



# CHRISTIAN PSYCHOLOGY

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*Acceptance and Commitment Therapy: Christian Translation and Response*

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*Acceptance and Commitment Therapy: Christian Translation and Response*

# CHRISTIAN PSYCHOLOGY

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# CHRISTIAN PSYCHOLOGY

## LETTER FROM OUR GUEST EDITOR

To our readers who are interested in how Christian psychology approaches contemporary therapies, we hope you find this volume helpful and productive.

The third wave of cognitive-behavioral therapies, including Acceptance and Commitment Therapy (ACT), differ from traditional cognitive therapies by focusing on the process and function of thoughts and feelings rather than their content (Hayes & Lillis, 2012). This shift in emphasis among these third-wave therapies also involves the practice of mindfulness, a present-focused practice with roots in Zen Buddhism. ACT integrates elements of the ancient Zen worldview with the modern application of relational frame theory (RFT), which maintains that “cognitive actions and their functions are controlled by contextual cues established as meaningful on the basis of one’s history” (Hayes & Lillis, 2012, 22). This marriage of the ancient and modern has grown increasingly popular as a mode of psychotherapy. Moreover, it also contains elements that are congruent with a biblical worldview. Dr. Timothy Sisemore has offered a compelling translation of ACT into a Christian framework. Sisemore is intentional in using the term “translation” to describe his effort, drawing on Johnson’s (2007) use of the term to acknowledge that often domains of knowledge have their own dialects and, as such, require translation from one domain to the other. Respondents to Sisemore’s work include Fernando Garzon, Hans Maduame, Mark McMinn, Phil Monroe, and Winston Smith.

May you be built up and encouraged in Christ,



Kevin J. Eames, Ph.D.  
Guest Editor,  
*Christian Psychology*

Johnson, E. (2007). Towards a Philosophy of Science for Christian Psychology, *Edification: Journal of the Society for Christian Psychology*, Vol 1, 1, pp. 5-20.

Hayes, S., and Lillis, J. (2012). *Acceptance and Commitment Therapy*. Washington, DC: APA.

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Lydia Kim-van Daalen  
Managing Editor,  
*Christian Psychology*

# Acceptance and Commitment Therapy: A Christian Translation

Timothy A. Sisemore

*Richmont Graduate University*

*Pressure is mounting on Christian counselors, particularly those working under licenses, to use methods that meet criteria for being evidence-based. Even non-licensed counselors do well to draw from the best of scientific methods to provide the best counseling possible. Johnson (2007) has proposed translation as opposed to integration as a model for developing Christian approaches from ones framed in the scientific community. Given the compatibility of Acceptance and Commitment Therapy (ACT) with Christian thought, a translation approach to this is offered. Core terms from ACT are considered, evaluated, and translated into the “Christian dialect”. These form the basis for an initial step at a complete Christian-accommodative translation of ACT, and a simple case is used to illustrate how this would be applied.*

*Keywords: acceptance and commitment therapy, Christian translation, functional contextualism, mindfulness, relational frame theory, suffering, values-based counseling*

Ours is a day when the relentlessly accelerating pace of life, the breakdown of family and community bonds, and heightened anxieties on every side make counseling – even for Christians – a more common need. Yet those searching for wise Christian counsel confront a cornucopia of options. While the ways of relating Christian faith to counseling have been organized into five basic genres (Johnson, 2010; Greggo & Sisemore, 2012), there are in reality innumerable iterations of how “Christian counseling” may be conceptualized or delivered (for an example of this variety, see Appleby & Ohlschlager, 2013, who detail numerous Christian approaches to counseling that range from more charismatic approaches to those incorporating religious research). Christians counseling in a variety of contexts ranging from churches to professional clinics, and one’s view of what makes counseling “Christian” may impact where one chooses to counsel, or conversely be impacted by it.

For those who counsel under the authority of a state license, the methods used are increasingly coming under the constraint of doing what is demonstrated by empirical research to be effective. The so-called empirically-supported treatments are to be used in what is termed evidence-based practice. Worthington, Johnson, Hook, and Aten (2013) present this important issue and examine the state of the craft as to empirical support for Christian approaches to counseling. It is a valid point that Christians who want to be more overt about their faith in counseling will need to be clear that there is scientific support for their methods if they wish to receive sanction from the state and reimburse-

ment from insurers. Unlicensed counselors also may do well to pay attention to what research says about what is effective in counseling – even though obviously it will not be explicit about the power of God in the counseling office. God often works through means, and science may supply some of the means through which God intervenes in counseling.

There is one form of therapy that is not covered in Worthington et al. (2013) that merits more thought and research: Acceptance and Commitment Therapy (ACT; this is pronounced as a word “act” and not as A-C-T). The omission may be due to the fact that Christians, to my knowledge, have not written on this treatment approach (Tan, 2011, being an exception in a few paragraphs on the topic), nor presented a model for a “Christian-Accommodative ACT”, to coin a term in the spirit of some of the contributors to the volume on evidence-based Christian therapies (Jennings, Davis, Hook, & Worthington, 2013; Walker, Quagliana, Wilkinson, & Frederick, 2013). To do so would imply developing a Christian iteration of a secular therapy (thus “accommodating” the therapy to Christians) and doing outcome research on it.

Why should Christians consider Acceptance and Commitment Therapy? I often think of processes in terms of their means and ends, and ACT fits both of these. Many psychotherapies conflict with Christianity in terms of their ends – what “mental health” looks like anyway. These approaches were born out of humanism in some sense, and thus promote individual growth and self-actualization while de-emphasizing the spiritual. While there are some parallels with

this and sanctification for Christians, the humanistic approaches generally assert that personal autonomy is the key, running contrary to Christian doctrine. Also, many psychodynamic approaches still echo the blatant anti-religious bias of Freud and thus consider faith to be a substitute for authentic individual health.

It is not surprising, though, that the two accommodative therapies above (Jennings et al., 2013, and Walker, et al., 2013) come out of the cognitive-behavioral tradition. It is, in large part, freer from philosophical prejudices against Christians aside from an empirical “agnosticism” regarding things beyond the scope of science. While some in this tradition, Albert Ellis being the most outspoken, have seen religious belief as a crutch, overall it is more open to Christian thinking and behaving that promotes health and well-being. Like most therapeutic approaches, however, it has been more concerned about getting rid of bad thinking and behavior than about goals that promote human flourishing. Again, Cognitive Behavioral Therapy (CBT) easily adapts its techniques of clarifying thinking to biblical notions of proper thoughts.

The “means” of psychotherapy are the specific techniques, and many of the techniques of various therapies can be used independent of the overall models without running contrary to Christian belief and practice. For instance, the accurate listening skills of humanistic psychology are considered in the model to be sufficient for change as the power is within the person to make changes once he or she experiences such acceptance. Yet, these skills can be helpful to Christian counselors without the assumption that they are sufficient for change aside from the power of the Holy Spirit or other counseling interventions.

In all my years of practicing, teaching, and writing, no secularly rooted model of therapy has seemed to offer such a readily apparent “fit” for Christians as ACT, both in terms of its ends and its means. ACT offers a view of life that is about pursuing valued ends, not just getting “over” unpleasant emotions. Thus for Christians, counseling leads to a freedom to pursue the valued goals (or ends) of the Christian life. ACT concedes that there is inevitable suffering in life and but argues that such suffering is not to deter us from our goals. There is much here that matches the New Testament’s depiction of a life of following Christ. Thus, it is time for ACT to receive more attention from Christians in our literature as it is both strong empirically (e.g., Öst, 2008) and compatible theologically.

Given this lack of research and writing, I offer the current article as a place to begin. I will not offer a “Christian-accommodative ACT” as it requires both a model and then experimental support for the model. My goal is only to lay out a “translation” of ACT that demonstrates how it can be comfortably used by Christian counselors in that translation. This is a first step toward a fully Christian-accommodative ACT.

ACT is not a step by step approach to counseling, and so reviewing the concepts and major strategies as I do in this article may sound fairly abstract. There are a number of helpful videos and articles on the website of the Association for Contextual Science ([contextualscience.org](http://contextualscience.org)) for those interested in how ACT looks in practice.

The plan to do so begins with a description of what a translation of a secular “text” looks like, focusing on the four steps of comprehending, evaluating, translating, and then composing a new text (Johnson, 2007). We will consider some of the core concepts underlying ACT and put them through the first three steps, then conclude with a brief look at what a translation of ACT might look like. A fleshing out of this and then empirically testing of the model would remain as subsequent work to develop this into a Christian-accommodative version with direct empirical support. However, there is enough flexibility in the ACT techniques that I believe one can practice this version of ACT as evidence-based even prior to the additional work.

### **What is A Christian Translation?**

While often Christians have sought to address secular therapies for an integrative approach, loosely connecting pieces of the psychological theory with Christian theology, a Christian Psychology approach to assessing a secular therapy is sometimes called translation. Johnson (2007), inspired by this approach in philosophy (MacIntyre, 1988, 1990), proposed this alternative as a way for Christians to communicate with psychology given the differences between them. Johnson argues that psychology and theology are different linguistic communities, each having a distinctive literature. Much like languages, these literatures have different terms with different contextualized meanings that differ from each other in important ways. For example, what a psychoanalyst means by the “ego” is not the same as what the Apostle Paul means by “the flesh” or “inner man”.

For translation of texts to occur, a person who is literate in both languages is required. Johnson (2007) sees this as a little less formidable given the common discourse between the two, so opts for the term “dialects” instead of languages. For most Christians in counseling (other than biblical counselors), literacy in psychology is greater than in theology due to training and so they may think psychologically more naturally than theologically. So, it is with some trepidation that I claim to offer a translation scheme, having a higher degree in psychology than I do in theology. Having read a considerable number of texts in Christian theology, I believe I can consider it to be my “first dialect” (Johnson, 2007, p. 229), or mother tongue. That makes psychology my second dialect. The goal, then, is to understand what psychology’s authors mean, but

from the standpoint of the first dialect of Christian theology.

The translation process itself has five major steps. *Comprehension* is the process of understanding the psychology text as intended by the author. For the current project, I must understand ACT accurately from the purview of its developers and researchers. Once this is accomplished, *evaluation* follows – reading the text in light of one’s first dialect. The Christian here is sensitive to the naturalistic foundations of psychological science and how they might differ from Christian epistemology.

Once this is done, *translation* occurs. This may be done in three different ways, depending on the distance of the text from the native language of the translator. Transliteration is the simplest strategy, where “the concepts and constructs in the second dialect have no correlation with the first or native dialect and are simply imported into the native dialect” (McFee & Monroe, 2011, p. 319). An example would be anorexia nervosa, a term for pathology that has no comparable Christian term. Same-saying, or paraphrasing, (Johnson, 2007) is a second method and is used when terms are similar but nuanced in the different dialects. For instance, social support in psychology is somewhat akin to fellowship in Christian language. Great care must be taken here to elucidate the differences in meanings in the differing terms. Other terms will be even less similar and require interpretive glosses and explanations to be understood within the meaning-system of the native tongue.

In the most difficult cases, terms will simply be incommensurable and untranslatable, with the notion from the second dialect seen as inaccurate or seriously misleading. A new term may have to be substituted following a critique of the original construct. Johnson cites the idea of self-actualization as an example, with the Christian ideal of maturity differing dramatically from Maslow’s (1968) notion of the human ideal. The reader may notice that these progress from the least incompatible to the most.

Once the text is thus translated, the next step is *transposition*, explaining it in terms of the “higher level” meaning in the new context, typically the ethical or spiritual significance of the idea. Finally, these interpretations are put together in *composition*, a new Christian text.

It is too big of a project for one paper to accomplish all of this, so in the pages that follow we will cover the first three steps and take a few initial steps towards transposition by putting together a Christian-focused model of ACT.

### Translating Core Constructs from ACT

ACT is a third generation treatment in the cognitive-behavioral tradition, following the original behaviorism and the cognitive-behavioral generations and

joined by approaches such as Dialectical Behavior Therapy and Mindfulness Based CBT in this new group. As such, its roots lie in those theories, but it has expanded to incorporate a variety of other important constructs and techniques. Reviews show the treatment to be effective in reducing symptoms (e.g., Hayes et al., 2004; Öst, 2008), and the literature is proliferating rapidly (Hayes et al., 2012) as it is effective across a wide range of psychological problems. We will examine some of the pivotal ideas in ACT and how we might translate them before putting the model together as a whole, doing so through the steps of comprehending, evaluating, and translating.

### Functional Contextualism

**Comprehending.** One of the strengths of ACT is its completeness as a model. It does not just assemble some techniques as if from a buffet, and then test to see whether they work. Rather, it works deliberately from a philosophy of science down to the specific techniques chosen in light of that philosophy.

ACT works from a derivative of “radical behaviorism” (Törneke, 2010) called functional contextualism (Gifford & Hayes, 1999). This might best be understood by contrasting it with what might be called mainstream philosophy of science (Hayes et al, 2012). Most of science is categorized by elemental realism, with truth being a correspondence of our ideas about the world and its parts to the world as it properly is. It is an understanding of the mechanisms of the world as it actually is. Thus, CBT might work with a person to bring irrational cognitions into line with the true logic of situations as they exist objectively. Such approaches work from the notion that “we need to know what is real and teach our clients to do the same” (Hayes et al., 2012, p. 30), though CBT may be influenced by functional contextualism more than it admits, teaching them to think in whatever ways may make them feel better.

In contrast, functional contextualism is not concerned with objective truth as such, but with truth as it occurs in an ongoing act-in-context. The whole event is primary, including the context in which it occurs. The nature of the act is assessed by its relation to its intended consequences. If a person is going to a grocery store, the “going” is the context. One might drive, walk, or ride a bike. One might alter directions due to a roadblock, but the act as a whole is judged by virtue of the intended goal: reaching the store. In this, outcome goals are not evaluated, but simply owned for what they are (Hayes et al., 2012), and those things are true which support movement toward that goal. In short, “contextualism” refers to the need to understand a behavior in relation to its setting, and “functional” points to the aim, or function, of the behavior (Törneke, 2010). For the client, then, “what is true is what works” (Hayes et al., 2012, p. 33). Unlike corre-

spondence theories of truth, such as elemental realism, there is no ontology to it. Truth is pragmatic within a particular context; ontology adds nothing to this.

This is not to say that ACT denies ontology, but is a-ontological. That is, ACT holds that the “truth” of events lie in their specific consequences, not in their fit with an objective reality. Of course this implies that ACT has an ontology of seeing the world in this way. Yet, it is not designed as a global philosophy but a pragmatic one. It is not concerned with propositional statements (as, say, CBT would be), but with how specific actions serve goals in given situations. This means Christians can hold to their ontological views about God while functional contextualism might consider how those beliefs are lived out in the context of their lives.

ACT works from this framework to look at thinking and language themselves, and how they serve goals more than how they correspond to an objective world “out there”. It thus stresses letting go of ontological assumptions in cognition and language, parting ways with traditional CBT. A “true” statement is one that facilitates the consequences or goals ones desires. It adds nothing to this to supplement it by saying the reason it works is because it conforms to what is “real” in the objective world.

**Evaluating.** Functional contextualism may be the most challenging foundation of ACT to fit into a Christian philosophical model, but as such it may also be the most important piece to reflect upon. This may be totally unacceptable for a biblical counselor who holds to his or her particular understanding of Scripture as Truth, and aims to bring the counselee’s thinking, behavior, and emotions into conformity with it. Making truth contextual may appear to be becoming bedfellows with situation ethics and a denial of the biblical claim to truth. Some Christians might choose to abandon ACT at this point as incommensurable with Christian faith. Even Jones and Butman (2011, p. 220) comment that “this rightfully may serve to raise the brow of any believer concerned about relativism.”

Yet, there is hope to understand this within a Christian counseling system. Science might be likened to a game which is played by certain rules. If I am playing basketball, for instance, I know I cannot take more than two steps while holding a ball without being penalized for “walking”. Or in chess, I cannot move my knight along a straight line. These are pragmatic rules that do not obtain in the broader areas of life. They are only applicable within the context of the game itself. I have played many adaptations of basketball with young clients where the rules became fluid in the context of our time together, serving the goal of building a therapeutic relationship. The context of building a relationship superseded the pure “rules” for basketball even though I hold to those rules while

watching an “official” basketball game.

In this sense, functional contextualism is a set of “rules” for the science of doing counseling and not a philosophy for life in a broader sense. “ACT is a-ontological, not anti-ontological. We are *not* saying that the world is not real, or that things don’t exist” (Hayes et al., 2012, p. 36; emphasis in original). Rather, language is treated in context so as to facilitate responsibility for one’s cognitions and to broaden flexibility in behavior. In short, it is a set of “rules” for doing therapy without broadening the implications of the rules to the broader philosophical context. Just as science is a-theistic in the sense that its rules do not allow it to address the issue of an ontological supreme being or God (and thus does not affirm nor deny God’s existence), so functional contextualism applies truth “rules” to our language activities to focus on how they serve or do not serve our objectives.

Becoming more practical for Christians who counsel, the issue is not that, say, a person wants to be less depressed only because being depressed is a state that contradicts the Bible’s depiction of life as it should be (e.g., a very literal understanding of “Rejoice in the Lord always”, Philippians 4:4 [ESV]), but more as to whether feeling depressed serves the person’s goal of living the Christian life in the context of his or her current life circumstances. For many Christians in counseling, their contextual goals will be consistent with biblical descriptions of how life “ought” to be. ACT will focus less on the “ought” and more on how depressive thoughts and behavior are in service with the stated goal of enjoying a relationship with God. ACT does leave plenty of room, however, to discuss the values of the counselee which, for Christian clients, affords a context of faith and openness to the spiritual.

**Translating.** That said, the translation strategy suggested here is to explicitly add these glosses to functional contextualism as a form of same-saying, making it clear that this is not a life philosophy or ontological statement, but merely an approach for dealing with language and emotion in the counseling context only. As such, it permits more focus on the thinking processes themselves than on merely pointing out how certain thoughts or emotions are contrary to the Bible – something most clients are likely aware of anyway. It is not enough for an anxious client to be told the Bible says not to be anxious. The client and therapist work together to see in his or her own life the context of the anxiety and the ends it may be serving or compromising. Functional contextualism as a philosophical underpinning for counseling can work if seen as only that. It is not adequate as a worldview, but it does not contradict the goals of counselees who are seeking to follow Christ. If truth is seen in this approach as what works, then being in relationship with the Truth who works all things for good will be an important part of any context.

### Relational Frame Theory

Relational Frame Theory (RFT; Hayes, Barnes-Holmes, & Roche, 2001) is a theory of language built on functional contextualism, and forms the basis for working with language in ACT. It comes from ACT's philosophy of science and forms its primary theoretical framework for dealing with language in counseling.

**Comprehending.** While there is a large and growing body of research on the basics of RFT, practitioners of ACT glean from it utility in understanding psychological well-being (Hayes et al., 2012). RFT reflects a shift in behaviorism away from simple stimulus – response learning to considering relationships among events based on experience and social convention.

While RFT is difficult to summarize in a few words, hopefully a brief summary will capture its core significance. A single word exists in a relational frame, carrying learned associations with other words, expressions, and feelings. If a child learns to call a furry canine the oral name “dog”, the child will learn conversely to use the word “dog” to describe any furry canine. The child will also learn that the letters d-o-g represent both the sound of the word and the furry canine it represents. These form a stimulus equivalence class, and untrained associations with one will transfer to the others as well (Hayes et al., 2012).

Now imagine that the child encounters a specific dog that suddenly barks and snaps at her. The fear generated by that specific dog will now be associated with the oral word “dog”, its written version, and potentially all actual dogs. One relationship change alters all of those in a frame. This generalization can account for associations that may trouble counselees, but also form a target for work in ACT – particularly through the use of metaphors which allows new relational frames to spread indirectly.

Relations among members of a class can also be changed by social convention. A young child learns the names of American coins and may relate them by physical size. So, a nickel is larger than a dime in sheer physical size. However, that relationship is changed by training in social convention, and the child learns that the value of the dime for fiscal purposes exceeds that of the nickel – that is, the dime is now “larger” than the nickel. Convention thus supplants the more natural relations. Learning these arbitrary relations can also underlie some of the problems in thinking that counselees may encounter. Hayes and associates (2012) note that just as the dime is larger by an arbitrary association, why could not a person see a great success as small by similar methods, evoking the associated emotions of discouragement in the process? We thus develop arbitrary relations among things, transforming the functions of the original stimuli. These lead to ACT's focus on changing associations in their functional and relational contexts more than just logically arguing with the relation of the items. When

these arbitrary associations become rigid and hinder movement toward intentional goals, they are called “fused” in ACT, with cognitive fusion being one of the core “symptoms” in the model.

**Evaluating and Translating.** It would be hard to argue that the Bible or Christian theology offers a theory of learning and relationships of thoughts that compares to RFT. It comes from good science (Törneke, 2010) and has great explanatory value for how we develop our thought patterns. It also leads to clear theories of how to change these. So, while we are to have the mind of Christ (1 Corinthians 2:16), the Bible does not give specifics of how we are to develop it. While undoubtedly Christians see the Holy Spirit as an active agent in this process, RFT may offer insights into the mechanisms by which we develop our thinking. Lacking a comparable notion in Christian thought, RFT is transliterated into our Christian ACT model.

### Self-as-Context

ACT promotes a rather unique approach to situating the “self” that merits our understanding and translating.

**Comprehending.** We are largely taught growing up to develop a conceptualization of the self that we are. We are told when we are “good boys” or “bad girls” based on what we do and how others react to us. These relations, too, can be arbitrary and we can become fused with them. In the example above, we may have become fused to the thought that all we do is unsuccessful, so even a clear success will rigidly be seen as a disappointment of some sort so as to protect one's mistaken concept of self. Given that we can easily be fused to this conceptualized self, ACT offers the construct of self-as-context as a method of defusion for this and other problematic relational frames.

Instead of a conceptual self that describes the person, in ACT the self is seen as a context for experiencing life. While Buddhist roots to the idea may be seen in the tradition of the self being lost and rising above a personal story or identity, ACT (as it does with mindfulness below) does not take this notion to the Buddhist destination, but uses this as a solution to the conceptualized self and as a way to experience life. We look *from* the self, not *at* it (Hayes et al., 2012). This is also consistent with RFT as we have relational frames called deictic (meaning “by demonstration” to reflect these as perspective-taking frames) in ACT. These are those such as I/you, here/there, now/then. These can merge together to the I/here/nowness of self-as-context as we distance ourselves in a sense from these frames and observe them and gain perspective. This is quite similar to what other therapeutic traditions might call the observing ego: the place where we mentally “watch” other psychological processes as they occur. It might also be considered as a form of metacognition.

Self-as-context provides the rationale for the inclusion of a number of defusion and mindfulness exercises in ACT, working to develop this perspective and to defuse clients from the conceptualized self.

**Evaluating.** The idea of self-as-context is easily freed from Buddhist iterations of self in that it does not move toward a “no self” objective but merely serves as a way of learning to attend to where we are at a given moment without evaluation in light of a conceptualized self. Romans 7 might be an illustration of this as Paul reflects on the conflict between his desires and his actual behaviors from a perspective in a sense “above” them both. Here he is free to see the conflict between his goals and actual behaviors. This is a precursor to effective counseling as the person learns to observe the war within rather than being caught up in fighting it. A chessboard metaphor is sometimes used to show this, noting that the black and white pieces make moves against each other and a player might naturally identify with one of these. Self-as-context is taking the perspective of the board itself, observing the moves from outside the battle.

There is no exact equivalent for this in Christian theology, aside from the way Paul might be demonstrating it in the reference above. However, the Bible seems to support the notion behind it by affirming the value of observing and relishing the moment. Indeed, Jesus’ solution for anxiety in Matthew 6 is not taking anxious thought for tomorrow, but being present where one is today. The seeking first the kingdom of God described in the same passage might take this the next step to using self-as-context as a perspective to move toward the valued end of pursuing God’s kingdom – seeking it first beyond being fused with internal battles in one’s mind in vain attempts to escape anxiety.

**Translating.** The concept of self-as-context, too, seems to come into our model through transliteration. One might even take this another step to insinuate it involves seeing the world as God sees it, or through the eyes of God, but that may be overly ambitious and beyond what we can actually accomplish. While a bit of a gloss might be needed to make clear that this is not a version of Buddhist “no-self”, it still can transliterate into our model.

### Suffering

**Comprehending.** One of the things that initially attracted me to ACT was the fact that the seminal Hayes et al. (2012) book opens with a discussion of suffering, and particularly the notion that “humans can be warm well fed, dry, physically well – and still be miserable” (p. 3). Much of our suffering is indeed psychological, not physical. The authors make explicit appeal to the origins of suffering in the Judeo-Christian tradition, commenting that this and other religious traditions embrace “the idea that human suffering is very much

the normal state of affairs in life” (p. 14). There seems to be a false message in most therapeutic endeavors that “normal” is a complete lack of suffering and thus suffering is a pathology indicating a need for help. ACT, in contrast sees that “all human beings are hurting – just some more than others” (p. 13).

In ACT, psychological suffering is something of an “allergic reaction” to misapplication of our own thought processes as we use otherwise healthy processes to create problems as we mistakenly endeavor to ease our psychological pain. Pain, in this way of thinking, is the inevitable result of life in this world: we lose jobs, experience trauma, are betrayed by loved ones, and so forth. Yet, when we apply our thoughts to excessive efforts to avoid or escape this pain, or dwell on past pains that cannot be altered, suffering ensues. Suffering is thus a psychological process that dwells on pain in a futile effort to eliminate or avoid it. Alternatively, these have been respectively called “clean” and “dirty” suffering (Hayes et al., 2012). The primary ways this happens are via cognitive fusion and experiential avoidance, the “siren songs” of suffering (Strosahl & Robinson, 2008). The former occurs when people have exceptionally strong belief in the literal content of their minds, leading to a “fusion” with this content. For example, a person might have the thought that “I am not loved” and hold tightly to that as objective truth rather than simply as a thought that most people have on occasion. The latter is when one lives life avoiding things that might be uncomfortable or distressing, flowing often from the content of fused thoughts. For the person above, he or she might avoid going to worship to avoid stirring up a feeling of being unloved on the chance no one might speak to him or her there. Disentangling these processes is a focus of ACT.

**Evaluating.** As Hayes et al. (2012) note, suffering is considered normal in life from a Judeo-Christian perspective. Theologically, this follows from the story of the Fall of humankind in Genesis 3 where the creation and its human inhabitants are cursed. The pain of the Fall comes from living in a world tainted by disease, scarcity, and natural tragedy, but also from the inhumanity of humans to one another through sinful acts. Additionally, our fallen human natures include minds tainted by sin and thus irrationality, conflicting motives, and inaccurate appraisals are part of our minds.

From the scientific underpinnings of ACT, suffering stems from the assumption of destructive normality, meaning that we suffer because of mechanisms which served an evolutionary purpose in the past but no longer do so. Acceptance by others, for instance, would have been a vital need in the past to ensure protection by the clan. It would be normal to fear expulsion from the group as it would leave one helpless out in the world of primitive humans. McMinn

(2014) notes how this leaves the ACT therapist to see a brain with that thought just acting as a brain does, though not as vital as in the past. For the Christian, in contrast, suffering is not a natural result of macroevolution but to the existence of sin in the world.

Unlike Buddhist views of suffering which see it as inevitable and thus advocate for freeing ourselves from desires and cravings of this life (Yandell & Netland, 2009), Christians see suffering as having redemptive value. Jesus' passion on the cross was with the purpose of securing a people for himself through atonement for sin, and the Bible is clear in calling Christians to share in the suffering of Christ (e.g., Philippians 3:10; 2 Timothy 2:3; 4:5). Suffering can have purpose for Christians when encountered for the right reasons, such as in pursuit of following Christ. This is consistent with the idea of pursuing valued goals in ACT as we will see later, and so is a form of clean suffering. Nonetheless, Christian teachings would not endorse the suffering of mind that comes from most fused thoughts and experiential avoidance (such as unnecessary anxiety in Philippians 4:6).

**Translating.** ACT's notion of suffering then seems to translate easily into a Christian model as both systems of thought concur that some pain is inevitable but that some is unnecessary. Christians may have a different theory of origins for suffering, but this seems not to cause any practical problems. Thus, it fits in the category of same-saying or paraphrasing (Johnson, 2007). Both ACT therapists and Christian counselors will sound very similar in discussing the presence of necessary and unnecessary suffering. The only nuance would be if one sticks tightly to the aforementioned distinction between pain and suffering made by Hayes et al. (2012).

### Mindfulness

It would be hard to exaggerate the impact of mindfulness ideas and techniques on counseling and psychology in recent years. In fact, translating this term is vital as it is one that has somewhat already wandered haphazardly into Christian counseling jargon, or has even been mistakenly equated with Christian meditation. However, this is a complex idea and there are important distinctions that need to be made.

**Comprehending.** While Hayes and colleagues (2012) concede that while mindfulness tends to work, they admit that it lacks clear definition. It is a Buddhist construct where mindfulness is a set of techniques that help one experience the moment even as one distances oneself from it using something akin to an observing ego. This distancing process aids in rising above the material world and toward a higher state of "no self" (Yandell & Netland, 2009), freeing oneself from connection to the suffering inevitable in the present life. This is certainly not the end for which mindfulness is used in most Westernized versions

which largely grew from the influence of Thich Nhat Hanh (e.g., 1992) whose work made mindfulness more therapeutic than in service of moving above the physical world. ACT certainly shares ideas with this in terms of present moment awareness (Luoma, Hayes, & Walser, 2007), yet they diverge on the purpose of mindfulness.

Most mindfulness techniques aim to help the practitioner focus on the present moment and to experience it free from interpretations. Humans are quick (or even automatic) to evaluate thoughts, feelings, and experiences, and this may lead to cognitive fusion. The exercise of mindfulness trains a person to attend to the moment without evaluation. Unlike Buddhism, ACT sees the value in this as aiding in defusing thoughts and other experiences from their interpretations, freeing people to pursue their valued ends. Thus, mindfulness is used in ACT toward a different goal. Rather than an end in itself, it is a means to other ends.

**Evaluating.** Mindfulness-based counseling interventions share some commonality with their Buddhist use, but as Symington and Symington (2012, p. 72) point out, "Christians need to evaluate the adopted principles and practices of mindfulness from a Christian perspective rather than being distracted by its historical roots." Let us evaluate the idea in that light.

First, it is readily apparent that mindfulness is not Christian meditation and the two are not equivalent or even similar terms. Christian meditation tends to focus on either content (contemplating God and his works, as in Psalm 77:12 for instance, or the teachings of the faith, as in Joshua 1:8) or on being present with God. It focuses on a self engaged with God rather than aspiring to a state of "no self" as in Buddhist mindfulness. Thus, these two should not be confused, much less made out to be equivalent. One moves toward no-self while the other moves to become fully self in God.

Yet, is mindfulness compatible with Christian thinking? As used in ACT, I believe it is. Jesus himself encouraged us not to be anxious about tomorrow (Matthew 6:34), Christ was immensely aware of what he was doing moment-by-moment, and able to attend to children or the sick even as he moved about in his teaching ministry. In the sense of being alert to what was going on moment-by-moment, Jesus was mindful. In being that way, it means that we are not so committed to the fusion of our thoughts, or to spend our days plotting ways to avoid discomfort. Tan (2011) has warned that Christians are not just to be passive with regard to our thoughts, but to bring them to Jesus so that every thought is brought captive to his control (2 Corinthians 10:5). I might respond to this that monitoring our thoughts and not clinging to them is one way of bringing them under control as, at least in ACT, this is to facilitate our experiencing a sense of control of our thoughts that transcends the fleeting

thoughts that pass through our minds. In contrast, Christians may come to be fused with words like “forgiveness” and accept their intellectual content but not the real-world realities they symbolize (McMinn, 2014). We may thus have the mind of Christ by being freed of thoughts that are not truly what we intend or believe.

**Translating.** Though the construct of mindfulness has some parallels in the teaching of Scripture and practice of Jesus, there does not seem to be a clearly comparable term, so transliteration would seem to be the approach to take. Even in saying that, however, care must be taken clearly to understand what one means by mindfulness and to define it precisely as methods for teaching present moment awareness and decreasing defusion. This is preferable to haphazard paraphrasing it as meditation while translating. As a technique for developing present moment awareness as used by ACT this is fine; but to use it as in the Buddhist sense would not translate into Christian language. Symington and Symington (2012) offer a helpful model of mindfulness for Christians for those who want to explore this more.

### Psychological Flexibility

**Comprehending.** In ACT, pain is the natural consequences of living while unnecessary suffering is produced by rigid psychological processes that prevent the person from adapting to the external context of their environments (Hayes et al., 2012). This concept is the central one in ACT as it defines healthy psychological functioning. Psychological inflexibility keeps one from positive awareness in the present that moves one along life’s journey in a valued direction. Thus,

The ultimate goal of ACT is to bring verbal cognitive processes under better contextual control and to have the client spend more time in contact with the positive consequences of his or her actions immediately in the present as part of a valued life path. (Hayes et al., 2012, p. 65)

As we will see shortly, there are six core processes that underlie this broad goal.

**Evaluating.** ACT, as we have seen, dodges ontological claims and does not dictate the valued goal toward which psychological flexibility allows progress. Christians will often fill this in with valued spiritual goals, such as walking with Christ, being like Christ, and fulfilling specific callings in life. Yet, believers, too, can be too rigidly committed to one understanding of what it is to follow Christ – indeed, sometimes people may misuse faith to perpetuate great rigidity in thinking. A person who believes God’s calling is to be a wonderful husband and family man might be devastated should his new wife die tragically. The loss and confusion in values might easily lead to fusion of what it means for him to follow Christ, and to look back to

see whether he made mistakes or was being punished in some way. Psychological flexibility would be getting perspective to see that God’s plan unfolds moment-to-moment as illustrated most dramatically in the life of Joseph in Genesis.

**Translating.** Psychological flexibility seems a valid objective for Christians, though we might consider that this involves not just psychological flexibility but spiritual as well. Thus, we might transliterate this into “psychospiritual flexibility” to stress that one’s spiritual understanding is involved and that one sees the Holy Spirit as active in the process of cultivating the moment-by-moment faith involved in following Christ.

### A Christian Translation of the Hexaflex

Having translated the key terms of ACT and found them generally commensurate with Christian thought, we now endeavor to bring the pieces into a whole. Hayes et al. (2012) present a hexaflex (referring to a diagram of a set of lines modeling the six qualities that promote psychological flexibility and their six counterparts that lead to suffering. These are portrayed as points surrounding the goal of psychological flexibility, with each point interconnected. For ACT, one focuses little on diagnosis and etiology for a particular diagnosis, instead seeing how different presenting problems are species of the genus “psychological inflexibility,” or as we suggested, “psychospiritual flexibility.”

Six variables contribute to flexibility, and their opposites follow from inflexibility. These can be paired into three response styles that contribute to the goal. The ACT therapist begins with an assessment and determines areas of the hexaflex needing attention, though this is not rigidly implemented. The counselor would flexibly (how else?) address the troublesome dimensions to cultivate the core skill of psychospiritual flexibility. Many helpful exercises might be drawn from Hayes and Smith (2005) and other sources.

For our discussion, let us take an example of a young man – let’s call him Martin – who comes for counseling due to depression and ennui. He has trained in seminary and was confident God had called him to be a pastor. Yet, upon graduation no churches offered him positions. He got a job installing cable television into homes given his hobby of electronics. On top of this, he is unmarried and believes God is punishing him for sexual sin in the past.

We will now look at the six elements of the hexaflex and their applicability to Martin, organizing them according to the three response styles.

### Open Response Style

Psychospiritual flexibility requires openness to direct experience in the moment, letting go of entanglements with distressing and unwanted private events (Hayes et al., 2012). The two points of the hexaflex focusing on

this are acceptance and defusion.

**Acceptance.** Attempting to control thoughts and experiences takes considerable energy and will ultimately fail regardless: we simply cannot control everything. In the open response style, the person is willing to experience life's events as they come, including "thoughts, feelings, memories and other private events" (Batten, 2011, p. 18). To this end, one must accept one's situation and thoughts, though it is better called behavioral willingness and psychological acceptance (Sisemore, 2012). The opposite of this is experiential avoidance, an unwillingness to remain in contact with private experiences (Hayes et al., 2012). One's values give motivation to accept the current situation and maintain contact with it, even if it is uncomfortable in some way.

For Martin, this means that he would do better to accept his current situation as a technician, ideally seeing it as within God's plan for the moment, rather than resisting it and getting caught up in his thoughts that it is not "God's best" for him. He would choose to become willing to accept his place at the moment, despite the discomfort in it. For the Christian, this is not an acquiescence to life as it is, but a yielding to the work of God in using this moment in his plan to work all things together for good (Romans 8:28).

**Defusion.** Fusion is a concept that flows from RFT and reflects the dominance of verbal control in regulating behavior. Defusion has less to do with changing one's thoughts (as in CBT) than in recognizing one's thoughts in real time. Seeing these thoughts as simply thoughts may be a form of bringing them "captive" (2 Corinthians 10:5) in the sense that they are no longer controlling the person and are problematic thoughts are weakened when identified. Here is where ACT introduces mindfulness skills and exercises – not to free oneself from oneself, but to free one to see one's thoughts and environment as they are.

For our friend Martin, this might mean identifying the thought that he has failed God in some way given he is not married and pastoring a church at this point in his life. Focusing on this belief may affect his job performance and exacerbate his depression, making him less winsome as a suitor. ACT would seek to undermine this cognitive fusion by teaching Martin moment-to-moment awareness of these thoughts and by distancing himself from them rather than debating them (as CBT might do). So, an ACT therapist might encourage something as simple as Martin saying "I have the thought that God is angry with me" rather than stating as "fact" that "God is angry with me." A commonly used phrase here is "you don't have to believe everything you think." Undoubtedly all have sometimes misperceived what God is doing in our lives. We need the flexibility to concede that possibility instead of clinging to an unfounded interpretation. Recall how Job missed what God was doing in his

situation. The therapist as well may need to keep this in mind as he or she forms ideas of the nature of the client's problems.

### Centered Response Style

The second style promoting psychospiritual flexibility is centered in the hexaflex and being centered in the present moment. Today is the day the Lord has made, and we are to rejoice in it (Psalm 118:24) rather than lose it by being fused with the past or future. The two points of the hexaflex here are flexible attention to the present moment and self-as-context.

**Flexible Attention to the Present Moment.** Here mindfulness appears again as a technique to promote psychological flexibility. In ACT, mindfulness is not an end in itself but serves to promote this core quality. RFT and our personal history can lead us to live lives according to our conceptualizations rather than as each moment presents itself. Martin may either live in the past, trying to discover his "mistakes" to anger God, or in the future wondering whether the plan for his life that he conceptualized will play itself out some day. In contrast, the only day and place he can serve God is today and here. This is a focus for treatment when the client struggles to be present in the actual moment or situation in which he or she finds him or herself.

Martin might be instructed to watch his thoughts like leaves on a stream – acknowledging them but not holding on to them. Tan (2011) suggests seeing them given over to God which would work also, but the key is to be aware of these thoughts as one experiences them, not being fused with them as inevitable. The goal here will be for Martin to learn to be flexible in attending to his present moment and life. We might hope to hear him say, "What does God have for me today where I am as a cable technician?" This would keep in focus his ultimate goal of serving God while not being fused with this meaning being a married pastor.

**Self-as-Context.** We specifically developed a translational scheme for this earlier and determined to use a transliteration approach based on that. It is essentially the observing self (Batten, 2011) and is contrasted with the conceptualized self. The latter is the way a person sees him or herself to be. It is how we say "I am." This contrasts, though, with God's stating "I am" as his name to Moses, for it *defines* him. We most often use this as a preface to naming characteristics that *describe* us. This is helpful at times, but at others it leads to mischief. Martin, for instance, might say "I am a spiritual failure" and rigidly define himself, fusing his identity to this statement.

RFT offers explanations of both forms of ourselves as socially developed. When we focus on self as a context (I am here and now rather than there and then), we can be loosened from psychospiritual rigidity. It is a place of perspective, "the positioning of the

self in a place that transcends the moment-to-moment content of subjective experience” (Sisemore, 2012, p. 100). It is more like watching a football game from the press box and gaining perspective than being a player on the field immersed in the game. One might even consider it is seeking to get more of God’s perspective than our subjective one.

Likely Martin’s conceptualized self is hindering his progress. The shift to self as context is accomplished by defusion methods and mindfulness techniques, and helps Martin develop a place from which his thoughts and feelings can be observed and accepted. Where CBT might correct misconceptions of the self by having the client debate self-statements, ACT works to separate one’s self from these evaluations.

### Engaged Response Style

As has been stressed throughout, ACT parts ways with Buddhist ideologies when it sees the foregoing processes as freeing one to pursue valued ends. For most Christians, this is to glorify and serve God in some sense. Martin is so wrapped up in his misconceptions and fused thoughts that he cannot serve God where he is in his present situation. His psychospiritual inflexibility in hindering his pursuing what really matters to him most. He is disengaged from his values and lacks committed action, the last two points on the hexaflex.

**Values.** One of the primary reasons that avoidance, escape, and fusion cause problems is they distract from constructive direction in life. ACT is one of the few theories to point beyond getting rid of “pathology” to focus on meaningful pursuit of goals. In ACT, goals might be a variety of things that are freely chosen, verbally constructed, ongoing patterns of activity that are intrinsically reinforcing (Hayes et al., 2012). While by no means do these need to be religious, for Christians they often are. They are the things that give life meaning, and losing them affects us greatly. There may be a tension when a Christian client has values that are inconsistent with Biblical ones to which ideally he or she should be directed (Symington & Symington, 2012).

Martin is a good case-in-point. In ACT, the therapist might work with him to draw out his true hopes and dreams and connect them to things in the present. For example, his desire to serve God might be made immediate by considering the testimony he has to his company and to the customers he encounters each day.

**Committed Action.** This is the “step-by-step process of acting to create a whole life, a life of integrity, true to one’s deepest wishes and longings” (Luoma et al., 2007, p. 158). The values must be linked to ongoing daily life and its ups and downs – somewhat like Jesus’ enduring the cross for the joy set before him (Hebrews 12:2). In short, values must be turned into action. A focus on values promotes a willingness to

go through hardships to reach the joys beyond them. The goal of serving God wherever may inspire Martin to persevere in his current role in anticipation of God’s using him there and in unknown ways in the future.

Often behavioral methods are used to promote committed action, encouraging willingly going through suffering to reach greater goals – much like the person working out choosing the pain of exercise willingly in pursuit of the good of health. Martin might need to accept this as training to make him a better servant of God down the road. Humility becomes a minister, and if working in a more “humble” position serves that end, then so be it.

So, in short, ACT would work to “unstick” Martin from his fused ideas of God’s will and the emotions and thoughts that go with them. Seeing these for what they are, and becoming more flexible in understanding the complexities of God’s ways with humans, Martin may be freed to more willingly accept where God has him now even as he pursues Christ-like character, his ultimate value.

### Conclusions

The modest goals of this paper were to give some thoughts on how ACT might be translated into a Christian form, and to show how the terms, once translated, can be used with Christian clients toward Christian goals. Despite its limitations, it does hopefully show that this is a worthy project and shy of that, it hopefully suggests that ACT as it is can be used effectively with Christians if care is used to understand the philosophy and terms behind it.

More translation of ACT needs to be accomplished and a longer essay will be needed to do this. Once a more detailed translation is available, empirical testing is needed to demonstrate that a Christian-accommodative ACT is scientifically effective and its use in counseling warranted.

Let us hope that more work follows in pursuit of the valued end of excellence in Christian counseling as we become defused from simplistic ways of viewing it and accept the challenges of doing so in the current cultural climate.

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# Commentaries on Timothy A. Sisemore's "Acceptance and Commitment Therapy"

*Each issue of Christian Psychology begins with a discussion article followed by open peer commentaries that examine the arguments of that paper. The goal is to promote edifying dialogues on issues of interest to the Christian psychological community. The commentaries below respond to Timothy A. Sisemore's "Acceptance and Commitment Therapy: A Christian Translation."*

### Acceptance and Commitment Therapy or Grace and Commitment Therapy?

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Christian clinicians like myself working with third wave cognitive therapies welcome Tim Sisemore's (2015) translation of Acceptance and Commitment Therapy (ACT). It has been sorely needed. ACT has clear empirical support that merits our serious attention (e.g., Baer, 2006), yet we cannot automatically and whole-heartedly adopt the approach on that basis alone. Dr. Sisemore invites both therapists and academicians to do the hard and vital work of applying a Christian worldview carefully to ACT before employing it with clients. My positive response to his ambitious work contains three sections. The first recognizes my own biases as a responder and the remaining two sections explore key areas to develop further in the process of creating a Christian translation of ACT.

### Responder Biases

Qualitative investigators value a description of researcher biases as a component in their studies (Creswell, 2007). I see similar merits in the writing of a response article. When I read about ACT in its own literature several years ago, I was both intrigued and concerned. My concerns changed when I saw video demonstrations of therapists using ACT. Seeing these sessions modified my mind's template of what exactly ACT is like in clinical settings. Thus, my first encouragement (perhaps bias) to those evaluating the merits of a Christian translation of ACT is to actually watch sessions of the approach rather than to base their judgments solely on Dr. Sisemore's article or the writings of ACT authors. For example, Hayes' (2008) APA-produced video of ACT involves him working with a Christian client. How he incorporates this woman's faith into the treatment is very informative to see.

My perspective continued developing when I cautiously started using ACT principles in my counseling work primarily with Christian clients and

when I received ACT-based therapy myself from a non-Christian. Both experiences were positive and also confirmed how a Christian translation of ACT is needed. Thus, from personal and anecdotal clinical experiences, I respond to Dr. Sisemore's article. I do this also assuming that others will address the broad theological and philosophical considerations in functional contextualism and relational frame theory. I will instead focus my comments on more applied aspects of Dr. Sisemore's Christian translation of ACT that would be especially pertinent to therapists using the approach. My enthusiasm for Dr. Sisemore's first efforts in developing a translation of ACT is great, so my comments are intended to inspire further growth and development of this translation rather than to attack it.

### Beyond Mindfulness: God with Us in the Present Moment

I appreciate that Dr. Sisemore notes that mindfulness is not Christian meditation (p. 11). He goes on to describe some forms of Christian meditation and notes that the mindfulness practices as used in ACT do not have the aims of Buddhism, but rather are acceptable in their limited focus of teaching one not to be fused with one's thinking. He also states that Jesus was mindful. This statement gave me pause. Jesus was never mindful in the sense of just being fully aware of His self-experience nonjudgmentally and alone as taught by ACT therapists. Jesus knew He was not alone. He was aware of his experience while being constantly in communion with the Father. His walk on earth was never outside of awareness of his own experience and God's immanent presence with him.

Dr. Sisemore alludes to the value of experiencing God's immanence in ACT. "If truth is seen in this approach as what works, then being in relationship with the Truth who works all things for good will be an important part of any context" (p. 8). I couldn't agree more with this statement and wish further exploration of the implications of God's immanence would have taken place. Whether Christians are aware of it or not, they are constantly in relationship with the living

God in whatever they are doing (Ps. 139:7-12). God's immanence therefore has profound implications for ACT's usage of mindfulness. Tozer describes God's immanence as the following:

God is above all things, beneath all things, outside of all things and inside of all things. God is above, but He's not pushed up. He's beneath, but He's not pressed down. He's outside, but He's not excluded. He's inside, but He's not confined. God is above all things presiding, beneath all things sustaining, outside of all things embracing and inside of all things filling. That is the immanence of God. (1997, Kindle locations 316-319)

God's immanence enables immediate access for the Christian client to the most powerful healing resource available. Mindfulness as applied in ACT, when practiced without Christian worldview additions, inadvertently trains Christian clients to experience the present moment without the awareness of God with them in their experience (Garzon, 2015). This incomplete, truncated perception of reality leads to inevitable consequences. One starts believing what secular ACT promotes, that his present moment experience is a closed system, the reductionistic sum of his brain processes and learning history. Though these elements certainly dramatically impact one's self-experience, more is available for awareness. The Christian worldview proposes an open system that includes God as ever-present with us, ready to extend His love and grace in our self-experience, whatever that experience may be.

It is important to note a caveat in making these comments about the incompleteness of ACT and mindfulness from a Christian worldview perspective. I am not attacking these strategies as empirically supported treatments. They clearly are. Rather, I'm seeking to inspire Dr. Sisemore and other Christian therapists using ACT to seize more readily on the riches of the Christian heritage that are waiting to be explored and applied in ACT theory and treatment. We cannot settle for teaching Christian clients a truncated view of reality that subtly teaches them to ignore the most valuable resource in the healing process, God Himself (Garzon, 2015). Christian perspectives on the present moment have so much more to offer in a Christian translation of ACT and mindfulness.

Over the centuries, classic authors have explored the implications of being with God in the present moment. Brother Lawrence (1982) saw the present moment as an opportunity to extend love and adoration to God in whatever he was doing, no matter how seemingly "trivial." Jean-Pierre de Causadde (2012) viewed the present moment as an offering or sacrament to God. He believed one could learn to look for God's purpose in every current experience and that abandoning oneself to God's purpose was the highest form of trust. Frank Laubach (2007) explored active

ways to increase his awareness of God with him in the present moment. Some current clinicians (e.g., Johnston, n.d.) are actively developing "Christian mindfulness" to address the worldview weaknesses found in solely focusing on Buddhist and secularized versions of meditation. I would have loved to see Dr. Sisemore develop further his brief comment (p. 8, noted above) and expand on the implications of God's immanence for a Christian translation of ACT. In my opinion, a Christian translation of ACT should be distinctive in its cultivation of both self-awareness in the present moment experience and God awareness.

### **Beyond Acceptance: God's Grace**

God's immanence likewise has implications for the foundation of self-acceptance as a guiding principle in ACT. God's acceptance may matter more than self-acceptance to the faithful. Indeed, perceiving God's acceptance or the lack of it can dramatically impact one's ability to accept himself. The "judgment" tendencies that ACT rightfully attempts to address become much more complicated for the Christian who believes he is under God's judgment for perceived sinful thoughts, emotions, or actions. The question, "Is it okay for me just to accept that I have these sinful thoughts and reactions?" naturally comes up in ACT treatment. A thorough biblical understanding and experiential application of the theological principle of grace in the process of sanctification can help Christian clients in this situation.

Grace as a construct involves God's love, His acceptance, and contains self-acceptance as a sub-construct. Briefly, grace is defined as unmerited or unearned favor (Trotter, 1996). God loves us unconditionally even though all of us are equally undeserving. Grace is inextricably tied to our justification (Romans 3:23-24, Eph. 2:8-9) and provides empowerment for our sanctification process (Romans 5:2, 5:21, 6:14, Titus 2:11-14). Though nuanced differently in various traditions, grace spans Augustine, Luther, Calvin, Bunyan, Wesley, Moody, and others as one of the key doctrinal foundations of Christianity. Spurgeon's 1886 classic, *All of Grace*, influences my discussion of grace and sanctification below (2007).

As ACT emphasizes "creative hopelessness" in trying to fix ourselves (Hayes, Strosahl, & Wilson, 2012, p. 189), so grace invites us to admit our powerlessness in the endeavor as well. Helping the Christian client understand God's love and acceptance found in grace during the sanctification process helps the client become more accepting of difficult thoughts and feelings. As Christians, we have been sanctified, we are being sanctified, and we will be sanctified. The "have been" aspects involve God having already forgiven us, cleansed us, declared us righteous, and placed us in Christ. There is no condemnation now for us (Rom. 8:1). These positional truths help us deal with present

realities (the “are being” part) of falling far short daily in our expression of the fruit of the Spirit. Yet, God is still with us showering us with His grace. If He can still accept and forgive us, then we can accept and forgive ourselves, trusting that His grace in us will work what our futile self-efforts have failed to produce.

Incorporating grace into a Christian translation of ACT impacts its meditation techniques. Grace can help clients bring their “dark” experiences, which they are tempted to hide, into the light of God’s caring presence (1 Jn 1:7-9). In this clear theistic relational context, the Christian client learns to acknowledge and surrender uncomfortable emotions and struggles to God rather than repress them. Gradual trust in the Spirit’s work in the sanctification process emerges rather than relying on willpower and self-effort. Grace melts self-judgment into gratefulness for God’s unconditional love as it is experienced in the meditations, understood in Scripture, and expressed through Christ. Thus, self-acceptance results as a by-product of increased understanding and experience of grace. Grace deeply understood and experienced leads to increased progressive sanctification rather than license (Romans 6:1-2). Thus, self-acceptance becomes a sub-goal in a Christian translation of ACT that is tied to experiencing God’s acceptance found through grace. It is encouraging to note that even non-Christian clinicians using ACT principles and mindfulness report case studies in which they discovered grace as a useful concept in working with their Christian clients (see Vandenberghe & Costa Prado, 2009, pp. 596-597).

**Grace and ACT’s philosophy.** In the arena of philosophical debate, grace simultaneously satisfies those supportive of ACT’s adoption of functional contextualism and those preferring elemental realism (or critical realism as is often applied in the Christian psychology community). Regarding functional contextualism, grace fits its key pragmatism criterion for what is true in that grace works effectively to promote the healing process. In a critical realism sense, grace is also objectively true. Whichever philosophical position one chooses, grace satisfies the philosophy. Even though ACT eschews global narratives, grace is both pragmatic and tied to the one truly accurate narrative in human history, the Gospel.

How does grace apply to work in secular settings with non-Christians who may likely have no interest in hearing anything spiritual? We are two qualitatively different kinds of people according to the Scriptures (1 Co. 5:17) so a Christian translation of ACT without informed consent would look much like secular versions of ACT in that case. Could non-Christians uninterested in spiritual matters develop a sense of God’s presence without the clinician’s introduction of that concept? Yes, in accordance with His prevenient grace, God can do anything.

## Concluding Thoughts

I have focused my response on more applied aspects of doing ACT with Christians than the theoretical ones involved in functional contextualism and relational frame theory. I recognize that Dr. Sisemore had immense ground to cover in his article, so it’s likely some of the elements I’ve mentioned would have been covered in a larger work. Dr. Sisemore has given us an essential Christian translation of ACT, and I encourage him to go further. In his translation, I invite a clearer emphasis on God’s immanence and grace as key Christian constructs that have immense value in evaluating and translating ACT. God’s immanence transforms the present moment. Grace transforms acceptance. Indeed, a Christian translation of ACT might more fully be described as Grace and Commitment Therapy rather than Acceptance and Commitment Therapy.

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### **A Biblical Counseling Response to Timothy Sisemore's "Acceptance and Commitment Therapy: A Christian Translation"**

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Dr. Timothy Sisemore's article represents an important engagement with ACT utilizing Eric Johnson's translation approach. I appreciate his observation that one of the difficulties of translation is our relative inexperience with one of the languages involved and few of us are equally fluent in theological and psychological dialects. My native tongue is theology and psychology is a secondary dialect, but as a biblical counselor I am familiar with third wave CBT, primarily DBT, and have been sharpened by it. However, in the interest of full disclosure, I confess that I have not had significant exposure to ACT and have not read Steve Hayes work, though I believe I can provide feedback from a biblical counseling perspective that will contribute to a constructive engagement with ACT.

Sisemore wisely starts his translation process by identifying several "core constructs" of ACT and then following the first three of Johnson's translation steps: thoughtfully comprehending, evaluating, and translating. Only then does he bring the core elements together within the whole of ACT's hexaflex model and takes a few initial steps into the process of transposing of ACT into a Christian model. I think his instinct to translate core concepts and not just techniques is critical if we are to avoid the errors of pragmatism and the importation of anti-Christian concepts into our

counseling.

His translations of core constructs into a Christian worldview are thoughtful and he makes important distinctions between concepts that require "paraphrasing" versus "transliteration" versus the creation of a new term. He identifies appropriate Christian categories that correspond to the element of ACT being explored. For instance, he explains the core concept of "psychological flexibility" which requires understand suffering as a natural part of living while also recognizing how suffering is amplified when rigid psychological processes prevent constructive engagement with circumstances. Sisemore sees this reflected in the way Christians at times have rigid understandings of what it means to follow Christ in particular contexts and so lock themselves into responses and behaviors that amplify suffering. He gives a brief example of a man whose narrow understanding of following Christ means primarily being a husband might find it difficult to know how to follow Christ after his wife dies. In translating this concept he notes that the Christian life calls for understanding how the Holy Spirit is active in cultivating an ongoing positive process of what it means to follow Christ in the ever-changing circumstances in our lives.

In responding to Sisemore's work, I would like to reflect on two core concepts, "functional contextualization" and "self as context" that may best demonstrate how a biblical counselor seeks to engage constructively with a secular approach.

### **Functional Contextualism**

Sisemore explains that unlike traditional CBT, ACT does seek to evaluate cognition and behavior within a framework of objective truth in order to bring individuals into greater alignment with it. Instead, ACT seeks to understand the individual within his or her own framework of purpose and meaning and to help the individual move towards meaningful goals within that framework. Truth is a functional category within the context of the individual's life rather than an ontological reality. As Sisemore explains, ACT is not *anti-ontology* but rather *a-ontological* for the purposes of facilitating growth. Sisemore surmises that, "This may be totally unacceptable for a biblical counselor who holds to his or her particular understanding of Scripture as Truth, and aims to bring the counselee's thinking, behavior, and emotions into conformity with it." However, he proposes that the Christian counselor may liken this to adopting the rules of a game, say basketball, understanding that they are arbitrary, for the purposes of achieving gains in the context of the game itself like relationship building. In other words, the Christian counselor may accept a person's stated or assumed framework, helping them to grow within it, without insisting that it square perfectly with Christian norms or dogma.

However, I think there's a deeper biblical resonance here than Sisemore realizes. The Scripture actually invites a kind of careful accommodation that functional contextualism describes, but for very different reasons. Consider the way Paul addresses the thorny problem of whether or not Christians in Corinth should eat meat sacrificed to idols. Some Christians felt free to eat such meat and others believed it was wrong. Which group's cognitions or beliefs are most aligned with the truth? From an ontological perspective, Paul argues that there are no other gods so meat sacrificed to idols is not defiled and may be eaten (1 Cor. 8:4-6). But, for Paul, the matter is not settled because not all Christians understand or acknowledge that reality. Instead, when they eat meat sacrificed to idols it defiles their conscience and they are harmed. Notice Paul's consequent advice to the Corinthians. He does *not* say, "Bring Christians with weak consciences into line with the truth that there are no other gods so they can eat this meat." Instead, Paul's advice is, "So whether you eat or drink or whatever you do, do it all for the glory of God. Do not cause anyone to stumble . . ." (1 Cor.10:31-32). You may eat meat sacrificed to idols however you should not eat it in the company of those who will be tempted to eat in violation of their conscience. Accept them where they are at in their faith so as not to harm them and do what you can to strengthen them.

Paul adopts this same stance in Romans 14 with respect to a broad array of issues: Whether it is dietary restrictions, the observance of new moons or Sabbaths, or other "disputable matters" he exhorts Christians to "stop passing judgment on one another" and to "Instead, make up your mind not to put any stumbling block or obstacle in your brother's way" (Rom.14:13). One might say that the importance of truth, or ontology, does not have a value independent of the purposes of love. For the purpose of building up the other one may be required to accept the other's framework of faith in order to help them grow.

A commitment to ontology, something vital to a Christian worldview, does not mean that we do not accommodate and enter into the experience of the other. God is truth *and* love. (1 John 4:16). This ontology requires us to understand and apply truth within a relational framework in which God's loving purposes for the individual's strengthening and growth are taken fully into account. An individual's personal framework of meaning and purpose may be accepted at face value and serve as a functional construct within which ministry occurs.

### Self as Context

Sisemore explains that the "self as context" concept is a way of recognizing how labels and experiences may become fused with an individual's self-concept and lead to self-defeating interpretations of experiences.

For example, an individual who has always been labeled a "bad boy" or "bad girl" may have fused those labels with their self-concept so that they become unable to experience their actions as good or successful. ACT seeks to help the individual to "defuse" by learning to observe events as external to the self rather than immediately experience them as reflections of the self. ACT offers several tools, including mindfulness, which may facilitate this perspective and defuse destructive elements from their self-concept. Sisemore acknowledges that some of these tools reflect Buddhist practices, however ACT has only appropriated the "self as context" *perspective* and not the Buddhist worldview from which these practices emerge. The "self as context" concept is another concept for which Sisemore finds some limited biblical resonance in Romans 7.

I agree with Sisemore that the Bible does not prescribe anything like the practice of mindfulness but the Bible does describe something like the problem of fusion. Our broken experiences can seem to become part of our identity. In fact, the Bible itself sometimes takes sinful behaviors and uses them as labels. Paul writes in 1 Cor.6:9-10, "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." Here Paul seems to make no distinction between the behaviors and those practicing them. But then, in the next verse, he writes, "And that is what some of you *were* [italics mine]. 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" (1 Cor.6:11). In other words, problem behaviors truly can become so enslaving that they effectively become part of our identity. The Bible is not soft on the destructive power of sin and its curse. However, in Christ, they are not inextricably part of our identity. Life in Christ inaugurates a new identity, a new self, that is distinct from the destructive behaviors or labels that have defined us in the past. It seems to me, then, that it is appropriate for Christians to cultivate forms of prayer and meditation, even mindfulness, that help us to practice the distinction between who we are as Christians and our experiences of brokenness in the world. A Christian is appropriately encouraged to identify negative thoughts and emotions from the perspective of a self that is engaged with but distinct from those experiences as a child of God.

### Relating ACT's Implicit Ontology with the Bible's Explicit Ontology

Sisemore correctly notes the a-ontological stance of ACT. However, as someone who has studied Buddhism I couldn't help but note at least a Zen like resonance in ACT's core concepts. I was reminded of

the concept of *Shoshin*, or "beginner's mind," a Zen Buddhist concept that advocates engaging life with openness and as few preconceptions as possible. In a sense, functional conceptualism and self as context both promote a form of beginner's mind - an acceptance and openness to experience in a way that facilitates reaching meaningful goals.

ACT seeks to operate apart from an explicit ontology and certainly is not aiming to proselytize for Buddhism. But the practices of ACT and other third wave CBT approaches, while simply appreciated as effective to practitioners, are rooted in practices that are expressions of a Buddhist worldview and, taken as a whole, contain an *implicit* anthropology, etiology of human suffering, and pathway to "salvation." That does not mean that Buddhist spiritual disciplines understood as discrete mental or physical actions (i.e. mindfulness, observing thoughts, etc.) are inherently contrary to Christian faith and practice, but it does mean that we must proceed carefully in interpreting those actions and radically reorienting their practice, where possible, within a Christian worldview or the residue of that worldview will be "tracked in" in with the practices.

For instance, mindfulness and meditation emerge from an understanding that in order to escape suffering (*samsara*, the endless cycle of rebirth) one must learn to transcend human desires and striving that keep one connected to this life. Meditation and mindfulness facilitate this act of transcendence, in a sense, helping us to practice a form of observant connection in which one experiences the fact that their existence is not ultimately rooted in things or experience. Our ultimate identity lies elsewhere and we must practice that perspective or be overwhelmed by the temptation to grasp at the transitory nature of this life.

So in counseling, we may want to begin by teaching someone a way of focusing or concentrating that helps them practice an important distinction between their experiences and their identity. However, it is crucial, from a biblical counselor's perspective, to make sure those techniques or skills do not forever exist in a vacuum, because like all vacuums, it will eventually be filled. What is left unexplained will find implicit meaning. What the counselee believes they have learned to do without Christ they may well continue to practice without Christ and so, in effect, have adopted a "Buddhist" way of doing life.

Does this mean that biblical counselors cannot benefit from ACT or its core concepts? Not at all. However, fruitful interaction requires us to bring concerted effort to our theological reflection and to engage at the deepest levels of both Christianity and ACT's structure and meaning.

### **Theology of Being God's Children.**

How might biblical counselors benefit from ACT's

observations while fruitfully reflecting on Scripture? Christians do need to learn to practice thinking and focusing their thoughts so that they are not absorbed or overwhelmed by their experiences. They need help being rooted in their transcendent identity in Christ while also staying connected to the present. In a way similar to ACT's goal of "psychological flexibility" Christians are required to cultivate a "beginner's mind." We are to engage life with the disposition of those ready to learn, ready to adjust our preconceived notions of God, self, and the world, and to live in this mindset for our entire Christian journey. The Bible captures this mindset, in part, using the imagery of children. As children of God we are to humbly accept our need for God as our loving Father, depending on his love, his words, his Son, his Spirit, his people, etc. As his children we can expect him to lead us into difficult situations that will challenge our assumptions and require us to depend on him so that we can develop and grow.

This theme and associated practices cannot be fully developed in this venue but there are many biblical truths related to this theme that could contribute:

- Children are always learning and open to new experiences
- Children have a name, an identity, that is not reduced to behavior. They have a name, Jesus, that connects them to their heavenly father and they are not to label themselves as behaviors.
- Children must learn to speak as their father speaks. They know that words are powerful and speaking is part of their heritage as image bearers. (Part of their speaking is giving thanks. Worship. Casting their anxieties, etc.)

In other words, our identity as children provides both contact and transcendent perspective. We are both here, on a journey, as children who are to grow and learn and develop but we are also seated with Christ in the heavenly realms.

### **Concluding Thought**

Sisemore correctly explains the a-ontological stance of ACT in that it seeks to meet the client within their own framework of meaning and accepting their own goals. However, even the core concepts are part of a larger whole, a metanarrative or implicit ontology. All theories and methods inevitably rest on faith commitments that both shape an approach and its ends and identifying those commitments protect us from importing dynamics into our counseling that are harmful while allowing us to mine them more profitably for gospel resonances. I look forward to doing so with ACT and the help of thoughtful Christian practitioners like Timothy Sisemore.

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### **What is the Change Agent in a Christian ACT Model?**

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A hearty thank you is in order to Tim for this first draft translating Acceptance and Commitment Therapy (ACT) into a Christian counseling dialect. As in all translation efforts, many drafts are necessary but the first effort may be the most important as it sets the stage for future iterations. Tim has done an exemplary job in highlighting the theoretical underpinnings of ACT. Rather than focus on minor differences I might have regarding his interpretive work I wish first to highlight the importance of this Christian psychology translation work, and then to raise the question about the agent, catalyst or mechanism of change in a Christian dialect of ACT.

### **Is All This Effort Really Necessary?**

Seasoned clinicians may find some of Tim's translation work tedious and unnecessary. Do we really need to find a verse, an ancient Christian writing, or a theological category to parallel Relational Frame Theory or the concept of psychological flexibility? Do we need to examine all of the trappings of words like mindfulness before using them in our therapy practice? Are we not capable of employing these concepts in our Christian models of therapy without moving through tiresome translation steps (comprehension, evaluation, translation, and transposition) in order to compose a Christian Psychology ACT?

Of course we do not need to do translation work. We can use ACT related interventions to help clients let go of fused self-perceptions. We can support mindful attunement to the present. When we see behavioral patterns at odds with a client's stated values, we can note the discontinuity and create safe space to re-evaluate values or develop re-committed action in keeping with those values. And none of these methods

require either a deep understanding of the theoretical underpinnings of ACT or evaluation from a Christian perspective in order for them to "work."

Yet, when we do take the time to look under the hood of a model, we have the opportunity to see how a theoretical frame shapes what we see as root problems to be solved. For example, ACT identifies much of human suffering as the result of inflexible ("fused") perceptions of self and the world leading to *pain avoidance responses*. ACT therapists take note of these compensatory behaviors since they reveal a lack of congruence between actions and verbalized values. The ACT solution—an open (accepting), centered (attuned to the present), and committed response (actions congruent with values)—depicts health as the result of being in harmony with self (inner/outer) and the world we live in.

Do we concur that ACT (not my three sentence simplistic summary) captures the central features of human problems-in-living? What does it get right? What problems or solutions does it fail to accurately depict? Does it distort altogether some aspect of the human struggle? Do other models speak more clearly about related topics? These are the questions that can only be answered when we stop to examine the model in greater detail. For example, ACT appears to treat the client as an isolated self instead of seeing and emphasizing person-within-community. How would the communal view of a client alter problem assessment and/or intervention? Helping Martin (Tim's vignette) identify and release rigidly-held views of himself that do not comport with his stated beliefs about what it means to be a follower of Jesus is surely a good thing. But does the model intrinsically encourage Martin see himself as a (faith) community member (I/Us) or does it treat that community aspect as peripheral to understanding of the ego?

Whatever one might answer, we can say that without taking the time to *comprehend, evaluate, and translate*, as Tim has done, the pressure of therapeutic work rarely affords us time to ask these important questions. Rather, the busy clinician hears about an intervention, co-opts it (often with success if the clinician is wise), but fails to examine how such an intervention fits into the larger picture of health.

### **Considering the Agent of Change in Christian ACT**

In life, we humans get stuck—stuck in bad habits as well as in poor perceptions of ourselves. As a result, we stop growing in our emotional and relational lives. ACT provides some of the answer as to why we get stuck (e.g., foreclosed judgments, psychological inflexibility) and suggests meta-cognition, acceptance, and openness to re-evaluation of motives will lead to growth and freedom. While changes in higher order cognitions (beliefs and attitudes), habits, and self-understanding are present when a person grows and

changes, it is not clear whether these activities are the stimulus for change or the result of change. What enables a person to move from "I can't..." to "I'm *having a thought* that I can't..." to "I've decided to act in spite of that thought"? In ACT the therapist uses strategies to improve acceptance and defusion, mindfulness, and re-examination of core chosen values. These provide the space for a client to examine areas of life. However, without a robust therapeutic alliance between therapist and client, little growth will be possible. Still, the therapeutic alliance and the interventions used may provide the ingredients for change, but are they in fact the prime mover of change?

In Christian discussions of change, it is important to consider the role of the Holy Spirit. Romans 5:1-6 give a picture of the agent of change. *Justified* by God, we now have *peace with* God and the gift of his *presence*. Such relationship produces hope—hope that we are and will be fulfilling our original created design. Such hope is so powerful, that it enables us to rejoice in sufferings as we grow and lean into our ultimate identity. And this hope produces more hope. And yet, the agent of change is not the legal change (justification) nor the perseverance nor the hope. Verse 6 provides us with a glimpse of the agent of change, "And hope does not disappoint us, because God has poured out his love into our hearts by the Holy Spirit, whom he has given to us" (NIV). The Holy Spirit's pouring God's love into us appears to be the primary agent of change. How might a Christian dialect of ACT acknowledge and account for such catalytic activity of the Holy Spirit?

Rather than merely raise questions, I would suggest the best place to modify ACT to fit a Christian dialect would be to consider moving beyond mere transliteration of "self-as-context" to substituting it with a concept that fits within the meta-narrative offered by the Scriptures. While there is great gain to look "from the self" rather than "at it," to watch or observe the self, the overarching narrative of the Bible appears to articulate a narrative for us. "Once you were...but now you have been..." occurs frequently in Pauline literature as well as throughout the entirety of Scripture. In keeping with John Calvin's thought in book one of his *Institutes*, we only know self in light of God and know God in light of knowing self. Thus self-as-context may be better understood as self-*in*-context. We might argue that only in the freedom of knowing we are at peace with God can we truly be free to step away from fused negative conceptualizations of our self and find the flexibility to rejoice even in the midst of suffering.

Again, I thank Tim for his hard work in this first attempt to translate ACT into the Christian dialect. It provides space for us to re-consider the agent, catalyst, and mechanisms of psychological change.

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### **ACT, Values, and Christian Psychology: A Response to Sisemore**

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"Amen, brother" is probably too brief a response for an academic journal, but it would be a fitting summary for my observations of Sisemore's (2015) article, "Acceptance and Commitment Therapy: A Christian Translation." Sisemore demonstrates both a good understanding of Acceptance and Commitment Therapy (ACT) and Christian wisdom. Rather than repeating all our points of agreement, I limit my observations to two anecdotes about ACT and Christianity, a few positive reflections regarding Sisemore's article, and two suggestions for further translation work.

### **The Enlivening Effect of ACT**

My first anecdote relates to the 2014 National Conference of the American Association of Christian Counselors (AACC) where Dr. Linda Mintle and I taught an intensive course on cognitive behavioral therapy (CBT) and related counseling methods. For several sessions we taught various aspects of CBT, including a theoretical overview, methods for treating anxiety, depression, and relational problems, and a Christian critique. Dr. Mintle and I alternated sessions, and on my final session I intended to mention ACT as an example of third-wave CBT before moving on to a discussion of technology and CBT. We never made it to technology. Though the entire course seemed to generate a good deal of interest, the audience was simply exuberant when it came to ACT. Even the pastor in the back row who had offered critical observations of almost every dimension of CBT quickly became a fan of ACT.

What happened? I think it related to two facets of ACT that this Christian counseling audience found most intriguing. First, as Sisemore (2015) observes, ACT faces into suffering rather than promoting avoidance. Earlier forms of CBT sometimes seem shallow insofar as they resemble a toolbox of techniques to help people reinterpret life experiences

in order to feel happier. Happiness is not a goal of ACT. Acceptance is.

Second, ACT promotes awareness of one's values and living in ways that demonstrate commitment to those values. To be clear, ACT does not promote Christian values, or any particular set of religious values. Rather, ACT emphasizes the importance of freely chosen values in how one lives. Still, this seemed to promote a collective sigh of relief among the audience, as if people were saying, "It's about time someone talks about values."

I have observed a similar enlivening effect among doctoral students at the Christian university where I teach. Every year several students travel to Nevada for the ACT "boot camp." They come back excited about the possibilities, and sometimes enlivened in their faith. This relates to my second anecdote, which I will save to the end.

### **Some Positive Reflections and Further Translation Needs**

I have too many points of agreement with Sisemore (2015) to list in this brief response, so I'll restrain my list to the essentials. First, my initial point of commendation is the task itself. We have needed a Christian translation of ACT, and Sisemore provides an excellent one. Perhaps it is best perceived as a strong start to a conversation that requires ongoing dialog. As the name implies, ACT involves both Acceptance and Commitment. The Acceptance part is what the AACC audience first got excited about – that we do better to accept the realities of life, even the harsh ones, than to engineer ways of avoiding pain. Sisemore's translation excels in this regard as he explores the contextual nature of a self. The Commitment part is the second thing that enthralled the AACC group: values matter, and it is important to live into our values. Sisemore addresses values in his translation, but space did not permit him to explore it as thoroughly as he explores acceptance. I agree with this choice because acceptance has more complexity when it comes to Christian translation, but I would like to see additional translation work done that emphasizes commitment to values. For example, ACT emphasizes freely chosen values. To what extent are Christian values prescribed for us as compared to being freely chosen?

Another dimension of Sisemore's article that I appreciate is his thoughtful enthusiasm for ACT. He writes: "In all my years of practicing, teaching, and writing, no secularly rooted model of therapy has seemed to offer such a readily apparent 'fit' for Christians as ACT, both in terms of its ends and its means" (p. 6). I heartily agree. Sisemore goes on to explain and illustrate this admirably. Sisemore and I agree that ACT has a rich theoretical depth in addition to practical clinical applications. Very often a therapy emerges because it works, and then the theoretical substrate

is developed later. In the case of ACT, the theoretical work (Relational Frame Theory) is impressive in its own right, and the clinical science is built atop this theoretical frame. When I attended a recent workshop by Stephen Hayes, he referred several times to "the engineers in the basement" in reference to the theoretical foundation for ACT interventions. In this case, both the engineers and the clinicians are impressive! Sisemore correctly refers to ACT as a third generation approach to CBT, and it seems important to note that it is far more than an extension of second wave CBT, which has relatively shallow theoretical roots (McMinn & Campbell, 2007). ACT shares more in common with first wave CBT (behavioral therapy) than second wave, but has more theoretical sophistication than either.

Along with the enthusiasm that Sisemore and I share for ACT, there is work to do. Sisemore has provided an excellent start. This work will involve both theoretical and empirical work. My colleagues and I are currently engaged in an integrative look at ACT which will appear as a chapter in a book co-edited by Stephen Hayes, one of the co-founders of ACT (McMinn, Goff, & Smith, in press). Though no published empirical work yet provides clear evidence for a Christian accommodation of ACT, it is fascinating to see ACT applied effectively to pornography viewing (Twohig & Crosby, 2010), both because it is a topic of interest for Christians and because it is an area of research rarely considered in mainstream mental health treatment research.

Because of its theoretical complexity, ACT is not quickly comprehended. I appreciated Sisemore's use of metaphor, something quite common in the world of ACT. His basketball metaphor exploring functional contextualism in light of Christian thought is brilliant. I also appreciated his metaphor involving currency, and it reminded me of a related metaphor I use in the classroom. Consider a nickel, which is money, of course. If the United States government decided today that a nickel is no longer worth the price of minting it and abolished it as money, do you suppose that you could ever pick up a nickel for the rest of your life and not still remember it as money? Would it ever just be a round chunk of metal? Probably not. This is an example of the contextual nature of knowledge. All words, and all ideas, exist in a relational frame with other words and ideas. We can't simply change that frame by exerting willpower or repeating new words. Better to accept and observe that we are selves in context than to spend our lives trying to escape, change, or transcend our contexts. In this, Sisemore makes a nice connection between self-as-context and the observing ego that is described in psychodynamic traditions. Clark Campbell and I describe a similar construct in *Integrative Psychotherapy*, which we call Recursive Schema Activation (McMinn & Campbell, 2007).

I both admire and appreciate how Sisemore handles the ideological connections between Buddhism and ACT. This should neither be trivialized nor exaggerated, and Sisemore strikes the ideal balance in this regard. Kelly Wilson, one of the co-founders of ACT, addresses Buddhism and ACT in a provocative blog post (Wilson, 2006), acknowledging that the founders of ACT may have read a book or two about Zen Buddhism in the 1960s while making it clear that the roots of ACT can also be traced back to the Judeo-Christian tradition.

Also, I appreciate how Sisemore considers suffering. ACT theoreticians and clinicians are quick to point out how pervasively we engage in experiential avoidance. When something is unpleasant, we go to great lengths to avoid it. Sometimes this is adaptive, but sometimes it puts us on a treadmill of misery and psychological inflexibility. Facing the inevitability of suffering is an alternative, which means the point of therapy is not obtaining happiness or even finding relief from suffering, but is more about psychological flexibility as well as defining and refining oneself in the midst of life's challenges. There is something deeply consistent with Christian thought here, and Sisemore does a stellar job illuminating this while also distinguishing between a Christian and Buddhist understanding of suffering.

As a final reflection, I appreciate Sisemore's treatment of mindfulness. While certainly it is part of ACT, mindfulness is common parlance in a variety of treatment approaches today. This is another area where additional translation work needs to be done. Ryan O'Farrell at George Fox University is currently working on a Christian translation of mindfulness for his doctoral dissertation. I look forward to seeing where this will lead.

### ACT and Grace

My second anecdote about ACT occurred recently in my office as a doctoral student described how attending the ACT boot camp allowed her to understand grace. Clearly, I was taken aback because ACT has no pretense of being explicitly religious, and I have spent my career trying to understand grace (e.g., McMinn, 2008). She explained, and then I pondered her words almost nonstop for several hours until it started to sink in.

Oversimplified, second wave CBT looks like this: "Do something, and then you will be better." The "something" is likely to be revising thoughts or breathing differently or learning new social skills. ACT turns this around: "Stop trying to do something. Accept what is, and then live into your values." My student then applied this to Christian ways of looking at the world. Very often we approach it in ways analogous to second wave CBT: "Do something, then you will experience the presence of God." The "some-

thing" may be related to various spiritual practices, avoiding certain behaviors, acting charitably, and so on. Grace turns this around: "God loves you. Accept it. Now live into your values."

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### Lost in Translation? Some Methodological Questions

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Let me lead off with some autobiography. My interest in counseling and psychology goes back to my experience in medical school, decades ago, at Howard University College of Medicine in Washington, D.C. I recall those days vividly. I was a new believer with no formal theological training—young, intellectually curious, intrigued by the implications of my faith for

what I was learning. As a freshly minted med student, I was required to take a wide range of classes over the first two years. One of them was a course in psychiatry. Oddly enough, that experience awakened me from my dogmatic slumbers.

The material covered in those lectures prompted pressing theological questions. I do not remember the details, but they were the usual suspects, having to do with hamartiology, anthropology, biblical authority, and the like. In my confusion, I floundered around for any help I could find. I tried reading mainstream Christian psychologists—but to be honest, that experience was like wandering a desert. I speak anecdotally, of course; not many of them were proficient in thinking psychologically *and* theologically. Not to say that was the only important question worth asking—it wasn't—but I was parched. I was thirsting for more. It was in that context that I came across the "Biblical Counseling" literature. Ed Welch and David Powlison were particularly helpful to me in those days (e.g., Welch 1998; Powlison 1996).

Not long after, however, I discovered other scholars building similar bridges between psychology and theology. The bright lights in that solar system were Bob Roberts and Eric Johnson (e.g., Roberts 1983, 1984; Johnson 1987, 1997). The landscape of Christian psychology today is obviously far more complex than it was in the late 1990s, but those early essays by Roberts and Johnson were part of a nascent "Christian Psychology" movement. This latest contribution by Timothy Sisemore, within the flagship journal, clearly stands within that tradition and I'm grateful for the opportunity to participate in this dialogue.

One of the clear strengths on display here—and, I might add, a comparative weakness of biblical counselors—is a very detailed approach to engaging, indeed learning from, non-Christian perspectives in psychology. Sisemore makes good on staid doctrines like common grace and general revelation (see the older exchange: Welch & Powlison, 1997a, 1997b; Hurley & Berry, 1997a; 1997b). I should also confess that prior to reading Sisemore's analysis, I had never heard of ACT; as my academic specialty is in systematic theology, not psychology, I thus share Sisemore's "trepidation" (p. 6). In what follows, I restrict my comments to three methodological questions.

### The Question of Methodological Naturalism

My first question has to do with functional contextualism. According to Sisemore, this approach has no interest in "objective truth" but truth "as it occurs in an ongoing act-in-context" (p. 7); it adopts a pragmatic rather than correspondence theory of truth—"ontology adds nothing to this" (p. 8). It's not a denial of ontology; it is "a-ontological." As Sisemore clarifies: "ACT holds that the 'truth' of events lies in their specific consequences, not in their fit with an objective

reality" (p. 8, my emphasis). Functional contextualism pleads agnosticism on ontological questions having to do with God—thus, "Christians can hold to their ontological views about God while functional contextualism might consider how those beliefs are lived out in the context of their lives" (p. 8). ACT appears to be committed to methodological naturalism (note: "methodological" *not* "metaphysical"!); Sisemore's description bears this out: "*Just as science is a-theistic in the sense that its rules do not allow it to address the issue of an ontological supreme being or God* (and thus does not affirm nor deny God's existence), so functional contextualism applies truth 'rules' to our language activities to focus on how they serve or do not serve our objectives" (p. 8, my emphasis).

What should we make of this stance? On one level, this approach seems plausible when counseling unbelievers. A Christian psychologist, for prudential reasons, may steer conversations away from explicit theological or metaphysical claims about reality, focusing instead on functional matters. Helping an unbeliever develop practical ways of coping with life is a tangible gain, even if the more urgent evangelistic question remains (e.g., Acts 4:12). Is this a case of *preparatio evangelica* ("preparation for the gospel"), but with a psychological twist? Early church fathers like Justin Martyr believed that pagan philosophy prepared the Greeks for the gospel. Perhaps functional contextualism, a methodologically naturalist approach to counseling, prepares unbelievers for the gospel—enabled better to cope with life, they are now in a position to consider, more realistically, the exclusive claims of Christ.

Maybe so. Yet I worry about the implications of adopting the a-ontological approach for *translation* ("translation" in Johnson's original proposal is an explicitly *Christian* task). Sisemore seems to argue that psychologists can compartmentalize what they're doing; you can truncate your beliefs about reality in the counseling setting, but not for the rest of life. While I understand Sisemore's reasons for endorsing this move, I have two concerns. First, if the aim is to offer robust, rich, *Christian* soul care, then it is far from clear why you would adopt an "a-ontological" framework. Channeling Al Plantinga, we might ask: why do a thing like that? Why restrict our (psychological) evidence base? Why climb a mountain with one hand tied behind your back? It might be true, as Sisemore implies, that appeal to the entire evidence base—which includes Christian ontological truths—on its own, does not guarantee "success" in counseling. Fair enough, but it still does not follow that we should shelve ontology, even temporarily—is that even possible?—to focus instead on pragmatic utility. It seems to me that there is an intimate connection between the "ontological" and "functional" aspects within the Christian story. I'm thus skeptical that the

"truth" of an event—*truth* from a holistic Christian perspective—can, or should, be divorced from objective reality.

But perhaps a functional a-ontologism makes sense in certain fields of natural science (e.g., organic chemistry or atomic physics). On this view, you could be a Christian with a full slate of ontological beliefs, but you set aside the central or controversial ones when working in the laboratory. I have deep reservations with this strategy, though I realize it has many proponents among Christians in the natural sciences (e.g., McDonald and Tro, 2009; for a dissenting voice, see Plantinga, 1996). The problem here is that Sisemore is commending this methodological agnosticism in the field of Christian *psychology*. But as one theologian explains,

Every discipline presupposes some doctrine of the human. In some disciplines that doctrine is very much on the surface and potential conflict between the Christian and others will be more to the fore. One might suggest that there is a principle of proximity to the anthropological. In the discipline of logic where the human is not the object of inquiry conflicts may be minimal. But in a discipline like psychology such conflict may be inescapable. (Cole, 2005, p.5)

Precisely because psychology shares many of the same concerns as Christian theology, the viability of methodological naturalism—or functional contextualism—is far less promising.

### The Question of Using Scripture

My second question relates to the role of Scripture in Sisemore's analysis. In his translation of Relational Frame Theory (RFT), for instance, we are told that RFT has "great explanatory value for how we develop our thought patterns. . . [and] how to change these," but neither Scripture nor Christian theology "offers a theory of learning and relationships of thoughts that compares to RFT" (p. 9). RFT offers content that will potentially benefit Christian theology. But how does one appropriate that content legitimately, i.e., biblically? To his credit, Sisemore recognizes the biblical exhortation to have the mind of Christ (1 Cor 2:16), but he goes on to say: "the Bible does not give specifics of how we are to develop it" (p. 9). It's open season, as it were—the Bible is silent, so RFT can fill in the gap.

But that conclusion is debatable. The Bible has much to say on discerning the mind of Christ. We are to ask the Father for heavenly wisdom (i.e., Christ's wisdom), for he is a generous, benevolent God (James 1:5). We pray for it; we pray without ceasing (1 Thess 5:27). Indeed, as we feed on God's Word, we are developing nothing less than the mind of Christ (e.g., Matt 4:4; 2 Tim 3:16-17). And, we are not limited

to proof-texts, for the entire Bible, its warp and woof, testifies to the mind of Christ (cf. Luke 24:27). Given these "specifics" from Genesis to Revelation, it is strange to imply that the Bible is silent on how to develop the mind of Christ. Sisemore, no doubt, agrees with all this and he might respond that such biblical texts still need more tangible, concrete expression. True enough, but that opens up an even deeper question for Sisemore's use of Scripture.

Consider his evaluation of self-as-context. The "conceptualized self" is our normal way of construing personal identity, one that may be problematically "fused" to earlier experiences. Instead, ACT proposes the idea of the self "as a context for experiencing life," a means of defusing those troubling relational frames (p. 9). What I find interesting is Sisemore's appeal to Romans 7 and Matthew 6 as biblical warrant for self-as-context (p. 10). I'm doubtful because the biblical material that he cites here, and elsewhere, *underdetermines* psychological theory. I suspect that a large number of psychological theories are consistent with the passages he references (especially when those passages are taken as isolated proof-texts). But those theories can't all be true. Where does that leave us? How do we plausibly "use" Scripture in assessing any psychological theory? The connection between Scripture and Sisemore's psychological analysis seems tenuous. My worry is that the approach exemplified here is superficial; we need a more sophisticated engagement with the Bible. Perhaps Sisemore can offer us some criteria for discerning helpful vs. less helpful ways of *using* Scripture.

### The Question of Scientific Criteria

My last question concerns the role of scientific criteria in translation. Sisemore's article highlights afresh the problem of scientific legitimacy that has bedeviled Christian dialogue on psychology. How should Christian psychologists faithfully engage secular psychological theories? That's a big question, so let me focus on one slice of the problem.

I was struck by how Sisemore is beholden to the necessity for empirical testing and evidence-based results; thus, he writes, "empirical testing is needed to demonstrate that a Christian accommodative ACT is scientifically effective and its use in counseling warranted" (p. 14). Sisemore is merely representative; his instincts reflect the best practices of other practitioners in the field (e.g., see typical articles in the *Journal of Psychology and Christianity* or *Journal of Psychology and Theology*).

On the one hand, these appear to be laudatory moves. Christian psychology and counseling are like the Wild West; it is the time of the Judges, everyone doing what is right in his own eyes. Such "lawlessness" is true across the board—for integrationists, biblical counselors, etc. Do any of these approaches work as

advertised? Are there harmful effects? Unintended consequences? We could multiply the questions. Scientific rigor helps answer such queries. Christians should not get a free ride; we of all people should be seen as setting a high bar on quality control. We're not snake handlers, nor do we sell religious gimmicks—Christian psychology, as Johnson has written, is “a wise science of individual human beings that includes theory building, research, teaching, training and various kinds of practices, including the care of souls” (Johnson, 2007, p. 9). Just so.

On the other hand, one can't help wondering what we miss, or what gets marginalized or distorted, when scientific epistemological criteria become the primary frame of reference for Christian psychology. I'm treading carefully here, for there's no virtue or godliness in anti-scientific, anti-intellectualism. I have no wish to throw out the baby with the bathwater. And yet ... Imagine if patently theological or metaphysical realities were subjected to evidence-based epistemic criteria. Imagine if the efficacy of the sacraments or the reality of union with Christ were subjected to evidence-based epistemic criteria. Yes, perhaps such criteria would allow us to see some realities that we would otherwise miss, but just as likely they would constrict or even warp the way we see reality. The point, of course, is that evidence-based criteria—the kind that are uncontested within the secular guild—are not value-neutral but embedded within a complex set of assumptions, norms, plausibility structures, and so on. If we must use them, then at the very least we must use them *critically*, particularly when we are dealing with the human person before the living God. These are exceedingly complex questions, and I make no pretense of having compelling answers ready to hand. In fact, that is the main reason I am looking to Sisemore for wisdom and guidance on how best to adapt scientific epistemic criteria for robustly Christian psychology.

### Concluding Observations

Sisemore's article is an exercise in “Christian translation,” making good on Johnson's proposal in *Foundations for Soul Care* (2007). In setting out the idea of translation, Johnson's original discussion drew primarily on Alasdair MacIntyre. As a theologian, however, I was actually more struck by its deep resonances with Christian *missionary* reflection (e.g., Moreau, 2012). Even the language of “translation” is strikingly missiological. The genius of the Christian Scriptures is its infinite translatability, glad tidings from heaven translated into hundreds of languages (Sanneh, 1989; Walls, 1996). Missionary dialogue on how to contextualize the gospel in different cultural settings and best practices for avoiding syncretism, etc.—such motifs are not too different from the five steps of translation modeled by Sisemore (especially the first three:

comprehension; evaluation; translation). If secular psychology is an intellectual mission field, then Christian translation is an important attempt at contextualizing the core commitments of a genuinely Christian psychology.

Since we're waxing missiological, I'm reminded of a wise observation I first heard from Timothy Tennent. Theological reflection, especially in its Western guise, tends toward theory and abstraction. It finds safety in the Ivory Tower of theological speculation, rather than the “rough sea of real life application.” Missionaries get their hands dirty in the trenches, doing theology in the unpredictable messiness of real life. Theologians, on the other hand, can dot their i's and cross their methodological t's, but at the risk of a blissful irrelevance (even if we grant the danger of cliché, this critique of academic theology names a real problem). As one practitioner put it, “missions is what keeps theology honest” (Tennent, 2009). While I always try to keep it real in theology—or, at least, I like to think I do—the ghost haunts me still. Nevertheless, I hope my three questions contribute meaningfully to the present dialogue. I remain indebted to Sisemore and others in Christian psychology who daily get their hands dirty in the trenches. The Lord knows they keep *this* theologian honest.

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## Response to Comments on "Acceptance and Commitment Therapy: A Christian Translation"

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I wish to thank those who generously used their time and intellectual and spiritual gifts to respond to my piece on Acceptance and Commitment Therapy (ACT). I share McMinn's experience of this approach striking a nerve among believers when I have presented on it, and am grateful to Monroe for affirming the need for the effort to address constructs and not just techniques. Yet I recognize that we all will not agree on the fit for ACT among Christians. There are hundreds of different therapies in the counseling world, despite a general consensus that science should be the backbone of the enterprise. Christians generally hold to the Bible as a singular authority for God's truth, yet have interpreted it so variously as to yield thousands of denominations. Trying to find some intersection between the two seems challenging at best. But to try to respond in an ACT-congruent way, I accept the discomfort of being critiqued as being in the service of my value of seeking a truly Christian approach to counseling.

I am grateful for so many helpful affirmations and suggested improvements. I will interact with them in order of the translation topics in my paper. But first I believe it is expedient to respond to the more global and sustained concerns of Madueme. Mostly to him, but to all, I extend an apology for unclear writing. Some of his responses suggest I did not communicate well at points. I also appreciate the respondents being sensitive to my undertaking a larger task than a brief article can accomplish.

I apparently did not make clear that I do not personally adopt an a-ontological approach, but that ACT as a model does. It works within the ontology (or values) of clients and is adaptable. For Christians, we work within a shared ontology and ACT allows space for that. Note that I specify that it is an approach to dealing only with language and emotion in the counseling setting. One of the great assets of ACT, as McMinn points out, is its values, and Christianity and its embedded system of goals and motives thus can "fit" into the ACT system. While I do see merit in approaching language and emotion in a contextual sense, by no means does this imply that I check my faith at the counseling room door.

Exposing the function of language is an important step in moving forward to seeing how "linguaging" (an ACT term) can hinder our walk with Christ.

This is important as it leads to another concern voiced by Madueme, that I am "beholden to the necessity for empirical testing and evidence-based results" (p. 27). The whole idea of translation suggests that I am working from a Christian worldview, and value revelation over reason or science. However, as I apparently failed to make clear, Christians who counsel under the auspices of a license in order to receive third-party reimbursement are beholden to science by virtue of holding a public credential. The day is coming quickly where there will have to be scientific evidence for Christian counseling if it is to be done in a professional sense. An advantage of biblical counseling is that it is free from this constraint, and I envy that in many ways. If I might, I would just say, in a functional contextual sense, scientific support is necessary if we are to work in the context of a professional license. This is thus not my "primary frame of reference" as Madueme states (p. 28), but a necessary accommodative position to working within the profession. A medical doctor would be hard pressed to keep a license if he or she merely appealed to divine healing and did not apply biological science to treating a disease. A pastor might not share that constraint, but I think a physician would.

Madueme's claim that I declare "open season" (p. 27) on places where the Bible is silent, and particularly on the idea of the mind of Christ, also seems to stem from a lack of precision/clarity in my writing. My point is not so much about the content of the mind of Christ (e.g., Philippians 4:8 offers some "content" for what we are to think on), but about the process of how the mind develops language. I don't think it is "open season" on curing cancer because the Bible does not explain how cancer works, but this leaves room for science, not just any potential aid that anyone might hold forth. On the other hand, I readily agree there is much room to develop a more sophisticated biblical understanding as it relates to ACT.

Let me turn now to comments along the lines of each of my concepts for translation. Not surprisingly, the idea of functional contextualism drew the most attention, and I responded to Madueme's concerns earlier. I am particularly pleased that Winston Smith finds some "deeper biblical resonance" (p. 20) than I realized. The examples of meat offered to other gods and the notion of responding to disputable matters is a very helpful idea on how we can function in certain ways in some situations without compromising one's "ontology" while acting on truth and love.

Also not surprisingly, relational frame theory drew the least response, other than Madueme's comments above. As a theory of language and how it develops, there is little overlap with Scripture, except for the issue of the appropriate content of the mind of Christ in us.

Self-as-context is a tricky notion, and the comments on it are insightful. While I might nuance the idea that the idea "reflect[s] Buddhist practices" (p. 20) to add that it adapts a Buddhist practice toward a different purpose, I concur with Smith that Christians do well to learn to defuse our own brokenness from who we are in Christ, an idea to which Garzon also alludes. Monroe makes a useful comment in noting that we need to recognize the greater context of peace with God in order to more safely step away from our fused negative self-conceptualizations.

Garzon offers some wise comments on mindfulness that move in the direction of developing a Christian-accommodative ACT. While I'm not sure I agree that ACT necessarily promotes a standing alone in mindfulness, Garzon does make clear that Jesus was not "mindful" in the full sense of the Word. I might have more plainly stated that Jesus's teachings promote some sense of mindfulness as used in ACT by being attentive to present experience and seeing it as it is rather than from erroneous preformed conceptualizations. I plan to pursue his helpful suggestion to think more on the role of immanence in a Christian approach to ACT.

I don't recall much negative in response to the idea of suffering in ACT, and McMinn accurately notes how this resonates with Christians and the full teaching of the Bible on the role of suffering in the Christian life. I fear we as Christian counselors have often been caught up with the majority view of therapies (and modern Western culture) that suffering is just something to avoid at all costs. The Bible speaks much about the value and inevitability of suffering, and it is a strength of ACT that it sees importance in this.

Little was said about psychological flexibility, though Smith's notion of our seeing ourselves as children as a way of exhibiting psychological flexibility is fascinating. This gives me pause for further thought

along those lines.

Several comments also move beyond these to offer other directions for developing the model. McMinn noted how his experience shows that the focus on values in ACT is well-received by Christian counselors as most therapy models are about alleviating suffering and not focused on flourishing. I did not add a section on translating values, but that is clearly needed. Christian values are not just individual, but shared with others. Here Monroe's comment about ACT as self-centered rather than community-centered is germane. ACT allows for self-as-context to be at the intersection of You/Me, Then/Now, and Here/There. Maybe "You" should be expanded to "Us" to focus on how the person is situated in relation to Christian community.

Finally, Garzon and McMinn both point out a role for grace in the model. Garzon sees grace as going beyond acceptance. While this may miss a little of the ACT focus on acceptance as a willingness to endure some suffering in pursuit of values rather than a sense of personal acceptance, God's grace is a vital context for the believer to go through the process of seeing oneself in ACT, knowing that he or she is accepted and forgiven and thus being freed to consider the fused thoughts that get him or her "stuck". McMinn's student in his second anecdote also brings up grace in ACT. It parts from the "works" approach of CBT to doing something then you will experience God's presence to a focus on accepting that God loves you first, then you are free to move into your values.

I have greatly benefitted from the insights of my colleagues, and again thank them. I end by circling around to Madueme's likening the translation process for ACT to the contextualizing of missionary work. Gospel truths must be translated into the language of a people for them to understand, and many ideas in the Bible benefit it translated into images or metaphors more compatible with the cultural context of those being served. Christian psychologists, therapists, and counselors seeking to reach into the highly secularized culture of psychotherapy can do so when we can effectively interact with the "language" of that culture, which is science and empirical evidence. Translating ACT is one small step to finding not only useful tools to serve our Christian brothers and sisters, but to reach the community with the word that Christianity is valuable and has a place in the counseling room.

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# Christian Psychology as a Type of Critical Psychology

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*Critical psychology is based on critical theory which, understood most broadly, considers humans and discourse about them from the standpoint that they lack awareness of their tendency to advance their own interests at the expense of others. As a result, critical psychology studies the lack of awareness that humans have of their oppression of others; exposes ways in which mainstream psychology reflects the same biases; and promotes emancipatory practices which lead to greater awareness and the undermining of oppression. Christianity is a religion which is permeated by a critical sensibility. The origins of this orientation are found in the Christian canon. However, Christian critical thought did not clearly emerge in the Christian tradition until the work of Søren Kierkegaard. More recent developments are also highlighted.*

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## A DEFINITION OF CRITICAL PSYCHOLOGY

Critical theory is an approach to human beings that assumes that, to some extent, they seek to advance their interests at the expense of others and lack awareness of this agenda. The term “critical” is used because this type of investigation involves a critique of human consciousness and activity that seeks to uncover influences that are generally hidden from people’s awareness. Critical theory has been especially identified in the 20th century with Marxism, for example, the Frankfurt School (incl. Herbert Marcuse, Theodor Adorno, and Max Horkheimer). However, some have understood its orientation to extend much more broadly. Ricoeur (1970), for example, identified three “masters of suspicion” in recent Western thought—Marx, Nietzsche, and Freud—who taught that human knowing and activity are compromised by unacknowledged economic, power, and sexual motives, respectively. Today, critical theory encompasses any view of human knowledge and activity that explores biases based on social categories and that promotes some form of emancipation, for example, psychoanalysis, feminism, post-modernism, queer theory, post-colonialism, literary theory, and cultural studies, as well as Marxism.

Critical psychology is the study of humans (and psychology itself) that seeks to take into account the above biases and promote corresponding emancipation. Fay (1987), for example, argues that any critical social science consists of a complex of theories, including a theory of false consciousness regarding ways that a group of people, largely without awareness, perpetuate unjust social relations and structures in part through a biased self-understanding; a theory of crisis, when some members become enlightened by recog-

nizing the injustice and biased self-understanding of their group; a theory of education that describes how enlightenment is fostered in the group; and a theory of transformative action, which seeks to bring about greater justice by the actual emancipation (intellectual and material) of oppressed members. Contemporary critical psychology has offered numerous critiques of mainstream Western psychology by highlighting its basis in natural science and technological assumptions, and a predominant reliance on statistics and the experimental method, all of which may distort knowledge about humans, and by studying the influence of various biases upon psychological knowledge, including individualism, ethnocentrism, androcentrism, heteronormativity, class, and power (Teo, 2014). By contrast, critical psychology advances a view of humans as characterized by embodiment, strong sociality, inner conflict produced by social oppression, intersubjectivity, and cultural embeddedness.

A critical psychology based on a Christian worldview will share many of the above features and concerns. However, it will also maintain that the false consciousness of human beings has to do primarily with their alienated relationship with the Creator, whom they know as a Trinity—Father, Son, and Spirit. Without a personal relationship with the God for whom they were made, humans live in spiritual darkness, seeking, but failing to satisfy their ultimate longings for God with creaturely substitutes, which in turn affects their activities and understanding of themselves and others, and contributes to unjust and oppressive human relationships. In addition, a Christian critical psychology will assume that the triune God is necessarily the ultimate source of the most comprehensive form of enlightenment there is, that occurs through

experiential union with the person and work of Jesus Christ by faith, fostered by the Holy Spirit.

## THE LONG PAST OF CHRISTIAN CRITICAL PSYCHOLOGY

### Its Canonical Origins

The seeds of a Christian critical psychology are found in the Bible. Though exemplifying lay or folk psychology, biblical discourse contains countless observations of critical significance. To begin with, a conflict runs throughout the Hebrew Bible between the God of the Hebrews, who is regarded as the Creator of the universe and the Lord of humanity, and the false gods of other religions and their idols, made by craftsmen out of mere trees, the followers of whom are considered to be deceived (see Is 44). The description of the “fool” in Proverbs provides an archetypal portrayal of humanity that reveals a critical understanding: “The way of a fool is right in his own eyes...” (12:15); “A fool does not delight in understanding, but only in revealing his own mind” (18:2). At the same time, there is an unexplained critical dialectic evident in the contrast between the sage of Proverbs who advocates the search for righteous wisdom (4:4-27) and the preacher of Ecclesiastes who has concluded the search for wisdom is vain (1:12-18). Even more subversive, what are we to make of the ironic similarity between the “you reap what you sow” justice taught in Deuteronomy and Proverbs and its echo heard in the judgments against Job by his “friends” (4:7-8), who seem to be wise, God-fearing men, but we realize at the end of the book are “fools” (Job 42:8). Brueggemann (1997) suggests that Ecclesiastes and Job are extreme examples of a “counter-testimony” to the dominant themes of the Old Testament. A key part of that counter-testimony reveals that human understanding, including our self-understanding, is severely compromised. If the divinely-inspired canon *itself* contains texts that offer multiple perspectives that together entail a critical stance, may we not assume that readers are being invited to engage in similar, multi-perspectival, self-critical reflection?

Particularly relevant to a critical perspective is the cry of the prophet Jeremiah, “The heart is deceitful above all things, and desperately sick; who can understand it?” (17:9). Throughout the prophets is a common theme of the exposure of duplicity: God prefers actual obedience over empty religious observances (1Sa 15:22); warnings against false prophets who claim to speak for God, crying “‘Peace, peace,’ where there is no peace” (Ez 13:9-10) and condemnations of those who honor God with their lips, but their hearts are far from him (Is 29:13).

All of this leads inexorably to the Christian portion of the Bible, which begins with the story of Jesus Christ, the Messiah, who came as “a sign to be opposed...to the end that thoughts from many hearts

may be revealed” (Lk 2:34-35). A central theme of the gospels is the conflict between the “hypocrites” (Ma 12:15; Lu 6:42)—religious leaders who believe they are devoted to God—and Jesus Christ, God’s Son (Mt 27:40; Jn 5:25), who will eventually be killed by them. The Pharisee provides another biblical archetype of humanity, at the center of the action in the gospels, who exposes the paradox of religious self-deception forever after.

God, then, turned this human tragedy into a divine comedy by raising Christ from the dead and establishing a way by which humans can be enlightened to their predicament and brought back to God through faith in Christ. In light of such teachings, Westphal (1993) comments: “The Christian Bible is surely the most anti-religious of all the world’s scriptures” (p. 265). Reflecting on humanity’s alienation from God, Paul wrote that humans have “repressed” the knowledge of God (Ro 1:19; *katechontōn*, Gk., “to hold back, restrain,” but often mistranslated “suppressed” in modern translations, at least according to contemporary psychodynamic definitions of these terms, in which suppression is conscious and repression is unconscious).

The Bible is also concerned with emancipation. A founding event of the Hebrew people was their “exodus” from Egypt, where they had been held in slavery and forced to work for their Egyptian overlords. Throughout the Hebrew Bible, the authors argue that the rights of the marginalized are to be protected and their needs addressed (e.g., Ex 23:1; Pr 29:14). In the New Testament, Jesus Christ is portrayed as a friend of sinners and the poor (Lk 6:20), who he came to free from their spiritual bondage and blindness (Lk 4:18-21; Jn 8:34-36). Indeed, the Apostle John turned one of Jesus’s healings of a blind man into a critical exposé. When the Pharisees heard he had been healed on the Sabbath, they were furious and ironically mounted an investigation. As it proceeds, it becomes clear that the blind man is wiser in the ways of God than the Pharisees, and at the end Christ states, “For judgment I came into this world, that those who do not see may see, and those who see may become blind” (Jn 9:39). When some of the Pharisees protested, Jesus replied, “If you were blind, you would have no guilt; but now that you say, ‘We see,’ your guilt remains.” (9:41). Self-deception, we learn in the gospels, is the worst of sins. Nevertheless, after Christ is crucified and raised from the dead, and he begins to establish a church of poor sinners here on earth through the Holy Spirit, we discover that even Pharisees can be emancipated from their bondage and blindness in the calling of Saul to become his main missionary and teaching apostle.

### Its Post-Canonical Developments

Shaped profoundly by the Bible’s teaching, Augustine radically modified the classical ideal of self-knowledge

by linking it necessarily to the knowledge and love of the Christian God. He also first articulated the Bible's doctrine of original sin, moving a Christian understanding beyond the typical moralist's concerns with wrong deeds to the far more radical realization (already fittingly revealed through the writings of the ex-Pharisee/Apostle Paul, see Ro 3:1-23; 7:5-25) that humans are born universally with an unaccountable preference for creatures over their Creator, which results in a pervasive blindness regarding what is genuinely good, true, and beautiful, a problem that can only be addressed properly through baptism and faith in Christ. Augustine's teaching had an enormous influence on the Western church during the Middle Ages, as well as the Reformation. However, the split between Protestants and Catholics spawned by the Reformation led to a self-awareness crisis for both groups, as they came to realize in the following centuries—through their interpretations of the claims of the other—that Christians could be fundamentally deceived about the Christian faith and therefore about their personal standing with God. As a result, distinguishing true from false faith became a paramount Christian concern in the early modern era, contributing in part to a lack of assurance among some of the more psychologically vulnerable of that day, who otherwise appeared to be strongly committed Christians, an unfortunate distortion of a Christian critical agenda.

Some of Blaise Pascal's (1941) comments in the *Pensées* are suggestive of a Christian critical orientation, illustrated in his well-known saying, "The heart has its reasons, which reason does not know" (p. 95, #277). Saturated with Augustinian pessimism, Pascal believed that human perception and values were severely distorted by means of an inordinate and harmful self-love caused by sin, the influence of which humans are largely unaware, arguing that humans generally mask their fundamental self-centeredness by convincing themselves and others of their love of God, others, and justice for all (pp. 150-151, #450-#455). He also mocked the religious conceits of some leading Catholics in the Society of Jesuits in his day in *The Provincial Letters*, showing a willingness to turn a critical eye to his own Christian community.

**The father of Christian critical psychology.** Arguably a fourth "master of suspicion" (unaccountably left off Ricoeur's [1970] list), Kierkegaard considered himself both a Christian psychologist and a "prophet to Christendom," whose mission was to awaken Christians from their religious self-deception, so that they might embrace an increasingly authentic Christianity. Writing before Freud was born, Kierkegaard discussed aspects of what Freud later called "defense mechanisms," including distraction, procrastination, rationalization, and intellectualization (Evans, 2006). However, he believed that tightly logically-organized

systems themselves promote intellectualization, so he never developed his insights into a formal psychological system. Nonetheless, much of his corpus was dedicated to helping others overcome their partially willed self-deception, mostly by practicing what he called "indirect communication," in which he did not challenge the self-deception outright, knowing such a frontal attack on one's illusions would usually fail. So, especially in his early works, he wrote stories about less mature persons, hoping such narratives would awaken readers to realizations about their own similarities to the characters and then on towards greater self-awareness before God.

In one of the most remarkable essays ever written on sin, *The Sickness Unto Death*, Kierkegaard argued that becoming a self involves growing in self-awareness. However, the anguish of despair (the affective sign of humanity's original sin) leads people to deny aspects of themselves and so hinders their development. According to Kierkegaard, one cannot overcome sin's despair by greater virtue, but by faith, which he insightfully, but controversially defined as "the self in being itself and in willing to be itself rests transparently in God" (p. 82). Self-awareness before God and self-acceptance in God, for Kierkegaard, were simultaneously the remedies and goals of the human predicament.

Without God, the self in despair has two fundamental options: being overwhelmed by one's finitude and limitations (evidenced perhaps in severe melancholy) or living in the illusion of "infinity" and denying one's limitations. A social way to accomplish the latter is to join "the herd," where one's limitations are compensated for by being like everyone else. Kierkegaard recognized that people can find psychological "security" by submerging their individual identity in that of their group (Westphal, 1987).

According to Evans (1990), Kierkegaard's psychology research method was *value-critical*. In direct contrast to modern psychology's scientific ideal of detached objectivity, Kierkegaard believed that understanding human life's meanings requires interpretation and participation. He sharply distinguished mere objective knowledge from subjective knowing, and believed that the most important truths of life had to be personally appropriated, entailing a "double reflection" (2009, p. 30), which involved the additional step of knowing the truth *for oneself*. The merely objective knowledge of important truths of human life, he believed, amounted to their falsification. So the essence of Christianity for Kierkegaard involved growing self-awareness and the "inward deepening" of one's faith in God. Recognizing that, if his beliefs were true, he was himself still somewhat self-deceived, Kierkegaard frequently confessed his own imperfections in his writings, at times even refusing to claim to be a Christian, since that might imply his faith were an intellectual

possession that could be attained once-for-all-time. Rather, because Christianity is a way of life, he said that he simply *aspired* to be a Christian.

More like Nietzsche than Freud or Marx, Kierkegaard died without a dedicated circle of followers to advance his mission. As a result, his ideas were never developed into an explicit Christian critical psychology, and they became of greater interest to philosophers and theologians, than psychologists. It may be best, therefore, to consider Kierkegaard's work the "stillbirth" of Christian critical psychology. In addition, his work was not itself beyond Christian criticism. He seemed to enjoy making provocative statements, like "Truth is subjectivity" (1992), which did little to promote indirect communication. And as with so much of Christianity during the modern era, his work was characterized by a strong individualism, in contrast to Christianity's foundational Trinitarian/communal character (though he [1962] must have had some awareness of this weakness, since he addressed it with some success in *Works of Love*).

**Twentieth-century developments.** Though it took many decades before his work became known outside of his native Denmark, Kierkegaard made an impact both in 20th century philosophy (e.g., Heidegger and Sartre) and Christian theology (e.g., Bultmann, Bonhoeffer, and Barth). Karl Barth (1962), for example, argued that all religions—including Christianity—are humanity's attempts to construct its own, less demanding substitutes for living before God. Nonetheless, he also believed that God has definitively revealed himself to humanity in history in Jesus Christ, and he now seeks to emancipate humanity from its false forms of "meaning-making." In light of the gospel narratives, he thought that Christians especially ought to be self-critical and that by knowing Christ—in whom alone can humanity's true self-understanding be found—they can critically undermine the tendency to turn even this revelation into their own religious security.

During the mid-20th century, Thomas Merton (1961), a widely-read Cistercian monk, wrote about the "false self," apparently independently of Winnicott's (1965) more elaborate developmental and relational understanding of the concept. For Merton the false self is who one is without God and consists of one's egocentric desires for pleasure, power, honor, and love, around which one orders one's life of autonomy. Living out of one's false self, according to Merton, is the essence of sin.

René Girard (1987), the French social and literary theorist, developed an original theory about human cultural and individual development that has significant critical psychological implications. He highlighted the relation between what he believed are two universal, unconscious social processes: *mimetic desire*, the universal imitating of the desires of one's

fellows, leading to intense competition for limited resources and potential conflict; and the *scapegoat mechanism*, which channels the community's pent-up frustration and aggression and unifies it by appointing and punishing victims. The social order, according to Girard, is therefore unknowingly based on violence and the persecution of innocents. The Bible, Girard believes, exposes these dynamics, wherein God repeatedly pointed to a better way, especially by ultimately undermining the scapegoat mechanism through the gift of Jesus Christ, who offered an antithetic model for imitation: self-giving.

## CRITIQUING MODERN PSYCHOLOGY

Since its founding in the late 1800's, modern psychology has been based on a naturalistic worldview and a positivist epistemology, and required research methods and discourse rules that corresponded to these assumptions. As a result, ontological claims that could not be demonstrated empirically were forbidden in its discourse. Examples of such forbidden ideas include reference to the soul, free will, ethical absolutes, and the Good, to say nothing of supernatural beings or processes. Such restrictions have seemed self-evidently valid to most of those trained and socialized into it in their graduate studies, making it difficult to recognize the pervasive worldview bias and even discrimination involved in these practices. Nevertheless, the assumptions of naturalism and positivism in modern psychology have been increasingly subjected to criticism during the latter half of the 20th century by members of many different intellectual sub-communities within the discipline, including Marxist, feminist, queer, cross-cultural, and postmodern critical psychologists, as well as philosophical, humanistic, and positive psychologists. Though many segments of modern psychology have been unaffected, there has never been a better time to raise critical questions regarding modern psychology, at least in places where such criticism is permitted, including criticism from a theistic standpoint.

Contributing to such possibilities is the growing openness to generic religion and spirituality over the past few decades, the voluminous research showing the physical and mental health benefits of religious beliefs, an increasing recognition that religious and spiritual values need to be addressed in therapy, and the advent of positive psychology, with its empirical investigation of ethical and spiritual topics previously excluded from mainstream psychology, like the virtues and a sense of transcendence. Of particular significance has been publications on *theistic* psychology and psychotherapy over more than a decade—based on a broadly theistic worldview—which have highlighted the current hegemony of the naturalistic worldview in psychology and psychotherapy and begun to expose how modern psychology is operating without awareness of a

pervasive and systemic worldview bias (e.g., Piedmont & Village, 2012; Richards & Bergin, 2005; Slife & Reber, 2009).

A psychology based on naturalism obviously would not give any consideration to the role of God in human psychology. At best, modern psychology relegates the human experience of God to the sub-discipline called the psychology of religion. By contrast, a theistic psychology begins with the assumption that God is necessarily and pervasively involved in human life (Slife & Reber, 2009). Such a project entails a critical reexamination of all mainstream psychological research, theory, and practice *in light a belief in God's active presence*, in order to consider the impact on psychological science of leaving God out of its research and theory. Even more important is the development of psychological theory, research, and practice that assumes God's active presence. As an example, modern psychology has done hundreds of studies of "attributions," causal beliefs that humans form about why something has happened. The two main loci for human attributions are internal and external. Internal attributions include a person's dispositions, ability, or effort, whereas external attributions are influences outside the person, like other people or luck/chance. For instance, when evaluating why a student did well on a test, one might conclude it was due to studying hard (internal-effort), high intelligence (internal-ability), or excellent teaching or an easy test (both external-others). Yet almost no studies on attribution investigated beliefs about God's involvement, in spite of the fact that the vast majority of Westerners during that time were theists and believed that God can also be a causal influence on natural and human events. Nevertheless, because modern psychology assumes a naturalistic worldview, it did not occur to most attribution researchers to inquire about beliefs about divine causation (with the exception of those few who have studied religious attributions, whose research has been published in psychology of religion journals). As a result, for decades our understanding of the attributional style of Westerners has been somewhat distorted by worldview bias in this area of research.

There is good reason for theistic psychologists of all faiths to join together with critical psychologists and others to challenge the current dominance of the worldview of naturalism in mainstream psychology and advocate for greater worldview pluralism in the field, contributing a theological basis for such critical analysis (Gordon & Dembski, 2011; Johnson, 2007b; Johnson & Watson, 2012; Slife & Reber, 2009). Believing that God influences human events, Christian psychologists can also pray that the contemporary field of psychology will become increasingly diverse and open to the voices of psychologists of minority worldview communities like the Christian, and allow them to contribute in mainstream publications using,

where appropriate, their own worldview discourse in the interests of developing a more comprehensive and valid pluralist science of human beings.

## CONTEMPORARY CHRISTIAN CRITICAL PSYCHOLOGY

We conclude with a look at a few examples of a Christian critical psychology from the past few decades. In 1977, Paul Vitz, a professor at New York University and a therapist, published a little book arguing that modern psychotherapy ought to be considered a kind of religion that is centered on the self. Documenting his social/theistic critique with brief summaries of the classic therapy systems of Horney, Fromm, Maslow, and Rogers, he shows how they both exemplify and contribute to the solipsism of our age.

Over the next decade, Vitz turned his attention to Freud, a pioneer of critical theory in modern psychology, including his interpretation of religion. Freud thought that adult belief in God is due in large measure to the experienced deficits of one's parents, especially one's father, for which one compensates by projecting an idealization of them into heaven, providing a sense of ultimate security. Consequently, according to Freud, belief in God is a form of neurosis. In a well-researched investigation of Freud's experiences in his family-of-origin and courtship with his future wife, largely through his writings, diaries, and letters, in good critical fashion, Vitz (1988) turned Freud's interpretation of religion on its head by arguing that it was the experienced deficits in his relationship with his own father that led to and best explain Freud's disillusionment with religion and rejection of belief in God. Vitz (1999) used this interpretive framework to guide his explorations of the religious beliefs of a few dozen notable Western intellectuals, and outlined the "deficit father hypothesis" as an explanation for atheism.

While Vitz's work was suggestive of a Christian critical orientation, he nowhere explicitly claimed to be operating out of such a framework. Around the same time, however, two Christian philosophers—C. Stephen Evans (1989; 1990) and Robert C. Roberts (1994; & Talbot, 1997)—began arguing for the contemporary development of a distinctly Christian psychology. Such advocacy was due to their expertise in Kierkegaard and the greater openness to theistic perspectives in philosophy than psychology, for historical as well as methodological reasons. Roberts (1994; & Talbot, 1997) has offered a critique of a number of modern psychological theories from the standpoint of Christian theism (e.g. those of Carl Rogers, Albert Ellis, Carl Jung, & attachment theory, see Cassidy & Shaver, 2008). Evans (1989) notably contended for a critical dimension to Christian psychology, because of the human tendency to self-deception, which Christians believe to be a result of sin.

Over the past 20 years, Paul Watson (2011;

Roberts & Watson, 2010) has developed a framework and set of empirical procedures for assessing worldview bias, called the *ideological surround model*, which he has used to examine some of modern psychology's claims and research instruments with respect to their validity for describing and measuring Christian belief and behavior. For example, using these procedures, Watson has found bias against Christian belief in research based on existential (Watson, Morris, & Watson, 1988a,b,c), rational-emotive (Watson, Morris, & Hood, 1993) and humanistic (Watson, Milliron, Morris, & Hood, 1995b) assumptions, as well as a locus of control scale (Watson, Milliron, Morris, & Hood, 1995a). His investigations have documented empirically that worldview assumptions can compromise objectivity and demonstrated a way to measure and control worldview bias that can be subjected to public scrutiny. He has also challenged Christians to use these procedures to assess their own worldview bias, particularly when studying those outside the Christian community (Roberts & Watson, 2010).

### Christian Critical Psychological Practice

Biblical counselors Ed Welch (1998) and David Powlison (1995) have suggested that, because humans were made to worship God, their chief psychological problem is idolatry, that is, the investment of ultimate significance in some object, relationship, or ability within the created order that is incapable of satisfying one's created need for a personal relationship with an infinite, loving God. However, most people are largely unaware of this tendency and have little knowledge of their own idols, so biblical counseling, they suggest, should help people become more aware of these inadequate "gods" in which they unconsciously and unsuccessfully seek to find ultimate meaning, and lead them to the triune God as the only source of their true satisfaction through faith in Christ.

Some Christian psychodynamic therapists have examined and underscored the significant compatibilities there are between the psychoanalytic tradition and Christian clinical thought and practice (Bland & Strawn, 2014; Hoffman, 2011). On their own assumptions, Christian therapists can readily agree with other psychodynamic therapists that human actions and interactions are shaped by unconscious structures and processes like defenses, parts, inner-working models, and self-object representations and impacted through relations with other humans. But along with other theistic psychodynamic therapists (e.g., Spero, 1992), Christian psychodynamic therapists also seek to understand how one's relationship with God affects and interacts with these dynamic structures (Hoffman, 2011; Johnson, 2007a; Moriarity & Hoffman, 2010), and how substantial adjustments made anywhere within one's relational system (God-self-others) impact the rest. Furthermore, some Christian psychotherapists

have distinguished between one's God-concept (one's explicit, cognitive understanding of God) and one's God-image (one's unconscious, affectively-charged perception of God) (Moriarity & Hoffman, 2010), the latter having a greater influence on one's relationship with God despite being outside of one's awareness. However, most of the research and theory has been merely theistic. Future Christian critical discussions of therapy will examine the psychological and clinical implications of the Christian doctrine of a Trinitarian God—Father, Son, and Holy Spirit—and its impact on human experience and activity, for example, the role the indwelling Holy Spirit plays in Christian self-awareness and the significance of Jesus Christ's confrontation of the Pharisee's hypocrisy.

### CONCLUSION

The fact that the major founders of critical theory—Marx, Nietzsche, and Freud—were atheists, as well as many of their followers, helps to explain why Christianity has not commonly been recognized as a critical system of thought and life, and little love has been lost on either side. However, this is an unfortunate state of affairs for those inside and outside the Christian community. Christians have not fully appreciated the commonalities there are between their own interpretation of human beings and the various schools of critical thought, probably inhibiting mutual enrichment and possible collaborations between these communities. At the same time, secular critical theory has been impoverished by its inability to recognize the critical dimensions of Christianity, as well as that of other religions. One might hope that as secular critical theory matures beyond its atheistic roots and a Christian critical psychology develops and grows in self-awareness, a time will come when a significant rapprochement will be possible. Meanwhile, the Christian psychology community should eagerly embrace its critical heritage and investigate, elaborate on, and work with the unconscious/implicit dynamics of human beings according to its own distinctive worldview assumptions, including its view of God. We will all be the better for it.

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# The Relationship of Decline in Spiritual Struggles to Psychotherapy Outcomes: Evidence from a Large Scale Survey of Psychotherapy Clients

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*The relationship between spiritual struggles and mental health symptomology has received increased attention in recent years. The majority of research has shown that spiritual struggles are often linked with negative psychological functioning, such as increased depression, anxiety, and PTSD symptoms. Psychotherapy effectiveness is a field that has also been heavily researched. This study examines the relationship between decreases in spiritual struggles and psychotherapy outcomes. We hypothesized that there would be a positive relationship between decreasing spiritual struggles and improved psychotherapy outcomes. Utilizing a questionnaire developed by A Collaborative Outcomes Research Network, we compared the self-reports of 1,729 individuals. 474 of those studied experienced decrease in spiritual struggles as therapy progressed. The hypothesis was supported by a total effect size of 1.18. Those whose spiritual struggles decreased through the course of therapy were more likely to experience a reduction in their negative psychological symptoms.*

*Keywords: spiritual struggles, religious coping, psychotherapy outcomes, religion, spirituality, psychological symptomology, depression, anxiety, Post-traumatic Stress Disorder*

## CHANGES IN SPIRITUAL STRUGGLES AND PSYCHOTHERAPY OUTCOMES

Psychology and religion, although different in approaches, are both highly interested in the human condition. In fact, there are several aspects of religion that intersect with psychology. According to James (1985), both psychology and religion acknowledge there are forces that work in bringing redemption to human life. They are both generally concerned with understanding human nature and work towards bringing positive change in a person's life. In addition, both psychology and religion are developmental processes. Sisemore (2016) writes, “religion and spirituality develop and change across lifespan thus interacting with the developmental process” (p. 2). As a person grows and develops, so do his or her religious and spiritual beliefs.

However, despite the commonalities between religion and psychology, the integration of the two fields was considered taboo for much of the 20th century (Shermer, 2003). Some early theorists tried to use weak science to dismiss and even pathologize people of strong religious convictions. Sigmund

Freud, for example, insisted that “neither philosophy nor religion had a place in the science of psychoanalysis” (Frie, 2012, p. 106). Another reason psychology has attempted to distance itself from religion is that many leaders in the field were trying to validate psychology as a “hard science.” Thus, any involvement with religion or philosophy was seen as discrediting. Religion was equally at fault in ostracizing itself from psychology. Some Christian authors even referred to psychotherapy as “psychoheresy” (Bobgan & Bobgan, 1987). If counseling were needed, it was believed that it would have to be solely based on the Bible since psychology was seen as contradictory to Christian belief. Thus, it can be assumed that the fields of psychology and religion did not share the same views as to what makes for human flourishing.

However, recent decades show a shift in this perspective with psychology showing more attention to religion. “Research in the areas of psychology and spirituality have flourished, and religious writers have addressed psychology more openly for the most part” (Sisemore, 2016, p.2). There has also been an increase in the utilization of spiritually-based practices

in psychotherapy. For example, mindfulness practices, which originate in Buddhism, have gained popularity among many clinicians (Baer, 2003). Another sign that psychology has become less rigid in its approach to spirituality and religion is the emergence of several humanistic psychotherapy theories, such as Motivational Interviewing (Miller & Rollnick, 2012) and Emotion Focused Therapy (Greenberg & Watson, 2005) that view spirituality to be an important aspect of a person. The American Psychological Association and the American Counseling Association published books that provide information for the clinician on how to address client spirituality in therapy (Aten & Leach, 2009; Miller, 1999; Richards & Bergin, 2000; Kelly, 1995). Gradually, the fields of psychology and religion are beginning to develop a better relationship with one another.

Despite this recent change, psychologists, as a group, still appear to be skeptical about integrating religion into psychology, perhaps because they themselves are less religious than the general population. According to a series of surveys conducted by Shaf-ranske (2001), roughly 26% of a sample of clinical and counseling psychologists considered religion to be fairly important, a number that is considerably lower than the general population. Approximately 58% of people worldwide claim religion as an important factor in their lives. Thus, there appears to be a disparity among the two. Scientists as a group are significantly less religious than the subjects they study. On the applied side, further progress in this area is hampered by the fact that many therapists lack education in ways to integrate psychology and religion. However, given the role religion plays in the majority of people's lives, it is almost inevitable that the topic of religion will appear in therapy. Oftentimes, clients with medical issues will seek out alternate forms of therapy that actually incorporate prayer, rituals, and traditional healers (Lukoff, Lu, & Turner, 1992).

### TERMINOLOGY: SPIRITUALITY VERSUS RELIGION

Before reviewing the literature on spiritual struggle and psychotherapy outcomes, it is important to provide clear definitions of religion and spirituality. Religion and spirituality are two terms that are often used interchangeably when discussing religious topics. However, despite the similarities in meaning, religion and spirituality are distinctive in some important respects. Spirituality is a newer term that has emerged during the later decades of the 20th century (Pargament Mahoney, Exline, Jones, & Shaf-ranske, 2013). It derives from the Latin word *spiritus*, meaning "breath" or "life" (Hill et al., 2000). The current study will follow Pargament's (1999) definition, which views spirituality as a person's "search for the sacred" (p. 12), the "sacred" being used in this

definition broader than a god or higher power; it is used in reference to anything that is considered divine or has divine-like qualities (Pargament & Mahoney, 2005). When considering spirituality, it is important to realize that spirituality is a highly individualized term, meaning that it manifests itself differently from person to person.

Religion, on the other hand, has become more of an organizational and institutional term. Religion can be defined as "the search for significance that occurs within the context of established institutions that are designed to facilitate spirituality" (Pargament et al., 2013, p. 15). This "significance" refers to possible psychological, social, and physical goals, such as identity, belonging, meaning, and health (Sisemore, 2016). If spirituality is the connection of a person to a higher power then religion can be thought of as the boundaries within which that connection happens. Religion, like spirituality, is complex in meaning. In the 21st Century, there appears to be a trend towards viewing spirituality in a positive light and religion in a negative one (Hill & Pargament, 2003). However, as Hill and Pargament (2003) explain, this is problematic because religion and spirituality are two interrelated, rather than independent, constructs. Religion and spirituality are not two opposing factors, but instead, depend and rely on each other. For the purpose of the current research, the reader can assume that the term religion will be used to include both the organizational aspects as well as the individual, inclusive aspects which are now associated with spirituality.

### RELIGIOUS COPING: THE ROLES RELIGION PLAYS IN LIVES OF INDIVIDUALS

As mentioned earlier, the majority of the general population claims that religion plays an important role in their daily lives. It makes sense to assume that many people use religion to cope with life stressors. However, because of varying beliefs and religious styles, individuals differ in the ways they experience and express religion in their lives. Allport and Ross (1967) write, "To know that a person is in some sense 'religious' is not as important as to know the role religion plays in the economy of his life" (p. 442). Pargament (1997) thus coined the term "religious coping" to describe the ways people use religion to buffer life's stressors. Religious coping can be defined as "the use of religious beliefs or behaviors to facilitate problem-solving, to prevent or alleviate the negative emotional consequences of stressful life circumstances" (Koenig, Pargament, & Nielsen, 1998, p. 513). Researchers have identified two types of religious coping: positive and negative.

Positive religious coping is expressed through methods that reflect an intimate relationship with God or another form of the sacred who is benevolent, loving, forgiving, and engaged (Bradshaw, Ellison,

& Marcum, 2010). These views of God or a higher power revolve around the concept of the divine as a protector, guiding figure, and/or provider. Positive religious coping rests on beliefs that God will protect and provide during the challenging events. According to McConnell and Pargament (2006), examples of positive religious coping include: "trying to find a lesson from God in the event, seeking spiritual support, and providing spiritual support to others" (p. 1470).

While some people use religious coping as a source of strength and comfort during difficult times, for some, religion can also exacerbate and compound the stress. This is referred to as negative religious coping. Negative religious coping can be defined as "an expression of a less secure relationship with God, a tenuous and ominous view of the world, and religious struggle in search of significance" (Pargament et al., 1998, p.712). In contrast to positive religious coping, those who utilize negative religious coping measures tend to view the stressful life events as an abandonment or punishment by God. Examples of behaviors associated with negative religious coping include "punitive religious appraisals, demonic religious appraisals, reappraisals of God's power, spiritual discontent, self-directed religious coping, and interpersonal religious discontent" (Pargament et al., 1998, p. 712). Negative religious coping methods are not a comfort, but rather a source of additional stress.

It is important to note that although spirituality and religion have two different meanings, we used spiritual coping and religious coping synonymously. We also used the term spiritual struggles alongside negative religious coping. Spiritual struggle is a term that has emerged in recent years in place of negative religious coping. According to Pargament (2007), spiritual struggles are "signs of spiritual disorientation, tension, and strain" (p. 112). They grow out of life stressors that throw the individual's spiritual orientation and values into question. Spiritual struggles are an attempt to transform or preserve an individual's relationship with the sacred. According to Pargament (2001), "though spiritual struggles may lead to growth, they are not always a prelude to greater well-being, for struggles may also presage pain and decline" (p. 115). Thus, spiritual struggles can be seen as a fork in the road, potentially leading to growth or emotional decline.

## SPIRITUAL COPING AND MENTAL HEALTH

A number of studies have explored the relationship between spiritual coping and mental health. Some studies compare spiritual coping methods to various mental health issues, such as anxiety, depression, and Posttraumatic Stress Disorder (Gerber, Boals, & Schuettler, 2011; Lee, Roberts, & Gibbons 2011; Park & Dornelas, 2011). In one such study, Koenig, Pargament, and Nielsen (1998) examined the religious

coping methods of 455 medically ill, hospitalized, older patients who were cognitively unimpaired. These methods included: attendance in religious functioning, private scripture reading, private prayer, and personal religious commitment. The results of their study showed that those patients who utilized negative religious coping methods were more likely to have poorer physical health, worse quality of life, and increased depression than those who practiced positive religious coping strategies. Gerber et al. (2011) examined the relationship between religious coping, posttraumatic growth, and Posttraumatic Stress Disorder in a large sample. Those who utilized positive religious coping were more likely to display posttraumatic growth [ $F(7, 942) = 23.66, p < .001, \text{adjusted } R^2 = .14.$ ]. Alternately, those who used negative religious coping methods were more likely to manifest posttraumatic stress disorder [ $F(7, 942) = 40.74, p < .001, \text{adjusted } R^2 = .20.$ ].

Ano and Vasconcelles (2005) conducted a meta-analysis of 49 studies with a total of 105 effect sizes in order to summarize the relationship between religious coping and psychological adjustment to stress. Four types of relationships were investigated: (1) positive religious coping and positive psychological adjustments, (2) positive religious coping and negative psychological adjustments, (3) negative religious coping and positive psychological adjustments, and (4) negative religious coping and negative psychological adjustments, the latter including increased anxiety, distress, depression, etc. They found that there was a moderate positive relationship between positive religious coping and positive psychological outcomes (cumulative effect size from 29  $Zr$ 's = .33), as well as an inverse relationship between positive religious coping and negative psychological adjustment (cumulative effect size from 38  $Zr$ 's = -.12). They also found a positive relationship between negative religious coping and negative psychological outcomes (cumulative effect size from 22  $Zr$ 's = .22) although they did acknowledge that the 22 effect sizes in this sample displayed significant heterogeneity of variance ( $Q_T = 188.35, p < .01$ ). They added that "a Rosenthal's fail-safe test indicated that 2,190.4 contradictory results from other studies would have to be added to this analysis in order to disconfirm the significant positive association obtained between negative religious coping and negative psychological adjustment" (p. 473). Overall, the majority of research synthesized in the meta-analysis showed that negative religious coping is linked with more negative psychological adjustments.

According to Pargament (2001), spiritual struggles add a "distinctive element to psychological functioning" (p. 115). Spiritual struggles have been shown to be positively related to higher levels of anxiety and depression, lower levels of quality of life, and

relational distress (Exline & Rose, 2005; Fitchett et al., 2004; & Pargament, Murray-Swank, et al., 2005). It does not necessarily follow that struggles with spirituality cause psychological pain; pain and distress can also trigger spiritual struggles. Thus, relationships between spiritual struggles and distress may be complex. As mentioned previously, spiritual struggles are often a sign of distress and conflict within a person. Given the relationships between negative spiritual coping and poor psychological symptoms, a person's spiritual coping strategies are important to consider during the course of psychotherapy.

## PSYCHOTHERAPY OUTCOMES

It is clear that religious coping strategies are important for clinicians to consider during the course of treatment. However, while the relationship between spiritual coping and mental health has been explored, the roles that spiritual coping strategies play in psychotherapy have not been as carefully researched. Psychotherapy, in a broad sense, can be defined as "the utilization of resources, wisdom, and guidance of a helper in order to lift up the spirits of the person who seeks help, so that he or she would be able to cope with the demands of his/her social role and make his/her contribution to society" (Ting, 2012, p. 762). Psychotherapy utilizes the science of psychology in order to help decrease negative psychological symptoms. It has generally been proven to be effective (Smith, & Glass, 1977). By the time Lipsey and Wilson conducted their meta-analysis in 1993, there were more than forty meta-analyses of psychotherapy in general or of particular therapy models for specific issues; these were generally lending support to the effectiveness of psychotherapy. Thus, with the prevalence of research on effectiveness of psychotherapy, current research has focused on more specific questions, such as whether a specific treatment is efficacious and, of particular relevance here, what factors may facilitate effective treatment outcomes (Wampold & Imel, 2015).

Thus, the purpose of this study was to examine the relationship between changes in spiritual struggles and psychotherapy outcomes. Given the relationship between spiritual struggles and negative mental health symptoms, it was hypothesized that a decrease in spiritual struggles (negative religious coping) would be associated with positive psychotherapy outcomes. It was expected that clients who reported declines in spiritual struggles over the course of therapy would also report better therapy outcomes as reflected in reports of fewer symptoms.

## METHODS

### Measures

The main measurement device used in this study was a questionnaire developed by A Collaborative Outcomes Resource Network (ACORN, 2007). This

questionnaire consists of twenty-three empirically-derived items which measure subjective experience, such as anxiety and depression, therapy alliance, trauma effects, and spiritual struggles. People respond to the questions on a five-point Likert scale. The questionnaire measures spiritual struggle through two items adapted from the RCOPE scale, which are the two highest factors of religious coping on the RCOPE (Pargament, Koenig, & Perez, 2000). The two questions are: "Wonder what you did for God to punish you?" and "Wonder whether God has abandoned you?" There was also a trigger question: "Believe in God or a Higher Power?" which qualified the person for the study. In addition to the questionnaire developed by ACORN, registration forms were completed by the researchers for each new client, which provided sex, ethnicity, age, and diagnosis of the individual. Seventeen of the items that compose the questionnaire were known to load on the global distress factor found in patient self-report measures of psychiatric symptoms and complaints, giving the questionnaire high construct validity. These items assessed a variety of negative psychological symptoms which included: feelings of sadness/hopelessness, loss of energy, difficulty with attention and/or sleep, feelings of tension or nervousness, thoughts of self-harm, difficulty controlling emotions, substance abuse, and intrusive thoughts/memories. Global distress was expected to change over time, so in order to test for reliability, Cronbach's coefficient alpha was used. For this study, the reliability is approximately .91.

### Participants

Participants in this study consisted of individuals who sought psychotherapy or counseling from a network of four faith-based counseling centers throughout the United States. From the base sample of 9,044 participants, a total of 1,729 individuals qualified. In order to qualify for the study, the subjects had to complete a total of two questionnaires, acknowledge a belief in God, and have a global distress scale (as determined by ACORN) in the clinical range. Clinical range was measured by client intakes that exceeded the clinical cutoff score, which is a score that represents the boundary between the normal and clinical range (Jacobson & Truax, 1984). Of the 1,729 individuals who qualified, 70% were female. Due to spotty completion of registration forms (which provided additional demographic information), information on age and ethnicity were not provided.

### Procedures

Prior to his or her initial appointment with a therapist, the client was asked to complete an intake packet that included the informed consent to participate in the study. If the client agreed to participate, he or she was given the questionnaire before each subsequent

**Table 1***Descriptive Statistics for Primary Study Variables*

Pre-Post NRCOPE	N	Mean Effect Size	No. of Assessments	No. of Weeks
High/high	471	0.47	6.0	12.7
High/low	412	1.18	8.0	17.5
Low/high	78	0.33	5.3	12.6
Low/low	768	0.95	6.9	16.2

**Table 2***ANOVA for Effect Sizes Based on Groups*

Source	N	DF	Sum of Squares	F Value	P Value
Model	1826	3	146.67	75.51	<.0001
Error		1822	1179.71		

appointment with the therapist, though some clients did not complete the questionnaire every time. The client would complete the questionnaires by responding with “always,” “often,” “sometimes,” “hardly ever,” or “never” to the questions being asked, these being coded from 0 to 4 for analysis, depending on the direction of the wording of the response, with 0 being no problem to 4 being considerable concern. The forms would then be gathered by the researchers and faxed to ACORN for data processing. The client continued completing forms for the duration of his or her therapy. The client’s confidentiality was maintained through assignment of a random ID number. ACORN posted the information online for therapists and researchers both to access. The therapists and researchers could monitor the change of client’s symptomatology and religious coping as therapy progressed.

## RESULTS

The total N for the study was 1,729 individuals who qualified. The average number of treatment sessions for the clients was 6.9 sessions and the average time in treatment 15.3 weeks. The negative RCOPE data were not normally distributed due to many clients not marking any negative religious coping patterns (mode for first and last RCOPE was 0; mean was 1.0 at first session and .6 at last). Thus, based on the lack of normal distribution, parametric analysis was not appropriate.

The negative coping scores from the RCOPE

were converted to categorical variables, a negative RCOPE score above .5 was considered high while a negative RCOPE score below .5 was considered low (as these marked the presence or absence of negative religious coping). Four groups were then developed based on the clients’ first and last negative RCOPE measures. The first group was high/high. These individuals made use of some negative religious coping at the beginning of therapy and ended therapy continuing to use negative religious coping. This group represented greater religious struggle overall. The next group was high/low. These individuals manifested negative religious coping at the beginning of therapy and ended therapy with low negative religious coping. For this group, religious struggles declined over the course of therapy. The next group was the low/high group. These individuals began therapy with low negative religious coping but ended therapy with higher negative religious coping. This group’s negative religious coping increased as therapy progressed. The final group was the low/low group. These individuals began therapy with low negative religious coping and ended therapy with low negative religious coping. For this group, negative religious coping was not an issue. Per ACORN procedures (A Collaborative Outcomes Research Network, 2016), therapy effect size (based on change in symptoms from first to last session) was computed to adjust for change in Global Distress Scale (controlling for regression effects).

Table 1 presents descriptive data for the four

groups. For the high/high group (N = 471) the mean adjusted effect size was 0.47, the average number of assessments was 6.0, and the number of weeks averaged 12.7. In the high/low group (N = 41), the mean effect size was 1.18, the number of assessments averaged 8.0, and the number of weeks averaged 17.5. For the low/high group, (N = 78) the mean effect size was 0.33, the average number of assessments was 5.3, and the number of weeks averaged 12.6. Finally, for the low/low group (N = 768,) the mean effect size was 0.95, the number of assessments averaged 6.9, and the number of weeks averaged 16.2. Overall, change in negative RCOPE score (M=0.23) correlated with change in Global Distress Score (M=0.26),  $r=.33$ , ( $p < 0.0001$ ) supporting the hypothesis.

For those with 2 or more RCOPE measures (N=1179), the mean change in RCOPE scores from first to last session was 0.3 and the comparable change in Global Distress was 0.26, yielding  $r = .33$  ( $p<.0001$ ) and showing a very strong relationship between decrease in distress and decrease in the use of negative religious coping. As would be expected, the greatest change was among those who manifested higher negative religious coping to begin with and the least improvement in therapy was among those who displayed increases in spiritual struggle over the course of therapy.

An analysis of variance was then performed (See Table 2) to compare the overall effect size as a function of negative religious coping. This analysis yielded a highly significant result (N=1826,  $F=146.67$ (df = 3;  $p<.0001$ ). A subsequent Tukey Test for the effect size (Table 3) showed significant changes ( $p<.001$ ) for all group comparisons except between the high/high and low/high groups, reflecting that clients ending with high scores on negative religious coping did not fare as well in symptom improvement during therapy. All pairs that showed movement in the direction of less negative religious coping were superior to those that did not.

**DISCUSSION**

Research examining the implications of spiritual struggles for mental health has rapidly increased with in recent years. This investigation sought to extend this research to the realm of psychotherapy outcome studies. We focused specifically on the relationship between a change in spiritual struggles and outcomes of therapy. We hypothesized that there would be a relationship between decreasing spiritual struggles and improvement over the course of psychotherapy. The results of this study supported the hypothesis. Of the four negative religious coping groups identified in the study, the most change in the Global Distress Scale occurred within those whose spiritual struggles decreased during therapy. Thus, reductions in spiritual struggles were clearly related to improved psychologi-

**Table 3**  
*Turkey Test for Groups of Change in Negative Religious Coping from First to Last Report*

Negative Religious Coping	Group Comparison	Mean Differences
High/low	High/high	.694***
	Low/high	.851***
	Low/low	.221***
Low/low	High/low	-.221***
	High/high	.473***
	Low/high	.630***
High/high	High/low	-.693***
	Low/low	-.473***
	Low/high	.156
Low/high	High/low	-.851***
	Low/low	-.630***
	High/high	-.157***

\*\*\* $p<.001$

cal functioning. On the other hand, the least improvement in psychological functioning occurred in the group whose spiritual struggles increased as therapy progressed.

Our results show a strong relationship between decreased spiritual struggles and increased psychotherapy outcomes. However, we cannot assume that changes in spiritual struggle caused changes in psychotherapy outcomes. Perhaps changes in global distress led to changes in spiritual struggle. In this vein, Pargament and Lomax (2013) distinguished between primary struggles in which struggles produce distress, secondary struggles in which distress produces struggles, and complex struggles in which both factors are operating. It is also possible the findings could be explained by other variables. For example, the role of the therapists' own religious beliefs were not measured. What role would the therapist's own religious convictions play in the counseling session? Would psychotherapy outcomes differ depending upon the level of spirituality of the therapist or his or her sensitivity to clients' spirituality? In addition, the theoretical orientation of the therapist was not measured. Might certain orientations be better suited to addressing spirituality in the counseling room than others? Finally, it is uncertain if negative religious coping was specifically addressed by the counselor as part of the counseling process, since the results were solely based on self-report.

Although questions remain, these findings do have certain implications for the therapist. They suggest the importance again of addressing negative religious coping in psychotherapy. This is an area that should be addressed during the counseling session due to its clear relationship with improved psychological symptoms. Certainly, religious clients may take their spiritual concerns to pastors, clergy, and other clergy members who can be sources of support for the client. Nevertheless, clients may bring up spiritual matters within the therapeutic relationship as well. If a client reports having struggles with his relationship to the sacred then the therapist should overcome his or her hesitations and address this topic during therapy.

## LIMITATIONS

The findings of this study should be interpreted in light of the following limitations. First, the inadequate completion of registration packets made it impossible to gain demographic information on the participants. Due to this information not being provided, further questions regarding the role culture and age play regarding spiritual struggles and psychotherapy outcomes are left unanswered. Second, all the results were based on self-reports from the participants. Since the clients knew the forms would be reviewed by the therapists, there is the possibility they might not have been completely forthcoming when completing the questionnaire. The data also do not identify how long

each client was in therapy, but merely compare the final negative religious coping score to the first. This is, of course, correlational data and ultimately does not speak to whether changes in negative religious coping reduce symptoms, or whether a reduction in symptoms helps clients resolve their religious struggles. While the data came from four primary sites in differing parts of the United States, these were all essentially faith-based counseling centers that are more likely than average to attract counselors who are religious and clients seeking spiritually sensitive care.

## CONCLUSION AND FUTURE RESEARCH

This study helps to extend the research in the following ways. Prior research has consistently shown that spiritual struggles are positively related to poorer psychological functioning, such as increased PTSD, depression, and anxiety (Ano & Vasconceles, 2005). This study supported the hypothesis that as a person's spiritual struggles decrease during the course of therapy, his or her psychological functioning is most likely to improve. In other words, the client who experiences a decrease in spiritual struggles has a better chance of gaining more from psychotherapy. This study shows that spiritual struggles have a strong relationship to outcomes in counseling. This is important for therapists to consider. Because the majority of the population reports that spirituality and religion play an important role in interpreting and dealing with life stressors, it is likely that in many cases, religion will come up in therapy session. When this occurs, the counselor should be intentional in addressing the client's religious or spiritual coping strategies.

For future research, it would be important to distinguish between the client's religious coping strategies and other variables that may account for change in psychotherapy. For example, perhaps the therapist's own religious beliefs play a key part in reducing the Global Distress Score. Other questions arise as well. What role did the therapist's theoretical approach play in the counseling relationship? How were spiritual struggles specifically addressed by the therapist? It would be important to determine whether the spiritual struggles were an explicit part of treatment goals and process or whether spiritual struggles were not explicitly addressed which might suggest that spiritual struggles decreased as a natural by-product of improvements in psychological symptoms. In addition, a more intact demographic set would be beneficial. More knowledge about demographic variables would help clarify how religious coping strategies relate to psychotherapy outcomes among various cultural groups, psychological diagnoses, and age categories. Finally, experimental designs (e.g. randomized clinical trial) that addressed spiritual struggles would help clarify the causal direction of the relationship between declines in spiritual struggles and better psychotherapy outcomes.

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# Students' Perceptions of Jesus' Personality: An Extension of a Previous Study

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*This article reports an extension to a previous study in which college students' perceptions of the personality of Jesus Christ were explored through the Myers-Briggs Type Indicator (MBTI) (Myers, 1998) and the Keirsey Temperament Sorter (Keirsey, 1998). As in the first study, this extension explored students' overall perceptions of Jesus' personality along with whether they make self-based attributions. Results confirmed findings from the previous study with students seeing Jesus as an Extraverted Feeler and making self-based attributions along the Sensing/Intuitive dimension. The present study also revealed that self-based attributions of an Intuitive Jesus are more prevalent among those who are also Introverted and Perceiving. Increased involvement in a religious group was associated with perceptions of Jesus as an Extraverted Feeler and with fewer self-based attributions.*

*Keywords: perceptions, students, Jesus, personality, Jungian*

This article reports the replication and extension of previous research (Howell, 2004) on students' general perceptions of the personality of Jesus Christ, and specifically exploring the presence of self-based attributions in those perceptions. While the previous study added to the body of knowledge on personality and religiosity by examining perceptions of Jesus, it relied on a relatively small sample. Therefore this extension combined a new data set with the original to create a more robust sample from which to obtain a broader picture of students' perceptions of Jesus while allowing greater precision in identifying the variables which shape those perceptions.

As in the previous study, the Myers-Briggs Type Indicator (Myers, 1998) and the Keirsey Temperament Sorter (Keirsey, 1998) were utilized to assess personality along four dimensions (Extraversion/Introversion, Sensing/Intuition, Thinking/Feeling, and Judging/Perceiving). These Jungian-type inventories were designed to reflect behavioral preferences for one's focus of energy, acquiring of information, decision-making, and orientation to the outside world (Myers, 1992).

Research has already explored the relationship between personality type and various aspects of religiosity. Michael and Norris (1991) proposed that the four basic MBTI types (Sensing-Judging, Sensing-Perceiving, Intuitive-Feeling, Intuitive-Thinking) were personified in the four gospel writers with each

perceiving Christ and His work from the perspective of his own type. Their interpretation suggests that variations in gospel accounts result, at least in part, from each writer assigning meaning and importance to Christ's actions based on his own personality preference. Michael and Norris also suggested that each reader will feel more drawn to the gospel written from the perspective of his/her own personality type. Likewise, Bassett, Mathewson, and Gailitis (1993) indicated a relationship between personality and preference for interpretations of Scripture, specifically with Feeling participants more often preferring the interpretations designed by the researchers to reflect the Feeling trait. While not providing empirical evidence, Bunker (1991) asserted the importance of expressing one's spirituality in a way most consistent with one's personality type. Bunker suggested that preferred prayer style might vary depending on the individual's specific personality functions, and cited the work of Clark (1983) who suggested that different personality functions emerge at different times of life.

Personality type has also been associated with the interpretation of ambiguous information (Frederickson, 1995). Participants in Frederickson's study made self-based attributions when presented with a list of ambiguous characteristics which they were asked to identify as descriptive of extraversion or introversion. Extraverts, as classified by the MBTI, tended to label

these items as characteristic of extraversion; introverts tended to attribute introversion to the same items. Frederickson concluded that in the absence of a clear cut behavioral display of extraversion or introversion, participants in his study tended to make attributions based on characteristics of their own personality type “thus assuming a greater self-other similarity than may actually exist” (p. 34). Frederickson’s (1995) findings seem relevant given Goldsmith’s (1997) claim that Jesus’ personality seems ambiguous to us today. Goldsmith proposed that while Jesus’ personality could have been categorized in MBTI terminology, we cannot know for certain what his type would have been since the Gospels do not provide the detail needed to make such a classification.

Therefore, given the research indicating a relationship between personality and religiosity, the tendency toward making self-based attributions when given ambiguous information, and the assertion that information regarding Jesus’ personality is ambiguous, the question emerges: When reading the Bible, are we likely to make self-based attributions regarding Jesus’ personality, thereby perceiving a greater similarity between Christ and ourselves than may actually exist? The previous study (Howell, 2004) addressed this question along with a more general exploration of student perception of the personality of Jesus Christ.

The previous study (Howell, 2004) revealed an overwhelming perception of Jesus as an Extraverted Feeler along with a tendency for making self-based attributions along the Sensing/Intuitive dimension. Jesus as an Extravert was discussed as a possible reflection of a culture that prefers extraversion over introversion (Keirse, 1998). Salient perceptions of a Feeling Jesus echoed Goldsmith’s (1997) view that given Jesus’ reputation as a healer and comforter, Feeler is perhaps the most defensible of all the Jungian trait possibilities we could apply to Jesus. Self-based attributions only surfaced along the Sensing/Intuitive dimension which might indicate that participants perceived more ambiguity in accounts of this aspect of Jesus’ behavior which, according to Frederickson (1995), would prompt the creation of such attributions.

Note that exploring a possible relationship between one’s perception of Jesus and one’s own personality is not new. Piedmont, Williams, and Ciarrocchi (1997) found that self-ratings of personality accounted for 11% of the variance in their subjects’ perception of Jesus’ personality. However, Piedmont et al. utilized the Adjective Checklist (Gough & Heilbrun, 1983) whose items include attractive and unattractive personality descriptors and the five-factor model (e.g., McCrae & John, 1992), which distinguishes between healthy and unhealthy as well as attractive and unattractive personality traits (Feist, Feist & Roberts, 2013). Both the previous study and the current extension, however, sought to explore the same

question from a different perspective. Using Jungian-type inventories whose dimensions are not intended to reflect health or illness (Keirse, 1998; Myers, 1992) precluded participants simply answering in ways that described Jesus as healthy and well-adjusted, a likely possibility given that even those not claiming the Christian faith often see Jesus as a good person with admirable qualities. Using inventories whose dimensions are not intended to embody good or bad allowed us to explore other possible influences in the attribution of characteristics to Jesus’ personality, namely those based on one’s own personality.

## METHOD

The methodology for the present study is a replication of the previous study (Howell, 2004) except where noted otherwise.

### Participants

Participants were students enrolled in a private, Baptist University in the mid-South who volunteered as one way of earning extra credit in the undergraduate courses from which they were recruited. The present study added 190 participants, with 118 (62%) being female and 72 (38%) being male, ranging in age from 18 to 59, with 134 (72%) being under the age of 21. Participants were primarily White ( $n = 150$ ; 79%) and although represented a variety of religious backgrounds, the majority ( $n = 114$ ; 60%) were Baptist. Of the 190 participants, 69 (36%) were able to report their own partial or complete MBTI or Keirse type.

After combining participants from the previous study (Howell, 2004) and the extension, a total of 265 participants made up the entire sample with 167 (63%) being female, 98 (37%) being male. Ages ranged from 18-59 with 170 (65%) being under the age of 21. Participants were primarily White ( $n = 221$ ; 83%) and, while representing a variety of religious backgrounds, the majority ( $n = 159$ ; 60%) were Baptist. Of the 265 participants, 100 of them reported their own complete or partial MBTI or Keirse type, allowing for an assessment of self-based attributions with approximately 38% of the total sample.

### Instruments

*The Myers-Briggs Type Indicator (MBTI) / The Keirse Temperament Sorter II.* The Keirse Temperament Sorter II was utilized in the previous study and extension to measure students’ perceptions of Jesus’ personality. Students who had taken either the MBTI or the Keirse for themselves also reported their own type. (In the previous study [Howell, 2004], participants granted permission for the primary investigator to access their scores from the university’s student services office since they had previously taken the test as part of an orientation to the university.) The MBTI (Myers, 1998) and the Keirse (Keirse, 1998) have

been used extensively in psychological and religious research suggesting their usefulness for the present study (e.g., Goldsmith, 1997; Baab, 1998; Michael & Norrisey, 1991; Bassett et al, 1993; Bunker, 1991).

The use of and comparison of scores between the Myers-Briggs and the Keirsey were deemed appropriate based on the work of Kelly and Jugovic (2001), which indicated that these two instruments measure the same constructs and that the individual scales of the two instruments are correlated to a moderate to strong degree for both genders (correlations ranged from .60 on the Judging/Perceiving scale for men to .78 on the Thinking/Feeling scale for women).

The MBTI (Myers, 1998) and the Keirsey (Keirsey, 1998) categorize personality along four dimensions. The first dimension indicates whether one is energized primarily from outside of oneself (Extraversion) or from within (Introversion). The second dimension specifies whether one prefers attaining information through the physical senses, focusing more on the present and practical application (Sensing), or focusing on possibilities and patterns that make up the big picture (Intuition). The third refers to whether the preferred style of decision-making is through logic and objective analysis (Thinking) or through warmth and concern for harmony among those involved (Feeling). Finally, the fourth dimension denotes the individual's orientation to the outside world, whether through structure and regulation (Judging) or spontaneity and flexibility (Perceiving) (Keirsey, 1998; Myers, 1998).

Individuals taking either inventory answer questions regarding their preferences and then are provided a profile based on their choices. A profile consists of four dimensions, one from each of the four dichotomies previously described. There are 16 possible types which can be condensed into four categories: Sensing-Judgers, Sensing-Perceivers, Intuitive-Thinkers, and Intuitive-Feelers (Keirsey, 1998; Myers, 1998).

**Questionnaire.** Participants completed a demographic questionnaire created for the original study. Measuring religiosity is difficult due to the ambiguity of the word religious. Therefore, in addition to asking for religious affiliation and background, the questionnaire posed three questions regarding the importance of religion for these participants: (1) *At present, how active are you in your church or religious group?* (2) *How knowledgeable do you believe yourself to be regarding Jesus' life?* and (3) *How important is it to you to model your life and behavior after Jesus?* Participants answered each question by checking *Not at all*, *Somewhat*, or *Very*.

The questionnaire also inquired whether participants had ever taken the MBTI or the Keirsey for themselves and, if so, if they would write in their profile. (In the previous study [Howell, 2004], participants signed, granting their permission for their results to be accessed through the appropriate university office. Participants were also asked what they believed

our hypothesis to be, to determine if they were aware that we were looking for self-based attributions.

### Procedure

Students were recruited by the primary investigator and a research assistant who visited psychology and theology classes to request their participation in a study exploring students' perceptions of Jesus' personality. (The previous study only recruited from psychology classes.) They were instructed that their participation would involve accessing the Keirsey inventory online and answering each question as they believed Jesus himself would answer them. At that time, those agreeing to participate signed an informed consent and signed up for a time to bring their printed results to the primary investigator's office.

Participants were *not* told that we were exploring the possibility of their making self-based attributions, since that knowledge might influence their answers to Keirsey items and compromise the study's validity. In order to prevent their gaining knowledge of our intent, participants were not required to take a Jungian-type inventory for themselves in order to participate in the study. They also completed the questionnaire after having completed the Keirsey so that our asking for their own Jungian-type scores would not alert them to our expectations. As a final precaution, participants were asked on the demographic questionnaire if they were aware of our hypothesis. A small percentage (10%) of participants seemed to be aware, with statistical analysis indicating that their scores were not significantly different from those of participants who were not aware of the intent.

## RESULTS

### Students' General Perceptions

To learn students' perceptions of Jesus' personality, we conducted a frequency distribution for each of the 16 types, four categories, and four dimensions to determine whether students chose any of them more frequently as depicting Jesus. In a sample of 265 participants, four of the 16 types together accounted for 84% of the sample. Jesus was perceived as an ESFJ by 28% of the sample, an ENFJ by 23%, an ENFP by 22%, and an ESFP by 11%. (See Table 1, for descriptions of these four types.)

Of the four categories, two were chosen more frequently as personifying Jesus: the Intuitive-Feeler (47%) and the Sensing-Judger (39%), together accounting for 86% of student perceptions. The other two categories, Sensing-Perceiver and Intuitive-Thinker, were chosen by 12% and 2% of the sample respectively. (See Table 2, for descriptions of the four categories.)

Frequency distributions for the four dimensions revealed that students overwhelmingly perceived Jesus as an Extravert (89%) and Feeler (91%), and was

**Table 1**

*Descriptions of Types Chosen Most Frequently as Exemplifying Jesus' Personality*

<p style="text-align: center;"><b>ESFJ (28%)</b></p> <p><b>Extravert/Sensor/Feeler/Judger.</b> Energized from environment and others; focuses on present reality and practical application; seeks harmony in decision-making; prefers structure and projects completed.</p>	<p style="text-align: center;"><b>ENFJ (23%)</b></p> <p><b>Extravert/iNtuitive/Feeler/Judger.</b> Energized from environment and others; focuses on possibilities; seeks harmony in decision-making; prefers structure and projects completed.</p>
<p style="text-align: center;"><b>ENFP (22%)</b></p> <p><b>Extravert/iNtuitive/Feeler/Perceiver.</b> Energized from environment and others; focuses on possibilities; seeks harmony in decision-making; prefers spontaneity and flexibility of options.</p>	<p style="text-align: center;"><b>ESFP (11%)</b></p> <p><b>Extravert/Sensor/Feeler/Perceiver.</b> Energized from environment and others; focuses on present reality and practical application; seeks harmony in decision-making; prefers spontaneity and flexibility of options.</p>

Descriptors for each type taken from Myers, I. B. (1992). *Introduction to Type*. Palo Alto, CA: Consulting Psychologists Press, Inc

identified as a Judger by 65% of the sample. Students however were divided on perceptions on the Sensing/Intuitive dimension with 51% seeing him as a Sensor and 49% seeing him as an Intuitive.

A chi-square test revealed that Jesus as an Intuitive was related to participants themselves being Perceivers,  $\text{Pearson } X^2 (1, n = 99) = 6.58, p = .01$ . An Intuitive Jesus was perceived more often by seniors (65%), with first-year students seeing him more as a Sensor (61%),  $\text{Pearson } X^2 (3, n = 264) = 9.26, p = .026$ .

Several religiosity variables emerged as predictors of student perceptions. Those claiming that modeling their lives after Jesus to be "somewhat important" tended to perceive him as an Intuitive (71%); those claiming that modeling after Jesus to be "very important" were divided on this dimension (54% seeing him as Sensing; 46% as Intuitive), Contingency Coefficient ( $N = 265$ ) = .22,  $p = .002$ ). Those stating that modeling is "very important" tended to see Jesus as Judging (69%); those attaching less importance were more divided on this aspect of his personality (44% seeing him as Judging; 56% as Perceiving), Contingency Coefficient ( $N = 265$ ) = .19,  $p = .006$ . (The more conservative Contingency Coefficient is reported for analyses in which the sample size yielded an expected count of less than five in one or more cells.)

Although most saw Jesus as being Extraverted, this perception was stronger among those more active in a religious group, Contingency Coefficient ( $N = 264$ ) = .15,  $p = .052$ . Increasing levels of activity was also predictive of identifying Jesus as a Feeler, Contingency Coefficient ( $N = 264$ ) = .15,  $p = .048$ .

**Self-Based Attributions**

To explore the possibility of self-based attributions, we computed two-way contingency table analyses for those who provided their own profiles. Results indicated that Intuitive participants more often identified

Jesus as an Intuitive (76%),  $\text{Pearson } X^2 (1, n = 100) = 6.77, p = .009$ , with Sensing participants equally divided on this dimension (49% Sensing; 51% Intuitive).

In addition, participants who scored as Intuitive and Perceiving made self-based attributions of Jesus as an Intuitive 83% of the time, with those not scoring with this type combination doing so only 57% of the time,  $\text{Pearson } X^2 (1, n = 97) = 5.02, p = .025$ . Likewise, those scoring as Introverted and Intuitive made self-based Intuitive attributions 75% of the time,  $\text{Pearson } X^2 (3, n = 95) = 9.24, p = .026$ . Extraverted Intuitives made self-based Intuitive attributions 65% of the time; Introverted Sensors, 60% of the time; and Extraverted Sensors 33% of the time. Participants who scored as Introverted, Intuitive, and Perceiving made self-based attributions of an Intuitive Jesus 87% of the time, compared to those without this type combination who made such attributions only 57% of the time,  $\text{Pearson } X^2 (1, n = 98) = 5.19, p = .023$ .

Self-based attributions of Jesus as an Intuitive decreased with more active involvement in religious groups,  $\text{Pearson } X^2 (2, n = 101) = 8.70, p = .013$ .

**Summary of Results**

Overall, perceptions of Jesus as an Extraverted Feeler were salient, with the perception being stronger among those more active in a religious group. While seen as a Judger by the majority, this perception was stronger among participants who place a high value on modeling their lives after Jesus. While the sample was divided on the Sensing/Intuitive dimension, an Intuitive Jesus was a stronger perception among participants who themselves are Perceivers, who are seniors academically, and those who claim that modeling Jesus to be only "somewhat important." First-year students more often identified Jesus as a Sensor.

Self-based attributions emerged in only one

**Table 2**

*Description of Four Personality Categories Chosen by Participants as Reflecting Jesus' Personality*

<p style="text-align: center;"><b>Intuitive Feeler (47%)</b></p> <p>“Idealists” are future-oriented; focus on growth, human potential, and relationships; value empathy, helpfulness, and integrity.</p>	<p style="text-align: center;"><b>Sensing Judger (39%)</b></p> <p>“Guardians” enjoy doing for others; value reliability, security, respectability, and conformity; are joiners; make good supervisors.</p>
<p style="text-align: center;"><b>Sensing Perceiver (12%)</b></p> <p>“Artisans” are focused on the present; like action; enjoy life; are risk-takers, spontaneous, flexible, artistic, and playful.</p>	<p style="text-align: center;"><b>Intuitive Thinker (2%)</b></p> <p>“Rationals” trust reason; are analytical; value knowledge, autonomy, competence, and achievement.</p>

Description of four basic types taken from Keirse, D. (1998). *Personality: Character and Temperament*. Retrieved from <http://www.keirse.com>

dimension as Intuitive participants identified Jesus as also being Intuitive. More specifically, Intuitives who were also Introverted and Perceiving were more likely to see Jesus as an Intuitive. Self-based attributions declined, however, with increased involvement in a religious group.

**DISCUSSION**

This extension of Howell's (2004) previous research expanded the original sample in order to gain a more complete representation of students' perceptions of Jesus' personality. Results confirmed the primary findings from the previous study and more precisely identified variables which contribute to self-based attributions.

As in the previous study, students overwhelmingly identified Jesus as an Extravert (89%). Such a high percentage of primarily Christian individuals who concur might reflect an accurate perception of Jesus as one who was more energized by other people and his external environment. Scripture recounting his many interactions with those outside of his family and inner circle (e.g., Matt. 4:23; Luke 6:17) reflects a Jesus who might indeed have been Extraverted.

Another possibility however should be considered. Perceptions of an Extraverted Jesus might reflect an American bias which favors extraversion over introversion (Keirse, 1998). If our culture assumes extraversion to be the ideal, a perception of Jesus embodying that ideal is understandable. Such a bias might make it easier to selectively attend to passages that portray Jesus from one's cultural mindset and easier to overlook instances in which he behaved in ways contrary to it. In fact, several passages allude to Jesus' desire for time with a few close friends or in solitude where he seemed to prepare himself for what lay ahead (Mark 1:35-37, Matthew 26:36-39), all indicative of the Introverted personality.

Since we cannot know Jesus' preference for certain, caution is warranted in assumptions we make. For instance, if we assume Jesus to be an Extravert based on a cultural ideal, we risk assuming that in order to fully live the Christian life, we too must become Extraverted. This assumption can lead us to dismiss the many areas where Introverts tend to excel (e.g., listening skills and in-depth one-on-one interactions) and without which our churches and communities would be lacking. In reality, both Extraversion and Introversion embody strengths; each should be accepted and appreciated.

The fact that perceptions of an Extraverted Jesus were more pronounced among those more actively involved in a religious group is a new finding suggesting the church's role in cultivating this perception. Indeed the church's encouragement for congregants' involvement in a multitude of group activities (e. g., fellowships, mission trips, committees, and choirs) rather than the pursuit of fewer, more contemplative endeavors might contribute to the perception of Extraversion as the ideal. A balance of activities might provide the affirmation that both Extraverts and Introverts deserve while creating a stronger church which will benefit from utilizing the strengths of each of its members.

The strong perception of Jesus as a Feeler (91%) was salient as well. This finding echoes Goldsmith's (1997) position that a Feeler Jesus is consistent with scriptural accounts of his unselfishness in meeting others' needs. The image of a Feeler Jesus was also stronger among those more active in a religious group, suggesting the church's role in promoting this perception.

The perception of Jesus as a Judger reflected participants' belief that he dealt with the outside world with order and structure, rather than in a flexible, spontaneous manner. As in the previous study, a Judging Jesus was more prevalent among those who place a higher value on modeling his life. One characteristic of Judgers is that they make plans and prefer to stick to

**Table 3**  
*Distribution of Four Personality Categories for Subsample of 100 Participants*

Intuitive Feelers	44%
Sensing Judgers	36%
Intuitive Thinkers	13%
Sensing Perceivers	6%

**Table 4**  
*Distribution of Personality Dimensions for Subsample of 100 participants*

Extraverted	36%
Introverted	64%
Sensing	41%
Intuitive	59%
Thinking	24%
Feeling	76%
Judging	70%
Perceiving	30%

them. Those who believe Jesus has a definite plan for their lives might feel more compelled to model more meticulously. Those who view Jesus as a flexible Perceiver might see Jesus’ plan as also being more flexible and deem it appropriate to model his life more loosely.

Given that Jesus was more frequently identified as a Feeler Judger by this sample and the fact that more participants scored as Feeling and Judging themselves seems significant in a study of self-based attributions. However, neither Feeling nor Judging alone emerged as eliciting such attributions.

The present study also revealed that those who claimed modeling Jesus to be only somewhat important tended to perceive Jesus as an Intuitive. As an Intuitive, Jesus would have been more focused on the big picture and less on present reality. Certainly a case could be made for this view given Jesus’ self-denial in an effort to bring about God’s kingdom. This perception could feed into the view that while modeling Jesus is important, keeping the big picture in mind is essential. Therefore, those who perceive Jesus in this way might see adapting, rather than mimicking, Jesus’ behavior as holding greater value in promoting God’s kingdom.

In addition, the present study also revealed academic level as a predictor of students’ perceptions for the Sensing/Intuitive dimension. While the sample in general was divided, first-year students more often

saw him as Sensing; seniors, as Intuitive. It is possible that higher education tends to teach values consistent with the Intuitive personality: idealism, an orientation toward the future, and an appreciation for possibilities over facts. If this is the case, a senior might be more inclined than the first-year student to see these characteristics in Jesus.

The present study replicated findings that self-based attributions occur only along the Sensing/Intuitive dimension. However, it more precisely identified that Intuitives, not Sensors, are making these attributions, and that those most likely to do so are also Introverted and Perceiving. Their focus on present reality rather than what can be intuited would seem to make Sensors less inclined to create an image that cannot be known through the senses, making self-based attributions less likely. In contrast, the Intuitive tends to use the imagination in looking for possibilities that go beyond what is readily seen and heard. This Intuitive tendency might open the door to perceptions which are based on one’s own personality rather than on Jesus himself.

That the Introvert, Intuitive, and Perceiving combination is predictive of self-based attribution was a new finding in the present study. In essence, something within the easy-going nature, future driven, and internally focused INP projects Intuition easier than all other types. Intuitive Perceivers see a future of never ending possibilities which they prefer not to limit prematurely. Perhaps the extended time allowed for these possibilities to unfold might solidify the idea of the future being fruitful with possibilities, thus cultivating the self-based attributions of Jesus as an Intuitive. The Introverted focus on internal processes, sometimes to the exclusion of external detractors, might also prompt the projection of self onto the image of Jesus while external, contradictory information is dismissed.

While a variety of perceptions can be part of a healthy, useful conceptualization of Jesus, knowing of the tendency for self-based attributions calls for caution and further research. For Intuitives (particularly those who are also Introverted and Perceiving), this knowledge can alert them to the need for discernment in their assumptions, and call them to intentionally seek out the opinions of others of different types to keep this tendency from going unchecked. The finding that self-based attributions decline with increased involvement in a religious group suggests that church can be a source of information to provide that check and balance. As a group which typically encompasses a diverse group of personality types, church appears to be a valuable tool in minimizing the projections of self onto our images of Jesus.

For researchers, knowledge of self-based attributions calls for a more complete exploration of the variables which contribute to this process. Future research might explore the finding that Introverted In-

tuitive Perceivers only make self-based attributions for Intuition, but not for Introversion nor for Perceiving. A more in-depth examination of this specific personality type could increase understanding of the process and dynamics of self-based attributions.

While this extension addressed some of the limitations of the first study, some remain. The larger sample provided an increased representation of students with more diversity in religious background and ethnicity. However, the sample remained homogenous in that most claimed having some involvement in a religious group and claimed that modeling Jesus was at least somewhat important. Future research within a larger university with more religious and ethnic diversity could provide comparative data. Replication in different cultures, particularly those who value different aspects of personality (i.e., where Introversion is more highly valued than Extraversion) would provide a way to further test the premise that culture informs our perceptions.

Even with a larger sample than before, this sample did not equally represent each personality dimension or category. Intuitive Feelers and Sensing Judgers together comprised 80% of the sample. The Sensing/Intuitive dimension was the only one equally represented by participants; the other dimensions were weighted toward Introversion, Feeling, and Judging. (See Tables 3 and 4 for distributions of participants' personality categories and dimensions.) Perhaps certain personality types are more likely to volunteer to participate in research studies or more often seek out extra credit opportunities. It is possible that the personality type of the recruiters (both INFJ's) was influential in drawing participants with specific profiles. In an effort to appeal to a broader range of profiles, future research could enlist recruiters with greater type diversity.

In conclusion, the present study replicated earlier findings of perceptions of an Extraverted Feeler Jesus and self-based attributions along the Sensing/Intuitive dimension. This extension also identified Introversion and Perceiving as predictors of self-based attributions among Intuitive participants. In addition to providing valuable information to individuals regarding the influence of personality on religious beliefs, this study presents researchers with data that can guide future research on perceptions and self-based attributions.

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## Review of Ripley and Worthington, Jr. (2014)

### *Couple Therapy: A New Hope-focused Approach*

#### *Featured Reviews*

Ripley, J. S. and Worthington, E. L. (2014). *Couple Therapy: A New Hope-focused Approach*. Downers Grove, IL: InterVarsity Press. 399 pp.

Reviewed by **Whitney Hancock, M.Ed., M.A.**, New Haven, CT. She may be contacted at whitneylhancock@gmail.com

Jennifer Ripley and Everett Worthington describe their new book, *Couple Therapy*, as a hope-focused approach that is both evidence-based and explicitly Christian (22). The authors describe “Christian wisdom” as the steering wheel to which the boat of psychological research and systematic studies of couples sails (p. 25). From their research, Ripley and Worthington have developed a wide range of in-depth interventions to be used with couples with the goal of building warmth, virtue, health, and happiness (27). These interventions are built on strategic, behavioral, and emotion-focused modalities, with a heavy emphasis on forgiveness and building pre-existing strengths within the couple.

To some, this book might be the beginning practitioner’s dream, as the authors provide detailed screening questionnaires, intake interviews, sample couple reports, and even online screenings for couples before they enter your office. The authors write in-depth couple scenarios, issues, and patterns, and interventions can be selected based on the couple’s specific problem area. Each of the interventions have been studied and utilized within the authors’ research lab. Everything is provided online at the authors’ website, which makes the art and techniques of counseling more easily accessible to beginners.

To others, the counseling methods of this book might seem less relational and more mechanistic, where an intervention can be selected and applied as easily as ordering food at a restaurant (the authors refer to pulling out their list of interventions as a menu in therapy; p. 129). Furthermore, if the counselor selects an intervention but the client does not want the spiritual ‘toppings’, they can easily be left out.

As licensed psychologists in a secular field, the authors must conscientiously walk a fine line in relation to their work being “explicitly Christian.” The hope-focused approach can be modified to be only as

explicitly Christian as the client wants it to be. Therefore, these approaches can easily be used with non-Christians as most Westerners value faith (at least in the relationship), work, and love (p.24). While these authors do very many things right—trauma-informed care, adjusting for psychopathology, utilizing attachment theory, emphasizing behavioral and strategic interventions, noting common grace in science and secular counseling, to name a few—several statements throughout the book (e.g. “Prayer can provide an additive effect to couple interventions [p. 51].”) might give the reader the feeling that what is “explicitly Christian” is just an add-on that, in the end, truly doesn’t make much of a difference in counseling outcomes (a research finding to which the authors refer).

While the goal of this book is to provide evidence-based practice that is explicitly Christian, one might wonder if the latter is forsaken at times in order to fully fulfill the former goal as well as to remain “ethical” in the secular field. The writers make it clear that our job is not to evangelize or confront sin (p. 135), to reconsider doing therapy if one is intent on divorce (p. 91), and not to encourage Christian sexual ethics unless for humanistic reasons (“such as diseases or unwanted pregnancies [p. 137].”) While a counselor should indeed have wisdom about when to address certain topics with either resistant or unregenerate clients, Christianity has its own set of ethics that can’t simply be put by the wayside if one wants to remain “explicitly Christian.” At times, *Couple Therapy*, seems to want to embrace certain virtues and societal gains that come from cultural Christianity rather than the full and difficult callings of Christ. Perhaps the error lies less with the authors and more with the present condition of professional psychological ethics: Is remaining explicitly Christian and secularly “ethical” even an achievable goal?

Plass, R. and Cofield, J. (2014). *The Relational Soul: Moving from False Self to Deep Connection*. Downers Grove, IL: InterVarsity Press. 186 pp.

Reviewed by **Brett Vaden, Ph.D.**, Three Fourteen Institute, St. Louis, MO. He may be contacted at bvaden@threefourteen.org

Having both been pastors for many years, Richard

Plass and James Cofield now direct CrossPoint Ministries, through which they provide spiritual coaching, retreats, and training. In their book, they aim to help readers “engage in relationships in more life-giving ways, to foster a journey that moves our souls from relational disconnection and loneliness to connection and communion” (19).

At the core of the book is the idea that humans are beings “designed for and defined by our relationships” (12). People are “relational souls.” This quality of human life derives from God, who made people to bear his “relational likeness,” so that they can commune with him and with each other. When people go without the “giving and receiving” of healthy relationships, they cannot thrive or live happily. The authors’ thesis is that “the foundation for relational connection and communion is the capacity to trust appropriately and well” (20). The trust of a “giving and receiving” posture constitutes people’s true self, while the false self consists of “the taking and defending posture of a mistrusting soul who staves and sabotages relationships” (21).

The first six chapters of the book serve to educate readers and provide the knowledge necessary to understand the relational nature of human beings, how they are formed in and by relationships, and why more is needed in order to change than just making a conscious decision to do so. In chapter 2, the authors explain how the four kinds of attachment patterns, that people form early in life, become the basis for how they relate to others as adults. The most significant factor determining people’s attachment pattern is how well they learn to trust; mistrust causes people to avoid closeness with others (avoidant pattern), emotionally enmesh themselves with others (ambivalent pattern), or live in a combination of both these patterns (scattered pattern). Chapter 3 focuses on the importance of memory in addressing relational problems and changing one’s attachment pattern. The ways people learned to emotionally relate and attach to others early in life are stored in their “implicit memory,” which becomes an unconscious “blueprint for how to build relational experiences” (45). Because the impact of emotional experiences on implicit memory is so great, the authors highlight the need to recognize and attend to those experiences; through coming to terms about their story, people can find healing from the pain and wounds of their past. However, due to the human condition of “reactive mistrust” that appears in individuals as the “false self” (ch. 4), people need God’s presence in their lives through union with Christ (ch. 5): “It is in the concrete, particular and daily putting to death of the self-absorbed grandiosity embedded in our false self that we find a new, resurrected life” (76). Living in the true self comes through surrendering oneself to God and becoming receptive to his love (ch. 6); by trust/faith, people become their true selves, which is Christ’s “presence lived uniquely in and through us” (90).

In the next three chapters, the authors explain how relational wholeness can be fostered through better understanding oneself (ch. 7) and through relating to others (ch. 8) and God (ch. 9). By understanding their story, or the interpretation they have given their lives, people can know themselves rightly. With the help of a loving and wise person (e.g., counselor, spiritual director, pastor, mature Christian friend), who can help draw out the undisclosed parts of a person’s story and “connect the dots” between implicit and explicit memory, people may reinterpret their own story in light of God’s story, the gospel, and so come to terms with their true identity. The authors provide a “Life Map” tool to help readers intentionally review their life story and interpret it, and they also recommend using the enneagram, an instrument that places a person in one of nine personality styles and reveals how one’s unique strengths are corrupted by the false self. In chapter 8, the authors assert that God intends people to develop a “receptive, open-hearted true-self way of living” in the context of community, particularly the church, which supports growth in five ways: confronting people’s selfishness, teaching them to surrender and serve, providing comfort in suffering, fostering virtue, and instilling humility and gratitude. “It is critical that we all find a good church so that our true self can flourish” (129). In chapter 9, the authors describe four spiritual disciplines that are indispensable for approaching God and better relating to him: solitude, silence, contemplative reading of Scripture, and contemplative prayer.

In their conclusion, Plass and Cofield exhort readers to be patient as they strive towards relational growth and healing, since it is a difficult, lengthy process. The false self is resistant to give way to true-self living, yet, as the false self dies through surrender to Christ, people will grow in vulnerability, “attentiveness of heart,” depth of relationship, acceptance of their “limits and losses,” and forgiveness.

This book is an informative, enjoyable, and motivating guide for readers who wish to experience deeper transformation. The authors are skillful story-tellers, describing real-life examples of people whose stories demonstrate the relational nature of the soul and how it is both wounded and healed in relationship with God and others. Plass and Cofield also earn readers’ trust by offering personal vignettes that transparently reveal their own struggles and successes. Woven throughout the book, these stories are interesting and touching case studies that not only draw the reader into the exposition and serve to illustrate the main points, but that also inspire and persuade.

In tune with their aim to help readers experience growth in the Christian life, the book works more as a practical guidebook than a theoretical treatise. For example, the authors provide several tools in the ap-

pendices to help readers personally apply the content of the reading: Additional Reading, Making a Life Map, An Overview of the Enneagram, and Guide for Group Discussion. Also, questions for reflection discussion are given at the end of every chapter. Readers who desire to understand maturity in the Christian life with more emphasis on its emotional, spiritual, and relational dimensions will likely find this book rewarding. While the authors do not shy away from appealing to Scripture or to traditional orthodox theology, their aim is not so much to explain Christian doctrine as it is to apply it, probably with the assumption that most of their readers will have already been exposed to Scriptural teaching and exposition. In other words, Plass and Cofield intentionally and expressly avoid merely postulating ideas for their readers' mental assent. The authors go so far as to strongly imply that, if that is all they were to do, then they would not be doing justice to Christianity, or to the gospel: "The good news of Jesus is not religious doctrine; it is not an idea; it is not a set of beliefs to be embraced. The good news is the loving presence of the trinitarian God in the person of the eternal Son dwelling within us. We have life in him, not in our ideas about him" (72). The authors stress that the heart of the gospel is union with Christ, not assenting to a certain creed. In doing so, however, some readers may think they overstate their point by saying that the gospel is not "religious doctrine," "an idea," or "a set of beliefs to be embraced." In fact, the gospel is these things, but it is more than them. The authors admit as much later in the book: "By faith Christ is in us and we are in him. His life is our life. This is not simply an idea. It is an actuality and the essence of our life" (151). *The Relational Soul* attempts to approach Christian growth from a perspective similar to that expressed by theologian Herman Bavinck, who said, "Faith in Reformation theology was not a matter of knowing doctrinal truths but the soul's union with the person of Christ." In order to help people experience more of this union in their lives, Plass and Cofield attempt to draw readers into the hidden places of their hearts where spiritual and relational damage lingers and festers—not because they are misinformed about objective truths outside of them, but because they are blind to the truth about themselves and because they refuse to examine those hidden places: "In all our years of ministry we have never known a single person whose relationships suffered because of a lack of doctrinal facts. Not one! .... The blindness that emerges from a lack of knowing what is going on in our souls is truly devastating" (109).

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**Yarhouse, M. A.** (2015). *Understanding Gender Dysphoria*. Downers Grove, IL: IVP Academic. 186 pp.

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lege, Lookout Mountain, GA. He may be contacted at [kevin.eames@covenant.edu](mailto:kevin.eames@covenant.edu)

Dr. Paul McHugh, University Distinguished Service Professor of Psychiatry at Johns Hopkins Medical School, has called transgenderism a "pathogenic meme" (2015). McHugh notes that the number of people who identify as the opposite gender has increased "seemingly exponentially" (2015). One of McHugh's most compelling points is that transgendered persons do not in fact accomplish what they desire. Transgendered men become feminized men, and transgendered women become masculinized women; they in fact become "counterfeits or impersonators of the sex with which they 'identify'" (2015). Such a reality is likely to precipitate profound disappointment leading to a personal crisis of identity. A long-term follow-up study of Swedish transgendered persons (N = 324) who underwent sex reassignment surgery demonstrate the consequences of such disappointment. The study reports that transsexuals show much higher incidents in suicide, suicide attempts, and psychiatric inpatient care when compared with random population controls (Dhejne, Lichtenstein, Boman, Johansson, Långström, & Landén, 2011).

Mark Yarhouse's *Understanding Gender Dysphoria* provides a useful corrective to the apparent rush to embrace this trend, serving as an important contribution to the church's growing concerns over the rapidly-changing cultural landscape regarding sexual identity. Yarhouse has made thoughtful contributions in the past with his work on homosexuality (e.g., 2003, 2004, 2010). Like the others, this work is not polemical, but is a nuanced approach that successfully integrates a traditionally biblical perspective with substantive evidence from the psychological literature informed by years of clinical experience. The best description of the book and Yarhouse's overall approach is a heading on page 22: Toward a Reasoned Response.

The first chapter is devoted to providing a foundation for understanding gender-related concepts and terms. Significantly, Yarhouse makes a key differentiation between biological sex, gender identity, and gender roles. Biological sex refers to chromosomes, hormones, and internal and external reproductive organs that differentiate male and female. Gender identity refers to "the psychological, social, and cultural aspects of being male or female" (p. 17), and gender role involves the adoption of the culture's expectations for what it means to be a man or woman. These distinctions are important for understanding the complexities involved in gender identity. Conventional expectations involve binaries in biological sex (male or female), gender identity (man or woman), and gender role (masculine or feminine). Yarhouse also notes exceptions to these binaries for each of these categories: for biological sex there are so-

called intersex conditions involving genetic or *in utero* anomalies that make an individual's biological sex indeterminate; for gender identity, the binary exception is androgyny; for gender roles, the binary exception involves gender expressions outside of cultural norms. Gender dysphoria occurs when a person's experience of their emotional and psychological selves as a sexual person does not match with their biological sex. This particular challenge to the expected binaries of sexuality is problematic because it resides not in a biological reality but in the subjective but compelling experience of one's sexual self as incompatible with that biological reality. For those who take the binaries as givens, such an experience is "often quite difficult to fully understand and empathize with" (p. 19).

For Yarhouse, the term "transgender" serves as an umbrella term "for the many ways in which people might experience and/or present and express (or live out) their gender identities differently from people whose sense of gender identity is congruent with their biological sex" (p. 20). Some people who would identify as transgender do not experience dysphoria; others, however, experience a significant amount of confusion and distress. To underscore the complexity of these concerns, Yarhouse notes that "gender identity concerns are not one thing experienced in exactly the same way by all people everywhere who experience it. Rather, think about the experience of incongruence and distress/discomfort reflecting different degrees of both incongruence and discomfort" (p. 21).

Chapter 2 is an effort to provide a Christian response to gender dysphoria. Yarhouse conceptualizes overlapping perspectives in three frameworks for thinking about gender dysphoria: the integrity framework, the disability framework, and the diversity framework. The Genesis narrative in chapters 1 and 2 provide the foundation for the integrity framework, which perceives the male/female binary as a creational norm that both same-sex behavior and cross-gender identification violate. This is the framework conservative Christians will find most attractive. "To them, the integrity framework most clearly reflects the biblical witness about sex and gender and becomes the primary lens through which they view gender dysphoria and transsexuality" (p. 47). The disability framework perceives the experience of gender dysphoria as a mental health concern that is the consequence – like other mental disorders – of living in a fallen world. Within the disability framework, gender dysphoria is a non-moral issue deserving of both psychiatric and pastoral care. The diversity framework is the framework adopted by the western culture at large and views transsexuality as simply another way of expressing one's individuality and should be celebrated. A minority of adherents maintain a strong version of the diversity framework which advocates the deconstruction of what they believe to be artificial constructs of sex and

gender. Most, however, adhere to a weak version of the diversity framework, which provides satisfactory answers to the existential questions of "Who am I" and "Of which community am I a part of?" While the strong version of the diversity framework is wholly incompatible with the integrity framework, the weaker version with its emphasis on questions of identity and community is more compatible. As such, I think Yarhouse would have been better served to call it the identity framework, particularly as part of a therapeutic approach for the Christian involves focusing less on gender identity and more on identity in Christ.

Yarhouse believes that rapprochement is possible among these three frameworks. This so-called "integrated framework" upholds the integrity of biblical binary sex differences, advocates for the compassionate management of gender dysphoria, and supports the meaning-making and addressing the questions of identity and community. This perspective is particularly compelling when Yarhouse notes that the integrity and diversity frameworks may be brought together in the person of Christ. While upholding the binary sex differences found in Genesis and repeated by both Jesus and Paul, the diversity framework allows the gender dysphoric Christian to find their identity in Christ, at once acknowledging oneness with him while affirming their need for him amidst brokenness and suffering.

Chapters 3-5 address issues of cause, prevalence, prevention, and treatment. Chapters 6 and 7 consider Christian responses both at the individual and institutional level. In chapter 6 on the individual Christian's response to the transgender person, Yarhouse relies on the concept of scripts, much as he does in his writing on homosexuality (e.g., Yarhouse and Tan, 2004). For the transgendered person, the transgendered community promotes a script that is dominated by the diversity framework. It emphasizes the celebration of differences and unquestioning acceptance. The Christian church, however, promotes a script dominated by the integrity framework. Yarhouse suggests an alternate script that involves the rapprochement described above: no one framework dominates, but all overlap to reflect the complexity gender identity. Yarhouse also suggests an alternative approach based on the use of language and meaning. He conceptualizes a multi-tiered system with increasingly essentialist qualities. The first tier uses language that describes experience, the second uses adjectives (e.g., "I am a transgender person") that describe who the person is. The third and fourth tiers involve statements of identity (e.g., "I am transgender"), the fourth of which includes a personal definition that "more accurately define[s] who and how you are at the same time" (p. 137).

Yarhouse concludes chapter six with a compelling story about a transgender Christian who reported excruciating distress over her gender dysphoria such that

she considered suicide. How do Christians respond? Yarhouse writes,

This is not someone who has made a commitment to a worldview and philosophy bent on deconstructing meaningful categories of sex and gender... How does a person like Sara maintain a posture of repentance and a soft heart toward God in light of the impossible decisions she faced? Is there a Christian community that is willing to stand next to her in these impossible circumstances (p. 143)?

The believing Church will continue to face such questions as the culture's acceptance of transgender identification moves into the mainstream. Whether the reason is cultural contagion or a frontal assault on the integrity of sexual norms, the Church must be prepared with a response.

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**Rusthoven, J. J.** (2014). *Covenantal Biomedical Ethics for Contemporary Medicine: An Alternative to Principles-based Ethics*. Eugene, OR: Pickwick Publications. 314 pp.

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This book came to my attention during a brief conversation with its author James Rusthoven, MD, MHSc, PhD. Dr. Rusthoven, a committed Christian, was professor of oncology at McMaster University. His clinical practice was consulting regarding patients with breast and lung cancer. During a conversation about hospital experiences concerned with research

and ethical issues, he shared his convictions about covenantal ethics as an alternative to principles-based ethics. He told me that he documented his convictions, reflections, and research, which resulted in *Covenantal Biomedical Ethics for Contemporary Medicine: An Alternative to Principles-based Ethics*.

Rusthoven's concern and focus is on ethics as explicated in the seven editions of *Principles of Biomedical Ethics* by Tom Beauchamp and James Childress (e.g., 1979, 1994, 2001, 2009, and 2012). Both Beauchamp and Childress had been involved in the transactions of the U.S. National Commission for the Protection of Human Subjects of Biomedical and Behavioral Research. Beauchamp was a member of the commission's professional staff representing philosophy. One year after the commission completed *The Belmont Report: Ethical Principles and Guidelines for the Protection of Human Subjects of Research* (National Commission, 1979), Beauchamp and Childress published *Principles of Biomedical Ethics*. The text included the three principles from *The Belmont Report*—autonomy of persons, beneficence, and justice—and a fourth, namely, non-maleficence.

Rusthoven notes that, currently, medical ethics is taught following the principles-based ethics of Beauchamp and Childress. In this regard, he writes, "I began this project out of frustration with a perceived disinterest of numerous bioethicists in exploring the core beliefs that underscore the expression of biomedical ethics today" (p.1). The appellation of "principlism" to the *Principles of Biomedical Ethics* of Beauchamp and Childress was originally made by Clouser and Gert (1990) in their challenge of the notion of principles-based biomedical ethics. Rusthoven explains that, "It is my contention that principlism is another private morality anchored in faith in reason alone" (p. 122). It is from this perspective that Rusthoven offers covenantal biomedical ethics in lieu of principlism.

## Covenantal ethics versus principlism

The book is divided into two parts: (1) The rise and dominance of principles-based biomedical ethics; and (2) A modest proposal for a biblical covenantal biomedical ethic.

Part 1 provides a historical orientation about the development of principlism and includes four chapters that consider the rise of principlism due to an ethical crisis, challenges to the principlism of Beauchamp and Childress, perspectives on principles from diverse faith

traditions, and depth of understanding within faith traditions—Anglicans, Roman Catholics, Eastern Orthodox, Reformed Christians, Muslims, and Jews.

Part 2 explains the essential elements of the basis of biblical covenantal biomedical ethics. In its four chapters, Rusthoven shares evidence in support of a

biblical covenantal ethical structure and foundation for biomedical ethics, how a covenantal ethic can ensure an attitude of commitment to patient care, and a re-examination of the four principles—autonomy of persons, beneficence, justice, and non-maleficence—in the light of a biblical biomedical ethic. In summary, Rusthoven maintains that the “. . . elements of any biblical ethical framework include 1) identifying a worldview, philosophy, and theology that give biblical authoritative grounding and guidance for moral character-building, reflection and decision-making, 2) articulating a biblical anthropology that properly envisions human authority and responsibility in our world in light of a normative relationship with God as creator and savior, and 3) focusing on the structural and directional normativity of those relationships that form the basis of medical practice” (pp. 184-185).

In an epilogue titled, “The End of the Beginning,” Rusthoven notes that both principles-based ethics and biblical covenantal ethics feature moral aspects that may be appealing as a basis for ethics. He reminds readers of covenantal ethics’ more legitimate divine basis. Within this perspective, the origins of ethics would be based upon more than consensus as is the case with principles-based ethics. Interestingly, Beauchamp and Childress have maintained that, “. . . principlism . . . is not grounded in natural law or reason; it is grounded in itself” (p. 276). This book and especially the epilogue supports advocates for covenantal biblical ethics. They learn that they are not alone. Rusthoven heartens readers with links to covenantal allies who are also concerned about principles-based ethics as being insufficient. What is to be most appreciated is the thoughtful and comprehensive documentation of the historical and covenantal basis of ethical practices. Readers will find that Rusthoven has “. . . shown that a biblical covenantal ethic provides greater moral depth of understanding regarding human moral reflection and responsibility in medicine compared with principles-based ethics” (p. 278). Finally, the text concludes with an appendix containing a copy of medicine’s Hippocratic Oath. With a bibliography of 464 items this is a serious resource for anyone intending to engage or confront the principles-based versus covenantal ethics issue. Those concerned about the foundations of ethics will find that this book contains a challenging perspective that ought to be examined and thought about even if not agreed with.

### Relevance for psychology

From its title, psychology practitioners and academics may have an impression that this book has nothing to do with psychology or Christians in psychology. The subtitle, however, indicates its relevance—*An Alternative to Principles-Based Ethics*. The ethical codes of psychology are principles-based (e.g., American Psychological Association, 2002; British Psychological

Society, 2009; Canadian Psychological Association, 2000). There is even a Universal Declaration of Ethical Principles for Psychologists (Gauthier, Pettifor, & Ferrero, 2010). Also, the principles-based biomedical ethics of Beauchamp and Childress (2001, 2009) has been consulted to inform discussions of ethical issues in psychology (e.g., Knapp, Handelsman, Gottlieb, & VandeCreek, 2013; Knapp & VandeCreek, 2004, 2006, 2007). In this regard, Knapp and VandeCreek (2007) write, “We apply principle-based ethics as the basis for the decision-making model because it has been highly influential in health care (Beauchamp & Childress, 2001) and has influenced the formulation of the aspirational (General) principles of the APA Ethics Code (Knapp & VandeCreek, 2004 [p. 249])” (p. 398). Again, “When one overarching ethical principle appears to conflict with one or more other overarching ethical principles, we suggest using a decision-making process adapted from the work of Beauchamp and Childress (2001)” (Knapp & VandeCreek, 2007, p. 400). Clearly Beauchamp and Childress have influenced psychology.

Interestingly, the issue of covenant and ethics is raised in an article on changes in ethical codes of the professional membership groups—psychologists, marriage and family therapists, counselors, and psychiatrists—of the Christian Association for Psychological Studies (CAPS). CAPS also revised its ethical guidelines statement encouraging members “to be ethical, not as a legalistic obligation, but as part of an ever deepening intimate and covenantal relationship with God in Christ (CAPS, 2005, Preamble).” (Sanders, 2010, p. 266).

### Personal reflections

Rusthoven’s inclusion of the concerns of Lisa Cahill (2005), a covenantal ally, about ethics being impacted by “other religions”—science, liberalism, and market—is noteworthy (p. 275). I understood this as the potential of the “other religions” to dilute ethical applications and practices. One might add that it is likely that an ethic of the secular religion of patriotism influenced psychologists to collaborate in state security interrogations involving torture (Barton & Kagan, 2007; Hoffman et al., 2015). Within this perspective, American psychologists and others might find biblical covenantal ethics worthy of serious consideration. Biblical covenantal practitioners are likely to revert to covenantal ethical resources when faced with ethical issues.

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**Jones, B. F. (2015). *Faithful: A Theology of Sex*.**

Grand Rapids, MI: Zondervan. 112 pp.

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Beth Felker Jones's *Faithful: A Theology of Sex* (2015) is short at 112 pages, but what she includes in those pages is a vital contribution to the Christian dialogue on sex. Her book is a necessary corrective against the "ascetic Gnosticism" (p. 25) that is characteristic of evangelical attitudes toward sex. In her introduction, Jones asks,

What if, in our efforts to keep young people from making mistakes, we've done a great deal of damage? What if sex is not about a list of rules, a set of dos and don'ts? What if sex isn't, most of all, about us? What if sex is about God and who God is and about God's good intentions for creation (pp. 9-10)?

She argues persuasively that the pervasive attitude toward sexuality offered through a "purity" paradigm is a form of ascetic dualism that "feeds the fantasy that we – especially girls and women – are valuable because we maintain our bodies as some kind of precious vessel or glistening prize" (p. 10).

Jones counters this ascetic dualism through biblical embodiment. Humans are created, embodied creatures and an essential, even ontological aspect of our creation is sex. This, Jones insists, is why there is much confusion and pain surrounding much of how Christians understand sex; "much of what goes wrong around Christian understandings of sex has to do with our failure to connect sex to reality" (p. 13). Sex involves "who God *really* is and who we *really* are" (p. 13). The emphasis on the reality of embodiment is critical to treating sex as the created good it is. If bodies are not real, Jones argues, then neither is sex. As such, "we will act, or others will want us to act, as though our bodies – free of real meaning – can be used, in a given moment, for nothing but pleasure or nothing but power or nothing but selfishness" (p. 15).

Jones draws on the early Church's struggles with the Gnostics, a heretical sect that embraced Platonic dualism and denied the goodness of creation, to illustrate the prevailing cultural zeitgeist. Believing that salvation came through the acquisition of secret "knowledge" (*gnosis*), Gnostics eschewed all material indulges, including sex and marriage (Hollinger, 2009). Citing Kurt Randolph's 1984 work on Gnosticism, Jones identifies two polarities: libertine Gnosticism and ascetic Gnosticism. The former is very much representative of the current culture's emphasis on pansexuality and gender fluidity. Jones writes that "discounting bodies and sex leads to reckless indulgence, to the erasing of boundaries" (p. 24). This denial of the ontological reality of embodiment is what permits a serious argument to be made for allowing a male who identifies as a female to use women's facilities, despite the presence of his male genitalia. Because bodies don't matter, it is sufficient that a subjectively-experienced identity supersedes physical reality.

Ascetic Gnosticism was an enduring belief system for the early church. In his book *The Meaning of Sex*, Hollinger (2009) cites the existence of an apocryphal book entitled *The Acts of Paul and Thecla*, where "Thecla's virginity is exalted as she refuses marriage and its accompanying physical intimacy" (p. 45). Other church fathers like John Chrysostom and Jerome, Hollinger notes, believed celibacy to be superior to marriage and sex. Sex continued to be viewed with suspicion throughout the Middle Ages as part of the sacred-secular dichotomy attendant on Roman Catholic theology. It took the Protestant Reformation to restore sexuality to a roughly equal footing with celibacy. Jones notes that "discounting bodies and sex leads to a rejection of the goods of creation, and it plays out in a strict ethic that leaves no room for healthy, happy sexuality. Ascetic Gnosticism is there in the marriage where someone feels guilty about enjoying sex" (p. 25).

Ascetic Gnosticism is also there in what Jones refers to as the "purity paradigm" (p. 84). In one of the more compelling sections of the book, Jones confronts this mindset as an objectification of both sexes. Jones writes that "the purity paradigm understands purity as an attribute bodies possess, a physical thing that we can 'have' and 'lose.' This turns bodies into commodities" (p. 84). Jones cogently associates the rules of the purity paradigm with a type of works-righteousness. Those who adhere to the paradigm can expect marriage as a reward for following the rules, though before they reap their reward the time of celibacy prior to their wedding night must be endured with grim perseverance. Not only does this *quid pro quo* stand in contrast to the Gospel of grace, it also privileges marriage over singleness, to which all believers are called if or until they are married. "In the purity paradigm, the expectation that all Christians can expect a spouse also denies the beauty and the reality of the single life" (p. 85). An-

other problem with a paradigm that treats marriage as a reward for purity is that it sets up the married partners for disappointment; "faithful marriage – like faithful singleness – is the way of the cross" (p. 85). Finally, the emphasis on avoiding sexual intercourse leaves the door open to engaging in other behaviors normally and appropriately confined to the intimacy of marriage. As long as sexual intercourse is avoided, other sexual activities can be practiced as a means for coping with the sexual desert that is singleness. Jones writes that "people are able – even encouraged – to consider themselves pure when they're regularly getting naked with people to whom they are not bound in the consensual, faithful covenant of marriage" (p. 87).

Embodiment is the core concept throughout the book and serves as a corrective to a spirit of dualism that implicitly shapes how we view both our sexual selves and spiritual selves. Jones uses an interesting analogy by comparing the human body to the making of icons in Eastern Orthodox Christianity. Iconography is designed to show "God's work for humanity in the material bodies of creation" and, as such, "a great diversity of created bodies is shown to glorify God" (p. 101). The icon is meant to serve as a physical representation that points the observer back to God. Jones asks, "Might our bodies work as an analogy to the icon? Might we become, as sexual beings made in God's own image, witnesses to the reality of the Creator" (p. 101)? While I appreciate the essence of her analogy, it is difficult to connect with the "body-as-icon," perhaps because I am not familiar with the Eastern Orthodox tradition. An icon is a statue to my mind, but we're all flesh-and-blood, as was Jesus. Nonetheless, Jones offers a corrective to the sexual zeitgeist in both the evangelical culture and the broader culture. She writes, "Christian sexuality recognizes that the body is meant to be a witness. Sex is a witness to what God does in our lives, a witness to the God who is faithful and keeps promises" (p. 104).

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**Kellemen, R. W.** (2014). *Gospel-centered Counseling: How Christ Changes Lives*. Grand Rapids, MI: Zondervan. 312 pp.

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Pastors and Christian counselors who desire to help sufferers will want to know how to care for people like Christ. Robert W. KellemeIN argues that the answer comes from “Christ’s Changeless Gospel” rather than from all “smurfy” or “trendy” therapeutic ideas (15). KellemeIN, executive director of the Biblical Counseling Coalition and chair of the Biblical Counseling Department at Crossroad Bible College, provides biblical and theological foundations of Christ-like soul care in his recent book, *Gospel-centered Counseling: How Christ Changes Lives*, the first volume of the *Equipping Biblical Counselors Series*.

The premise of the book is that human life is based on the *Theodrama*, which consists of creation, fall, redemption, and consummation. In order to live in that drama healthily and faithfully in the midst of this broken world, people must gain wisdom through the Word of God. The author thus embeds his “theology for life” in the *sufficiency of Scripture* and its actualization in each person’s ordinary life through *progressive sanctification*. This theology for life is not merely about receiving information; rather, it is all about the transformation of one’s whole way of living. KellemeIN says that a pedantic view of the Bible as a mere “academic textbook” results in “sterile and dead” counseling. On the other hand, “if we view and use the Bible as the story—the gospel-centered drama—the battle to win our hearts, then our biblical counseling ministry comes alive” (24). His aim for this book is not just to deliver biblical and theological knowledge for counseling but to equip Christ-resembling counselors who can provide God’s people with and guide them into the ultimate and practical frame of theodramatic transformation through the gospel.

KellemeIN organizes the book by answering daily life questions that are also ultimately theological. The questions are: Where do we find wisdom for life in a broken world (*the Word*, ch.1-2)? What comes into our mind when we think about God (*the Trinity/Community*, ch.3-5)? Whose are we and in what story do we find ourselves (*Creation*, ch.6-7)? What’s the root source of our problem (*Fall*, ch.8-10)? How does Christ bring us peace with God and how does Christ change people (*Redemption*, ch.11-12)? Where can we find a place to belong and become (*Church*, ch.13)? How does our future destiny with Christ make a difference in our lives today as saints who struggle against suffering and sin (*Consummation*, ch.14)? Why are we here, how do we become like Jesus, and how can our inner life increasingly reflect the inner life of Christ (*Sanctification*, ch.15-16)?

In considering these questions with him, readers will know that they are already in theodrama. They will realize that the Bible is their “victory narrative” and that the victor is Christ, in whom they can see the fullness of the holy love of the triune God (236). Readers will also uncover the reality of their sinful

hearts and sufferings, and understand the divine “*soul-tion*” of renewing their hearts and lives in Christ amidst their everyday spiritual battle. Consequently, throughout the book readers can taste the beauty of engaging in the process of transformation and, as a result, they can be compassionate towards sinners and sufferers who need a holy invitation to the same drama.

In that drama, human beings exist as *imago Dei*. KellemeIN presents a comprehensive interpretation of biblical anthropology. Compatible with the central calling of loving God and others (Matt 22:35-40), KellemeIN puts relationship at the core of human nature. People are created to “love passionately” and to be related to God (as *spiritual beings*), to others (as *social beings*), and to the self (as *self-aware beings*) (101-05). The author further explains that humans are also *rational beings* “created to think wisely” (105), *volitional beings* “created to choose courageously” (109), *emotional beings* “created to experience deeply” (110), *embodied beings* “created to live fully” (111), *embedded beings* “created to engage our world” (111), and *everlasting beings* “created by, like, and for God” (112). This multifaceted understanding of human beings is directly connected to KellemeIN’s view of pathology, and so he argues that caregivers’ diagnostic territory should, likewise, be comprehensive enough to cover the person’s wholeness, including relational affections, rational mind-set, volitional pathways, and emotional mood states (113). This pathology in turn makes room for diverse counseling modalities in different layers of human wholeness. His therapeutic principle is to assist one’s sanctification in each layer, so that one becomes a new person in Christ relationally, rationally, volitionally, and emotionally. In other words, by presenting a comprehensive biblical anthropology, which sequentially impacts multidimensional pathology and counseling modalities, KellemeIN wisely explains how gospel-centered counseling provides a holistic framework that truly integrates every aspect of human nature—centering on the relationality between God and people—and that fully diagnoses human problems so that appropriate interventions can be implemented.

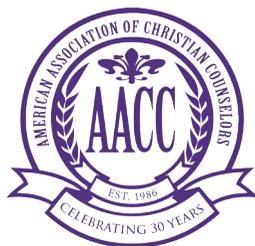
Despite the author’s biblical comprehensiveness, it is notable that he does not actively engage with modern science and psychological research in the present work. Without devaluing the primary authority of the Bible, Christian psychologists and biblical counselors can be critically receptive of the usage of science and psychology. Because of *common grace*, they can modify and apply counseling techniques derived from dynamic psychotherapy, cognitive-behavior therapy, emotion-focused therapy, or relational therapy. For example, biblical counselors can use an *anxiety regulation* technique, internalizing the Scriptural truth that Christ is a better defender

than any other person, in order to help a counselee relinquish defenses. They can also practice the *two-chair* or *three-chair* technique, imagining Christ speaking in a chair seated across from the counselee, in order to transform a counselee's distorted thoughts. Admittedly, Kelleman does not ignore the importance of general revelation (as an aspect of common grace), and therefore he views psychology as an effective, *descriptive* tool for understanding human nature. Kelleman attempts to provide an alternative, biblical view to secular psychotherapeutic models, but it may not be directly apparent what his model looks like in the actual counseling setting. Although Kelleman provides his "Heart Change Model," focusing on *mortification* and *vivification* in each aspect of human functioning, its specific techniques are not explained. This (probably intentional) lack of detail direct readers to his second volume of this series, *Gospel Conversations*, which is expected to help readers to actually engage in the Gospel-centered counseling practice of dying and raising with Christ.

Another noteworthy value of this book, particularly in today's context of pervasive individualism, is the emphasis on community. Interpreting Paul's work, Kelleman views the church as the God-designed unique community in which all believers together belong to Christ and become like Christ. Every saint in that community is an inseparable part of the body of Christ. Thus, for Kelleman, sanctification, which is aided by the biblical counseling process, is a Christ-centered "community journey" (234). This ecclesiological perspective of counseling broadens readers'

sights to see that biblical counseling is not only a personal but also a communal ministry, overcoming the limitation of modern therapeutic trends that underlines ideas like self-actualization, the well-functioning self, and individualistic spirituality. Indeed, the gospel narrative demonstrates that an individual's salvation is always intertwined with the community of God's people, and the consummation of salvation will be completed only after God's ordained number of believers, the community, is full (e.g., Gen. 1:28, NIV; Gen. 13:15-16; Rom. 5:18; Gal. 1:4; 1 John 4:10; Rev. 7:4; 14:1). Therefore, practitioners should also be reminded that their personal ministry of soul care is divinely directed toward the healing of the local community, and especially toward the consummation of the Gospel community. In this sense, Kelleman assists readers to gain momentum toward pursuing broader contexts that go beyond the individual boundary and further into the Kingdom of God.

In conclusion, this book proclaims the Gospel itself, but in a therapeutic fashion. Kelleman does not suggest a theory, a technique, or a curative counterfeit gospel. As he rightly grasps, the Gospel itself is what makes Christian counseling truly biblical. When the Gospel is fully present and people enter into the Gospel drama, it becomes therapeutic. Thus, Gospel-centered counselors are not merely providers of *good advice* but of *Good News*. The author exhorts readers to be counselors who are, themselves, first transformed through the Gospel in order to serve others with this Good News. This book is an excellent guide to those wanting to be Gospel-centered counselors.



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