

Laying the Groundwork for Biblical Counselling

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Introduction

One of the features of knowing where you want to go is to know from where you start. In that respect it is important to know what secular society claims to be the explanation for problems of anxiety, despair, and fear. What is the reason for these problems? Of course, secular society has explanations. Christians need to understand from the Bible what God says about these problems and how to respond to these alternative explanations for them. Much of the teaching in the Scripture was given in response to the problems that Christian people and their teachers faced. The apostle, Paul, wrote the letters that he did in response to problems in the churches. Jesus' teaching was often in response to questions that were asked him, opposition that he encountered, or difficulties in his disciples' understanding. So it is quite right for us to look at the world around us, see what is being said, and then respond in a Biblical way.

Our starting point is a short passage from Moses' last speech to the nation of Israel in Deuteronomy 28: 58–67:

If you do not carefully follow all the words of this law, which are written in this book, and do not revere this glorious and awesome name—the Lord your God—the Lord will send fearful plagues on you and your descendants, harsh and prolonged disasters, and severe and lingering illnesses. He will bring upon you all the diseases of Egypt that you dreaded, and they will cling to you. The Lord will also bring on you every kind of sickness and disaster not recorded in this book of the Law until you are destroyed. You who are as numerous as the stars in the sky will be left but few in number because you did not obey the Lord your God. Just as it pleased the Lord to make you prosper and increase in number so it will please Him to ruin and destroy you. You will be uprooted from the land you are entering to possess. Then the Lord will scatter you among all nations from one end of the earth to the other. There you will worship other Gods. Gods of wood and stone which neither you or your fathers have known. Among those nations you will find no repose; no resting place for the sole of your foot. There the Lord will give you an anxious mind; eyes weary with longing and a despairing heart. You will live in constant suspense, filled with dread both night and day, never sure of your life. In the morning you will say 'if only it were evening' and in the evening 'if only it were morning' because of the terror that will fill your hearts and the sights that your eyes will see.

The writer here sees the problems that Israel would face as a consequence of having left the understanding of God which they once had. These psychological symptoms such as anxiety, fear and so forth that we would describe in modern parlance as emotional problems are the consequence of Israel's sinful behaviour. If we see sin as the Biblical basis for these problems, modern secular psychology has alternative explanations. These alternative explanations can in many respects be summarized in the term 'mental illness'. The term mental illness applies a medical model to these symptoms. In so doing there is the implication that the problems that people have come from outside them. The problems are outside their personal responsibility. Using a medical model for emotional or psychological problems has a very powerful effect on the approach that is taken towards them.

In order to contrast secular psychology and what we call Biblical counselling, I will ask five questions: who are the experts, what is assumed about human nature, how is the task of counselling approached, what is the basis for hope, and what is the aim of counselling?

Who are the experts?

When we speak about professionals who are involved in dealing with mental illness there is a tendency to refer to them as therapists; the field is often called psychotherapy. The term psychotherapy has a professional ring to it and suggests expertise. Psychotherapists claim that their approach is scientific. However, if you examine the field of psychotherapy you will discover that it actually consists of multiple fields. There are different psychotherapies, not just one psychotherapy. This is very different from the rest of medical practice. Cardiology, for example, is concerned with diseases of the heart and blood vessels. It would not be correct to talk of cardiologies. Cardiologists would say that to most clinical problems there is a defined approach. Of course, there is discussion about the fine points and there is always continuing evaluation and criticism for the approach. There is an effort to develop a consensus view. However, it would never be correct to say there are equal, alternative and mutually exclusive approaches to treating someone with a heart attack. Yet psychotherapy is characterized by different, often mutually exclusive approaches. The approach may be behavioural or psychoanalytic. It may be systemic or personal. Imagine being told you had appendicitis and then offered three different approaches to dealing with your appendix. Knowing that appendicitis is potentially dangerous, and that you had to make the choice between having an operation and not having an operation, I think you would find this is a very frightening experience.

It is helpful to look at the question of what makes something

scientific. First, we must answer the question, what is science, and then we can answer the question, are psychotherapists scientific? It is not necessary to be complicated or philosophical because the claim to be scientific can be evaluated on the basis of whether someone can successfully predict a future event. People became intrigued with science when the return of Halley's comet was able to be predicted successfully some seventy-two years ahead of time. The people of a couple of centuries ago said that if this is what scientists studying the heavens can do there must be something to it. This continues to be a way of evaluating a scientific approach. Is somebody a scientist? We can ask whether the mechanisms of nature in this particular area are sufficiently well understood to be able to say what is going to happen following a certain course of action. To diagnose and treat a case of pneumonia a physician ought to be able to predict that you are going to recover if you are given a certain antibiotic and you will not recover if you are given a different antibiotic. An engineer who designs and builds a bridge correctly according to the laws of engineering will be able to predict that it will carry a certain load and that it will not carry a larger load and so the bridge will be built according to certain tolerances. That is what we call science. This does not mean that scientists do not make mistakes. It just means that if they do make a mistake we say their understanding of the underlying principles of nature was inadequate. In general, the scientific enterprise has been very successful and credibility for your approach can be enhanced if you are able to represent it as being a scientific approach.

Can psychotherapists predict the outcome of their efforts? It took a long time to get around to examining this question. Now psychotherapies have been evaluated in a very large study by three authors named Smith, Glass and Miller. In 1980 they published a book which summarises 520 different efforts at evaluating psychotherapy.¹ The main thing that they discovered was that psychotherapy did have an effect. They also discovered that a placebo, that is, a non expert approach to helping somebody, also had an effect. The effect of psychotherapy was not substantially larger than the placebo effect. So it meant that attempts to help people were not invalid or unsuccessful, but that the claim to scientific expertise could not be substantiated. The question of whether psychotherapy was scientific or not was subjected to a number of other tests. In medicine a procedure or a medicine that works is usually associated with what is called the dose response effect. Dose response means that if you give a little bit then you get a small effect and if you give a lot of it there should be a larger effect. The existence of a dose response relationship implies that you actually understand the underlying mechanism and substantiates a claim that you are observing a predictable phenomenon. It was not possible to establish a dose response effect with regard to

psychotherapy. It was not true that a little psychotherapy helped a little and a lot of psychotherapy helped a lot. There was no relationship between the amount of psychotherapy that people had received, regardless of the different approaches, and the improvement or change that might have been associated with them.

Another discovery in this study was that the size of the effect observed, that is, how much people improved, did not seem to depend on whether the 'therapist' they had been seeing was someone who had had a lot of training in psychotherapy or someone who had had a little training. In other words someone in his first year of training could be as successful a psychotherapist as someone who had advanced status and a lot of degrees. A third find was that it was often the characteristics of the patients or clients which influenced most strongly the effect of psychotherapy. If a person was educated and received psychotherapy, he was much more likely to have a good effect from the psychotherapy than someone who was uneducated. Someone in better economic circumstances was much more likely to experience a good effect than someone who was poor. The observation that it is client characteristics which largely determine the outcome of psychotherapy argues against psychotherapists' claim to be scientific experts. There was some evidence of a reverse placebo effect. If people were led to believe that they would get better from the treatment and they did not, they got worse.

The scientific mystique associated with psychotherapy is very widespread. Christians wishing to help others can often be warned away, because, being inexpert, they are said to be liable to do harm. The converse of this view is that psychotherapy does no harm. To summarise the claim of psychotherapists to scientific expertise, I quote the following from *Psychological Seduction* by William Kirkpatrick.³ Kirkpatrick is a Roman Catholic from the United States; here he quotes a British sociologist called Stanislav Andresky.

. . . when a profession is based on well established knowledge there ought to be a connection between the number of practitioners and the results achieved. 'Thus, in a country which has an abundance of telecommunication engineers the provision of telephone facilities will be better than in a country where there are only a few specialists of this kind. The levels of mortality will be lower in regions where there are many doctors and nurses than in places where they are few and far between. Accounts will be more generally and efficiently kept in a country with many trained accountants than where they are scarce.' And what are the benefits produced by psychology and sociology? Professor Andresky continues: 'So we should find that in countries, regions, institutes or sectors where the services of psychologists are widely used families are more enduring, bonds between the spouses, siblings, parents and children stronger and warmer, relations between colleagues more harmonious, the treatment of recipients of aid better,

vandals, criminals and drug addicts fewer than in places or groups which do not avail themselves of the psychologists' skills. On this basis we could infer that the blessed country of harmony and peace is of course the United States; and that it ought to have been becoming more and more so during the last quarter of the century in step with the growth in numbers of sociologists, psychologists and political scientists.'

But this is not what has happened. On the contrary, things seem to be getting worse. Streets are unsafe. Families are in tatters. Suicide cuts off young lives. And when the psychological society attempts to deal with such problems, it often seems to make them worse. The introduction of suicide centres in cities, for instance, is followed by a rise of suicide. Marriage counselling often leads to divorce. And common sense observation tells us that the introduction of widespread public sex education has done nothing to check the increase of unwanted pregnancies, promiscuity and venereal disease. There is evidence, rather, that such programmes encourage premature sexuality with its attendant problems.

It is difficult to avoid the conclusion that the prescription may be causing the disease. 'If we saw,' wrote Andresky, 'that whenever a fire brigade comes, the flames become even fiercer, we might well begin to wonder what it is that they are squirting, and whether they are not by any chance pouring oil on to the fire.'³

Now people will ask about psychiatry, because psychiatry is recognized as a scientific expertise. Psychiatrists mainly offer drug treatment and it has to be said that drugs do affect people's symptoms in the short term. However, it is becoming more and more appreciated that over the long term problems of anxiety are not dealt with successfully by drug treatment. In fact, the Committee on the Safety of Medicines in the United Kingdom has issued guidance to physicians encouraging them not to use tranquillisers when people face short term problems of stress, anxiety, or bereavement, because there is evidence that this is harmful. With regard to antidepressants it is clear now that although they have an effect on depression over the short term, this effect begins to tail off with time. If initially they affect the symptoms of depression, continued administration does not show any advantage over giving no medication. There is good reason for believing that antidepressant treatment alone does not alter the long term course of symptoms. It is a bit like sweeping dirt under the carpet. Initially, this seems to work but over the long term you know what the result is.

Now psychiatry provides a useful social function for people who are mad and need to be cared for. This need is a valid justification for psychiatric service. Whether a medical qualification provides the best preparation for this work is questionable. However, this does not constitute medical treatment in the usual sense. In madness brain damage may also play a rôle. It is also true that drugs used to treat

madness provide a type of restraint which is more humane than the physical restraints associated with the care of madness in the last century. Drug treatment of madness should not be seen as curative in the sense that insulin, for example, is a treatment for diabetes. I have heard that comparison made and I think it is incorrect. Counselees have been told that they must continue to take their medication just like a diabetic must continue to take his insulin. However, madness has not been shown to be due to a hormone deficiency nor has it been shown that these drugs supply a hormone which is otherwise lacking.

The consequence of finding psychotherapy to be not a scientific expertise is that counselling can be done by ordinary people. Counselling can be done by people who have the qualifications, though these are not scientific qualifications. What are these qualifications? It will be our burden to show that the competent person for counselling is the Christian pastor and under his leadership those people who aim to serve Christ. The apostle Paul wrote in Romans that the individuals who were reading his letter were competent to advise one another. 'I myself am convinced, my brothers, that you yourselves are full of goodness, complete in knowledge and competent to instruct one another.'⁴

Now of course this was said in the context of having explained what God had done for his people. It assumes that people have read the previous part of the letter and that they have understood what God has done through His Spirit in the Church. When we understand what God has done and what his word means this can be the basis for competency in giving counsel. I should say that knowing God's Word is not the same as going to a theological college. Once we had a counsellee with a degree in theology from a British university, who had never heard of justification by faith. I do not understand how that can happen. It is like someone getting an 'O' level and not knowing how to read. Competency is knowledge of God's Word as it applies to the sorts of problems that people are facing and the ability to help other people understand and apply it.

What is assumed about human nature?

In contrasting secular psychology with a Biblical approach, we must face the question of what presuppositions about human nature are held. One of the main themes in secular psychology is self acceptance. You may have heard of the book *I'm O.K., You're O.K.* The thesis of this book is when I'm O.K., when I feel good about myself, this is going to permit me to have good relationships with other people. Eric Frome said that in order to love other people, you have to love yourself. These are mild examples of this basic approach in secular psychology with regard to self love. To be emotionally healthy, you have to be able to love yourself.

Now there is more than one kind of self love. There is a kind of self

love which William Kirkpatrick calls innocent self love, a rather good term.⁵ Both the New and Old Testaments talk about loving other people as you love yourself. What does the Bible mean when it says 'love yourself?' It means that you seek your own happiness or you seek your own welfare. There is an assumption that people act in their own welfare. There is probably another kind of self love which is a happiness that exists just because a person is alive. If you walk down the street and the sky is blue and the sun is shining, you say to yourself, 'It's great to be alive.' That can be an absolutely true statement and it represents a kind of self love. These types of self love can be characterized as innocent self love.

Of course, it is possible to love yourself in relationship to other people in such a way as to give priority to your welfare above the welfare of other individuals. The Old Testament commandment to love your neighbour as you love yourself was intended to be a limitation on selfishness and self love. Because this drive to please yourself can be extremely powerful, modern psychology sees it as a resource that needs to be harnessed. People can be taught to love themselves in a very powerful and driving way. This psychological resource can be harnessed to the benefit of the individual. To inculcate a sense of self worth, that is, to instill a motivation for the individual to seek his own happiness, can eventuate in seeking the individual's happiness at the expense of other people. This view may not recognize the element of sin in human personality. It only sees that human beings are good inside. Of course, if one assumes that human beings are fundamentally good, then one's instincts and drives cannot be other than good; anything you want to do must be all right. If the element of sin is not acknowledged why then not do anything that you want to do? Secular psychology may only offer mild limitations on this. So in some psychology there is an encouragement for people to indulge whatever they feel. If they are angry then what they need is simply to provide a convenient, legal way to exercise that instinct. When you're angry, punch a pillow, for instance, or scream. Of course, difficulties people have come from external sources. They are the consequence of how they have been treated in childhood or some other previous experience.

The Biblical approach is a complicated one because it consists of two elements. The first element in the Biblical understanding of human personality is that we are made in the image of God. This is the basis of innocent self love. It is great to be alive because life is the most wonderful gift that God has given to us. He has brought us into being. But we also must understand that our personality has been affected in all ways, in all aspects, because of sin. This is the second element, sometimes described as the Christian doctrine of 'total depravity'. It does not mean that everything about human beings is bad. Total depravity is total in extent not in degree. So every aspect

of human personality has been affected by sin. The Old Testament prophet Jeremiah⁶ says 'The heart is deceitful above all things and beyond cure. Who can understand it?' Jesus taught that it is the things that come out of the heart that make a man unclean rather than the things which he experiences in his environment. 'For from within, out of men's hearts, come evil thoughts, sexual immorality, theft, lewdness, envy, slander, arrogance and folly. All these evils come from inside and make a man "unclean".'⁷ This was the basis of the controversy between the Pharisees and Jesus. The Pharisees had criticized the disciples and Jesus for not using the ceremonial methods of washing their hands before they ate. If one did not follow these practices one was not living the ethical and good life. You were not a good person. The view of the Pharisees is not very different from the idea of secular psychology today. The things that harm you, the things that are bad are things that have come from the outside. Jesus emphasized to them exactly the opposite. The uncleanness does not come from the outside. Anything that is unclean just goes into your stomach and then out. It does not actually touch the truly inner parts. It is in the heart where this uncleanness begins. 'Everyone has sinned and is far away from God's saving presence.'⁸ The Biblical meaning of the word sin implies missing the mark. It is coming short of the glory of God. So ignorance is sin. There are many things which are considered sin. Sin is something which is less than what God intended.

What I want to emphasize here is that secular psychology sees human nature as being fundamentally good and unaffected by sin. You have the selfishness of human beings as a fundamental resource on which they are going to rely. However, in the epistle to the Romans, the apostle, Paul, speaks about 'mortifying' the flesh, that is, 'putting to death' the desires and instincts that are sinful.⁹ Hence what Christians and Biblical counselling sees as an element that must be 'killed', secular psychology will be encouraging, facilitating, and cultivating. It seems to me that this difference about what is assumed about human nature makes a very profound contrast between Biblical counselling and secular psychology.

How is the task of counselling approached?

The approaches of different secular counsellors can vary tremendously and in tackling this question I frankly admit that I am painting with a broad brush. I have no doubt that you will be able to present me with examples of secular psychologists who do not do what I say. Nevertheless, I am going to talk about what have been main themes. There are some trends in secular psychology away from these themes nowadays, but I think what I am going to mention has truly characterized secular psychology in large measure for the past twenty or thirty years and I think we will find when we discuss these things

that they are still true.

The main themes in counselling in the secular world are listening, empathy and support. Now does that not sound familiar to you? How many times have I talked with people like a young lady physician recently who had a personal problem and thanked me for listening. People will often thank you for listening. I remember an advertisement put out by a local Christian counselling service. This was a very fine church and they put out this little circular that said, . . . 'anxious, pressured, confused, seeing no way forward—talking it through might help.' Telephone number and times to call were given. The focus was on talk. The term used that produces this focus is 'non directive'. 'Non directive' counselling means that you do not prescribe for the person. The client has the answers within him and if you structure the conversation in the right way you can encourage the person to discover the answers that already lie within him. It is a case of drawing the answers to the problems out, just as you would draw water from a well. A little bit of lifting has to be done but, fundamentally, it is all there. You just have to use the right approach. The technique of conversation is to rephrase the statements that the counsellee has made into the form of a question. For example, the counsellee says, 'I feel very angry and frustrated this morning because there was a terrible traffic jam on the way and I was afraid I was going to be late'. The Counsellor will then say, 'I understand that you feel very anxious because you were afraid you might be late'. Then the counsellee says 'Yes and I seem to be very anxious about many things. My son is skipping school'. Then the Counsellor would say, 'Well you're really anxious about a lot of things aren't you?'

This approach can actually be computerized because you can teach a computer to take a declarative statement and turn it around and make a question out of it. It is only for the most part altering word order. This has been done at the Massachusetts Institute of Technology. I think the fact that it can be computerized means that it has no intellectual content. In other words what the Counsellor is putting in is no more information than what he has received. The computer cannot think in the sense of contributing new knowledge.

This emphasis on talk in secular counselling has three consequences. The first is that the counselling session is seen as the agent of change. Nothing good can happen if you do not actually go and see the therapist. That is where the real work is done. It is also when the therapist is getting paid! The second consequence of the emphasis on talk is that there can be a tendency not to take the client seriously. This is strange is it not? But where the focus is on talk you do not actually take the person seriously. A very curious consequence. But this is clearly true about much secular counselling. For example, if a client says 'I'm horrible', a natural inclination and response would be 'you're not so bad.' Now it may be that in your opinion things are

not so bad as the client believes. Without further information, however, there is no prior reason for preferring your judgment to the client's. If the client says that he is horrible, that is a statement that must be taken seriously.

An emphasis on empathy and support in association with talk will say 'look on the bright side' or 'I don't think you're so bad.' That is not taking the client seriously. I recall a lady who came to see us who was in psychoanalysis for two years. Her husband was well to do and she must have paid a large amount of money to see a psychoanalyst every week over that period of time. Also over that period of time, her husband was having an affair and this lady was going through a terrible time emotionally. But the psychoanalyst would never discuss it. He would only say, 'Let's discover what happened in your childhood that accounts for your responses.' The consequences of this approach can be tragic and hurtful. The third consequence is that there can be a risk of reinforcing a sinful pattern of thinking or acting. Sometimes people say things which need to be confronted. They are in sin but if you only listen to them or if you only turn around their statement and make it into a question, it may imply approval. Silence often implies approval; this can make things worse. A simple example of what happens is that people who are depressed often feel sorry for themselves. If the client feels sorry for himself and the counsellor feels sorry for the client, this simply reinforces what is a sinful pattern of behaviour. How terrible a circumstance if the individual is depressed. They feel sorry for themselves and they go for counselling and somebody else feels sorry for them. It is just going to make things worse. The counsellee thinks things are bad, the counsellor thinks things are bad, so things must really be bad.

In comparison, what are the themes of a Biblical approach? We would see a Biblical approach as focussing on teaching and admonishing. 'Let the Word of Christ dwell in you richly as you teach and admonish one another with all wisdom.'¹⁰ All scripture is God-breathed and is useful for teaching, rebuking, correcting and training in righteousness.'¹² The word 'rebuking' here is interesting. In Greek it implies gathering evidence for a conviction. So here we have a counsellee coming and your task as a counsellor is to gather evidence for a conviction by using the Word of God. This is what the Word of God will do. The word 'correct' here means to stand up straight. If he is bent over, the task is to stand him up straight.

A Biblical approach is directive. This does not mean that you do not listen. Rather, the focus is not just on talk; you take the individual seriously because you need the facts. You need data. If what you are doing is gathering evidence you have to sift the data. Some may be relevant and some not, but you have to listen carefully and find out what is really happening in the client's life. Listening

becomes active rather than passive. A Christian counsellor was observing counselling at a counselling centre in California through a one-way mirror. The therapist came in to the room where the client was lying on a couch. The client proceeded to talk while the therapist sat at his head and ate an orange. That cannot be regarded as active participation by the counsellor.

The focus is not on the counselling session but what happens between the counselling sessions. This is the time when real change can be expected to occur. The change happens between counselling sessions when the client is involved in his daily life. It may be that homework will be essential. The counsellee must be prepared to be working on things between the sessions; the sessions themselves are used to identify the problems that need to be worked on in between. What needs to be restructured? What is the problem? How can you go about helping a person with it? In Biblical counselling, clients are almost always given homework assignments to work on.

We take the client seriously because if they are involved with sin, sin is serious. Sin is terrible because it separates people from God. People must be taken seriously when they say things which are sinful because their relationship with God must be given priority. This is not just a simple matter of memorizing a few Bible verses with which you hit clients over the head. The sinful problems with which people come for counselling require understanding and commitment. Of course, people must perceive that you are concerned for their welfare. You must love them and that must be communicated to the counsellee. A common response to wrongdoing is to warn the wrongdoer to 'shape up'. A finding of sin as the basis of an emotional problem must not lead to judging them. You are the counsellor, but God is the judge. You are in real sympathy with their problem with sin and you struggle with them in your counselling.

What is the basis for hope?

People who come for counselling are hopeless. This will be the first thing which you must begin to notice: to recognize when people are hopeless and to approach that problem directly. People will be in despair. Often when they come to you they will already have been everywhere else and you are the last resort. They will feel that nobody can help them and that their problem is absolutely unique and difficult. Now what in secular psychology is the basis for hope? Secular psychology offers the competence of the therapist. He may have a series of qualifications. He may have someone else's recommendation. He may be able to offer a technique which is highly regarded. However, the Biblical approach does not focus particularly on the competence of the counsellor.

What is the first basis of hope? It is that the problem is identified as a problem of sin. Now, at first this seems hard. However, if the

problem is fundamentally one of sin it is something that can be changed. God has acted to deal with sin. If the problem is in the environment we may or may not be able to change that. If the problem is something which has happened in your childhood or even before you were born or in your genes what can be done about that? It may be that nothing can be done about it. This is very important because if people are thinking that way, it is a very important cause of hopelessness. When you help them to understand that their problem is sin they can begin to understand that it is the beginning of hope. This is so because we understand that sin can be fixed. The apostle, Paul, wrote,

Do you not know that the wicked will not inherit the Kingdom of God? Do not be deceived, neither the sexually immoral nor idolaters, nor adulterers, nor male prostitutes, nor homosexual offenders, nor thieves, nor the greedy, nor drunkards, nor slanderers, nor swindlers will inherit the Kingdom of God, and this is what some of you were, but you were washed, you were sanctified, you were justified in the name of the Lord Jesus Christ and by the Spirit of our God.¹²

Sin had been a feature of the lives of these Christians living in Corinth, but it had been stopped. Sin has a remedy.

The second part of hope for people who are hopeless is that God is in the problem. We must help people to understand that their difficulties do not arise outside the providence of God. As bad and as impossible as their difficulties may seem, their difficulties have not escaped God's notice and interest. It is his purpose to bring about holiness in their lives. In fact, their difficulty may play an important rôle in bringing this about. Things that are painful may eventuate in 'a harvest of righteousness' as it says in Hebrews 12:11.

What is the aim of counselling?

A secular psychologist will offer better adjustment to society, a better self concept, better coping, or symptom reduction. It is fair to ask, however, whether this is enough. Is just feeling better enough? What about people who have experienced the ecstasy of a heroin fix? Or the sense of greatness and power of a session with cannabis or the real excitement of an extra-marital affair? What are the grounds for choosing between merely coping better and one of these experiences of excitement or ecstasy? Might not the counsellor say, 'It's causing me all kinds of hassle, but, it's really worth it!' Of course, in the Biblical context these experiences are seen as being destructive of the hope for eternal life.

It is interesting to note that in the lives of famous psychotherapists, coping and symptom reduction has not been adequate for their personal experience. Many have experimented with 'religion', though not unfortunately, Christianity. Jung and Eric Frome were

involved in Eastern religion. Carl Rogers at the end of his life was involved in contact with the spirits of the dead. It is said that at many conferences on psychology people talk about astral projection and reincarnation. Encounter groups were a genuine spiritual experience. So even for those people who have pioneered in secular psychology, simply better adjustment has not been enough for them either.

Biblical counselling aims at nothing less than a share in the holiness of God. The Bible describes these changes as big changes. 'Born again' is a phrase that Jesus used to try to describe the scope of what was meant by the Kingdom of God. You start all over again. In another context the apostle, Paul, writes about having a new mind and a new heart.

Conclusion

I have attempted to provide a contrast between secular psychology and a Biblical understanding of emotional problems, emphasizing the aspects where there is conflict. In many fundamental areas the secular and Biblical alternatives compete rather than complement. They are not simply different perspectives; their differences are irreconcilable.

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NOTES

- 1 M.L. Smith, G.V. Glass, and T.I. Miller, *The Benefits of Psychotherapy*, The Johns Hopkins University Press, Baltimore, 1980.
- 2 W.K. Kilpatrick, *Psychological Seduction: the Failure of Modern Psychology*. Thomas Nelson Publishers, New York, 1983.
- 3 *Ibid.*, pp. 32–33.
- 4 Kilpatrick, *op. cit.*, p. 44.
- 6 Jeremiah 17:9.
- 7 Mark 7: 21, 22.
- 8 Romans 3:23.
- 9 Romans 8:13.
- 10 Colossians 3:16.
- 11 II Timothy 3:16.
- 12 I Corinthians 6:9.