

Feature Article: JAF2312

RECOVERY AND THE BURDEN OF SELF

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This article first appeared in *Christian Research Journal*, volume 32, number 02 (2008). For further information or to subscribe to the *Christian Research Journal* go to: <http://www.equip.org>

SYNOPSIS

There is a wide Recovery Group Movement in America: as much as forty percent of Americans are regular members of such organized small groups, from Bible studies to court-enforced meetings. Alcoholics Anonymous (AA), which began in the early 1900s, is the ancestor of this movement. There are approximately fifty thousand AA groups in the United States (and eighty-nine thousand worldwide) and more than one million Americans participate in this program alone. Some experts predict that the influence of such groups will continue to grow in the coming decades to the point of representing a genuine “cultural realignment.” Many persons have received help through the addiction-recovery movement’s program for living. Despite this, a growing body of critics, both professional and lay, religious and secular, says that the recovery movement is a phenomenon whose time has come and gone. They are critical of the movement for embracing a flawed “disease model” of addiction and capitulating to a culture in which the therapeutic triumphs over self-government and the process of recovery is nothing more than a courtship with codependency for codependency’s sake.

“I got pulled into AA [Alcoholics Anonymous] at age 16. Twelve-Steppism was all the rage in the mid 1980s. If you drank too much, no matter what your age, you went to treatment and then to AA. It’s not much different now. I wasted 15 years of my life in AA. I quit AA in 1998, and stopped thinking about drinking and not-drinking.”¹

Media images abound, implying that there exists a nation of people in collective recovery from addiction to just about anything—ranging from shopping and overeating to sex, drugs, alcohol, and each other. The visual assault of tabloid cover images in the checkout line no longer shocks our sensibilities; rather, it seems strangely peripheral. We see Lindsay Lohan sporting an alcohol-monitoring bracelet, being arrested for drunken driving just days after leaving a recovery program. Next to Lindsay, Britney Spears, in

sweats and dark shades, is ducking cameras before being admitted to a treatment program for a third time.

Relapse is common in addiction recovery, but celebrities often seem to come and go from treatment as they please during their spotlighted struggles with alcohol and other drugs. "I would hope that...the perception in the public mind doesn't become that this is all a joke," said Jon Morgenstern of The National Center on Addiction and Substance Abuse at Columbia University. "In the last 30 years, because high-profile people have sought treatment, it's become more socially acceptable that people do have alcohol and drug problems and need to get help. So I hope that tide is not turning against us."²

For most of us who have been touched by someone in the throes of life-dominating sinful behavior or who personally have experienced, or are now struggling with, such behavior, tabloid covers remain just that—images; superficial images that do not begin to express the harsh realities of such experiences.

Consider being exposed to the reality of the world of addiction and recovery in the following fashion: someone close to you expresses that he or she feels inadequate, alone, and unworthy, and that the person he or she was on the inside never matched what others saw on the outside. This person, whom you always thought was a picture of spiritual and psychological maturity, confesses to you in a moment of vulnerability that he or she had come to feel disconnected—from family, from friends, and from you. His or her life had become unmanageable, and he or she had found solace in the constant consumption of alcohol.³

Your friend's somber confession then takes a positive turn: "But when I came to Alcoholics Anonymous I found that the twelve-step fellowship gives me the monitoring and support I need and I have begun to heal physically, emotionally, and spiritually."⁴

How could you disagree with such an encouraging turn? At the same time, however, how could you agree with a movement that may not have its basis in Scripture? If it does, it still would be important to determine whether it properly differentiates between man's way and God's way to true recovery from sin.

CURRENT ATTITUDES TOWARD TWELVE-STEP RECOVERY

The Recovery Group Movement is a collective effort of authors, various anonymous group members, high profile "recovering" people, and the many organizations that market and maintain the treatment industry. Under the rubric of treatment the Recovery Group Movement advances a twelve-step program⁵ that is touted as a cure-all if, indeed, one in need of its services continues to participate in the fellowship of the program and carries the message of recovery to others.

"The major flaw with the [Recovery Group Movement's] one-size-fits-all 'treatment' plan," according to psychologist Jim DeSena, "is that it does not work, never has worked, and never will work. It is simply not the panacea the [Recovery Group Movement] touts it to be."⁶

American psychologist and writer Martin Seligman writes of AA:

AA is not for everyone. It is spiritual, even outright religious, and so repels the secular-minded. It demands group adherence, and so repels the nonconformist. It is confessional, and so repels those with a strong sense of privacy. Its goal is total abstinence, not a return to social drinking. It holds alcoholism to be a disease, not a vice or a frailty. One or more of these premises are unacceptable to many alcoholics, and these people will probably drop out.⁷

The stock answers ranging from disease and denial to “grave mental and emotional disorders” (as AA literature states) are invented by the movement itself, says DeSena, and what they are not telling us is that the “vast majority of people who overcome addictions do so without treatment and without participation in AA.”⁸

There is much information to support the claims of DeSena, Seligman, and the many other professionals who have mounted a full assault over the last decade on the Recovery Group Movement and the massive twelve-step Anonymous community. Consider the following from the Harvard Medical School’s Mental Health Letter, August/September 1996: “Most recovery from alcoholism is not the result of treatment. Only 20% of alcohol abusers are ever treated...Alcohol addicts, like heroin addicts, have a tendency to mature out of their addiction...In [a] group of self-treated alcoholics, more than half said that they had simply thought it over and decided that alcohol was bad for them.”⁹

Study results from addiction researchers Linda and Mark Sobell confirm Harvard’s treatment statistic and reveal that “over seventy-seven percent of those who had overcome an alcohol problem had done so without treatment. In an earlier study...a sizable majority of alcohol abusers, eighty-two percent, recovered on their own.”¹⁰

AA’s own most recent surveys reveal huge dropout rates: seventy-five percent after ten meetings and ninety-five percent before one year. Of the five percent who last a year, only forty-five percent reach at least five years sobriety. This means that fewer than three in one hundred people entering AA achieve five years’ sobriety.¹¹

In reply to a newspaper article that was critical of AA, however, one reader wrote, “I doubt very much you know what it is to suffer from alcoholism. As a very educated African woman who has found help in AA, I pray that you or anyone close to you never ever have to contend with it. Should however you be struck by it may you find help. I am certain that those who need AA will find it in spite of you.”¹²

Shattering the Illusions of the Recovery Hall of Mirrors

Jack Trimpey, a clinical social worker, believes the popular ideas held sacred by the Recovery Group Movement are troublesome: “If you have been to an amusement park and seen a ‘house of funny mirrors,’ you know that reality can be distorted so that things aren’t what they seem. Little things look big, large things appear small, and common objects are distorted beyond recognition.”¹³ Of the many common and popular

ideas of the movement (which he refers to as illusions), he critiques thirteen; two of which are discussed here.

Illusion 1: Recovery from substance addiction has something to do with attending meetings where people talk about themselves (The Grand Illusion).¹⁴ Many of those who make their first recovery group meeting already have thought about quitting their addiction but attend the meeting instead of quitting for good. “This is the nature of addiction,” writes Trimpey. “AA literature states, ‘The only requirement for membership is a sincere desire to quit drinking/using,’ acknowledging that quitting is essential and if a newcomer has not considered quitting, then now is the time to do so. But the very next message to the newcomer says you can’t quit for good on your own, but only one day at a time while you build a new philosophy of life, one meeting at a time.”¹⁵ The recovery group sets up its newest members for endless procrastination of the important decision to quit their addiction unconditionally and permanently.

Illusion 13: There is no cure for alcoholism or drug addiction. Once an addict, always an addict.¹⁶ Here, Trimpey finds, is revealed the permanent loss of freedom that comes with “treatment.” “The authentic self is lost to a new self-identity as a ‘recovering’ person, struggling endlessly against the inevitable. The idea of a ‘cure’ to addiction is ridiculed, scolded, scorned, and denied by virtually every chemical dependency counselor in America. They insist that addiction, whether to alcohol or other drugs, is hereditary, progressive, incurable, and, if one does not admit all of the above, fatal.”¹⁷

Why It Doesn’t Make Sense to Call Addiction a “Disease”

In *The Truth about Addiction and Recovery*,¹⁸ psychologist and health-care researcher Stanton Peele states that when the Recovery Group Movement tells a person that he or she has the “disease” of alcoholism, “chemical dependency,” obesity, or compulsive shopping, for example, what it really means is that the basis of the behavior requires medical treatment, lasts forever, and inevitably expands until it takes over and destroys his or her life, and passes itself on to his or her children.¹⁹

“Every major tenet of the ‘disease’ view of addiction is refuted both by scientific research and by everyday observation,” writes Peele. “This is true even for alcoholism and drug addiction, let alone the many other behaviors that plainly have little to do with biology and medicine.”²⁰

Peele notes that no biological or genetic mechanisms have been identified that account for addictive behavior; that people do not necessarily lose control of themselves whenever they are exposed to the object of their addiction; that progression is not inevitable, it is the exception; and that the recovery community is a valuable community that “works for whom it works.” He states, “Meanwhile, there are plenty for whom it doesn’t work,” and adds that there is “no scientific evidence that AA works better than other approaches when randomly selected alcoholics are assigned to AA or other treatments. In fact, the evidence is that the people who are now often compelled to

attend AA—after being arrested for drunk driving or being sent by a company Employee Assistance Program—do worse than those who are left on their own.”²¹

CULTURAL FOUNDATIONS FOR CURRENT ATTITUDES

According to the U. S. Substance Abuse and Mental Health Services Administration, chemical dependency, along with associated mental health disorders, has become one of the most severe health and social problems facing the United States. One out of every eight Americans has a significant problem with alcohol or drugs; forty percent of those with such a problem have a “dual diagnosis” of concurrent mental/nervous disorder. Approximately twenty-seven million Americans are either regular users of illicit drugs or “heavy drinkers.” Of these, sixteen million are estimated to need immediate treatment.²²

How Bad Is It Really?

Such statistics, while alarming, are not reliable, according to Christina Hoff Sommers and Sally Satel, authors of *One Nation under Therapy: How the Helping Culture Is Eroding Self-Reliance*.²³ They cite in support of their view a satirical article published by five Canadian psychologists entitled “Pathology in the Hundred Acre Wood.”²⁴ The psychologists note that Winnie the Pooh, the hero of A. A. Milne’s 1926 children’s classic, appears healthy and well-adjusted, but, under expert scrutiny, is obviously a victim of attention deficit/hyperactivity disorder, binge eating, and borderline cognitive functioning (recall that he is “a bear of very little brain”). Then there are Rabbit, who has the profile of a narcissistic personality; Owl, whose emotional instability constantly renders him dyslexic; and Piglet, who “displays classic symptoms of generalized anxiety (a diagnosis that is admittedly difficult to dispute)”; while “Eeyore the donkey has low self-esteem and an inability to enjoy himself, a condition known as anhedonia—which the authors refer to as anhe(haw)donia.”²⁵

Sommers and Satel want us to recognize the serious point this spoof so clearly makes: the propensity of experts to pathologize an otherwise healthy American population en masse is out of hand. The past decade has seen a cascade of books and articles promoting the idea that seemingly content and well-adjusted Americans—adults as well as children—are emotionally damaged.

According to a few authors of such books, such as Mary Pipher, William Pollack, and Daniel Goleman, it doesn’t look good. Pipher’s *Reviving Ophelia* describes America as a “girl-poisoning” culture.²⁶ Harvard psychologist William Pollack’s *Real Boys*²⁷ claims to show that adolescent boys who appear to be healthy and happy are really emotionally deprived and quietly in despair. It’s not just Winnie and the children; American adults are miserable, too. No one has been more successful in making a career out of an alleged national anguish than Daniel Goleman, a former *New York Times* science writer. His best-selling book *Emotional Intelligence* describes a nation suffering from profound “emotional malaise” and in the grip of “surging rage and despair.”²⁸

Sommers and Satel believe there is no credible evidence that large segments of the population are addicted, in psychological free fall, or in need of recovery. Proper research indicates that Americans are quite well.²⁹ If we are crashing and burning with the frequency that the mainstream media would have us think, we do not seem to know it.³⁰ They write: “What we oppose is the view that Americans today are emotionally underdeveloped, psychically frail, and that they require the ministrations of mental health professionals to cope with life’s vicissitudes. The crisis authors offer only anecdotes, misleading statistics, and dubious studies for their alarming findings. Yet they are taken very seriously.”³¹

Workshops of Recovery

Despite the rising tide of critical data against the Recovery Group Movement, however, many people, for the first time, find freedom from addiction and lasting recovery through recovery groups such as those in the well-organized Christian Recovery Movement.³² This article does not dispute that. In fact, when I began to gather research on anonymous groups some time ago, I expected that my exposé would conclude with a fair review of the Recovery Group Movement. I didn’t realize, however, how controversial the movement actually was, or how much revealing research has been done on it. Whether a person’s opinion of the Recovery Group Movement is based on the propensity of experts to pathologize America wholesale and on the alarming statistics cited earlier, or based on his or her participation in twelve-step fellowship or that of others he or she encouraged to attend, it appears America’s love affair with the culture of recovery is not endangered.³³

The Recovery Boom

During the 1980s, recovery groups by the hundreds began to spring up on the cultural horizon seemingly overnight. Theologian and social critic David Wells believes this occurred when three powerful forces in our nation coalesced: an obsession with health, a therapeutic view of reality in which problems are ailments to be “treated,” and greed. “Many recovery groups have arisen in response to great tragedies in life,” he writes, “but it must not be forgotten that many have also become big business. Lucrative careers have been launched in the business of recovery, and publishing houses are nourished by commerce with these groups.”³⁴

Wells notes that by some estimates more than ninety percent of Americans are addicted to something. According to recovery group lingo, these people are codependent³⁵ and, in their state, are not necessarily responsible for their actions. “Their addictions are seldom viewed as matters of bad judgment, bad habits, or bad character,” notes Wells, and “almost invariably the source of the problem is traced to a bad home life or bad social circumstances in relation to which they understand themselves and their roles—they are codependent.”³⁶

Anonymous groups and twelve-step programs foster relationships, an attentive community, and a safe place to practice their particular brand of liberationist

psychology.³⁷ AA and other anonymous groups have for decades advanced the claim that their methods offer a cure for many other ailments.

According to Wells, the treatment industry now views moral failures as diseases, and “if the explanation of these maladies is the repressive nature of external society, then there is no moral difference between the man who abuses his wife and the woman who suffers that abuse, for they both suffer the same problems. For both, there is a twelve-step program.”³⁸

Liberation psychology taps into the “can do” American spirit, thinks Wells. “Chronic remorse, as all the moralists are agreed, is a most undesirable sentiment,” wrote Aldous Huxley, in his *Brave New World*: “If you have behaved badly, repent, make what amends you can and address yourself to the task of behaving better next time. On no account brood over your wrongdoing. Rolling in the muck is not the best way of getting clean.”³⁹ Not even the most daunting and vexing personal problems will be allowed to triumph over our ability to control them.

If this is the case, however, if in our quest for expressive individualism we have mastered the techniques of self-exaltation, why are we a culture in which the “therapeutic has triumphed” and we speak of such things as “collective-” or “self-” recovery? Have we really moved any closer to conquering what psychologist Philip Rieff has called “the last enemy”⁴⁰ —not death, as the apostle Paul declared, but our own personalities?

BIBLICAL PERSPECTIVES ON CULTURE AND RECOVERY

In the Christian classic *The Screwtape Letters*,⁴¹ writer C. S. Lewis offers an ironic portrayal of life and foibles from the vantage point of two demons as they correspond. The worldly-wise old Screwtape, a highly placed assistant to “Our Father Below,” provides guidance to Wormwood, a novice demon in charge of securing the damnation of an ordinary young man.

Screwtape educates Wormwood early on regarding the law of Undulation. He tells him that as spirits, humans are citizens of an eternal world, but as animals, they are trapped in space and time, which means that their bodies, passions, and imaginations constantly are in flux. The closest they come to balance, he says, is undulation, “the repeated return to a level from which they repeatedly fall back, a series of troughs and peaks.”⁴²

These “trough periods of the human undulation,” the low points or valleys that humans experience in the rising and falling of their lives, Screwtape advises, “provide excellent opportunity for all sensual temptations.” He writes that Wormwood is “much more likely to make [his] man a sound drunkard by pressing drink on him as an anodyne [a painkiller or relaxant] when he is dull and weary than by encouraging him to use it as a means of merriment among his friends when he is happy and expansive.”⁴³ It is most important that Wormwood remember, Screwtape continues, that when dealing with any pleasure in its healthy, normal, and satisfying form, he is always on the Enemy’s ground.

The Burden of Self

Could it be that the downward spiral of humans into the disgusting trough of addiction or life-dominating sin (or whatever we wish to label behavior out of control), is not only a disfigurement of healthy pleasure, but an attempt to escape the fundamental insecurity we experience in relation to the extent each one of us lives according to our true nature in Christ? Psychiatrist R. D. Laing writes, "Everyone in some measure wears a mask, and there are many things we do not put ourselves into fully. In 'ordinary' life it seems hardly possible for it to be otherwise."⁴⁴ If it were possible for humans, who are as capable of sounding the depths of their own depravity as scaling the heights of their own accomplishments, to measure all things, would they not by now have fashioned ways to recover from life-dominating problems?

It appears as though it is not possible for humans to deal with the self and recover on their own. The following lists ways in which we have attempted to do so: *Liberating the Self*. If our basic view of ourselves is that we are driven by instincts and that the cause of our problems is that these instincts are thwarted by society, family, and upbringing, then it would make sense to us to submit ourselves to a therapeutic culture for psychoanalytic resocialization.⁴⁵

Improving the Self. If our basic view of ourselves is that our behavior is conditioned or "programmed," then we will see the cause of our problems as the influence of environment and circumstances on our behavior, and the cure as the reconditioning or "reprogramming" of such behavior.

Elevating the Self. If our basic view of ourselves is that we are intrinsically good and have everything necessary within ourselves to solve our own problems, then we will believe that the cause of our problems is a mind blocked by negative thinking or influences, and that the cure is to release potential within the self.

Releasing the Self from Bondage. If our basic view of ourselves is that we are helpless before all spirits, then we will believe that the cause of our problems is that we are committed to, or under the control of, ancestors, demons, and spirits, and the cure is to appease them, cast them out, or discover our spirit guide.

If, however, the various attempts to liberate, improve, elevate, or release the self fail, and isolation from community results in withdrawal into the self, who could blame a person who seeks the solace of addiction? Here, movie producer Woody Allen's disturbing words are sobering, revealing the cost of self-preoccupation: "Our civilization stands at the crossroads. Down one road is despondency and despair. Down the other road is total annihilation. I hope we'll take the right road."⁴⁶

The Right Road

The word "recovery" does not appear anywhere in the New Testament; "recover" appears only twice, and "recovering" only once. The Apostle Paul uses "recover" (Greek, *ananepho*, meaning "to become sober again," i.e., to regain oneself or one's

senses) in the context of repentance, stating that a servant of the Lord must meekly correct those who oppose themselves, that God may “give them repentance to the acknowledging of the truth,” and that they may “recover themselves out of the snare of the devil, who are taken captive by him at his will” ([2 Tim. 2:25–26 KJV](#)).

The biblical doctrine of the atonement starts from this basic fact: each one of us in some way opposes our true self, the person each of us was created to be in Christ. “Despite the shallow optimism of some modern thinkers, sin cannot simply be ignored. It must be dealt with or it will reap a grim harvest,” writes theologian Leon Morris. “The present [triumph of the therapeutic in a culture that is in perpetual recovery from addiction] is a vivid commentary on this fact.”⁴⁷

Morris argues that in the affairs of humanity sin cannot simply be glossed over. “Why should we think that this will be the case where God is concerned? For here is the deep, basic subject of all religion. How can sinful man become acceptable before a holy God?”⁴⁸ The Christian answer—what God Himself has done in Christ—reaches beyond the need of “recovering” from sin for self-satisfaction to reveal a deeper, quintessential necessity for “redemption” from a self who “claiming to be wise, [has] become a fool” ([Rom. 1:22](#)).⁴⁹

Denying the Self: An Overview of God’s Way for True Recovery

As disciples of Christ and apologists who desire to set forth our case for a Christ who comes into the world to enlighten every person of His eternal truth, we must endeavor—in both secular and sacred circles that have adopted an addiction-recovery model—to speak of God’s view of recovery from life-dominating practices of sin. God holds each person responsible for his or her thoughts, words, and actions, including those that are life-dominating, “genetically predisposed,” or “addictive.”⁵⁰ Paul clearly states that we become slaves to whatever controls us.⁵¹

Regardless of how serious or overwhelming sin might be, the Bible proclaims that any wrong behavior can be overcome completely and in quick time if one follows God’s plan for all of life and living. For example, the believer is urged to stop yielding to, or placing one’s self under, the control of any sin that is dominating him or her; to place one’s self under the control of the Holy Spirit in every area of life; to make a thorough biblical evaluation of when, where, how, and with whom one commits the sin by which he or she is being dominated; and to develop a biblical plan to overcome the behavior. Finally, Scripture instructs the believer to appropriate God’s grace in dealing with problems and to continue to take immediate steps to eliminate, resist, or flee temptations that arise unexpectedly, continually being a faithful doer of the Word in every area of life.

NOTES

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