

Let Me Draw You a Picture

By Garrett Higbee

Have you ever surmised, when facing a new counselee, that he or she has been to other counselors before you? The evidence? The counselee describes his current plight in purely clinical terms, or asks knowingly about a specific medication, diagnostic label, syndrome, or popular therapy. You suspect that he has identified his own “syndrome” and is now describing it for you so that you can “fix” it.

Many counselees have been clinically diagnosed, self-diagnosed, and even have multiple diagnoses before you ever meet them. They marvel that a popular talk show host, or the latest psychological self-help best seller, has put their unique experience into words. In our postmodern culture, counselees desperately search out, and put great hope in, concrete descriptions and labels that seem to describe the pain they experience. These labels, at least, give some hope for a solution and temporary relief from their pain and suffering.

Counselees are not the only ones affected by a psychologized society. The views and philosophies of post-modern thought even affect counselors who consider themselves to be biblically solid in their approach. Secular media and culture permeates our minds like carbon monoxide or radon gas insidiously creeping into our homes. Movies, news stories, books, and events that happen around us, must be handled as the Bereans handled Paul’s teaching in Scripture. Those who counsel must ask, “How does this theory or approach line up with the Word of God? When someone comes to us for help or counsel, we should not be surprised or contentious if they use psycho jargon or

popular cultural labels to describe their problems. Our challenge is to help him or her to think of the Bible as a life compass that is relevant and applicable to their everyday life.

Reframe the Experiences of Counselees

As biblical counselors, we have an opportunity to reframe the experiences of these counselees, by giving a new interpretation to their presenting problems, and laying a biblical template over the psychiatric diagnostic labels. We can transform these categories of psychological syndromes into the heart language of Scripture.

I often hold up the Bible like a pair of “holy binoculars” to illustrate their need to reinterpret problems from a biblical set of lenses. God has revealed that trials are common to man. He has His finger on the everyday ebb and flow of their life, as well as on the way out of their emotional, psychological, and spiritual rut (1 Cor. 10:13). This biblical approach not only changes the way our counselees view their problems, but gives them responsibility for changing their problems. Biblical counselors do not simply dispense truth. Instead, we help our counselees develop an accurate perception of self, others, and ultimately God. We offer the advantage of spiritual appraisal appealing to their position in Christ. We bring them to a place where they can identify God’s view of their problems (1 Cor. 2:14-16).

Theories of humanistic change often ask the wrong questions and organize information around false presuppositions (Col. 2:8). Questions often are signposts to solutions. Sin is not seen as sin, and “God substitutes” are touted as solutions. Even the average church attendee is confused about the relevance of Scripture to life experience and to deeper psychological problems. It is exciting to see a counselee let go of worthless idols (Jonah 2:8) such as immediate relief, a “feel good” gospel, and “felt need” fulfillment, and ask questions such as, “Where God is in my struggle? How does God look at my most difficult circumstances? Is He still sovereign? Is the counselee

responding in faith? Is his situation dysfunctional, or is it the result of sin? What is the proper God-honoring response to this trial? Where does real contentment come from?"

God is the Ultimate Heart Surgeon

I would like to draw a picture that illustrates how God has always been aware of man's greatest needs and how He has simple, yet profound, language of the heart to describe our "diagnosis" and ultimate healing. God's Word discerns the thoughts and intentions of the heart (Hebrews 4:12). The Bible, in fact, speaks to all matters of life and godliness (2 Peter 1:2-3) either directly or in principle. Biblical narrative and language is different in many ways from today's clinical verbiage of the social sciences, yet there are similarities. The commonalities point to the fact that some truth is self-evident through general revelation.

The wise counselor knows that he is not immune to the allure of an alternate gospel of pragmatism, cheap grace, or self-help. It is good for the counselor to be aware of, and comment on, the temptation to compromise faith building perseverance, or to look for quick fixes that might circumvent spiritual insight and character growth. It is hard work to hold up a biblical worldview in our dialogue with counselees when they are in the midst of trials and suffering. However, as we become true to a biblical worldview toward counseling, the deep questions of etiology, epistemology and anthropology increasingly orient around the truth of Scripture. What is the cause of our grief and suffering? How has "what you know" been changed by growth in your relationship with Jesus Christ (Ephesians 4:17-5:21)? What is man's greatest problem and how do we go about "addressing" it? What is true knowledge? What is "human nature"? These critical questions must be asked and answered as we engage our counselee in discussion.

Philosophers of old, and more recently social scientists, have espoused numerous ideas and theories about human motivation, personality, and behavior. Most of these theories are devoid of

anything spiritual, let alone the one true gospel. In some ways, however, they do reveal glimpses of God's truth. In spite of their anthropocentric perspective, or perhaps because of it, we as Christians grow stronger in our conviction that our hope is built on nothing less than Jesus Christ and His righteousness. Any other approach leaves us on a never-ending search for self-significance. By way of general revelation, God has revealed both His wrath and His grace (Romans 1:18-23). We were born to worship, to desire understanding, to be relentless in our pursuit of "happiness". A key question becomes, "How do we, as counselors, take full advantage of these God ordained crises of meaning and purpose to point our counselees toward Christ?" Social scientists are great at defining terms and illustrating patterns of behavior. Their discipline presents cogent theories to explain behavior and personality disorders. We, as biblical counselors, would be wise to develop an analog language using a persuasive apologetic rich in biblical narrative and personal testimony. As the counselee shares his or her story we can draw them into the greatest story ever told.

Bridging the Gap between Psychological Terms and Heart Terms

It seems the more "biblical-based" the counselor is, the more hesitant he is to use psychological description or empathetic illustrations, thinking this might threaten his credibility as reliant on the Scriptures as the sole source of truth. Although we do not want to legitimize secular labels, we can intelligently comment on psychological terms. However, it is imperative that we bring the counselee to realize how God looks at their condition. The counselor can powerfully bridge concepts, then carefully shift the counselee's worldview from a popular, worldly perspective to one that is more Scriptural. In essence, we pivot one foot in the counselee's experience and interpretation of the world, with our other foot planted solidly on a biblically informed view. Oswald Chambers, almost a century ago, stated: "What we need today is not a new gospel, but live men and women who can restate the gospel of the Son of God in terms that will reach the very heart of our problems". That has never been truer than it is today.

Pop-psychiatry and self-psychology join a long list of historical humanistic philosophies and alternative religions that have seriously opposed the biblical account of creation and salvation. Church history, replete with fads and movements opposed to solid doctrine, reminds us that unbelief is the greatest threat to our personal walk, our family, and the church. In the last two centuries the rise of humanism has created a more obvious need for winsome apologetic and wise ministers of the Word of truth. We can not afford to develop this apologetic out of insecurity or reactivity to pop-psychology. Unfortunately, instead of developing a persuasive spiritual alternative many pastors in the 21st century have abdicated the personal side of their ordained role as shepherd of the sheep and the “private ministry of the word”. Rather than equipping the “priesthood of believers” to meet the growing need for soul care in the flock, many church leaders refer their people to what some might see as a more “postmodern priesthood”, the professional counselor. We, as the church of Jesus Christ, must take responsibility for our part of this “crisis of caring” that has left many of our walking wounded going elsewhere for help.

Blueprint for Life: The Living Word of God

This article is an initial attempt to illustrate that biblical counselors have had the answers all along. We are “competent to counsel” even severe emotional and character problems through the spiritual discernment given by the Holy Spirit and the Word of God. The life giving Gospel of Jesus Christ is superior to man’s best attempt at diagnosis, and the living Word does more than describe sets of symptoms. It gives redeeming hope for man’s deepest afflictions. However, before we conclude that all psychological problems are the result of personal sin, we need to acknowledge that some behavioral and emotional problems are of organic and biological origin. We would be wise to work with a trusted physician to rule out or appropriately treat medically related conditions. Even so, no matter what the origin of your counselee’s problems, they need hope, to discern what is true. They need a compassionate paraclete who will lovingly warn, encourage, and help them, while being patient with everyone in their care (1Thes. 5:14).

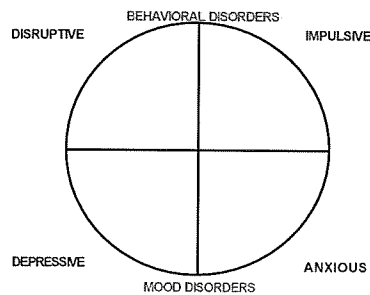
Sufficiency of Scripture vs. Secular Psychology

Although it is acknowledged that there is a “continuum of counseling philosophy” even among Christians, we will be looking at two extreme views: depending on the sufficiency of Scriptures for counsel, or the secular view that deems the Bible to be irrelevant to understanding man’s problems. Biblical Counselors have the Bible, God’s inspired Word; our secular counterparts have the Diagnostic and Statistical Manual of Mental Disorders in its fourth edition “with text revision” (DSM-IV-TR). The truth of the Gospel never changes, always points north, and is inerrant (2 Timothy 3:16). The secularist’s truth is a gospel of sorts, but it is always changing, and although more popular with the masses, it is devoid of true wisdom and any long lasting heart changing answers. Scripture describes the same kinds problems as the DSM-IV-TR, but from a different interpretive lens. It is at the prescriptive level that the change agent and solution are profoundly antithetical. This is the critical point where data gathering moves through interpretation into prescribing solutions using careful and wise suggestions and relevant assigned homework. This poses the question “Now that we know what the problem is, what do we do about it?” Many Christians struggle to reconcile physical, psychological, social, and emotional factors with Scripture. The wise counselor does not avoid this struggle but embraces it. We constantly remind our selves and the counselee that the “Spirit of truth” was left as our Counselor (John 14: 16-17) and the Word as our guide to man’s deepest needs (Hebrews 4:12).

“Root” and “Fruit” and the DSM-IV-TR

Through the written word, God labels specific sins of the heart, both at the “root” and “fruit” level. Secular counselors can only describe the outward fruits, the behavioral and emotional manifestations, of these heart directions. The “diagnostic criteria” used to label today’s consumer of mental health services is very illustrative and often quite accurate in describing behavioral symptoms. To make comparisons between biblical language and diagnostic descriptions easier to

see, we will develop a template to compare and contrast secular descriptions with biblical labels for understanding some of man's most common problems. Picture in your mind the distinct differences, and yet similar nuances, between the biblical language of the heart and its descriptor "fruit", with the symptom language of secular diagnoses.

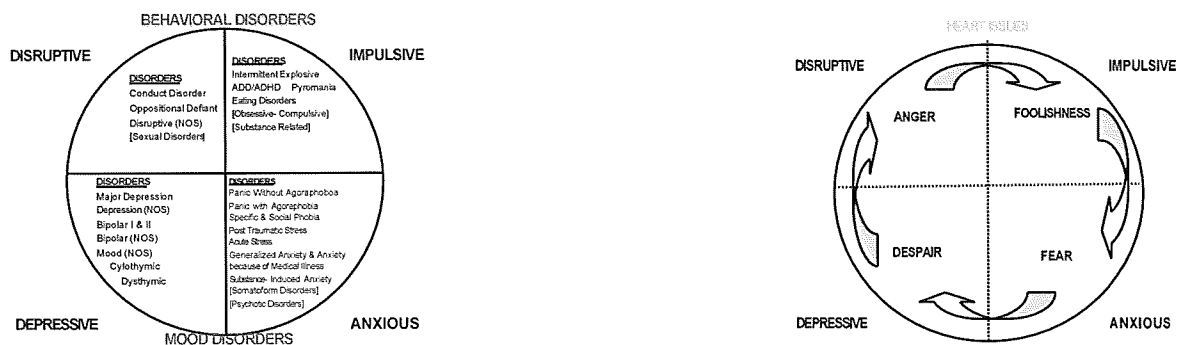


The DSM-IV-TR uses a categorical classification to divide mental disorders into types based on criteria sets with defining features. The therapist assesses the counselee's problems and puts them into a "multiaxis diagnostic system". The first axis consists of "clinical disorders". These would be the diagnoses most familiar to us, and will be the focus of this article. Many of our counselees might relate to these common issues such as depressive disorders, anxiety disorders, substance abuse, and conduct disorders. We will start by building a model where the majority of "clinical disorders" in the DSM-IV-TR are divided into four broad categories: disruptive disorders (include character and conduct problems that bring tremendous social and relational distress); impulsive disorders (typified by those who "do not think of the consequences before they act"-- such as "attention deficit" and "addicts"); depressive disorders (includes both unipolar and bi-polar "patients" at various levels of dysfunction); and anxiety-based problems (panic attacks and generalized anxiety that have the potential to paralyze interpersonal relationships). The first two categories are often called "behavioral" disorders due to their outward manifestation. The second

two categories are described as “mood” disorders and manifest in symptoms that are more affective and often less observable. We will use the four quadrant model above to organize and compare the DSM-IV-TR diagnoses and four common directions of the heart of man.

To simplify the overwhelming amount of diagnostic information and intimidating complexity of mental health literature, this model uses the most common personal and interpersonal issues that both social scientists and biblical counselors identify that plague mankind. The model will illustrate both God’s descriptions of emotions and behavior and psychological diagnostic categories in order to compare, contrast, and organize these most common issues of man. By no means is this proposed model exhaustive. On the contrary, it is an oversimplification of both the psychiatric model, and more obviously, of the infinite wisdom that our Lord brings, as He illumines man’s dilemmas at the heart level.

First, let’s insert a sampling of DSM IV-TR diagnoses that fall into the various quadrants.



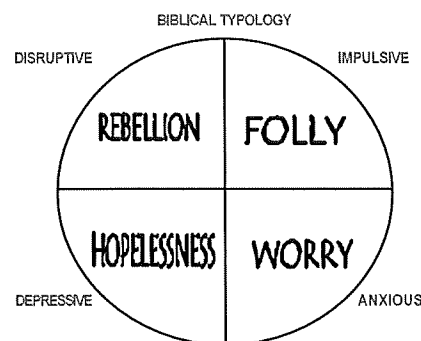
The diagram on the left is simply a collection of all the diagnostic labels that fall under the broad categories described earlier. As you can see, these groupings of diagnoses differ only by severity or specific behavioral manifestations. The heart issues diagram on the right begins to organize the “biblical equivalents” of these secular labels into broad categories described in scripture and usually

attributed to the heart or “inner man”. The psychiatric model typecasts the counselee into rigid classifications or labels. The biblical model acknowledges that we may find ourselves as most characterized by one heart direction, as seen in the quadrants above, but we may “visit” the others with varied frequency. Particularly during trials, we might find ourselves vacillating between and through all four quadrants. Although the heart is desperately wicked...beyond the ability to fully understand (Jeremiah 17:9), God’s Word describes in detail some of the sin that deceives us. There is a direction of the flesh, a besetting sin, a familiar flesh pattern that “so easily entangles” most of us. It is our job as counselors to draw this out (Proverbs 20:5) and apply the Word restoring the counselee with the heart attitude of one who is “spiritual” (Galatians 6:1-2). The diagram on the right (above) illustrates how anger, foolishness, despair and fear are some of God’s “heart diagnoses” and are the Great Physician’s labels for man’s most common struggles as a result of “original sin”. For our discussion we will stay with these four primary problems for which people often seek counsel.

Biblical Heart Directions

Heart directions show up in a variety of ways, but inevitably they cause interpersonal strife and personal suffering. The four broad secular categories, diagnostic labels, and even many psychological theories are varied descriptions of these common struggles of the flesh. The Creator does not refer to the DSM IV-TR for new ideas or validation, nor do we. However, it would do us good to study the Scriptures seeking to understand how God describes fear, anger, impulsive actions and despairing thoughts. The Father of all mercy and compassion want us to be sensitive, relevant, and precise in our ability to give hope to the suffering. The psychiatric task force carefully compiled their “diagnostic Bible”, and they illustrate many “sin patterns” with great detail. If we don’t have biblically sensitive and poignant illustrations and narrative to describe our counselee’s condition, we may lose the majority of our psychologized, and might I add “psychiatrized”, counselees.

As we re-orient ourselves biblically, renew our minds, and guide our counselees in understanding why psychology *seems* to make so much sense, we also de-mythologize this false interpretation. The truth in Christ directly points at the heart, transcending situation or state of being, and helps us see through the excuses. These excuses are most often not a disease, or predetermined intractable traits from our genes, or other determinants, but characteristics of our particular flesh patterns that manifest in word and deed, and, most importantly, originate in the heart (Luke 6:45). Our trials and conflicts just squeeze out our own particular challenge of the flesh. The diagram below illustrates four common biblical labels for manifestations of a heart that has gone unchecked in the area of anger, impulsivity, despair or anxiety. These become habitual sin issues that undermine our beliefs and eclipse our faith. God gives us tremendous grace, but He makes no excuse for sin. In fact, the Bible has sobering words for those who continue to deliberately grumble against His authority, who chase after their evil desires, who give in to greed or other temporal concerns, and/or distrust His provision and sovereignty.



Looking back at the four categories of the DSM-IV-TR, we can now see that some of the labels are illustrative of the four major heart issues, or “directions of the flesh”. Anger, acting in rebellion against God, is at the heart of disruptive disorders. Foolish thoughts turn to foolish actions, the “heart” of impulsive disorders. Fear, of something or someone else other than God, brings worry

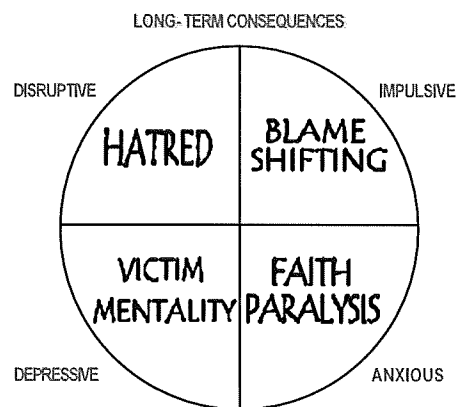
to the center of our mind and experience. Lastly, despair leaves a counselee forgetful of God's providence. This leads to hopelessness, a major symptom of clinical depression. Although social scientists have done well at categorizing human dynamics, Christians must go beyond symptoms and behavior in an attempt to reach the heart. The following illustrations graphically picture the "attitudes" of an unrenewed heart in these four categories.



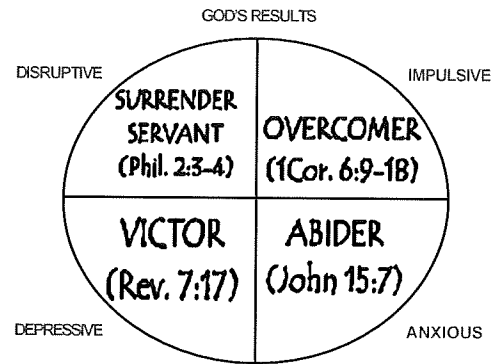
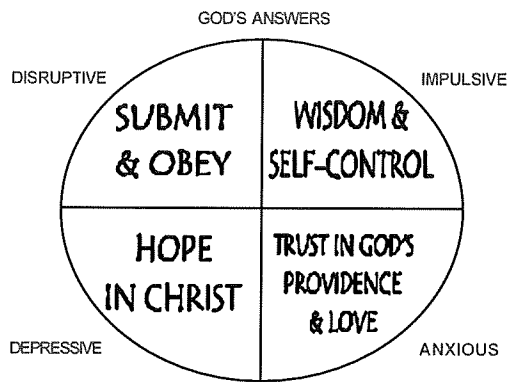
Long-term Consequences of Heart Issues

Bondage, darkness, and desperation burden these pictured hearts. In Ephesians 4:22-24 we are called to be transformed by the renewing of the mind. Otherwise, emotions and subjective perception become our only source of truth. In time, long-term consequences wreak havoc on our ability to serve, and sidetrack us from putting others before us, and loving fervently. Instead, in our anger we begin to avoid fellowship, replacing benevolence with jealousy and envy. In our foolishness, blame shifting defeats personal responsibility and the appropriation of the characteristics of Christ. In our fear, we are led to an unbelieving impotence, instead of growing and changing through our trials. Finally, our faithless despair leaves us with a victim mentality, fulfilling its own

prophecy that no one cares, and this leads to the alienation of our friends and family. Others quickly recognize and label us as hotheads, addicts, victims of depression, worrywarts, or worse, psychotic. There is little personal responsibility for spiritual growth, or hope for true change, in an identity with these labels. With only a “remodeling” of our flesh, we end up numbing the pain or hiding the attitude with no lasting “renovation” of the heart. In time, the root of sin springs to life again. Our heart direction then becomes a life-dominating sin pattern that characterizes how we react to most things, or it becomes our excuse for everything. Building on our model, the long-term affects correspond as follows:



It is at the point of considering solutions that the psychiatric and biblical models profoundly differ. Secular counselors chose from a variety of theories of change. They may address behavior, cognitions, and/or emotions in attempt to decrease symptoms or personal pain. Although often motivated by merciful intentions, secular therapists only offer temporary change, distraction, and anesthetic relief. God’s answers are eternal, and His purposes move us to direct our counselees to His promises and His timeless answers to man’s problems as shown below:



As we help our counselees see God's agenda and illuminate His redeeming plan for their lives, they begin to say "no" to what previously it seemed they could not control (Titus 2:11-15). Godly sorrow and true repentance come as counselees understand that their symptoms rise out of their own hardened heart (2 Cor. 7:9-10). Then they can see that faithless decisions and actions as much more than social disruption or personal dysfunction—but as deliberate sin against Jesus Christ, the one who died once and for all for their sin (Hebrew 10:26-29). Only then, as ambassadors for Christ (2 Corinthians 5:20), can we hone in on specific heart issues and encourage the development of godly habits to replace the counselee's character weaknesses. The counselee "puts-off" rebellion, folly, worry and/or hopelessness, and "puts-on" obedience, wisdom, self-controlled conduct, hope, and trust. The truth of the Gospel brings reconciliation to broken relationships, healing to wounded hearts, and ultimately, eternal life. This new conceptualization points to the only real answer – the cross of Christ. There is no hope except in the redeeming blood of our Savior. In contrast, other psychological methods and theories may hint at reconciliation and healing, but they are void of the life-giving truth. Denying humanistic reason and worldly wisdom, and forsaking this "alternative gospel" (Galatians 1:6-7) enables the counselee to focus on the superior benefits brought by being a disciple of Christ (Matthew 16:24-27).

We are all on a journey together to discover what it means to be truth informed, Christ-centered, and stewards of the manifold grace of God (I Peter 4: 7-11). In our own personal pursuit of holiness, we bring wisdom (James 3:13-18) to the shipwrecked, to the castaways, and to those left high and dry in a desolate land. Only God, in Spirit and Word, can quench the thirst of a parched soul (John 4:10).

Though seductive, psychology's explanation of man's problems leaves us lacking in the depths of our being. An inherent danger is present in the wake of temporary relief that modern prescriptions and solutions provide. There is the risk that our counselees will start "feeling" better, buy into a label, or become dependent on a chemical restraint. Ultimately, this is at the expense of glorifying God, growing in Christ, and receiving the Holy Spirit's comfort (Col. 2:20). In a desperate attempt to relieve pain, reduce symptoms, and assuage the conscience, our colleagues and their counselee's race right past the Triune God. We know Jesus is the answer, but it is also our job to stand at the crossroads of counselee's lives and compassionately warn them of the futility of any other road (Hebrews 10:23-24; 1 Peter 3:13-16). Our compass is different, but the journey is familiar. As we struggle with counselees, opening God's Word, and praying in the Spirit, they receive grace to see their heart and life through a new set of lenses. "Blessed be the God and Father of our Lord Jesus Christ, the Father of mercies and God of all comfort, who comforts us in any affliction..." (2 Corinthians 1:3-4).

In this last diagram, helpful Scripture verses address the corresponding heart issues of anger, foolishness, fear, and despair. May God bless your ministry as you develop a life and language that speaks to the heart of your counselees.

