

2 Understanding the human nature in psychotherapy

You probably know the oriental fable about the blind men who were asked to describe an elephant. Puzzled, they stood around the colossus. Their eyes gazed into emptiness, but they could touch the elephant with their hands. Each one tried to describe what he felt.

The first said: »An elephant is like a spear!« »No!« exclaimed another. »An elephant is like a snake!« »How can you make such a comparison?« said a third man. »An elephant is like a tree.« And so the argument went on. The fourth compared the elephant to a fan which wafted cool air towards him, the fifth detected a wall and, the last one talked about a rope. How could they describe the same animal in such different ways? Quite simply, one had felt the sharp tusks the next the flexible trunk. One had embraced a leg, the other felt an ear. Finally, the fifth had leaned against its stomach and the sixth had held its tail in his hands.

The common factor in their observations was that each had restricted his description to only one part of the body. The descriptions of human nature found in psychotherapy are often very similar.

Models of the Psyche

Most researchers and therapists describe what they have observed and established in their work with the people who come to them for advice, and even more than the blind men in the fable, they are forced to describe the complicated appearance of human nature with the help of pictures and

models. The image they choose depends on the perspective from which they are viewing human nature. All too often, (whether through short sightedness or fascination with a detail they have just noticed) they do not manage to stand far enough back for the picture of human nature they depict to be fully comprehensive.

I would like to outline four models which are instrumental in forming the predominant way that psychotherapists think about psychiatric problems. Medical scientific psychiatry builds additionally on an neurobiological / organic view of human nature which I will describe in Chapter 3. Here are the four models in summary:

1. The analytical / dynamic model.
2. The behavioural / moralistic model.
3. The humanistic / relationship-orientated model.
4. The mystic / occult model.

It is impossible to list all the methods of each model and describe its teaching in the finest detail. This presentation can thus only be in note form (and of necessity incomplete). A good overview with plenty of reference notes, can be found in the following books:

- Roger F. Hurding: *Roots and Shoots. A guide to Counselling and Psychotherapy.* (Hodder & Stoughton, London 1986)
- Stanton L. Jones & Richard E. Butman: *Modern Psychotherapies. A Comprehensive Christian Appraisal* (Intervarsity Press, Downers Grove, Ill, 1991).

I will look briefly at the root causes of problems proposed from each model, and then deal with the recommended solutions. In the process readers may be surprised to discover that Christian pastoral counsellors have borrowed from each of the models, often without realising it.

1. The Analytical Dynamic Model

By far the most well known form of psychotherapy today is psychoanalysis, or depth psychology. This was initiated at the turn of the century by Sigmund Freud. The Viennese neurologist started from the view that a person's reactions and behaviour patterns can all be explained in relation to early experiences and suppressed conflicts. The goal of the treatment is to bring these suppressed areas to consciousness.

Psychoanalysis in its original form requires up to four counselling ses-

sions a week over a period of several years. Few people can afford that any longer. It is also no longer the rule that you have to lie on a couch for treatment by a psychoanalyst! Since Sigmund Freud, psychoanalysis has been further developed to a considerable degree through various schools. Although these all make use of the terms »dynamic« or »depth psychology«, and emphasise personal development and people's (often unconscious) motives, they are nevertheless quite distinct in their procedures and the assertions they make.

Treatment through analysis is for the most part appropriate in the case of milder disorders, because it demands a lot from the patient. In particular, the patient needs to be motivated enough to lay out his or her life story in long conversations to gain insight into the way things hang together, and to change. Psychodynamic therapy can be understood as a maturing process helping the patient regain his capabilities of working, loving and social interacting.

Analytical thinking has inspired many popular books. A particularly successful author is Alice Miller, whose bestseller bears the title »The Drama of the Gifted Child and the Search for True Self«. In this book, she endeavours to show how much parents hinder a person in his or her personal development. She sees discipline as patronising and manipulation, through which a child is prevented from expressing and living out his own needs. This leads to a deep anxiety, which must however be suppressed, so as not to lose the love of the parent. The aim of her therapy is to relieve the hurts of childhood in the protected atmosphere of analytic therapy. As a result the patient will hopefully understand his own reactions, and no longer be helplessly abandoned to life as he was once to his parents.

Inner Healing

As with all psychotherapies, depth psychology depends on the therapists who practice it. Not all of them paint quite such a negative picture of parents as Alice Miller. I personally know many fine people who have an analytical orientation. They have two strengths which are especially important to me. They show empathy and take the patient seriously in his distress. And they have patience. Because they are aware that change needs time, they don't push for instant successes.

Nevertheless, I have questions. Let's stop for a moment and look at what is being said in analytical therapy. It comes through in the short 'connecting words: because someone had painful experiences in child-

hood, and because they suppressed feelings, therefore they suffer from, for example anxiety or depression. If they become aware of these experiences then they will lose their difficulties. Similar assertions are increasingly found in Christian pastoral counselling. The catch words are »Inner Healing«, »Healing of the Memories«, or »Emotional Healing«.

Many of these books are very helpful and point to the fact that a person needs to cast off their childhood hurts with God's help. In contrast to pure analytical therapy, Christian faith offers the possibility of forgiveness, which goes much further than just making people aware of painful and suppressed memories. This approach really can bring a great deal of healing.

Nevertheless it is tragic when, for instance, a pastor suffering from terminal cancer is told that he can't be healed from his complaint because he hasn't yet released all the hurts of his life to God. I am thinking here especially of David Watson's experience described in his book »Fear No Evil«.

2. The Behavioural/Moralistic Model

In the fifties many psychotherapists became unhappy with analysis. For years they had tried to uncover the hidden complexities of their patients without seeing any change. B. F. Skinner was one of the first who introduced a radical change of direction. The preoccupation with childhood was meaningless. Wrong behaviour was learned and therefore could be removed by training. In the course of years techniques of behavioural therapy were developed which pointed out practical ways to avoid anxiety and depression. The main goal was to change thinking and behaviour in a particular situation.

In the field of pastoral counselling people had also noticed that thinking and behaviour were important if the client is to break free from problems and overcome them. The approach of Jay Adams is by far the best known, though one should be aware of its limitations. The exclusive emphasis on the obedience of faith and accountability may be helpful and healing for the »average sinner«. And here it is biblical. But it not only creates excessive demands on the Christian with severe mental illness, it also presents him with a moralising model of counselling which creates new problems for him. Nevertheless, the rediscovery of the importance of behaviour and thought in pastoral counselling is very important.

The Bible says nothing about constant rummaging about in the past to understand human problems. It begins from the position that we are sinful

and weak people who need God's help every day to overcome difficulties. Again and again the Christian is instructed to lay aside his old behaviour (»the works of the flesh«) and to put on »the new nature«. Special importance is given in holy scripture to the thoughts. It is our thoughts which determine our behaviour, and in part our feelings as well. The Christian has to learn to be controlled by what is »above« and to be permeated by God's word.

So there is room for a cognitive behavioural therapy with a Christian basis. In what way will this be different from secular approaches like those which have been popularised by Albert Ellis or Arnold Lazarus? In behavioural therapy the individual's efforts stand at the centre. *Self help, self control, personal security, personal liberation and self healing* are the catch phrases.

Christian pastoral counselling makes an appeal to accountability and personal effort. Faith without works is dead. But it points people outwards towards God and his standard for life. God's will should be the supporting pillar of inward change, not one's own abilities and interests alone.

3. The Humanistic Relationship-Orientated Model

For many people, behavioural therapy is too intellectual and one sided. What is the use of the best training, and simply changing your thinking, when no attention is given to feelings? This is where the third great movement in psychotherapy comes into play ... the humanistic school.

As the name suggests, humanistic psychotherapy puts the person at the centre. The needs of the client – as the patient is called – are the measure for the therapy. This approach became well known through the former theologian Carl Rogers. The basic problem of every person lies in the area of broken relationships – with themselves and others. All the client needs from the therapist is unconditional and sensitive concern. The client must feel that he or she is accepted with their whole personality. There is no need to gain insight into deep causes. Wrong patterns of behaviour are not being questioned. The therapist is to be supportive and »non-directive« without giving advice. Sin has no place in this concept. In every person »the power of good« is dormant, and this will enable them to reach self-realisation.

In the consultation the therapist tries to create as comfortable an atmosphere as possible. The counsellor tries to put into new words what the client has first expressed in a tentative way. Emotions stay at the cen-

tre. They give direction to the consultation. If feelings can be experienced consciously, blockages are removed and the counsellee can gain entrance to his inner healing potential.

Once he has first experienced a warm relationship with his counsellor he can also build warm, fulfilling relationships with other people. In doing so, he should allow himself to be led entirely by his feelings, without looking back to restrictive moral codes imposed by either society or his faith. Humanistic group therapies also build on this philosophy. Here people find the security that they have missed elsewhere, the acceptance which is denied to them in the cold world outside. The group becomes a yard stick for their interactions and experiences. The group is their escape when life in the real world becomes too hard. In the group they find love when a marriage has broken apart.

Self Actualisation: A Mirage

Ever since the 1960's, the glistening promises of humanistic psychology have drawn in and moulded millions of people. They have shaken off the chains of personal accountability and allowed themselves to be guided by their feelings. In the quest for self-actualisation, they have burned their bridges to family, friends and marriage, partners, only to spin themselves more and more into the cocoon of their own self.

The Zurich psychiatrist, Professor Jörg Willi, complains: »The narcissistic rage is not satisfied even by the family in its needs for attention, tenderness, understanding and self-affirmation. It allows people to destroy the family in order to withdraw more and more into itself. Much is said nowadays about the destruction of the environment, but a much worse tragedy is the destruction of relationships through the ideology of unrestrained self fulfilment. Humanity is threatened today, not only by the destruction of the natural environment, but also by the destruction of humanity's most elementary social structures.«

While responsible psychologists and critical theologians have long since bemoaned the pile of shattered fragments left behind by humanistic thinking, this emphasis has made its way deep into ecclesiastical pastoral care. Even in many evangelical circles, the gospel of following Jesus has been twisted into the message of self fulfilment.

Challenge to Pastoral Care

But do we have to discard the tendencies of humanist psychology quite so thoroughly? Is group therapy not more helpful than earlier forms of fellowship? Many people have found themselves really accepted for the first time as part of a group – much more than they had done with their pastoral counsellor or in their home Bible study. Are we right to ignore the human longing for security and development? Does the Bible not also speak about love, acceptance and personal growth? In my opinion, it is sometimes valid to make more of a distinction between the ideological content of a therapy, and the manner in which any particular therapist approaches a client. I personally know Christians who have trained themselves in counselling therapy without taking on board the whole ideology of self actualisation. I also know of many non-Christian therapists who have been a great deal of help to believers by their loving acceptance. I am thankful for their valuable work in attending to difficult and suffering people.

For all the doubts about its ideological basis, humanistic psychology gives an impetus to pastoral care in several ways. Love should always be an important aspect of counselling. Therein lies a challenge to the Christian pastor and to the churches. Anxiety in the face of behaviour that is hard to understand, along with an unbalanced search for sins or occult bondages, can often lead the counsellor to forget the most basic of biblical rules: listen first, then speak. The client must sense security, acceptance and compassion, because this enables him to open himself to whatever correction may be needed in his life. However, Christian faith is comprehensive. Love and personal fulfilment do not stand in isolation. God's love for mankind should deepen mankind's love for God. True love finds its expression, not in an egotistical living out of one's own feelings, but in accountability to one's neighbour.

The very fact that God wants to satisfy our deepest yearning for love enables us to set our own wishes in perspective. He can give a fulfilled life, even though we may have to live within our psychological and physical limitations.

4. Transpersonal Psychology – Mysticism and Magic as Therapy

The psychology of self-actualisation has taken a further step in its development. Its founding fathers Rogers, Maslow, Pearls, to name but a few became increasingly aware that humanity's ultimate longings could not be satisfied solely from earthly or rational sources. They uncovered a new need of the human soul, which took them on to another goal: the need for spiritual experience. The way they opened up would have been inconceivable twenty years earlier, yet currently, in the wake of the *New Age* movement, their teaching has become a *Fourth Power* in psychology, alongside psychoanalysis, behavioural therapy and humanistic psychology.

»Magicians are among us again – the world of magic has been rediscovered«, wrote the German edition of »Psychology Today«: »Magic and mysticism, mythology and fairy tale, meditation and imagination, dream and fantasy, eastern and western religion, shamanism and rituals, parapsychology and occultism have become the business not only of cranky outsiders and drop outs, but to an increasing extent also of scientists.«

More and more people are disappointed by long winded monologues in the presence of their analyst, the tender words of the humanistic counsellor, and the behavioural therapists' list of goals. They are longing for an ultimate meaning to life, for sources of energy beyond the limits of their own existence.

Yet they are not looking for it in Christian faith. The new magic phrase is *transpersonal psychology*. This is supposed to be the bridge between natural science and religion. The method is scientific, but the goal is religious. The psychologist has to become a priest again – »a guide who leads his clients on to experience higher dimensions«.

Their goal is the transpersonal experience which fuses humanity, nature and the cosmos into a totality. It should lead to »new understandings of our cosmic origin«. More and more people hope in this way to gain more self confidence, and mastery over their existential fears. They see here the dawning of a new generation: not just a *New Age* for the world, but an awakening from torpidity for their own personality. Energetic massage of the body and soul has to provide them with cosmic power.

Hypnosis and meditation lead to enhanced consciousness and new »spiritual« experiences. With pendulum, and tarot cards, horoscope and crystal ball they try to get guidance for their life. Spiritualist mediums facilitate their contact with the spirit world, and experiences in »reincar-

nation therapy« help them to new understanding of their immediate conflicts.

For many Christians it will be difficult to find anything positive in transpersonal psychology. None of the four models is so clearly recognisable as a substitute religion. At best one can approve the fact that the movement has brought a spiritual dimension to psychotherapy and made the religious dimension in its widest sense a talking point in psychology. The content and the methods of transpersonal psychology are, however, diametrically opposed to Christian expressions of faith.

One could almost think that there would be no parallel in Christian terms to this model, so extreme is the separation of this content from Christian belief. And yet many pastoral counsellors stand in danger of tracing back psychological problems and crises of life too rapidly to »negative energies«, »powerful demons«, »occult bondages« or simply »spiritual blockades«, even though this vocabulary has no biblical basis. Theories of pastoral care like this are often nearer to occult mysticism than the testimony of the Bible

Many will reply that we should nevertheless take into account the spiritual aspects of psychiatric illness in our understanding. Since these questions are given great importance, particularly in the evangelical world, but also in catholic circles, I will try to tackle them in the context of a biblical and comprehensive overview, as I describe individual patterns of illness.

Hold on to what is good

We have now looked at four ways of viewing psychotherapy and its understanding of mental problems. Clearly, it is not possible to summarise and evaluate the life's work of many therapists in a few pages. However, I hope I have given a few pointers towards a better understanding of psychotherapeutic thought. In the process it has been an important concern to point out that:

- Every model gives expression to important truths
- An approach to psychotherapy is strongly dependant on the personal attitude of the therapist.

At the same time, however, it is clear that, if detached from biblical first principles, psychotherapists are in danger of forming a substitute religion. As early as 1946 the Swiss theologian Edward Thurneysen wrote: »Pastoral care needs psychology as an auxiliary science which serves the investigation of people's inner nature and which can mediate this knowledge. In the

process it has to critically set boundaries to guard against the incompatible philosophical presuppositions of psychology, which run parallel with but can encroach upon those which its own understanding of mankind gleans from the Holy Scriptures.« That's why it was necessary to raise critical questions from a Christian, as well as a psychiatric point of view. These questions may perhaps provide the impetus for a reappraisal of the assertions of psychotherapy and in turn help the reader to gain a comprehensive understanding of human nature. The Bible exhorts us to »test all things, and hold on to that which is good.« In the same spirit Lawrence Crabb, for example, in his book, *Effective biblical Counselling* has presented a synopsis of biblical principles and their corresponding psychological concepts.

Careful observation of human beings can provide important keys to their behaviour, and the causes of their disturbances. The Christian's duty, however, consists in testing the conclusions of psychology against the Bible, to filter out what is useful and to arrange this into a comprehensive overview of the faith. The noted philosopher Karl Jaspers once said: »Psychotherapy therapy needs a religious basis, but does not provide it from itself. Therefore it is important for the integrity of the therapist to take an open and approving stance towards true faith, and secondly that he resists what experience teaches to be an almost unavoidable tendency to allow psychotherapy to develop into an ideology.«

In the next chapter, I would like to set out a fifth way of thinking which is indispensable to an understanding of modern psychiatry. It is not built on depth psychology and philosophical reflection, but on medical and scientific research. It will lead us into the wonderful realm of God's creation and into new discoveries about the role of the brain in the understanding of psychiatric illness. Science so far knows only a little about the process of the unique labyrinth of the brain, but even the present information opens a new understanding of disorders which those who care for the psychiatrically ill have encountered, but which, until now, have been unexplainable.

References chapter 2

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