Integrating Theology and Counseling in Clinical Practice

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Abstract

The American Counseling Association’s ethics code (ACA, 2014) states that counselors need to be cognizant of clients’ spirituality under multicultural issues and diversity (Section E.8, p. 12). Clients have voiced their preference in working with counselors who are sensitive to their religious issues (Burke et al., 1999). Therefore, it behooves counselors to familiarize themselves with spiritual concepts pertaining to mental health concerns. Pain and suffering are universal concepts with various cultural, ethnic, and/or religious interpretations. This poster will provide a Christian theological interpretation of pain and suffering in clinical practice.

Introduction

- Pain and suffering arise when an individual’s physical integrity is threatened, as in the case of trauma (Reid & Wise, 1995), or discrimination on the basis of age, race, ethnicity, sexual orientation, and/or religious belief(s) (Freire, 2014).
- Counseling focuses on helping individuals, people groups, and communities overcome:
  - alienation and marginalization
  - learned helplessness
  - internalized hatred (Rosyric, 2009).
- Counselors are tasked with the responsibility of attending to the health and well-being of clients (Bernal, 2005). Addressing issues of pain and suffering fall under the responsibilities of counselors (ACA, 2014).
- The Integration Approach (Narramore, 1973) is a medium through which Christian counselors can integrate biblical beliefs and values with clinical practices when working with clients encountering issues of pain and suffering.

Biblical and Pastoral Theology

A Biblical Theology of Suffering (Peterman & Schmutzer, 2016):

The Bible espouses that
- Christians are called to suffer for Jesus Christ (Phil 1:29; 1 Pet 2:20–21)
- Suffering is one of God’s ways of disciplining His children (Heb 12:7–11)
- Christians will endure many hardships prior to entering the Kingdom of God (Matt 5:10–12; Acts 14:22; 1 Thess 3:3)
- God uses suffering for the good of the Christian—to conform him/her into the image of Jesus Christ (Rom 8:28–29).

Yet the Bible also asserts that amidst suffering God
- Is always present with His children; never leaving or forsaking them (Ps 37:28; Heb 13:5)
- Invites His children to draw near to Him with confidence to receive mercy and find grace to help them in their time of need (Heb 4:14–16)
- Bestows His shalomic peace upon His children thus enabling them to endure their tribulations (John 14:27; Phil 4:6–7)
- Comforts His children (Ps 23:4; Isa 61:2; 2 Cor 7:6) so they in turn can comfort each other (2 Cor 1:3–5).

Therefore, in the midst of suffering, can
- Trust in the Lord (Ps 31:14–15; Pro 3:5–6; 14:1–6)
- Groan/lament as they cast their cares and anxieties upon the Lord (Ps 55:22; Rom 8:23; 1 Pet 5:7)
- Rejoice in the Lord (Matt 5:12; Phil 4:4)
- Give thanks to the Lord (1 Thess 5:16)
- Hope in the Lord’s glorious appearing (Rev 21:1–4).

A Pastoral Theology of Suffering (Zyla, 2012):

Fourfold Dimension of Suffering
1. Physical Pain
2. Psychological Anguish
3. Social Degradation
4. Spiritual Despondency/Desolation

Application of the Integration Approach

The Integration Approach (Jones 2010; McMinn, 2012), referred to as the Allies Model (Entwistle, 2010), was developed by Narramore (1973) who argued that integration involved combining God’s Word (special revelation) with God’s world (general revelation). An integrationist believes that although the disciplines of counseling and theology differ in the ways they address human nature (Johnson, 2010), there is an underlying existing unity, i.e., truth, which can be established through the Integration Approach (Entwistle, 2010).

<table>
<thead>
<tr>
<th>View of Truth</th>
<th>Integration Approach</th>
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<tr>
<td>View of Mankind</td>
<td>The Integration approach asserts that human beings are created in the image Dei, i.e., the image of God (McMinn, 2012). Consequently, human beings have a threefold capacity: to reason, to be responsible, and to be relational (Jones, 2010).</td>
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<td>Theory of Motivation</td>
<td>Integration is motivated, existing on two levels: ( 1) ) the client — trust and hope in God’s goodness; ( 2) ) the counselor — show empathy, positive regard, and genuineness (McMinn, 2012).</td>
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<td>View of Health</td>
<td>The Integration approach values interdisciplinary communication, i.e., both faith and science provide insight into human functioning (Jones, 2010; McMinn, 2012).</td>
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<td>View of Illness</td>
<td>Illness/psychopathology stems from humanity’s rebellion against God, leading to our brokenness (Jones, 2010). Illness involves having an unhealthful sense of self, lacking awareness of one’s brokenness, and/or unholy relationships (McMinn, 2012).</td>
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<td>View of Recovery/Cure</td>
<td>The focus is on: ( 1) ) developing a healthy sense of self, ( 2) ) maintaining awareness of one’s brokenness, and ( 3) ) engaging in rewarding and close relationships (McMinn, 2012).</td>
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The Counselor and Counseling Techniques

The counselor seeks to reflect Christlike in therapy, founded on a Christian view of persons, and works from a position of being tentative, patient, and humble (Jones, 2010). The counselor also practices being adaptable, fluid, and sensitive to both God’s Word and works (McMinn, 2012).

Techniques include the therapeutic relationship, i.e., showing care and concern for the client, the use of contemporary theories and strategies, and the use of prayer and Scripture (Jones, 2010; McMinn, 2012).

Ethical Implications & Best Practice

The ACA (2014) codes:
- A.1.C. Counseling Plans
- A.2.a. Informed Consent
- A.4.b. Personal Values
- C.2.b. Boundaries of Competence

Best Practice Guidelines for Counselors (Gubi, 2001; Tan, 2003; Weid & Erikson, 2007):
1. Be aware of self in terms of beliefs about theology and its use in counseling, as well as, why you are opting to use theology at this time with this client.
2. Have adequate training in the use of theology in counseling (integration).
3. Obtain informed consent from the client related to the client’s understanding of the purposes of using theology, how it will be done, and its potential benefits and possible harm.
4. Do an assessment of the counselor’s and client’s values/relatives related to the use of theology in counseling.
5. Be supervised and/or be in consultation with someone (group) who understands and is adequately trained in the potential benefits and risks of using theology in counseling.

References


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