church in the Nicene Creed (Burn, 1909). The Scripture points to this important differentiation in John 1. “The Word” is commonly used to describe Jesus – as in “The Word became flesh and made his dwelling among us” (John 1:14) – and the Bible proclaims that “in the *beginning* was the Word, and the Word was *with* God, and the Word *was* God” (John 1:1), supporting both the notion of the Son’s equality of divine identity with the Father as

well as the fact that the Son was not “created” by God the Father, since He existed from the very beginning *with* the Father.

Beyond the three persons of the Trinity simply existing together from the beginning, they are said to be mutually dependent upon one another. Indeed, even prescribing names of Father and Son to two of the persons suggests a mutually dependent relationship, for no one is called “Father” who does not have a child, and all children must necessarily have a father in order to exist. As Basil the Great stated, “the Father is Father because he has a Son; the Son is Son only because he has a Father; the Spirit is Spirit only because of the love in which the Father begets the Son and the Son gives back to the Father” (Boff, 1988). Thus, “God the Father would lose his identity and being if he did not have the Son, and the same applies to the Son and to the Spirit” (Ezigbo, 2013).

This mutual dependency as well as the inherent unity of the Trinitarian persons is further expressed by the divine relationality and communion shared between them. As Pannenberg stated in his work, *Systematic Theology*,

in the handing over of lordship from the Father to the Son, and its handing back from the Son to the Father, we see a mutuality in their relationship...By handing over lordship to the Son, the Father makes his kingship *dependent* on whether the Son glorifies him and fulfils his lordship by fulfilling his mission. The self-distinction of the Father from the Son is not just that he begets the Son but that he hands over all things to him, so that his kingdom and his own deity are now dependent upon the Son. The rule of kingdom of the Father is not so external to his deity that he might be God without his kingdom. (Pannenberg, 2010)

In the same sense that the mutual dependency of the persons of the Trinity results in their relationality and communion with one another, so too does their relationality and

communion with one another result in further mutual dependency, as expressed in the quote above.

John Zizioulas, bishop and influential Orthodox Christian theologian, takes this understanding a step further, claiming that “there is no being without communion” (Zizioulas, 1985). In support of this understanding, recall that the homoousios of the Godhead is found in *love* (“God is love”). The very definitions of love – both a noun and a verb, something to possess as well as to bestow upon another – depend upon the existence of *something* to receive the love of another. Love is defined as “an intense feeling of deep affection *for something or someone*” (noun) and as “to feel deep affection *for something or someone*” (verb) (Merriam-Webster, 2021). Thus, God cannot *be* love without something or someone *to* love. We know that, according to Scripture, “God so loved the world” (John 3:16), but God was God before He created the world, and God is and always has been Love, so this understanding necessitates that something or someone must have pre-existed with God in order for him to *be* love by *showing* love to that thing or person. The reconciliation of this is found within the existence of the persons of the Trinity and their communion with one another:

That “God is love” means that God is the communion of this Holy Trinity... If we took away the communion of the Trinity to make God a unit, God would not be communion and therefore would not be love... The Father loves the Son and the Spirit, the Son loves the Father and the Spirit, the Spirit loves the Father and the Son: it is another person that each loves. It is the person, not the nature or essence, who loves, and the one he loves is also a person. Because this divine love is a matter of personal communion, this love is free: each person loved is free to respond to this love with love



Correctly understood, the relationality and communion that exists between the persons of the Trinity is a necessary qualification in order for God to be what He says He is: Love. This relationality and communion thus contributes directly to and in fact is itself a component of the *being* of God.

Before moving on to identifying the distinctions between the persons of the Trinity, one final comment must be made with regard to the communion of the persons – and that is the fact that all three persons participate in *every* action or work of God.

The Father never acts as Father outside of the Wisdom who is his Son, and the Love who is his Spirit. Consequently, when the Father creates all reality and upholds it in being, he does so through the Son who is his Word or Reason, and in his Spirit who is his love. It is the Trinity who creates. So likewise in the mystery of human redemption: the gift of grace that comes forth from God and is poured out into our human minds and hearts comes forth from the Holy Trinity. God the Father illumines our minds by faith. He does so, however, *through* his eternal Word and *in* the eternal Spirit. The love that God pours out into our hearts by grace is poured out through the Word incarnate, who is the eternal truth made man, and in the Holy Spirit who is himself uncreated divine charity. (White, 2017)

#### *Distinctiveness among the Three Persons*

Now that the unity of the three persons of the Trinity has been revealed and discussed at length, we are prepared to turn to the components of *distinctiveness* among the persons. As discussed, the three persons exist in harmonious unity with one another, each mutually dependent upon the existence of the others and engaging in a relationship of communion together. However, the three persons are not indistinct from one another, they still possess unique experiences and engage in particular and specific roles within the Godhead, enabling the full power and functioning of what it means to be God.

Throughout this writing, the term “persons” has been used to refer to the three entities of the Godhead – Father, Son, and Holy Spirit. This diction is derived from the Greek term “hypostasis”, which is used to describe the uniqueness of each member of the Trinity, while still remaining true to the principle that all three persons retain one substance or essence (homoousios) and thus are one God alone. Athanasius is credited with claiming that “God is one substance or essence (homoousios) in three persons (hypostasis)” (Putt, 2021). On the term “hypostasis” as it relates to the persons of the Trinity, Franz Dünzl, professor of Early Church History, states in his work *A Brief History of the Doctrine of the Trinity in the Early Church*:

The hypostasis of the Father is characterized by being unbegotten and possessing the divine substance of itself. The hypostasis of the Son is characterized by being begotten and possessing the same divine substance because that is communicated to it by the Father. Being unbegotten and being begotten are accordingly statements about a particular hypostasis, but not about divine substance which underlies the hypostases. (Dünzl, 2007)

This is a helpful illustration used to clarify the meaning of hypostasis in relation to the Trinity, as it displays qualities unique to each person without violating the principles of homoousios, unity, and communion set forth previously.

One way in which the persons of the Trinity are distinct from one another is in their unique experiences. One important example of this distinction is the suffering and ultimate death of Jesus on the cross. A belief known as patripassianism claims that God the Father, too, suffered and died on the cross, and this is regarded as false and therefore heretical (Ezigbo, 2013).

Within and beyond the topic of the unique experiences attributed to each person of the Trinity is the notion that the persons hold special roles and make unique

contributions to the Godhead. This does not stand in opposition to the aforementioned fact that *all* persons of the Trinity participate in *every* action or work of God, but suggests that each person's particular participation can be unique. There are several examples of the unique roles and actions of the Trinitarian persons throughout Scripture, such as the following:

The psalmist explains that it was through the Word and ruach (Spirit) that creation was accomplished (Psalm 33:6). Everywhere the Word is able to accomplish its God-given purposes (Isaiah 55:10–11). Spirit (with about four hundred occurrences in the OT), at times coupled with not only Word but also Wisdom (Deuteronomy 34:9; Job 32:8–9; Isaiah 11:2), appears as the “breath of life” (Genesis 1:2), sustaining all life (Psalm 104:29–30)...From the beginning of the biblical narrative, the Spirit's role in creation, as the principle of life, comes to the fore. The same Spirit of God that participated in creation over the chaotic primal waters (Genesis 1:2) is the principle of human life as well (Genesis 2:7). This very same divine energy also sustains all life in the cosmos: “When you [Yahweh] send your Spirit [ruach], they are created, and you renew the face of the earth” (Psalm 104:30). Similarly, when Yahweh “take[s] away their breath [ruach], they die and return to the dust” (v. 29). Importantly, the prophetic books make an integral connection between the Spirit of God and the promised Messiah. Indeed, the Messiah is the receiver of the Spirit and the Spirit's power (Isaiah 11:1–11; 42:1–4; 49:1–6)...According to the NT testimonies, Jesus was also raised to new life by the power of the Spirit (Rom 1:4), so much so that he “became a life-giving spirit” (1 Cor 15:45). Here we come to the critical stage in moving from a binitarian to a trinitarian understanding of God (Kärkkäinen, 2017). It had to do with the growing insistence on the Spirit as the “medium of the communion of Jesus with the Father and the mediator of the participation of believers in Christ.” (Pannenberg, 2010).

These references in Scripture have led many theologians and scholars to posit claims about the unique roles attributable to each person of the Trinity, such as “The Father is made manifest through the Son and Spirit, while the Son and Spirit act through the divine

energies of the Father, all three united in the bond of love,” without failing to acknowledge the inherent unity of the persons as well, “the Father, Son, and Holy Spirit exist in social accord, eternally harmonious, in mutually loving relationship, distinct from one another in energies and activities, yet completely united in essence and power” (Putt, 2021). An additional example is found in the Orthodox work of Vladimir Lossky, who claims “The Son and the Spirit thus appear, throughout the Gospel, as two divine persons sent into the world, the former to quicken our personal liberty, the latter to unite itself with our nature and regenerate it” (Lossky, 2001).

The uniqueness of the roles assumed by each of the persons of the Trinity is upheld by the fact that the relations between the persons cannot be reversed:

The Son does not beget the Father, nor does the Father proceed from the Holy Spirit. . . . Thus, the Father is the Father of the Son, and the Son is the Son of the Father. The Father begets the Son, and the Son is begotten by Father. This relation is not interchangeable, nor can it be reversed—it is eternal and unchangeable. *Mutatis mutandis*, the Holy Spirit proceeds from the Father. . . while the Father spirates the Spirit. Again this is never reversed. (Letham, 2016)

So it can be seen and understood that there are elements of identifiable distinctiveness unique to each of the persons of the Trinity, yet the persons are inextricably bound to one another in unity of communion and loving relationship. All persons of the Trinity participate in *every* act of God, and all persons retain the same substance/essence and will as one another, but retain unique hypostases, experiences, and roles, and the particular contributions of each of the three persons to the ultimate acts of God are also unique and distinct from one another.

### *Misconceptions and Heresies*

Now that some central truths of and contemporarily-held beliefs about the Trinity have been revealed and discussed, this chapter will conclude by addressing common misconceptions and misunderstandings of the Trinity that have been regarded as heretical and refuting them on the basis of Scriptural evidence and theological reasoning previously presented in the chapter. These will be divided into two categories, heresies of polytheism (including ditheism, with mention of Binitarianism, and Tritheism) and heresies of Monarchianism (including modal Monarchianism/modalism and dynamic Monarchianism/subordinationism).

#### *Heresies of Polytheism*

As mentioned at the inception of this chapter, it is absolutely central to Christian belief and accepted doctrine that there is one God and one God alone, which is evidenced by verses such as Deuteronomy 6:4 and Mark 12:29. Heresies of polytheism directly contradict this belief by elevating the uniqueness of the Trinitarian persons at the expense of their inherent unity.

*Ditheism (and Binitarianism).* Heresies of Ditheism and Binitarianism arose from the confusion surrounding the divinity of the Holy Spirit. As mentioned earlier, the divinity of the Father was rarely, if ever, disputed among Christian theologians and the divinity of the Son was more easily grasped than that of the Holy Spirit. Thus, heresies of Ditheism and Binitarianism developed in response to this flawed understanding of only the Father and the Son possessing divinity without the Holy Spirit possessing such divinity as well.

Ditheism was expressed in two different ways; first, in recognizing only the Father and the Son as divine entities, ignoring the divinity of the Holy Spirit, and second, by equating and conflating the Son and the Holy Spirit into one identity rather than maintaining their distinctiveness as unique persons. In contrast, Binitarianism was on a better track, indicating the divinity of both the Father and the Son while still maintaining that they are distinct persons of only one Godhead, but it neglected to recognize the Holy Spirit as the third person in this union.

The Apostolic Fathers were among some of the individuals that fell prey to the first error of ditheism:

Illustrative of the lack of sophistication in terminology is the often vague and undefined usage of the term “Spirit,” which led at times to a confusion between the Son (Word) and Spirit. As long as the Spirit was not differentiated from the Son as a separate “person,” it was difficult to say if the Spirit was the power or influence of the Father (filling or empowering the Son) or something else less than a person. (Kärkkäinen, 2017)

Early documents such as *The Shepherd of Hermas* committed the second error, conflating the Son and the Spirit into one person, in fact even by claiming that the Spirit is the Son of God (Kärkkäinen, 2017). The apologist Justin Martyr took a very bold (and of course, incorrect) stance in claiming that “[i]t is wrong, therefore, to understand the Spirit and the power of God as anything else than the Word, who is also the first-born of God” (Martyr, 1880).

*Refutation of Ditheism (and Binitarianism)*. Clearly, much confusion and controversy has existed throughout history with regard to the divinity of all three persons of the Trinity and the unity of the three in one singular Godhead. Fortunately, Scriptural references (such as those mentioned in the “Equality in Divinity of the Three Persons”

and “Distinctiveness among the Three Persons” sections of this chapter) provide sufficient refutation of such beliefs by maintaining that all three persons of the Trinity are equal in divinity and unified in substance or essence, remaining true to the principle of monotheism – that there is only one God.

*Tritheism.* Similar to ditheism, the heresy of Tritheism purports that the Father, the Son, and the Holy Spirit are all divine but *separate*, resulting in the belief in three distinct gods. Tritheism can be summarized as the belief that “the Father, Son, and Holy Spirit are three distinct gods whose relationship lies only in the divine nature they share” (Ezigbo, 2013).

*Refutation of Tritheism.* As outlined in the “Mutual Dependency and Relationship of Communion” section of this chapter, the relationship that exists between the three persons of the Trinity is in fact much more than just “in the divine nature they share”. Indeed, Scripture and theological reasoning shows that the very *being* of God is inherently tied to the relationship of communion between the three persons of the Trinity. In addition, any form of polytheism necessarily contradicts the first tenet of Christian faith outlined at the beginning of this chapter, monotheism.

#### *Heresies of Monarchianism*

Heresies of Monarchianism exist on the opposite end of the spectrum from heresies of polytheism. Rather than overemphasizing the individual divinity of the three persons at the expense of the unity (as in polytheistic heresies), heresies of Monarchianism attempt to maintain the fundamental Christian principle of monotheism at the expense of recognizing the divinity and distinctiveness of the three persons of the Trinity.

*Modal Monarchianism (Modalism).* The heresy of modal Monarchianism, or modalism, suggests that God acts in three different “modes” or wears three different “masks” or “costumes” (the Father, the Son, the Holy Spirit) depending upon the situation He is acting in or the action He is taking (Ezigbo, 2013). The modalistic view claimed that “Father, Son, and Spirit do not stand for real distinctions but are merely different ways God presents himself at different times” (Kärkkäinen, 2017).

*Refutation of Modal Monarchianism (Modalism).* Clearly, the modalistic interpretation of God falls short in that it cannot explain the unity of communion that exists between the three persons of the Godhead (mentioned in the “Mutual Dependency and Relationship of Communion” section), and it defies the principle that this communion is in fact central to the *being* of God as Love. It also fails to encapsulate the understanding that all three persons of the Godhead are involved in *every* action of God.

*Dynamic Monarchianism (Subordinationism).* The heresy of dynamic Monarchianism/subordination (also known as Arianism) maintains the principle of monotheism by claiming that the Son and the Spirit are of lower status and less divinity than the Father – or that they possess no divinity at all. However, it was difficult to rectify this understanding with the fact that the Son was capable of many things beyond which human capacities can accomplish – such as providing salvation to humankind, among other things. Thus, those who fell victim to this heresy tended to assert that God the Father was “dynamically present” in the Son, thus placing Him above humanity but below God the Father (Kärkkäinen, 2017). “In other words, God’s power (Greek, *dynamis*) made Jesus *almost* God” (Kärkkäinen, 2017).



*Refutation of Dynamic Monarchianism (Subordinationism).* The arguments and Scriptural references presented in the “Equality in Divinity of the Three Persons” section are sufficient to refute the claims of Dynamic Monarchianism/Subordinationism. Surely, the Son would not have outright claimed “I and the Father are one” or “if you really knew me, you would know my Father as well. From now on, you do know him and have seen him” if He were not of equal divine status with the Father.

### *Conclusion*

Now that truths as well as common misconceptions of the Trinity have been adequately addressed, this thesis will continue into the next chapter where a new theory of *imago Dei* as a type of trinity in humans will be proposed and explicated, while remaining cautious not to fall into any heretical claims.

## CHAPTER 3

### The Tripartite Human – Mind, Body, and Spirit How the Tripartite Structure of Humankind Mirrors that of the Trinitarian Godhead

*Those who live according to the **flesh** have their **minds** set on what the **flesh** desires; but those who live in accordance with the **spirit** have their **minds** set on what the **spirit** desires – Romans 8:5*

#### *Introduction*

The focus of this chapter is to propose a new understanding of a way in which *imago Dei* is expressed in humans. Following the Trinitarian structure of the Godhead – Father, Son, and Holy Spirit – humankind, too, possesses a three-part structure: mind, body, and spirit. In the forthcoming sections, a definition of each of these components as well as a description of the functions performed by each will be provided. Then, the inherent interconnectedness of the three components will be considered and several examples of their reciprocal relationships provided. Finally, an argument will be advanced with regard to how this tripartite structure in humans mirrors the Trinitarian structure of the Godhead and could potentially be considered a representation of the image of God in humankind.

#### *Mind*

The mind of humans refers to the brain and brainstem and the functions that are performed by them. This includes what is referred to in psychological science as cognition: all the mental processes involved in learning, remembering, perceiving, reasoning, and problem-solving. The brain and serves several different functions, and

such functions are localized to different structures. Many of these structures will be broadly discussed in the following sections.

### *Oldest Brain Structures*

Of first consideration are the set of brain parts known as the oldest structures of the brain: the brainstem, thalamus, reticular formation, and the cerebellum. The brainstem regulates key involuntary functions of the body including heartbeat and respiration. The thalamus is known as the “sensory control center” of the brain and it passes sensory messages from specific areas of the cortex to the cerebellum and medulla in order to regulate and coordinate appropriate bodily responses to changes in the environment. The reticular formation is a network of nerves that lie in the brainstem and travel to the thalamus, and it is responsible for controlling bodily arousal – including the sleep-wake transitions of one’s circadian rhythm. Lastly, the cerebellum is responsible for processing sensations and coordinating motor reactions – for example, when one touches a hot item, the cerebellum receives the sensory input that alerts the brain of potential danger and it coordinates the appropriate response of pulling back from the potentially dangerous item – as well as enabling implicit associative memory.

These structures are critical to human functioning because they all play a major role in one’s ability to survive (Myers & DeWall, 2018). It is theorized that these brain structures developed first *because* they coordinate the most basic and fundamentally necessary functions for basic survival.

### *Limbic System*

The limbic system is the next set of brain structures to develop in humans. It sits between the oldest brain structures (towards the bottom of the head, near the spinal cord)

and the newest (towards the top of the head). While the oldest brain structures are considered absolutely essential to human survival, the limbic system still makes a tremendous contribution to increasing one's odds of survival. This system functions to regulate behavioral responses to certain emotions, maintain homeostasis of the body, and to encode and store explicit memories for later retrieval (Myers & DeWall, 2018). It is composed of three structures: the amygdala, hypothalamus, and hippocampus.

*Amygdala.* The amygdala is closely linked to the fundamental fight-or-flight response that is activated in response to external threats (Myers & DeWall, 2018). It plays an important role in the regulation of aggression (which promotes the “fight” response) and fear (which promotes the “flight” response). However, the amygdala is not the only brain structure involved in the processing of these two emotions. There are many complex neural circuits involved in the regulation of and response to each emotion that one experiences (Myers & DeWall, 2018). This will be particularly relevant in an upcoming section of this chapter. Evolutionary theory suggests that the amygdala developed quickly after the oldest brain structures due to the critical role it plays in threat detection, which helps to increase one's odds of survival.

*Hypothalamus.* The hypothalamus, which sits directly below the thalamus, is responsible for correcting homeostatic imbalances in the body (Myers & DeWall, 2018). This includes regulating bodily temperature, pH, blood glucose levels, and the secretion of various hormones. Additionally, the hypothalamus is well-known for containing reward circuits (Myers & DeWall, 2018). When these circuits are activated, the hypothalamus initiates the release of dopamine, a neurotransmitter and paracrine hormone that plays an important role in experiencing pleasure and feelings of well-being

(Myers & DeWall, 2018). These reward circuits are activated when one resolves a homeostatic imbalance in their body by means of eating, drinking, adjusting their temperature, or other corrective mechanisms. The activation of the hypothalamic reward circuits reinforces these corrective actions that are necessary for bodily regulation and survival. When these reward circuits are activated, they increase the probability of the individual performing the behavior again the next time that they experience a homeostatic imbalance in need of correction. This explains the importance of the hypothalamus in supporting human functioning and defends the argument that it plays a crucial role in enabling humans to survive. Without proper regulation of bodily functions, it is unlikely that one could survive for very long.

*Hippocampus.* The hippocampus is the part of the brain responsible for encoding, processing, and storing explicit memories. When one's hippocampus is damaged, they are often left without the ability to create new memories. While the link between memory and survival may not be immediately clear, the ability to retain and retrieve memories of past experiences is key to one's appraisal of situations as potentially threatening or beneficial (Goldstein, 2018). This appraisal informs and prepares one's behavioral responses in situations similar to those previously experienced. Thus, the ability to retain and retrieve explicit memories plays a significant role in survival.

#### *Cerebrum – Lobes and Cortices of the Brain*

The cerebrum is the largest part of the brain, and is the last to fully develop in humans. It is divided into four distinct sets of lobes – frontal, parietal, temporal, and occipital – and each set has a cortex within that performs a specific function.

*Frontal Lobes and Motor Cortex.* The frontal lobes are perhaps the most diverse of the four sets in their functional responsibilities. These are the largest of the lobes and serve to form and execute plans as well as facilitate judgment and decision-making, problem-solving, and self-control (Myers & DeWall, 2018). The motor cortex lies within the frontal lobes and is the part necessary for producing motor output, otherwise known as voluntary movements of the body. The motor cortex performs this important function of coordinating voluntary muscle movements by sending information to the somatic nervous system.

Additionally, the motor cortex is divided into right and left halves; the right motor cortex controls movements of the left side of the body, and the left motor cortex controls movements of the right side of the body as well as the movements of the mouth necessary for speech. Language is localized to the left side of the brain alone, so the left motor cortex is responsible for speech production while the right motor cortex plays no role in speech production (Myers & DeWall, 2018).

*Parietal Lobes and Somatosensory Cortex.* The parietal lobes are responsible for processing sensations of touch as well as receiving and interpreting information about body movements and positioning – which informs one’s senses of kinesthesia (monitoring location and movement of individual body parts – such as arms, legs, and fingers) and vestibular sense (monitoring position and movement of the head as well as the body and influencing balance) (Myers & DeWall, 2018). The somatosensory cortex lies within the parietal lobes and specializes in receiving information regarding pain, temperature, and movement of body parts.

*Temporal Lobes and Auditory Cortex.* The temporal lobes are responsible primarily for one's sense of hearing. The auditory cortex is specifically responsible for translating incoming electrical signals from the cochlea into meaningful sounds that one experiences (Myers & DeWall, 2018). The rest of the temporal lobe assists in the understanding of these sounds by playing a role in processing emotional responses and language (Myers & DeWall, 2018). The temporal lobes assist in assigning meaning to the words and other sounds heard by an individual.

*Occipital Lobes and Visual Cortex.* The occipital lobes are responsible for processing visual information and controlling one's sight. The visual cortex assumes the role of translating incoming electrical signals from the retina into meaningful visual information (Myers & DeWall, 2018). The rest of the occipital lobe assists in the understanding of these visual signals by identifying written words, detecting emotions in facial expressions, and recognizing familiar faces (Myers & DeWall, 2018). The occipital lobes assist in assigning meaning to the visual cues one receives.

#### *Overall Functions of the Mind: Grouped and Summarized*

The oldest brain structures most clearly play an irrefutably necessary role in survival, the structures of the limbic system help to further increase the probability of survival, and the structures of the cerebrum allow an individual to reach beyond simply surviving by assigning meaning to one's experiences. In large part, the brain functions to support the body by receiving and interpreting sensory information and coordinating automatic physiological and/or voluntary responses to such information.

At the level of the oldest brain structures, the brainstem receives information regarding heart rate and respiration, the reticular formation takes in information regarding

arousal, the thalamus takes in information regarding sight, sound, taste, and touch, and the cerebellum takes in information regarding body movement. Each of these structures then responds to this information by altering aspects of one's physiology in order to maintain optimal functioning. The brainstem slows or speeds heart rate in response to tachycardia or bradycardia, the reticular formation modulates arousal and either increases or decreases arousal based upon external cues (such as light), the thalamus passes sensory information to higher areas for further processing, and the cerebellum responds to disruptions in balance by assisting the body in regaining balance.

With respect to the limbic system, the amygdala receives information regarding potential threats and coordinates a fight or flight response, the hypothalamus responds to homeostatic imbalances by coordinating corrective physiological responses and/or motivating voluntary corrective responses, and the hippocampus receives information regarding incoming explicit information and coordinates the encoding, storage, and retrieval of such information as memories.

Lastly, the lobes of the cerebrum perform these tasks as well – the parietal, temporal, and occipital lobes are responsible for receiving and interpreting incoming sensory information from the environment and the frontal lobes are responsible for responding to this information through means of conscious reasoning and decision-making, and then coordinating a voluntary motor response to such information.

Clearly, two things that all of these brain structures have in common is that they both receive sensory information and coordinate automatic and/or voluntary responses to that information. Thus, the primary functions of the mind can be reduced down to receiving sensory information, coordinating responses to that information, and building



one's perception of their experiences – by means of assigning meaning to such experiences. The mind thus supports the internal functioning of the body and coordinates the external actions of the body.

### *Body*

The body is perhaps the most easily conceptualized part of the Mind-Body-Spirit system due to its easily-accessible image and the sense of control that is felt over one's ability to control many of its actions (to a larger degree than one often feels able to directly control many of the actions of their mind or spirit). "Body" is defined as "the physical structure of a person or an animal, including the bones, flesh, and organs" (Merriam-Webster, 2021). Beyond this, the term "body" in the Mind-Body-Spirit system also refers to "the physical, biological, and chemical aspects of a human person" (Fosarelli, 2002).

It is particularly difficult to delineate the physical "separation" of the mind from the body considering that the mind (which has been defined as the *brain and brainstem*) lies entirely within the bounds of the body – so the term "body" then refers to the rest of the internal systems and external properties apart from the brain and brainstem themselves. This includes the entire Peripheral Nervous System, which is broken into Somatic (voluntary) and Autonomic (automatic/involuntary) divisions. In the same way that the brain coordinates involuntary physiological responses and voluntary ones, the body responds by executing the automatic physiological responses as well as pre-planned voluntary responses first coordinated by the brain and/or brainstem. With regard to automatic and involuntary physiological responses, these include cardiovascular, respiratory, gastrointestinal, renal, and endocrine and exocrine processes, among others.

Voluntary responses of the body are those which one chooses to execute, whether those be universally necessary actions such as eating and drinking, or actions a particular individual is motivated to do, such as engaging in physical activity or playing a game. Thus, the body is ultimately responsible for controlling its own internal processes, unconsciously and automatically, and for executing voluntary responses that it is motivated to accomplish.

### *Spirit*

The spirit is typically considered to be the least well-understood and least easily-defined part of the Mind-Body-Spirit system. The definition of “spirit” has been historically difficult to pin down precisely, and the actions of the spirit are often confused with those of the mind and body due to their inherent interconnected nature, which will be discussed in an upcoming section. An accepted dictionary definition of “spirit” is “the nonphysical part of a person which is the seat of emotions and character” (Merriam-Webster, 2021). Further, the term “character” is defined as “the mental and moral qualities distinctive to an individual” (Merriam-Webster, 2021). Before continuing to a discussion of the functions of the spirit, it is appropriate to first address the controversy surrounding the term “spirituality” as well as the difference between “religiosity” and “spirituality”.

### *Spirituality*

Spirituality is one of the most widely disagreed-upon concepts to date (Fang et al., 2011; Wills, 2007). Some are of the opinion that spirituality and religiosity are synonymous, while others hold spirituality as something heretical, “New Age”, or occult in nature. This confusion and skepticism is not ameliorated through consideration of the

definition of spirituality, which is “the quality of being concerned with the human spirit or soul as opposed to material or physical things” (Merriam-Webster, 2021). The vague, undescriptive nature of this definition leaves the meaning of “spirituality” still obscured.

Synonyms of “spirituality” include terms such as “bodiless” and “ethereal” (definition: “not composed of matter”), “immaterial”, and “nonphysical” (Merriam-Webster, 2021). Again, these terms are about equally as vague as the very definition of “spirituality”. This, of course, begs the questions of “what exactly is spirituality?” and “how is one supposed to understand something that is immaterial, nonphysical, and not composed of matter?” Defining spirituality and considering both what it *is* and what it *isn't* as well as how to assess and measure it is the focus of this section.

*The Spirituality vs. Religiosity Controversy.* Historically, there has been significant controversy over whether spirituality and religiosity are the same, similar, or entirely different constructs (Fernando & Chowdhury, 2010). Arguments have been advanced on both sides – in favor of spirituality as “inextricably linked” to religion (Dent et al., 2005) and in favor of spirituality as an “inclusive and inherent characteristic” belonging to every human being regardless of whether or not they maintain a religious affiliation (Fernando, 2007; Piedmont et al., 2009).

Relatively recently, there has been a movement of individuals who proclaim themselves to be “spiritual, but not religious”, which has led to more specific scientific investigation into spirituality and religiosity as separate constructs (Zinnbauer et al., 1997). However, it is important to note that all current measures of spirituality (Spiritual Well-Being Scale, Spiritual Perspective Scale, Spiritual Assessment Inventory, Transcendence Scale, Spiritual Transcendence Index, etc.) include questions relating to belief in and

relationship with a higher being (Seidlitz et al., 2002). Additionally, no studies to date have found that spirituality “distances individuals from religious organizations” either (Oh & Sarkisian, 2012). Thus, it seems that spirituality and religiosity cannot be fully separated. In reconciliation of this, the scientific consensus has progressively moved toward the understanding that religiosity and spirituality overlap in the sense that religiosity is an aspect of spirituality, but that spirituality encompasses more than just one’s belief in, relationship with, and worship of a higher being (Bender, 2007; Zinnbauer et al., 1997).

In an effort to separate spirituality and religiosity, definitions have been offered for both constructs. Religiosity is considered “participation in an institutionalized doctrine” while spirituality is conceptualized as “an individual pursuit of meaning...that is not necessarily defined by association with a certain tradition or by organizational affiliation” (Corrigan et al., 2003; Bessinger & Kuhne, 2002). In other words, religiosity has come to be characterized as “narrow and institutional” while spirituality is considered “personal and subjective” (Zinnbauer et al., 1997).

*Measuring Spirituality.* As previously mentioned, the notion that spirituality includes religiosity but also extends beyond religiosity has become increasingly accepted in the scientific discussion of spirituality. This section aims to investigate the other aspects of spirituality and discuss how spirituality is measured using contemporary assessment tools.

Beyond aspects of religiosity, spirituality is considered to include several other aspects, such as one’s sense of meaningfulness, direction, and purpose in life (Oh & Sarkisian, 2012; Proeschold-Bell et al., 2014). Spirituality is also considered to be closely

related to one's beliefs, values, moral sense of right and wrong, and the experience of positive emotions and attitudes – as well as one's ability to cope with negative emotions and difficult situations (Fernando & Chowdhury, 2010; Fisher, 2011; Kass et al., 1991; Proeschold-Bell et al., 2014). Importantly, spirituality is also linked to one's ability to form lasting and meaningful relationships with themselves, others, and a higher being (Fosarelli, 2002; Oh & Sarkisian, 2012; Proeschold-Bell et al., 2014; Scott et al., 1998; Steiner et al., 2017; Wills, 2007; Zinnbauer et al., 1997).

With regard to measuring spirituality in individuals, the Spiritual Well-Being Scale is one of the most frequently utilized measures of spirituality in contemporary scientific literature (Proeschold-Bell et al., 2014). The authors of this scale defined spirituality as “a search for the sacred, a process through which people seek to discover, hold on to, and, when necessary, transform whatever they hold sacred in their lives” (Paloutzian & Ellison, 1982). The Spiritual Well-Being Scale has two subscales: Religious Well-Being and Existential Well-Being. The Religious Well-Being subscale posits questions regarding the health and status of one's relationship with God (e.g. “I have a personally meaningful relationship with God” and “I believe that God loves me and cares about me”) (Paloutzian & Ellison, 1982; Proeschold-Bell et al., 2014). The Existential Well-Being subscale measures one's sense of purpose and satisfaction in life (e.g. “I feel very fulfilled and satisfied with my life” and “I believe there is some real purpose for my life”) (Paloutzian & Ellison, 1982). Thus, this scale of spirituality focuses primarily on the meaningfulness, direction, and purpose aspects of spirituality as well as one's experience of positive emotions such as satisfaction and contentment.

Another scale that is often used to assess an individual's spirituality is the Spiritual Perspective Scale (Reed, 1987). This scale groups its questions into two sections. The first asks about one's frequency of engagement in spiritual activities (e.g. "In talking with family and friends, how often do you mention spiritual matters?", "How often do you read spiritually-related material", and "How often do you engage in private prayer or meditation?") and the second questions the role of spirituality in one's life (e.g. on a Likert scale from "strongly disagree" to "strongly agree": "Forgiveness is an important part of my spirituality" and "My spirituality is especially important to me because it answers many questions about the meaning of life") (Reed, 1987). This scale most clearly focuses on one's active engagement in practices of spirituality as well as the meaningfulness that their spirituality holds.

John Fisher (2011) identified four distinct domains of spirituality: Personal, Communal, Environmental, and Transcendental. The personal domain refers to one's intrapersonal relationship with themselves with regard to their meaning, purpose, identity and values (Fisher, 2011). The communal domain focuses on one's quality and depth of interpersonal relationships as they relate to morality, culture, and religion and are expressed in love, forgiveness, trust, hope, and faith in humanity (Fisher, 2011). The environmental domain relates to care and nurture of one's environment as well as one's sense of awe, wonder, and unity with the environment (Fisher, 2011). Lastly, the transcendental domain describes one's relationship with a higher being and the "mystery of the universe" (Fisher, 2011). These domains collectively encompass the aspects of spirituality that involve one's purpose, identity, morality, relationships, and experience of positive emotions.

### *Functions of the Spirit*

From the definitions provided for “spirit” and “character”, as well as the previous discussion of spirituality, it can be deduced that the spirit functions in influencing emotions, morality, relationships, meaningfulness, motivation, and personality development. Each of these functions will be considered separately, as it is important to gain a more concrete understanding of the functions of the spirit before moving forward.

*Emotions.* The human spirit is closely tied to the experience of emotions, both positive and negative. High levels of spiritual well-being correlate with the frequent experience of positive emotions such as peace, satisfaction, and love, while low levels of spiritual well-being correlate with the frequent experience of negative emotions such as anxiety, dissatisfaction, and loneliness (Bekelman et al., 2007; McCoubrie & Davies, 2006; Paloutzian & Ellison, 1982; Scott et al., 1998; Steiner et al., 2017; Tuck et al., 2006). A link has also been demonstrated between spiritual well-being and optimism, with optimism defined as “hopefulness and confidence”, two positively valenced emotions (Fang et al., 2011; Fernando & Chowdhury, 2010; Wills, 2007). Spirituality and emotion are so closely linked that “it has often been said that the person who is healthy emotionally is also healthy spiritually, and vice versa” (Fosarelli, 2002).

*Morality.* The spirit is often conceptualized as the conscience of an individual (Feldman, 2006). Conscience is defined as “an inner feeling or voice viewed as acting as a guide to the rightness or wrongness of one’s behavior” (Merriam-Webster, 2021). As previously discussed, the spirit is intrinsically related to emotion, which reinforces the connection between the spirit and conscience, as both relate to the *feelings* of an individual.

Studies have linked spirituality to ethical cognitions, finding that higher levels of spirituality lead to greater ethical concerns (Fernando & Chowdhury, 2010; Giacalone & Jurkiewicz, 2003). In particular, high levels of spirituality have also been associated with an idealistic ethical orientation, which is defined as “the degree to which individuals assume that desirable consequences can, with the *right action*, always be obtained” (Forsyth, 1980; Fernando & Chowdhury, 2010). In addition, idealistic orientations have been found to be related to high levels of optimism (Fernando & Chowdhury, 2010). This further establishes the link between spirituality and morality due to the connection between spirituality and the experience of positive emotions previously discussed.

*Relationships.* One of the most well-established and frequently studied aspects of the spirit is its impact on one’s relationships – including the intrapersonal, interpersonal, and existential. Several studies even include relational components in their very definitions of spirituality. For example, Mitroff and Denton (1999) define spirituality as “the basic feeling of being connected with one’s complete self, others, and the entire universe,” and Sharts-Hopko (2003) stated that “spiritual activity involves a sense of connectedness to others or to the universe.”

In the four domains of spirituality proposed by John Fisher – personal, communal, environmental, and transcendental – all four domains reflect different relationships: intrapersonal (within oneself), interpersonal (between oneself and others), a relationship with the environment, and an existential relationship with a higher being (Fisher 2011). Of these four, three of them – personal, communal, and transcendental – reflect relationships including conscious beings, which emphasizes the spirit’s important role in cultivating and maintaining relationships. Other studies have indicated the importance of



all four of these domains in other words, such as “spirituality could be simplified as the relationship between individual humans and heaven, other human beings, living things, and their ego” (Chao et al., 2002).

A model by Ellison (1983) suggested that there are two dimensions to spiritual connection: one vertical and one horizontal. The vertical dimension refers to one’s relationship with a higher being, something “above” or “beyond” themselves, and the horizontal dimension refers to earthly relationships such as the intrapersonal and interpersonal as well as, potentially, one’s relationship to the environment and physical universe (Ellison, 1983). With regard to one’s relationship with themselves, this includes one’s self-esteem, self-respect, self-love, as well as one’s understanding of themselves, their actions, and their feelings. One’s relationship with others includes their knowledge, respect, understanding, and care of others – and this applies to all three aforementioned categories of others from Fisher’s (2011) four domains: other people, the environment/universe, and a higher being.

One particular measure of one’s concern for the well-being of others is known as altruism. High levels of spirituality have been shown to be associated with altruism, supporting that one of the main functions of the spirit is to cultivate and engage in relationships with others (Singhapakdi et al., 1999). Altruistic values and behaviors also relate to feeling *love* for others, which is one of the most important positive emotions that – as discussed previously – is experienced in and by the spirit. “Spirituality unites diverse peoples in a common effort to improve the human condition” (Kaiser, 2000).

*Meaningfulness.* Another aspect of the human spirit is its role in searching for meaning in life by means of searching for satisfaction and fulfillment. “Most definitions”

of spirituality “emphasize an individualized process of searching for the ultimate significance of life” (Oh & Sarkisian, 2012). Items of the Spiritual Well-Being scale are said to “deal with...those aspects of experience which involve meaning...[and] purpose in life,” and spiritual well-being has been defined as “a sense of meaning and purpose in life, faith, and comfort with existential concerns” (Anema et al., 2009; Emblen, 1992; Goddard, 1995; Paloutzian & Ellison, 1982). Similarly, existential well-being – a subscale of spiritual well-being – refers to “life direction and purpose...[and] perceiving life as worthwhile and meaningful” (Michello, 1988).

Of Fisher’s (2011) domains, it is the personal domain which is said to include one’s sense of meaning and purpose. However, the communal, environmental, and transcendental domains are implicated too, as many people search for meaning and purpose in their relationships with other people, the environment/universe, and the divine. People often draw meaning, purpose, satisfaction, and fulfillment from their relationships with other people, the environment/universe, and the divine (which is directly related to another previously discussed function of the spirit: cultivating and engaging in relationships).

It is important to not only conceptualize the spirit as *searching* for meaning in life, but also as *giving* or *assigning* meaning to things that one experiences – “the spiritual *gives* ultimate meaning to life, health, illness, and death” among other things (Fosarelli, 2002). The spirit has an active role in assigning meaning to things for the individual to which it belongs; indeed, this is one of the primary functions of the human spirit (Wills, 2007).

*Motivation.* Another domain which the spirit functions in is motivating an individual to act. Firstly, it is well-known that emotions and morality (which itself includes experiencing emotions and *feelings* of right and wrong) are two strong sources of motivation for individuals – two areas which have been previously discussed as spheres of activity in which the spirit plays a role. The significance of peripheral route persuasion serves as evidence of the idea that emotional appeals influence individuals’ opinions and, in turn, motivate them to act. Peripheral route persuasion refers to using incidental cues, such as a speaker’s attractiveness or level of education, to persuade an individual to hold a certain viewpoint, come to a certain conclusion, or make a certain decision about something. Peripheral route persuasion “uses attention-getting cues to trigger emotion-based snap judgments” with the intention of “influencing our behavior by changing our attitudes” (Myers & DeWall, 2018).

One of the most significant motivational theories was put forth by Abraham Maslow and is commonly known as Maslow’s Hierarchy of Needs. Maslow (1943) proposed that basic, universal human motivations are hierarchically organized such that the majority of individuals are most motivated to first satisfy their most basic and lowest-level needs before they become motivated to meet the higher-tier needs. Maslow’s Hierarchy of Needs has six tiers: Physiological Needs, Safety Needs, Belongingness and Love Needs, Esteem Needs, Self-Actualization Needs, and Self-Transcendence Needs (Maslow, 1943). The first level represents bodily needs, but it is notable that levels two through six represent various *spiritual* needs – as they relate to relationships with oneself, other people, and the divine. This suggests the role of the spirit in motivating one to act

in order to satisfy these aforementioned needs, the majority of which are needs of the spirit.

*Personality Development.* As previously mentioned, spirit has been defined as one's "character". Additionally, "personality" is considered to be a synonym of "character", so it stands to reason that if the spirit is the character of an individual, then the spirit plays a role in one's personality development. One of the most prominent theories of personality in psychological science is known as the "Big Five," which suggests five basic, underlying factors (as categorized through factor analysis procedures) of personality (Myers & DeWall, 2018). The "Big Five" personality factors include Conscientiousness, Agreeableness, Neuroticism, Openness, and Extraversion (Costa & McCrae, 2008). Describing and considering each of these factors will further display their link to the spirit.

Conscientiousness refers to "strong sense of *purpose* and high aspiration levels" (Costa & McCrae, 2008). Agreeableness refers to one's "compliance and "willingness to defer to others during interpersonal conflict"; high levels of agreeableness manifest as forgiving attitudes and cooperation with others (Costa & McCrae, 2008). Neuroticism refers to one's proclivity to experience negative emotions, such as depression or anxiety, and often manifests in low self-esteem and pessimistic attitudes (Costa & McCrae, 2008). Openness refers to one's openness to new ideas and experiences and one's tendency to seek out novel information and participate in novel activities (Costa & McCrae, 2008). Lastly, extraversion refers to the frequency and intensity of one's "preference for companionship and social stimulation" (Costa & McCrae, 2008). All of these five factors relate to other spheres of the spirit's functioning previously discussed, including:

emotions (neuroticism), relationships (agreeableness, extraversion, and openness), meaningfulness (conscientiousness), and motivation (openness).

### *Interconnectedness of Mind, Body, and Spirit*

It is difficult to conceptualize of any human activities or processes that utilize just one part of the mind-body-spirit system. This is due to the inherent interconnectedness of the mind-body-spirit system; all three parts of the system actively play a role in any human activity or process. A few examples to illustrate the interconnectedness of the mind-body-spirit include: bottom-up and top-down processing, health and illness, and the experience of emotions.

#### *Bottom-up and Top-Down Processing*

As mentioned in the “Mind” section, processing information and coordinating responses to such information is a function of the mind. Processing is thought to occur “bottom-up” (beginning with the sensory receptors of the body and ending with the perception one creates in their mind) and “top-down” (beginning with a perception of the mind – especially an *expectation* or *preconception* – and ending with a physical sensory experience) (Myers & DeWall, 2018). These two modes of processing will be discussed below, with an emphasis placed on mind-body-spirit interactions in both types of processing.

*Bottom-up Processing.* In bottom-up processing, the processing of information first begins with the sensory receptors of the body. For example, if a child has never before been exposed to a cat, the first part of their processing will involve the sensory information they can take in about the cat – what it looks like, sounds like, and feels like

to the touch. If the cat's behavior is non-threatening (the cat is calm, happy, and not attempting to defend itself by scratching or biting), then the child is likely to perceive the cat as good, friendly, soft, etc. and they will feel positively about this cat. Conversely, if the cat's behavior is threatening (not calm, distressed and defensive, and potentially attempting to scratch or bite), then the child is likely to perceive the cat as bad, unfriendly, potentially dangerous, etc. and they will feel negatively about this cat. This example of bottom-up processing emphasizes the mind-body-spirit reaction because the sensory receptors of the body take in information, which is processed and interpreted by the mind, and then results in an emotional reaction (feeling positively or negatively towards the stimulus – in this case the cat) of the spirit.

One form of bottom-up processing which has been shown to err in one's correct appraisal of an experience is known as embodied cognition.

*Embodied Cognition.* Embodied cognition is “the influence of bodily sensations, gestures, and other states on cognitive preferences and judgments,” which clearly highlights the body-mind interaction. However, the spirit is still involved in any experience of embodied cognition, since one tends always to experience *emotions* and have *feelings* about the cognitive judgments they make. Several studies have displayed this link. For example, “after holding a warm drink rather than a cold one, participants were more likely to rate someone more warmly (i.e. positively), to *feel* closer to them, and to behave more generously” (Ijzerman & Semin, 2009; Myers 2017; Williams & Bargh, 2008). Perhaps even more surprisingly, “sitting at a wobbly desk and chair makes others' relationships,

or even one's own romantic relationship, seem less stable" (Forest et al., 2015; Kille et al., 2012; Myers & DeWall, 2018).

*Top-Down Processing.* In top-down processing, one's previous experiences, expectations, and preconceptions factor into their appraisal of something before, during, and after their sensory experience. For example, if an individual is given two samples of chocolate and is told that Sample A costs \$5/pound and Sample B costs \$20/pound, the individual tends to rate Sample B as the better chocolate despite the fact that both samples were actually the exact same chocolate (Myers & DeWall, 2018). In this study, information about the cost of the samples influenced the participant's cognitive appraisal in the way of thinking that the more expensive chocolate must be better because it is likely to be higher-quality. This *expectation* conceived in their mind led them to form a *belief* (recall that beliefs are influenced by the spirit and are tied to emotions of trust and confidence in one's belief), and this belief ultimately causes the individual to have an altered bodily sensory experience and appraise what they think to be the more expensive sample as actually *tasting better*. This is how top-down processing can manipulate one's own bodily sensory experience. Other specific examples of top-down processing can be found in experiences of placebo effect and psychosomatic symptoms.

*Placebo Effect.* The placebo effect refers to "a beneficial effect produced by a placebo drug or treatment, which cannot be attributed to the properties of the placebo itself, and must therefore be due to the patient's belief in that treatment," and is defined in Myers and DeWall's (2018) textbook on psychology as "experimental results caused by expectations alone; any effect on behavior caused

by the administration of an inert substance or condition, which the recipient assumes is an active agent.”

In controlled trials assessing the effectiveness of new medications, double-blind procedures are used to control for the expectations of both the physician/experimenter (researcher bias) and the participant (placebo effect). In a double-blind study, neither the experimenter nor the participant knows whether the pills they are receiving are an active, new medication being trialed, or if they are an inert substance (Myers & DeWall, 2018). A third-party dispenses the pills in identical bottles and keeps record of who receives the true drug and who receives the inert substance.

Oftentimes, participants who have received an inert substance (placebo) report dramatic improvement in their symptoms (Myers 2017; Wager et al., 2004; Wills, 2007). Again, this is due to the participant’s *spiritual sense of confidence* arising from their *belief* in the effectiveness of the substance they received, which creates a *mental expectation* or *assumption* that the substance will exert its intended effect and cause *physiological/bodily symptoms* to subside. This combination of mind-body-spirit activity can result in very real relief of symptoms – which is known as the placebo effect.

*Psychosomatic Symptoms.* The term psychosomatic refers to “real physical symptoms that arise from or are influenced by the mind and emotions rather than a specific organic cause in the body (such as an injury or infection)” (Schimelpfening, 2020). Already, this definition implicates activity of the *body* manifested in *physical symptoms*, activity of the *mind* directly, and activity of the



*spirit* through the influence of *emotions*. Just as in placebo effect, a *belief* (in this case, a belief that one is ill) creates an *expectation* or *assumption* that one will feel ill, and then *physiological symptoms* plague the body and fulfill the spirit's belief and mind's expectation of illness.

### *Health and Illness*

Though the last section discussed aspects of health and illness (placebo effect as a false sense of health, and psychosomatic symptoms as a false sense of illness), this section will focus on legitimate experiences of health and illness and how the mind, body, and spirit all play a role in one's overall health, as well as their illness and recovery.

For quite some time, the role of the spirit in one's overall health has gone largely ignored (Larson, 1996; Michello, 1988; Vernarec, 2002; Wills, 2007). But Dubin and Seeman (2003) contended that "spiritual links to health processes include neuroendocrine, cardiovascular, and immune function", clearly demonstrating the impact of the functioning of the spirit on organic physiological health.

In response to the oversight of the spirit's role in health and illness, a movement has arisen – known as the *holistic* health movement – which encourages bodily, mental, *and* spiritual factors to be considered when taking an account of one's overall health or treating one's illness and supporting them through the recovery process. Individuals and practitioners are presently beginning to seek "a more *holistic* approach to health, or one that 'acknowledges that all aspects of the individual are related, especially body, mind, and spirit'" (Michal-Johnson & Pileggi, 2001; Wills, 2007). The White House even released the following statement with regard to holistic healthcare: "Health involves all

aspects of life – mind, body, spirit, and environment – and high-quality healthcare must support care of the whole person” (WHCCAMP, 2002).

The relationship between health and the functioning of the spirit goes both ways – poor functioning of the spirit harms health and promotes illness, while proper spiritual functioning facilitates health and curbs illness. For example, “spiritual distress can potentially result in ‘poorer health outcomes and even put patients at higher risk for earlier mortality’” (Larson & Larson, 2003). Conversely, “spiritual coping can potentially ‘enhance pain management, improve surgical outcomes, protect against depression, and reduce the risk of substance abuse and suicide’” (Larson & Larson, 2003). Though the exact ways in which the spirit affects health and illness are still being discovered and clarified today, the current research suggests that “the body, mind, and spirit are connected...the health of any one of these three seems to affect the health of the others” (“Spirituality and health”, 2001).

### *Experience of Emotions*

Throughout the last section, time was spent discussing that the spirit is “the seat of emotions,” meaning that emotions originate within the spirit. However, the mind and the body play important roles, too, in one’s experience of emotion and their subsequent reaction to their emotions. The Schachter-Singer Two-Factor Theory of Emotion helps to clarify this relationship.

*Schachter-Singer Two-Factor Theory of Emotion.* According to the Schachter-Singer Two Factor Theory of Emotion, when an emotionally-provoking event occurs and an individual becomes aware of it, they react with an *emotional response*, and then there are two things necessary for the individual to consciously appraise the emotional

response they are experiencing. The first of these two factors is physiological arousal, and the second is a cognitive label (Myers & DeWall, 2018). For example, if one's physiological arousal includes an increase in temperature, heart and respiration rates, and perspiration, this could potentially indicate more than one emotion. Fear, surprise, jealousy, anger, anxiety, and even the feeling of "falling in love" are some such emotions that can manifest themselves physiologically in the aforementioned ways. So physiological arousal is not the only thing necessary for a person to understand their emotional reaction, it is also necessary that they place a cognitive label on the arousal. This means that the individual needs to consciously "name" the emotion that they think they are experiencing. Then, an individual can appraise the emotion they are feeling and thus respond appropriately to it – so long as their cognitive label was actually a correct recognition of which emotion they were experiencing.

In this example, all aspects of the mind-body-spirit system are active. Once one's conscious awareness (mind) notices (typically through sensory means of the *body*) the emotionally-provoking event occurring in their environment, the *spirit* has a natural and immediate *emotional response*. This is then expressed in *physiological arousal* of the *body*. However, in order to perceive what emotion one is feeling, it is necessary for one to place a *cognitive label* of an emotion on the arousal, which is executed by the *mind*. As stated previously, though, this cognitive label can be *incorrect*, which may lead an individual to respond inappropriately to their emotions without knowing they are doing so. This can be illustrated by the Spillover Effect, which is also known as "misattribution of arousal."

*Spillover Effect/Misattribution of Arousal.* In one study by Dutton & Aron (1974), one of two female confederates in the study were placed at the end of a bridge (one of which considered objectively attractive, and one objectively unattractive). The experimental condition was a fear-arousing tall, long, skinny, wobbly suspension bridge, and the control condition was a low, short, wide, and sturdy beam bridge. When men would walk across one of these bridges and be met by the female confederate on the other side, she would ask them to complete a questionnaire responding to pictures from the Thematic Apperception Test (TAT) (Murray & Harvard University, 1943; Dutton & Aron, 1974).

The men who walked across the fear-arousing suspension bridge and were met by the objectively attractive female confederate reported significantly more sexual content in their responses to the pictures on the questionnaire compared to the men who walked across the safe, non-arousing bridge (Dutton & Aron, 1974). When men walked the fear-arousing suspension bridge and were met by the objectively unattractive female, this did not occur; instead, their results suggested that they experienced particularly strong reactions of dislike and disgust, suggesting that they misattributed their fear arousal as dislike and disgust (Dutton & Aron, 1974). The men who walked the non-arousing bridge did not report sexual content in their questionnaire after being met by the objectively attractive confederate, and they did not report dislike or disgust in their questionnaire after being met by the objectively unattractive confederate

Additionally, at the completion of the study, the female confederate gave her phone number to the males and instructed them to call if they had any questions about the study (Dutton & Aron, 1974). Significantly more of the males who walked the fear-

arousing suspension bridge *and* were met by the objectively attractive confederate attempted post-experimental contact with the female confederate compared to the other groups of men (Dutton & Aron, 1974).

It is suggested by this study that once the physiologically aroused participants saw the objectively attractive confederate after crossing the bridge, the cognitive label that they put on their arousal was not “fear”, but rather “sexual attraction,” which they subconsciously projected on to the TAT (resulting in more sexual responses to the questionnaire photos) and even went so far as to contact the confederate at the end of the study to request to take her on a date (Dutton & Aron, 1974). This is a clear example of how one can err in correctly appraising their emotional reactions. Since one state of physiological arousal can be representative of more than one unique emotion, sometimes individuals’ minds do not correctly appraise this arousal and the cognitive label they deduce does not match the true emotion of their spirit.

In this case, the incorrect labeling of the individuals’ emotional states is unlikely to result in any negative consequences, especially since the stimulus for fear (the fear-arousing suspension bridge) was removed after completion of the study, so the participants were able to calm down and return to a normal resting state of bodily arousal. However, incorrectly labeling one’s arousal that is caused by an emotional reaction of the spirit *can* lead to negative consequences.

If one misattributes feelings of depression to another emotion or to a particular event, they may struggle with symptoms of depression for a prolonged period of time without properly acknowledging their symptoms or seeking help to manage them. Bodily harm can result from this, as is supported by the fact that “depression affects the types of

hormones that we produce and these, in turn, affect our body's ability to protect us not only against outside threats (such as viruses and bacteria) but also against internal anomalies such as the beginnings of malignancies" (Fosarelli, 2002).

With regard to other dangers of misattributing one's arousal, if one misattributes a fear response that they are having to an individual as sexual attraction or excitement, this could potentially land them in a serious and dangerous set of circumstances. If they ignore their trepidation and place their trust in this individual when the individual is actually mal-intentioned and undeserving of trust, this could result in bodily harm. In this case, reacting with the correct response – fear – would have led the person to withdraw themselves from the threatening individual, ultimately protecting themselves from danger.

#### *Brief Summary and Conclusion Regarding Interconnectedness*

As the examples previously discussed provide support for: the mind, body, and spirit are intimately and inherently connected. In fact, it is impossible for one part of the mind-body-spirit system to act completely independently, without input, activity, and feedback from the other two parts. Though the examples discussed are only a few examples of this interconnectedness, any human process or experience necessarily involves *emotions* (of the spirit), *perception, logic, and reasoning* (of the mind), and *physiological activity* (of the body). Recognizing this is crucial to the proper understanding of human functioning.

#### *Mirrored Relationship between Mind-Body-Spirit and Father-Son-Holy Spirit*

This section aims to propose that the mind-body-spirit structure of humanity mirrors the Father-Son-Holy Spirit structure of God, and that this mirrored structure may

represent the “image of God” in humankind. The sections utilized in Chapter Two (“The Trinity”) of this Thesis to illustrate the structure and functioning of the Triune Godhead will be revisited in this section and the human mind-body-spirit structure and functioning will be compared.

*One God and One God Alone; One Human and One Human Alone*

Despite the confusing nature of the statement that the Godhead is not one but *three* Persons, it is adamantly defended and widely accepted in all Christian traditions that there are not three divine beings, but one: God. Likewise, despite the fact that humans can be broken into three distinct parts – mind, body, and spirit – there is no confusion as to whether or not an individual is three humans or just one. This is the first way in which humankind mirrors God as His image: though there are three distinct components to one’s humanity, there is but one individual human. And each human is fully expressed through their unique mind, body, and spirit.

*Equality in Divinity; Equality in Humanity/“Selfness”*

In considering the persons of the Godhead, Christian theology recognizes that the Father, Son, and Holy Spirit are all equal in divinity – no one person of the Trinity is “more divine” or “more God” than the other persons. All three persons are of equal divine status since they are all fully and equally God. With regard to the mind-body-spirit structure of humans, one’s mind, one’s body, and one’s spirit are all fully human and are all fully unique to that particular individual. Jane Doe’s (for example) mind is uniquely “Jane” – no other person’s mind being completely like it – Jane’s body is uniquely “Jane” – no other person’s body being completely like it (even if Jane Doe had an identical twin, there are still subtle differences between her body and her twin’s,

including differences in their fingerprints) – and Jane’s spirit is uniquely “Jane” – no other person’s spirit being completely like it. It would be ridiculous to suggest that any one of these three parts is “more human” or “more Jane” than the others. All three parts are uniquely human and are uniquely the individual that they compose.

Just as no one member of the Trinity is placed ‘above’ another in terms of value, power, or divinity, it is incorrect to contend that one component of the mind-body-spirit structure of humankind is somehow of more overall importance or influence than the others. While one part may be more influential with regard to a *particular role that it performs* in a process, all three parts of the mind-body-spirit system participate in *every* human action, process, and experience in a completely necessary way, making their overall importance and influence of equal value. This idea will be revisited shortly in the discussion of mutual dependency.

#### *Unity of the Godhead; Interconnectedness of Mind-Body-Spirit*

Just as the unity of the Godhead is of the utmost importance to the very identity of God, the interconnectedness of the mind-body-spirit system is central to the very nature of humanity and to the identity of the individual. Though *distinctiveness* exists among the three persons of the Trinity as it does among the three parts of the human structure, this distinctiveness in no way implies a *separation* of or *division* among the three.

*One Divine “Substance” (Homoousios); One Interconnected “Self”*. With regard to the divine Godhead, the Father, Son, and Holy Spirit are said to be of “one substance”. This substance is a substance of divinity, whereas the “one substance” of humankind as a mind-body-spirit system is humanity. Just as it is said that there is only one essence or being of God, which all three persons of the Trinity share completely, there is only one



essence or being of any individual human, which all three parts of the mind-body-spirit structure share in its entirety. Inasmuch as Jane Doe's mind is completely made up of the substance, essence, and nature of "Jane", so are her body and her spirit.

*Perichoresis (Mutual Indwelling).* Just as it is said that the Father, Son, and Spirit all dwell within one another and are indivisible from one another, the mind, body, and spirit of humans are mutually indwelling and indivisible as well. It is easy to conceptualize of this mutual indwelling with regard to the mind and body of humankind, given that the mind (brain) dwells fully within the human body. It is more difficult to conceptualize of the body also dwelling within the brain – but recall that the very definition of the body provided earlier includes the biological and chemical processes of the human, many of which such processes occur within the brain, making aspects of the body also dwell within the brain.

It is also somewhat difficult to conceptualize of the spirit as dwelling within in the mind and body since the "location" of the spirit in humankind is unknown – if the spirit has a particular location in the first place. However, the interconnected and indwelling nature is made more salient through consideration of the experience of emotion. Though emotions are said to originate from the spirit, as the spirit is the "seat of emotions", there are still particular brain structures that correspond to the experience of emotions as well as aspects of the body that are activated when experiencing emotion. This suggests that the spirit does in fact dwell within both the mind and body – as it is able to effectively communicate to and necessitate response from both the mind and the body – and it is indivisible from the mind and body, just as Father, Son, and Spirit are indivisible from

one another and mutually indwelling even when Jesus is on Earth and the Father sits in heaven.

*Mutual Dependency and Relationship of Communion.* In the same way that the three Persons of the Trinity are reliant on one another to form the whole of the Godhead, one is reliant on their mind, body, and spirit to form the whole of themselves as an individual human. Without one of the three persons, the Godhead would cease to exist, because God inherently *is* Triune – three in one. Similarly, without one of the three components of the mind-body-spirit structure, the individual would cease to exist.

The relationship of communion between the Father, Son, and Spirit, as well as the interconnectedness of mind-body-spirit, further displays the mutual dependency that each has upon one another. As the Father hands over lordship to the Son and thus makes his own kingship dependent on the actions of the Son – by way of whether or not the Son will glorify Him and fulfill His lordship and mission with His actions – he begets the Son and relies upon Him to maintain the perfect nature of the divine Godhead. In the same way, once the spirit wills the mind to create a rational plan for action, the mind then relays this plan to the body and releases the body freely, in the hope that the body will correctly and adequately execute the plan conjured by the mind.

*Distinctiveness in the Persons of the Trinity; Distinctiveness in the Parts of the Human*

There is distinctiveness among the three parts of the human structure, just as there is distinctiveness among the three [ersons of the Trinity – however, distinctiveness is not to be confused with separation or unlikeness. The persons of the Trinity – and, likewise, the three parts of the mind-body-spirit structure of humans – are distinct in their experiences and roles.

*Experiences.* While there are some events which Jesus alone experienced (such as His crucifixion), all three persons of the Trinity still participated in this event and were uniquely affected by it. The Holy Spirit provided courage, strength, and peace to Jesus as he died on the cross, and the Father provided Jesus with the rationale for His suffering. Jesus bore the physical burden of the pain and suffering that comes with death, but the Father and the Holy Spirit were affected by this event too, just in different ways. The Father bore the burden of watching His Son suffer, and the Spirit could be considered to have suffered by means of emotional distress and empathy for Jesus, for example.

In comparison, the body of an individual experiences physical pain uniquely, but that does not negate the involvement of the mind and spirit in that suffering in other ways – such as the activation of pain-processing brain structures and the experience of spiritual distress. While the mind, body, and spirit are uniquely affected by experiences, all three parts *always* participate in and are affected by those experiences – just in unique *manners*.

*Roles.* Finally, the Persons of the Trinity each hold unique roles and perform unique functions that contribute to the overall purpose and wellbeing of God – correspondingly, the components of the mind-body-spirit structure of humankind each hold unique roles and perform unique functions that contribute to the overall purpose and wellbeing of the individual. Further, all Persons of the Trinity participate in *every* action or work of God, and all components of the mind-body-spirit system participate in *every* action or work of the individual to which they belong. Just as the roles of the Father, Son, and Spirit cannot be reversed, neither can the roles of the mind, body, and spirit.

Neither the mind nor the spirit can execute physical actions in the world as the body does. Neither the body nor the mind can be the seat of one's emotions and character as the spirit is. Neither the spirit nor the body can formulate plans and recall memories as the mind does. However, they all play a role in each of these actions. The body executes one's physical actions, but the mind *plans* the actions to be executed, and the spirit *wills* them to be done. The spirit is the seat of one's emotions and character, but the *actions* of the body express one's emotions and display one's character, and the *activation* of the mind is engaged in the experience of emotion as well as one's planned *reactions* to their emotions, which also display aspects of one's character. The mind formulates plans and encodes memories, but the body *executes* the plans and receives the sensory information necessary for forming memories, and the spirit *wills* the plans to be formed by the mind and assigns *meaning* to events that are to be remembered.

### *Conclusion*

Clearly, the mind-body-spirit structure of humankind bears incredible resemblance to the Father-Son-Holy Spirit structure of the Godhead – making it a plausible theory of the manifestation of the image of God in humans. Chapter Four will now turn the attention beyond the *image* of God to a consideration of how one can grow closer towards achieving the *likeness* of God through integration and wellness within the mind-body-spirit system.

## CHAPTER 4

### Mind-Body-Spirit Health and Wellness A Suggested Approach to Healthcare that Aims to Optimize Wellbeing

*‘For I will restore you to **health** and I will **heal** you of your wounds,’ declares the Lord –  
Jeremiah 30:17*

#### *Introduction*

This final chapter examines perspectives on health and illness, wellness, and modern American healthcare as well as the relationship of each of these to the mind-body-spirit system, spirituality, and the Christian religion. From a perspective of appreciating the mind-body-spirit structure of humankind, one particular approach to healing and wellness, the holistic approach, is recommended over the traditional approach. However, it is important to clarify that this recommendation is not intended to discount any particular methodology or claim that other approaches are ineffective, unethical, or anything otherwise disparaging. Additionally, this recommendation of taking a holistic approach to healing, wellness, and healthcare does not suggest that *all* techniques or modalities that fall under the umbrella of “holistic approaches” are effective or ethical. The recommendation is made in generality – that a holistic approach to healthcare is appropriate, warranted, and even necessary to achieve the highest level of wellness throughout an individual’s entire mind-body-spirit system – and is not a recommendation for or against specific techniques regarded as “holistic” or otherwise.

Additionally, as this thesis has proven to be of theological (as well as psychological and philosophical) thought and orientation, aspects of the Christian faith will be referenced throughout the course of this chapter. Specifically, discussion will

ensue regarding the controversy between religion and science, Christian traditions of healing, as well as modern healthcare's acknowledgement of and involvement in religious beliefs and practices. In considering these aspects of Christianity, this chapter will advocate for a holistic approach to healthcare and will attempt to show how this approach does not stand in opposition to, and actually supports, a Christian understanding of health and healing.

### *The Great Divide: Religion and Science*

Before considering the forthcoming topics, it is important to address the prominent controversy that exists between religion and science – particularly health science and social science. All too often it has been believed that religion and science are forces that oppose and stand in stark contrast to one another. It is even true that a strong negative correlation exists between religiosity and education – those who achieve higher levels of education tend not to be religious (Baumeister, 2002). However, religion and science are not truly incompatible. It is said that “faithful reason is not a sacrifice of the intellect, but the integration of reason into faith,” which suggests that it is possible to accept reliable and valid scientific findings without sacrificing one's faith in their religion (Santrac, 2016). Reason and faith can be integrated. After all, God created the world that we inhabit, and all of the workings of the universe are such because of *His* design. Sometimes it may appear that science is contradictory of religious beliefs, but this can be overcome by using reason to decipher truths of God's design. Both openness as well as a willingness to admit what one doesn't know, and that the mysteries of God can never be fully understood by human faculties, is required in order to integrate scientific findings with religious understandings.

However, the controversy that exists between religion and scientific inquiry has led society to a peculiar place. Researchers of science tend to be among the most highly educated (and thus, by correlation, often the least religious) people, so religion has historically been widely neglected in the sphere of empirical scientific literature. The limited publications that do address religion in a scientific manner tend to be largely biased by writers' personal feelings on the matter. Baumeister (2002) wrote, "the only people who undertook to study [psychology of religion/religious psychology] were those who were personally invested in it – usually because they themselves had strong religious beliefs or, in some cases, because they were personally hostile towards religion." Consumers of scientific research are concerned of "the danger that religious doctrine may contaminate the findings of science" (Larson, 1996). This has left the world in a paradox of sorts, as outlined by Callahan (2002):

Research into religious issues and variables in family medicine might be rejected or undervalued because it seems wedded to the realm of anecdote or opinion. Ironically, the absence of a solid literature on religion and family medicine will assure that our knowledge remains in the realm of anecdote and opinion, instead of progressing to the empirical assessment of beneficial, neutral, and harmful roles of religion among patients and providers.

Clearly, there is a need for further research – unbiased research – in the areas of religious psychology and health science.

This need for further research in the aforementioned areas is becoming more widely recognized. It has been said that "in the modern world we separate psychology from religion, to our detriment" (Moore, 1993). Related to this, the following argument has also been advanced:

Psychology cannot pretend to be complete unless it understands religion alongside other phenomena. Moreover, it is essential that religion be studied in a balanced, open-minded,

objective fashion rather than being left to the pro-religious and antireligious zealots who are seeking to support predetermined conclusions. (Baumeister, 2002)

Fortunately, these opinions and arguments are beginning to be heard, and society is responding to them. “Today, close collaboration exists between religion and psychiatry...many seminaries offer psychological training as part of their preparation for the ministry...[and] more and more physicians are making an effort to learn more about psychology and religion” (Goldman, 1985). In addition, “the impact of religiosity/spirituality on health is being more widely acknowledged in the general marketplace of ideas and practices” (Poloma & Hoelzer, 1998).

It should also be addressed that this assumption of religious and theological thought as being based in anecdote alone is inherently faulty. In the Bible, the Lord says “come now, let us reason together” (Isaiah 1:18). We are instructed to “sanctify Christ as Lord in your hearts, always being ready to *make a defense* to everyone who asks you to give an account for the hope that is in you” (1 Peter 3:15) and we are called to love God *intellectually*, as Jesus said to “love the Lord your God with all your heart and with all your soul, and with all your *mind*” (Matthew 22:37). God does not expect blind faith of His followers – rather, He encourages us in reason so that we can discover His truths in our world and beyond. In Augustine’s model of *fides quaerens intellectum* (faith seeking understanding/faith seeking intelligence), it is suggested that one *begins* with faith in God and then, on the basis of such faith, moves to further understand the truths of God. Faith and human reason have a close relationship according to Anselm, and we move to intellectually understand what we already believe by faith (Anselm, 1965). Faith may precede understanding in this way, but it certainly does not preclude it. We are called first to trust in God and to have faith in His words and promises,



and then to utilize reason and intellect to better understand Him and come to a greater and deeper intellectual understanding of His truths.

As the field known as Psychology of Religion continues in its pursuit of empirical scientific information regarding religious beliefs and practices and their effects on human functioning (and particularly health and wellbeing), the collection of reliable and valid scientific literature on these topics grows. There is still a pressing need for further research into religious and spiritual factors on health and wellbeing, but this chapter aims to address some of the most recent and important scientific findings in this area.

### *Perspectives on Healing and Wellness*

Throughout history, many cultures and religions have practiced a number of different healing modalities to bring health and wellbeing to their people. First, this section will highlight the important differences between the similar terms of “good health” and “wellness” as well as “curing” and “healing” for the purpose of providing clarity with regard to the terminology utilized. Next, the relationship between spirituality (which, as discussed in the previous chapter, necessarily includes a consideration of religious beliefs and practices) and health and wellness will be examined. Finally, the holistic approach to health and wellness will be explained and evaluated in some detail.

#### *Differentiation between “Good Health” and “Wellness”, “Curing” and “Healing”*

The term “good health” is said to “exist as a relatively passive state of freedom from illness in which the individual is at peace with his environment – a condition of relative homeostasis” (Dunn, 1959). In contrast, “wellness” is “conceptualized as dynamic – a condition of change in which the individual moves forward, climbing toward a higher potential of functioning” and it is defined as “an integrated method of

functioning which is oriented toward maximizing the potential of which the individual is capable, within the environment where he is functioning” (Dunn, 1959). This is an important distinction to make, as people often seek “good health” only when they are struck with an affliction of illness that they believe needs correction so that their homeostasis may be restored. Those in search of wellness, on the other hand, may not necessarily believe themselves to be “ill” or think that something about their functioning is flawed and in need of repair – rather, those seeking wellness are searching for *even better* functioning than what they currently experience. However, it is important to realize that “this definition does not imply that there is an *optimum* level of wellness, but rather that wellness is a *direction* in progress toward an ever-higher potential of functioning” (Dunn, 1959).

According to Dunn (1959), there are said to be three components to high-level wellness; they are:

- (1) Direction in progress forward and upward towards a higher potential of functioning
- (2) An open-ended and ever-expanding tomorrow with its challenge to live at a fuller potential, and
- (3) The integration of the whole being of the total individual – his body, mind, and spirit – in the functioning process

Clearly, this understanding of wellness recognizes the mind-body-spirit system of humankind as well as the need for integration and acknowledgement of all three components and their interconnectedness. In one’s endeavors to maximize their potential and function at the highest possible level (i.e. achieve wellness), all three elements of the tripartite human play an unavoidably necessary role. Throughout this chapter, both health (relieving one of their afflictions – illnesses and injuries) and wellness (working to

maximize one's functioning and reach their full potential) will be discussed, but the terms will not be used interchangeably, since they are fundamentally different concepts.

The second differentiation to make before continuing is that of “curing” versus “healing”. Curing is considered to be the “return to the state of health in which the patient was before the disease. This implies that the damage is clinically corrected,” whereas healing occurs “when a permanent change takes place in the patient – a change that enables the patient to better cope with whatever new situation he or she encounters” (Steyn, 1996). This creates a fairly neat parallel between the understandings of “good health” and “wellness”. To “cure” someone is to return them to “good health,” back to the state they were in prior to acquiring an affliction of illness or injury, whereas to “heal” someone is to promote greater “wellness” within them. Healing may involve curing, but it does not necessarily imply this. “To heal may simply mean to help the patient to make curative adaptations to any kind of organic or mental disease” (Steyn, 1996).

Through this lens, it can be better understood why Jesus was said to *heal* people rather than simply *cure* them. In many cases, His acts of *healing* did involve *curing* their illness or injury, but it is indisputable that Jesus' acts of healing did *not* simply return individuals to the same state they were in prior to acquiring an affliction – Jesus always left people *better* than He found them, and He created *permanent* changes in the individuals that He healed. In large part, the American healthcare system focuses on *curing* individuals, as people tend to seek healthcare when they are faced with an affliction, but the *healing* of individuals can easily be considered even more important than curing – especially in the long-term and with regard to one's functioning at the

highest capacity. Thus, this chapter will focus largely on healing, though the curing of afflictions cannot be ignored and so will be addressed as well.

### *Spiritual Effects on Health and Wellness*

The spiritual effects on health and wellness are numerous, and the body of research suggesting a link between spirituality and health and wellness are growing rapidly. This section will consider such effects. As mentioned in the previous chapter, religiosity is an aspect of spirituality, but other factors – such as emotions, relationships, and beliefs – also characterize and complete the understanding of spirituality. Thus, this section will consider religious effects on health and wellness, as religiosity is a component of spirituality, as well as other spiritual effects.

*Religiosity.* With regard to religious beliefs and practices, a strong link between these and health has been repeatedly demonstrated (Craigie et al., 1988; Levin & Vanderpool, 1991; Larson & Larson, 1994; Larson, Milano & Barry, 1996; Poloma & Hoelter, 1998). In fact, the findings that suggest this link have been so reliably replicated that a term has been developed in psychological science to refer to it: the “faith factor” (Larson & Larson, 1994; Benson 1984; 1996; Poloma & Hoelter, 1998). The “faith factor” refers, generally, to the finding that religiously active people tend to live longer than their nonreligious counterparts (Myers & DeWall, 2018). However, the “faith factor” extends beyond simply increasing one’s life span and relates specifically to one’s ability to experience greater health and greater wellness with religious involvement.

Studies have linked religious commitment with positive health outcomes such as “improved recovery from surgery, better coping with severe medical illness and major depression, reduced hospital stays, lower blood pressure, longer life, suicide prevention,

and prevention and treatment of substance abuse” (Callahan, 2002). These findings are groundbreaking because they “contradict the long-standing theoretical view that religious beliefs and practices represent a less than optimal means of coping with crises...and with life-threatening illness” (Callahan, 2002). The research has reliably demonstrated that holding a system of religious beliefs tends to reduce psychological distress created by a threatening illness and provides a means of coping that seems to “deal more effectively with illness than those who do not use religious means of coping” (Callahan, 2002; Eidinger & Schapira, 1984). Koenig (1997) found that religious coping provided strength, meaning, control, hope, and purpose to individuals suffering from severe physical illness. To elaborate, patients’ faith in God provided them with a renewed sense of strength to fight through their illness, a sense of meaning to “help make sense of their suffering”, a sense of control due to their faith that God is in ultimate control and that he hears their prayers and faithfully responds to them by facilitating their healing, hope for a cure to their illness or for the promise of life in heaven after death, and a sense of purpose, usefulness, and mission that raised their self-esteem during this time of crisis (Koenig, 1997).

One studied facet of religious practice and its effect on health is that of intercessory prayer. A well-known study by Byrd (1988) employed a randomized double-blind experimental protocol where participating Christians were provided limited information about individuals in the Coronary Care Unit (CCU) and were instructed to pray for those individuals’ quick recovery as well as the prevention of any complications or death. There were 393 CCU patients involved in this study, and they were unaware of whether or not they were assigned to the control group (receiving no intercessory prayer

from others) or the experimental group (receiving intercessory prayer) (Byrd, 1988). The results were striking: CCU patients who received prayer from participating Christian believers required fewer antibiotics and diuretics as well as less ventilator assistance, experienced a lower rate of congestive heart failure, and were less likely to develop pneumonia; these results were significant at the  $p < .0001$  level (Byrd, 1988). Thus, Byrd (1988) concluded that the data supported a beneficial therapeutic effect of intercessory prayer to the Judeo-Christian God in patients admitted to the CCU.

However, it is important to note that all religious traditions, not just Christianity, appear to be correlated with better health and wellness outcomes for individuals. “What matters in terms of psychological and health outcomes is whether a person is religious – period. It does not make much difference which religion a person believes” (Baumeister, 2002). Research has shown that religious people in general tend to “recover from heart attacks faster and more thoroughly than nonreligious people, but the benefits seem to flow from religiosity per se rather than from holding any particular faith” (Baumeister, 2002). This begs the question of whether it is truly religiosity that accounts for the improved health outcomes of believers or some underlying factor common to all faith traditions – such as hope or social support. At this time, further research is necessary to answer this empirical question.

*Other Spiritual Factors.* Other spiritual factors apart from religiosity can be reliably linked to positive health outcomes and increased wellness in individuals, including the factors of positive emotions, faith and belief, and social support. Focus on these other factors has become of increasing interest to physicians and health workers as “many of us...have become increasingly dissatisfied with our disciplines which

customarily deal only with the body or mind of man, leaving to religion, metaphysics, and philosophy the affairs of the spirit” (Dunn, 1959). Further, Dunn (1959) made the following groundbreaking claim:

All of us are familiar with instances in which a person with a sick or deformed body has had the will to climb back to normality; but, to the best of my knowledge, no one has ever seen a person sick in spirit who could maintain his mental or physical health for long.

Thus, it is clear that the attention of physicians is turning towards spiritual factors and affairs, and the discussion of some of those factors – positive emotions, faith and belief, and social support – is the topic of this section.

*Positive Emotions.* A strong correlation has been repeatedly demonstrated between positive emotions and positive health outcomes. Conversely, it is also widely believed by practitioners that negative emotions and attitudes tend to result in negative health outcomes. For example, Stapleton (1976) found that “deep hurts and fears often manifest themselves physically as backaches, headaches, skin rashes, asthma, and other illnesses”. M.D. Loring Swaim also stated that “chronic harmful emotions are a primary factor in the onset and development of rheumatoid arthritis” (Swaim, 1962). It has also been acknowledged by other medical professionals that “74% of 500 consecutive patients admitted to the department handling gastrointestinal diseases were found to be suffering from emotionally induced illness” (Blackburn, 1976). Additionally, “over 50% of all the illness that doctors see is emotionally induced illness” and of those 50%, “80% of these patients did not have the physical sickness they complained of, and 84% needed psychiatric care” (Schindler, 1954). A paper from the Yale

University Outpatient Medical Department “indicated that 76% of the patients coming to that clinic were suffering from emotionally induced illness” (Blackburn, 1976). Clearly, it is a well-known phenomenon among doctors that negative emotions may manifest as physiological health symptoms.

More specifically, with regard to the harmful effects that negative emotions have on health symptoms and outcomes, a doctor claimed that after studying 450 cancer patients for 12 years, he “found that in 72% of the cases despair and hopelessness were cited as contributing factors” to their cancer. Along the same lines, another doctor stated that he had “conducted research on 100 patients suffering from leukemia and lymphoma, and that in every case the diseases had developed in a setting involving sadness, anxiety, anger, or hopelessness” (Blackburn, 1976). These rates are staggering and certainly suggest that negative emotions can, if not fully *cause* the development of a serious disease, certainly *contribute* to worsening such diseases and resulting in poorer prognoses.

Conversely, positive emotions are found to lead to more positive health outcomes. Several studies have demonstrated a strong association between positive emotions and mortality, for example. In a famous study of 678 nuns, “those nuns who expressed the most positive emotions lived on average 10 years longer than those who expressed the least positive emotions” (Danner et al., 2001). Other studies have reproduced this link between positive emotions and mortality, while controlling or adjusting for confounding variables such as age, gender, health status, social class, sociodemographic factors, baseline physical



health and lifestyle, and baseline measures of blood pressure and respiratory function (Huppert & Whittington, 2003; Ostir et al., 2000, 2001; Levy et al., 2002; Moskowitz, 2003).

It is important to note that recent research suggests not just that, as previously thought, positive emotions *signal* that an individual is in a state of wellbeing and good health, but that positive emotions actually *produce* positive health effects and increase wellbeing (Kahneman, 1999; Diener, 2000; Fredrickson, 2001, 2002). This effect has also been found to be a long-term one (Fredrickson, 2002). One important conclusion that has been drawn regarding this relationship between positive emotions and health is that positive emotions have a protective effect on individuals' physical health, shielding them from developing illnesses or progressing in their illness rapidly (Ong, 2010). In support of this, "positive emotion is prospectively associated with reduced exposure to acute health conditions including incident stroke, myocardial infarction, and rehospitalization for coronary problems" (Pressman & Cohen, 2005). One interesting (and potentially ethically questionable) study administered assessments to test for tendency to experience positive and negative emotions in healthy adult volunteers, and then gave the participants nasal drops carrying a cold virus and monitored them (in quarantine) for symptoms of developing a cold (Cohen et al., 2003). Cohen et al. (2003) discovered that the participants with a higher level of positive emotions experienced the lowest rates of cold symptom development.

Another important finding that links both the negative health effects of negative emotions and the positive health effects of positive emotions is the finding that the experience of positive emotions actually undoes damage caused by negative emotions (Fredrickson, 2004; Ong, 2010). There have been physiological effects observed in relation to positive emotions and their ability to undo the negative effects of negative emotions: “daily positive emotion was found to mitigate the effects of negative emotion on blood pressure, even after controlling for trait affect and other potential confounds, such as age, sex, and marital status” (Ong & Allaire, 2005). Additionally, “positive emotion might also benefit health by ameliorating and even undoing the adverse effects of acute stress,” and the experience of stress clearly involves negative emotions such as anxiety and worry (Cohen & Pressman, 2006).

Several theories have posited potential explanations of how positive emotion may create these protective health effects as well as undo the negative health effects of negative emotions. Evidence for “the view that positive emotional states can have direct and usually beneficial effects on physiological, hormonal, and immune function” has been demonstrated (Eissa et. al, 2008). Similarly, it is thought that “positive emotion may alter disease vulnerability via dampening of physiological symptoms” (Ong, 2010). Another possible explanation is that positive emotion leads individuals to participate in more health enhancing behaviors such as better diet, regular exercise, and improved sleep (Pressman & Cohen, 2005; Steptoe et al., 2009). Lastly, Fredrickson et al. (2000) described cognitive effects of positive emotion that may contribute to the more

positive health outcomes of individuals who experience more positive emotions than others. Fredrickson et al. (2000) described significant differences in the cognitive appraisal of individuals during a stressful task: those who experienced more positive emotions were more likely to regard the task as an “interesting challenge” than those who experienced fewer positive emotions and they also recovered more quickly from the physiological effects of stress that they experienced. Though researchers are continuing to uncover potential mechanisms of how positive emotions ultimately come to produce more positive health outcomes, it is clear that there is a strong link between emotions and health.

*Faith and Belief.* Faith and belief – in one’s doctor, a medication, their ability to recover from illness, the probability of their recovery, etc. – are significant factors that contribute to one’s health and wellbeing. It has been found that “high acceptance and trust in the healer’s capacity is a contributory factor to a good prognosis” and trust factors directly into faith (in fact, faith is defined as “complete trust or confidence in someone or something”) (Goldman, 1985; (Merriam-Webster, 2021). A study of patients who had open-heart surgery confirmed that “acceptance was a crucial variable in getting well” (Mills et al., 1975).

One robust example of the effects of faith and belief on health outcomes is the placebo effect, which was briefly discussed in the previous chapter. The placebo effect refers to beneficial therapeutic effects that are experienced by individuals in response to treatments or medications that are inert and do not produce any beneficial effect through their own mechanism. Thus, any beneficial

effects experienced by individuals who received a placebo treatment can be attributed to their faith and belief in the effectiveness of the “treatment” they received. As it turns out, “personality types that are capable of trust in their physician respond more favorably to the placebo. Finally we arrive once again at the core of the issue, the dimension of expectant faith” (Goldman, 1985).

On the topic of the placebo effect and spirituality, Goldman (1985) wrote the following:

It is not merely the manipulation of the patient’s gullibility, as some critics of the placebo would have us believe, that creates the placebo effect. Rather, it is one’s complete and ultimate concern for getting well which transforms either the pharmacologically inert substance or the biologically potent substance, such as the antibiotic or analgesic, into an even more potent expression of man’s striving for wellness and wholeness. It is precisely in this context that we can build a conceptual framework which allows for the use of ritual and regression in the service of healing. Whether we speak of one’s traditional religion, faith in God, or faith that both the patient and the physician place in the cult of medicine, the role of ritual remains potent and quite often efficacious. Even the modern center in which physicians practice these rituals and display their symbol in a form of testimony to a fundamental need for ritual. In this sense, the white coats, the ceremonious ward rounds, the compulsive routine, and the ritualized approach to the patient all give expression to the fundamental aspect of the healing process, which is trust in the skill and judgment of the physician and the myth in which both doctor and patient participate.

With regard to faith, it is appropriate to mention the religious dimension, as faith is a cornerstone of the Christian religion. In the same way that faith and belief in a physician’s ability to heal an individual can promote that individual to experience improved health and wellbeing, faith and belief in the healing power of God may also promote an individual to experience improved health and

wellbeing. This is scripturally supported by the Gospels, in which Jesus tells a woman “Daughter, your *faith* has *made you well*; go in peace and be *healed* of your affliction.” (Matthew 9:22; Mark 5:34; Luke 8:48) as well as a blind man to whom he restored sight, “Go; your *faith* has *made you well*” (Mark 10:52).

*Social Support.* “There seems to be little controversy, either among the academic or the lay population, that something about social relationships can be good for health” (Madge & Marmot, 1987). Indeed, the research so far conducted regarding the link between social support and health has been remarkably consistent in the finding that lower levels of social support lead to illness and disease, while higher levels of social support have both a protective effect and a health- and wellbeing-promoting effect. In fact, in a large review of the available research, social support was shown by 21 studies to have a positive effect on health, a neutral effect according to three studies, and zero studies found social support to have a negative effect on health (Callahan, 2002). In the same way that emotions relate to health – negative emotions lead to negative health outcomes, positive emotions have a protective effect on health, and positive emotions produce positive health and wellbeing outcomes – a lack or absence of social support leads to illness and disease, the presence of social support has a protective effect on health, and the presence of social support produces positive health and wellbeing outcomes.

In examining the relationship between a lack or absence of social support and the development of illness and disease, it is argued that “changes in the physical and social environment which interfere with patterns of social interaction

will result in poor health” (Leighton, 1959). In line with this argument, “a number of studies have produced...evidence implicating the absence of social supports in disease genesis” (Kaplan et al., 1977). For example, Holmes (1956) found that “people who, for one of various reasons, had no friends, family, or intimate social group to which they could relate” experienced higher rates of tuberculosis than individuals who had stronger social support. Additionally, a lack of social support has been linked to higher rates of schizophrenia, multiple accidents, and respiratory diseases besides tuberculosis (Dunham, 1961; Mishler, 1963; Tillman & Hobbs, 1949; Kaplan et al., 1977). Another relevant study found that after a factory shutdown which resulted in widespread unemployment, the unemployed men who experienced a lack of social support “had the most disturbing health outcomes” including more symptoms of illness and higher cholesterol levels than their unemployed but socially supported counterparts (Gore, 1973; Kaplan et al., 1977).

With regard to the protective effect that social support provides, this effect has to do largely with the relationship between social support and stress – namely, that social support helps to mediate or reduce stress (Pinneau, 1972). “Both animal and human studies have provided evidence of the protective effect that the presence of important other members of the same species confers on the individual under some form of stress” (Kaplan et al., 1977). The mechanism that underlies this effect has been identified as occurring in the anterior and lateral hypothalamus, therein which a social stimulus “calls forth in the organism a

‘competing response’ which inhibits, masks, or screens the stress stimulus such that [it] has a minimal effect” (Bovard, 1962).

Lastly, several studies have found evidence to suggest a positive effect of social support on health and wellbeing (Berkman, 1984). The Gore (1973) study of unemployed men who had been working at a factory when it was shut down found that those with social support during the time of unemployment “made a more rapid return to normal,” thus emphasizing how social support helps individuals to cope with hardship and return to health. In addition, it has been found that the *quantity* of social relationships an individual maintains has a positive effect on *physical* health outcomes, while the *quality* of their social relationships has a positive effect on *psychological* wellbeing (Orth-Gomér & Undén, 1987; Porritt, 1979; Barrera, 1981). Interestingly, the spiritual factor of connection with others (e.g. social support) is related in quantity to bodily health and in quality to mental health, which provides further support for the interconnectedness of mind, body, and spirit as one cohesive system.

*Links between These Factors.* It should not be left unrealized that religiosity, positive emotion, faith and belief, and social support are linked to one another in several important ways. For example, one’s religious involvement is said to increase their positive emotions (such as emotions of hope and love), promote faith and belief (in God), and provide social support (by means of providing a religious community for members to participate in with one another) (Baumeister, 2002; Fredrickson, 2002; Kaplan et al., 1977). These factors may underlie the health benefits that are linked to religiosity. In the same way, faith and belief in God is certainly likely to increase positive emotions – such

as those of hope and optimism – in individuals. Receiving social support has also been found to increase positive emotions such as happiness (Bradburn & Caplovitz, 1965). All of these factors – religiosity, positive emotion, faith and belief, and social support – are spiritual factors that, whether by their own mechanism or by their relationship to the other factors, have important roles in promoting health and wellbeing.

### *The Holistic Approach to Health and Wellness*

As demonstrated in the previous section, spiritual factors have important impacts on health and wellbeing – so why are these factors so widely overlooked in traditional approaches to medical care? It is important that the entire mind-body-spirit system of an individual is supported in order to best promote one’s health and wellness, and this is why a holistic approach to healthcare is warranted.

*Definitions.* Before proceeding, it is important to address two particular concepts: health and healing, and the holistic perspective. With regard to health and healing, these words are “etymologically related to” the English word “whole” (George, 2017). In fact, the adjective “whole” is defined in the dictionary as “sound; *healthy*; *healed*; intact; entire” (George, 2017; Merriam-Webster, 2021). “There seems to be unanimity (amongst participants and the literature) that good health means being whole” (Steyn, 1996).

The holistic perspective is defined by the National Institutes of Health (NIH) as a perspective that “considers the whole person, including physical, mental, and spiritual aspects” (Dossey, 1998). A holistic approach to healthcare is said to acknowledge the “interdependence of spiritual, mental, and material agents” (Poloma & Hoelter, 1998). In terms of a dictionary definition, “holistic” is defined as “characterized by comprehension of the parts of something as innately interconnected and explicable only by reference to



the whole” (Merriam-Webster, 2021). These definitions make clear that a holistic approach to healthcare is considerate of the *whole* human – composed of mind, body, and spirit – and thus looks to treat all components of illness, disease, and wellness: the physical, mental, and spiritual.

*Fundamentals of a Holistic Approach.* A holistic approach to healthcare differs from a traditional medical approach in several significant ways. Namely, a holistic approach incorporates the entire mind-body-spirit system, uses a comprehensive and eclectic process in healing, looks to find the underlying cause(s) of illness, and maintains the primary goals of healing and achieving wellness rather than simply curing and returning patients to good health. Each of these will be discussed in the forthcoming sections.

*Incorporating the Whole Person (Mind, Body, and Spirit).* The first way in which holistic healthcare differs from a traditional approach is in its focus on the entire mind-body-spirit system rather than focusing on mind-body duality. “At the core of many holistic modalities are spirituality and healing which encompass a person’s values, meaning, and purpose in life” (Dossey, 1998). Holistic approaches maintain the view that illness represents a disturbance in the mind-body-spirit system and that “illness is a message to change” (Siegel & Siegel, 1995). In other words, since illness manifests in response to a disturbance of the mind-body-spirit system, illness confers the message that one’s homeostatic balance has been offset and is in need of repair. Repairing this imbalance requires a person to *change* their behavior. Even something as simple and physiological as catching the common cold requires changes in one’s behavior (e.g. getting

additional sleep, increasing fluid intake, decreasing participation in activities that could strain or stress the body, etc.) in order to return to health.

*Taking a Comprehensive and Eclectic Approach.* While traditional approaches to healthcare focus on only conventional diagnostic and therapeutic techniques, holistic approaches are more comprehensive and eclectic. For example, holistic medicine is defined by the American Veterinary Medical Association (AVMA) as “a comprehensive approach to health care employing alternative and conventional diagnostic and therapeutic modalities” and it is said that the “holistic practitioner will explore all disciplines, including conventional medicine, and integrate those healing disciplines needed to achieve optimum well-being” (Tutu, 2013). It is important to recognize that holistic approaches to healthcare do *not* reject conventional methods, but they do incorporate methods beyond just the conventional, which is what makes holistic healing more comprehensive and eclectic compared to traditional healthcare approaches.

*Searching for the Underlying Cause(s) of Illness.* Holistic approaches to healthcare go beyond simply responding in a reactionary manner to symptoms of illness. To illustrate this, a traditional approach would look for signs of illness, such as the presence of a cancerous tumor. A conventional practitioner would remove the tumor and the patient would be considered “cured” (Tutu, 2013). The holistic practitioner, on the other hand, “would additionally seek to understand why the tumor occurred in the first place and attempt to remove the *causes* so that the tumor does not return” (Tutu, 2013). While traditional healthcare approaches focus on *treating* illness after it occurs, those who take a holistic approach to

healthcare try to *prevent* illness from occurring or reoccurring as well (Tutu, 2013). When it comes to taking a holistic approach, “although the elimination of distressing symptoms is also the goal, understanding the message of the illness is considered even more important” (Steyn, 1996). Since illness is thought to be a sign of a mind-body-spirit system imbalance, understanding its “message” is to understand what caused the illness to present in the first place.

*Promoting the Primary Goals of Healing and Wellness.* While the goals of traditional healthcare are to “cure” illnesses and achieve “health” (i.e. return the patient to the state of health in which they were prior to becoming ill), the goals of a holistic approach to healthcare are to “heal” and promote “wellness” (i.e. increasing the patient’s wellbeing and optimizing their functioning, thus leaving them in a *better* state than they were in when they first sought care and prior to seeking care). “The aim of healing is often not the same as that of most orthodox medicine,” – rather, “healing seeks to allow or facilitate the expression of a person’s greatest potential. It helps to achieve the maximum growth and understanding of a personal self within a greater whole” (Wetzler, 1983). One way in which healing and wellness are encouraged within a holistic approach is through empowering individuals of their bodies’ own self-healing capacity. This self-healing capacity of the body may sound far-fetched, but it is actually quite apparent when one considers the placebo effect. For example:

Perhaps the most vocal adherents of the placebo are those proponents of the holistic movement in modern medicine. Kenneth Pelletier is one such advocate who urges that we place more emphasis on considering the ways by which the placebo effect can be systematically enhanced. Pelletier takes the position that the placebo is at the heart of all

healing rituals and that through it the patient can see how potent and effective his own self-healing capacity can be. Therefore, in any revised approach to placebo treatment, the real or core aspect of the placebo effect would be the patient's informed and accepting attitude, which embraces a profound appreciation for his own intrinsic powers of healing (Goldman, 1985)

In other words, the idea is that when a medical professional provides a patient with a placebo, they are mobilizing "the patient's own inner resources of healing," by means of spiritual factors such as those discussed previously: belief and faith (in the effectiveness of the placebo), positive emotions (hope for the placebo's effectiveness), and social support (from the practitioner themselves) (Goldman, 1985).

#### *Support for the Use of a Holistic Approach*

As it has been noted, more and more researchers and healthcare practitioners are recognizing the important impact that spirituality plays in an individual's health, as well as the inherently interconnected nature of the mind-body-spirit system. McGuire (1988) spoke on this interconnectedness by stating that health, illness, and healing are "subjectively engaged cognitively, emotionally, and by way of the senses," referring, respectively, to mental, spiritual, and bodily components of wellbeing. "The mind-body-spirit of every human being is completely interrelated and together with all other organisms forms part of a fundamental dynamic and interdependent system" (Steyn, 1996). This fundamental understanding of human functioning leads to the conclusion that "to exclude religion," or spirituality in general, from healthcare practices "is to ignore an important source of healing for many" (Larson, 1996). This was aptly stated by Jerwood et al. (1960):

The truth of the matter is that man is a spiritual creature, created by God, with a body, mind, and spirit. Each aspect

of man's being is of equal importance and may have a remarkable influence on the other aspects. The effect of the mind on the body is widely accepted and the reverse is also recognized to be true in most upsets of bodily function. What is not so generally realized is that the spiritual condition of an individual may have a most profound effect upon his mind and body. No person is really healthy unless he has a healthy body, mind, and spirit working in complete harmony with each other. Healing, therefore, should aim at the restoration of the wholeness of this unity, and *any attempt to exclude one of these aspects of man's personality from an approach to healing is doomed to failure or at the most only partial success.*

Again, it is important to recognize that a holistic approach to healthcare does *not* attempt to remove or exclude orthodox methods of medicine – rather, the holistic approach advocates for maintaining traditional methods and *adding* the consideration of the dimension of spirituality to healthcare practices. As Larson's (1996) and Jerwood et al.'s (1960) statements support, this is absolutely warranted and necessary for promoting good health and wellness among individuals.

Additionally, the Patient Bill of Rights put forth by the Joint Commission on Accreditation of Healthcare Organizations (JCHAO) specifically states that “care of the patient must include consideration of the psychosocial, spiritual, and cultural variables that influence the perception of illness” (Dossey, 1998). This requirement of healthcare practitioners has been met with significant resistance. For example, Ellis et al. (1999) found that primary care physicians often stated “(1) lack of time, (2) lack of experience or skills in taking a spiritual history, (3) uncertainty about how to identify those who want to discuss spiritual issues, and (4) a concern that they would project or push their beliefs on patients” as reasons for failing to include a spiritual dimension to their practice of healthcare. Ironically, “taking a spiritual history along with a social and physical history” could actually alleviate the uncertainty about how to identify those who want to discuss

spiritual issues, since taking such a history typically tends to help a practitioner “identify those patients who may want to address spiritual issues” (Callahan, 2002).

It is believed that some of the resistance by healthcare practitioners to implement a spiritual aspect in their practice of healthcare can be explained by the fact that “medicine has needed to define itself as a technical discipline distinct from the social” (Stacey, 1988). As a result, “medicine has manifested a historical skepticism about the utility of social science to contribute anything to an understanding of why some people become ill and die while others remain well” (Oakley, 2018). Another potential reason for this resistance to including a spiritual component to healthcare is that many healthcare providers do not personally hold religious beliefs, in fact, “while 6 percent of the U.S. population as a whole is atheist or agnostic, 21 percent of psychiatrists and 28 percent of clinical psychologists are atheists or agnostic” (Callahan, 2002). It is widely overlooked, however, that many spiritual factors are independent of religious beliefs or affiliation. Nonetheless, whether practitioners are themselves religious, spiritual, or neither of these, in order to be in compliance with the Patient Bill of Rights put forth by the JCHAO, practitioners need to begin considering spiritual factors.

It has been found that, according to one study, 66% of patients “noted that their trust in their physician would grow if asked questions regarding their spiritual/religious values” (Callahan, 2002). As previously discussed, *trust* is fundamentally related to faith and belief, which are important spiritual factors in producing positive health outcomes. This alone is an important reason for advocating the consideration of spiritual factors in the practice of healthcare. Practitioners are not being asked to give up the traditional methods of care to which they are accustomed, but rather they are being asked to *include*

a spiritual dimension to their practice, thereby making their approach a more holistic one. “The highly expensive orthodox model of medicine is not effective since everyone cannot be reached...if spiritual healing could be added to it on a primary health care basis, it could greatly improve the effectiveness of the system” (Steyn, 1996).

Fortunately, changes are beginning to take place within medical school education that will, hopefully, lead new healthcare practitioners to become more mindful of spiritual factors and thus more holistic in their approach to healthcare. “More than half of U.S. medical schools now offer courses on spirituality and medicine, many of those required” – and this is being accomplished without reducing the number of other standard, traditional courses historically required of medical students to take (Callahan, 2002). Most medical schools that include courses on spirituality are ensuring that those courses include the following key components:

- (1) Teaching students to include a spiritual evaluation or assessment as part of routine history in a respectful, nonjudgmental, and nonimposing fashion; (2) reviewing published research on the role of spirituality and health; (3) cooperating with chaplains and other spiritual counselors as integral members of the health care team; and (4) reviewing major religious traditions and specific clinical relationships of these traditions that may influence or affect health care choices and patient coping. (Puchalski & Larson, 1998)

In an effort to incorporate the religious dimension of spirituality into medical education, “many medical schools” also “offer courses in medical ethics taught by theologians” (Goldman, 1985).

Finally, a holistic approach to healthcare is in fact supported by the Christian religion. “Religious healing practices have had both physical and spiritual dimensions, aiming to restore both health of the body and wholeness of the spirit in terms of its unity with God” (Aldridge, 2000). In addition, “healing of the body is never purely physical,

and the salvation of the soul is never purely spiritual, but both are combined in the total deliverance of the whole man, a deliverance which is...illustrated in the healing miracles of Jesus” (Wilkinson, 1980). These verses suggest the importance of healing the *whole* person, not simply alleviating the symptoms of illness, however they may present themselves.

*Conclusion: A Return to the Discussion of the Image of God and Likeness to God*

Chapter One of this thesis discussed the traditional Christian belief in the difference between the *image* of God (which is said to be impossible to lose), and the *likeness* to God (which can be lost). In consideration of this difference, the *image* of God as potentially expressed in the tripartite mind-body-spirit structure of humans is something which cannot be lost – all individuals possess a mind, a body, and a spirit and these cannot be lost without causing death to the individual. Thus, the mind-body-spirit system as an expression of the image of God meets the requirements that any true image of God is unable to be lost and applies evenly to both men and women. However, the traditional understanding of the likeness to God purports that it is possible for an individual to possess – or not possess – a *likeness* to God. All three persons of the Trinity – the Father, the Son, and the Holy Spirit – exist in a harmonious state of perpetual agreement with one another. In humans, however, the three aspects that compose an individual – mind, body, and spirit – often do not exist in this same harmonious agreement, and it has been suggested that disagreement or imbalance in the relationship of the three aspects is what results in illness, which is why “illness knows only one goal: to make us become whole” (Dethlefsen & Dahlke, 1993).



Perhaps achieving greater *likeness* to God is, in part, accomplished through the pursuit of harmony and alignment in the mind-body-spirit system with the goal of integrating oneself into a harmonious whole. And perhaps a holistic approach to one's wellbeing is necessary in order to achieve this harmony in the mind-body-spirit system. Perhaps illness is a signal from God that an individual ought to pursue this harmony and integration.

As discussed in Chapter Three, perichoresis in both the Godhead and in humanity is an important aspect in the structural *imago Dei*. Not only are the three persons of the Godhead and the mind-body-spirit system mutually indwelling in God and in humans, respectively, but through the acceptance of the loving relationship that God offers to humanity through the sacrifice made by Jesus Christ, humans are invited to participate in this relationship of communion, openness, and receptivity by allowing the Holy Spirit to *dwell within us*, in our hearts. Perichoresis is more than just a structural similarity, in this way it becomes part of the *relational* similarity that we are offered by God.

Returning, briefly, to the relational and functional representations of *imago Dei* described in Chapter One, I argued that these understandings may represent the *likeness* to God more than the *image* of God (though it is also possible that there is simply *more than one* image of God present in humankind). I also argued that an ontological representation of *imago Dei* is effectively inevitable, since relational and functional representations rely on ontological assumptions. I posit that this ontological theory – that the mind-body-spirit system of humankind mirrors the Trinity of the Godhead – answers those assumptions made by the other models.

As the relational theory relies on the assumption that humankind has the capacity and desire to cultivate meaningful personal relationships with others and with God, and the functional/representational theory relies on the assumption that we will perform certain functions in the world that are similar to God's, the mind-body-spirit system enables individuals to relate to others and to perform all functions of which they are capable. This ontological theory of the mind-body-spirit system as it relates to the Father-Son-Holy Spirit Trinity is an image which cannot be lost. All individuals possess a mind, a body, and a spirit – however, the ways in which these things are *used* (e.g. for the purpose of seeking connection with others and with God, for the purpose of behaving similarly to God [or, more accurately perhaps, Jesus], and/or for the purpose of performing functions in the world similar to those that God performed and ordered humankind to continue performing) may define whether or not individuals are drawing nearer to the *likeness* of God.

By being the relational and functional creatures that we were created to be – and by relating the mind-body-spirit system within ourselves, aiming to have our entire system in harmony and balance – we may draw nearer to the *likeness* of God. By accepting the invitation of perichoresis offered by God in allowing the Holy Spirit to dwell within us, we are invited to become more than just God's *image*, and through embodying and exercising *love* (for ourselves, others, and God), we can functionally represent the image of God, who is Himself – in his very being – goodness and love. In this way, we move from representing the *image* of God alone to expressing His *likeness* within and throughout the world.

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