



Cult experience : abuse, psychological distress, close relationships, and personality characteristics  
by Irene Gasde

A thesis submitted in partial fulfillment of the requirements for the degree of Master of Science in  
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Montana State University  
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**Abstract:**

Cultic groups distinguish themselves from benign groups through their use of unethical means of persuasion, control, and exploitation. Most people view those who join cults as different from the norm and attribute their psychological problems after leaving cults to personal deficiencies. This study investigated 61 former members of the controversial Church Universal and Triumphant (CUT), evaluating their perceptions of the group's abusiveness, their level of psychological distress and personality characteristics, as well as changes in the quality of their close personal relationships. Although responses to the Group Psychological Abuse Scale revealed non-abusive pre-involvement perceptions of CUT, current perceptions reflected higher abusiveness, suggesting changes in the interpretations of events for these two time frames, possible misrepresentation on the part of the group, or both. On the revised Symptom Check List-90, many respondents reported high levels of psychological distress, which were influenced by spousal relationships during and after CUT involvement and which decreased since leaving CUT. Respondents' scores on the Eysenck Personality Questionnaire fell mostly within the normal range, except for extroversion, which fell below the norm. Respondents reported that personal relationships deteriorated during CUT involvement. Similar studies investigating other controversial groups are needed. Research focused on the development of instruments and methodologies permitting the study of children with cult histories would contribute to expanding current understanding of the impact of cults.

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APPROVAL

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This thesis has been read by each member of the thesis committee and has been found to be satisfactory regarding content, English usage, format, citations, bibliographic style, and consistency, and is ready for submission to the College of Graduate Studies.

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Date 7/25/1997

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## ABSTRACT

Cultic groups distinguish themselves from benign groups through their use of unethical means of persuasion, control, and exploitation. Most people view those who join cults as different from the norm and attribute their psychological problems after leaving cults to personal deficiencies. This study investigated 61 former members of the controversial Church Universal and Triumphant (CUT), evaluating their perceptions of the group's abusiveness, their level of psychological distress and personality characteristics, as well as changes in the quality of their close personal relationships. Although responses to the Group Psychological Abuse Scale revealed non-abusive pre-involvement perceptions of CUT, current perceptions reflected higher abusiveness, suggesting changes in the interpretations of events for these two time frames, possible misrepresentation on the part of the group, or both. On the revised Symptom Check List-90, many respondents reported high levels of psychological distress, which were influenced by spousal relationships during and after CUT involvement and which decreased since leaving CUT. Respondents' scores on the Eysenck Personality Questionnaire fell mostly within the normal range, except for extroversion, which fell below the norm. Respondents reported that personal relationships deteriorated during CUT involvement. Similar studies investigating other controversial groups are needed. Research focused on the development of instruments and methodologies permitting the study of children with cult histories would contribute to expanding current understanding of the impact of cults.

## INTRODUCTION

### What Is a Cult and Who Joins?

Cults are neither a recent nor an uncommon phenomenon. In the United States alone, there are between 3,000 and 5,000 cultic groups (Langone, 1996; Singer, 1995). Approximately 185,000 new members are recruited each year (Martin, 1996), and over the past two decades about 20 million Americans have been involved in one or several such groups (Singer, 1995). Estimates that include foreign mission fields suggest that 35 to 50 million people have been involved in some form of cultic organization (Martin, 1996).

According to the American Heritage Dictionary (Morris, 1982), the word cult refers to a "system or community of religious worship and ritual, especially one focusing upon a single deity or spirit." It is also used to describe "obsessive devotion or veneration for a person, principle, or ideal." For present purposes, however, a definition that distinguishes cults from more benign organizations, movements, or religions is more appropriate and useful. It is one shared by mental health professionals familiar with the phenomenon of cults and their casualties:

A cult is a group or movement that, to a significant degree, (a) exhibits great or excessive devotion or dedication to some person, idea, or thing, (b) uses a thought-reform program to persuade, control, and socialize members (i.e., to integrate them into the group's unique pattern of relationships, beliefs, values, and practices), (c) systematically induces

states of psychological dependency in members, (d) exploits members to advance leadership's goals, and (e) causes psychological harm to members, their families, and the community. (Langone, 1993, p. 5)

Researchers studying cults have recognized that groups and organizations which qualify under this definition are not limited to religious groups. However, many cults incorporate as churches because of the legal and tax benefits this status confers (Singer, 1995). Singer gave examples of cults that center around issues of prosperity, self-improvement techniques, psychotherapy, meditation, martial arts, environmental life styles, health fads, politics, and commerce. Thus, a religious purpose seems to be a much less inclusive descriptor than the authoritarian, manipulative, and exploitative practices employed by cults across diverse fields of interest.

To most people, the word cult refers to a strange, rather marginal phenomenon, something in which only problem-ridden, weak-minded, and psychologically deranged people get involved. Sensational headlines and accounts of such tragedies as the deaths associated with the People's Temple (Jonestown) in Guyana, the Branch Davidians in Waco, Texas, and the related Oklahoma City bombing, and, most recently, the members of Heaven's Gate in San Diego, California, temporarily flood the media and shock the general public. Unfortunately, these events are short-lived in the public's memory, and the cult phenomenon is easily dismissed as the kind of thing that happens only to people who are very different from the rest of us. This kind of thinking reflects what Singer (1995) called the "not-me" myth, a mind set which, in the final analysis, translates into marginalizing and blaming those who fall prey to such groups. Even psychologists and other mental health professionals, who one would expect not to succumb to the

fundamental attribution error (a tendency to inappropriately attribute causation to factors within the individual rather than situational factors) frequently assume that only “socially or psychologically inadequate people” (Walsh, Russel, & Wells, 1995, p. 339) join cults. Some researchers and clinicians have called this the most disturbing and persistent myth about those who join cults (West & Martin, 1994), but others have asserted that cult members come from troubled families (e.g., Schwartz and Kaslow’s [1979] “over-enmeshed families”) or have histories of psychological problems that predispose them to cult involvement as well as post-cult psychological distress (Maleson, 1981; Spero, 1982). The Group for the Advancement of Psychotherapy (GAP, 1992) proposed that cult membership should be viewed as a maladaptive attempt to achieve adulthood, arising from developmental challenges of late adolescence. These youths are believed to have been raised in cultogenic families that foster exaggerated and unhealthy dependency in their children. GAP also suggested as a motive for joining cults a “counter-dependent rebellion against the family” for which the cult provides a relational environment with dynamic characteristics similar to that of the family of origin. GAP argued that remaining in the cult is a sign of pervasive and fixed problems, such as borderline personality disorder, or is the result of the attainment of positions of power and influence within the cult.

In contrast, Singer (1995) proposed that some families may be pushing their children too much and too quickly to grow up and make decisions without providing appropriate guidance, thereby unwittingly fostering a need in their children to seek security and guidance elsewhere. By offering “instant, simplistic, and focused solutions to life’s problems” (Singer, 1995, p. 17), cults can fulfill that need. Singer observed that

being depressed and being in between important affiliations are the most common vulnerability factors predisposing individuals to cult recruitment and that family dynamics may in some cases contribute to such vulnerability. She also elaborated on the vast societal, circumstantial, and situational factors impacting individuals' receptivity to the sales pitches of manipulative cult recruiters. Langone (1993) proposed that people may join cults "because they are duped. The process is a seduction, not a mutually beneficial agreement or the choice of an informed 'consumer'" (p. 6). Most experts agree that all people are potentially vulnerable at different times in their lives, a sobering and alarming assertion. Examining the perspectives and needs of cults, Lalich (1997) pointed out an additional argument in support of the view that those who join cults are not weird, unstable people. She explained that "cults look for active, productive, intelligent, energetic individuals who will perform for the cult by fund raising, recruiting more followers, and operating cult owned business or leading cult related seminars" (p. 5).

If seeking pre-cult psychotherapy or counseling is an adequate measure of psychological distress predating cult involvement, about one-third of those who have been recruited into cults have had prior psychological problems (Langone, 1995; Martin, 1989; Singer, 1995). According to Martin, this rate is only slightly above that of the general population (which is about one-fourth). However, research suggests that of the one-third of cultists who sought professional mental health services "only about five or six percent had major psychological difficulties prior to joining a cult. The remaining portion of the third had diagnosable depressions related to personal loss (for example, a death in the family, failure to be admitted to a preferred university or training program, or a broken

romance) or were struggling with age-related sexual and career dilemmas” (Singer, 1995, p. 17).

Other studies (Goldberg & Goldberg, 1982; Levine, Singer, & Maron, 1989; Maron, 1989) as well as clinical observations (Clark, Langone, Schechter, & Daly, 1981; Singer, 1986) confirm that neither family background nor other pre-existing psychological factors adequately predict cult involvement. Langone (1995) compared the psychological and family backgrounds of former Boston Church of Christ (BCC) members to those of former members of two mainstream groups, finding no significant difference between the groups.

#### Explaining the Conversion Process

Many theorists have attempted to explain the cult conversion process or some portion of it. In this context, the term conversion refers to the process an individual undergoes that results in cult membership or affiliation with the cult. Depending on the theory, it may include pre-contact factors. Some theorists focus on the unconscious needs of potential and actual members that are considered to be the reason for joining as well as for remaining in the group. Others propose that the reasons for joining and remaining in cults originate in the deliberation process of the individual concerning the group's nature and purpose. Both models assume that the locus of decision making is conscious or unconscious processes within an individual. A third group of cult conversion models emphasizes a cult's influence on the individual. These models propose that cults use a systematic program of psychological manipulation to convince people to join and remain

within the group. Among the latter, three models in particular offer insights into cult dynamics that shed light on the reason for the profound personality changes frequently witnessed by the families and friends of those who are successfully recruited into cults. Lifton's (1978, 1991) theory of ideological totalism proposed eight themes or processes, which are associated with the loss of personal critical thinking skills and meaningful informed consent, that can be observed in virtually all high-demand group settings:

Milieu Control. Milieu control isolates members from non-members by labeling the latter as ignorant, unspiritual, tools of evil forces, and in general unable to contribute anything worthwhile to those on the inside. Thus, outside information that could provide points of reference and needed perspective is rendered impotent without the use of physical constraints.

Mystical Manipulation. Mystical manipulation is employed by the leader, who claims divine appointment and authority that is used to reinterpret events as he or she sees fit, to pronounce divine judgments, and to make prophecies so as to control every thought, action, and desire of the members of the flock. This dynamic creates what Lifton (1991) termed the psychology of the pawn, a complete subordination of will to forces perceived more powerful than the follower's own and hypersensitivity toward all kinds of environmental cues in order to avoid disgrace and abandonment.

Demand for Purity. Demand for purity is fueled by a dichotomous world view that requires incessant striving for perfection. Because perfection can never realistically be

attained, guilt and shame flourish, thus becoming powerful tools of control, functioning within the individual's psyche and influencing relationships with peers and the leader.

Cult of Confession. The cult of confession is the exaggerated and unhealthy use of confession, which rather than offering solace to the confessing individual is unethically used against him or her. Because the leader is the one who sets rules and standards as well as interprets the meaning of events, relationships, and even personal desires, confession becomes a formidable tool of humiliation, coercion, and exploitation.

Sacred Science. Sacred science may be considered to be a byproduct of the doctrine's claim to the ultimate truth, which followers are led to believe is superior to all forms of knowledge and capable of incorporating and explaining it. In this way, what is considered the ultimate moral truth is also ultimate science. Thus, criticism of doctrine is not only an immoral and irreverent act but also an unscientific one.

Loading of Language. Loading of language refers to using thought-terminating clichés or jargon not understood by outsiders, to simplify complex human issues. The terminology sounds definite and highly reductive, is easily memorized and expressed, is highly judgmental, and affirms group ideology.

Doctrine over Person. Doctrine over person refers to the subordination of personal experiences to group doctrine, which translates into the need for denial or reinterpretation of the individual's feelings and experiences when they contradict whatever

is portrayed as the ultimate truth. This force can be so powerful that even historical events may be retrospectively altered, denied, or rewritten to fit doctrinal logic.

Dispensing of Existence. Dispensing of existence, generally held in a non-literal sense, is an implicit or explicit part of group doctrine that extends the right to exist to the faithful and obedient who are on the true path of existence. This can find expression in elitist terms (as in “only group membership conveys the right to exist”) and justifies unethical actions toward those not in possession of the truth. It can also act as an instrument of fear in the one who has strayed or in some way has not measured up to the group’s standards. It often serves both functions.

Although several of Singer’s (1995) conditions for thought reform may be variations of Lifton’s themes, she additionally stressed the group’s (and leader’s) intentions to control and change the individual while keeping him or her unaware of the process. Anderson (1985) further elaborated on the tactics of deception used by cults. Among them are attempts to convince newcomers of how much they are like members (even if they are not) in order to create in them a sense of identification with the group, to shroud the real purpose of the organization (if necessary, by lying), and deceptions to keep potential converts and new converts ignorant of the end result of the conversion process.

#### Personality and Psychiatric Symptomatology

Langone (1996) concluded that cult members’ personality profiles fall within the normal range. Walsh, Russell, and Wells (1995) found that although ex-cult members had

elevated scores on the neuroticism scale of the Eysenck Personality Questionnaire, their scores approached normal as a function of time since leaving the cult. Yeakley (1988) gave the Myers-Briggs Type Indicator to members of the BCC and asked them to respond to each item one time as they would have responded before their conversion, a second time as they perceived themselves at the time the study was conducted, and a third time as they imagined themselves answering after five more years of discipling. Nearly all respondents tended to change their psychological type scores across the three versions. According to Yeakley, the direction in which these changes occurred was toward the personality of the leader.

A common phenomenon among cult members, which is usually witnessed by their families and friends but not widely recognized among clinicians, is what West and Martin (1994) called pseudo-identity or altered persona. It appears to be a dissociative coping response to extraordinary circumstances such as profound changes in an individual's life, prolonged environmental stress, or both. The pseudo-identity, which is induced, strengthened, and maintained by the cult environment, becomes superimposed upon the original personality, which is suppressed while the individual remains in the new stressful environment. Although a person who is removed from the cult environment may abandon or snap out of the pseudo-identity and revert back to his or her original personality, this process does not usually happen without severe psychological problems (Conway & Siegelman, 1995). The symptoms associated with the pseudo-identity syndrome, which are usually triggered by environmental cues, are dissociative, trance-like states, depersonalization, derealization, emotional numbness, and floating, which is a "switching

back and forth between behaviors characteristic of the two separate personalities” (West & Martin, 1994, p. 274). The restoration of the original identity “usually requires treatment for the residual post-traumatic stress disorder (PTSD) which is the legacy of the stress that produced the pseudo-identity syndrome” (West & Martin, 1994, p. 279). Some additional commonly experienced aftereffects of cult involvement are: (a) depression; (b) loneliness and a sense of alienation; (c) low self-esteem and low self-confidence; (d) difficulty explaining how they could have joined such a group; (e) phobic-like constriction of social contacts; (f) fear of joining groups or making a commitment; (g) apprehension about their own idealism and altruism (which the cult had manipulated); (h) distrust of professional services and distrust of self in making good choices; (i) problems in reactivating a value system by which to live; (j) guilt, shame, and self-blaming attitudes; (k) excessive doubts, fears, and paranoia; and (l) panic attacks (Langone, 1995; Singer, 1979, 1995).

### Measuring Psychological Abuse

The preceding review discussed the types of manipulation and coercive practices in which cults engage, as well as the severe toll these may take on those who join them. Nevertheless, not all cults exercise the same level of abusiveness. If one accepts that cults use deception in the recruitment and indoctrination process (Andersen, 1985), one cannot rely on their self-portrayal or any comparisons one may draw from such self-portrayals. Additionally, comparisons with benign groups are useful, especially for educational purposes.

The Group Psychological Abuse Scale (GPA; Chambers, Langone, Dole, & Grice, 1994) is the first scientifically developed instrument designed to measure group abuse ascribed to cultic environments. The GPA is based on previous research by Dole and Dubrow-Eichel (1985), Langone's (1992) theoretical analysis of psychological abuse, and a review of the clinical literature. Chambers et al. conducted a factor analysis of 112 descriptive items to identify four distinct factors (compliance, exploitation, mind control, and anxious dependency) associated with cultic environments. Their initial study had 308 participants from 101 different groups.

Adams (1993) administered the GPA scale (which she called the cultism scale) to former members of the BCC and former members of a mainstream campus-based Christian Fellowship. Langone (1994) replicated Adams's study, adding a group of former Roman Catholics to expand the comparison. The results of both studies suggested a definite split in the scoring pattern between the former members of the controversial BCC and their mainstream comparison groups: BCC scores clearly fell into the abusive range, but none of the other groups (although different from each other) approached that range.

## BACKGROUND OF THE PRESENT STUDY

Many cults show elitism, a very strong “us-versus-them” mentality (often underlying militant activities), and much secrecy surrounding their actual practices and beliefs. For this reason, cults generally do not readily submit to scientific investigation. Church Universal and Triumphant (CUT)<sup>1</sup>, the group investigated here, may seem to be an exception to this rule, because it apparently welcomed scientific investigation in the form of an interdisciplinary study (Lewis & Melton, 1994). The study painted a picture of a benign religious movement that has been unjustly maligned and persecuted because of the public’s xenophobia. A close review of the study, however, may leave the informed reader wondering whether these investigators were familiar with the dynamics of cults and the manipulative tactics used by their leaders and well-trained devotees. Perhaps these researchers were too naive in believing what was orchestrated for them, thereby allowing themselves to be used as tools of church propaganda. In fact, after elaborating on numerous examples of groupthink (Janis, 1972), two members of the research team that conducted the study of CUT asserted that “the overriding problem was the study’s lack of objectivity, which permeated every aspect of the data collection process. For the most part, the scholars turned a blind eye to the controversies surrounding the church because

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<sup>1</sup>Information about CUT (a self-portrayal) may be found on the World-Wide Web at: <http://www.tsl.org/church.html>.

the real intent of the study was not to investigate, but to exonerate” (Balch & Langdon, 1996, p. 29). Balch and Langdon also explained that the study had been conducted hastily in the aftermath of Waco in an effort to defend CUT because it had publicly been likened to the cult in Texas. Thus, according to Balch and Langdon, the researchers saw their mission as one of defending freedom of religion rather than investigating whether any of the myths they sought to dispel were actually true.

Singer (1978) and Clark (1979) first recognized that dissociative defenses are a mechanism by which cult members (much like political captives and hostages) adapt to the intense demands of the environment in which they find themselves. As I have mentioned, the syndrome associated with this stressful adaptation has since been called pseudo-identity (West & Martin, 1994). While members are under the group’s psychological control and are not in a state of questioning or rebellion, the pseudo-identity can appear to be normal and well adjusted. However, if an event or outside influence is strong enough to fracture the pseudo-identity, which until then has enveloped the original self, the underlying pain and psychological harm become apparent. Langone (1995) insightfully remarked that the reason why cult members generally do not return to the cult after the floodgates of recognition and emotion have opened is “because the suffering they experience after leaving [the cult] is more genuine than the ‘happiness’ they experienced while in it. A painful truth is better than a pleasant lie. . . . If this analysis is correct, ex-members may indeed provide more accurate information about cults than would current members” (pp. 8-9).

Former members, however, are often reluctant to participate in scientific studies. Several factors may motivate this reluctance, such as fear of retaliation from the cult, embarrassment at having been manipulated, ridicule from those who lack understanding, and a need for closure. For this reason, the methodology of this investigation was designed with an awareness of these potential sensitivities.

### Research Questions

This study was designed to investigate four primary research questions.

#### Perceived Abusiveness and Deception.

To what extent do former members of CUT perceive the group to be psychologically abusive (as measured by the GPA Scale), and how does this current perception compare to the understanding they had at the time they first considered themselves members of the group? (If these two are different, they may provide insight into the level of deception other researchers have ascribed to cultic environments.) In addition, how do these GPA scores, obtained from a sample of former CUT members, compare with previously investigated samples of ex-members from other groups?

#### Psychological Distress.

What level of psychological distress (as measured by the revised Symptom Checklist 90 [SCL-90-R]) do former CUT members report, and what factors are correlated with these scores? Do people who experienced higher levels of psychological

distress rate the group as more abusive than those who experienced lower levels of psychological distress?

Personalities of Former CUT Members.

Do the personalities of former CUT members differ from established norms (as measured by the revised Eysenck Personality Questionnaire [EPQ-R]), and is there any indication that these scores may change over time?

Changes in Close Personal Relationships.

To what extent was the reported quality of close personal relationships, such as with one's spouse, affected by involvement in CUT? This and other information was obtained on a background questionnaire.

## METHOD

### Instruments

The present survey<sup>2</sup> used several instruments: (a) a 29-item background questionnaire, an adaptation and expansion of a form used by Langone (1995) in a study investigating the BCC; (b) two copies of the GPA Scale (Chambers et al., 1994); (c) the SCL-90-R (Derogatis, 1994); and (d) the EPQ-R (Eysenck & Eysenck, 1994).

#### Background Questionnaire

The background questionnaire asked respondents for such information as year of birth, marital status, religious background, ratings of relationships, level of involvement, and so on (see Appendix A).

#### GPA Scale

The two GPA copies were identical except for the introductory paragraphs. One copy asked respondents for their current understanding of CUT; the other requested that participants answer according to the way they would have responded when they first joined the group. To control for order effects, half of the surveys were sent out with the

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<sup>2</sup>The Chair of the Human Subjects Committee at Montana State University reviewed a research proposal describing the survey instruments and procedures. He decided that because the survey was anonymous, it did not need to be reviewed under the provisions of Section 46.101 (b)(3) of the Code of Federal Regulations Concerning the Protection of Human Subjects in Research.

post-involvement version to be filled out before the pre-involvement (retrospective) one. The other half of the surveys had the two versions stapled together in reverse order. The instructional paragraphs to both versions requested that responses reflect respondents' personal experiences and observations. The GPA Scale consists of 28 items, 7 on each of the four subscales which identify compliance, exploitation, mind control, and anxious dependency as specific dimensions of group psychological abuse. The range for the overall score is 28-140. The range for each subscale is 7-35. "Scores above the midpoint (84 for the composite; 21 for subscales) indicate that the subject is rating the group as in the abusive range" (Langone, 1994, p. 12). Previously obtained Cronbach's alpha (reliability) coefficients for the GPA ranged from .70 to .81 on the four subscales (Chambers et al., 1994).

### SCL-90-R

The SCL-90-R, a multidimensional self-report inventory widely used in psychiatric screening to measure psychological distress levels, offers four normative scoring versions for both males and females. The norms have been established for psychiatric inpatients, psychiatric outpatients, non-patient adults, and non-patient adolescents. The present study used non-patient adult norms. A total of 90 items measure the severity of symptoms on nine distinct dimensions: (a) somatization, (b) obsession-compulsion, (c) interpersonal sensitivity, (d) depression, (e) anxiety, (f) hostility, (g) phobic anxiety, (h) paranoid ideation, and (i) psychoticism. The instrument includes seven additional items which are reflected only in the three global scores: the Global Severity Index, the Positive Symptom Distress Index, and the Positive Symptom Total. Their inclusion is based on their clinical

significance. The function of the global measures is to express the level or depth of psychological distress in a single score.

Because the SCL-90-R is used to screen various non-psychiatric populations (e.g., Derogatis & Della Pietra, 1994; Derogatis & Lazarus, 1994), an operational definition of what constitutes a positive case seems appropriate and helpful. Derogatis (1994) defined caseness by an operational rule which states that the individual is considered a positive risk if the person has a Global Severity Index score on the non-patient norm greater than or equal to a standardized score of 63 (or scores 63 or above on two primary dimensions). Previously obtained Cronbach's alpha coefficients for the SCL-90-R ranged from .77 to .90 on the various symptom dimensions and from .83 to .90 for test-retest coefficients (Derogatis, Rickels, & Rock, 1976; Horowitz et al., 1988). Criterion validity studies, in particular with MMPI scales, showed high convergent validity and peak correlations on eight of the nine scales of the SCL-90 (Derogatis et al., 1976).

### EPQ-R

The EPQ-R is a self-report instrument that uses 73 items to determine the strengths of three dimensions of personality: psychoticism or "tough-mindedness," neuroticism or "emotionality," and extroversion. A fourth subscale, the lie scale, uses 21 additional items to measure dissimulation or social desirability. Norms for the American EPQ-R have been established for both males and females. They will be referred to in the Results section. Previously obtained Cronbach's alpha coefficients for the subscales range from .66 to .86 (Eysenck & Eysenck, 1994).

### Procedures

From a mailing list for a newsletter that is primarily sent to former members and some families of current members, 90 former members of CUT were identified. The survey materials were sent to all 90. In order not to violate people's trust by revealing their names and addresses, the investigator never had access to the mailing list. Instead, the newsletter's editor affixed address labels to the sealed and stamped envelopes and delivered them to the post office. Six former members who had not been aware of the newsletter heard of the study by word of mouth and requested a copy of the survey materials.

Survey recipients were asked neither for their names nor for other information that would have violated their anonymity. For the purpose of obtaining their approximate ages, they were asked to indicate the year they were born. They were informed that by completing and returning the forms, they consented to have their responses included in the study. I committed to inform them of the results of the study in a future newsletter.

### Respondents

A total of 61 individuals returned questionnaires that were useable for statistical analysis. (One questionnaire was excluded because more than 50% of the items on each instrument remained unanswered.) This represents a response rate of 63.5%. Of the 61 returned surveys, 60 included both GPA forms, 58 included the EPQ-R, and 55 included the SCL-90-R.

## RESULTS

### Background Questionnaire

A total of 35 (57.4%) of the respondents were female, and 26 (42.6%) were male. In addition, 57 (93.4%) subjects were White, 2 (3.3%) were Black, and 2 (3.3%) were of mixed ethnicity.

Respondents' religious upbringing was as follows: 31.1% Roman Catholic, 24.6% Protestant liberal, 16.4% Protestant fundamental, 9.8% CUT, 3.3% Jewish, 1.6% Mormon, and 1.6% New Age (other than CUT). An overwhelming 80.3% reported having no specific religious affiliation at the time the study was conducted, 8.2% identified themselves as being Roman Catholic, 6.6% as Protestant fundamental, and 4.9% as Protestant liberal.

The median annual household income was \$50,000. The mean number of years of education was 15, and 87% had completed at least one year of higher education.

The current age of respondents ranged from 18 to 79 years, with a mean of 45.1 ( $SD = 10.8$ ). Age at the time of joining CUT ranged from 0 (born into the group) to 58 years, with a mean of 25.7 ( $SD = 10.7$ ). Almost 60% had joined between the ages of 18 and 28.

The length of time respondents reported having spent in CUT (hereafter called time in) ranged from 1.8 to 22.2 years, with a mean of 11.4 ( $SD = 5.2$ ). The level of involvement varied widely, ranging from “Keeper of the Flame,” which may be considered the lowest level of affiliation or commitment, to attending the leader and her family as their personal staff. The length of time between exiting CUT and completing the survey (hereafter called time out) ranged from 0.6 to 20.0 years, with a mean of 7.8 ( $SD = 5.5$ ).

Four individuals (6.6%) reported that they had received outpatient counseling before their involvement with CUT. Three (4.9%) reported that they had received counseling during their involvement. A total of 21 (34.4%) reported that they received counseling after leaving the group, and 38 (62.3%) reported that they had never received any counseling. (Percentages add up to more than 100% because some individuals had received therapy during more than one of these time periods.)

Thirty-eight (62.3%) respondents were involved in a formal or informal support group or network at some time since their exit. Most comments relating to that involvement affirmed the benefits of receiving validation that come from sharing with those who understand the effects of cult involvement and the benefits of reducing their isolation.

#### Rating of Overall CUT Experience.

Thirty-five respondents (57.4%) rated the experience as very harmful, 16 (26.2%) as harmful, 4 (6.6%) as neutral, 3 (4.9%) as mildly beneficial, and another 3 (4.9%) as very beneficial. Several individuals falling into the latter two categories qualified their

responses by stating that they had learned to recognize abuse for what it was, learned that they had the right and power not to subject themselves to it any longer, or both.

#### Influence of CUT Doctrine on Difficulty of Leaving.

A total of 36 respondents (59%) reported that CUT doctrine had made it very difficult for them to leave, 8(13.1%) rated it as difficult, 3 (4.9%) as mildly difficult, 2 (3.3%) were not sure, and 12 (19.7%) reported no difficulties with respect to leaving the group.

#### Influence of Group Pressure on Difficulty of Leaving.

A total of 32 respondents (52.5%) reported that group pressure was a very difficult force to counter in their leaving process, 10 (16.4%) found it difficult, 6 (9.8%) mildly difficult, and 11 (18%) reported no group pressure related difficulty.

#### Quality of Relationships Before, During, and After CUT Involvement.

Table 1 shows the means and standard deviations for the reported quality of relationships with parents, spouse, and one other significant individual such as a friend, sibling, or other relative (referred to as other) before, during, and after CUT involvement. Respondents rated the quality of these relationships on a scale from 1 (very poor) to 5 (excellent).

Paired-sample  $t$  tests<sup>3</sup> across all categories revealed higher ratings before CUT involvement than during involvement, all  $t_s > 4.15$ ,  $p_s < .001$ . All after ratings were higher than during ratings, all  $t_s > 2.87$ ,  $p_s < .007$ . With the exception of the relationship category other, for which the ratings were significantly higher before than after CUT involvement,  $t = 8.64$ ,  $p < .001$ , all relationships were rated higher after than before, all  $t_s > 4.50$ ,  $p_s < .001$ . Thus, the quality of relationships in all categories was significantly different for each of the three time periods, with relationships consistently being worst during CUT involvement.

Table 1 -- Changes in the Quality of Relationships

	<u>Before</u>		<u>During</u>		<u>After</u>	
	<u>M</u>	<u>(SD)</u>	<u>M</u>	<u>(SD)</u>	<u>M</u>	<u>(SD)</u>
Mother	3.7	(1.2)	2.7	(1.3)	4.2	(0.9)
Father	3.6	(1.2)	2.4	(1.3)	4.1	(0.7)
Spouse	4.1	(1.0)	2.5	(1.5)	4.5	(0.9)
Other	4.5	(0.9)	2.4	(1.5)	3.7	(1.5)

#### Reported Abusiveness (GPA Scale)

##### Comparison of Retrospective Initial Perception and Post-Involvement Perception of Abuse.

Table 2 shows the means and standard deviations for the composite score and for each subscale score on both versions of the GPA, as well as the difference scores. In Table 2 and hereafter, the GPA filled out retrospectively, responding as if at the time of

<sup>3</sup>All statistical tests are two-tailed.

joining CUT, is referred to as GPA1, and the GPA responding as to current (post-involvement) status is referred to as GPA2.

Table 2 -- Scores on GPA1, GPA2, and Difference Scores

	<u>GPA1 (pre-involvement)</u>		<u>GPA2 (post-involvement)</u>		<u>Difference Score</u>	
	<u>M</u>	<u>(SD)</u>	<u>M</u>	<u>(SD)</u>	<u>M</u>	<u>(SD)</u>
Composite	62.9	(19.2)	129.4	(10.2)	66.5	(24.2)
Compliance	17.0	(6.2)	34.0	(2.0)	17.0	(6.9)
Exploitation	13.5	(5.7)	29.4	(7.6)	15.9	(10.1)
Mind Control	12.7	(4.6)	34.3	(1.6)	21.6	(5.1)
Anxious Dependency	19.7	(5.7)	31.7	(2.6)	12.0	(6.7)

Paired-sample  $t$  tests revealed that reported abusiveness was greater on the GPA2 than on the GPA1: For the composite score,  $t(59) = 21.3$ ,  $p < .001$ ; the Compliance subscale,  $t(59) = 19.1$ ,  $p < .001$ ; Exploitation subscale,  $t(59) = 12.2$ ,  $p < .001$ ; Mind Control subscale,  $t(59) = 32.8$ ,  $p < .001$ ; and Anxious Dependency subscale,  $t(59) = 13.9$ ,  $p < .001$ . Alpha coefficients for GPA1 and GPA2, respectively, on each subscale were as follows: .78 and .82 for Compliance, .61 and .63 for Exploitation, .81 and .78 for Mind Control, and .69 and .63 for Anxious Dependency. The alpha coefficients for the composite score were .90 and .84.

#### Comparison of GPA Ratings for CUT and BCC.

With only means and standard deviations of previous studies available for statistical analysis, a comparison of the GPA2 (post-involvement) ratings of former CUT members with those of former BCC members was conducted using one-sample  $t$  tests for

the composite mean and each of the subscale means. The test values (means assumed according to the null hypothesis) for these  $t$  tests were those from Langone's (1995) investigation of the BCC. Because Langone published the means from two separate samples of BCC ex-members, I decided to use the higher values so as to make the comparison a conservative one. GPA2 means were higher than the corresponding BCC means on the GPA2 Composite,  $t(60) = 16.0$ ,  $p < .001$ , BCC mean = 108.5; on the GPA2 Compliance subscale,  $t(60) = 8.2$ ,  $p < .001$ , BCC mean = 31.9; on the Exploitation subscale,  $t(60) = 7.7$ ,  $p < .001$ , BCC mean = 21.8; on the Mind Control subscale,  $t(60) = 19.8$ ,  $p < .001$ , BCC mean = 30.4; and on the Anxious Dependency subscale,  $t(60) = 22.0$ ,  $p < .001$ , BCC mean = 24.4. A comparison with other groups investigated by Langone was unnecessary, because their mean scores were significantly lower than those for BCC. A comparison using the means of the original GPA study (Chambers et al., 1994) was also significant for each subscale rating and the composite rating, all  $t$ s  $> 6.48$ ,  $p$ s  $< .001$ .

Evidence of discriminant validity for the GPA scale comes from the nonsignificant correlations between the lie scale of the EPQ-R and GPA1 and GPA2 Composite scores, both  $p$ s  $> .05$ .

#### Psychiatric Symptomatology of Ex-CUT Members (SCL-90-R)

Using Derogatis's (1994) definition of caseness or positive risk, 27 (49.1%) of the respondents met the criterion. To gain an understanding of the breadth of elevated scales in addition to their overall severity (as indicated by the Global Severity Index), I created a variable called number of high scores to represent the number of SCL-90-R subscales on

which an individual scored a standardized value of 63 or above. Numerical values for this variable ranged from 0-9 (9 subscales). The number of high scores was positively correlated with time in CUT,  $r = .39$ ,  $p = .003$ , and was negatively correlated with time out,  $r = -.53$ ,  $p < .001$ . The number of high scores was not significantly correlated with quality of the relationship with one's spouse before CUT involvement,  $r = -.19$ ,  $p = .41$ ; however, the correlation was significant for the during time-frame,  $r = -.39$ ,  $p = .023$ , and for the after time-frame,  $r = -.56$ ,  $p < .001$ . No other relationship category was significantly correlated with the number of high scores.

A multiple regression model was constructed to predict the number of high scores on the SCL-90-R. An initial stepwise multiple regression revealed that both time out and the quality of the respondent's relationship with his or her spouse after CUT involvement were significant predictor variables,  $p = .005$  and  $.011$ , respectively. Neither time in CUT nor the relationship with spouse during involvement with CUT entered into the model,  $p = .49$  and  $.22$ , respectively. Next, each other variable was combined with time out, using a simultaneous entry procedure, in order to determine whether any would increase the proportion of variance explained ( $R^2$ ). Again, only the quality of the relationship with one's spouse after CUT and time out were significant predictors of number of high scores. The overall  $R^2 = .45$  was significant,  $F(2, 40) = 14.67$ ,  $p < .001$ . In this model, the standardized regression coefficients ( $\beta$ s) were  $-.40$  for relationship with spouse after CUT and  $-.39$  for time out of CUT.

The Global Severity Index of the SCL-90-R was negatively correlated with time out,  $r = -.51$ ,  $p < .001$ , and with relationship with spouse during,  $r = -.38$ ,  $p = .023$ , and

after CUT involvement,  $r = -.48$ ,  $p < .001$ . There was no significant relationship between group abusiveness ratings and psychological distress, whether measured by the number of high scores,  $r = -.03$ ,  $p = .82$ , or by the Global Severity Index,  $r = -.16$ ,  $p = .24$ . There also was no significant relationship between the GPA Scale difference scores (reflecting the extent to which perceptions had changed) and psychological distress, whether measured by the number of high scores,  $r = .09$ ,  $p = .52$ , or by the Global Severity Index,  $r = .05$ ,  $p = .72$ .

When the Global Severity Index of the SCL-90-R was used as the dependent variable in a multiple stepwise regression model, time out and quality of the relationship with spouse during CUT were significant predictors,  $p < .001$  and  $p = .017$ , respectively. Neither time in CUT nor the relationship with one's spouse after CUT entered into the model,  $p = .44$  and  $.36$ , respectively. The overall  $R^2 = .46$  was significant,  $F(2, 40) = 13.49$ ,  $p < .001$ . In this model, the standardized regression coefficients ( $\beta$ s) were  $-.55$  for time out of CUT and  $-.33$  for relationship with spouse during CUT.

Cronbach's alpha coefficients for the nine subscales of the SCL-90-R were .85 for Somatization (12 items), .86 for Obsessive-Compulsive (10 items), .91 for Interpersonal Sensitivity (9 items), .95 for Depression (13 items), .88 for Anxiety (10 items), .89 for Hostility (6 items), .82 for Phobic Anxiety (7 items), .75 for Paranoid Ideation (6 items), and .75 for Psychoticism (10 items). The alpha coefficient for the entire instrument (all 90 items) was .97.

### Comparison of Ex-Members' Personalities with Established Norms (EPQ-R)

One-sample  $t$  tests were used to compare the scores of ex-CUT-members with established norms on all four subscales of the EPQ-R (as provided in the manual for the instrument; Eysenck & Eysenck, 1994). There was no significant difference between male or female ex-CUT members and the normative data on the psychoticism scale,  $t = .38$ ,  $p = .71$  (males) and  $t = .06$ ,  $p = .96$  (females), or on the neuroticism scale,  $t = 1.10$ ,  $p = .28$  (males) and  $t = 1.76$ ,  $p = .09$  (females). Scores on the extroversion scale, however, were significantly lower than the norm for females,  $t(32) = 2.83$ ,  $p = .008$ , and marginally lower for males,  $t(24) = 2.05$ ,  $p = .052$ . On the lie scale there was no significant difference for females,  $t = 1.12$ ,  $p = .91$ . For males, the difference was significant,  $t = 2.34$ ,  $p = .03$ : Male respondents exhibited less dissimulation than the established norm.

For present purposes, I treated the 95% confidence interval around the normative subscale means for the EPQ-R (Eysenck & Eysenck, 1994) as the range of scores that would be considered normal. If this sample as a whole falls within the normal range, on each subscale no more than three individuals (5%) should have scores outside this range. On the psychoticism scale, only one male and one female scored above the normal range. On the neuroticism scale, one male scored above the normal range. On the lie scale, one male scored above the normal range. On the extroversion scale, three males and seven females scored below the normal range, which collectively represent 17% of the sample. Thus, more than the expected 5% of individuals scored outside the normal range. In particular, these ten individual's scores all revealed abnormal introversion.

The correlation between extroversion and time out was positive,  $r = .31$ ,  $p = .019$ . Neuroticism and time out were negatively correlated,  $r = -.55$ ,  $p < .001$ . The correlation between neuroticism and extroversion was also negative,  $r = -.62$ ,  $p < .001$ . Extroversion was positively correlated with dissimulation,  $r = -.33$ ,  $p < .016$ . Alpha coefficients for the four subscales of the EPQ-R were .67 on the psychoticism scale (27 items), .88 on the extroversion scale (22 items), .89 on the neuroticism scale (24 items), and .81 on the lie scale (21 items).

Correlations between measures of psychological distress and dissimulation were negative. The correlation between the Global Severity Index and the lie scale was  $r = -.41$ ,  $p = .002$ ; the correlation between the number of high scores and the lie scale was  $r = -.35$ ,  $p = .009$ .

## DISCUSSION

This study investigated a sample (former members of CUT) not examined by previous research. It used the first, and as yet only, objective measure designed to assess the level of group abusiveness, the GPA Scale (Chambers et al., 1994). A novel use of the instrument made it possible to measure reported discrepancies between initial and post-involvement perceptions of abusiveness, thereby assessing the extent to which individuals' interpretation of events may have changed or to what extent misrepresentation on the part of the group may have influenced their perceptions. Although the study used no comparison groups--a design feature that may be regarded as a weakness--whenever it was appropriate and possible, I made use of established normative values and comparative data from previous research to evaluate the findings.

### Summary and Interpretation of Findings

The present findings clarify the major four research questions posed earlier.

#### Perceived Abusiveness and Deception.

No previous study using the GPA scale has found mean values for the composite score and each subscale score that were as high as those found here. Indeed, the difference between the overall GPA means for another allegedly cultic group, the BCC (Langone, 1995), and the present CUT sample exceeded two standard deviations. The

overall GPA mean in the initial study (110.7), which surveyed 308 former members of 101 different cults, was only 2.2 points higher than the mean score of the BCC sample (Langone, 1995). The present findings suggest that among groups perceived as abusive by their former members, CUT is at the high end of reported abusiveness. If sampling bias is taken into account (see later) and one assumes that the mean score of former members who do not subscribe to the newsletter were two standard deviations below that of subscribers, the GPA means for ex-CUT members would still be similar to the GPA mean obtained from former members of other allegedly cultic groups.

A comparison of retrospective GPA scores reflecting ex-members' recollections of their perceptions at the time they first joined the group with their post-involvement perceptions revealed profound differences (see Table 1). Several studies have investigated retrospection biases (Marcus, 1986; for a review, see Dawes, 1988). These studies argue that recollections of past beliefs are biased toward current beliefs. The large discrepancies between retrospective perceptions and current perceptions of former CUT members suggest that any such bias did not eliminate the differences found here. The perceptions that these ex-members remember having had at the time they joined CUT match the image CUT tries to portray, which is clearly a non-abusive one. Respondents' current perceptions reflect a highly abusive environment. If a retrospection bias toward current views operated in this study, one would conclude that the retrospective scores were conservative. In other words, if I had been able to measure abusiveness while respondents were actually joining CUT, the reported abusiveness might have been even lower. Other studies suggest that peoples' investment (e.g., in time, money, or emotion) in something

biases them to exaggerate the differences between pre- and post-involvement if there is an unconscious desire to justify the investment by viewing the change as a positive one. In the present study, the change in perception was not positive. Thus, given the conditions and findings of this particular study, neither of these conclusions seem to offer an adequate explanation. If false recollections are not a likely cause of the discrepancies between the two sets of scores, it is reasonable to assume that CUT misrepresents itself and deceives its prospective and current members. Support for this interpretation comes from the finding that the greatest discrepancy between pre- and post-involvement was on the Mind Control subscale, the next greatest on the Compliance subscale. These two subscales also revealed the highest post-involvement means, 34.33 for Mind Control and 33.98 for Compliance, where the highest possible score on each subscale is 35.

Another possible interpretation for the discrepancies between GPA1 and GPA2 is that individuals changed their interpretation of reality when they first came in contact with CUT and then again when they left the group. I propose that while a person is still in a cultic group and prescribes to the group's interpretation of reality, he or she may not perceive abusive actions or attitudes as abusive. Instead, abuse may be interpreted as the individual's need to atone for past transgressions or deserved chastisement for human imperfections. In CUT terms this may be referred to as the individual's karma, a kind of cosmic law of return for past deeds. CUT teaches reincarnation, thus, "bad karma" may stem from past deeds of a previous or several previous embodiments. This allows the leader to interpret current events, including being abused, by attributing them to a past of which the follower may have no knowledge and which may be impossible to verify.

Additionally, if one prescribes to the belief that "God chastises those most whom he (or she) loves most," abuse may even be interpreted as a privilege of "the chosen." A belief that a follower's devotion or unquestioning commitment must be tested so that his or her spiritual attainment may be assessed also provides a formidable tool to change the meaning of events. These descriptions are all examples of Lifton's theme of mystical manipulation, outlined in the introduction. Interestingly, CUT refers to itself as a "mystery school." Clinicians who are familiar with issues of domestic abuse may find interesting parallels between what is referred to as mystical manipulation in a cult context and the mind games with which victims of domestic abuse are manipulated.

I think that the high discrepancies between GPA1 and GPA2 are attributable to individuals' changes in the interpretation of events that took place during the conversion process, throughout involvement, and also since exiting CUT, as well as misrepresentations on the part of CUT. These two explanations may be two sides of the same coin. To an outsider, a reinterpretation of reality may appear to be deception, but to the new recruit and long-term follower it is a "higher form of knowledge" which they enthusiastically help to impart to the novice and reinforce in each other. Former members who have shed the pseudo-identity (West & Martin, 1994), which I referred to in the introduction, are not merely outsiders. Their personal experiences would probably cause them to view the former interpretation of their realities as involving deception, as well as abuse. In other words, to outsiders without personal experience, mystical manipulation may be unfortunate misguidance, even deception. However, to former members, who had

lived their lives based on realities prescribed to them, deception, or even betrayal, may be more adequate descriptors of their experiences.

The evidence of discriminant validity with respect to the GPA scores lends strength to the credibility of the findings. There was no relationship between the extent to which respondents' ratings reflected group abusiveness (both current and retrospective perceptions) and the extent to which they portrayed themselves in a socially desirable light. Additionally, the sample's low to average scores on the lie, or social desirability, scale suggest that responses were probably not influenced by motives to misrepresent the abusiveness.

#### Psychological Distress.

The present findings suggest that a large percentage of ex-CUT members (almost 50% of the respondents) reported experiencing such high levels of psychological distress as to be categorized as positive risks (Derogatis, 1994). However, only 6.6% of the respondents had received psychotherapy or counseling prior to their involvement in CUT. This low percentage may be due partly to the relatively young age at which many of them joined (57.4% joined before the age of 25 and 72.1% before the age of 30).

Although the percentage of ex-members experiencing such high levels of psychological distress to qualify as a psychiatric risk is large, as time away from CUT increased, distress levels decreased. Indeed, time out of CUT explained a significant proportion of the variability in both regression models (one using Global Severity Index scores as dependent variable, the other using the number of subscales on which an individual had scored 63 or above). Two additional variables that had significant

predictive value in one or the other of the two regression models were the quality of spousal relationship during and after CUT involvement. Individuals who reported a higher quality of relationship with their spouse after exiting CUT reported lower levels of psychological distress than those who had poor spousal relationships. The same is true for the quality of spousal relationship during CUT involvement. This is not surprising if one considers that a relationship which can be maintained at a high qualitative level while the spouses undergo high levels of environmental stress would be a source of strength for the partners. This would then reduce the overall stressfulness of the experience and the psychological harm inflicted. Although time in CUT was excluded from the multiple regression model, it was positively correlated with psychological distress. This suggests that there is a positive relationship between the time an individual has spent in CUT and the psychological problems experienced later.

Most theorists think that people who are in pain (psychologically or otherwise) try to attribute that pain to an outside source which then leads to an unfair negative evaluation of that source. But what if those not in pain share the negative evaluations? Almost 50% of the present respondents met the criteria for being a positive risk. Some reported high levels of psychological distress, but others were virtually symptom-free. The lowest individual post-involvement GPA rating given to CUT in this study, however, was 109. According to Langone (1995), ratings suggestive of non-abusiveness range from 28 to 84. Moreover, there was no relationship between the reported level of psychological distress and respondents' perceptions of group abusiveness.

Interestingly, there was a negative relationship between reported psychological distress and the extent to which respondents portrayed themselves in a socially desirable light. In other words, compared to those who reported lower levels of psychological distress, those who reported higher levels were less inclined to answer according to what is considered socially desirable. This suggests that psychological distress may have been underreported by respondents who scored relatively high on the lie scale, perhaps because they did not want to be seen as having problems.

#### Personalities of Former CUT Members.

The present data suggest that former members of CUT do not differ from the norm on the psychoticism and neuroticism dimensions. Females did not differ from the norm in their desire to be socially acceptable (as measured by the lie scale of the EPQ-R), but males appeared to be less concerned with their social desirability than one would expect of males in the general population. This may be a reaction to the manipulation they experienced during their involvement in CUT. If these scores are, however, representative of a condition present before cult involvement, they may reflect a stronger than average desire for honest self-evaluation. This desire, in turn, may have contributed to the vulnerability of these individuals to be manipulated. Honest people often assume this quality in others. If either or both of these proposed explanations are valid, it is unclear why females in this sample did not differ from the norm. Is it possible that females in general feel more pressure in this society to represent themselves in a more socially desirable light?

Extroversion was the only personality dimension on which both males and females differed from the norm, although the discrepancy was slightly greater for females than males. If one takes into account the intense alienation from the outside world former cultists experienced during their involvement and the fact that many, upon their exit, think they were betrayed by the thought reform program to which they were subjected, it makes sense that they became more introverted. The significant positive correlation between extroversion and years out of CUT suggests that with increased time away from the cult environment, extroversion scores approach the norm.

Although the sample's neuroticism scores did not significantly differ from established norms, there was a significant negative correlation between neuroticism and time out: Respondents who left longer ago scored lower on neuroticism.

#### Changes in Close Personal Relationships.

The ratings respondents gave to the quality of their close relationships reveal a clear pattern across all relationship categories: The rated quality of relationships was consistently low during CUT involvement. A comparison of before and after ratings showed higher ratings for post-CUT relationship qualities, except for the category other. Based on additional comments that respondents made on the survey, it appears that some individuals had rated their relationships with friends who had joined the group with them or someone they had met during their involvement. In either case, these relationships may, as a result of their exit, be strained at best and non-existent at worst. This may be the reason why the post-involvement mean for the other category is lower than the pre-involvement mean.

Several respondents commented that their divorces were related to their cult involvement. Some indicated that they were completely cut-off from their former spouse and thus did not give a post-involvement rating for the spouse category. Others who remarried since their exit rated their current marriage. Thus, the high mean for post-cult ratings of spousal relationships appears to be partly attributable to post-CUT marriages. Unfortunately, I did not ask respondents to indicate the year they divorced. This prevented an exact determination of how many marriage dissolutions were strongly influenced by CUT involvement, which marriages dissolved prior to CUT involvement, and which dissolved considerably later.

Respondents' ratings of the quality of their relationship with a spouse after CUT involvement probably reflect the relationship with the individual's current spouse (whether or not the individual refers to the same spouse in each time period). As far as having used the variable as a predictor for one of the regression models, when the marriage was entered into seems less of an issue than whether or not a good relationship with one's spouse after cult involvement is likely to contribute to a decrease in psychological distress.

#### Limitations, Unanswered Questions, and Suggestions for Future Research

One weakness of the present study was the sample itself, because the majority of the respondents were recipients of the newsletter primarily sent to former CUT members. In this newsletter, grievances about the group and its leadership are freely expressed. Additionally, each issue of the newsletter includes a list of recommended publications about CUT as well as more general cult educational materials. Thus, the sample's

representativeness of ex-members may be questioned. Sixty-one individuals represent a small proportion of the hundreds who have left CUT during the 29 years since it was founded. The majority of those who participated in the study had been exposed to the newsletter's anti-CUT and anti-cult stance. Although this is a legitimate concern, a lack of understanding about cult-related issues does not necessarily mean that people's perceptions are more valid. Put differently, is more information and education--which is generally regarded as an advantage in discovering the truth--not a more desirable quality in respondents? The present sample offered just that. Additionally, one cannot assume that former members who may not be aware of the newsletter or fear being on its mailing list would perceive the group as any less abusive. Representativeness with regard to the level of past group involvement and commitment to the group, as well as the time spent in the group, was remarkably good.

As with most surveys, it is impossible to ascertain what distinguishes respondents from non-respondents. Are non-respondents likely to be more or less distressed than those who participated in the study? Do they hold more or less favorable views of CUT? These questions remain unanswered.

Nevertheless, this study answers a number of questions about CUT and its former members, while also contributing to the larger body of research on cults and their impact on the lives of those who were once affiliated with them. Considering the large number of cults that are currently active, similar studies investigating other groups are needed. The present study illustrates a useful way to obtain such important evidence on impacts of cults.

Research that focuses on children who have left cults is virtually nonexistent. The development of instruments and methodologies that permit such investigation without causing additional harm should be among the goals for future work in this field.

REFERENCES CITED

Adams, D. (1993). The Cincinnati Church of Christ: How former members rate the group on a cultism scale. Unpublished master's thesis, Xavier University, Cincinnati, Ohio.

Andersen, S. (1985). Identifying coercion and deception in social systems. In B. Kilbourne (Ed.), Scientific research and new religions: Divergent perspectives. San Francisco: American Association for the Advancement of Science.

Balch, R. W., & Langdon, S. (1996). How not to discover malfeasance in new religions: An examination of the AWARE study of the Church Universal and Triumphant. Unpublished manuscript, Department of Sociology, University of Montana.

Chambers, W., Langone, M. D., Dole, A., & Grice, J. (1994). The group psychological abuse scale: A measure of the variety of cultic abuse. Cultic Studies Journal, 11, 88-117.

Clark, J. G. (1979). Cults. Journal of the American Medical Association, 242, 179-181.

Clark, J. G., Langone, M. D., Schechter, R. E., & Daly, R. C. (1981). Destructive cult conversion: Theory, research, and treatment. Weston, MA: American Family Foundation.

Conway, F., & Siegelman, J. (1995). Snapping: America's epidemic of sudden personality change. New York: Stillpoint Press.

Dawes, R. M. (1988). Rational choice in an uncertain world. San Diego: Harcourt Brace Jovanovich.

Derogatis, L. R. (1994). SCL-90-R: Administration, Scoring, and Procedures Manual. Minneapolis, MN: National Computer Systems.

Derogatis, L. R., & DellaPietra, L. (1994). Psychological tests in screening for psychiatric disorder. In M. Maruish (Ed.), The use of psychological testing for treatment planning and outcome assessment. (pp. 22-54). Hillsdale, NJ: Erlbaum.

Derogatis, L. R., & Lazarus, L. (1994). SCL-90-R, Brief Symptom Inventory, and matching clinical rating scales. In M. Maruish (Ed.), The use of psychological testing for treatment planning and outcome assessment (pp. 217-248). Hillsdale, NJ: Erlbaum.

Derogatis, L. R., Rickels, K., & Rock, A. (1976). The SCL-90 and the MMPI: A step in the validation of a new self-report scale. British Journal of Psychiatry, *128*, 280-289.

Dole, A. & Dubrow-Eichel, S. (1985). Some new religions are dangerous. Cultic Studies Journal, *2*, 17-30.

Eysenck, H. J., & Eysenck, S. B. G. (1994). Manual of the Eysenck Personality Questionnaire. San Diego, CA: EdiTS.

Goldberg, L., & Goldberg, W. (1982). Group work with former cultists. Social Work, *27*, 165-170.

Group for the Advancement of Psychiatry. (1992). Leaders and followers: A psychiatric perspective on religious cults. Washington, DC: Committee on Psychiatry and Religion, Group for the Advancement of Psychiatry.

Horowitz, L. M., Rosenberg, S. E., Baer, R. A., Ureno, G., & Villasenor, V. S. (1988). Inventory of interpersonal problems: Psychometric properties and clinical applications. Journal of Consulting and Clinical Psychology, *56*, 885-892.

Horowitz, M. J., Wilner, N., & Alvarez, W. (1979). Impact of event scale: A measure of subjective stress. Psychological Medicine, *41*, 209-218.

Janis, I. L. (1972). Victims of groupthink. Boston: Houghton Mifflin.

Lalich, J. (1997). Dominance and submission: the psychosexual exploitation of women in cults. Cultic Studies Journal, *14*, 4-21.

Langone, M. D. (1992). Psychological abuse. Cultic Studies Journal, *9*, 206-218.

Langone, M. D. (1993). Introduction. In M. D. Langone (Ed.), Recovery from cults: Help for victims of psychological and spiritual abuse (pp. 1-21). New York: W. W. Norton.

Langone, M. D. (1995). An investigation of a reputedly psychologically abusive group that targets college students (Tech. Rep.). Boston: Boston University, Danielson Institute.

Langone, M. D. (1996). Clinical update on cults. Psychiatric Times, *7*, 14-18.

Lewis, J. R., & Melton, J. G. (Eds.). (1994). Church Universal and Triumphant in scholarly perspective [Special issue]. Syzygy: Journal of Alternative Religion and Culture.

- Lifton, R. J. (1987). The future of immorality and other essays for a nuclear age. New York: Basic Books.
- Lifton, R. J. (1991). Cult formation. Harvard Mental Health Letter, 7.
- Marcus, G. B. (1986). Stability and change in political attitudes: Observe, recall, and "explain." Political Behavior, 8, 21-22.
- Maron, N. (1989). Family environment as a factor in vulnerability to cult involvement. Cultic Studies Journal, 5, 23-43.
- Martin, P. R. (1989). Dispelling the myths: The psychological consequences of cultic involvement. Christian Research Journal, 11, 9-14.
- Martin, P. R. (1996). Cults and health. Wellspring Messenger, 7, 3.
- Morris, W. (Ed., 1982). The American Heritage Dictionary of the English Language, New College Edition. Boston: Houghton Mifflin.
- Schwartz, L. L., & Kaslow, F. W. (1979). Religious cults, the individual and the family. Journal of Marital and Family Therapy, 5, 15-26.
- Singer, M. T. (1978). Therapy with ex-cult members. Journal of the National Association of Private Psychiatric Hospitals, 9, 15-18.
- Singer, M. T. (1979, January). Coming out of the cults. Psychology Today, 72-82.
- Singer, M. T. (1986). Consultation with families of cultists. In L. I. Wynne, S. H. McDavid, & T. T. Weber (Eds.), The family therapist as systems consultant. New York: Guilford Press.
- Singer, M. T. (1995). Cults in our midst. San Francisco: Jossey-Bass.
- Spero, M. H. (1982). Psychotherapeutic procedures with religious cult devotees. The Journal of Nervous and Mental Disease, 170, 332-344.
- Walsh, Y., Russel, R. & Wells, P. (1995). The personality of ex-cult members. Personality and Individual Differences, 19, 339-344.
- West, L. J., & Martin, P. R. (1994). Pseudo-identity and the treatment of personality change in victims of cults. In S. J. H. Lynn & J. Rhue (Eds.); Dissociation: Clinical and theoretical perspectives (pp. 268-280). New York: Guilford.
- Yeakley, F. (Ed.). (1988). The disciplining dilemma. Nashville, TN: Gospel Advocate.

APPENDIX

BACKGROUND QUESTIONNAIRE

**QUESTIONNAIRE NUMBER 1**

**Please write directly on this form.**

**Background Information**

The following questions collect general information about your background and certain specific types of information relevant to the objectives of this research study.

1. Today's date .
2. Year you were born
3. What is your marital status?
  - a. Single, never been married
  - b. Married
  - c. Separated
  - d. Divorced
  - e. Divorced and remarried
  - f. Widow/widower
4. Please list the years in which your children were born (leave blank if you have no children)
5. What is your race or ethnic background?
  - a. White
  - b. Black
  - c. Hispanic
  - d. Asian
  - e. Native American
  - f. East Indian
  - g. Middle Eastern
  - h. Other

6. In what religion were you raised?

- a. Protestant (Fundamental)
- b. Protestant (Liberal)
- c. Roman Catholic
- d. Jewish
- e. Islamic
- f. Eastern
- g. Other
- h. None

7. What, if any, is your current religious affiliation?

- a. Protestant (Fundamental)
- b. Protestant (Liberal)
- c. Roman Catholic
- d. Jewish
- e. Islamic
- f. Eastern
- g. Other
- h. None

8. How many years of education have you completed? (8 = grade school education completed, 12 = high school education completed, add 1 for each full year of higher education completed)

9. Please check all degrees you have earned:

- a. Associate degree
- b. Bachelors degree
- c. Masters degree
- d. Ph.D.
- e. Other professional degree
- f. No professional degrees earned

10. Please indicate your annual household gross income

\$ \_\_\_\_\_

11. In what month and year (approximately) did you become a member of C.U.T.?  
(Use your birth date if you were born into the group or baptized at a very early age.)

Month \_\_\_\_\_ Year \_\_\_\_\_

12. In what month and year (approximately) did you leave or stop considering yourself a member of C.U.T.?

13. How did you leave C.U.T.?

- \_\_\_\_\_ a. Walked away (or simply stopped considering yourself a member)  
 \_\_\_\_\_ b. The group forced you out or asked you to leave  
 \_\_\_\_\_ c. You were exit counseled (see note below \*)  
 \_\_\_\_\_ d. You were deprogrammed (see note below \*)  
 \_\_\_\_\_ e. Other (please specify)

\* In exit counseling the individual is free to leave if he/she wants. Deprogramming is typically associated with some kind of physical restraint.

14. Please indicate on a scale of 1 to 5 the degree to which you were a leader in your group.

(Follower role)      1      2      3      4      5      (Leadership role)

15. Please indicate on a scale of 1 to 5 how clearly defined your role in the group was.

(Not clearly defined)    1      2      3      4      5      (Clearly defined)

16. Please check if you have received any of the following kinds of help: (please check all that apply)

- 16.1 \_\_\_\_\_ Outpatient counseling - BEFORE joining group  
 16.2 \_\_\_\_\_ Outpatient counseling - DURING your time in the group  
 16.3 \_\_\_\_\_ Outpatient counseling - AFTER leaving group  
 16.4 \_\_\_\_\_ Psychiatric hospitalization - BEFORE joining group  
 16.5 \_\_\_\_\_ Psychiatric hospitalization - DURING your time in the group  
 16.6 \_\_\_\_\_ Psychiatric hospitalization - AFTER leaving group

17. If yes to any item in 16.1 to 16.6, please circle your check mark if your helpers were sufficiently effective in helping you that you would recommend them to someone else. (17.1 - 17.6)

18. Indicate the quality (on a scale of 1 to 5) of your relationship with your mother

BEFORE you were in the group (check N/A if not applicable).

(poor)            1            2            3            4            5            (excellent)        \_\_\_\_\_ N/A

19. Indicate the quality (on a scale of 1 to 5) of your relationship with your father BEFORE you were in the group (check N/A if not applicable).

(poor)            1            2            3            4            5            (excellent)        \_\_\_\_\_ N/A

20. Indicate the quality (on a scale of 1 to 5) of your relationship with your spouse BEFORE you were in the group (check N/A if not applicable).

(poor)            1            2            3            4            5            (excellent)        \_\_\_\_\_ N/A

21. Indicate the quality (on a scale of 1 to 5) of your relationship with your mother WHILE you were in the group (check N/A if not applicable).

(poor)            1            2            3            4            5            (excellent)        \_\_\_\_\_ N/A

22. Indicate the quality (on a scale of 1 to 5) of your relationship with your father WHILE you were in the group (check N/A if not applicable).

(poor)            1            2            3            4            5            (excellent)        \_\_\_\_\_ N/A

23. Indicate the quality (on a scale of 1 to 5) of your relationship with your spouse WHILE you were in the group (check N/A if not applicable).

(poor)            1            2            3            4            5            (excellent)        \_\_\_\_\_ N/A

24. Indicate the quality (on a scale of 1 to 5) of your relationship with your mother CURRENTLY (check N/A if not applicable).

(poor)            1            2            3            4            5            (excellent)        \_\_\_\_\_ N/A

25. Indicate the quality (on a scale of 1 to 5) of your relationship with your father CURRENTLY (check N/A if not applicable).

(poor)            1            2            3            4            5            (excellent)        \_\_\_\_\_ N/A

26. Indicate the quality (on a scale of 1 to 5) of your relationship with your spouse CURRENTLY (check N/A if not applicable).

(poor)      1      2      3      4      5      (excellent)      \_\_\_\_\_ N/A

27. Overall, how beneficial/harmful was the group experience for you?

- \_\_\_\_\_ a. Very beneficial
- \_\_\_\_\_ b. Beneficial
- \_\_\_\_\_ c. Neutral
- \_\_\_\_\_ d. Harmful
- \_\_\_\_\_ e. Very harmful

28. To what extent did group pressures make it difficult for you to leave?

- \_\_\_\_\_ a. Very difficult
- \_\_\_\_\_ b. Difficult
- \_\_\_\_\_ c. Not sure
- \_\_\_\_\_ d. Mildly difficult
- \_\_\_\_\_ e. No difficulty

29. To what extent did your belief in Church doctrine make it difficult for you to leave?

- \_\_\_\_\_ a. Very difficult
- \_\_\_\_\_ b. Difficult
- \_\_\_\_\_ c. Not sure
- \_\_\_\_\_ d. Mildly difficult
- \_\_\_\_\_ e. No difficulty

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