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PSYCHOLOGY AND THE CHURCH (Part Three): Can Psychotherapy Be Integrated with Christianity?

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Summary

An examination of the foundations of psychotherapy raises concerns about whether Christianity can be compatible with a system based on naturalistic, nontheistic, secular humanism. While most psychotherapeutic techniques are rooted in one of three main categories of psychotherapy, most psychotherapists are eclectic, using anything that appears to work — regardless of the techniques' compatibility with their primary psychotherapeutic philosophy. This allows for Christians to reject techniques incompatible with a Christian world view and to use techniques they can reconcile to a Christian world view, but it does not promote a unified, coherent philosophy of therapy. Studies show that, at best, psychotherapy is "moderately" helpful, and that most people get better without any professional counseling at all. For Christian "therapy" (counseling) to be truly helpful and biblically based, it must start from the firm biblical foundation of a Christian world view, with each technique part of a coherent biblical paradigm.

Like a carnival sideshow lane, the garish booths stretched almost as far as we could see under the harsh arena lights. Neuro-linguistic programming, dance therapy, past-life regression, hypnotically enhanced eating disorder programs, Horneyan therapy, multiple impact therapy, multiple personality disorder therapies, and multiple multiples of other therapies all clamored for attention as we strolled the national professional psychotherapy convention. We'd come to indulge our own proclivity for academic research reports and scholarly philosophizing, but we also came to some interesting and sometimes surprising conclusions.

First, almost everyone we talked to had a genuine concern for people with problems and an earnest desire to devote their lives to helping others. Second, there were more therapies, theories, and techniques than there were therapists. Third, the practicing therapists approached their "science" very differently than did their academic and research counterparts, basing many of their convictions on subjective experience rather than rigorous testing or critical evaluation. Fourth, while the range of therapies and therapists touched almost every conceivable extreme, some therapies and therapists reflected well-reasoned, carefully explored, comprehensive theories of personal dynamics. Fifth (most surprising to us), we discovered that even most of the Christian therapists and therapies focused more on a collection of practices and theories isolated from a comprehensive world view than on that world view. And sixth, we learned firsthand that anyone who pronounces a universal blessing or a universal condemnation on psychotherapy has failed to understand its complexity and diversity.

Unless we define terms adequately, understand the history and foundations of psychotherapy, and carefully evaluate its theories and assumptions, misrepresentation is almost certain. The present article cannot address this vast subject comprehensively, but it will illuminate some of the broad patterns of contemporary psychology, highlight some of the foundational concerns Christians should have concerning psychotherapy, and view some of the ways Christian therapists have attempted to relate contemporary psychotherapy with a biblical world view. Many secular

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psychologists have strong criticisms of various aspects of contemporary psychology,¹ but since this series is narrowly focused on psychology and the church, we will limit our citations primarily to Christian authors.²

PSYCHOLOGY AND PSYCHOTHERAPY

Because psychotherapy is much more visible and directly touches many more lives than do other aspects of psychology (such as educational testing), for many people "psychology" is equivalent to "psychotherapy." The word psychology derives from two Greek terms meaning "the study of persons." Some argue that since the Greek root from which we get psych means "spirit" or "soul," psychology is religious in nature and involves the study of the spirit or soul. However, one must realize that because of the evolving nature of language, word origin or etymology does not necessarily point to what the word means in contemporary usage. Those who use the term psychology today do not generally mean to make any religious statements about the human spirit or soul, but instead are referring to the nontangible personal aspects of human beings, whether they conceive of these aspects as byproducts of the brain or actual nonmaterial "mind" states.

Christians call this aspect "soul" or "spirit," and certainly the Bible affirms the reality of the immaterial human nature as "soul" or "spirit." Even biblically speaking, however, a significant function of this immaterial aspect involves reasoning, communicating, experiencing emotions, memory, and social interaction, all of which can be studied to some degree without focus on one's relationship with God.

Psychology is defined in a leading Christian textbook as "the scientific study of the behavior and thinking of organisms....the study of how living creatures interact with their environment and each other, and how they cope (successfully or unsuccessfully) with that environment."³ Given this broad definition, and recognizing that many people use the term interchangeably with psychotherapy, we will focus on psychotherapy in this article, rather than exploring the wide scope of general psychology.⁴

Psychotherapy focuses on the use of psychology to help people "cope" with their problems. Stanton Jones and Richard Butman, in *Modern Psychotherapies: A Comprehensive Christian Appraisal*, give a good broad definition focusing on technique rather than type: "The common techniques all psychotherapists seem to use (though with differing frequencies) include (1) offering reassurance and support, (2) desensitizing the client to distress, (3) encouraging adaptive functioning and (4) offering understanding and insight."⁵

Some observers distinguish between "psychotherapy" and "counseling."⁶ However, such distinctions have blurred over the years, are not recognized by most people who seek psychotherapy, and serve no useful purpose in our present survey. Here we will operate from the commonly held assumption that psychotherapy and counseling are fairly synonymous unless specifically distinguished in a particular circumstance.⁷

HISTORY OF PSYCHOTHERAPY

It may be helpful to consider the history of psychotherapy⁸ with the analogy of nesting dolls. Just as a large wooden Russian folk doll can be opened to reveal a smaller one, which is opened to reveal an even smaller doll, and so on, so can the history of psycho-therapy be viewed. The largest doll would represent the post-Reformation philosophy of science, with the next smaller doll representing psychology, and the smallest doll representing psychotherapy.

This article merely mentions the larger "dolls" while it focuses on the smallest.⁹ After the Reformation, during the rise of secular "enlightenment," world views were developed and articulated that did not include any idea of theism or Christian theology.

Post-Reformation, nontheistic world views abandoned theism as the foundation for expecting orderliness in nature, and for expecting that the tools of reason could be used to understand what was observed empirically (i.e., by the senses, by physical observation or testing). For the first time science was divorced from philosophy and became an academic governing system itself. Science in the main did not support those assumptions with a foundation of belief in an infinite, personal, benevolent Creator-God. Instead, it promoted naturalism (i.e., there is no supernatural realm) concerning the real world; empiricism concerning methods for discovering truth; physicalism concerning human nature (i.e., humans are fundamentally material beings with mental aspects as part of, or produced by, the brain); and

secular humanism concerning human personal, interpersonal, and social aspects (i.e., personal and social ethics or values are subjective and human-generated, not absolute and given by God).

As we described in Part One, psychology shifted orientation from philosophy to science toward the end of the nineteenth century. This occurred when Wilhelm Wundt founded a psychological testing center or laboratory in Leipzig, Germany, and brought psychology to the status of an independent scientific, academic discipline in 1879. While psychology was developing its scientific foundation, some of its assumptions and principles began to be used in therapeutic settings, most notably by the "father" of modern psychotherapy, Sigmund Freud.

Contemporary psychotherapies developed afterward either from, or in contrast to, Freud's grand theories of psychoanalysis. One of the most significant features of Freud's system — mirrored in almost all subsequent psychotherapies — is its amalgamation of the "science" of psychology with the therapist's presuppositions, the accumulated "common sense" of therapist/client interaction, and the pragmatism of subjectively successful client therapy. This frequently inconsistent process of amalgamation distinguishes most psychotherapy from the empirical focus of contemporary science, although, as we discussed in Part Two, a strict empiricism is inadequate as a comprehensive philosophy of science.

Two frustrating problems psychotherapy advocates face should be mentioned before we examine the foundations of contemporary psychotherapies. The first problem involves success rates. Despite its acceptance as a scientific discipline, more than a century of psychologizing, its blatant promotion as a "wonder drug," and public confidence in its curative powers, most of the comprehensive data available on the effectiveness of psychotherapy shows that its success is much more modest than most people have assumed.

The most oft-cited study asserting the ineffectiveness of psychotherapy was published in 1952 by H. J. Eysenck. He used insurance company files as a research base from which he concluded that almost three-quarters of those diagnosed as "psychoneurotic" improved over a two-year period regardless of whether or not they received professional psychological intervention. This conclusion flatly contradicted the common assumptions of the day, since "at the time a 60–70% success rate was being reported by most well-known psychology clinics."¹⁰ This study is still cited by many critics of psychotherapy, even though many studies done since then have concluded otherwise, and several serious flaws were discovered in Eysenck's study.

What is most striking about later research regarding the effectiveness of psychotherapy, however, is that it shows almost uniformly that psychotherapy is, at best, moderately helpful. Furthermore, none of the research presents an unambiguous, generally accepted description of what constitutes "helpful" and how much change toward what ends constitutes "progress." The values and assumptions of the therapists, clients, and researchers all color this assessment.

For example, a Christian might encourage a fearful friend to "trust in the Lord" while a secular therapist might discourage dependence on some "mythological father-god figure" to overcome fear in favor of affirming one's own autonomy. Which case represents "helpful change for the better"?

Additionally, the research has not been based on test groups isolated from all other possible influences (clergy, relatives, friends, books, etc.). We shouldn't wonder at this, since so much of psychotherapy, especially Christian psychotherapy, also involves common sense, experience, clarification, friendship, understanding, and support — all factors present in varying degrees in almost all ongoing interpersonal relationships.

So, there is no evidence that psychotherapy is the solution to everyone's problems, and no way to tell how many "helpful" psychotherapy techniques are simply the tools of ordinary wholesome relationships and how many are unique to psychotherapy. Psychologist and critic of psychology Dr. Paul Vitz summarizes: "Psychology overpromised and underproduced; that is, everybody thought that if they studied psychology or saw a therapist, they'd be happy ever after — but that didn't happen."¹¹

The second frustration is that research has been unable to support the superiority of one school of therapy over another. In other words, almost any nondestructive kind of therapy will produce this statistic of moderate success. Limited research support is available that certain broad kinds of therapy seem to be more effective for certain kinds of problems than others.¹² One of the problems with this kind of research is that many therapists are "eclectic" — that is, they use techniques and hold assumptions from a variety of psychotherapy sources, and their treatment varies not only from one client to the next, but often even with the same client over a period of time. Pragmatism ("Do

whatever works!") seems to be the standard for determining the technique or approach for any client at any given time.

A Christian who attempts to use psychology within a framework of biblical principles for personal counseling faces unique challenges and a myriad of pitfalls: he (or she) must discern what complements, illustrates, applies, and adds knowledge to biblical principles and what rivals or contradicts them. It is entirely insufficient to assume, as so many Christian therapists do, that a good education in psychology and a born-again experience is all it takes to produce a sound Christian therapy practice. Such a Christian must be better prepared in theology, biblical interpretation, and principles of Christian discipleship than he is in psychology. In addition, he must be well-versed in critical thinking methods and have a well-rounded, comprehensive Christian world view by which he can judge everything he learns and experiences, including what he learns and experiences in psychology. Jones and Butman urge, "What we need in evaluating models of counseling and psychotherapy is clear thinking about our presuppositions, our views of humanity, and our moral standards and how to apply these to real situations. While we must be careful about being overly dogmatic and rigid, good evaluation is brutally honest about the realities of the human condition in all their tragic complexities. We need guidelines on how to think clearly, critically and courageously."¹³

FOUNDATIONS OF CONTEMPORARY PSYCHOTHERAPIES

Three main branches of psychotherapy have provided the foundation for the myriad of contemporary psychotherapeutic techniques, theories, and assumptions: dynamic psychologies, behavioral psychologies, and humanistic psychologies.¹⁴ Additionally, many psychotherapists seem to pick and choose varieties of elements from any or all three foundational systems without regard to their sometimes mutually exclusive or inconsistent aspects.

Dynamic Psychologies

Sigmund Freud, a late nineteenth-century neurologist-psychiatrist, developed a system of clinical practice called psychoanalysis that focused on introspection — by the therapist concerning himself, and then in a clinical setting by the client with the aid of a therapist, called an analyst. Freud's theory of personality included the idea of two mental states, the conscious and the unconscious; and the specialized personal aspects of ego, superego, and id. He attributed adult psychopathology (mental problems) to early childhood disruption of psychosexual development. Two of Freud's disciples, Alfred Adler (see below) and Carl Jung, developed their own systems.

Jung was a mystical philosopher and occult practitioner, a contemporary of Freud. He had been conducting his own studies and experiments in treating "hysteria" and "nerves" when he learned of Freud's work and began a correspondence and eventual partnership with him. However, fundamental differences in psychoanalytic theory later caused the partnership to dissolve. Today Freudian and Jungian psychoanalysis are considered quite distinct, although they also share many assumptions in common. Distinctives of Jung's psychoanalysis include assumptions about the "collective unconscious" and "archetypes."

Jung divided the human psyche into three parts: consciousness, the personal unconscious, and the collective unconscious. The personal unconscious Jung defined as the "top layer" of unconsciousness, "bound up with the personal characteristics of an individual."¹⁵ The collective unconscious, a controversial concept rejected by many psychologists, was postulated by Jung as the unifying unconsciousness of humanity. This "deeper" layer of unconsciousness contains the archetypes — the intrinsic idea-forms common to all humanity and reflective of the unity or "soul" of mankind. Myths, for example, are conscious manifestations of the collective unconscious and its archetypes.

Psychodynamic psychologies take the basic psychoanalytical models and add to them a focus on "cognitive [thought] and interpersonal processes."¹⁶ In other words, they first add to the fundamental assumptions of psychoanalysis ideas concerning the effect of early childhood interpersonal relationships on personality development. They proceed to suggest that personality dysfunction can be resolved through repairing, reexperiencing, and/or reinterpreting early childhood interpersonal experiences. Psychodynamic psychologies place a much more dynamic responsibility on the therapist, who is not Freud's "blank canvas," but instead is the font of wisdom and healthful personal interaction that the client needs to restructure his or her personality, recovering from the traumas of unhealthy early childhood relationships.

Most psychodynamic therapies last a long time (such as twice-weekly 50- minute sessions for three to five years), the goal being to use the healthy relationship between the mature therapist and the dysfunctional client as the basis for the client to experience personal growth and change. This is one of the most popular forms of therapy today, and can be extremely dangerous in the hands of an inadequate therapist. The client can be like putty in the hands of the therapist:

A healthy therapist will judge the maturity of the patient's behavior with reasonable effectiveness and accuracy. He can monitor the countertransference and separate much of what is his internal interpretation of reality from that of the patient. An immature therapist, however, can model a distorted sense of maturity and influence the client to develop according to the therapist's faulty perspective. Little possibility exists, in this theoretical framework, for the therapist leading the patient to a greater level of maturity than the therapist has personally attained.¹⁷

Some of the worst horror stories of therapeutically induced or enhanced psychopathologies have come from therapists incorporating or assuming some sort of psychodynamic approach in their therapy. Alien abduction therapy, past-life regression therapy, recovered memory therapy, and other kinds of irresponsible therapy fit a psychodynamic model well.

An entire article could be devoted to a critique of the dynamic psychologies, but four fundamental problems that especially concern Christian evaluators address our survey purposes here. First, the dynamic psychologies assume that most behavior arises from instinctive, nonmoral urges rather than from personal, morally responsible willfulness.

Second, most of these psychologies presuppose a deterministic naturalism that allows no justification for absolute ethics, responsible decision making, the existence of God, or people's spiritual natures. This makes dynamic psychologies prone to misuse by dysfunctional therapists, who can enhance a client's subjective feelings of victimization, and can fail to encourage clients to assume personal responsibility and moral commitment. Because of the close association between therapist and client, and the assumption that the client is a victim of early childhood trauma who cannot rise above it on his or her own, the client is almost literally at the mercy of the therapist.

Third, many types of dynamic psychology reflect the anti-Christian, anti-religious, and/or unorthodox biases of their founders, such as atheist Sigmund Freud and occult mystic Carl Jung. Therapists whose therapies are compatible with these systems are likely to reject biblical Christianity, its world view, and its values as well. Even dynamic therapists who are Christians or who are sympathetic to Christian clients tend without biblical warrant to apply certain antireligious assumptions from these systems selectively against religious ideas they don't like. "Therapy is never value free and...all therapists either implicitly or explicitly communicate their values and personal religion. Therefore, the question is not whether the therapist has certain personal values or goals but how these influence the therapy process."¹⁸

Finally, strict psychoanalytic theories are ultimately self-contradictory, because if everything in human experience is shaped by early childhood traumas, then perhaps one's acceptance of psychoanalysis is shaped by an early childhood experience. In other words, we have no way of knowing if it's true or not, only if we think it's true because we've been shaped to think it's true. Jones and Butman explain this self-stultification of psychoanalysis in relationship to religion: "If atheism can be explained in as facile and convincing a fashion as religion, then there is no ultimate hope of ever knowing anything truly....Such an all-encompassing 'psychologizing' of our capacity to know is repugnant to Christians, who believe that we are capable of knowing truly, at least at some level."¹⁹

Behavioral Psychologies

The second building block of contemporary psychotherapy was the development of behaviorism, first by Freud's disciple Alfred Adler, and then under academic psychologist John Watson. The most popular behaviorist, B. F. Skinner, started with a strict (and, to some, artificial) behaviorism and developed his system to such a complexity that many believe his clearly demarcated behaviorism spurred the leap to humanistic psychology.

Adler's system²⁰ focused on "helping the individual clarify constructive life goals and plans, develop proper social interest (concern for others), and better understand his or her life style and how this relates to psychological development."²¹ Watson's most influential work was published in the first 20 years of this century. He approached psychotherapy from an academic rather than a clinical perspective. Additionally, he was the first to focus on the

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study of observable behavior rather than subjective introspection. This is one of the most important distinctives between analysis or dynamic psychology and behavioral psychology. Although behaviorism and psychoanalysis both assume naturalism and that early experiences are determinative of adult mental states, behaviorism applies different principles of psychotherapy. While psychoanalysis focuses on introspection, behaviorism focuses on observable behavior. Many people, including Christians, are attracted to behaviorism because of this emphasis on "the scientific method."

B. F. Skinner's "operant conditioning" theory is perhaps the aspect of his behaviorism most pervasive in contemporary society. His theory is assumed and used in education, business, job training, and correctional incentives. Skinner was "committed to the propositions that human nature can be completely understood through the methods of natural science; that human behavior is determined by the environment; and that the psychological control of human behavior is the only hope for the immense problems facing mankind."²²

The two basic assumptions of behaviorism are naturalism and empiricism. In other words, matter is the only reality and reality can only be tested through the senses.

Strict behaviorism totally rejects any idea of God or the immaterial aspect of humankind. There is no ultimate, eternal, infinite, personal God by whom we are created and to whom we are responsible. In fact, "we" are not persons, minds, or spiritual beings with bodies — we are merely brains in bodies. The mind is mere electrical functionings, or a "byproduct" of the electrical processes of the brain. Consequently, everything human is explainable by natural law.

If only the material world is real, and the material world is subject to natural law, then it is not surprising that all the tools for discovering, observing, understanding, and changing things about the mind are physically based as well. Humans are understandable, behaviorists say, only from an empiricist perspective. In other words, human behavior is shaped by physical forces and is observed through physical means. An assumption of strict behaviorism also implies determinism, that one's actions are explainable by external, empirical (sensory) causes.

Cognitive-behavioral therapy progresses through several stages: education about the relationship between thoughts and personal well-being, training in assessing one's thoughts and comparing them to external reality, training in how to modify one's thoughts to accurately reflect reality, and, in some applications of cognitive-behavioral therapy, an additional time of learning to translate one's new thought patterns into both a comprehensive world view and correspondingly healthy actions.²³

Several features or goals of some behavioral therapies have been used by Christians in a Christian world view setting, such as assumptions about rational apprehension of reality, changing behavior to correspond to truth,²⁴ and so forth. Jones and Butman explain one kind of behavioral therapy, rational emotive therapy, that attracts Christians: "The highly rational and didactic nature of [rational emotive therapy] as a counseling method fits with the instincts of many conservative Christian believers who tend to be comfortable with rational discourse about belief and are primed to believe that belief has a formative impact on behavior and quality of life."²⁵ However, the core of behaviorism (including rational emotive therapy), with its assumptions of strict naturalism, determinism, and physicalism, is completely incompatible with Christianity.

Humanistic Psychologies

Humanistic psychology built on the beginnings of psychoanalysis and behaviorism with the ideals of Abraham Maslow, and was developed further by Carl Rogers. Calling itself the "Third Force," it rejected the "dehumanizing" determinism in both psychoanalysis and behaviorism (in which human behavior is predetermined either internally or externally) in favor of an emphasis on human autonomy and potentiality.

Fundamental to humanistic psychologies is the idea that human behavior, and change in human behavior, is caused by internal, personal perceptions, experiences, and reactions to those experiences, all focused on the basic human need for personal fulfillment or "self-actualization." Sometimes humanistic psychologies credit behaviorism, especially the strict kind of behaviorism advocated by Skinner, for their development, because they developed in reaction against the "dehumanizing" aspects of behaviorism, rather than as a further development of behaviorism.

Humanistic psychology acknowledges the value of introspection, and tests many of its ideas through observable behavior, but its orientation is on conscious subjectivity. It is commonly called "client-centered" or "person-centered" therapy — an approach developed by Rogers in the 1940s. Jones and Butman summarize: "Person-centered therapy emphasizes the primacy of the individual and is often criticized for contributing to modern narcissism and the erosion of any shared sense of meaning or value in contemporary society."²⁶

Transactional Analysis (TA), developed by Eric Berne, is one of the most popular forms of humanistic psychology. It is from TA that we get the common psychotherapeutic concepts of the inner tripersons — the Parent, the Adult, and the Child.

At the core of the humanistic psychologies is the fundamental assumption that "man is the measure of all things," as the ancient humanist slogan put it; or "I must find myself!" as the person-centered client is likely to lament. In other words, personal fulfillment and happiness is the goal of individual human living, and therapy is the attempt to obtain professional assistance to reach that goal through personal transformation.

Beginning with the premise that their goal is to help relatively well-adjusted people achieve greater self-actualization (as opposed to the dynamic and behavioral psychologies, which focus on psychological deviations), the humanistic psychologies start with the self, work on the self, reward the self, and fulfill the self. It is no wonder that humanistic psychologies also tend to be intensely subjective — truth and reality are relative to the individual (the client) experiencing them. Jones and Butman describe the view: "What we are and what we do is a reflection of our subjective experience of the world and ourselves. External reality can only be known through the inner reality of personal experience."²⁷ Commonly, one hears a humanistic psychologist say something like, "It's not for me to determine whether or not my client is telling me the truth. What matters is what my client experiences as the truth." This approach is compatible with many of the more bizarre therapy trends such as alien abductions, where the reality of extraterrestrials (or other-dimensional beings) is irrelevant: what matters is that the client believes in alien abductions.

We experienced another example when we talked with the mother of two youngsters who had allegedly been ritually abused by Satanists in a child-care situation. We asked the mother if she ever had doubts about the reality of their abuse since years of investigation had turned up no corroborative evidence that her children had been abused. "No," she replied, "I can't have any doubts. Frankly, whether or not they were, I believe they were and they believe they were, and the success of their therapy depends on our beliefs, not on the reality."

Some Christians who encounter humanistic psychologies in the therapy room first are drawn to their emphasis on personal human responsibility, encouragement to reach one's potential, assistance in developing a system of ethics, and focus on each person's unique value. However, these attributes of humanistic psychologies have developed on a foundation that is thoroughly non-Christian; that is, humans must assume personal responsibility because they are accountable to no one but themselves — there is no God to answer to.

Reaching one's potential has been substituted for seeking God's will as the highest goal of humankind. The self-actualization focus is on personal, subjective well-being and social functioning rather than on reconciliation with God. While Christians certainly need to learn how to be content with their lives, to reach their "potential," and to adequately socialize, none of their "coping" has eternal significance. Only Christ's death on the cross can transfer the significance of the eternal to humans who otherwise are temporal and undeserving: "Our biggest problem, then, is not depression, anxiety, or anger. It's not our past history, difficult and ugly as that may be. Nor is it sickness, an accident, loss or affliction. Our greatest problem is not even the sins we commit. It is the deep crevice that wants to open in your soul and mine separating us from the love, joy, and peace of a life lived in the closest possible union with our Creator."²⁸

The humanistic system of ethics is subjectively based and relative rather than coming from God's holy nature as an absolute standard of conduct for all humankind. As Dr. Paul Vitz notes, "The idea that each person creates their own values is the most extreme form of relativism that exists," and "anyone who worships himself worships a fool."²⁹

In the humanistic psychologies personal unique value rests upon subjective self-centricism, not on the fact that each person is created lovingly by God. Such preoccupation with self — such narcissism — is reflective of "a cultural context frequently closed to the transcendent," a cultural context that values life "only to the extent that it brings pleasure and well-being [and] suffering seems like an unbearable setback, something from which one must be freed at all costs,"³⁰ rather than as an opportunity to "not only believe on [Christ], but also to suffer for him" (Phil. 1:29).

"Seat-of-the-Pants" or Pragmatic Psychotherapy

Despite the clear developmental trends in this history of psychotherapy and the orientations of the major psychologies, most contemporary American therapists do not practice any one psychotherapy exclusively and consistently. Instead (as we've stressed several times in this series), most therapists have some sort of basic orientation in one of the three major psychologies but then they pick and choose from hundreds of different systems, techniques, methods, schools, and ideas, applying "what works" in individual cases with different people with different problems. The typical therapist system is derived from clinical experience, intuition, common sense, and reflection without any coherent paradigm or framework to reconcile everything into a cohesive therapeutic world view.³¹

This eclecticism is generally unpredictable, frequently unhelpful, and usually inconsistent. Without a coherent world view, the therapist is unable to adequately or objectively test new theories or techniques. Not only is this not helpful from a therapeutic standpoint, it can be therapeutically harmful and spiritually harmful when it promotes unbiblical (and sometimes occultic) concepts. Even Christian therapists can cause severe physical, mental, and spiritual harm without a rigorous, consistent, biblical therapeutic approach. This has been made abundantly clear in the practice of some poor psychotherapies such as repressed memory therapy³² or in failure to ensure appropriate therapist/client relationships such as when sexual relationships occur between therapist and client.

Ideally, one should first develop a consistent, comprehensive, and coherent philosophical framework or methodology, including an understanding of personality, human nature, abnormality, and mental/emotional/personal soundness. Then one can judge the different therapies, techniques, and approaches by how they correspond to this basic model: "In fact, whatever else Christian counseling is, surely it must be based on and informed by these biblical perspectives on human nature. Three biblical themes seem particularly relevant: the unity of personality, creation in the image of God, and the reality of sin."³³

Disappointingly, most Christian therapists do not carefully and thoughtfully construct a biblical paradigm of counseling by which they judge all theories, schools, techniques, and ideas. Instead, they focus almost always on clinical experiences rather than comprehensive data built into a coherent framework — although some Christian psychologists have attempted to develop a good system in their "integration" discussions.³⁴ This makes the evaluation of Christian psychology confusing, and the difficulty is increased because many Christian psychologists also use terms common to secular psychology, such as "self esteem," "self-actualization," "inner child," and so forth, but assign new, Christian definitions to those terms without clearly stating so.

The most popular contemporary Christian psychologists, such as James Dobson, Gary Collins, Frank Minirth, Paul Meier, Fred Gross, and William Backus, come under particular scrutiny in these areas. Each criticism does not apply to each therapist, nor always to the same degree. Nonetheless, too frequently they do not explain what underlying, comprehensive biblical world view they may possess; they promote techniques and/or ideas for which they do not demonstrate a clear biblical compatibility; and they fail to explain that they have redefined common terminology to fit their world views.

Eclecticism is not completely useless, especially for the Christian who can build from other systems a quasi-system that more or less reflects the broad approach of the Bible to personal development. Jones and Butman explain:

Almost any form of counseling interaction in the Bible can find its counterpart in the practice of secular psychotherapy. It is interesting, though, that each major school of psychotherapy tends to build its identity around a rather limited number of styles of therapist-client interactions — so that cognitive therapists are teachers, person-centered therapists are accepting, psychoanalytic therapists are distant and interpretive, and so forth. No counseling model we know of embodies the diversity of interaction styles that seem to be recommended in Scripture. So, as the Christian therapist moves beyond a secular theory, one needed area of growth is an expanded vision of technique that incorporates the eclecticism found in Scripture.³⁵

AREA	SECULAR	CHRISTIAN
Assumptions	Religion is irrelevant.	God, sin, and spiritual aspect are relevant.
Humankind	Qualitatively equivalent to other animals.	Created in God's image with moral accountability.
Truth	Product of evolutionary sophistication and/or relative.	Comes from God through general and special revelation.
Psychopathology	Spiritual dynamics are irrelevant; sin is a useless and/or harmful concept.	Often spiritually based, always spiritually affected and affecting.
Goals	Self-satisfaction and ability to cope with life.	Peace with God is highest.
Techniques	Pragmatism ("Do whatever works") is the common standard.	Uses biblical standards, rejects contrary ones, accepts complementary ones.

SPECIAL PROBLEMS WITH CHRISTIAN "INTEGRATION"

Christian eclectics, or "integrationists" as they are frequently labeled, face problems not only with determining and rejecting those elements of psychology that are incompatible with Christianity, but they must also determine how to integrate psychology and Christianity.³⁶ Views on this aspect range from the antipsychologists who declare it is impossible to find any harmony between the two, to some unsophisticated and/or inconsistent evangelicals who think that when a born-again Christian uses an intact secular psychology, it automatically becomes "Christian psychology." Thoughtful Christians with both theological and psychological competence recognize that any one term, whether "integration," "amalgamation," or "eclecticism," is inadequate without a contextual definition to explain how psychology and the Bible could intersect. (The above chart clarifies some of the assumption problems in integrating common psychotherapy ideas with Christian beliefs.)

Most Christian psychologists will agree that integration cannot include any compromise of a biblical world view, theology, or doctrines of humanity, sin, and redemption. They would say that responsible integration must exclude compromise, omission, or contradiction of biblical theology. Gary Collins notes:

Never do I recall committed Christian psychologists suggesting that integration is the same as merger. For the Christian psychologist, integration involves a recognition of the ultimate authority of the Bible, a willingness to learn what God has allowed humans to discover through psychology and other fields of knowledge, and a desire to determine how both scriptural truths and psychological data can enable us better to understand and help people.³⁷

While Christian psychologists are appreciative of some of the observations, ideas, and data of psychology, many, such as William Backus, explicitly draw the line between what is acceptable and what is not:

Sometimes, however, the psychological must be moved over to accommodate the prior claims of God's revealed truth. For instance, the fundamental human plight is not anxiety or the oedipal situation or imbalance in neurotransmitting chemistry, though all of these may exist. Man's greatest plight is a separation from his Source, which is God. This separation was wrought by human sin...

The cure is not insight, or desensitization, or healing of memories, or making the unconscious conscious, or increased rationality, or finding one's real self, though one or another of these might

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help. The cure is God's free gift of righteousness, gained for us when Jesus offered himself for us. We gain this gift by grace through faith. This righteousness alone reunites us with God; it is our life-giving reconnection to our Source.³⁸

The Christian who attempts integration, either as a client or a therapist, must remember that no therapy comes without a world view, even if that world view is myopic and incoherent. It is not possible to embrace wholeheartedly any one of the three foundational schools without compromising one's Christian world view or becoming hopelessly inconsistent. Each of the three foundational schools presupposed nontheistic naturalism, and many of their proponents have been actively anti-Christian. As Christian psychology professor Gary Collins notes, "There can be no denial that much of psychology is more than indifferent to religion; it is opposed to religion."³⁹

THE BOTTOM LINE FOR THE CHRISTIAN

Is there any compatibility between psychology and the church? As our brief survey has shown, such a vast field with such a divergence of philosophy, theory, and practice as psychology can't be summarily embraced or dismissed.

The major kinds of psychologies, described here as dynamic, behavioral, and humanistic, are foundationally nontheistic or even antitheistic as to the existence of God, naturalistic (often materialistic) as to the nature of reality, physicalistic or pantheistic as to the nature of humankind, relativistic as to values and ethics, and pragmatic as to treatment. None of these assumptions is compatible with a comprehensive Christian world view.

When we turn to the application of psychology in therapy, we find a cacophony of conflicting practices seemingly divorced from their psychology foundations. Such inconsistencies and lack of a cohesive world view create a subjective arena in which a mixture of helpful, neutral, and damaging practices can coexist. Christians risk practicing biblically inconsistent counseling when they fail to adhere closely to an underlying coherent biblical world view.

Among the myriad of practices and ideas, however, Christians may attempt to discern helpful therapies compatible with a Christian world view. For example, Dr. William Backus has borrowed and redefined aspects of cognitive therapy into a counseling system that focuses on helping clients to conform their thoughts to Christian truth, and then have their "Christianized" thoughts conform their behavior. Dr. James Dobson, who does not have a clinical practice, frequently mentions the importance of "self-esteem," but he has attempted to redefine the term within the Christian context of God's love for us as His creations, and the sacrificial love He expressed toward us "while we were still sinners" (Rom. 5:8).

While many Christians may contest the degree of success such Christian psychologists have had at bringing secular therapies into a Christian world view, it is at least logically possible to affirm that "a Christian psychotherapist can within limits practice any one of many counseling techniques and approaches; and may choose...to use several methods, depending on his skills and the particular problems of his clientele" (emphasis in original).⁴⁰ Such an attempt will be more or less successful depending on several factors: first, the Christian therapist's understanding of and commitment to a comprehensive, coherent, biblical world view; second, an understanding of the foundations of the various psychologies; third, an examination of how integrally any theory or technique is connected to its foundational psychology; and fourth, an assessment of the degree of correspondence that can be obtained between a given theory or technique and biblical principles.

Some of the observational data and logical evaluations of psychology can be relevant to a practical counseling application of a broad biblical foundation. A simplistic example would be that we learn through advice, observation, and experience not to touch a hot stove and burn ourselves. We thus grow in our ability to apply the biblical principle to take care of our physical bodies. Meier, et al., explain: "Thus both Christians and non-Christians who study creation will be observing God's truth. Christians place their ultimate faith in God, who is revealed in the Bible. This gives them an accurate understanding of the truth of God in creation. Secular scientists who can also observe truth in creation, do make important discoveries.... Such discoveries of God's truth, although not contained in the Bible, are still representative of the grace of God toward humankind."⁴¹

Many of the techniques of psychotherapy are compatible with a Christian world view because they are not unique "psychology" discoveries or inventions but reflect the common sense, experience, and thoughtful reflection every Christian should practice as a matter of course. In other words, many times the secular world "borrows" from our

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world view. Gary Collins calls this intersection of psychology and the church "overlap": "Even those who try to dichotomize counseling into psychological versus biblical approaches have to admit that there is overlap. Listening, talking, confessing, accepting, thinking and understanding are neither purely psychological nor exclusively biblical activities....The person who wants to understand and help others cannot avoid at least some overlap and integration of psychological and Christian principles."⁴²

Above all else, the use of ideas, practices, techniques, methods, and theories from psychology in Christian counseling must be circumscribed at every point that it diverges from a consistent biblical world view. Collins gives a concise statement reflective of many Christian psychologists: "Of course there is much that is wrong about psychology — but there is also much that is sensitive, helpful, valid, and good. The best psychologists carefully sift the conclusions and evidence, reject that which is invalid and make use of the rest."⁴³

NOTES

¹See, for example, Terence W. Campbell's *Beware the Talking Cure* (Boca Raton, FL: Upton Books, 1994), or Robyn M. Dawe's *House of Cards: Psychology and Psychotherapy Built on Myth* (New York: The Free Press, 1994).

²The authors cited in this article are representative of the Christian psychology movement, although we are not exclusively limiting the movement to these authors or their views. Publishing in Christian psychology is so prolific that the limited number of sources used in one review could be statistically misleading.

³Paul Meier, Frank B. Minirth, Frank B. Wichern, and Donald E. Ratcliff, *Introduction to Psychology and Counseling*, 2d ed. (Grand Rapids: Baker Book House, 1991), 17.

⁴See Part One in this series, "Psychology and the Church: Laying a Foundation for Discernment" (Winter 1995), for further discussion of the terminology.

⁵Stanton Jones and Richard Butman, *Modern Psychotherapies: A Comprehensive Christian Appraisal* (Downers Grove, IL: InterVarsity Press, 1991), 12.

⁶Clinton W. McLemore, "Counseling and Psychotherapy: An Overview," in *Psychotherapy in Christian Perspective*, ed. David G. Benner (Grand Rapids: Baker Book House, 1987), 4–5.

⁷Jones and Butman, 14.

⁸See Part One in this series for an earlier discussion of the history of psychology.

⁹For further information on post-Reformation philosophy of science, see Nancy R. Pearcey and Charles B. Thaxton's *The Soul of Science: Christian Faith and Natural Philosophy* (Wheaton, IL: Crossway Books, 1994), and J. P. Moreland's *Christianity and the Nature of Science: A Philosophical Investigation* (Grand Rapids: Baker Book House, 1989).

¹⁰Michael J. Lambert, Dean E. Barley, and Ellie L. Wright, "Research in Psychotherapy Effectiveness," in *Psychotherapy in Christian Perspective*, 61–62.

¹¹Kurt Hoeksema, interview with Paul Vitz, "The Cult of Self: Psychology and the Culture of Narcissism," *Cornerstone* 23:106, Spring 1995, 13.

¹²See especially Lambert, et al., 65–72.

¹³Jones and Butman, 30.

¹⁴We are grateful to Jones and Butman for this threefold classification of psychologies. While many authors, both Christian and secular, group psychologies differently, for the purposes of our broad survey this classification system is helpful.

¹⁵David Cox, *Modern Psychology: The Teachings of Carl Gustav Jung* (New York: Barnes and Noble, 1968), 80.

¹⁶Jones and Butman, 93.

¹⁷*Ibid.*, 104.

¹⁸Gary Collins, *Can You Trust Psychology?* (Downers Grove, IL: InterVarsity Press, 1988), 27.

¹⁹Jones and Butman, 78.

²⁰Adler's system was so broad-ranging that it is difficult to classify. We follow the lead of Jones and Butman, who view Adler's system as primarily cognitive-behavioral rather than either psychoanalytical or humanistic (see Jones and Butman, 226).

²¹McLemore, 9.

²²Mark P. Cosgrove, *B. F. Skinner's Behaviorism: An Analysis* (Grand Rapids: Zondervan Publishing House, 1982), 10.

²³See, for example, L. Rebecca Propst, "Cognitive-Behavior Therapy," in *Psychotherapy in Christian Perspective*,

134.

²⁴This is developed more fully, for example, in William Glasser's Reality Therapy, which is also popular among Christians. Even biblical counseling movement "father" Jay Adams acknowledges that some of Glasser's ideas helped him to understand how to apply biblical principles in counseling situations, although he rejected Glasser's world view (see, for example, Jay Adams, *Competent to Counsel* [Grand Rapids: Baker Book House, 1970], xix).

²⁵Jones and Butman, 192.

²⁶*Ibid.*, 256.

²⁷*Ibid.*, 257.

²⁸William Backus, *Hidden Rift with God* (Minneapolis: Bethany House Publishers, 1990), 32.

²⁹Hoeksema, 11, 14.

³⁰Pope John Paul II, *The Gospel of Life* (New York: Random House, 1995), 115.

³¹Jones and Butman, 11.

³²See our article "The Hard Facts about Satanic Ritual Abuse," *Christian Research Journal*, Winter 1992, 20–23, 32–34.

³³David G. Benner, "Christian Counseling and Psychotherapy," in *Psychotherapy in Christian Perspective*, 16.

³⁴For example, see Gary Collins's *Christian Counseling* (Dallas: Word Publishing, 1988), or his *The Biblical Basis of Christian Counseling for People Helpers* (Colorado Springs: NavPress, 1993); Meier, et al., *Introduction to Psychology and Counseling*; Benner's *Psychotherapy in Christian Perspective*; and Jones and Butman's *Modern Psychotherapies: A Comprehensive Christian Appraisal*.

³⁵Jones and Butman, 59.

³⁶Specific arguments given by biblical counseling movement proponents were discussed in Part Two in this series and are not repeated here.

³⁷Collins, 127.

³⁸Backus, 16.

³⁹Collins, 119.

⁴⁰Mark Cosgrove and James D. Mallory, Jr., *Mental Health: A Christian Approach* (Grand Rapids: Zondervan Publishing House, 1977), 52.

⁴¹Meier, et al., 32.

⁴²Collins, 129.

⁴³*Ibid.*, 163.