

tween men and women. But he fell short of making the application of these provocative characteristics to a small Mormon town.

Two very brief statements of a personal nature by David M. Kennedy, an LDS church leader and former United States Ambassador (to NATO and at large), and David C. Montgomery, coordinator of the Near Eastern Studies Program at Brigham Young University, were also included in the book.

The subject matter of this small book encompassed far more diverse ideas than can be properly commented on in a review. Anyone interested in the subject of these studies will be amply served by reading the book. A capstone to the book may well be best expressed by two of the partici-

pants. The first, Mahamand Mustafa Ayoub, from the Centre for Religious Studies at the University of Toronto, had returned to his former Muslim faith after several years as a fundamentalist Protestant who had "shouted more amens and hallelujahs than any of you." From his point of view, Mormons would not succeed in "converting Muslims" any more than others who have tried. But he felt that Mormons could succeed in creating "an important dialogue that will lead to a fellowship of faith between you and us" (pp. 116). The second, Omar Kader, who now teaches at BYU and is a Mormon convert from Islam, observed that Brigham Young University was well suited as a place "to reduce the spots of ignorance within our own thinking" (p. 61).

## Rx with a Historical Slant

*Medicine and the Mormons: An Introduction to the History of Latter-day Saint Health Care* by Robert T. Divett (Bountiful, Utah: Horizon Publishers, 1981), 222 pp., \$9.95.

Reviewed by N. Lee Smith, a Salt Lake City physician.

IT IS EASY FOR ME TO BE enthusiastic about this relatively short, readable volume, which in many ways breaks new ground in Mormon historiography. It is a book for all fascinated with Mormon health attitudes as well as Mormon history aficionados who have wondered at the intriguing array of often-passionate medical inclinations among Mormons. This fascinating story of evolving biases reveals much, not only of Mormon medicine, but also generally of nineteenth-century medicine on the American frontier. That period was certainly one of the most colorful and revolutionary in all medical history with attitudinal overtones which persist to our own day.

Robert Divett, certainly one of the top two or three LDS medical historians, is

well qualified for the task. His careful documentation draws on new sources that will delight the scholar; and his very readable, objective style likely contributed to the prizes he was awarded by the American Medical Library Association for articles partially incorporated into this volume (which also includes much of the material in his Autumn 1979 *DIALOGUE* article).

A variety of matchmakers have, from ancient times, promoted the natural marriage of medicine and religion. The priest-physician concept of ages past, still literal in the medicine men of the "less developed" cultures today, parallels the desire of many latter-day Mormons for their earthly healer to be in tune with the Divine Healer. Divett chronicles the Mormon struggles with such intertwined issues: faith-priesthood healing confronted with man's medicines; (and which medicines?—man-designed or natural?); the role of sin or devil-possession in causing disease; the "eternal laws" governing health and healing; the Word of Wisdom as a spiritual principle; and the role of "God's chasten-

ing hand" in disease-caused suffering. These concerns are developed historically as Mormons viewed them, not philosophically or theologically. Divett handles such emotion-packed issues tactfully and with the historian's attempt at detached objectivity.

After laying a succinct background of "Medicine in the U.S. in Joseph Smith's Day" (Chapter 1), Divett describes some of the significant health impacts on the larger Smith family (Chapter 2) and the "Medical Aspects of the Restoration" (Chapter 3). He lineates how Joseph Smith, Sr.'s, family became impoverished in the ginseng trade, which led to their westward migration to Palmyra. He also describes the significant impact of remarkable faith-healing episodes and of Thomsonian herbalists on Joseph Smith's thought and thus on nearly all early Mormon medical attitudes.

Lest one underestimate Samuel Thomson's influence, note that part of his herbal revolution against the then-orthodox medicine of calomel, bleeding, etc., was his strong opposition to alcohol, tobacco, and what he called "hot drinks," which he defined as tea and coffee. Two members of the First Presidency in that generation (three if one includes John C. Bennett) were Thomsonian herbalists. Speaking of John C. Bennett, Divett gives some of the best biographical insights available regarding his pre- and post-Nauvoo years. Bennett's medical activities included establishing fly-by-night medical diploma mills and taking degrees and certificates in all the rival medical camps — heroic, eclectic, and even Thomsonian. His inventiveness and opportunism are in keeping with his later ego-preserving treachery toward the Mormons. Also of interest was how important Sappington's quinine pills were in allowing the settlement of Nauvoo (pp. 60–65).

After chronicling the advent of scientific medicine and the flexibility of Brigham Young and later Church leaders in reversing earlier attitudes by accepting the new orthodoxy, Divett's later chapters are a bit bland in their detailing of the LDS hospital system, health missions, and the like.

The book's strengths clearly lie in its earlier history; the omissions from contemporary history and issues justify the subtitle, "An Introduction." The chapter, "New Directions of the 1970s and 1980s," doesn't quite make it to the 1980s. In a second edition, this terminal chapter could be considerably strengthened by discussion of the official LDS positions on current bioethical issues such as birth control, medically indicated abortions, artificial inseminations, test-tube babies, life prolongation and of the coming theological problems raised by new medical capabilities in genetic engineering, intersex and sex change treatments, and new discoveries such as genetic and neurochemical influences on behavior, altruism, depression, etc. These present-day medical concerns, currently being explored by such Mormon associations as Collegium Aesculapium (LDS physicians) and AMCAP (Association for Mormon Counselors and Psychotherapists) are likely to be fraught with every bit as much controversy as issues of yesteryear. But then it is never quite fair for a reviewer to list what he wishes the author *had* included.

Nevertheless, the immediate history of the Word of Wisdom revelation could have been more fully developed: the Kirtland context of temperance movement passion, popular health reform fervor, and medical questions that undoubtedly led in part to Joseph Smith's prayerful inquiry, resulting in the Word of Wisdom revelation. Additionally, the section on the introduction of scientific method to medicine would be benefitted by stating that many popularly held folk (Thomsonian, herbal, homeopathic, etc.) beliefs were carefully studied and were found to be largely fallacious. The documentation of this last point would be most helpful in fulfilling the author's expressed purpose of helping physicians understand the attitudes of their LDS patients and to respond appropriately, particularly to those whose medical beliefs have been culled from the advice of prophets from an earlier and very different era. In this regard, it would also have been

most useful to include official efforts in 1977 to combat the association of medical quackery and unorthodox herbalism with Mormon doctrine (see, for example, *Church News* editorial, 18 June 1977).

Overall the book provides an excellent perspective, documenting the evolution of

changing LDS medical beliefs in response to a dramatically changing medical orthodoxy. Interestingly, Church leaders have shown a healthier flexibility (pun intended) in this regard than have the rank and file. Divett is to be congratulated on producing something of a landmark in this field.

## Intimacy in a Three-Piece Suit

*Human Intimacy: Illusion & Reality* by Victor L. Brown, Jr. (Salt Lake City, Utah: Parliament Publishers, 1981), 167 pp., \$6.95.

Reviewed by Phyllis Barber, a professional writer/musician from Salt Lake City, Utah, with a B.A. in music and an MFA in writing.

WHAT IS THIS HUMAN INTIMACY, this condition that human beings seek "at every stage of life . . . as urgently as we seek food and drink . . . this need so powerful that we are vulnerable to deception . . . that we see almost anyone as desirable, almost any situation as endurable, *if* it holds out the promise of intimacy?" (p. xiv)

In his book, Victor L. Brown, Jr., not only attempts to define intimacy—"a broad deep term, not a synonym for sexuality . . . one of the highest ideals of the human heart" (p. 1)—with numerous examples of realities and illusions, but offers a systematic approach to finding intimacy (over the long haul). Brown's yellow brick road is built on the following principles: (1) the establishment of one's identity, (2) the definition of role (the *kind* of female or male one is), (3) the development of relationship skills, and (4) the flourishing of intimacy through marriage, all of which lead to the ultimate communion with "one's innermost self and union with others in social-emotional, mental, physical, and spiritual ways" (p. 2).

With a chapter dedicated to each of the above steps, Brown tries to separate the illusory (the cul-de-sac) from the real (the true path necessary for the achievement of intimacy).

Brown is at his best in the "Reality of Identity" chapter where he discusses how intimacy is enhanced by self-esteem, a topic with which he is knowledgeable and comfortable: "Intimacy includes our ability to enhance other identities and to be enhanced. . . . It adds to our happiness if we are valued by ourselves and others for what we are. If we are valued for how we can be used to gratify someone else's needs or expectations, then we are hampered in our ability to establish intimate relationships" (p. 40). He is also comfortable with the "Developing Roles" section of Chapter 3 where he discusses the dangers of role-playing rather than developing relationships based on inner reality. He compassionately advises his readers to surmount the limitations of role and to make distinctions between arbitrary sex-role stereotypes and appropriate sex-typing. He speaks out for the domesticated as well as the publicly talented woman and for the tender man bound by role expectations of steel hand, lip, and heart.

This book tackles an incredibly complex concept; Brown tries to peg it, capture it, and lasso it for others who will benefit from his wisdom. He sometimes snares himself in the universal generalizations which he applies to the elusive concept of intimacy.