

THE JOURNAL OF BIBLICAL SOUL CARE

Advancing Scholarship *for the*
Biblical Care of Souls *within* Higher Education

Articles *by*
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IN LOVE 



This journal is dedicated to the generation of men and women whose commitment to the Word of God and care of souls has laid the groundwork for a resurgence of biblical soul care. The Journal of Biblical Soul Care is a reflection of your dedication to the sufficient Word of God and its ability to speak into the complexities of human nature and experience. The editorial team desires to promote Christian scholarship in the wake of your effective reorganization and apologetic of biblical soul care.

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As an academic journal promoting the dialogue of topics pertaining to biblical counseling, the views presented in the essays of this journal belong to their respective authors and do *not* directly reflect the doctrines or views held by ACBC.

Editorial
TIME TO CONSTRUCT
Dr. Greg E. Gifford¹

It seems to me that the last edition of the JBSC may be the most-widely read edition to date! As you may recall, we published multiple articles on Clinically-Informed Biblical Counseling and I received many comments and emails about those articles. Comments from both pro-CIBCers and comments for those who are not in agreement with the CIBC perspective. Furthermore, Marshall Adkins and Brad Hambrick hosted a debate with Detroit Baptist Theological Seminary this Spring. The debate was centered around Trauma-Informed Biblical Counseling and Historic Biblical Counseling. Although the debate was long, it is a worthy addition to your arsenal of resources, especially if you're in a leadership position in BC.

It is my individual perspective that enough has been said on CIBC and I commend those articles/debate to you. If you're looking to learn more about the difference between CIBC and genuine biblical counseling, the Fall 2025 JBSC articles, Detroit debate, and Sufficiency Statement would be of help to you.

What lies ahead?

The future of biblical counseling is quite exciting! Here are some things to be looking for on the horizon. First of all, you are on the cusp of watching a movement arise in biblical counseling and missions. Missions agencies are still riddled with integrationists or full-on Christians who counsel with secular methodology. BC is on the cusp of addressing this issue. Biblical Counseling Ministries Worldwide (formerly OIC) is leading the effort, with the help of Andrew Rogers to teach,

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train, and counsel in biblical counseling. The next effort is for God to train up member care in major missions agencies to *actually* counsel from the Scripture. At The Master's University, we are launching an emphasis in biblical counseling and missions for our Master of Arts degree. Furthermore, I've interacted with many through the podcast, *Transformed*, to the end of pursuing biblical counseling training for member care and care of local nationals on the field. The day is coming (very soon, I hope!) where missionaries will be able to receive biblical counseling by their own agencies.

Second, we are seeing a renewed emphasis on the text of Scripture from articles, books, papers, and degrees. Our movement is saturated with methodological resources and also historical theology resources, especially on the field of pastoral care and counseling. The inherent danger of studying methodology is that you don't know your Bible. What the movement has and needs to maintain, is excellence in biblical and theological studies. In fact, if you are working on an exegetical project, I'd love to publish it more in the *JBSC*. If you're a leader reading this, require your students to be exegetical and then theological. Help them to be in the Word, not studying about the Word. Know the Scripture well, and you'll train your future counselors for long-term faithfulness.

Lastly, as we are distanced in time from the leaders who started the BC Movement, the Jay Adams, the George Scipione, the David Powlison, the Wayne Mack, and the John MacArthurs of the world. We must now pivot from "personal influence" to "conviction led." In God's kindness, we had great leaders who personally impacted us by their life and ministry. *However, our fondness for these leaders is not what will keep us faithful.* It is our commitment to the Scripture that will keep us faithful—in other words, our convictions. Over the next few years, we will watch a generation of new biblical counselors that didn't know Powlison and never took a class with Jay Adams. And new counselors don't need to know them per se. (Candidly, I don't know these men—apart from a side-hug that I received from Powlison at an ACBC conference! It was not as awkward as I'm making it sound!) The next generation of counselors need to be convictional. It is the absolute authority, inspiration, inerrancy, and sufficiency of the Bible that we rally around. Our methodology is borne out of conviction, not relationship to the patriarchs of the movement. And this is good.

The more one claims, “I’m of Powlison, I’m of Adams, or I’m of Mack” it sounds a lot like “I’m of Apollos, I’m of Cephas, I’m of Paul.” Our appreciation for faithful leaders will not keep us faithful as a movement. Faithfulness will only come through commitment and unapologetic dedication to the Scripture as the source and authority for all counseling. I actually look forward to the day for when a new biblical counselor has no clue who Jay Adams or David Powlison is but holds to biblical counseling because of what the Bible says. This is no slight on Adams or Powlison, but this will demonstrate that we are now convictional and rally together in light of those faithful convictions. What were Powlison and Adams? “Servants through whom you believed as the Lord gave to each one” (1 Corinthians 3:5). The movement has the potential to become more-and-more convictional as we are distanced in time from these faithful servants.

In this edition, you’ll find another excellent batch of articles.¹² Logan Williams’ paper is exegetically based, applying his exegesis to Marriage Reconciliation. His paper is titled, “Finding Grace in the Depths.” Justin Daugherty has brought to light the concerns that antidepressants are actually encouraging suicidal ideation in his paper, “When Treatment Harms.” Ed Wilde and Sam Stephens are regular authors with the JBSC, and both have provided excellent resources on the dangers of eclecticism (Stephens) and the factors that encourage integrationism (Wilde). I commend these articles to you.

Thank you for reading.

May God give us grace to honor his sufficient word for his glory and the good of our counselees!

²Cf. Ed Wilde’s article, “Why Common Grace is Not Enough for Those Who Counsel?” In *The Journal of Biblical Soul Care* 1, no. 2 (2018).

FINDING GRACE IN THE DEPTHS: Gospel Forgiveness as Motivation for Marital Reconciliation *Logan Williams*¹

How can married couples find motivation for forgiveness and reconciliation after relationship-shattering sins? The Scripture provides a powerful answer to these questions by pressing into the abundant forgiveness of the Lord: “If you, O LORD, should mark iniquities, O Lord, who could stand? But with you there is forgiveness, that you may be feared” (Psalm 130:3–4).² This paper will argue that Psalm 130 is a powerful addition to the marital expository counseling toolkit as it engages both the one sinning and the one sinned against. It sends the offender out of the depths of his sin and into the abundant forgiveness of the Lord, and it sends the offended back to the place of Gospel truth, which is the only true source of forgiveness. The paper will engage with commentators on Psalm 130, most notably the Puritan author John Owen and his substantial work on the passage, and other authors on the topic of forgiveness. It will show that there are robust biblical truths contained in the passage which can address even life-dominating sins and offer hope.

Paul speaks words of challenge and encouragement to the Galatians: “Brothers, if any of you is caught in sin...” (Galatians 6:1). Caught. That is what Stan was. He had been found out. Susan knew something was wrong, but she had no idea it was this. The deeds done in darkness had now come to light, and Stan was now sitting next to his wife, pouring out the details of a year-long drift into digital infidelity. The allure of online anonymity had drawn Stan to devote himself to women who were not Susan. He had given himself over to a digital affair consisting of intimate conversations and inappropriate pictures exchanged with other women online. As

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² All Scripture quoted is quoted in the English Standard Version unless otherwise noted.

his bride listened, Stan confessed the sin that had ensnared him and brought great pain to their marriage.

Is there hope for a couple like this? Is there sufficient motivation to be found in the Gospel of Jesus Christ for Stan to truly repent of his sin? Can Susan find in the Gospel a wellspring of grace and mercy to forgive him for this grave offense? Where can a faithful biblical counselor direct this couple to find help and hope?

The paper will open Psalm 130 through expository counseling application as it relates to the offender, and, from there, it will trace the path to true repentance. It will then show that the outcome of true gospel forgiveness is gospel proclamation and the offer of forgiveness to others; therefore the offended can only truly forgive when she has seen her own sinfulness and has turned to Christ. In the final section, the paper will address Stan and Susan and the application of Psalm 130, along with other key Scriptures, to the problems they face.

MOTIVATION FOR PERSONAL REPENTANCE

Marriages between believing spouses, though undeniably sweetened by faith in Christ, still battle the ongoing presence of indwelling sin. Born-again spouses still sin against one another. Some of these sins happen and are resolved in a moment, but others cut deeper.³ Stan and Susan found themselves facing a barrage of potentially marriage-shattering sins: ongoing lying, abuse of finances to support the infidelity, unfaithfulness of heart and body, and abdication of marital promises. Their relationship was in deep, troubled waters, but God's Word has answers for even intensely troubled waters.

Psalm 130 lays out the movement of a sinner from the realization of his sorry state, through the acknowledgment of guilt and God's offer of grace, and finally into a new turning toward God and others. This section will begin with the state of the sinner, caught in "the depths" of his sin.

³ See Winston T. Smith, *Marriage Matters: Extraordinary Change Through Ordinary Moments* (Greensboro, NC: New Growth Press, 2010). Smith does an exemplary job of displaying just how important these smaller hurts can be to enhance the Christ-like love shared between a couple: "moments that seem the most ordinary—moments of annoyance, conflict, pain, or cold indifference—can become moments in which you're able to understand God's incredible agenda for love and begin to do something new."

THE OFFENDER EXPERIENCES SPIRITUAL TURMOIL, (PSALM 130:1-2)

The Miserable State of a Sinner in “the Depths”

“Out of the depths I cry to you, O LORD!” (Psalm 130:1). Stan’s troubles had not started the day Susan found the string of messages which tipped her off to his infidelity. Stan’s inner turmoil had built over a series of months as he began to experience the difficulties associated with harboring sin. John Owen describes the believer who persists in sin as being in a state of “inextricable depths and entanglements” which can affect both the believer’s internal and external well-being.⁴ These may manifest as outward affliction and even calamity, but they also exist as internal experiences of God’s workings on a wayward soul. Stan had experienced much of the latter—the turmoil of soul. The wise counselor, encountering a situation like Stan’s, will be sensitive to this turmoil of soul: to harbor sin in one’s heart is a miserable condition. David described the physical agony as bones wasting away (Psalm 32:3). The believer whose heart is fixed upon sin misses out on the experience of the love of God.⁵ John Owen helpfully notes: “A sense of God’s presence in love is sufficient to rebuke all anxiety and fears in the worst and most dreadful condition; and not only so, but to give in the midst of them solid consolation and joy...And this is that sense of love which the choicest believers may lose on the account of sin. This is one step into their depths.”⁶ Stan began to lose his experiential apprehension of God’s love for him.⁷

⁴John Owen, “A Practical Exposition Upon Psalm CXXX,” vol. 6, *The Works of John Owen*, ed. William Goold, (Carlisle, PA: Banner of Truth, 1966), 332. Owen (1616–1683) amassed a substantial body of work on the topics of sin and its overthrow. Along with his exposition of Psalm 130 (which itself spans 400+ pages in modern volumes), Owen also penned *The Mortification of Sin*, *Indwelling Sin*, and *Of Temptation: The Nature and Power of It*. All of these can be found in Goold’s collected works of Owen. The latter three titles were helpfully collected together in Kelly M. Kopic and Justin Taylor, *Overcoming Sin and Temptation*, redesign edition, (Crossway, 2015).

⁵Commentator Daniel Estes helpfully clarifies: “In this context in Psalm 130, the depths represent the great distance between the psalmist and the Lord due to the incompatibility of human sin with God’s holiness (cf. v. 3).” Daniel J. Estes, *Psalms 73–150* (Holman Bible Publishers, 2019), 513.

⁶Owen, “A Practical Exposition Upon Psalm CXXX,” 334.

⁷Emotions hold a legitimate place in the Christian experience. God calls Christians to delight themselves in Him through obedience to Him and His Word (Psalm 1:2, 35:27, 37:4). Owen and other Puritan authors spoke of the experiential piety of following the Lord. This theme is most clearly traced in Owen’s work in *Of Communion with God* which can be found in vol. 2 of Goold’s collection.

Owen's work on the depths continues. Believers in the depths begin to lose sight of who God truly is, contorting their memories of Him. The internal depths continue as the Law is sharpened in the heart and memories of God's promises of chastisement loom large.⁸ The believer in the depths begins to fear total separation unto damnation by God, and is even pierced by the very arrows of God.⁹ While such an experience lasts for a season, God's grace intervenes and preserves the believer from a total and final sense of God's abandonment. Finally, spiritual duties fall by the wayside. The believer no longer has the strength to engage in prayer, joyfully hear the Word, or speak and act in heavenly ways. Knowing the profound implications of a trip into the depths prompts the next course of inquiry: what kinds of sin can lead to the depths?

Identifying Sins Which Lead to “the depths”

The Scripture's presentation of sin and the believer's interaction with it is multifaceted. One telling example is the first chapter of John's first letter which explains how the believer must continually confess sin (v. 9), is cleansed from sin (v. 7), cannot deny the presence of sin (vv. 8, 10), and yet must not accept an ongoing walk in the darkness of sin (v. 6).

Owen's presentation concerning the depths of Psalm 130 included three facets of sin: damning sins, daily sins, and “depths” sins. Owen's apprehension of Calvinist theology ensured that for a true born-again, elect believer, there was no sin which would lead to full and final separation between God and the believer.¹⁰ Moreover, the application of the covenant of grace provides consolation against the guilt of what Owen describes as daily sins: “Though [believers] fall into sins every day, yet they do not fall into depths every day.”¹¹ As a counselor, this is knowable from experience. Some sins are no less offensive to God and yet fail to smite the

⁸ “When any affliction or public judgment of God is fastened to a quick, living sense of sin in the conscience, it overwhelms the soul, whether it be only justly feared or be actually inflicted; as was the case of Joseph's brethren in Egypt. The soul is then rolled from one deep to another. Sense of sin casts it on the consideration of its affliction, and affliction turns it back on a sense of sin. So deep calleth unto deep, and all God's billows go over the soul.” Owen, “A Practical Exposition Upon Psalm CXXX,” 336.

⁹ Psalm 38:2–3, 39:11, Job 6:4.

¹⁰ “The whole certainty and stability of the covenant depends on the efficacy of the grace administered in it to preserve men from all such sins as would disannul it.” Owen, “A Practical Exposition Upon Psalm CXXX,” 338.

¹¹ Owen, “A Practical Exposition Upon Psalm CXXX,” 338.

conscience in such a way to cause a counselee to experience the level of turmoil described by “the depths.”¹² And yet for Owen, there is still a third category—one for which grace is provided, though restraint is not provided absolutely: sins which lead to the depths.¹³ Owen offers a tremendous list of sins which can lead to the depths, summarized here as sins after the “spiritual highs” encountered in life and ministry, sins during or after deliverance from great affliction, the memory of sins clung to before conversion, sin after ignoring a special visitation by the grace of God, sin in neglect of great opportunities for service, sin after special warning, and sin after special warnings have been issued.¹⁴ The wise counselor can utilize these categories as diagnostic questions to better understand the depths-entering situation the counselee is in. All of these can lead to the depths, and the believer caught in the depths finds himself with only one true remedy: crying out to the Lord.

Crying Out From “the Depths”

The natural response of a soul in the depths is to cry out for rescue. Owen writes: “A drowning man needs no exhortation to endeavour his own deliverance and safety; and spiritual troubles will, in like manner, put men on attempts for relief.”¹⁵ As the Psalm progresses to verse 2, Owen notes that the first real action on the part of a believer caught in the depths is petitioning the Lord. A believer seeking true rescue from his sin will eschew self-righteousness and instead call out to the Lord. Owen cites men’s lack of tenacity in this pursuit as evidenced by the worldliness of professing believers. We would no sooner sit by and watch our home burn down without cries for help and earnest work, and yet we will watch our relationship with the Lord languish without so much as a whimper. And this, too, so many counselees have done.

Unfortunately, the situations which have led the counselee to visit with the counselor are typically the final stages of a months or years-long process that could have been averted much earlier. When true change of heart is on the horizon, it

¹²However, even such “daily sins” can quickly become “depths sins” if not addressed and repented of.

¹³Owen writes, “Thus, though there be, in the covenant of grace through Jesus Christ, provision made of abundant supplies for the soul’s preservation from entangling sins, yet their administration hath respect unto our diligent attendance unto the means of receiving them appointed for us to walk in.” Owen, “A Practical Exposition Upon Psalm CXXX,” 341.

¹⁴Owen, “A Practical Exposition Upon Psalm CXXX,” 344–348.

¹⁵Owen, “A Practical Exposition Upon Psalm CXXX,” 350.

begins with an earnest pursuit of the Lord. This is said to come as the result of the Spirit's special work in the believer to remind him of God's goodness and graciousness in saving him in the first. In this way, "a recovery from depths is as a new conversion gone over afresh."¹⁶

Stan needed this kind of reminder. He needed to know who he was in Christ and how far he had fallen from his calling to holiness and faithfulness. As he experienced the depths of his sin, he needed a fresh reminder of God's love for him in Christ and the new life he had been called to. And yet, as Owen continues to describe, such a reminder would only come through an acknowledgment of Stan's sin and a new appraisal of God's abundant grace for him.

THE OFFENDER GAINS A SINCERE SENSE OF SIN (PSALM 130:3)

The counselor seeking to help someone escape the depths of his sin will ensure that he has indeed experienced what John Owen calls "*a sincere sense of sin*."¹⁷ Stan is well-aware of the idea of sin. He has substantial experience in the church and is certainly aware of the notion that we are all sinners and that we do various kinds of sins. In that way, he has *a* sense of sin. But the sense which Owen and the wise counselor is looking for is much deeper than that; it is a sense that proportionately affects the heart of the believer.¹⁸ This deep and abiding sense of sin must precede real turning from sin. It flows from the application of the Law: "As ever you would have your souls *justified* by grace, take care to have your sins *judged* by the law."¹⁹ This sense of sin and its legal burden produces a confession of sin that is free and full. Susan's confrontation had not yet produced a free confession; Stan needed time to acknowledge his sin to the Lord and then to his bride. Moreover, Stan's confession would never be full while he hid the details or the nature of the various online affairs: "Reserves ruin confession."²⁰ Grasping this sense of sin should lead

¹⁶ Owen, "A Practical Exposition Upon Psalm CXXX," 356.

¹⁷ Owen, "A Practical Exposition Upon Psalm CXXX," 368. Emphasis original.

¹⁸ The counselor here is looking for intellectual and affective coherence in the counselee's confession. Puritan author Thomas Watson captured this: "Moist tears dry up sin and quench the wrath of God." Thomas Watson, *Doctrine of Repentance* (Edinburgh; Carlisle, PA: Banner of Truth, 1988), second introduction.

¹⁹ Owen, "A Practical Exposition Upon Psalm CXXX," 370. Emphasis original.

²⁰ Owen, "A Practical Exposition Upon Psalm CXXX," 374.

Stan to pronounce sentence upon himself according to the Law. The sense of lowness and guilt must then precede the application of Christ's grace, or else grace becomes "cheap."²¹ "Grace will not seem high until the soul be laid very low."²²

The Psalmist presses forward into verse 3 with his own apprehension of guilt. He turns first to God's undeniable knowledge of all man's dealings. God alone can mark all of men's iniquities; he both knows them all and, according to the Law, stands ready to judge them.²³ God's omniscience brings Him into every room occupied by men and provides Him with infinite access to the thoughts that swirl around in their hearts. Not only was God aware of Stan's secret adulterous pursuits, but His moral displeasure accompanied His awareness. God's holiness would have none of Stan's sin, so Stan must begin to rightly assess "the deep insinuation of a dreadful ruin" which comes to those whose sin is counted against them.²⁴

Deceptions abound here. The believer in the depths can be tempted to believe that the guilt of sin can be escaped due to God's inability to know his secret deeds, or that God would even ignore his sin. Just the same, the believer might hope that God would consider his sin more lightly than it deserves, or he may hope that God would be placated by his own offerings of good works. Finally, he may embrace the lie that God's wrath is less than he has expected.²⁵ However, all of these must be cleared away and the believer must rightly acknowledge the just wrath of God against sin as well as the infinite ability of God to mark and punish iniquity.

THE OFFENDER BEHOLDS GOD'S FORGIVENESS (PSALM 130:4)

Having reached the bottom of "the depths," it is now time for Stan to turn from sin to Christ. Harboring sin leads the believer into a period of deep darkness

²¹ Dietrich Bonhoeffer and Eric Metaxas, *The Cost of Discipleship*, first edition. (New York: Touchstone, 1995).

²² Owen, "A Practical Exposition Upon Psalm CXXX," 375.

²³ "If Yahweh kept strict tally of human sin and acted on it in speedy punishment, none would survive." Leslie C. Allen, *Psalms 101-150*, vol. 21, revised edition (Zondervan Academic, 2018), 256. Helpfully quoted in Estes, *Psalms 73-150*, 514.

²⁴ Owen, "A Practical Exposition Upon Psalm CXXX," 359-360.

²⁵ Owen, "A Practical Exposition Upon Psalm CXXX," 366-367.

which includes internal turmoil over the loss of a sense of God's ever-present love. These depths should point the believer to rightly assess himself and his sin in light of the omniscient justice of God. All of this is experienced as a sense of the weight and inescapability of sin. And yet, the believer is not to remain there, nor should the counselor leave him there. The bottom of the ocean is not a resting place, but a boundary of redirection for the believer who must now seek true grace from God Himself, who alone can rescue the believer from the depths. The believer's union with Christ will draw him, not only to conviction and confession of sin but to full discovery and embrace of God's forgiveness. The wise counselor who has helped the counselee press the Law of God deeply into the wound of his sin will apply the balm of Gospel grace to the wounded soul.

DISCOVERING TRUE FORGIVENESS IS A DIFFICULT PROCESS

James Montgomery Boice charts the way forward: "Sin is the problem, then, and what the psalmist seeks is forgiveness, which God gives freely."²⁶ Stan's path to reconciliation began with a real acknowledgment of his sin and continues by truly discovering the truth at the core of Psalm 130:4—with God there is forgiveness. This is the future promise and present reality of the Gospel of Jesus Christ: "Our God is a forgiving God."²⁷ Because of Christ's Cross-work and resurrection, believers can know that they have forgiveness of sins.²⁸ Stan needs to experience this forgiveness afresh.

Discovering forgiveness is a delicate process. God's offer of forgiveness in Christ is easily confused and abused. It would be easy enough for Stan to adopt the position Paul argues against in Romans 6:1: "Are we to continue in sin that grace may abound?" This certainly must not be the case. What about Stan's conscience

²⁶James Montgomery Boice, *Psalms: Psalms 107–150* (Grand Rapids, MI: Baker Books, 2005), 1140. Estes furthers the thought: "Attempts to relieve guilt by activity, possessions, achievements, positive thoughts, and denial are as ineffective as taking aspirin to heal a tumor because while they may address the symptoms, they cannot cure the disease. The good news of Psalm 130 is that when sinners cry out to God in the night of their guilt, he is gracious in forgiving them. Their hope is not in their merit before the Lord but in the Lord's unmerited mercy to them." Estes, *Psalms 73–150*, 517.

²⁷Boice, *Psalms*, 1140.

²⁸Romans 5:8, Ephesians 2:8–9, Colossians 3, 1 John 1:9, 1 John 4:10.

and the just requirement of the Law concerning his sin? John Owen helpfully notes that both the conscience and the Law make no provision for forgiveness. The Law speaks death to lawbreakers, and Stan is certainly a lawbreaker. Thus, God's message of Gospel forgiveness must override Stan's conscience and his understanding of the Law.²⁹

Moreover, Stan must avoid false presumptions of forgiveness which can come to him by believing falsehoods about God, or by believing some vague, general notion of forgiveness available to all. Owen writes, "The reason why most of men are not troubled about their sins to any purpose, is from a persuasion that God is merciful and will pardon; when indeed none can really, on a gospel account, ordinarily, have that persuasion, but those who have been troubled for sin, and that to the purpose."³⁰ Put another way, apart from the troubling sense of sin, which Owen laid out above, a general sense of God's mercy is mere fantasy. Stan will not find true repentance here, but rather will only "choke [conviction] and heal [his] conscience with this notion of pardon."³¹ The kind of discovery Stan needs will point him away from bland notions of forgiveness and toward forgiveness rooted in the true character and nature of God as well as the work of Jesus Christ.

TRUE FORGIVENESS UNDERSTOOD AND RECEIVED

Stan, just as the psalmist, needed a full apprehension of what forgiveness in Jesus Christ could mean again for him. Estes writes, "The good news that will come in v. 4 is that the Lord is indeed perfectly just, but at the same time he is gracious beyond measure."³² Owen offers several particulars regarding the foci for Gospel forgiveness. These could serve as helpful tools in the counseling room to point a counselee such as Stan towards God's forgiveness in Christ.³³

1) "*The name and infinite goodness of the nature of God.*" Here the believer is set upon the character of God and able to see "peculiar sweetness and encouragement"

²⁹ This is not to nullify the Law; rather, it is to force the conscience to see that our sin demands a substitute and our wickedness must be accounted for.

³⁰ Owen, "A Practical Exposition Upon Psalm CXXX," 396.

³¹ Owen, "A Practical Exposition Upon Psalm CXXX," 396.

³² Estes, Psalms 73-150, 514.

³³ Below cited from Owen, "A Practical Exposition Upon Psalm CXXX," 408-410. (Emphasis original.)

from pondering God's abounding goodness. 2) "*The sovereignty of God's will.*" Pursuing forgiveness requires acknowledgment of God's unsearchable will. The believer can rest in his complete inability to create his own rescue and cast himself upon God's will. 3) "*The mediation and blood of Christ.*" Owen notes that this particular pursuit should be most familiar to believers. We ought to go first, by faith, to our Mediator when seeking forgiveness. 4) "*Actual pardon.*" God has promised pardon for those who are in Christ; this promise is fuel for further trusting in and experientially receiving the forgiveness offered to believers. Whichever of these may have, in any given case, the greatest effect, the believer must seek real remedy for their depths-inducing guilt in the saving work of Jesus Christ.

HOW AN ACCEPTANCE OF GOD'S FORGIVENESS LEADS TO FUTURE OBEDIENCE

The latter portion of v. 4 speaks to the result of the forgiveness God offers in Christ: "...that you may be feared." The commentaries expand the word "feared" to "revered," as evidenced in several of the translations as well as other uses of this verb in the Old Testament. Allen adds "Forgiveness increases the sinner's reverent awe of and trust in Yahweh."³⁴ In this believer. Estes writes, "By his forgiveness, the Lord proves himself more powerful than sin. His grace, however, should not cause us to think less of him, but it is intended to cause us to respect him."³⁵ Stan's recognition of Christ's offer of forgiveness points him to a new desire for obedience to Christ. "The sinning believer's obligation is thereby increased, and greater obedience and trust are the result. Such is God's better way."³⁶ Stan is now fitted to pursue holy living and a full change of heart and mind from his former ways. He has readily accepted God's legal declarations against his sins of eyes and heart and hands. He has found in Christ a full means of reconciliation to almighty God and a new way to live and follow heartily after the God who offers such great forgiveness. He has additionally found the motivation not only to repent for his sin but to seek forgiveness from his wife he so clearly wronged.

³⁴ Allen, *Psalms 101-150*, vol. 21, 256.

³⁵ Estes, *Psalms 73-150*, 514.

³⁶ Allen, *Psalms 101-150*, Volume 21, 256.

MOTIVATION FOR EXTENDING FORGIVENESS

The Offended is Fitted to Declare Grace to Others, (Psalm 130:5–8)

Having considered Psalm 130's application to the offending party, this essay now turns to show how the pattern of grace laid out in verses 1–4 is completed and extended to others in verses 5–8. Psalm 130 closes in two movements. First, the psalmist declares his waiting for the Lord in verses 5 and 6, and then, in 7 and 8, he calls out to his countrymen: "Hope in the Lord!"³⁷

"I wait for the LORD, my soul waits, and in His Word I hope" (Psalm 130:5). Verses 5 and 6 see the psalmist waiting. He is waiting with hopeful expectation, hope which can only be rooted in the Word of God.³⁸ And yet, as James Boice helpfully notes, he is not waiting for the arrival of God's forgiveness.³⁹ The forgiveness apprised in verse 4 has already come. He has experienced this forgiveness. This confidence can be seen in 1 John 1:9 and John's confidence that those who confess their sins will find in Christ a faithful forgiver.⁴⁰ The one redeemed from his sin waits for the Lord. This is a word for counselors walking alongside both sinner and sinned against. Experiential forgiveness can take time. Restored presence and fullness of relationship may require waiting. Just as in "the depths" the believer caught in sin experiences a lack of the experiential presence of God, so too, after reconciliation with the Lord, he waits for the return of that presence. On the completion of his waiting, he can see not only the full folly of his sin, but also the desperate need that those around have of the experience of the same gospel forgiveness.

The final movement of Psalm 130 turns the psalmist outward. This is a beautiful response to the experience of forgiveness. It also sets Psalm 130 apart from the traditional "penitential psalms" as commentator Daniel Estes notes: "In place of the customary final praise in a lament psalm, Psalm 130 concludes with an

³⁷ "This is not a tepid, half-hearted trust, but the psalmist is all in for the Lord as he completely places himself and his need into the Lord's hands." Estes, *Psalms 73–150*, 515.

³⁸ Allen writes helpfully: "Around him lurks a dark night of trouble, sinister with threat and fearfulness. He longs for relief, as ardently as the city sentinels peering into the darkness from the watchtower long for daylight and for danger's end." Allen, *Psalms 101–150*, Volume 21, 256.

³⁹ Boice, *Psalms*, 1142.

⁴⁰ Allen marks out 1 John 1:8–10 as the New Testament fulfillment of Psalm 130.

exhortation to Israel in vv. 7–8.”⁴¹ The psalmist turns his eyes to his countrymen and calls them to find all the fullness of communion with God through His “steadfast love” (this is the *hesed* love of God) and “plentiful redemption” (Psalm 130:7).⁴² This aspect of Psalm 130 provides a wholistic paradigm for sin restoration. Not only is it a call to a sinning spouse like Stan to repent, but it is also a call to an offended spouse like Susan to offer forgiveness.

For the counselor, the task then is guiding Susan through the truth of her salvation in Christ and its natural outpouring in the forgiveness of others. Susan has seen the forgiveness of the Lord in her past. Her sins have brought her low in the past. She has seen the depths of her own heart and experienced God’s chastening hand. Knowing her own sinfulness, she can rise up like the psalmist and declare grace over sin. As John Owen summarizes: “They who out of depths have, by faith and waiting, obtained mercy, or are supported in waiting from a sense of believed mercy and forgiveness, are fitted, and only they are fitted, to preach and declare grace and mercy unto others.”⁴³ Apart from the fullness of already-received forgiveness, Susan can find no particular motivation for forgiving Stan. He has taken advantage of her trust. He has failed to keep his marital covenantal promises. He has exposed her and the family to shame in the community if word of his behavior gets out. And yet, the soul redeemed from the depths can call out to another, “Hope in the Lord.”

APPLICATION TO MARITAL COUNSELING

The final section of this paper will seek to apply the understandings of Psalm 130 above to counseling Stan and Susan in their distress. It will include interaction with additional passages of Scripture that echo and enhance the message of Psalm 130 as well as trusted voices in the biblical counseling movement who have spoken helpfully to ideas of forgiveness and reconciliation in marriage. A counselor encountering Stan and Susan would quickly find himself experiencing the effects

⁴¹ Estes, *Psalms 73–150*, 512. The traditional penitential psalms are Psalms 6, 32, 38, 51, 102, and 130; each of which can also bring light to the process of repentance.

⁴² “The psalmist’s renewed hope spills over to affect others, as in v. 7 he calls on others in Israel to join him in hoping in the Lord as he seeks to set into motion concentric circles of confidence in the Lord.” Estes, *Psalms*, 515.

⁴³ Owen, “A Practical Exposition Upon Psalm CXXX,” 648.

of sin in the world. The hurt which Stan caused has clearly soured the relationship between him and Susan, and yet, in the paradigm of forgiveness offered in Psalm 130, there is real hope for reconciliation.

Beginning with Conversion

The wise counselor would begin by assessing the faith of both Stan and Susan. Biblical counselors since Jay Adams have recognized the necessity of salvation for God-honoring change. Owen puts a fine point on this thought: “To kill sin is the work of living men; where men are dead (as all unbelievers, the best of them, are dead), sin is alive, and will live.”⁴⁴ The unconverted soul remains in Psalm 130 verse 3—standing against the weight of sin and the wrath of God. Stan and Susan need to recount a true experience of repentance and faith in Christ. They need to know that God is active in their life in and through Christ. Though Stan’s sin is at the forefront, they need to both see that they are sinful people and have dishonored God in many ways. They also will need to see a Godward vision for all of their lives. The counselor could help both Stan and Susan see their lives *Coram Deo* and come to a further realization that their choices, both in how Stan has sinned and how Susan responds to his sin, are before the face of God.⁴⁵

Called to Repentance

This groundwork of faith prepares the counselor to guide Stan through a season of true turning from his sin against God and his bride.⁴⁶ The counselor could help Stan to understand if he has really experienced the depths of his sin or if he has lulled himself into apathy with one of the lies discussed above. Scripture admonishes the counselee in Proverbs 28:13: “Whoever conceals his transgressions will not prosper, but he who confesses and forsakes them will obtain mercy.” As Stan sees his sin and repents, first to the Lord, he can begin to make full and free confession to Susan.

⁴⁴ Kopic and Taylor, *Overcoming Sin and Temptation*, 83.

⁴⁵ I am thankful specifically to the ministry of the late R.C. Sproul (1939–2017) for introducing me to this brief phrase and its tremendous importance in the Christian life.

⁴⁶ My doctoral program research focus has centered around this aspect of Owen’s theology. Specific areas of concern include the biblical process of mortification of sin (sin-killing) and how a biblical counselor can engage in a helpful way in this process. Key components I have observed in my study so far include: mortification is an ongoing, rather than a one-time, process in the life of a believer; the means and methods of mortification significantly matter—we cannot accept means from any and every quarter but must rather proceed as God has prescribed in His Word; every hope for mortification is to be found in the person of Jesus Christ and the work of the Holy Spirit.

Called to Offer Forgiveness

Beginning with a real acknowledgment of conversion is also necessary for Susan. The logic of Psalm 130 is that experiencing God's forgiveness leads to offering man's forgiveness and calling others to experience God's forgiveness. Susan needs a heart full of gospel mercy. This will not come from her flesh or worldly understandings of forgiveness. The flesh would happily see justice meted out to the offender. Yet, as Susan sees her own place inside Psalm 130 and the gospel narrative it produces, she can lift her eyes to her countrymen, specifically the one she is wed to. In Christ's economy, forgiveness offered by those who have been forgiven is necessary.

The counselor could helpfully walk her through the parable of the unforgiving servant in Matthew 18:23–35. This parable clearly demonstrates the antithesis of the principle of forgiven/offering forgiveness at play in Psalm 130. In it, the parabolic king sends for his servant to settle debts. The “weasel” first servant, as Chris Brauns humorously names him, owes something like several hundred thousand years worth of labor debt.⁴⁷ And yet, after the weasel's pleading, the king offers grace. Rather than calling out to his countrymen that forgiveness was available (viz. Psalm 130:7–8), the servant descends upon another servant to demand repayment for a, while still substantial, much more reasonable sum. The wickedness of the weasel does not go unpunished. This parable is frequently referenced in biblical counseling materials on forgiveness and that for good reason.⁴⁸ If counselors are to lead Christian counselees to offer biblical forgiveness, they must first lead them to see the vast debt owed to God's justice which was repaid in Christ. Only then can Susan rightly offer forgiveness to Stan.

⁴⁷ Chris Brauns, *Unpacking Forgiveness: Biblical Answers for Complex Questions and Deep Wounds* (Crossway, 2008), 121.

⁴⁸ The context of this parable in Matthew 18 only further clarifies Jesus' intended effect. It follows shortly after the parable of the lost sheep in verses 12–14 and the directions for what is typically known as “church discipline” in verses 15–18. Church discipline is a progressive process of confrontation and correction intended to turn a wayward brother from his sin. The process begins long before the traditional use of the nomenclature which only includes the exclusion from the fellowship of church. Rather, believers are to regularly confront sin as it is encountered (Galatians 6:1–2, Hebrews 3:13) and if a sinning believer refuses to repent, they are to be confronted with an increasing host of witnesses, culminating in the full body of the church. The forgiveness modeled in Psalm 130 should prompt believers who have been rightly corrected from their sin to call others further on to holiness.

Called to Patience

The complexity with which Owen describes the process of receiving true forgiveness should give the biblical counselor pause when seeking to mediate forgiveness between a couple as strained as Stan and Susan. Chris Brauns in his tremendous book *Unpacking Forgiveness* gives a needed call to the one sinned against to seek forgiveness with great urgency, and I wholeheartedly agree with him. As above, the one sinned against needs only the reminder of God's goodness shown to him in the past to be well-fueled for offering forgiveness to another. Yet, as a mediator in the situation, it is important not to send the offended spouse out to offer forgiveness to an as-yet unrepentant sinner.⁴⁹ The condemnation of Jeremiah 6:11 and 8:14 is that the prophets and priests cried "peace, peace when there is no peace." So too, the counselor need not demand that full forgiveness be issued at the first blush of remorse.

Stan's sin was rife with deception and secrecy. Following the model of the Apostle Paul, the wise counselor will look for bona fide evidence of heartfelt repentance such as those found in 2 Corinthians 7:11, "For see what earnestness this godly grief has produced in you, but also what eagerness to clear yourselves, what indignation, what fear, what longing, what zeal, what punishment! At every point you have proved yourselves innocent in the matter." This means a practical course of homework to demonstrate Stan's willingness to pursue "radical amputation" may necessarily come before a formal request for and offer of forgiveness. This is not to say that Susan should exhibit any bitterness or reservations against Stan. Rather, as one forgiven herself, she extends the offer of forgiveness while holding also to Stan's best interest in the situation which is his growth in holiness.

⁴⁹ One of the critical features of Brauns's book is his well-reasoned and thorough discussion of the various modes of forgiveness commonly taught in secular and even Christian literature. A common feature of many of these presentations on forgiveness is that they call on the offended person to fully forgive the offender whether or not any repentance or request for forgiveness has taken place. This view is most specifically linked to the "therapeutic" view of forgiveness which roots forgiveness not in the restoration of relational wholeness but personal peace and satisfaction. The understanding, as presented by the therapeutic view, is that those who withhold forgiveness will experience personal bitterness leading to more and more intrapersonal issues. Brauns, *Unpacking Forgiveness*, specifically chapters 3 and 5.

CONCLUSION

This paper has argued that Psalm 130 is a powerful addition to the marital expository counseling toolkit as it engages both the one sinning and the one sinned against. It showed the depths of unrepentant sin, which is a likely context for the counselee pursuing counseling in the first place. It showed the importance of the counselee rightly pursuing forgiveness from the Lord after attaining a sincere sense of sin. And it showed how, as clearly laid out in Psalm 130:4, truly understanding and receiving such forgiveness from the Lord could lead a believer to future obedience. These aspects were directed to the sinning spouse, particularly the one caught in a deep season of sin. But they also served as the background for the passage's usefulness for the spouse who had been sinned against. Having seen and known the forgiveness of the Lord in her past, the sinned against spouse can offer forgiveness as she has been forgiven.

Psalm 130 carries much usefulness for the biblical counselor because it so holistically and effectively engages both parties in the conflict. The wise counselor will make use of this passage both in his time teaching the couple as well as in their homework assignments and ongoing growth. It is an effective reed to lay beside the counseling process and to gauge the progress made by the couple in and through the process.

WHEN TREATMENT HARMS:
Antidepressant-Induced Suicidality and Implications
for Biblical Counseling
*Justin Daugherty*¹

More than 720,000 people die by suicide every year.² As of 2024, over 60 million people received therapy for some form of mental health condition, and around 35% of the US population was prescribed psychotherapeutic medication.³ These numbers are greater than ever, and yet, within the past 40 years, there has been a general increase in suicide rates.⁴ Several proposed ideas have been put forward to explain this phenomenon. Mental health conditions such as mood disorders, opioid use and overdose, alcohol related deaths, and greater access to firearms are said to be among the contributing factors.⁵ For numerous reasons, the iatrogenic effects of antidepressant medication are rarely mentioned as a contributing factor to these rates.

Antidepressant usage can increase the risk of suicidality through adverse

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² "Suicide," World Health Organization, accessed July 2, 2025, <https://www.who.int/health-topics/suicide>.

³ "Mental Health Treatment or Therapy among U.S. Adults 2024," Statista, accessed August 20, 2025, <https://www.statista.com/statistics/794027/mental-health-treatment-counseling-past-year-us-adults/>; "Results from the 2024 National Survey on Drug Use and Health: Detailed Tables Prevalence Estimates, Standard Errors, P Values, and Sample Sizes," SAMSHA, 2025, <https://www.samhsa.gov/data/sites/default/files/reports/rpt56484/NSDUHDetailedTabs2024/NSDUHDetailedTabs2024/2024-nsduh-detailed-tables.htm>?

⁴ "Suicide Data and Statistics," CDC, Suicide Prevention, published March 26, 2025, <https://www.cdc.gov/suicide/facts/data.html>.

⁵ Gonzalo Martinez-Ales et al., "Why Are Suicide Rates Increasing in the United States? Towards a Multilevel Reimagination of Suicide Prevention," in *Behavioral Neurobiology of Suicide and Self Harm*, ed. Enrique Baca-Garcia, vol. 46 (Springer International Publishing, 2020), https://doi.org/10.1007/7854_2020_158.

drug reactions such as akathisia; therefore, counselors and family members need to be aware and able to respond with creative care when someone in their life experiences the iatrogenic effects of this medication. In this paper, I give a brief history of antidepressant medication. Then, I examine the research on the efficacy of antidepressant medication, financial conflicts of interest and publication bias in the literature, and the evidence for antidepressant medication inducing suicidality. I will also review empirical research on toxicology reports of completed suicides. Finally, I will establish how Christians can biblically understand akathisia and the implications of this phenomenon for counselors and family members in a counseling context.

DEFINITION OF KEY TERMS

Iatrogenesis – Any injury or illness that occurs as a result of medical care.⁶

Suicidality - The term suicidality is an umbrella term that includes increases in suicidal thoughts, behaviors, attempts, plans, gestures, and completed suicides.⁷

Akathisia – A movement disorder caused by an adverse drug reaction to different types of medication, though it could occur naturally in some neurologic disorders like Huntington Disease.⁸ Akathisia from an adverse drug reaction is a neurological condition where the chemical action in the body attacks healthy functions of the nervous system and diminishes a person’s control over their mental and emotional processes.⁹ This is the movement disorder that occurs from antidepressant usage and antidepressant withdrawal that can induce suicidality.¹⁰

⁶According to ScienceDirect, “Iatrogenesis is defined as any injury or illness that occurs as a result of medical care.” See “Iatrogenesis - an Overview | ScienceDirect Topics,” ScienceDirect, accessed August 23, 2025, <https://www.sciencedirect.com/topics/medicine-and-dentistry/iatrogenesis>.

⁷“Suicidality,” Anderson University, July 29, 2020, <https://anderson.edu/student-life/counseling/suicidality/>

⁸This adverse drug reaction is not limited to psychotropic drugs, but also has been experienced with channel blockers, anti-vertigo, and sedatives used in anesthesia, etc.

⁹Daniel Berger, *Suicidal Ideation: A Biblical Perspective for Counselors* (Alethia International Publications, 2021), 39.

¹⁰“Akathisia: What It Is, Symptoms, Causes & Treatment,” Cleveland Clinic, accessed July 1, 2025, <https://my.clevelandclinic.org/health/diseases/23954-akathisia>.

Cohort Study – Researchers who are conducting a cohort study typically follow a specific group or groups of people over an extended period of time to measure the effects of specific environments, therapies, medications, etc. This can be achieved by studying them in their future endeavors, but it can also be accomplished by examining their past to gain insight into why they are experiencing what they are currently experiencing.

Population Study – Researchers who conduct a population study track statistics and trends of a large sample of a population over time to understand trends within their behavior.

Systematic Review – Researchers who conduct a systematic review are attempting to summarize all the individual research studies on a given topic to synthesize and understand trends across data.

Systematic Umbrella Review – Researchers who are conducting a systematic umbrella review are attempting to synthesize all the individual systematic reviews that have been done.

Meta-Analysis – Researchers who are conducting a meta-analysis draw research from multiple independent studies, where the researcher uses various statistical techniques to understand the specific mathematical outcomes of those studies. This helps researchers have greater precision in understanding the statistics of the research conducted so they can know if there was a significant effect or not. Alongside systematic reviews, meta-analyses are generally considered the gold standard of research.

A BRIEF HISTORY OF ANTIDEPRESSANT MEDICATION

Before looking at the evidence of antidepressants increasing the risk of suicide, it is essential to understand how psychiatrists and the culture at large think about antidepressants and how they work within the brain. In the 1950s, Swiss Psychiatrist Roland Kuhn advertised the notion that an antidepressant drug called Imipramine had antidepressant effects due to targeting the underlying

biological mechanism of depression.¹¹ This was done despite the lack of evidence for Imipramine treating a verifiable biological disease, yet psychiatrists took the opportunity to capitalize on this notion.

From this point forward, the discipline of psychiatry shifted from a drug-centered model of psychotropic medication to a disease-centered model of psychotropic medication. That is, before Imipramine, drugs were advertised by the effect they had on a person. Under the disease-centered approach, drugs began to be advertised by suggesting they help treat an underlying biological condition. This shift occurred in the larger context of psychiatry losing its credibility as a legitimate medical science, and this strategic move (among other new methods of treatment like Electroconvulsive Therapy) placed the profession back into the medical conversation.¹² On this topic, prominent psychiatrist Joanna Moncrieff asserts:

A crude and often implicit drug-centred model of drug action that existed up until that time—the idea that drugs cause general changes in arousal, emotion and mental activity—was supplanted by the disease-centred model—the idea that drugs target underlying disease or symptom mechanisms. This transformation did not occur because there was evidence to support the truth of the disease-centred view. It came about because psychiatrists wanted the disease-centred model to be true, and that coloured the way they interpreted what they were seeing when they gave their patients the new drugs. The disease-centred model was established so quickly and so comprehensively that people soon forgot there was any other way to think about psychiatric drugs.¹³

The disease-centered model made way for the chemical imbalance theory of depression to begin formulation in the 1960s, which, over time, led to the hypothesis that an imbalance in serotonin levels in the brain can cause depression. Moncrieff states, “By the 1970s, the idea that depression could be the manifest

¹¹ Joanna Moncrieff and Chris van Tulleken, *Chemically Imbalanced: The Making and Unmaking of the Serotonin Myth* (Flint, 2025), 76–77.

¹² Edward Shorter, *A History of Psychiatry: From the Era of the Asylum to the Age of Prozac* (Hoboken, NJ: John Wiley & Sons, Inc., 1997), 260–261.

¹³ Shorter, *A History of Psychiatry*, 88.

result of an imbalance of brain chemicals was firmly established.”¹⁴ The Selective Serotonin Reuptake Inhibitor (SSRI) called Prozac exploded onto the scene in 1988 with the wholesale promotion to the general public that this drug treats a chemical imbalance.

Pharmaceutical companies received great help from Robert Spitzer, who, in 1980 changed the criteria for mental health diagnoses to reflect that of a disease-centered approach to mental health disorders in the third edition of *The Diagnostic and Statistical Manual of Mental Disorders* (DSM-III) original hypothesis that antidepressant medication treats an underlying illness was never verified biologically.¹⁵ The current edition of the DSM (called the DSM-5-TR) was published in 2022, and the authors do not give a clear biological etiology for any depressive disorder listed.¹⁶ In fact, they write: “No laboratory test has yielded results of sufficient sensitivity and specificity to be used as a diagnostic tool for [Major Depressive Disorder].”¹⁷ Yet, antidepressant medication is still heavily funded by pharmaceutical companies via advertisements directly to consumers, physicians, and lobbying organizations. Antidepressant medication revenue has only increased since the creation of Prozac in the 1980s, and the industry is estimated to make 22.13 billion dollars in revenue in 2025 alone.¹⁸

The chemical imbalance theory is estimated to be believed by more than 80% of the general public today, yet psychiatrists have only understood their effects (and the effects of psychotropic medication in general) on suicidal behavior for the past 20 years.¹⁹ Written in 2010 in *Pharmaceuticals*, medical doctors write, “Research on the possible relationship between pharmacotherapy and suicidal behavior was virtually unknown until a decade ago.”²⁰ This is problematic given the

¹⁴ Shorter, *A History of Psychiatry*, 97.

¹⁵ Daniel Berger, *Mental Illness: The Necessity for Faith and Authority*, vol. 1 (Alethia International Publications, 2016), 73–84.

¹⁶ The “TR” stands for “Text Revision”; *Diagnostic and Statistical Manual of Mental Disorders Text Revision*, fifth edition (American Psychiatric Association, 2022), 187.

¹⁷ *Diagnostic and Statistical Manual of Mental Disorders*, 187.

¹⁸ “Antidepressant Market Size, Forecast, Trends Report & Share 2030,” June 30, 2025, <https://www.mordorintelligence.com/industry-reports/antidepressants-market>.

¹⁹ Joanna Moncrieff et al., “The Serotonin Theory of Depression: A Systematic Umbrella Review of the Evidence,” *Molecular Psychiatry* 28, no. 8 (2023): 3243–56, <https://doi.org/10.1038/s41380-022-01661-0>.

²⁰ Maurizio Pompili et al., “Antidepressants and Suicide Risk: A Comprehensive Overview,” *Pharmaceuticals* 3, no. 9 (2010): 2861–83, <https://doi.org/10.3390/ph3092861>.

wholesale adoption of this theory and the administration of antidepressant drugs to millions of people over the years. Moncrieff argues, “[Psychiatrists] convinced themselves the drugs were effective long before there were proper clinical trials to test this supposition.”²¹ Typically, medical professionals attempt to find a verifiable pathology first, and once a known disease is identified, medication is then created to combat the disease. In the case of antidepressants, medication was developed and promoted before understanding an objective way to test for pathology, let alone an understanding of actual pathology itself. This rush and lack of detailed care from psychiatrists has led to the overprescribing of a medication that has a low efficacy rate and increases the risk of suicidality.

THE EFFICACY OF ANTIDEPRESSANTS

The most extensive study ever done on the effectiveness of antidepressants was conducted in 2022. In this systematic umbrella review published in *World Psychiatry*, researchers studied over 650,000 people from 2014 to 2021 and found that antidepressants were effective for about 50% of people. This is about 10–15% higher than the efficacy rate for a placebo. The researchers state:

After more than half a century of research, thousands of RCTs [randomized control trials] and millions of invested funds, the effect sizes of psychotherapies and pharmacotherapies for mental disorders are limited, suggesting a ceiling effect for treatment research as presently conducted. A paradigm shift in research seems to be required to achieve further progress.²²

The literature is clear that antidepressants are only slightly more effective than a placebo, but they carry side effects such as sexual dysfunction, emotional blunting, and akathisia, which outweigh the side effects of placebos. Given this data, the disadvantages seem to outweigh the advantages for some medical professionals to prescribe them with confidence.²³ However, medical professionals should

²¹ Moncrieff, *Chemically Imbalanced*, 80.

²² Falk Leichsenring et al., “The Efficacy of Psychotherapies and Pharmacotherapies for Mental Disorders in Adults: An Umbrella Review and Meta-analytic Evaluation of Recent Meta-analyses,” *World Psychiatry* 21, no. 1 (2022): 133–45, <https://doi.org/10.1002/wps.20941>.

²³ Irving Kirsch, *The Emperor’s New Drugs: Exploding the Antidepressant Myth* (Basic Books, 2010), 7–22.

expect that antidepressant medication has a limited effect, given that the drug is not treating any clear biological disease or chemical imbalance. Joana Moncrieff conducted what is arguably the most viewed psychiatric journal in history, which examined over 160,000 people across 17 different studies. The evidence from her article demonstrates that the chemical imbalance theory of serotonin is unfounded scientifically. She writes in *Molecular Psychiatry*:

The main areas of serotonin research provide no consistent evidence of there being an association between serotonin and depression, and no support for the hypothesis that depression is caused by lowered serotonin activity or concentrations. Some evidence was consistent with the possibility that long-term antidepressant use reduces serotonin concentration.²⁴

The chemical imbalance theory is a predominant example of secularists conflating the inner man and the outer man and treating them as if they were the same entity. The results are low efficacy rates and iatrogenesis.

LIMITATIONS IN RESEARCH, FINANCIAL CONFLICTS OF INTEREST, AND PUBLICATION BIAS

The current assumption among medical professionals is that antidepressants rarely induce suicidality.²⁵ However, the data is likely not entirely accurate, given that people who are overtly suicidal are not included in empirical research. On the difficulty of obtaining accurate statistics in studies pertaining to people who are suicidal, researchers in *The British Medical Journal* write:

Drug safety can be assessed through meta-analyses of trials reporting adverse outcomes, but in the case of antidepressants and suicide or attempted suicide these trials tend to be short term and generally exclude patients with any major suicide risk or with physical or psychiatric comorbidity [multiple physical or mental health diagnoses]. Indication bias is the main concern with observational

²⁴ Moncrieff, "The Serotonin Theory of Depression."

²⁵ Moncrieff, *Chemically Imbalanced*, 185.

studies assessing drug safety, which occurs when patients are prescribed drugs for a condition that is itself associated with the risk of the adverse outcome.²⁶

If this is true, then medical professionals do not have a clear understanding of how antidepressants relate to suicidality, and it can be assumed that the data is more troubling than what is portrayed.

The research also consistently demonstrates publication bias and financial conflicts of interest in studies on antidepressants. Meaning, published studies conducted by researchers receiving financial compensation from pharmaceutical companies generally report more positive findings (fewer side effects, more efficacious) than those of researchers who do not have financial ties to pharmaceutical companies. This is evident, for example, when Robert F. Kennedy Jr. called for an investigation and review in 2025 regarding the usage of antidepressants in America after sharing his concerns that SSRIs are dangerous to use long-term and carry significant side effects.²⁷ In response, six of the most well-respected organizations in psychiatry came together and published a statement defending antidepressant medication as safe to use, carrying minimal side effects.²⁸

This article is dangerously deceptive for numerous reasons. First, the only studies that the organizations cite are short-term clinical studies. The real-world median usage of SSRI medication in 5 years, yet, according to Michael Hengartner, there are only 6 studies ever conducted that examined the efficacy of SSRIs past 6 months.²⁹ There are very few long-term studies for antidepressant usage past 12 weeks because pharmaceutical companies are generally sponsoring the studies, and they have no interest in conducting long-term studies.³⁰ Therefore, telling the

²⁶ C. Coupland et al., “Antidepressant Use and Risk of Suicide and Attempted Suicide or Self Harm in People Aged 20 to 64: Cohort Study Using a Primary Care Database,” *British Medical Journal*, 350, no. 32 (February 18, 2015): h517–h517, <https://doi.org/10.1136/bmj.h517>.

²⁷ Nathan Howard, “RFK Jr. Thrusts Antidepressants into the Spotlight — Unnecessarily, Advocates Say,” NBC News, February 21, 2025, <https://www.nbcnews.com/health/health-news/rfk-jr-ssri-antidepressants-children-doctors-risks-studies-rcna192722>.

²⁸ <https://www.psychiatry.org/news-room/news-releases/joint-statement-on-federal-concerns-about-psycho>

²⁹ Michale P. Hengartner, *Evidence-Based Antidepressant Prescription, Overmedicalisation, Flawed Research, and Conflicts of Interest* (Cham, CH: Palgrave Macmillan, 2022), 30-31.

³⁰ Andrea Fagiolini, Professor of Psychiatry at the University of Siena School of Medicine, Chairman of the Department of Mental Health at the University of Siena, interview by author,

general public that antidepressants are safe and pointing to literature that does not reflect real-world usage is invalid at best and deceptive at worst. Second, the six organizations reference a 1995 article asserting that antidepressants are rarely found in toxicology reports of suicide victims. Yet, since 1995, multiple high-quality studies have shown that antidepressants are among the medications most frequently associated with completed suicide, as will be discussed later in this paper. Additionally, all 6 of the organizations that created the statement assuring antidepressants are safe and effective have direct ties to the pharmaceutical industry.³¹

The relationship between the pharmaceutical industry and the mental health industry at large is alarming. Nearly sixty percent of the physicians involved in the DSM-5-TR task force have ties to the pharmaceutical industry.³² On this topic, psychiatrist Giovanni Fava asserts, “The increasing influence of the pharmaceutical industry on psychiatric research and practice is leading to an intellectual and clinical crisis.”³³ Fava wrote these words in 2009, yet this crisis has not been resolved since then. A meta-analysis published in 2021 in *The Journal*

Riverside video software, November 20, 2025.

³¹ On financial conflicts of interest (fCOI) with The American Psychiatric Association, see Lauren C Davis et al., “Undisclosed Financial Conflicts of Interest in DSM-5-TR: Cross Sectional Analysis,” *British Medical Journal*, January 10, 2024, e076902, <https://doi.org/10.1136/bmj-2023-076902>. On fCOI with The American Academy of Child and Adolescent Psychiatry, see the sponsors of their annual report in which they acknowledge their ongoing supporters, many of whom are companies that create SSRI medication: “AACAP Research Committee Annual Report,” American Academy of Child and Adolescent Psychiatry, 2025, https://www.aacap.org/App_Themes/AACAP/Docs/research/2025_AACAP_Research_Cmte_AR.pdf. On fCOI with American Society for Clinical Psychopharmacology, see “ASCP Annual Meeting - American Society of Clinical Psychopharmacology,” American Society of Clinical Psychopharmacology, 2025, <https://ascpp.org/ascp-meetings/ascp-annual-meeting/>. On fCOI with American College of Neuropsychopharmacology, see “Financial Disclosures,” American College of Neuropsychopharmacology, accessed March 21, 2026, <https://acnp.org/about-us/financial-disclosures/>. On fCOI with Society of Biological Psychiatry, see “An Ethical and Financially Transparent Framework for Sponsors and Exhibitors,” Society of Biological Psychiatry, accessed March 21, 2026, <https://sobp.org/wp-content/uploads/2025/04/Ethical-and-Transparent-Framework-for-Industrial-Sponsors-and-Exhibitors.pdf>. On fCOI with National Network of Depression Centers, see “NNDC Annual Conference,” National Network of Depression Centers (blog), accessed March 21, 2026, <https://nndc.org/nndc-annual-conference/>.

³² Lauren C Davis et al., “Undisclosed Financial Conflicts of Interest in DSM-5-TR: Cross Sectional Analysis,” *British Medical Journal*, January 10, 2024, <https://doi.org/10.1136/bmj-2023-076902>.

³³ Giovanni A. Fava, “The Decline of Pharmaceutical Psychiatry and the Increasing Role of Psychological Medicine,” *Psychotherapy and Psychosomatics* 78, no. 4 (2009): 220–27, <https://doi.org/10.1159/000214443>.

of *Epidemiology and Community Health* examined 27 separate studies totaling 1.45 million people and found that published studies that had a financial conflict of interest reported significantly lower rates of correlation with antidepressant medication and suicide.³⁴

The most extensive and most rigorous study on this issue was published in 2016 in *The Journal of Clinical Epidemiology*. In this comprehensive analysis of over 185 meta-analyses, the researchers examined the connections between antidepressant researchers and the pharmaceutical industries. They assert:

Fifty-four meta-analyses (29%) had authors who were employees of the assessed drug manufacturer, and 147 (79%) had some industry link (sponsorship or authors who were industry employees and/or had conflicts of interest). Only 58 meta-analyses (31%) had negative statements in the concluding statement of the abstract. Meta-analyses including an author who were employees of the manufacturer of the assessed drug were 22-fold less likely to have negative statements about the drug than other meta-analyses . . . There is a massive production of meta-analyses of antidepressants for depression authored by or linked to the industry, and they almost never report any caveats about antidepressants in their abstracts. Our findings add a note of caution for meta-analyses with ties to the manufacturers of the assessed products.³⁵

Given our culture's naturalistic worldview, scientific literature is often regarded as the ultimate authority on matters of health. After all, it has brought profound benefits to modern society. Scientific studies can be valuable tools for understanding the effects of medications. However, the corruption of the human heart can distort findings that might otherwise improve lives, turning valuable research into a means of exploiting suffering for financial gain. Antidepressant research is one way in which corrupt human nature and the deceit of the human

³⁴ For more on understanding meta-analyses, see Christian Basile et al., "When a Meta-Analysis Can Be Really Useful?" *International Journal of Cardiology* 436 (October 2025): 133423, <https://doi.org/10.1016/j.ijcard.2025.133423>; Hengartner, *Evidence-Based Antidepressant Prescription*.

³⁵ Shanil Ebrahim et al., "Meta-Analyses with Industry Involvement Are Massively Published and Report No Caveats for Antidepressants," *Journal of Clinical Epidemiology* 70 (February 2016): 155–63, <https://doi.org/10.1016/j.jclinepi.2015.08.021>.

heart is on display, as side effects are underreported, and positive effects are exaggerated.

Another study in 2019 in *The Journal of Psychiatric Research* reviewed 18 years of research (2000–2017) and found there is a financial interest and publication bias in reporting findings from antidepressant trials, meaning that those who report positive findings (increased efficacy rate, decreased side effects) receive compensation from pharmaceutical industries.³⁶ Given these findings, one should not assume the scientific literature is neutral and objective, or that pharmaceutical companies have clients' best interests in mind.

EVIDENCE OF ANTIDEPRESSANT-INDUCED SUICIDALITY

Empirical research on antidepressants inducing suicidality is compelling.³⁷ Examining the data throughout the years shows a clear trend in increased suicidality. For example, in 2005 a systematic review was conducted in *The British Medical Journal* where researchers sought to examine all randomized controlled trials of SSRIs between 1967 and June 2003.³⁸ After analyzing the data of 87,650 patients, the researchers reported that there was nearly a two-fold increase in suicide when the patients were prescribed antidepressants.³⁹

³⁶ Ahmed Waqas et al., "Conflicts of Interest and Outcomes of Clinical Trials of Antidepressants: An 18-Year Retrospective Study," *Journal of Psychiatric Research* 116 (September 2019): 83–87, <https://doi.org/10.1016/j.jpsychires.2019.05.029>.

³⁷ Antidepressants are not the only drug to increase suicidality. For example, the largest study ever conducted on the correlation between sedative use and suicide can be accessed in a journal titled *European Psychiatry*. In this cohort study, researchers examined nearly 6.5 million individuals in Denmark from 1995 to 2018 and found that benzodiazepine use (as well as non-benzodiazepine sedatives) correlated with a 140% increase in suicide risk for men and a 320% increase in suicide risk for women. See, N. Høier et al., "The Association between Benzodiazepine and Non-Benzodiazepine and Suicide: A Nationwide Cohort Study," *European Psychiatry* 65, no. S1 (2022): S181–S181, <https://doi.org/10.1192/j.eurpsy.2022.478>.

³⁸ For more on understanding systematic reviews, see EunJin Ahn and Hyun Kang, "Introduction to Systematic Review and Meta-Analysis," *Korean Journal of Anesthesiology* 71, no. 2 (2018): 103–12, <https://doi.org/10.4097/kjae.2018.71.2.103>.

³⁹ Dean Fergusson et al., "Association between Suicide Attempts and Selective Serotonin Reuptake Inhibitors: Systematic Review of Randomised Controlled Trials," *British Medical Journal*, 330, no. 7488 (February 19, 2005): 396, <https://doi.org/10.1136/bmj.330.7488.396>.

In 2006, a population study conducted in Ontario was published in *The American Journal of Psychiatry*, where researchers examined over 1,300 suicides of people aged 66 and older and found a nearly five-fold increased risk of suicide within the first month of SSRI therapy in comparison to other antidepressant types, and violent suicides were consistently more common with SSRI therapy.⁴⁰

In 2015, a cohort study was published in *The British Medical Journal*, where researchers sought to examine over 87,000 people in the United Kingdom diagnosed with depression from ages 20–64.⁴¹ They found a nearly twofold increase in suicide when the patient was given antidepressant medication in comparison to a placebo.⁴²

In 2021, a meta-analysis was published in *The Journal of Epidemiology and Community Health*, where researchers examined 27 separate studies totaling 1.45 million people. The authors of the study conclude that antidepressants correlate with higher levels of suicide. Specifically, they write, “Exposure to new-generation antidepressants is associated with higher suicide risk in adult routine-care patients with depression and other treatment indications. Publication bias and [financial conflicts of interest] likely contribute to systematic underestimation of risk in the published literature.”⁴³ Again, the literature suggests that bias and financial gain have led to the silencing of accurate data regarding antidepressants and suicidality.

In 2022, a systematic review was published in *Frontiers in Psychiatry*, where researchers sought to examine 17 different studies from 1990 to 2021. They concluded that there was a significant increase in suicide in children and adults aged 5–21 when taking antidepressants compared to no antidepressant use.⁴⁴ In

⁴⁰ For more on understanding population studies, see “Population-based Study,” National Cancer Institute, nciAppModulePage, February 2, 2011. <https://www.cancer.gov/publications/dictionaries/cancer-terms/def/population-based-study>; David N. Juurlink et al., “The Risk of Suicide With Selective Serotonin Reuptake Inhibitors in the Elderly,” *American Journal of Psychiatry* 163, no. 5 (May 2006): 813–21, <https://doi.org/10.1176/ajp.2006.163.5.813>.

⁴¹ For more on understanding cohort studies, see David Barrett and Helen Noble, “What Are Cohort Studies?” *Evidence-Based Nursing* 22, no. 4 (2019): 95–96, <https://doi.org/10.1136/ebnurs-2019-103183>.

⁴² Coupland, “Antidepressant Use.”

⁴³ Hengartner, *Evidence-Based Antidepressant Prescription*.

⁴⁴ Kuan Li et al., “Risk of Suicidal Behaviors and Antidepressant Exposure Among Children and Adolescents: A Meta-Analysis of Observational Studies,” *Frontiers in Psychiatry* 13 (May 26, 2022): 880496, <https://doi.org/10.3389/fpsy.2022.880496>.

2021, an umbrella review was published in *The Journal of Youth and Adolescence*, where researchers examined 1,149 different studies in New Zealand. They found there was a significant correlation between antidepressants and an increased risk of suicide in children and teenagers.⁴⁵ According to the Center for Disease Control and Prevention (CDC) and the data from 2023, one in five high school students has strongly considered attempting suicide.⁴⁶

In response to the literature that suggests antidepressants increase suicidality, the FDA has issued a black box warning, which is a serious label that alerts users of the risk of suicidal thoughts when taking the drug. The FDA's black box warning accompanying prescription antidepressants states:

Antidepressants increased the risk of suicidal thinking and behavior (suicidality) in short-term studies in children and adolescents with Major Depressive Disorder (MDD) and other psychiatric disorders. Anyone considering the use of [Drug Name] or any other antidepressant in a child or adolescent must balance this risk with the clinical need. Patients who are started on therapy should be observed closely for clinical worsening, suicidality, or unusual changes in behavior. Families and caregivers should be advised of the need for close observation and communication with the prescriber. [Drug Name] is not approved for use in pediatric patients. The average risk of such events in patients receiving antidepressants was 4%, twice the placebo risk of 2%. No suicides occurred in these trials.⁴⁷

The FDA's data is consistent with that of the other literature, which suggests that antidepressants at least double the risk of suicide. However, as noted previously, the findings are suppressed, and those percentages are likely higher than reported.

⁴⁵ Rebecca Richardson et al., "Risk and Protective Factors of Self-Harm and Suicidality in Adolescents: An Umbrella Review with Meta-Analysis," *Journal of Youth and Adolescence* 53, no. 6 (June 1, 2024): 1301-22, <https://doi.org/10.1007/s10964-024-01969-w>.

⁴⁶ "Suicidal Thoughts & Behavior," CDC, Mental Health, July 16, 2025, <https://www.cdc.gov/mental-health/about-data/suicidal-thoughts-and-behavior.html>.

⁴⁷ Khadijah Booth Watkins, "Illuminating the Black Box: Antidepressants, Youth, and Suicide," Massachusetts General Hospital, October 2024, https://mghcme.org/app/uploads/2024/09/Watkins-Illuminating-the-Black-Box_kbw_2024.pdf.

TOXICOLOGICAL FINDINGS

An important area of research involves toxicological studies of individuals who have completed suicide, examining whether there is a correlation between specific medications and completed suicide. The literature suggests the number one drug associated with suicide is antidepressants themselves. According to researchers in *BMC Pharmacology and Toxicology* and their study of over 100,000 people who committed suicide, antidepressants are one of the top types of drugs found in people's systems after suicide:

We conducted a pharmacovigilance analysis utilizing real-world data from the FAERS database employing the disproportionality method to analyze the 20 drugs exhibiting the highest reported rates of suicidal ideation or self-injurious behavior. Our findings indicate that antidepressants constitute the most reported medication type for adverse effects associated with suicidal ideation or self-injurious behavior.⁴⁸

This is a remarkable statement that brings into question the efficacy of antidepressant medication in general. Other toxicological studies show with accuracy when people are most at risk of exhibiting suicidal tendencies when using antidepressants. For example, a Swedish nationwide study in *The European Journal of Clinical Pharmacology*, which examined almost 10,000 people postmortem, concluded a nearly fourfold risk of violent suicide in the early stages of antidepressant treatment.⁴⁹

Peter Breggin is a well-known psychiatrist and former consultant of the National Institute of Mental Health (NIMH). On the reality of antidepressants inducing suicide, he writes, "Since antidepressants are now the drugs most commonly implicated in successful suicides, it would seem far more appropriate

⁴⁸ Wen-long Xie et al., "An Exploratory Study Evaluating the 20 Medications Most Commonly Associated with Suicidal Ideation and Self-Injurious Behavior in the FAERS Database," *BMC Pharmacology and Toxicology* 26, no. 1 (January, 2025): 24, <https://doi.org/10.1186/s40360-025-00858-7>.

⁴⁹ Jonas Forsman et al., "Selective Serotonin Re-Uptake Inhibitors and the Risk of Violent Suicide: A Nationwide Postmortem Study," *European Journal of Clinical Pharmacology* 75, no. 3 (March, 2019): 393–400, <https://doi.org/10.1007/s00228-018-2586-2>.

to designate them as ‘suicide drugs’ rather than anti-suicide drugs. Yet psychiatrists persist in giving them to depressed patients who are suicidal.”⁵⁰ Breggin said this in 1991. One might think there may have been advancements in the drug side effects since then; after all, that was three decades ago. However, *The Journal of Clinical Toxicology* shows us that there hasn’t been an improvement. Here is what researchers conclude regarding the prevalence of antidepressants found in the body after successful suicide attempts from 2000 to 2020 in the US:

Among individuals 13 years and older, there were 744,853 suspected suicides and nonfatal suicide attempts involving antidepressants as a first-ranked substance reported to PCCs from 2000 through 2020, averaging 35,469 cases annually . . . Regardless of causality, which this study cannot assess because of its design, our findings clearly show that antidepressants are commonly involved in suspected suicides and nonfatal suicide attempts.⁵¹

Breggin’s statement in 1991 was issued after reflecting on antidepressant medication since the first wave of antidepressants in the 1950s and the availability of the first SSRI (Prozac) in 1988. His conclusion in 1991, after reflecting on 30 years of history, is that antidepressants can induce suicide. From 1991 to the present day, decades of toxicological reports, meta-analyses, and systematic reviews conclude the same reality. *The Journal of Clinical Toxicology* is accurate in stating that these findings do not indicate causality; however, these findings show a correlation between antidepressant medication and suicide and reveal that antidepressants increase rather than lower the risk of suicide.

To summarize:

- 1) The most extensive research available shows that antidepressant medications do not balance a chemical imbalance in the brain or treat any pathological disease.
- 2) The FDA has issued a black-box warning for antidepressants that alerts patients of the risk of serious side effects such as suicidal ideation.

⁵⁰ Peter Breggin, *Toxic Psychiatry* (New York, NY: St Martin’s Press, 1991), 158.

⁵¹ Matilda Francis et al., “Suspected Suicides and Nonfatal Suicide Attempts Involving Antidepressants Reported to United States Poison Control Centers, 2000–2020,” *Clinical Toxicology* 60, no. 7 (July, 2022): 818–26, <https://doi.org/10.1080/15563650.2022.2041202>.

- 3) Leading medical journals have published numerous meta-analyses and systematic reviews that span decades, and they consistently show an increased risk of suicide associated with antidepressant use.
- 4) Decades of empirical research reveal that positive antidepressant findings (higher efficacy rates, lower side effects) have been influenced by publication bias and financial conflicts of interest.
- 5) Toxicological studies have repeatedly shown that antidepressants are the most common class of drugs found in the systems of individuals who have completed suicide.

In general, medication can be a valuable tool in alleviating suffering. However, practicing biblical counselors need to think carefully about whether antidepressant medication is a common grace. Given the research not only on antidepressants and their relationship to suicidality, but also aggression and agitation, sexual dysfunction, brain fog, mania, insomnia, pregnancy complications, emotional blunting, memory issues, significant withdrawal effects, and more, it would be wise for biblical counselors to rethink their position on this matter.⁵² While antidepressants may reduce symptoms for some, the research demonstrates that it is common for antidepressants to have adverse effects, sometimes even producing the very symptoms they were meant to prevent.

UNDERSTANDING ANTIDEPRESSANT-INDUCED SUICIDALITY BIBLICALLY

A Christian approach to helping someone who is suicidal should differ significantly from the way the culture addresses suicide. It may be argued that the predominant secular approach—administering antidepressant medication under the assumption that it addresses an underlying biological condition—has contributed to the increase in suicide rates. Biblically, this should be expected.

⁵² For more on common side effects of antidepressant medications, see Moncrieff, *Chemically Imbalanced*, 178–196. There is also a significant correlation between antidepressant usage and homicidal behavior. For more information on this, see A Midwestern Doctor, “The Decades of Evidence SSRI Antidepressants Cause Mass Shootings,” *The Forgotten Side of Medicine*, September 4, 2024, <https://www.midwesterndoctor.com/p/the-evidence-ssri-antidepressants>.

Secularists are conflating the inner man and the outer man and attempting to treat the inner man with medication. Scripture provides the lens through which Christians are called to view the world, and its testimony is clear: human beings consist of both a soul and a body. While the body and soul are deeply intertwined, they are not the same entity. In other words, the brain and the mind are not the same thing. According to Scripture, they are distinct, and it is the inner man that ultimately drives our behavior (2 Corinthians 4:16; 5:8, James 4:1–3, Proverbs 4:23–27, Luke 6:45). The body can increase pressure on the soul, tempting it toward deep despair and anguish (Job 7:4–5, Lamentations 3:16–18, Psalm 38:3–8). At the same time, the body can help relieve the soul’s suffering, providing support that allows the mind to think with greater clarity. (Acts 9:18–19; 37:33–36, Judges 15:18–19, 1 Kings 19:3–8, Luke 8:54–55, Psalm 23:1–3).

From an evaluation of Elijah’s story, for example, it is evident that circumstantial pressure (such as being hunted for one’s life) and physical suffering (like running for miles without food, water, or rest) can create the perfect recipe for hopelessness, which can lead to suicidal thoughts (1 Kings 19:1–4). It is also evident that when physical strain is relieved and the body is given rest, the inner person faces less temptation toward despair and gains renewed strength for daily life (1 Kings 19:5–8). Scripture is dynamic in this way and avoids giving a monocausal approach to despair. Yet, under the dominant evolutionary model of psychiatry, doctors often equate the mind with the brain, treating the inner person as though it were merely the outer person. Beliefs shape practice, and since SSRI’s hit the market, this belief system has led to the overmedication of suffering people in an effort to reduce depression and suicide.⁵³

AKATHISIA

Akathisia is a movement disorder caused by an adverse drug reaction to different types of medication.⁵⁴ It is a neurological condition caused by side effects of various kinds of medications, where the chemical action in the body attacks healthy functions of the nervous system and diminishes a person’s control

⁵³ Vita Brisnik et al., “Deprescribing of antidepressants: development of indicators of high-risk and overprescribing using RAND/UCLA Appropriateness Method”, *BMC Medicine* 22, no. 193 (May, 2024), <https://doi.org/10.1186/s12916-024-03397-w>.

⁵⁴ This adverse drug reaction is not limited to psychotropic drugs, but also has been experienced with channel blockers, anti-vertigo, sedatives used in anesthesia, etc.

over their mental and emotional processes.⁵⁵ This is the movement disorder that occurs from antidepressant usage and antidepressant withdrawal that can induce suicidality.⁵⁶

In Greek, the word akathisia literally means “inability to sit” or “not to sit”. Symptoms of akathisia include restlessness, impulsivity, cognitive impairment, lack of self-control, panic attacks, terror, aggression, agitation, hopelessness, despair, insomnia, and more.⁵⁷ Those who experience this side effect often describe sensations such as airplane crashes going off in their heads, uncontrollable urges to jump or pace, feeling repeatedly as if they are being set on fire, and chronic insomnia.⁵⁸ A common testimony among patients is an overwhelming feeling of inner agony. While the severity of akathisia varies from person to person, people have reported that in severe cases, enduring the drug-induced torment sounds more agonizing than death itself.⁵⁹

Suicide induced by antidepressants is often more violent, where those under distress resort to hanging, drowning, shooting, jumping from high heights, and other highly lethal means.⁶⁰ Sadly, akathisia is a condition that is often misclassified or underreported in scientific literature.⁶¹ One study in *Behavioural Pharmacology* found that akathisia was a side effect in about 25% of the patients studied who were prescribed antidepressant medication, suggesting that akathisia is not a rare side effect as some explain it to be.⁶²

How should biblical counselors and counselees understand akathisia biblically? The body cannot cause someone to commit suicide. According to

⁵⁵ Berger, *Suicidal Ideation*, 39.

⁵⁶ “Akathisia: What It Is, Symptoms, Causes & Treatment,” Cleveland Clinic, accessed July 1, 2025, <https://my.clevelandclinic.org/health/diseases/23954-akathisia>.

⁵⁷ “Akathisia: What It Is,” Cleveland Clinic.

⁵⁸ “Patient Experiences – Akathisia Alliance,” Akathisia Alliance, accessed June 23, 2025, <https://akathisiaalliance.org/patient-experiences/>.

⁵⁹ There are numerous Facebook groups where people share their difficulties and bizarre side effects from SSRI medication. For example, see the Facebook group titled “Managing SSRI Withdrawal.”

⁶⁰ Forsman et al., “Selective Serotonin Re-Uptake Inhibitors.”

⁶¹ Tarang Sharma et al., “Suicidality and Aggression during Antidepressant Treatment: Systematic Review and Meta-Analyses Based on Clinical Study Reports,” *British Medical Journal*, January 27, 2016, i65, <https://doi.org/10.1136/bmj.i65>.

⁶² Ismail Akgoz et al., “Evaluation of Akathisia in Patients Receiving Selective Serotonin Reuptake Inhibitors/Serotonin and Noradrenaline Reuptake Inhibitors,” *Behavioural Pharmacology* 35, no. 8 (December 2024): 460–63, <https://doi.org/10.1097/FBP.0000000000000797>.

Scripture, the will belongs to the domain of the inner person—not the outer (Proverbs 16:9; Psalm 119:112, Romans 7:18–22). Though the body and the soul are intertwined in a complex way, Christians must not treat as one what God has clearly distinguished as separate entities. In cases such as akathisia, the body creates an agonizing environment for the soul to inhabit. This physical distress can make the soul more vulnerable and prone to despair, where the one suffering desires in their heart to escape through death.

People act according to their desires, and tragically, antidepressants can produce such severe effects in the body that the sufferer may genuinely desire to end their life rather than endure the intense physical torment. The same principle applies to the cancer patient tempted toward depression. Chemotherapy and prolonged physical suffering may pressure the soul toward despair, but the cancer itself does not cause someone to despair in their heart. This is why one person can endure the suffering of cancer while rejoicing in God, while another may long for life to end. Each person is unique with their own combination of heart themes. The condition of akathisia reveals outwardly the deceit and despair that are already manifested in their inner man. In this way, counselors gain a glimpse of someone's heart in its raw condition, without the body's help to filter and restrain their fallen desires and hopes.

Though akathisia is not seen explicitly in the Bible, there are various instances of people in Scripture experiencing severe physical symptoms that make them loathe their own lives (2 Corinthians 1:8–9, Lamentations 3:1–16, Jonah 4:5–8). From a simple observation of Scripture, it is clear that intense physical suffering can lead to deep inner agony and even suicidal thoughts. Yet, it is also clear from Scripture that people can have a wide range of responses to physical suffering. Jonah wanted his life to end (Jonah 4:5–8) while Jeremiah turned his mind toward the attributes of God and found relief in the midst of distress (Lamentations 3:22–24). This contrast demonstrates that, contrary to the biological reductionism that is evident in psychiatry, the body does not determine whether someone chooses to end their life. Instead, physical suffering powerfully influences the soul, drawing it toward agony—just as we see in cases of akathisia. Ultimately, the body reveals what is already present in the heart, whether that be despair and deception or hope and trust in God.

When a person takes antidepressant medication and they begin to experience profound side effects, the predominant narrative is that the person's mental illness is worsening when, in reality, the drug action in the body creates physical suffering and influences the person toward thoughts of hopelessness, despair, and inner turmoil. Unfortunately, the common result is an increase in dosage to help reduce the symptoms of the so-called mental illness, which in some instances can lead to the strengthening of the effects of akathisia that induce suicidality.⁶³

IMPLICATIONS FOR BIBLICAL COUNSELING

Biblical counseling literature is lacking on the topic of akathisia and antidepressant-induced suicide. For example, out of more than 1,100 journal articles in the *Journal of Biblical Counseling*, only two articles mention this phenomenon.⁶⁴ Biblical counselors are not legally authorized to provide medical advice regarding starting or stopping antidepressant medication. However, numerous measures can be taken to help family members understand how to properly help a loved one who is dealing with physical suffering that might be contributing to suicidality.

Be Gentle, Gracious, and Patient

Counselors and family members who have a loved one suffering from suicidal thinking and behavior need to be gentle, gracious, and patient. Unless it is an extreme situation, it can be difficult to tell if someone is suffering from the side effects of antidepressant medication simply by observation.⁶⁵ Therefore, the natural posture of the counselor and the family should be to assume this is a suffering issue stemming from someone who is faint-hearted and weak; thus, they

⁶³Lindsey P. Kolisak and Eugene H. Makela, "Selective Serotonin Reuptake Inhibitor-Induced Akathisia," *Journal of the American Pharmacists Association* 49, no. 2 (2009): 28–38, <https://doi.org/10.1331/JAPhA.2009.08083>.

⁶⁴For the two articles that mention akathisia, see Ed Welch, "Medical Treatments for Depressive Symptoms," *Journal of Biblical Counseling* 18, no. 3 (2000); and Benjamin Crawford, "How to Help Counselees with Psychoactive Medications," *The Journal of Biblical Counseling* 28, no. 2 (2014). Though both of these articles mention akathisia, they do not give a full treatment on how to handle this phenomenon. For a biblical counseling resource that does deal with the topic, see Elyse M. Fitzpatrick et al., *Will Medicine Stop the Pain?: Finding God's Healing for Depression, Anxiety, and Other Troubling Emotions* (Chicago, IL: Moody Publishers, 2006).

⁶⁵"For Clinicians," Akathisia Alliance, n.d., accessed August 25, 2025, <https://akathisiaalliance.org/for-clinicians/>. *https://akathisiaalliance.org/for-clinicians/For Clinicians – Akathisia Alliance*.

should encourage and help where needed with much patience (1 Thessalonians 5:14). Counselors need to understand that akathisia is a neurological disorder, therefore, they are counseling someone who is weak in body. If there is evidence of sin, the counselor and family member should gently admonish by speaking the truth in love and walking alongside them (Ephesians 4:15, Galatians 6:1–2, 1 Thessalonians 5:14). Counselors and family members should reject biological reductionism while still affirming the biblical reality that the body has a real influence on behavior.

Be Proactive

Counselors and family members must also take seriously any accusations or statements of self-harm or suicidal plans. Neglecting to do so sends a message that the counselor or family member does not take them seriously; taking them at their word actually gives them hope.⁶⁶ Robert Jones helpfully asserts, “The life-threatening nature of suicidality calls you to amplify your normal attending and relational skills. Don’t minimize the impact of your caring, compassionate presence.”⁶⁷ If a counselee is overtly suicidal, it is best to call 911 so that they might be admitted into a psychiatric hospital. While the environment of a psychiatric hospital is not ideal, the top priority is that the counselee is kept alive. If they are not overtly suicidal, but there is some risk, then the church, while partnering with the family, should create a safety plan to care for the counselee.⁶⁸

⁶⁶ Jay Adams, “Editorial: A Reminder on Suicide,” *The Journal of Biblical Counseling* 5, no. 2 (1981): 1–2.

⁶⁷ Robert Jones, “Biblical Counseling Coalition | Nine Guidelines for Counseling Suicidal People,” Biblical Counseling Coalition, September 9, 2019, <https://www.biblicalcounselingcoalition.org/2019/09/09/nine-guidelines-for-counseling-suicidal-people/>

⁶⁸ Determining the risk of a counselee ending their life can be difficult. If a counselor uses a risk assessment, they should use it with discernment knowing this is a tool that can be helpful but that it is not determinative. For a helpful article on assessing someone who has suicidal desires, see: Aaron Sironi and Mike Emlet, “Evaluating a Person with Suicidal Desires,” *The Journal of Biblical Counseling* 26, no. 2 (2012). For a safety plan that can be implemented in the context of the church, see Kendra Fabel, “A Suicide Care Plan: One Church’s Model,” *The Journal of Biblical Counseling* 36, no. 3 (2022). I do not recommend taking Fabel’s advice in sending the person who is suicidal to a “professional” given that the “professional” is likely counseling out of philosophies that encourage despair. Still, this journal is a helpful tool to see the structures that can be set in place in a church context to help care for someone who is suicidal, and it can be used to stimulate thoughts regarding how to best care for people.

Combine Medication Lists

Counselors need to encourage the counselee to compile a list of every medication they are taking so they can share the list with all doctors involved in their treatment. The counselor or family can even help the counselee do this. The literature suggests that one drug interacting with another drug in the body can create side effects such as akathisia and suicidality. For example, researchers in *The Journal of Internal Medicine* examined over 150,000 middle-aged and older women and found that women taking three or more psychotropic medications at once had over a two-fold increased risk of suicide and unintended overdose death.⁶⁹ It is wise to gather a complete medication list to give to all doctors involved so that they might identify potential drug-drug interactions that contribute to suicidal thoughts. Taking this simple step can bring the person closer to ruling out physical factors that influence suicidal thinking.

Be Aware of Side Effects

In general, counselors and family members need to be aware of common side effects of psychotropic medications. According to *The International Journal of Neuropsychopharmacology* and their data across 81 European psychiatric hospitals from 1993–2014, restlessness, impulsivity, and thoughts and attitudes that are not typically displayed by a person may be warning signs for the onset of suicidal behavior.⁷⁰ Among other questions, some of the first questions a counselor should ask the counselee are whether they are taking medication, what kind of medication they are taking, and the dosage they are taking. Ruling out physical symptoms first before counseling the heart will enable the counselor to give more accurate counsel (Proverbs 18:13). Failure to do this might lead a counselor to be too quick to give admonishment for issues that have been aggravated or escalated by medication.

In cases of counseling, it might be beneficial for the counselor to lessen the load of homework, knowing that the person they are counseling may be suffering

⁶⁹ Carolyn J. Gibson et al., “Long-Term Psychoactive Medications, Polypharmacy, and Risk of Suicide and Unintended Overdose Death Among Midlife and Older Women Veterans,” *Journal of General Internal Medicine* 37, no. 3 (2022): 770–77, <https://doi.org/10.1007/s11606-022-07592-4>.

⁷⁰ Susanne Stübner et al., “Suicidal Ideation and Suicidal Behavior as Rare Adverse Events of Antidepressant Medication: Current Report from the AMSP Multicenter Drug Safety Surveillance Project,” *International Journal of Neuropsychopharmacology* 21, no. 9 (September 1, 2018): 814–21, <https://doi.org/10.1093/ijnp/pyy048>.

from the side effects of medication. Focusing intently on one or two counseling issues can go a long way rather than trying to cover many things that might overwhelm a counselee. During the counseling session, the counselor needs to display compassion, gentleness, and patience, knowing that they may be suffering from cognitive impairment and other adverse reactions to medication.

Go to the Doctor with Them

Counselees who are suicidal might not want to see their general practitioner or their psychiatrist. If a counselor or family member suspects the counselee is suffering from side effects from antidepressant medication, they should be urged to tell their doctor immediately. One way a counselor can gain involvement in the counselee's life and demonstrate advocacy is by accompanying them to the doctor. From there, the counselor can help make the doctor aware of potential adverse drug reactions.

Medication Changes and Proper Tapering

The majority of the literature points to adverse effects like suicidal behavior happening shortly after a medication change, especially regarding antidepressants. The beginning stages of taking an antidepressant come with a lot of physiological changes, as do the beginning stages of discontinuation. The counselor and family must be aware and lovingly monitor the counselee for the first few months on the medication and for the time period after discontinuation. If a counselee's behavior has seemingly worsened shortly after starting the medication, they should consult a medical doctor immediately. Note the words of medical doctors writing in *The Journal of Neuropsychopharmacology* on adverse drug reactions and suicidal thoughts shortly after starting antidepressants. Their study involved nearly 220,000 people across 81 European psychiatric hospitals from 1993–2014. They assert:

It is important to note that the suicidal adverse drug reactions occurred within the first week (in 71% of the cases) or the first 2 weeks (93%) after onset or dosage increase of the imputed antidepressant. This indicates that attention should be paid to possible suicidal ideation and behavior especially at the beginning of antidepressant therapy. . . Most suicidal adverse drug reactions occurred shortly after beginning

antidepressant medication or increasing the dosage. Fifty-nine of the 83 adverse drug reaction cases occurred within the first 7 days (71%), 18 cases between day 7 and 14 (22%), and only 6 afterwards (7%).⁷¹

While it is essential to monitor them if they have started a new medication, it is equally important to keep a close eye on them if they have stopped taking their medication. Tapering quickly off certain medications is dangerous, so they should be encouraged to taper slowly under the direct supervision of a medical doctor who understands how to taper patients off psychotropic medication properly. The withdrawal symptoms will be worse if the counselee has been taking antidepressants for an extended period of time, and the literature suggests slowly tapering over a 12–18 month period.⁷²

Encourage Care for the Body

Vitamin intake, consistent quality sleep, and exercise can help those suffering from depressive and/or suicidal thoughts. Studies show an increase in mood with vitamins like D3 taken at high dosages.⁷³ Unlike antidepressant medication, vitamins have fewer side effects. While this should not be the primary focus of counseling (1 Timothy 4:8), the counselor can encourage the family and the counselee to hold each other accountable in simple ways, such as taking vitamins, which may help them have more energy and a brighter mood.

One systematic review that studied over 128,000 people in *The British Journal of Medicine* shows that exercise over an extended period is 1.5 times more effective than medication in treating depression.⁷⁴ The counselor can encourage the counselee and the family to start small by taking a walk outside once a week, to the glory of God. As this happens, the pressure the body puts on the soul may

⁷¹ Stübner, “Suicidal Ideation and Suicidal Behavior.”

⁷² National Guideline Centre (UK), *Evidence Review: Safe Withdrawal: Medicines Associated with Dependence or Withdrawal Symptoms: Safe Prescribing and Withdrawal Management for Adults: Evidence Review C*, NICE Evidence Reviews Collection, National Institute for Health and Care Excellence, (NICE), (2022), <http://www.ncbi.nlm.nih.gov/books/NBK580676/>

⁷³ Shadi Ghaemi et al., “The Effect of Vitamin D Supplementation on Depression: A Systematic Review and Dose–Response Meta-Analysis of Randomized Controlled Trials,” *Psychological Medicine* 54, no. 15 (November 2024): 3999–4008, <https://doi.org/10.1017/S0033291724001697>.

⁷⁴ Ben Singh et al., “Effectiveness of Physical Activity Interventions for Improving Depression, Anxiety and Distress: An Overview of Systematic Reviews,” *British Journal of Sports Medicine* 57, no. 18 (September, 2023): 1203–9, <https://doi.org/10.1136/bjsports-2022-106195>.

lift, which may help suicidal thinking go away. As any positive bodily habits are encouraged, they should be done under the premise that the body is complexly intertwined with the heart, but that the heart is the ultimate driving force for human behavior, not the body (Proverbs 4:20–27).

Counsel the Soul

The biblical counselor has the unique ability to give what no other secular discipline has been able to provide them with: eternal hope through Jesus Christ. They have a significant opportunity to provide specific hope that leads to joy (Proverbs 12:25; 15:22; 16:24). The counselor should teach biblical anthropology and the truth that, though their body may suffer, their mind can be renewed and transformed (2 Corinthians 3:18, 4:6; Ephesians 4:23; Romans 12:2). The counselor should teach about the reality that even small amounts of faith glorify God, and glorifying Him is the ultimate goal of the Christian life, not symptom-reduction (Matthew 17:20, Mark 9:14–29).⁷⁵ The counselor should teach about the hope that comes from renewed, glorified bodies and a joyful eternity spent with Jesus Christ (1 Corinthians 15:42–44, Isaiah 40:29–31, Romans 8:11, Revelation 21:1–5). The counselor should teach on the attributes and promises of God, which were more than enough for authors of Scripture who endured extreme bodily affliction and inner distress (Psalm 13; 42; 88; 2 Corinthians 4; Lamentations 3).

The counselor should teach on biblical lament and communion with God through prayer which leads to joy, peace, and renewed strength (Philippians 4:4–7, Psalm 13; 34:17–18). The counselor should teach on the bodily suffering of the Lord Jesus Christ, who endured severe physical torment that their sin debt might be wiped away (Isaiah 53:4–5). Through faith in the death of Christ, the counselee has complete access to the grace of God in their trial (Romans 8:32). Counselors must implore the counselee to go to Him in confident prayer for this grace in their weakness (2 Corinthians 12:9, Hebrews 4:15–16). Though there is temptation to make the primary focus the body, regarding antidepressant-induced suicidality, biblical counselors must focus on ministering specific hope to

⁷⁵For an excellent sermon that deals with the necessity of faith while suicidal, see Nicolas Ellen, “Understanding and Dealing with Suicide,” Association of Certified Biblical Counselors, July 15, 2020, accessed August 25, 2025, <https://biblicalcounseling.com/resource-library/conference-messages/understanding-and-dealing-with-suicide/>.

the particular trial the counselee is enduring, knowing that heart transformation happens through trust in Christ.

CONCLUSION

In this paper, I gave a brief history of antidepressant medication. Then, I examined the research on the efficacy of antidepressant medication, financial conflicts of interest and publication bias in the literature, and the evidence for antidepressant medication inducing suicidality. I also reviewed empirical research on toxicology reports of completed suicides and sought to establish how Christians can biblically understand akathisia. Finally, I gave implications for counselors and family members in a counseling context. After a thorough study of the literature, it is evident that antidepressant usage can increase the risk of suicidality through adverse drug reactions such as akathisia; therefore, counselors and family members need to be aware and able to respond with creative care when someone in their life experiences the iatrogenic effects of this medication

THE DANGERS OF ECLECTICISM IN BIBLICAL COUNSELING¹

*Samuel Stephens*²

INTRODUCTION

William James (1842–1910), known by historians as the “father of American psychology,” popularized the American philosophy known as pragmatism. This philosophical outlook deals not so much with the idea of being pragmatic (in the sense of dealing primarily with practical considerations over theoretical ones) as it seeks to reinterpret the enterprise of philosophy altogether. The *search* for truth, which had been the endeavor of philosophers from antiquity is now abandoned for the *construction* of truth based upon relativistic and utilitarian grounds.³ In a 1907 lecture entitled “Pragmatism’s Conception of Truth,” James endeavored to delegitimize *a priori* conceptions of truth and knowledge, and instead couch epistemology exclusively within the realm of the experiential.

Pragmatism, on the other hand, asks its usual question:

“Grant an idea or belief to be true,” it says, “what concrete difference will its being true make in anyone’s actual life? How will the truth be realized? What experience will be different from those which would obtain if the belief were false? What, in short, is the truth’s cash-value in experiential terms?” The moment

¹This essay was originally published in volume 3 of *The Cornerstone Journal of Pastoral Theology and Ministry* by Cornerstone Bible College and Seminary.

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³To the reader it may seem to be an argument based on semantics, but moving from a *search* for truth to a *construction* of truth has major implications in the history of ideas. It will be my contention that such re-imaginings of truth represent “deceptive philosophies” (cf. Colossians 2:8) that should be soundly rejected by the church and have been detrimental to the church’s work regarding soul care.

pragmatism asks this question, it sees the answer: *True ideas are those that we can assimilate, validate, corroborate and verify. False ideas are those we cannot.*⁴

While James may not be a household name to many Christians, he is not alone in embracing this philosophy to the detriment of American society (and by extension Western thought) at large. Both Oliver Wendell Holmes, Jr. (1841–1935) and John Dewey (1859–1952) espoused and embraced the philosophy of pragmatism, which left a lasting mark on American life in the realms of legal jurisprudence and educational theory.⁵ The thread that unites each of these thinkers, and many more besides, is not only an adherence to a morally relativistic epistemology but a commitment to and fascination with modern psychology.⁶

James, Holmes, and Dewey operated mainly outside of the church; however, even as early as the late eighteenth century, liberal theology and secular philosophies imported from Europe began to impact pastors and theologians in America. Many began to drift from biblical and orthodox doctrines, in favor of emphasizing existential “virtue and comfort” as essential aspects of Christian

⁴William James, *Pragmatism: A New Name for Some Old Ways of Thinking* (New York: Longmans, Green, and Co., 1907) as quoted in Louis Menand, *Pragmatism: A Reader* (New York: Vintage, 1997), 115–116. This work is a collection of lectures delivered by James from 1906–1907. He dedicates these lectures to British empiricist, social philosopher and proponent of utilitarianism, John Stuart Mill.

⁵Both Holmes and Dewey are considered key figures during the Progressive Era, which traversed the late nineteenth into the early part of the twentieth century. This period was marked by major social, economic, and political reform and upheaval. Holmes served as an associate justice to the Supreme Court from 1902 until 1932 and is known for championing an approach to legal jurisprudence (a type of judicial pragmatism) that interpreted the Constitution of the United States as a living document that should best be understood and applied with contemporary contexts. Dewey, a psychologist and educational theorist, soundly rejected objective conceptions of truth and instead promoted a type of social-constructivist epistemology where the student would have a hand in bringing meaning through the lens of their own personal investigation and experience. Of special note, Dewey was an avowed humanist and was an original signatory of the Humanist Manifesto (1933). “Humanist Manifesto I,” American Humanist Association, accessed April 21, 2025, <https://americanhumanist.org/what-is-humanism/manifesto1/>.

⁶Metaphysically and theologically, an “open system” refers to a Christian worldview in which Creator and creature maintain their distinctiveness but relate to one another. A closed system is a naturalistic worldview which does not give credence to the former and exalts the latter. The outworkings and shifts from an open to closed system and the impacts of such shifts in the realm of psychology into the modern era can be traced by Paolo Lionni’s work. Paolo Lionni, *The Leipzig Connection: The Systematic Destruction of American Education* (Sheridan, Oregon: Heron Books, 1973).

ministry.⁷ By the dawn of the twentieth century, American intellectuals were flocking to hear German and French psychiatrists give lectures on a new modern psychology. The Progressive Era brought social-scientific insights into the pews and, according to church historian E. Brooks Holifield, “theology finally became therapy” and ushered in a new psychological age for the church.⁸ Now, nearly a quarter of the way into the twenty-first century, one can find that psychological counseling has become ubiquitous not only culturally, but even within the Christian church.⁹ The philosophy, history, and impact of pragmatism is important to know because it provides a necessary backdrop for understanding why counseling psychology is thought of as an exercise in eclecticism. Eclecticism, from the Greek *eklektiko*, meaning “picking out, [or] selecting what appears to be best,” relates to its philosophic parent, pragmatism, in that qualities like truth and morality become peripheral (if not completely disposable) concerns, while the most important considerations deal with personal autonomy, utility, and effectiveness (based on personal perception). In essence, eclecticism provides the rationale for counselors and clients to choose what *they* believe is helpful to them from a broad range of methodologies and theories.¹⁰ With hundreds of psychotherapies to choose from, clients care less about *why* various therapies (each claiming to be scientifically and empirically based) conflict or contradict at crucial points, than *how* the therapy will “work” or “help” meet their needs.¹¹

⁷E. Brooks Holifield, *A History of Pastoral Care in America: From Salvation to Self-Realization* (Eugene, Oregon: Wipf and Stock, 1983), 97.

⁸Holifield, *A History of Pastoral Care*, 193. For an examination of this drift in Protestant denominations see, Samuel Stephens, *The Psychological Anthropology of Wayne Edward Oates: A Downgrade from the Theological to the Therapeutic* (Eugene, Oregon: Wipf and Stock, 2020), and T. Dale Johnson, Jr., *The Professionalization of Pastoral Care: The SBC's Journey from Pastoral Theology to Counseling Psychology* (Eugene, Oregon: Wipf and Stock, 2020).

⁹While modern psychology took a foothold in the West in the twentieth century, shame-based societies in the East have been slower to adopt counseling due to cultural stigmas surrounding “mental health” problems. This, however, is changing as counseling theories are being imported into many countries around the world via international students coming to study in the United States and the advocacy from globally influential groups such as the World Health Organization (WHO) which produces the International Classification of Diseases (ICD). While the ICD-11 covers a comprehensive list of known diseases, it also covers a wide-ranging list of behavioral “mental, behavioral, and neurodevelopmental disorders” that find a counterpart in the DSM. See World Health Organization, “International Classification of Diseases,” 11th revision, accessed April 21, 2025, <https://icd.who.int/browse/2025-01/mms/en#334423054>.

¹⁰“Eclectic.” Merriam-Webster.com Dictionary, Merriam-Webster, accessed April 21, 2025, <https://www.merriamwebster.com/dictionary/eclectic>. See also, Abigail Shrier, *Bad Therapy: Why the Kid's Aren't Growing Up* (New York: Sentinel, 2024).

¹¹David Powlison noted that it is actually more accurate to refer to the field of psychology as the

Additionally, secular and state-licensed counselors who make a living marketing and promoting therapeutic services to an ever-growing clientele find that it is more advantageous to provide a broad selection of options rather than limit services, which may restrict their clientele. Yes, one can still find counselors who are credentialed to utilize particular therapies (e.g., Cognitive Behavioral Therapy, Eye Movement and Desensitization and Reprocessing, etc.), but in many cases, these are promoted in conjunction with other therapeutic services and marketed as “holistic” care.¹²

Eclecticism does not represent a systematic, standardized approach to counseling. Due to the fact that there is a lack of a cohesive worldview that unites various psychotherapeutic practices, tools, methods, and theories which are inherently divergent in their original contexts, one would wonder why Christian counselors would consider approaching counseling in a similar way as the secularist.¹³ Sadly, many Christians are more influenced by pragmatic and eclectic thinking than we would like to admit. So, this poses the key question this article will seek to answer: What are the dangers of eclecticism in counseling for the Christian, and why should we avoid being eclectic in favor of adhering to a biblical approach in our counseling theory and method? I contend that eclecticism poses a grave threat to the work of the biblical counselor and to the absolute truth claims of the Christian faith in that it functionally assumes that psychology is morally neutral, it results in a religious syncretism, and it diminishes the Christian gospel.¹⁴ I will demonstrate this by outlining these three dangers

“psychologies” due to the fragmented and conflicting counseling theories that it represents, thus revealing a conundrum and irony in the conception of the psychologies as “social science.” See David Powlison, “Cure of Souls (and the Modern Psychotherapies),” in the *Journal of Biblical Counseling* 25, no. 2 (2007): 5–36.

¹²The term “holistic” is widely used among many within the current clinically informed biblical counseling (CIBC)/neo-integrationist movement. While it is difficult to pin down one clear definition, typically it describes the allowance for using a plethora of eclectic methodologies to affect changes in different, yet related, areas at once. A great example of this can be found in the philosophy of the Christian counseling group Metroplex Wellness and Counseling which “offers a holistic approach to mental health treatment in that we combine modalities that address the interconnected spheres of the spiritual, mental, emotional and physical needs of those we are privileged to serve.” Such wide-ranging modalities include Enneagram coaching, brain gauge cognitive assessments, use of a Zyto scanner, and micro current neurofeedback. <https://www.metroplexcounseling.com/philosophy/>.

¹³See Gerald Corey, *Theory and Practice of Counseling and Psychotherapy*, 11th edition (Boston: Cengage Learning, 2016).

¹⁴Additionally, it deemphasizes Scriptural categories of thinking and living and ignores vital

of eclecticism in counseling in the hopes of encouraging Christians to hold fast to their confession and what they have learned from the sacred and sufficient Scriptures (2 Timothy 3:14–17; Hebrews 10:23–25).

ASSUMING MORAL NEUTRALITY

The first danger of eclecticism is the belief that counseling systems and methods are (or at least can be) morally neutral and thus “fair game” in terms of adoption or integration. The idea here is that even though a particular theory or method may be structured or intended to promote some ungodly goal by some ungodly means, such theories and methods can be “redeemed” when the practitioner who wields them is himself godly. This has been the argument of integrationists since the early days of that project in the mid-twentieth century. While “plundering the Egyptians” sounds like a legitimate way to make use of pre-existing tools and concepts, the assumption of moral neutrality is wrong-headed and naive.

One model that has helped me think through the feasibility of eclecticism, in the form of counseling integration, is a proposal from a biblical counselor for what a responsible model for integration could look like. Douglas Bookman’s proposal seeks to answer the question:

How can the individual who is committed to the Bible as the Word of God, and who is determined to help people as effectively as possible (and who suspects that there is some help to be found in the discipline of secular psychology) fashion a working schema of integration that will enable him or her to honor both his or her allegiance to Scripture and his or her commitment to helping others?¹⁵

Central to his investigation, Bookman examines the areas of ontology, axiology (ethics), and methodology. Essentially, he wants his reader to consider the possibility of whether integration *can* occur, if it *should* occur, and, assuming

realities of a biblical worldview, among others.

¹⁵Douglas Bookman, “The Scriptures and Biblical Counseling,” in *Introduction to Biblical Counseling: A Basic Guide to the Principles and Practice of Biblical Counseling*, (Nashville: W Publishing Group, 1994), 63–97. The reader might find it odd that a biblical counselor devoted to the sufficiency of Scripture would construct such a model, but Bookman’s point here is to demonstrate the impossibility of integration altogether.

the first two are answered in the affirmative, *how* it could occur. Unfortunately, eclectic Christian counselors often assume that an integration of opposing systems is possible and simply begin with how to go about putting theory into practice without first considering the moral implications that should precede any attempt at integration.¹⁶

Ethics and morality should be the foremost concern for all Christians regardless of the sphere or field in which they operate.¹⁷ But how do we think about applying this lens conceptually? According to Bookman's perspective, we should consider that just because something *can* be done doesn't make it biblically ethical or moral by default, nor does it mean that a thing *should* be done at all. This being the case, a morality test must be applied to any and all secular counseling theories or methods considered for adoption, utilization, or implementation (either in whole or in part) by biblical counselors. This test addresses whether any intrinsic need or deficiency in Christian theology (i.e., according to the Scriptures) exists that only the modern psychologies can ameliorate.¹⁸ In other words, counselors must conclude if there is something from within the wide-ranging, often conflicting, and ever-changing menagerie of psychotherapies that is *necessary* for the task of soul care. By the very nature of the philosophy and practice, eclecticism answers this question with a resounding, "Yes!"

What are the implications for laying aside a solidly biblical moral evaluation of theories and methods? For one, let us assume (and this is a huge assumption) that an integrationist (i.e., eclectic) Christian counselor could approach some secular counseling theory and be able to weed out any of its unbiblical worldview commitments along with all of its faulty methods and goals before incorporating any parts of that theory in their counseling. Even *if* this could be done, to carry out an eclectic approach responsibly, the Christian counselor would need to protect the integrity of the Scriptures and continue to preserve and define the moral weight of the counsel. Additionally, the integrationist would need to ensure that their counselee, student, or any other individual directly impacted by their eclecticism (or their followers) would have the same level of discernment and

¹⁶ In other words, orthodoxy must precede orthopraxy.

¹⁷ Samuel Stephens, "Christian Ministry and the Mental Health Counseling Complex: Understanding Missions, Counseling, and Biblical Structures of Care," *The Journal of Biblical Soul Care* 8, no. 2 (2024): 8:2, 21–44.

¹⁸ Credit for this is given to Sid Galloway.

moral awareness as they have.¹⁹ All of this would have to happen in order to protect all parties from error and maintain biblical goals and aims in view. Of course, the possibility is far-fetched because of the reality that secular counseling theories and methods actually *do* carry moral weight, and these stand in stark contradiction to biblical wisdom and a Christian worldview (1 Corinthians 1:18–2:16). Such a worldview firmly rejects the possibility of bifurcating the secular from the sacred. As Jay Adams put it, “All of life is sacred; none is secular. All life is God-related; none is neutral. Systems, methods, actions, values, attitudes, and concepts are all either God-oriented or sinful. None are *neutral*.”²⁰ Of course, each counseling theorist representing the major waves of psychotherapy carries with him a set of beliefs about how the world (and people) operates, and so it is incumbent upon every biblical counselor to be aware of such commitments and counter them...instead of adopting them.

COMMITTING RELIGIOUS SYNCRETISM

The second danger of eclecticism in biblical counseling is that of committing religious syncretism. What is syncretism, and how does it relate to eclecticism? As was described earlier, eclecticism is the general practice of borrowing or selecting what is perceived to be the best elements from various sources in order to bring them together for a certain purpose, with the idea of improving upon that purpose.²¹ While syncretism has a longer history, initially related to the bringing together of distinct warring people groups against a common enemy, it is now generally understood as “the combination of different forms of belief or practice.”²² *The New Dictionary of Theology* defines syncretism as “the process of borrowing elements by one religion from another in such a way as not to change

¹⁹ Arguments like this have been made in the past from early integrationists. For a summarized treatment of this see David Powlison, “Critiquing Modern Integrationists,” *Journal of Biblical Counseling* 11, no. 3, (1993): 24–34.

²⁰ Jay Adams, *A Theology of Christian Counseling: More than Redemption* (Nashville: Zondervan, 1979), 43. Later on, Adams notes that God is man’s environment. This is the most fundamental metaphysical assumption of reality that the Bible provides for Christians to assume.

²¹ At times throughout the essay, I will make mention of eclectic counselors, in this I am referring to Christian counselors who practice integration. This would also include clinically informed counselors and redemptive counselors.

²² “Syncretism.” *Merriam-Webster.com Dictionary*, Merriam-Webster, accessed April 29, 2025, <https://www.merriam-webster.com/dictionary/syncretism>.

the basic character of the receiving religion.”²³ Thus, the distinguishing mark of syncretism is the focus on religion and the content of religious belief and practice.

The reader may wonder why this religious syncretism would constitute one of the dangers of *counseling* eclecticism. What does counseling have to do with religion anyway? According to one author, everything. Paul Vitz, emeritus professor of psychology at New York University, authored *Psychology as Religion* in 1977.²⁴ In this text, Vitz analyzes and unmasks the pursuits of counseling psychology as not being an enterprise of the social sciences, but as an established religion with its own rituals, liturgy, clergy, and theology.²⁵ For instance, Vitz speaks of the “religion of selfism,” which is the culmination of assertions and assumptions from the self-psychologies highlighting secularism, self-esteem, and human potential.²⁶ He openly criticizes such stances as idolatrous and shows the inherent incompatibility of the counseling psychologies with the confessions of biblical Christianity:

It should be obvious—though it has apparently not been so to many—that the relentless and single-minded search for glorification of the self is at direct cross-purposes with the Christian injunction to lose the self. Certainly Jesus Christ neither lived nor advocated a life that would qualify by today’s standards as “self-actualized.” For the Christian, the self is the problem, not the potential paradise.

²³ Sinclair B. Ferguson and David F. Wright, eds., “Syncretism” in *New Dictionary of Theology* (Downers Grove: IVP, 1988), 670. It may be the intention of the borrowing religious group to maintain internal coherent beliefs and structures inherent to their system, but when such borrowing occurs, especially in the context of religion, such safeguards cannot be guaranteed.

²⁴ The second edition was published in 1995 and is still currently in print.

²⁵ Vitz is far from the only critic who has compared modern psychological practice in religious terms. Authors from a diverse range of backgrounds have levied this same criticism, albeit not always as directly. See also, Richard Ganz, *Psychobabble: The Failure of Modern Psychology and the Biblical Alternative* (Wheaton: Crossway, 1993); Joyce Milton, *The Road to Malpsychia: Humanistic Psychology and its Discontents* (San Francisco: Encounter Books, 2002); Philip Rieff, *The Triumph of the Therapeutic: Uses of Faith after Freud*, 40th anniversary edition (Wilmington, Delaware: ISI Books, 2006); Anne Harrington, *Mind Fixers: Psychiatry’s Troubled Search for the Biology of Mental Illness* (New York: W.W. Norton, 2019); Carl Trueman, *The Rise and Triumph of the Modern Self: Cultural Amnesia, Expressive Individualism, and the Road to the Sexual Revolution* (Wheaton: Crossway, 2020); Shrier, *Bad Therapy*.

²⁶ Paul C. Vitz, *Psychology as Religion: The Cult of Self-Worship* (Grand Rapids: Eerdmans, 1994), 32–33. Vitz particularly excludes experimental psychology, behaviorism, and psychoanalysis and focuses instead on the “third wave” psychologies which were focused on the concept of self and personality (xvii). This does not mean, however, that the first two waves of psycho-theories should not be criticized as well.

Understanding this problem involves an awareness of sin, especially the sin of pride; correcting this condition requires the practice of such unself-actualized states as contrition and penitence, humility, obedience, and trust in God.²⁷

Interestingly, a leader in Christian integrationism agrees with Vitz's criticism that counseling psychology promotes spiritually harmful values, yet he falls short of identifying it as a rival religion to Christianity. In his 1988 book, *Can You Trust Psychology?*, Gary Collins devotes an entire chapter to the question, "Is psychology a new religion that competes with Christianity?" As is typical with integrationist literature, readers rarely receive direct answers to such introspective questions. While Collins does conclude that "many today bow at the words of Freud, Jung, Rogers, Ellis, Satir, Erhard, or whoever is the latest psychological guru," he concludes the chapter with warning against dismissing psychology outright "because some people have a distorted view of its value" and instead that Christians should "evaluate its findings, learning from them and make use of psychology's insights when they are consistent with Scripture."²⁸ When the psychologies are considered as a rival religion, instead of a helpful adjunct, to the Christian religion, then the entire eclecticism project for the Christian becomes suspect. Perhaps this is why many are hesitant to consider the inherent religious nature of counseling psychology.

Unfortunately, recent history has proven that a theological downgrade stemming from syncretistic efforts by Christian counselors has already deeply affected the integrity of truly biblical counsel, resulting in something that carries the flavor of religious counsel, *without* the distinction of it being Christian.²⁹

²⁷ Vitz, *Psychology as Religion*, 126.

²⁸ Gary Collins, *Can You Trust Psychology?* (Downers Grove: IVP, 1988), 100–102. Of course, the perennial issue with integration and the consistency of truth claims needs to be addressed. Can theories continue to operate as designed when they are eclectically "plundered" for eclectic purposes? Should individual aspects of these theories (and their inherent truth claims) be considered apart from the worldview that the whole theory promotes? If "aspects" of the theory are unbiblical, but other "aspects" seem to be biblical, what does that mean for the entirety of the theory as intended by the theorist? Regardless, in an earlier work, Collins made a much clearer conclusion regarding the religious nature of psychology. He stated, "Every individual and every science has an underlying belief system that might also be termed a religion. Some of these beliefs are theistic; others are not." See Gary Collins, *The Rebuilding of Psychology: An Integration of Psychology and Christianity* (Wheaton: Tyndale, 1977), 96.

²⁹ For an overview of these concerns from biblical counselors who seek to hold firm the essential tenets of biblical counseling, see Heath Lambert, ed., *A Call to Clarity: Critical Issues in Contemporary Biblical Counseling* (Jacksonville: First Baptist Church, 2024); and Lou Priolo, *Presuppositions of*

SYNCRETISM'S EFFECTS WITHIN MODERN INTEGRATION

Within the modern integrationist movement, there has been major theological shifts leftward that have come as a result of holding to theological ambiguous positions and open eclecticism. Early writings from the likes of Gary Collins, Clyde Narramore, James Dobson, and Larry Crabb, while arguing for the eclectic use of modern psychological principles and practices, still maintained a relatively high view of Scripture.³⁰ For instance, in his book *The Psychology of Counseling*, Clyde Narramore dedicated an entire chapter to the use of Scripture in counseling. Narramore noted, “The Bible is not merely a bland background or lace cap for scientific discovery. It is the glorious authority for life itself. It not only sets forth the only hope of our redemption and life eternal through Jesus Christ, crucified and risen, it is the glorious manual and guide book [sic] of our daily lives.”³¹

Fast forward fifty years to the publishing of a foundational integrationist text entitled *Modern Psychotherapies: A Comprehensive Christian Appraisal*, written by well-known and lauded Christian counselors Stanton Jones and Richard Butman, and one will find a very different take on the Scripture’s role in counseling. Within the nearly 500-page tome, the key words “Bible” and “Scripture” do not make a substantive appearance.³² This volume illustrates how clear appeals to the authority of the Bible have been replaced by vague concepts such as “faith-based,” “spiritual,” and “Christian values” that are rarely capitalized upon or more deeply explicated. Not only is *Modern Psychotherapies* void of any discussion about the use of Scripture in counseling, but it also includes seemingly contradictory

Biblical Counseling: What Historical Biblical Counselors Really Believe (Conway, Arkansas: Grace and Truth, 2023). The overwhelming concern of biblical counselors (in some texts referred to as “traditional” or “historical”) is not that eclectic Christian counselors would forsake the faith, but that the faith they represent in their counseling will no longer be represented by biblical Christianity.

³⁰This does not mean that these integrationists were any less wrong in their attempts to improve upon the art of counseling by insisting that eclecticism was necessary.

³¹Clyde Narramore, *The Psychology of Counseling: Professional Techniques for Pastors, Teachers, Youth Leaders, and All Who Are Engaged in the Incomparable Art of Counseling*, (Grand Rapids: Zondervan, 1960), 239. Of note, following this chapter, Narramore provides an appendix dedicated to selected Scripture references for use in counseling which spans 16 pages!

³²Stanton Jones and Richard Butman, *Modern Psychotherapies: A Comprehensive Christian Appraisal* (Downers Grove: IVP, 2011), 491. The author did not review each page of the book, but did refer to the subject index in which neither term appears.

statements. For instance, the authors suggest that Christian ministry operates from the Bible, but at the same time they argue for the utilization of a plethora of secular authorities for counselors who wish to be distinctly Christian as well.³³ In a chapter entitled, “Christian Psychotherapy and the Person of The Christian Psychotherapist,” they argue:

A counselor is not thoroughly Christian merely by virtue of being anti-Freudian or antibehavioral, but we would also argue that a counselor is not thoroughly Christian merely by virtue of throwing around a few Bible verses. None of the existing counseling theories, religious or nonreligious, adequately plumb the depths of the complexity of human character and of the change process. Likewise, *no one approach* to studying the ‘calamities of the soul’ seems to grapple adequately with the wide variety of biological, psychosocial, and sociocultural variables that can lead to the development of mental illness. So there are *many theoretical options* open to counselors who desire to be distinctly Christian in what they do [emphases mine].³⁴

While Jones and Butman point out various character traits and commitments that Christian therapists and clinicians should have, including a call to personal holiness, such conclusions cannot help but be influenced by the syncretism they embrace. In this case, the personal holiness embraced by the clinician and expected from the client amounts to “being attuned to the ‘mystical’ aspects of our faith” and a “spiritual and psychological maturity.”³⁵ To close out the illustration of the theological downgrade within the modern integrationist movement, one can turn to the works of authors including Mark McMinn, Megan Anna Neff, Mark Yarhouse, and others. One text in particular, *Embodying Integration*, written by McMinn and Neff and published in 2020, provides the most egregious examples of the stark contrast in tone from the eclectic counselors of the 1960s and 1970s. This “fresh look” at conceptualizing the integrationist counseling task not only reimagines soul care as an existential practice of “creating space” in order to

³³ This demonstrates yet another complicating factor in trying to maintain a balance between two different aims. Jones and Butman even admit that they must “put unusual efforts into making our work [as psychologists within the mental health field] an extension of the Christian faith and of God’s redemptive activities in the world,” (460).

³⁴ Jones and Butman, *Modern Psychotherapies*, 459–60.

³⁵ Jones and Butman, *Modern Psychotherapies*, 474–475.

empathize with the feelings and emotions of the client, but also affirms the idea of man's innate goodness, approving of pluralistic religious counseling, questioning the penal substitutionary atonement of Christ, and reconfiguring the main focus of counseling towards validating the human experience, personal process, and reality perceptions of the client. They state, "Expanding our worldviews and our narratives is a natural byproduct of humbly being in conversation with those familiar with an alternative story. This is the process by which critical wisdom develops."³⁶ What McMinn and Neff call "conversations," this author calls eclecticism and overt religious syncretism, and it leads to the place where wisdom is no longer sourced from God's special revelation.³⁷

SYNCRETISM'S EFFECTS WITHIN NEO-INTREGATION³⁸

In his 2024 essay entitled, "Six Crucial Confusions of the New Integrationists," Heath Lambert identifies this burgeoning movement of Christian counselors who seek to situate themselves between modern integrationists and biblical counselors. The thought-center for these neo (or new) integrationists is at Southeastern Baptist Theological Seminary in Wake Forest, North Carolina where they refer to themselves as clinically informed biblical counselors or redemptive counselors.³⁹ Southeastern describes the effort of clinically informed biblical counseling as

³⁶ Megan Ann Neff and Mark McMinn, *Embodying Integration: A Fresh Look at Christianity in the Therapy Room* (Downers Grove: IVP, 2020), 17. Neff mentions that her exposure to "alternative views of atonement, sanctification, suffering, and sin" helped her become more spiritually resilient (7). She later states, "A more flexible understanding of atonement might have helped me experience my patient's sin differently" (162).

³⁷ Neff and McMinn, *Embodying Integration*, 107. The result of abandoning Scripture is spiritual blindness and foolishness. In this "fresh look" at Christianity in the therapy room, the authors state, "It may be shocking to suggest that theology is not enough, but consider again the book you are reading . . . we are trained as mental health professionals, not theologians."

³⁸ This is a burgeoning field that is just now growing in published works, so a timeline for the neo-integrationists/clinically informed biblical counselor literature will not be as extensive as that within the modern integration camp.

³⁹ Heath Lambert, "Six Crucial Confusions of the New Integrationists," in *A Call to Clarity: Critical Issues in Contemporary Biblical Counseling* (Jacksonville: First Baptist Church, 2024), 149. See also, *Southeastern Theological Review* 15, no. 1. Key individuals associated with this movement include (but are not limited to) Nate Brooks, Brad Hambrick, Eliza Huie, Kristin Kellen, Sam Williams, Michael Gembola, Jonathan Holmes, Rebekah Hannah, and Jason Kovacs. For examples of organizations that align with the clinically informed biblical counseling paradigm see the Christian Counseling Center Collaborative at <https://ccccollab.com/>.

“sometimes facilitating application of biblical truths” to the lives of counselees through insights that the social sciences provide in assisting the counselor in “understanding and counseling a person’s mental condition.”⁴⁰ Thankfully, the counseling faculty at this seminary (similar to other Christian counseling organizations that claim a similar designation) still articulate and laud Scripture as being “necessary for understanding people” and as the “primary ‘sourcebook’” for counseling.⁴¹ Interestingly, these stances (even down to the language) are similar to those of early modern integrationists.⁴²

There are substantive differences between neo-integrationists and biblical counselors. In one such contrasting view relating to the issue of the usefulness of social scientific/psychological insights, biblical counseling organizations such as the Association of Certified Biblical Counselors outright deny that “the findings of secular psychology make any essential contribution to biblical counseling.” While their membership covenant does state that secular psychological research and observations “may provide” some level of helpfulness to the counseling task, they also point out that due to the noetic effects of sin, all interpretations of such efforts by psychologists “leads to misunderstanding.”⁴³ This constitutes a critical difference between biblical counselors and neo-integrationists. Consistently, the former group frames any helpfulness found in the social sciences with the realities of the noetic effects of sin (among theological realities). The latter group rarely does this, preferring instead to optimistically endorse the eclectic use of secular

⁴⁰ “Central Affirmations of Southeastern’s Biblical Counseling Program,” Southeastern Baptist Theological Seminary, accessed April 30, 2025, https://catalog.sebts.edu/mime/media/24/565/SEBTS_BiblicalCounselingAffirmations.pdf.

⁴¹ “Central Affirmations,” Southeastern Baptist Theological Seminary. The use of the word “primacy” is an inadvertent way to limit Scripture’s authoritative and comprehensive nature for the counseling task and open the door to other “authorities.”

⁴² More academic work should be done to compare and analyze the writings of the modern integrationists of the 1960s–1980s with those of the neo-integrationist of the 2020s. Regarding the findings of secular psychology, Jay Adams, the founder of ACBC, has always distinguished research psychology from counseling psychology. In this particular statement from ACBC, the former is being addressed. Psychology applied towards counseling is always rejected as illegitimate.

⁴³ “Membership Covenant,” Association of Certified Biblical Counselors, accessed April 30, 2025. <https://biblicalcounseling.com/about/beliefs/positions/membership-covenant/>. The membership covenant ends with the clear statement that counseling psychology is “in competition” with biblical counseling and any attempt at integration with “faith once for all delivered to the saints” cannot happen. This can be viewed as an implicit admission of the quasi-religious nature of counseling psychology. See also Jay Adams, *A Theology of Christian Counseling: More than Redemption* (Nashville: Zondervan, 1979), 278–279.

theories and methods thus leaving them more vulnerable to the compromising dangers of syncretism. Additionally, they rarely acknowledge the inseparability between a method and its corresponding worldview. Therefore, the posture of clinically informed biblical counselors emphasizes the helpfulness of the modern psychologies and typically legitimizes the mental health complex as opposed to casting a cautious eye on them as being derived from warped anti-Christian worldviews.⁴⁴

Regarding a call to critical thinking in the “redeeming” of psychology, Powlison noted, “Compromising syncretism *only* sees the good, and does not produce redemption. There is wrong in Psychology as in all other mixed cases. When mastered by redemptive purposes, constructive criticism will always engage wrong by offering something better [emphasis mine].”⁴⁵ Unfortunately, syncretism has resulted from the efforts of the eclectic biblical counselor when they continue to express confidence and meaning from clinical and psychological principles and insights at the expense of the Scriptures. Examples of this include assertions made by clinically informed biblical counselors such as Nate Brooks in his 2022 commencement address at Reformed Theological Seminary in Charlotte, North Carolina. Brooks stated, “Indeed, the Scriptures were not written to give humanity the full knowledge of what God intended to reveal to man about man. When we consider the discipline of counseling, there is much the Scriptures do not reveal.”⁴⁶

⁴⁴ Lambert identifies this posture as a “nuanced fascination” with what the social sciences provide. See Heath Lambert, “Priests in the Garden, Zombies in the Wilderness, and Prophets on the Wall,” in *A Call to Clarity: Critical Issues in Biblical Counseling* (Jacksonville: First Baptist Church, 2024), 10. There are many examples of this but a couple of good examples include the following: David Murray and Tom Karel, *The Christian’s Guide to Mental Illness* (Nashville: Crossway, 2023); and Helen Thorne and Steve Midgely, *Mental Health and Your Church* (The Good Book Company, 2023). For a critical analysis of Murray’s book see, T. Dale Johnson Jr. host, and Samuel Stephens, *Truth in Love*, podcast, episode 464, “A Christian’s Guide to Mental Illness,” <https://biblicalcounseling.com/resource-library/podcast-episodes/a-christians-guide-to-mental-illness/>.

⁴⁵ David Powlison, “How Does Scripture Teach Us to Redeem Psychology,” the *Journal of Biblical Counseling* 26, no. 3 (2012): 19. While the neo-integrationist has appealed to the phrase “redemptive counselors,” possibly in the ways that Powlison spoke of here, their current arguments lack any substantive criticism (if offering criticism at all) because such critical analysis is seen as uncompassionate, mean-spirited, and close-minded.

⁴⁶ Nate Brooks, “Herman Bavinck, Patron Saint of Biblical Counselors: How an Old Dutch Theologian Helps Us Make Sense of Biblical Sufficiency” (Charlotte: Reformed Theological Seminary, 2022), <https://rts.edu/resources/herman-bavinck-patron-saint-of-biblical-counselors/>.

Additionally, another promoter of the clinically informed approach, Eliza Huie, has spent years promoting trauma-informed therapies to Christians.⁴⁷

Sadly, contemporary understandings of trauma are based more on Neo-Freudian frameworks than scientific fact, no matter how much one appeals to the seductive allure of neurological or scientific explanations.⁴⁸ In her most recent work, *Trauma Aware: A Christian's Guide to Providing Help and Care*, Huie commits the kind of syncretism that Powlison warned against nearly a decade ago.⁴⁹ She does this by borrowing extensively from clinical theories and resources while both assuming and presenting such tools as being scientifically supported.⁵⁰ In the last section of her book, one where she seeks to set the larger discussion of trauma in a theological context, she discusses the helpfulness of adaptive information processing and how it explains the way the brain processes, organizes, and holds memories. She notes:

⁴⁷ Huie is one of the most vocal proponents within the neo-integrationist camp of trauma-informed therapies. See Eliza Huie, *Speak the Truth*, podcast, “Episode 59: What is EMDR Therapy,” 25 May 2020. On her personal website, she refers to herself as “clinically competent” which means that she seeks to bring a “well-rounded approach that offers experience and expertise in addressing clinical matters including trauma, abuse, suicide prevention, cultural issues, and various mental health diagnosis.” Eliza Hui, <https://www.elizahuie.com/>. Interestingly, there are many within the secular psychologies that openly challenge the scientific validity and claims of EMDR as an evidenced-based therapy as well as challenging popular notions of trauma. See Roger McFillin, *Radically Genuine*, podcast, “Episode 175: Is EMDR a Revolutionary Psychotherapy or Pseudoscientific Sham?” March 6, 2025; and Michael Scheeringa, *The Trouble with Trauma: The Search to Discover How Beliefs Become Facts* (Las Vegas: Central Recovery Press, 2022).

⁴⁸ The hierarchy of sciences places “hard” sciences near the top in terms of operating by principles of the scientific method and the likelihood that outcomes will be less biased due to tighter controls. The “hard” sciences are set in contrast to the “soft” sciences, which do not operate by the same principles and have positive outcomes in research studies at five times the rate of hard sciences. Daniele Fanelli, “‘Positive’ Results Increase Down the Hierarchy of the Sciences,” *PLOS One* 5, no. 4 (April 2010): e10068, <https://journals.plos.org/plosone/article?id=10.1371/journal.pone.0010068>. It is not the purpose of this essay to delve into this topic, but there have been helpful biblical resources that expound on the issue with trauma (with all of the myths associated with it), the most recent being an extensive and comprehensive dissertation. See Francine Tan, *The New Eclecticism: A Comprehensive Appraisal of the Contemporary Paradigm of Trauma*, (PhD diss., Midwestern Baptist Theological Seminary, 2025).

⁴⁹ One can skim the endorsements for the book to see that they are provided exclusively by neo-integrationists, some of which have disavowed biblical counseling outright.

⁵⁰ A quick review of the endnotes will show two main sources of support to Huie’s claims. The first are authors such as Judith Herman, Bessel van der Kolk, and Viktor Frankl (all of whom merely theorized about trauma and whose popular theories do *not* stand up to hard scientific scrutiny). The second includes studies from the fields of psychoanalytic psychology and neuroscience.

The AIP theory explains that our brains adapt based on the situations we experience. Essentially this means that as we go through experiences, our brains take in everything about the situations, including the sensory information . . . gathered during the experience. That data is then encoded in our brains as memories, which we will then use as we engage future situations. Think of it as a filing system in your brain. Much like files on a computer, when organized properly, they can be out of sight but retrieved as needed . . . The next time you experience something similar, your brain pulls that memory—with the sensory information—and adapts your behavior accordingly, based on what we learned.⁵¹

Under the guise of scientism, Huie (and other eclectic Christian counselors) equates the operations of the most complex (and unknown) organ in the body to that of a filing system on a desktop computer.⁵² The pragmatic usefulness of such theories such as AIP (a core tenet of EMDR), Adverse Childhood Experience (ACE) Assessments, bilateral stimulation, finger-tapping, box breathing, and others seems to outweigh any need to support their use with empirical or objective scientific evidence or to demonstrate that such practices are biblically necessary to work towards the central end of biblical counseling, that of personal sanctification and holiness.⁵³

DIMINISHING THE CHRISTIAN GOSPEL

Even while its fascination with worldly wisdom is marketed as Christian, eclectic Christian counseling more often contributes to spiritual confusion. Such counseling avoids inquiring into or making use of clear and unambiguous counseling modes and means that are prescribed in Scripture and often lack

⁵¹ Eliza Huie, *Trauma Aware: A Christian's Guide to Providing Help and Care* (Eugene, Oregon: Harvest House, 2025), 257.

⁵² J.P. Moreland, *Scientism and Secularism: Learning to Respond to Dangerous Ideology* (Nashville: Crossway, 2018).

⁵³ While I appreciate that Huie seeks to address theology, it is clear from considering her work as a whole (and examining to what extent she seeks to study and apply Scripture) that the main thrust and weight of the argument hinges on neuropsychological explanations framed by mental health concepts and terms. All of these combined tend to cloud (not clarify) the nature of the help and care that Huie is proposing to offer.

anything uniquely Christian. This leads to the final danger of eclecticism, which is that the ultimate good that can be offered to anyone, the person of Jesus Christ, is diminished, and in its place is a gospel of emotional, mental, and holistic wellness.

Eclectic counseling focuses on what is deemed “helpful” or “good” to the counselee as opposed to turning to the Bible to provide meaning and definition for these standards.⁵⁴ There are, of course, times when what the counselee sees as good and what the Bible says is good are the same; however, much of modern therapy (secular and Christian) focuses on the alleviation of all suffering, difficulty, or hardship to the detriment of godly aims and goals such as endurance, faithfulness, obedience, and trust in God.⁵⁵ When the aims and goals of *truly* Christian counseling are lost, and the biblical counselor is reduced to a “service provider” for a paying client, there is a heightened temptation towards pragmatic and eclectic ends. But what are those ends? What is the good that we are working to as Christians who counsel?

In *Seeing with New Eyes*, David Powlison captured the aims of true biblical Christian counseling:

Every theory defines or assumes an ideal of human functioning by which problems are named and solutions are prescribed: right and wrong, value and stigma, true and false, good and bad, sound and defective, healthy and pathological, solution and problem . . . The Bible’s truth competes head-to-head with other models. God speaks a truth that is intended to make sense of us and change us . . . we [Christians] define change as turning to a Person whom we trust, fear, obey, and seek to please. Instead of letting the goal of “health” cue our system to a medical metaphor, we set the goal of being transformed into the likeness of this Person with whom we live in relationship.⁵⁶

This quote correctly articulates the nature, methods, and goals of biblical

⁵⁴At the start of my graduate biblical counseling classes each semester at Midwestern Baptist Theological Seminary, I often write the question, “What is help?” on the whiteboard. My intention is to get my students thinking about this idea biblically, not pragmatically.

⁵⁵Vitz, *Psychology as Religion*, 139–144.

⁵⁶David Powlison, *Seeing with New Eyes: Counseling and the Human Condition Through the Lens of Scripture* (Phillipsburg, New Jersey: P&R Publishing, 2003), 3–4.

counseling and helps to demonstrate how Christian counsel from the Scriptures cannot be integrated with worldly philosophies in the guise of helpful techniques and psychological theories, no matter the intention. Christian counselors desire that their counselees grow in the knowledge of God and walk in his ways, and it is through the “sacred writings” that both wisdom for salvation can be attained and one may be “adequate, equipped for every good work” (2 Timothy 3:14–17; Colossians 1:9–12). However, due to their eclecticism, both the integrationist and clinically informed biblical counselor get righteousness wrong when they downplay the consequences of personal and corporate sin, which in turn focuses efforts on counseling to other ends.

Kristen Kellen asserts that the Lord created people to “flourish,” a concept that her colleague at Southeastern Seminary, Brad Hambrick, calls “functional living.”⁵⁷ In the same article, Kellen clarifies her stance on human flourishing to include people growing in Christlikeness and living for the glory of God, goals that any biblical counselor should embrace. She immediately follows up by noting, “I wouldn’t say that means every session must be evangelistic or that we cannot do anything to alleviate suffering, even for an unbeliever. After all, as Mike Emlet has said, the relief of suffering is a kingdom agenda; it gives us a foretaste of the coming redemption.”⁵⁸ Along the same lines, Hambrick goes on to say that the redemptive counselor should “reinforce [the counselee’s] pursuit of healthiness with a pursuit of holiness. . . .”⁵⁹ These thoughts, when taken together, offer an accurate depiction of neo-integrationist thinking. While there are points made that can be affirmed as biblical, these are interwoven with commitments that obfuscate the gospel message.

⁵⁷“SEBTS Counseling Professors Roundtable: As it Is and As it Could Be,” *Southeastern Theological Review* 15, no. 1 (2024): 74. Hambrick notes that he has found it best to move beyond the “narrow” role of teacher as a counselor in favor of viewing his role as more of an “ambassador” who embodies God’s concerns. Hambrick’s posture here has become more popular in biblical counseling circles.

⁵⁸“SEBTS Counseling Professors Roundtable,” *Southeastern Theological Review*, 75. It is arguable, if not outright incorrect, to assume that the relief of temporal suffering is a kingdom agenda. While the care for the poor and ministry to the downtrodden of all sorts is supported by Scripture, one must not forget the particular and primary thrust of soul care and counseling. Jesus himself taught and modeled for us what the appropriate concerns are for the Christian seeking to disciple and counsel. See Sean Perron, *The Counseling Methodology of Jesus Christ in Johannine Literature*, diss. (Midwestern Baptist Theological Seminary, 2023); and Jay Adams, *Competent to Counsel* (Nashville: Zondervan, 1970), 67ff. Adams noted, “Any such counseling that claims to be Christian surely must be evangelistic. Counseling is redemptive” (67).

⁵⁹“SEBTS Counseling Professors Roundtable,” *Southeastern Theological Review*, 75.

There is nothing from the counseling psychologies (in part or whole) that contributes to sanctification because these worldview-laden tools deny the realities of sin, justification, and the like. With this in mind, one wonders to what end these tools are being applied. Further, any counseling that does *not* clearly and regularly present the gospel of Jesus Christ through biblical instruction, admonition, encouragement, etc., by biblical means with the expressed intention of seeing the lost soul saved or seeing the saved soul sanctified is *not* Christian. From a biblical counseling perspective, Marshall Adkins, speaking on this topic noted, “If you’re making civic righteousness the goal of counseling, that’s doing something very different than biblical counselors have done . . . This is borrowing techniques from other therapeutic frameworks to aim at some other goal than God’s goal of sanctification for His glory.”⁶⁰ By civic righteousness, Adkins is giving a name to the “good” ends that clinical informed counselors work towards using the world’s wisdom by “redemptively contextualizing their work.”⁶¹ Of course, the history of pastoral counseling shows us that even with good intentions, seeking to accomplish this is a fool’s errand and will not lead to the gospel being proclaimed in the ways God intends.

CONCLUSION

The tragic irony of eclecticism is that in its attempt to promote utility over truth based on subjective ideas of what is helpful, it ultimately proves that it cannot escape the reality for the very thing that it inherently dismisses . . . that being a standard of absolute truth. What is helpful, what is true, and what is right are all dependent upon the eclectic counselor “choosing” the “best” or most “useful” technique for the occasion while simultaneously neglecting (and sometimes) denying the very thing necessary for help which is the standard of

⁶⁰ T. Dale Johnson Jr., host, and Marshall Adkins, *Truth in Love*, podcast, episode 509, “Civic Righteousness and Biblical Counseling,” March 24, 2025, https://biblicalcounseling.com/resource-library/podcast-episodes/civic-righteousness-and-biblical-counseling/?srsltid=AfmBOorOm1GeX1IyaDiDffCKWbRjqmCXbEIaRBUg_IOOyUJhdW-yJwY. Adkins and Johnson are not doubting the salvation or faith of the neo-integrationist, but do question their methods, means, and goals.

⁶¹ “SEBTS Counseling Professors Roundtable,” *Southeastern Theological Review*, 79. See also, Samuel Stephens, “Christian Ministry and the Mental Health Counseling Complex: Understanding Missions, Counseling, and Biblical Structures of Care,” *The Journal of Biblical Soul Care* 8, no. 2 (2024): 21–44.

truth as expressed in the Bible.⁶² It is inescapable that we must live by a standard, everyone does, but it is incumbent upon Christians to intentionally live by God's Word.⁶³ Eclecticism has been demonstrated to be a self-defeating practice for the Christian counselor in that it betrays a trust in worldly wisdom to achieve God's ends, results in a religious syncretism that diminishes markers of truly biblical counseling, and, worst of all, diminishes the centrality of the gospel.

⁶² Credit for this thought is given to my colleague and friend, Will Richardson.

⁶³ Jared Longshore, ed., *By What Standard? God's World . . . God's Rules* (Care Coral: Founders Press, 2020).

WHAT FACTORS ENCOURAGE INTEGRATION¹

*Ed Wilde*²

A current debate among those who practice “biblical counseling” concerns whether and when one may make use of (integrate) secular therapeutic ends and/or means. To what extent may we rely upon observations? That debate to date has concerned primarily the boundaries of “common grace.” Yet, before the “common grace tools” debate there is a proceeding question, “Why would we need to go beyond Scripture?” In a subsequent, essay I argue that the expansive definition of “common grace” to include “arts and science” fails. I wish only to delineate three arguments which motivative the current “CGT” debate: biblical counseling is (1) unscientific, (2) uncompassionate; and (3) the word “counseling” implies “therapy.” I will answer these contentions in subsequent essays.³

It used to be the habit in theological texts for the author to include a prayer to begin the work. To that end, I will offer this (medieval) prayer:

*Teach me your servant, therefore, Lord, teach me, I pray you, by your Holy Spirit,
how to devote myself to them
and how to spend myself on their behalf.
Give me, by your unutterable grace,
the power to bear with their shortcomings patiently,*

¹ I want to thank Drs. Gifford and Tan, and my friends who waded through the substantially longer version of this still too long essay. I would also like to thank Olivia Hansen for her kind attention and comments during the editing process of this article. The errors which remain are all mine own.

² Edward Wilde is an adjunct professor at The Masters University, a licensed attorney, has been a full-time pastor, is a co-editor of *Legal Issues in Biblical Counseling*, is a contributing author to *Men Counseling Men*, and has published in multiple legal journals.

³ (1) Expecting biblical counseling to conform to “science” is a category error. (2) Biblical counseling is not un-compassionate. (3) We may give instruction without engaging in “therapy.” (4) Perhaps underlaying at the most fundamental level we find the modern obsession with “technique” as that concept is articulated by Jacques Ellul.

*to share their griefs in loving sympathy,
and to afford them help according to their needs.
Taught by your Spirit may I learn to
comfort the sorrowful,
confirm the weak
and raise the fallen;
to be myself one with them in their weakness,
one with them when they burn at causes of offence,
one in all things with them, all things to all of them, that I may gain them all.
Give me the power to speak the truth straightforwardly,
and yet acceptably;
so that they all may be built up in faith and hope and love,
in chastity and lowliness,
in patience and obedience,
in spiritual fervor and submissiveness of mind.
And, since you have appointed this blind guide to lead them,
this untaught man to teach,
this ignorant one to rule them, for their sakes, Lord, if not for mine,
teach him whom you have made to be their teacher,
lead him whom you have bidden to lead them,
rule him who is their ruler.
Teach me, therefore, sweet Lord,
how to restrain the restless, comfort the discouraged, and support the weak.
Teach me to suit myself to everyone according to his nature, character and
disposition, according to his power of understanding
or his lack of it,
as time and place require, in each case, as you would have me do. ⁴*

⁴Aelred of Rievaulx, *Treatises, The Pastoral Prayer, Cistercian Fathers*, vol. 2, 114–115; Thomas C. Oden, *Classic Pastoral Care*, vol. 3 of *Pastoral Counsel* (New York: Crossroad, 1989), 11.

INTRODUCTION

The phrase “biblical counseling” is the inheritance of Jay Adams’ coinage.⁵ Since that time, the concept has undergone significant application to a number of counseling theories and methods which, though they bear a degree of semblance to one another, are not wholly consistent.⁶ My intention herein is not to trace the variations through time, nor is it to comprehensively survey the issue of the variations currently in use.

The issue which has taken my attention concerns the scope of “biblical counseling” as it is used in public-discussion among a subset of those who claim the title “biblical counseling.” In the interest of full disclosure, I am a biblical counselor certified by ACBC (the Association of Certified Biblical Counselors), have taught at various ACBC functions in United States, South Africa, and Chile, and I am also an adjunct professor at The Master’s University and at Brookes Bible College.

The phrase “biblical counseling” is also used by a number of our brothers and sisters with an emphasis upon certain distinctive elements such as “clinically informed” and “trauma informed.”⁷ The phrase “redemptive counseling” and

⁵The first use of the phrase appears to be in *Competent to Counsel* by Jay Adams (Presbyterian and Reformed Publishing Company, 1970). See also “Google books search for ‘biblical counseling’ (1800–1997),” Google Books, accessed June 1, 2026. https://www.google.com/search?q=%22%22biblical%20counseling%22%22&tbm=bks&tbs=cdr:1,cd_min:1800,cd_max:1997&lr=lang_en; David Powlison, *The Biblical Counseling Movement* (Greensboro: New Growth Press, 2010).

⁶Professor Brooks of SEBTS has provided his own explanation of the variation history in a recent X (neo Twitter) thread, <https://x.com/natejbrooks/status/1811072726376849600>. As he stated in one of his posts, “Biblical counseling has never been a term used to refer to just one approach. It’s a family of approaches, and, like the members of a family, there are different hair colors, freckles, size of frames, that sit around the dinner table.” In this essay I am not contending for a definition of the phrase, per se. For many reasons I prefer alternative nomenclature such as “biblical soul care” (the name of this journal). My rationale for reticence on this topic will appear below.

⁷On one hand is the use of that phrase by ACBC and certain educational institutions, such as Midwestern Seminary, The Masters University, Reformed Theological Seminary, Charlotte, and Bob Jones University. These are not the only institutions which instruct in “biblical counseling” in the manner which I will advocate in this series of articles. I trust I will handle the difference of opinion(s) on this topic fairly. However, I am beginning from a position, and I am arguing to a position which holds to a “narrow” use of the phrase “biblical counseling” and a “maximalist” position on the sufficiency of Scripture for counseling. See, e.g., 1. Corinthians 13, particularly 13:4; Ephesians 4:1–3, etc. To the extent that anyone finds anything I say herein to be a personal affront, please know that nothing was written to offend or confront. I do not write this with

“third generation biblical counselor” have also been offered, with their own definitions and emphases.⁸ Again, some of the men and women who use these more capacious definitions are people I know or at least with whom I have communicated.⁹

The various hyphenated biblical counseling theories arise, at least in part, from the proposition that it would be good and wise to incorporate various elements of secular psychology.¹⁰

The debate concerns whether we may or whether we must (if we are good and wise) integrate psychological knowledge in our biblical counseling.¹¹ The

the illusion that I have reached the perfect summit of knowledge. The nuances of relationship between Scripture and secular knowledge disciplines are complex. For example, in connection with the building of the temple, we read in Exodus 31 that the Spirit of God has gifted men with abilities which are not classically “spiritual.” Moreover, such skill is certainly analogous to many men and women at that time. How does one ferret out the distinction between inherent capacity, learned skill, and peculiar gifting of the Spirit? Why does the line of Cain possess such inventive ability? (Genesis 4:20–23). On the other hand, I see no reason to believe that human beings at all have been gifted peculiarly to gain insight into the mechanics of soul, especially when their modeling denies the entire Godward relationship (1 Corinthians 2:10–13). A scientific model can be remarkably accurate and utterly wrong. Consider the medieval complications of the Ptolemaic model of planetary motion with its retrogrades. We can assume that ancient sacrifice of children was instituted to relieve some anxiety (perhaps Girard’s theory explains the behavior), but should Israel have copied this action as an effective means of “common grace”? (See, e.g., Ezekiel 16:20–21).

⁸ As I was finishing this essay, I came across another post by Professor Nate Brooks who is contending that perhaps the division is less acute than some may believe. X.com, 2025 (Formerly Twitter), <https://x.com/natejbrooks/status/1886795075998367749>.

⁹ In a subsequent essay, I will explain how one’s personal experience, one’s education, relations, personal inclination, et cetera will affect the manner in which one approaches the issues which arise in the context of “biblical counseling.” This background is not mere window dressing, it is integral to the argument which I am making herein. In addition, one’s “ethos” is a fundamental element of argumentation and persuasive speech, per Aristotle. Christof Rapp, “Aristotle’s Rhetoric,” Stanford Encyclopedia of Philosophy, Stanford.edu, May 2, 2002. <https://plato.stanford.edu/entries/aristotle-rhetoric/>. And my ethos must be considered in evaluating what I have to offer.

¹⁰ Even the phrase “secular psychology” is too broad. There is certainly a difference between the study of the central nervous system and Carl Jung’s collective unconscious. The entire discussion over “common grace,” “integration,” and “psychology” has been a trainwreck of logical error (most particularly equivocation and the genetic fallacy, failure to understand induction, abduction, or deduction; misuse of evidentiary categories; et cetera). I will endeavor to avoid these faults, but I write fearing I will fail.

¹¹ It is not my intention to merely point to the blasphemous nature of Freud or Dewey’s atheism and desire to use public education to instill “Unitarian Universalism.” Dale McGowan, “John Dewey Redefines God for Humanists and Atheists,” Dummies, accessed August 21, 2024, <https://www.dummies.com/article/body-mind-spirit/religion-spirituality/atheism/john-dewey-redefines->

dispute of late has largely centered around the concept of “common grace.” A recent edition of the journal of Southeastern Seminary Theological Review stated definitively that integration is not merely possible, but it is both unavoidable and necessary to counsel well.¹² ACBC has taken a stance generally opposed to the position advanced recently by the Southeastern Baptist Theological Seminary.¹² The position of ACBC may be found at the “Sufficiency Statement.”¹³

While I earnestly desire to avoid rancor, I do not believe we can avoid the discussion. The stakes are far too high to avoid frank debate on the ground that I may find myself feeling uncomfortable (Galatians 2:11). If I disagree with you, my dear reader, please take that as a disagreement over the matters in debate and not as a personal criticism.

It is my intention that this essay will be a preface to a further essay addressing the overarching question of whether and what elements of the field termed “psychology” should be incorporated into use by “biblical counselors.”¹⁴ Of particular interest will be the conditions under which some biblical counselors contend contemporary therapeutic procedure and goals, *if any*, should be incorporated into biblical counseling.¹⁵

god-for-humanists-and-atheists-165808/). To merely argue from their questionable motives to all current therapy would be lazy and an unfair application of the genetic fallacy.

¹² Sam Williams, ed., *Southeastern Theological Review* 15, no. 1 (2024), <https://doi.org/https://www.sebts.edu/wp-content/uploads/2024/04/Updated-15.1.pdf>.

¹² For the biblical counseling perspective, Heath Lambert’s recent introductory work on common grace would be representative. Heath Lambert, *Biblical Counseling and Common Grace* (Wapwallopen, PA: Shepherd Press, 2023). Here is an example of equivocation on the word “integration.” This word, which is capable of various definitions, is employed in various inconsistent manners, which primarily proves that self-styled biblical counselors may be fine when dealing with people but lack certain fundamental skills in other areas.

¹³ “Sufficiency Statement,” [Sufficiencystatement.com](https://sufficiencystatement.com), 2024, <https://sufficiencystatement.com>.

¹⁴ If you are familiar with the field, you would know that there is no single theory or “school” which constitutes “psychology.” As Dr. Baker explains, there are only psychologies. This also overlaps with the field covered by “common grace.”

¹⁵ I have not undertaken a thorough review of the literature and certainly do not know all who work in the field of “biblical counseling.” I have noticed a number of people who will incorporate EMDR (usually in a basic and untrained fashion) of some Cognitive Behavioral means (which in various instances duplicate biblical means) or a therapeutic goal of simply seeking symptom reduction as part of their “biblical counseling” and such “integration” is done without understanding what has been done. Whether wittingly or unknowingly, such incorporation runs the danger of straying into Colossians 2, by seeking to build upon revelation with some form of further knowledge.

A third group of Christians (and more beyond Christianity) hold the opinion that biblical counseling should not be practiced at all and the whole of the matter should be given over to “trained therapists.”¹⁶ I will not be interacting in any concerted effort with their position in this essay. I have one final essay in this series which will contend that the expansive Neo-Calvinist (particularly Kuyper/Bavinck) common grace definition should be retired.¹⁷

THE NATURE OF THE DISPUTE

A debate is taking place among “biblical counselors.” The moniker is typically self-applied, and often by people whom I wish would not use the title. I am referring to a current debate taking place among men and women who use the title “biblical counselor” with some justification. The people involved all love the honor of Christ and the good of their fellow believers.

While I will begin where I began, as a certified counselor with ACBC who adheres to the positions of ACBC, I am not claiming that everyone on one side of this argument holds all the “right” and the “other” holds all the wrong. Should we disagree, let us disagree in love. I have learned a great deal, even from those with whom I disagree.

¹⁶While any number of instances could be provided, I offer one of the less aggressive “cautions” against biblical counseling: “You do not have to see a Biblical Counselor. Particularly if you have trauma from abuse, PTSD, or suicidal ideation, you need a therapist specialized in those particular things. You can supplement with pastoral or Christian counseling as needed but get specialized support.” Jennifer Greenberg (@JennMGreenberg), X.com, June 2, 2022, <https://x.com/JennMGreenberg/status/1532549087047950341>.

¹⁷An element which I cannot elaborate herein, but which seems to be involved in this prong of the debate, is what is meant by “spiritual”. The “only trained therapist” contingent seems in part to have relegated “spiritual” to something which is not strictly psychological or physical. Adams addressed this argument from a different angle in his various discussions of trichotomy. Another element of this discussion entails Paul’s writing on the matter of “inner man” (2 Corinthians 4:16) At this point, I will assert without further argument that we as human beings cannot live in a way which segregates out matters which are spiritual and not spiritual. Gathering sticks, surely the most quotidian of tasks, holds spiritual significance (Numbers 15:32–36). Sure, my thoughts and feelings fall within the ambit of spiritual concerns (Jeremiah 4:14, “O Jerusalem, wash your heart from evil, /that you may be saved./How long shall your wicked thoughts/lodge within you?”; Jonathan Edwards, *Religious Affections*, ed. John E. Smith and Harry S. Stout, revised ed., vol. 2, *The Works of Jonathan Edwards* (New Haven: Yale University Press, 2009), 95, “True religion, in great part, consists in holy affections.”

Structure of the Argument

The ultimate issue: should a biblical counselor incorporate contemporary therapeutic techniques and aims into one's practice of counseling? A related question: to what extent, if any, does "common grace" make an epistemological contribution to soul care?¹⁸

First Premise

If God has given us a technique of common grace, we despise the goodness of God by not using that tool.¹⁹

Second Premise:

Technique X is a blessing of common grace.

¹⁸ Here, we immediately run into the problem of definitions. The phrase is used in a number of different and inconsistent ways. Some use the phrase "common grace" to refer to anything which a human being does involving any intellectual or moral quality. Writing this sentence is common grace. Thus, Dr. Mengele using his medical skill to torture a child is using common grace. Some reserve the word for admirable things in science and art. This runs into its own problems. What scientific theory is actually common grace, when science is a method of skepticism and even the most certain theories are overturned. Is it perhaps the best science and art? What moral position is common grace? Is IVF common grace or a sin? Is it God lessening the effects of sins destruction as a general proposition while not referring to any particular skill or event? Is it the restraint of sin which permits the exercise of creational attributes of humanity which may then be used for good or ill? And why select one or the other? The phrase common grace loads the argument, because it privileges whatever I choose to be the "grace" (and hence a gift of God). Perhaps the entire concept as a concept should be scrapped; not as a rejection that God has shown mercy to humanity, but rather, that each thing must be judged in isolation. A doctrine which cannot distinguish between a perverse prison doctor and a loving missionary doctor is of limited value. This If-Then argument preys upon the deliberate equivocation of the phrase;

Once again, this raises the issue of scientific modeling (because scientific reasoning will always entail empirical observation as made meaningful by a model). If the current model of self-understanding includes gender fluidity (as a sort of polymorphous perversity of children a la Freud), is that common grace? I recently wrote a brief on behalf of ACBC before the Supreme Court on this precise issue in response to a law which found that not accepting such a model is morally and psychologically harmful to the child. When such a position is adopted by the APA, on what *scientific* ground does the biblical counselor exclude such information from the realm of common grace?

¹⁹ Does the refusal of some method which the biblical counselor takes as an instance of God's common grace (as opposed to a human misuse of some inherent capacity of perversion of common grace) mean that another biblical counselor who rejects what another has embraced constitutes a devilish deception? (1 Timothy 4:1-5) If they are in the same church does this require church discipline for rejection of means or aim which is derived in relative independence from Scripture?

Conclusion:

Therefore, we must use technique X lest we despise God.²⁰

For example,

If God has given us a technique of common grace, we despise the goodness of God by not using that tool.

Trauma-Informed therapy is a blessing of common grace (or a “common grace tool”).²¹

Therefore, we must use Trauma-Informed Therapy, lest we despise God.²²

The debate, to which this essay partially responds, has taken on the structure of this argument. The first premise has been generally affirmed without taking the trouble to define common grace. When the first premise is made *without clarity and precision*, the argument focuses on the second premise, which is where the debate most often takes place. Much of the debate has centered upon questions regarding whether “trauma informed therapy” is a “common grace tool.” There

²⁰ Lydia Kim-van Daalen writes:

For all these reasons, Christians “must be careful not to reject the good things that unbelievers do as totally evil” (Grudem, 1994, p. 665), because by doing so, they may neglect and undermine the work of the Holy Spirit through common grace. What is more, Christians have an obligation to interact with what is happening in secular psychotherapy.

Lydia Kim van Daalen, “The Holy Spirit, Common Grace, and Secular Psychotherapy,” *Journal of Psychology and Theology* 40, no. 3 (2012): 229–39, <https://www.proquest.com/scholarly-journals/holy-spirit-common-grace-secular-psychotherapy/docview/1152080064/se-2>. See, e.g.:

On the other hand, if we deny or minimize the motif of common grace, we run the risk of intellectual arrogance, a defensive isolationism from the culture in general and the academy in particular. Such isolationism deprives Christian theologians (and Christian thinkers in other disciplines) of important resources for testing and correcting our own ideas and interpretations. A devaluation of God’s goodness in common grace may also foster an anti-intellectualism that despises God’s general revelation in the created order and his providential dealings in history. Spiritually, ignoring common grace may foster attitudes of suspicion, antipathy, and contempt toward non-Christians.

“Spiritual Antithesis: Common Grace, and Practical Theology.” n.d., Westminster Seminary, California. <https://www.wscal.edu/resource/spiritual-antithesis-common-grace-and-practical-theology/>.

²¹ I have found a great deal of trauma informed therapy and theory to be based upon questionable foundations and untested theory.

²² As I will contend in the next essay, this form of argument lends itself to a Mott-Bailey type of argument.

are then two forms of disagreement as to the second premise:

2A: Common grace does not include trauma-informed therapy, because trauma informed therapy is bad science (and hence not an instance of common grace).²³

Or

2B: Common grace does not extend or include trauma-informed therapy. (A definitional argument concerning the scope of “common grace”).

Here it seems to me the dispute functions as follows: each side thinks themselves to be doing right. Each side thinks the other is in error. One side thinks ACBC is mistakenly rejecting a tool granted us by common grace. Those on the side of ACBC would think trauma-informed counseling (or whatever may be the particular matter under consideration) is not a tool of common grace (and inconsistent with other commitments we should hold as Christians; again, note the trouble which hinges upon the definition).

While that is true, it does not quite answer the question of why we are having this problem (aside from the glaring logical errors which populate this discussion on just the matter of what we are even talking about). While the dispute is “academic,” the effects of the dispute are practical. Scholars may disagree over the grammar of a long dead language without affecting the “real life” of anyone. But this disagreement has real life consequence. Is ACBC saying “be warm and filled”

²³ If one uses the “everything is common grace” argument, trauma theory is common grace. Failed physics is as much common grace as classical mechanics. Indeed, since all scientific knowledge is tentative and based upon models of reality which we hope are accurate, we cannot rule out anything at any time. How do we rule out, in a principled manner, astrology? Because it is not true? That is a modern prejudice. How do we exclude the theory of ether? Until the Michelson-Morely experiment, it was known to be true. Was the theory of ether common grace in 1886 but not in 1887? But there is no need to reach for the 19th century to find an example. Two instances which I came across while writing this article make the point a contemporary issue. Here is physics: Robert Sanders, “A Recent Fast Radio Burst Calls into Question What Astronomers Believed They Knew,” Phys.org, January 25, 2025. <https://phys.org/news/2025-01-fast-radio-astronomers-believed-knew.html>. Here is medicine: Beth Mole, “Your doctor’s office could be reading your blood pressure all wrong,” Arstechnica.com, October 8, 2024, <https://arstechnica.com/health/2024/10/your-doctors-office-could-be-reading-your-blood-pressure-all-wrong/>. The medicine article makes the point with great clarity: if something as mundane as reading one’s blood pressure needs modification, what do I say about matters as complex as human psychology? Were blood pressure readings common grace until the problem was discovered and now the new form is common grace? How does common grace advance? If it is a gift of God, do the gifts evolve? Again, the structure of the doctrine is problematic.

(James 2:16) when it fails to take up the latest discovery of modern science and then disregards such discovery when a second fails to replicate the prior test?

The Reason for a Dispute

In addition to examining the nature of a debate, it is often useful to consider why the debate even exists. A military leader may examine the manner in which the armies move about the battlefield, but the politicians consider the reason for the war. In addition to considering the structure of the argument, we must also examine the manner in which an argument gets its start.

A dispute can exist because the parties desire two opposite ends. Two teams are in a sporting match. Each team wants to win, but only one can win. That is the dispute among us biblical counselors. *We are seeking the glory of God and the good of our fellow man* (1 Corinthians 10:31).

Unfortunately, we may speak “past” one another:

(1) The parties do not fully comprehend the “opposing” side of the debate.²⁴

Or

(2) The parties do not understand what motivates the “opposing” side.

What is the “need” for this argument? What problem do the parties’ respective arguments seek to solve?

The Criticism of Biblical Counseling

When we consider the troubles we have faced in counseling (and we all have faced difficulties), the question arises, “Have I been doing this right?” We speak with someone (and as noted above, words are the only tool available to us), and they remain depressed. We speak with another, and he does not end a habitual

²⁴ For example, the Trinitarian debates in the early church fell afoul of linguistic difficulties between Greek and Latin, “When the Latins on the other hand said *una substantia in tribus personis*, ‘one substance in three persons,’ they could be heard as saying one *hypostasis* (‘person’) in three roles, in other words, of teaching Sabellian modalism.” Harold O. J. Brown, *Heresies: Heresy and Orthodoxy in the History of the Church* (Peabody, Mass.: Hendrickson, 2007) 130.

sin.²⁵ We think our technique has failed.²⁶

Our failures are of two sorts. One fault can be a matter of execution. If I have the right method but fail to execute that properly. Biblical counseling is good, but I didn't use the Bible correctly. A second sort of fault is that it could stem from my method. Should I add to my counseling model and knowledge? This essay responds to the second question. I have the correct information, I say the "right things" but do so in the "wrong manner." There is an argument that Biblical Counseling should incorporate various "clinical" *methods*. What is the wise thing to do? (Proverbs 1:7). I consider such work a function of wisdom, not technique (Proverbs 1:1-7).

I found John Flavel useful at this point. He writes in *Keeping the Heart*, "And by keeping the heart, understand the diligent and constant use and improvement of all holy means and duties, to preserve the soul from sin, and maintain its sweet and free communion with God." Our trouble arose when the breach in that communion arose (Genesis 3). The physical and psychological ills which we will be called upon to address in biblical counseling all have a root in this soil (and no, I am not contending someone who suffers from a physical disability has sinned in relation to that loss; see, e.g. Job 1-2). If a man is right with God, in communion flowing from union with Christ, it may not remedy a trouble at this time (Psalm 88), but it does lead to a means to live through such sorrow (Philippians 4:11-13).²⁷

Biblical counseling has been criticized on several grounds at various times. I am going to focus on four criticisms in this essay:

²⁵ No matter how "clinically informed" you believe yourself to be, you can only talk to the "counselee." You can tell them to do something, but you are still only talking. You cannot prescribe medication. You cannot give them electroshock. You can talk. All of us only listen and talk as far as tools go. You may pray and read with them, but you are still limited to words.

²⁶ We give far too much credit to our efforts and far too little to the Spirit who effectuates any true transformation.

²⁷ I acknowledge the criticisms which would come at this point. But now is not the time to respond to such. I am aware of the critique. This essay is merely a first stage in a response to such critique.

First Criticism: Biblical counseling is unscientific.²⁸

Implication: therefore, we should add the “science” of contemporary therapy to our counseling. This criticism is attractive, because not only does an appeal to science hold out the promise of being more “effective” as a counselor, but it also includes the added bonus of intellectual respectability.²⁹ Therefore, the reliance upon “science” includes a stated and a suppressed rationale.

Second Criticism: Biblical counseling is uncompassionate, unsympathetic.

Implication: therefore, we should integrate the Client Centered Therapy technique (of Carl Rogers, and the subsequent research along these lines) into our biblical counseling (such material is routinely included in Christian counseling). I agree there are too many who have insufficient compassion and patience. I disagree that the solution is Rogerian affirmation.

Third Criticism: Biblical counseling is not “counseling.”

On this point, I will agree for reason discussed below.

Fourth Criticism: This final issue is perhaps the key trouble. Biblical counseling is not a *technique* – it should be a better technique. I heartily agree; it is no *technique*. The nature of technique is so suffused into the culture that extricating the effects of this manner of thinking presents enormous difficulty.

If our counseling always worked, or if it “worked” as well as we expect it might, such criticism would have no purchase. Thinking that counseling should work is itself an effect of technological thinking. Counseling is a ministry. God gives the growth (1 Corinthians 3:6.) If these criticisms had no basis in reality, neither criticism would work. It is true that “biblical counseling” is not scientific in the way that Freudian psychoanalysis or Jungian psychotherapy is “science.” It is true that too many people who self-designate as a “biblical counselor” are unkind. But would integration in the manner suggested make for more faithful and more helpful counsel?

²⁸ A nontrivial case could be made that psychology as an academic discipline has been infected by a great deal of “findings” which are not science. Ignoring the barbarisms of those advocating for sterilization and mutilation of the young, there is the replication crisis of psychology. See, e.g., B. J. Wiggins and C. D. Christopherson, “The replication crisis in psychology: An overview for theoretical and philosophical psychology,” *Journal of Theoretical and Philosophical Psychology*, 39 no. 4, (2019): 202–217, <https://doi.org/10.1037/teo0000137>.

²⁹ 1 Corinthians 11:30.

FIRST CRITICISM: BIBLICAL COUNSELING IS NOT SCIENTIFIC

“Follow the science” has become “a nice knock-down argument” which one cannot gainsay.³⁰ Two corollaries of this argument are (1) that which is not “science” lacks factual support. (2) That which is “science” cannot be denied. As will be shown below, “science” refers to such matters that are empirical and repeatable.³¹

It is a tremendous mark of status to be thought scientific and scientifically literate.³² Science is not merely true; facility with science is routinely taken as proof of a “superior intellect.” Physics and mathematics are the pinnacles of such intelligence. Now psychologists have access to remarkable machines which can peer into the skull and measure how much oxygen has flooded some fold of the brain; the prestige can be shared. Psychological studies may entail statistics.³³ This

³⁰ Per Ngram review, the phrase “follow the science” was nearly non-existent prior to the Covid crisis at which point it became an unassailable argument. To use the word “science” has a rhetorical effect similar to the language of “rights”, wherein one borrows the credibility and authority of a concept and uses it as a weapon to defend something otherwise indefensible. See, e.g., 1 Thessalonians 5:3. Who doesn’t want peace and safety?; In *Alice Through the Looking Glass*, Humpty-Dumpty makes his linguistic argument in the very post-modernist manner of insisting upon his private meaning:

“I don’t know what you mean by ‘glory,’” Alice said.

Humpty Dumpty smiled contemptuously. “Of course you don’t—till I tell you. I meant ‘there’s a nice knock-down argument for you!’”

“But ‘glory’ doesn’t mean ‘a nice knock-down argument,’” Alice objected.

“When I use a word,” Humpty Dumpty said in rather a scornful tone, “it means just what I choose it to mean—neither more nor less.”

“The question is,” said Alice, “whether you *can* make words mean so many different things.”

“The question is,” said Humpty Dumpty, “which is to be master—that’s all.”

Lewis Carroll, *Alice Through the Looking Glass*, Chapter VI.

³¹ The philosophy of science is a discipline far beyond the scope of this paper. What I mean by “science” in quotation marks is not an extended consideration of Kuhn, but rather the popular, generic understanding of science, particularly as it has been enshrined in a federal court decision.

³² “Nobody likes to feel stupid. But we’ve all been there. We all can recall humbling experiences. Like that time a grad school professor semi-shamed you, with his superior intellect, in front of the class.” Drew Rick-Miller, “Pair up with a Scientist. Your Church Will Thank You,” Science for the Church, last modified October 11, 2023, accessed February 11, 2025, <https://scienceforthechurch.org/2019/02/05/pair-up-with-a-scientist-your-church-will-thank-you/>; 1 Kings 4:31-33.

³³ Andrew Lang’s quip is appropriate here, “He uses statistics as a drunken man uses lamp posts—for support rather than illumination.”

makes them true and “scientific.” But of what statistics can we biblical counselors “boast” (1 Corinthians 1:31)?

Theology has been dethroned as the queen of the sciences. It is thought a bare superstition. I have been introduced as a “lawyer,” a “professor,” and as a “pastor.” While “pastor” has some status in a church, it is not a title which commands any respect. I have received some status as “lawyer” or “professor.” “Physicist” would win the prize for being smart. So, we are tempted to squeeze ourselves next to “science” as much as possible (James 1:14; the desire to be admired is a sin which is a powerful, subtle temptation; “science” is often a loaf of bread made of stone by the Tempter; Matthew 4:3).

A biblical counselor does not even possess the status of a theologian much less a pastor. I have heard pastors speak disparagingly of the biblical counselor (1 Corinthians 12:14–18). Biblical counseling does not derive its worth or purpose from an empirically validated modification of cognitive behavioral psychology. If I had to compress our labor, it would be “faith working through love” (Galatians 5:6). But neither “faith” nor “love” can be demonstrated by an empirical “scientific law” demonstrated under laboratory conditions. To be a biblical counselor has no status, except perhaps among our ecclesiastical antechambers.³⁴

It is hard to settle for such a narrow title. When we gain some status, it is easy to want more. It is hard not to take the best seat at the meal, and if I am toward the middle, I want that seat next to the chief seat (Luke 20:46; Ezekiel 28:2).³⁵ Hankering after science is a desire for respectability. If we can call our work by that magical cognomen *science*, we could number ourselves among Freud and Maslow.

³⁴As biblical counselors, we must ourselves be biblical; we are to lead people in and through the Valley of Humiliation. If we are not humble ourselves, how shall we be Mr. Greatheart, who brings the pilgrim to the Valley and can say of our Lord, “He loved much to be here. He loved also to walk these meadows, for He found the air was pleasant.” John Bunyan, *The Pilgrim’s Progress*, Part II, chapter 6; Philippians 2:1–8.

³⁵“Spiritual pride is man’s chief temptation, and the true danger lies in the fact that a pride of this order is a real possibility only for the man with religious concern.” John E. Smith, “Editor’s Introduction,” in *Religious Affections*, eds. John E. Smith and Harry S. Stout, revised ed., vol. 2, *The Works of Jonathan Edwards* (New Haven: Yale University Press, 2009), 36.

At least since Wundt, psychology has sought to be an academic science akin to physics.³⁶ There are a number of problems with such a goal. For instance, human beings in nature and influence are too complex to create a test which focuses upon a single variable.³⁷ But scientific precision is a goal; it is to seek patterns of repetition. The biblical counselor can cast an eye over to the psychologist and think that it is perhaps truer because it is “scientific.” How does such thinking differ from the people hankering after a golden calf in Exodus 31?³⁸

For the congregant, “scientific” is often more satisfying because the name has the overwhelming imprimatur of truth. The Bible is subject to innumerable interpretations and exists in the faith of uncertain “faith,” something one believes without evidence: “Biblical Counseling rejects science, psychology and psychotherapy tools.”³⁹ Now, these extremes are not the positions of those who would engage in biblical counseling nor those who would seek such counsel. Yet the cultural weight of the positions creates an expectation.

³⁶ Alan Kim, “Wilhelm Maximilian Wundt,” Stanford.edu, published June 16, 2006. <https://plato.stanford.edu/entries/wilhelm-wundt/>. Prior to a formalization of psychology as an empirical discipline, it would be more in the vein of a speculative or rationalistic consideration of the subject, such as Kierkegaard’s work, *The Concept of Anxiety: A Simple Psychologically Oriented Deliberation in View of the Dogmatic Problem of Hereditary Sin*. It would be difficult to imagine such a project being undertaken by means of a double blind test.

³⁷ Any model built upon the premises that (1) human beings have no “inner man” (2 Corinthians 4:16), and (2) there is no sovereign Triune God ignores reality as surely as a theory of disease which knows nothing of the virus.

³⁸ I carry no illusion that I am secure from this temptation. “We beseech Thee, O LORD, to bestow upon us the ineffable bounty of Thy sweetness; to the end that, while we seek for Thy truth, we may overcome all the temptations of pride.” J. M. Neale, *A Commentary on the Psalms from Primitive and Mediæval Writers: Psalm 1 to Psalm 38*, 2nd ed., vol. 1 (London; New York: Joseph Masters; Pott and Amery, 1869), 480.

³⁹ Elaine R. Kelly, “Biblical Counseling: The Rejection of Science,” Elaine Kelly, November 21, 2024. <https://www.elainekelly.ca/post/biblical-counseling-the-rejection-of-science>, “All non-BC approaches appear to believe in the scientific merit of modern psychology on some level and integrate it into their counseling to some degree. BC believes modern psychology is a distinctively secular field of study”; Todd Morikawa, “A Case for Biblical Counseling,” The London Lyceum, December 6, 2024, <https://thelondonlyceum.com/a-case-for-biblical-counseling/>. This to overstate the case. As Charles Hodges writes, “Scientific studies can never take the place of Scripture. However, at times they can provide support for the counsel we offer and may act as a warning to those we counsel. Scientific research can’t make people change or even want to do so—that requires the gospel and grace.” “The Importance of Science in Biblical Counseling,” Biblical Counseling Coalition, April 2, 2021, <https://www.biblicalcounselingcoalition.org/2021/04/02/biblical-counseling-and-science/>; “Biblical Counseling vs Psychology: Comparing Approaches to Mental Health,” NeuroLaunch.com, September 14, 2024, <https://neurolaunch.com/biblical-counseling-vs-psychology/>.

It is sheer commonplace expectation and belief in the value of “scientific,” or perhaps more to the point, “clinically verified” therapy which drives much of the discussion.⁴⁰ As I was finalizing this paper, I came across a post on X.com which put the matter bluntly, “Biblical counseling hurts people because it rejects God’s gift of revelation and CG [common grace].”⁴¹ A more sophisticated critique claims the rejection of such “science” leads us to an overt heresy: “It strikes me that a strong form of the rule of nonscientific scope would push us in the direction of a Gnostic dichotomization of the spiritual and the physical.”⁴² Others merely rue the lack of science, “Unfortunately, interest in the scientific study of forgiveness appears to have been limited to a few scholars.”⁴³ To neglect science is to hurt others:⁴⁴

⁴⁰ Such a critique is not new. Powlison, writing of dispute which developed after Adams’ 1988 address to the International congress on Christian Counseling wrote of the stereotypes which developed of each side, “the nouthetic counselors would become sectarian, anti-intellectual incompetents.” David Powlison, *The Biblical Counseling Movement: History and Context* (Greensboro, NC: New Growth Press, 2010) 44.

⁴¹ Austin Hobbs (@AustinDHobbs) “Biblical counseling is not faithful Protestantism,” X.com, (formerly Twitter), January 17, 2025, <https://x.com/AustinDHobbs/status/1880348917843509697>.

⁴² William L. Hathaway, “Scripture and Psychological Science: Integrative Challenges & Callings,” *Journal of Psychology and Theology* 33, no. 2 (Summer, 2005): 89–97, <https://www.proquest.com/scholarly-journals/scripture-psychological-science-integrative/docview/223667599/se-2>. See, Steven L Porter, “Wesleyan Theological Methodology As A Theory of Integration,” *Journal of Psychology and Theology* 32, no. 3 (2004): 190–9, <https://www.proquest.com/scholarly-journals/wesleyan-theological-methodology-as-theory/docview/223676692/se-2>.

⁴³ Christopher Grace, “Developing a Scientific Understanding of Forgiveness,” *Journal of Psychology and Theology* 29, no. 1 (2001): 86, <https://www.proquest.com/scholarly-journals/developing-scientific-understanding-forgiveness/docview/223679202/se-2>. Of course, “scientific” when applied to psychology faces many difficulties when dealing with the complexity of human behavior. Peter T. Manicas and Paul F. Secord, “Implications for psychology of the new philosophy of science,” In R. B. Miller, ed., *The restoration of dialogue: Readings in the philosophy of clinical psychology*, American Psychological Association, 502–522, <https://doi.org/10.1037/10112-042>; cf., Anticipating the question of integration, M-S-W assure their readers that they are confident that their psychological work will comport with biblical truth: “We find that psychological research on forgiveness is easily harmonized with traditional Christian theology.” Alfred J. Poirier, “Taking Up the Challenge,” ed. David A. Powlison, the *Journal of Biblical Counseling* 18 vol. 1, (1999): 31; “Forgiveness is not primarily for personal psychological gain.” Aaron Sironi, “From Your Heart ... Forgive,” the *Journal of Biblical Counseling* 26, no. 3 (2012): 47.

⁴⁴ “In the levels-of-explanation approach discussed by David Myers (2010), the best available information in science and practice can be brought forth to help our understanding of human behavior and thus maximize our intervention strategies to improve human functioning. The sciences, not only in psychology but in medical and other fields as well, can all be put to good use to help Jake.” Thomas G. Plante, chapter 3, “Levels of Explanation,” in Stephen P. Greggo and Timothy A. Sisemore, eds., *Counseling and Christianity: Five Approaches* (Downers Grove: IVP Academic, 2012).

Similarly, your pastor's expertise is most likely not in the realm of mental health, and for serious issues of depression, anxiety, addiction, or mental illness, you need to consult a professional therapist, not a theologian.⁴⁵

This "specialist" has learned skills garnered from education and internship, confirmed with a state license, and governed by professional ethics requirements.⁴⁶

How History Bears Down Upon Biblical Counseling

There is a scene in the movie "The Quiet Man," which illustrates someone going to one's clergy. The movie takes place in rural Ireland sometime in the first part of the 20th century. A problem has arisen in the marriage between John Wayne and Maureen O'Hara. Unable to resolve the trouble themselves, they turn to their respective clergy, O'Hara to the Roman Catholic priest, John Wayne to the protestant pastor. What is striking is that neither seeks a "therapist." They naturally go to the pastor of their soul.

Indeed, in the history of the Church, the pastor was given the duty to care for the souls in his care. This understanding is embedded in the language used to describe a clergyman:

Curate. Properly, a clergyman who has the care ('cure') of a parish, i.e. in England a *rector, *vicar, or *perpetual curate. Such a clergyman is also known as the 'incumbent'. He is chosen by the 'patron' (the person or body having the right to nominate a clergyman for the parish in question) and is admitted to the cure of souls ('instituted' or 'collated') by the bishop of the diocese.⁴⁷

When we speak of "soul care," we are using language deeply embedded within the fabric of Christianity.

⁴⁵ "Biblical Counseling' Is Not Counseling," Medium, October 12, 2023. <https://joelherbert.medium.com/biblical-counseling-is-not-counseling-6d1f4857546d>.

⁴⁶ It is foolishness to think that a long-dead Jewish rabble rouser, executed for the crime of believing himself god and king, is present now and has the power to actually give comfort to brokenhearted (Isaiah 61:1-3; Matthew 11:28).

⁴⁷ F. L. Cross and Elizabeth A. Livingstone, eds., *The Oxford Dictionary of the Christian Church* (Oxford: Oxford University Press, 2005), 442.

Freud Provides Us with a Science of the Mind

The history of popular psychology cannot avoid the issue of Freud. He is not the first to treat psychology as a “science” (indeed his theories partake far more of Hegel and Spencer than any hard science).⁴⁸ He is of monumental importance to the overall discipline. His influence pervades even areas which are not directly the product of psychoanalysis. The people in your church who are unaware of anything directly related to Freud have been influenced by Freudian concepts, simplified, decontextualized, and distorted, but Freudian, nonetheless.⁴⁹

One intent of Freud was to take a field previously occupied by pastoral work and make a scientific endeavor. He succeeded in the cultural combat. Pastoral work, once his competitor to dethrone, has become intellectually subordinate to such “science.” Since that time, the weight of authority has shifted unquestionably from pastoral counsel to scientific treatment.⁵⁰

⁴⁸ Consider for instance the following line from Spencer to Freud’s concepts of punishment and pleasure, “[F]rom the worship of cannibal ancestors who delighted in witnessing tortures, there resulted the primitive conception of deities who were propitiated by the hearing of pains, and, consequently, angered by the receipt of pleasures.” Herbert Spencer, *The Data of Ethics*, part one: science, (New York: P.F. Collier & Sons, 1900)110. It should be noted that original publication of the material was from 1879. He had published *The Principles of Psychology* in 1855. Though little mentioned in contemporary literature, he was a much discussed and influential thinker during the Victorian period. I have not undertaken to determine the extent to which Freud was aware of Spencer, but Spencer’s heavily “scientific” thought certainly was much in the air during his lifetime.

⁴⁹ Contemporary psychological theory and practice may seem to be more appropriate for this thesis. However, Freud’s influence over the discipline of psychology and over the intellectual landscape generally of modern culture cannot be doubted. Herbert Marcuse has infested the Western intellect far more than most people understand. Marcuse was dependent much upon Freud for his political and sexual-political thought. Consider the subtitle of *Eros and Civilization: A Philosophical Inquiry Into Freud*. For influence of Marcuse, compare his thoughts on tolerance with contemporary events, see, e.g., “Repressive Tolerance,” Herbert Marcuse, <https://www.marcuse.org/herbert/publications/1960s/1965-repressive-tolerance-fulltext.html>.

⁵⁰ The evidence of true *scientific* effectiveness of this work is questionable. I anecdotally recall a psychology professor at UCLA mocking Freud, while I was reading Freud quite seriously in a graduate course in literature. The studies on effectiveness are not uniformly supportive. Consider, Scott D. Miller, Mark A. Hubble, and Daryl Chow, “The Question of Expertise in Psychotherapy,” *Journal of Expertise* 1, no. 2 (2018), https://www.journalofexpertise.org/articles/JoE_2018_1_2_MillerHubbardChow_earlyview.pdf. The abstract reads:

Abstract: Although it is well established that, on average, psychotherapy is effective, outcomes have remained flat for more than five decades. Since the 1990s, the effort to identify “empirically supported treatment” approaches has done little to alter this fact. Even more sobering, studies either fail to show therapists improve with specialized training or their outcomes steadily decline with time and experience. The aim of this paper is to illuminate how findings

In the 19th Century, Sigmund Freud came along. His influence is incalculable.⁵¹ Even Christian theology uses Freud's reasoning.⁵² Freud had come to conclude that certain neuroses were not the product of the physical body alone (he had begun his medical training with a thoroughly materialistic understanding of the human being), but rather arose from the "mind."⁵³ Beginning with the body, Freud had come to posit a causation for the disturbances he found in his patients; he suggested it lay in something he still called the soul, "die seele." Despite using the word "soul" he means something far different than an immortal, immaterial

from the literature on expertise and expert performance illuminate new paths for the field of psychotherapy. Results to date point to new possibilities for helping practitioners realize improvements in the quality and outcome of their work.

On page two of the essay you will read of, "The findings related to specialized training in so-called 'evidence-based' approaches round out this grim assessment. In 1993, a Task Force within the American Psychological Association (APA) was organized to identify and promote a psychological formulary—'treatments of known efficacy,'" Dianne Chambless and Thomas Ollendick, "Empirically Supported Psychological Interventions: Controversies and Evidence," *Annual Review of Psychology* 52, no. 1 (2001): 686, <https://www.annualreviews.org/content/journals/10.1146/annurev.psych.52.1.685>. Though celebrated as an advance that would finally put the field on par with medicine (Nathan, 1997), subsequent research provided little support. In hundreds of randomized controlled trials pitting one method against another, none proves superior. Bruce Wampold et al., "What Characterizes Effective Therapists?" in *How and Why Are Some Therapists Better Than Others?: Understanding Therapist Effects*, eds. Louis Castonguay and Clara Hill (2017). Another paper: Jimeoin Muecke, "The Answers Are in Our Weak Spots," *Deliberate Practice Psych* (blog), October 6, 2022, <https://deliberatepracticepsych.wordpress.com/2022/10/07/the-answers-are-in-our-weak-spots/>.

According to Miller, Chow, and Hubble, about 80%–87% of whether a client improves in therapy has nothing to do with a therapist. It's based on "client-related factors" like their strengths, life history, pre-morbid functioning and situational influences (e.g., job loss). However, the therapeutic alliance may be the most important therapist effect, which accounts for 5–8% of the outcome. In comparison, individual therapist factors such as personality and life experiences accounts for 4%–9%, building a sense of hope in therapy accounts for 4%, and the therapy technique or model used only accounts for 1% in influencing whether a client will get better. Should we consider material which is 1% influential "common grace"? For this information, I am grateful to Dr. Chen. Any mistakes in presentation or citation are solely the fault of the author.

⁵¹ It is interesting to note how anti-Christian Freud was, "On April 25, 1886, Sigmund Freud opened his first private office in central Vienna. On that Easter Sunday he placed an ad in the *Neue Freie Presse* stating that 'Dr. Sigmund Freud, docent for nervous diseases at the university, has returned from his study trip to Paris and Berlin and has consulting hours at Rathausstrasse No. 7, from 1 to 2:30.'" David B. Green, "1886: Sigmund Freud Opens a Psychiatric Office in Vienna, Nobody Comes," *Haaretz*, April 24, 2016. <https://www.haaretz.com/jewish/2016-04-24/ty->

⁵² "Psychology, Psychiatry, and the Pastor," *Bibliotheca Sacra* 132 (1975): 203. For another example, see J. Knox Chamblin, "Psychology," ed. Gerald F. Hawthorne, Ralph P. Martin, and Daniel G. Reid, *Dictionary of Paul and His Letters* (Downers Grove, IL: InterVarsity Press, 1993), 768.

⁵³ "From Medicine to Psychoanalysis." n.d. Freud Museum London, <https://www.freud.org.uk/education/resources/freud-the-physician/from-medicine-to-psychoanalysis/>.

soul. Rather, he meant “drives.”⁵⁴

Here we have the body generating the drives which give rise to the human function and motivation (compare James’ observation in James 1:13–15). In this scheme, the body’s drives are held in check by external forces which impinge upon the drives. What you accumulate from others by custom and education limit such drives; this is the “Superego.”⁵⁵ The arch repression in Freudian theology (for a kind of theology it is) is “God.”⁵⁶ The concept of “God” does not refer to the Creator but rather to a human projection:⁵⁷ “God is the superego projected into a sacred realm, made divine.”⁵⁸

From Freud, the place of the psychologist who studied the “soul” (which is just a poetic version of the subconscious mind) developed.⁵⁹ While there were others who were engaged in the academic, scientific examination of what the mind could accomplish, Freud brought a dramatically new force to the discipline. Freud did

⁵⁴ Marius Dumitrescu, *The Relationship between Body and Soul from the Perspective of Freud’s Psychoanalysis*, vol. 92, October (2013): 294–98, <https://www.sciencedirect.com/science/article/pii/S1877042813028061?via%3Dihub>.

⁵⁵ Sigmund Freud, *Inhibitions, Symptoms, and Anxiety*, trans. Alix Strachey (London: The Hogarth Press Ltd. 1936). The relationship between Freud’s theory of a superego and the work of biblical counseling is obvious.

⁵⁶ I am sure someone has written their thesis upon the ways in which Freud’s “god” is a restatement of William Blake’s “god” who destroys love (“The Garden of Love”) and forges repression in the mind:

*In every voice, in every ban,
The mind-forg’d manacles I hear.*

William Blake, “London,” published 1794. I have not taken the time to dig up such a thesis, but I am certain it exists.

⁵⁷ This is a conclusion “baked” into therapy as a science. This does not mean all therapists are atheists. I know therapists who would self-identify as Christian and certainly not atheist. However, “science” is conducted on the assumption that there is not God, probably not even the Deists’ god. “Clinical psychology comes with no consensus in its view of human beings—with one critical exception. It is unified in its belief that people are free from God. Aside from that exception, there are as many theories regarding human nature as there are counseling practitioners.” Richard L. Ganz, *Psychobabble: The Failure of Modern Psychology and the Biblical Alternative* (Wheaton, Ill.: Crossway Books) 30.

⁵⁸ Curt Raney, “Freud as a Humanist from Freud and Man’s Soul by Bruno Bettelheim, and Other Sources, n.d.,” lecture notes, St. Mary’s College of Maryland, http://faculty.smcm.edu/ccraney/restricted/PDF/Freud_as_a_Humanist.pdf.

⁵⁹ “Freud’s lasting contribution to the “science” of psychotherapy is based on the above-noted concept of the vast influential unconscious. From his perspective, to understand this unconscious is to control it. To control it is to control the self.” Edward E. Hindson and Howard Eyrich, *Totally Sufficient* (Eugene, OR: Harvest House Publishers, 1997), 115.

not even first raise the concept of the “unconscious,” but he did put his stamp upon the idea which is now firmly affixed to the man.⁶⁰

In particular, Freud’s work posited an “unconscious mind” (a soul) where the bodily drives crash into societal restraint. Such a “mind forged manacle” creates psychic turmoil, our trouble.⁶¹ It seems that we owe (in great part) to Freud the concept (and development of the concept) of an unconscious mind.⁶² While this “unconscious” mind is unavailable to our inquiry, the clever and appropriately trained person can understand the processes at play and develop a cure.⁶³

Freud took the human being and imposed a “scientific” model upon the analysis of human thought, feeling, and behavior. Rather than beginning with a human being who lives in the presence of God, who is the descendent of rebels against God and thus at best will be constantly tempted to rebel, and who will one day stand in judgment before God, we begin with a human being, a complex but *determined* animal.⁶⁴ God is merely societal projection imposed upon the malleable mind. Disentangling the strands of historical imposition and biological effects

⁶⁰ The awareness that there was knowledge of an unconscious before Freud is used by some writers to deprecate his work and character (Ellenberger, 1970; Sulloway, 1979; Masson, 1984). They insinuate that Freud’s having built upon a foundation of mesmerism (i.e., animal magnetism and hypnosis) plus prior developments of the Enlightenment, romanticism, and the physical sciences, discredits his work and even him as a person (Chapman & Chapman-Santana, 1995; Ellenberger, 1970; Sulloway, 1979; Young & Brook, 1994). Conversely, that there was a developing awareness and evolution of the concept of the unconscious for two centuries (Hunt, 1993) before Freud constructed his theories was extolled by his supporters (Alexander & Selesnick, 1966; Fine, 1962/1973). Carl V. Rabstejnek, “History and Evolution of the Unconscious before and after Sigmund Freud,” *Psychiatry: Interpersonal and Biological Processes* 73, no. 1 (2010): <https://doi.org/10.1521/psyc.2010.73.1.43>.

⁶¹ William Blake, “London.”

⁶² S. B. Narramore, “Unconscious,” ed. David G. Benner and Peter C. Hill, *Baker Encyclopedia of Psychology & Counseling*, Baker Reference Library (Grand Rapids, MI: Baker Books, 1999), 1236.

⁶³ Here is example of a cultural expectation which creates pressure and influence toward a particular end. “Let us not forget that every one of the human techniques is related to all other techniques.” Jacquel Ellul, *The Technological Society*, trans. John Wilkinson, (New York: Alfred E. Knopf, 1967). We expect efficiency and reason to be the basis for all that we do and all that is done. The images of a professional in an office probing the unconscious using arcane procedures and of the therapist helping another to deal with stress of guilt: an expert solving our “mental health” troubles, an expert in a particular technique is simply taken for granted. Yesterday, in casual conversation a friend spoke of the need for a member of her family to see a therapist to deal with feelings of despair and death. Such background beliefs and expectations cannot help but affect everyone in the culture; Stephen Thornton, “Freud, Sigmund,” *Internet Encyclopedia of Philosophy*, 2020, <https://iep.utm.edu/freud/>.

⁶⁴ That such are core beliefs of a biblical counselor cannot be denied.

requires science. Freud's theory of the unconscious continues to exert influence over the manner in which we think about being human.⁶⁵ The unconscious is a realm explored by science. And we, if we are to care for the soul, should surely know what lurks in the depths.

John Dewey and Morality

Freud's effects upon psychology and hence biblical counseling are well known. But we must not overlook Dewey's contributions to the science of human nature *and its effect upon pastoral training*.⁶⁶ The precise manner in which one influences the thought of another is difficult to determine. That Dewey had been exposed to Freud seems certain.⁶⁷ It would not be correct to see Dewey as a doctrinaire Freudian.⁶⁸ Freud's psychoanalysis is a slow dredging of unconscious sludge. Dewey, being an American Pragmatist, looks to efficiency and efficacy in his molding of human nature.⁶⁹ In his volume, *Human Nature and Conduct*

⁶⁵ John A. Bargh and Ezequiel Morsella, "The Unconscious Mind," *Perspectives on Psychological Science: A Journal of the Association for Psychological Science* 3 no. 1 (2008): 73–79, <https://doi.org/10.1111/j.1745-6916.2008.00064.x>

⁶⁶ Dr. Johnson provides extensive evidence of this issue in his book, *The Professionalization of Pastoral Care*, (Wipf and Stock Publishers, 2020).

⁶⁷ "Thomas promised to mail him, as he had just done with his friend John Dewey, what he thought were Freud's 'best papers' (Thomas, 1912)." Edward J.K. Gitre, "Importing Freud: First-Wave Psychoanalysis, Interwar Social Sciences, and the Interdisciplinary Foundations of an American Social Theory," *Journal of the History of the Behavioral Sciences* 46, no. 3 (2010): 239–62, <https://doi.org/10.1002/jhbs.20439>.

⁶⁸ "Dewey's orientation surely was "functionalist," but that term carries a host of meanings. For Dewey as for James), 'functionalism' in psychology implied that there was an essential relation between cognition and purpose. *Indeed, this idea may be taken to be a defining idea of pragmatism*. But there is more than this: For James and Dewey, it meant, as with Wundt, that intentionality was the critical feature of minded behavior." Peter T. Manicas, "John Dewey and American Psychology," *Journal for the Theory of Social Behaviour* 32, no. 3 (2002): 267–229.

⁶⁹ It is curious that Dewey both believes in the ability and the need to mold human behavior through "education" and believes in democracy:

Arguably the most important similarity between Rousseau, Dewey, and Freire, and the thing that links them together more concretely than anything else, is the similarity of their overriding projects. For each of them his model of education and his political project are mutually co-dependent. Each offers a model of education that is central to a political project—a political project that is democratic, radical, and built upon a view of the interdependence of theory and practice. Rousseau, Dewey, and Freire all share, as a part of their politico-educational projects, an unwavering faith in democracy, a democracy that extends beyond the act of voting and representative government.

Neil Wilcock, review of "Rousseau, Dewey, and Freire: A Political and Educational Method," *Metaphilosophy* 52, no. 2 (April 2021): 255; see, e.g., Larry A. Hickman, *John Dewey's Pragmatic*

(1922), Dewey addresses the issue of moral formation, human nature, with the introduction of the concept of scientific human control. As a pragmatist (along with psychologist William James, philosopher Charles Peirce, and such men)⁷⁰ he presents a practical American view that psychology should be efficient and effective (a theme which will be seen again in the section of technology).

Dewey posits the opening of a theory which will better understand a man and his environment. He first sets the stage by setting out a theory of human nature subject to internal, subjective powers.⁷¹ Working through various “schools” of thinking, Dewey concludes there is a science which will permit the study and control of such matters.⁷² Lest we fail to see how Dewey views the matter, I offer one additional quotation:

It is impossible to say how much of the unnecessary slavery of the world is due to the conception that moral issues can be settled within conscience or human sentiment apart from consistent study of facts and application of specific knowledge in industry, law and politics.⁷³

Contemporary psychological use of the concept of “unconscious” is nearer the “common sense” and practical habits of Dewey than the elaborate unconscious of Freud.⁷⁴ The work of ascertaining the various forces which will control the conscious mind has taken several fascinating turns. Work on habit formation and decision making have demonstrated remarkably effective means of transforming and guiding human behavior and opening up new avenues for research.⁷⁵

Technology (Indianapolis: Indiana University Press, 1990). But this democracy is undermined by the previous control over the populace. If someone is trained to put a ballot in a box for certain purposes, how is the act of voting any choice?

⁷⁰David Hildebrand, “John Dewey,” Stanford Encyclopedia of Philosophy, November 1, 2018, <https://plato.stanford.edu/entries/dewey/>

⁷¹John Dewey, *Human Nature and Conduct* (New York: Random House, 1922).

⁷²Dewey, *Human Nature*, 10–11.

⁷³Dewey, *Human Nature*, 11.

⁷⁴Bargh and Morsella, “The Unconscious Mind.”

⁷⁵So that I do not veer too far afield, I will only mention the work of Nobel Prize recipient Daniel Kahneman. I would point you to the field of behavioral economics for a demonstration of powerful tools being developed and remarkably robust theories to affect and effect human behavior. Should you take the time to apprise yourself of this field, you might be surprised to learn how often your own behavior has been affected by this research.

Dewey at Church

Dale Johnson has set out in detail the way in which Dewey (among other influences) was incorporated into the curriculum at Southern Seminary and thus became a standard educational model for *pastoral training* in North America. What is most important is that such training was given to pastors:

‘In all this,’ Dobbins explained, “psychology will help to an understanding of the individual himself, of the nature and the cause of his trouble, of his deep moral and spiritual needs.” The pastor, in order to be a skilled counselor, must become specialized in the field of psychology, or more particularly in the psychology of religion. Naturally, these fields of study became a staple within the curriculum at southern seminary.⁷⁶

And so, pragmatic and scientific psychology became a standard tool in “pastoral ministry.” The effects of Dewey upon the church, broadly stated, have been well documented and are extensive:

John Dewey (1859–1952) propagated instrumentalism, a pragmatic philosophical theory of knowledge concerned with observable and measurable outcomes, through which he proposed that experience offered truth. Pragmatism is employed in myriad environments and contexts, from education to business; it is also found in Christianity. Much research has examined the CGM and its methods of fulfilling the Great Commission. Many academic works have consulted influential Church Growth scholars, such as Donald McGavran and C. Peter Wagner, exploring the pragmatism employed by the movement. These works discuss the pragmatism which originated with John Dewey and its influence on American education; however, very little discussion exists regarding the influence of Dewey’s pragmatism on the CGM or the movement’s chief scholars and leaders.⁷⁷

⁷⁶Johnson, *Professionalization of Pastoral Care*, 116.

⁷⁷R. Vivian Pietsch, ed., review of “The Influence of John Dewey’s Pragmatism on the Church Growth Movement,” *International Review of Mission* 111, no. 1 (2022): 138–68.

Scientific Psychology

As a biblical counselor, I can look at the work which has been developed in this area and think we do not have extensive resources in this area. No one comes to a biblical counselor asking, “How can I get more people to buy my product, trust this politician, form or break this habit?” However, it must be noted that the use of such “scientific” technique has been suggested as means which we can incorporate into sanctification:

So, we can use secular methods, within a biblical framework and paired with biblical teaching, in such a way that they lead toward sanctification, and in doing so, they are oriented toward God’s glory and the counselee’s conformity to Christ. We are helping people move toward their God-given end, rather than simply seeking relief from pain or discomfort.⁷⁸

Such a belief from an influential figure in the field of biblical counseling demonstrates the extent to which biblical counseling can be seen as lacking the power of this common grace.⁷⁹ The development of such “scientific” theories and practice has changed society, and at a remarkable cost. A fuller study of their fundamentally anti-Christiann beliefs and purpose will exceed my space herein.

Therapy was developed as a practice to make us feel better. “Religious man was born to be saved; psychological man is born to be pleased.”⁸⁰ The science which is being proposed, is the science to please us.⁸¹ God, as both Freud and Dewey conceived, is an idea which may be used for repression (Freud) or a concept to “unify” (Dewey). “God” is useful only so long as it works. If it works, it’s “true.” But that cannot be our standard as Christians. Accordingly, it cannot be a standard as a Christian who gives counsel, certainly not biblical counsel. Russell Moore explained the two cannot be combined:

⁷⁸ Kristin Kellen, “SEBTS Counseling Professors Roundtable: As It Is and as It Could Be,” *Southeastern Theological Review* 15, no. 1 (2024): 73–86

⁷⁹ As I will mention at the end of this article, it may perhaps be more accurate to explain the pressure to “integrate” such knowledge into biblical counseling as the result most fundamentally of living in a technological society.

⁸⁰ Philip Rieff, *The Triumph of the Therapeutic: Uses of Faith after Freud* (Wilmington: Isi Books, 2007), 19.

⁸¹ As my friend Dr. Jenn Chen said in private conversation, the purpose of therapy is “symptom reduction.”

But Russell Moore, dean of Southern's school of theology, bluntly called Oates's approach a "failed" model. The effort to integrate psychology with theology failed, he said, 'because it is so naive about the presuppositions behind secular psychologies. You can't simply say you're going to integrate the science of psychotherapy with scripture because there are only sciences and theories of psychotherapy that are contradictory and incoherent.'"⁸²

THE CHURCH IN THE MID 20TH CENTURY

Thus, by the middle of the 20th century, the Church had given up its duty for the *cure of souls* to scientific experts, each adhering to contradictory scientific theories.⁸³ Surveying the retreat of the Church, Thomas Oden has provided an extensive (four volume) analysis of Pastoral Care from the primitive church through the 20th Century. Discussing the influence of "scientific" or "clinical" psychological therapy, Oden writes,

The primary values of much modern pastoral care have come directly and unapologetically from psychologists such as Sigmund Freud, Fritz Perls, Carl Rogers, Eric Berne, et al. These psychologists have at times tended to demean and undercut potential dialogue with classical sources and foreclosed any recognition of any need for awareness of them. Strict Rogerians would tend to view these classical texts largely as "introjected values," Freudians as "super-ego intrusions," Berne as inordinate "over-parenting," and Skinner as heteronomous reinforcement. Although modern pastors do well to read these psychologists, their views are not normative for pastoral care. Even if one is unpersuaded that the classical tradition contains therapeutic wisdom, at least one has a right to examine it critically. After five decades of numerous waves of various psychological hegemonies in pastoral care, it is time to give classical views a new hearing.⁸⁴

⁸² David Winfrey, "Biblical Therapy," *Christian Century* 124, no. 2 (2007): 24–27.

⁸³ Note again, that such a belief in "science" is a belief in a "scientific" way of doing a thing.

⁸⁴ Thomas C. Oden, *Becoming a Minister, Classical Pastoral Care* (New York: Crossroad, 1987), 7. See also, Powlison, *Biblical Counseling Movement*, 14.

Jay Adams

Did the Church misstep? “Nouthetic counseling was only conceived in the mind and practice of its founder during the summer of 1965.”⁸⁵ The contention that the pastor must refer to a “trained” psychologist of some sort was the initial experience of Jay Adams.⁸⁶ As we all know, Adams concluded referrals to a trained therapist were unhelpful. He largely is responsible for the existence of what we now call “biblical counseling.” The phrase simply was not used prior to Adams.⁸⁷ We are having this current discussion largely under terms which go back to Adams’ decision to use the phrase “nouthetic” or “biblical counseling.”

Having reintroduced the concept of pastoral care for the individual to the Church under the moniker “biblical counseling,” and having advocated that position in his lectures and writing, Jay Adams created space for the concept of biblical counseling.⁸⁸ The label “biblical counseling” helped to distinguish his work from the contemporary “scientific” counseling. The use of the word “biblical” admitted contains within it the implicit argument that is correct or true. The label is also attractive to Christians (because all Christians seek to be “biblical”).

In so doing, and advocating for a pastoral model drawn from the Bible, Adams developed (or rather reintroduced to the Church) a model which many, if not most, found to be anti-*scientific*:⁸⁹ Adams’s position on directive counseling stood

⁸⁵ Powlison, *Biblical Counseling Movement*, 14.

⁸⁶ Jay E. Adams, *Competent to Counsel: Introduction to Nouthetic Counseling* (Grand Rapids, MI: Ministry Resources Library, 1986), xii.

⁸⁷ This can be confirmed by referencing Google’s ngram for “biblical counseling,” https://books.google.com/ngrams/graph?content=%22biblical+counseling%22&year_start=1800&year_end=2022&corpus=en&smoothing=3. Nouthetic counseling was never used prior to Adams.

⁸⁸ He would understand the work of counseling as a psychologist provided to be within the province of the pastor: “It is no surprise, therefore, to discover that when one attempts to deal with man in ways that demand some distinction between the organic and the nonorganic, he runs into problems. These problems cannot be solved either by Skinnerian reductionism: man is only an animal (all is organic), or on the other hand by simplistic categorization: the nonorganic is the province of the pastor; the organic is the province of the physician.” Jay Edward Adams, *The Christian Counselor’s Manual* (Grand Rapids, MI: Zondervan, 1973), 438. The interaction of the body and soul does present a set of issues not neatly resolved by Adams’ division of organic and nonorganic. However, a psychologist *denying the existence of a soul and God* (and such a denial is inherent in the models of “science” even if not a position held by the psychologist) does not make for a more robust solution.

⁸⁹ Powlison, *Biblical Counseling Movement*, 171.

contrary to what was generally being advocated in pastoral education.⁹⁰

It must be understood that the methods of counseling, aside from behavioral counseling, at the time Adams was coming to his conclusions were largely non-directional. For instance, Rogers would allow the “patient” to come to her own conclusions. The psychoanalyst would spend years allowing the patient to disclose the workings of her unconscious conflicts (by means of recounting dreams, for instance). This lack of direction/instruction is still a necessary component of much therapy.⁹¹

These are “scientific” standards which are not consistent with pastoral standards. A lack of moral content is a necessary element of professional psychotherapy.⁹² This is a position which one can easily trace from Freud and through Dewey to the current time. It is also a position which has been enshrined in constitutional jurisprudence.⁹³

While a pastor could still make a moral demand upon a congregant, to do so would not be “scientific.” While the positions are more firmly in place now than 50 years ago, the scientific position has been the eradication of morality.

THE CONTENTION THAT BIBLICAL COUNSELING REQUIRES SCIENCE⁹⁴

Having set out a brief history of psychology and biblical counseling, we can consider more directly the contention that biblical counseling *requires* science.

⁹⁰ Johnson, *Professionalization of Pastoral Care*, 118.

⁹¹ “ACA Code of Ethics,” American Counseling Association, 2014, https://www.counseling.org/docs/default-source/default-document-library/ethics/2014-aca-code-of-ethics.pdf?sfvrsn=55ab73d0_1.

⁹² This is itself a moral position with spiritual value. To decide for myself, to chart my own good was offered by a certain Serpent (Genesis 3:1, et seq.).

⁹³ *Obergefell v. Hodges* 576 U.S. 644, 680–81 (2015).

⁹⁴ I hurry to make plain I am not a Luddite. I do not reject science. I do have hesitations with many things espoused in the area of clinical therapy/psychology. I have written at some length concerning some areas of psychology and my concerns. Various forms of trauma psychology, while in vogue at the moment, suffer from serious questions. Science is effectively a tool of skepticism. It is strongest when it demonstrates that certain events are not regular, repeatable events. But like a proverbial hammer, it is excellent for certain tasks and ill equipped for others.

A related contention is that biblical counseling is *defective* in that it lacks science. This contention raises a problem, depending upon how we understand the term. If we are going to be biblical, we must posit, at a minimum, a creator. However, the concept of creator is a place at which “science” draws the line. (*Edwards v. Aguillard* (1987) 482 U.S. 578, 600, fn. 2). *Edwards* was used in a later case in support of the argument that Intelligent Design is not “science.” (*Kitzmiller v. Dover Area School District* (M.D. Pa. 2005) 400 F. Supp. 2d 707, 718). A simple examination demonstrates that any number of overtly “spiritual” conceits are all permissible as “psychology.” “Take this opportunity to enrich your spiritual life. Meditate, journal, pray, create daily spiritual practices, read spiritually uplifting writings.”⁹⁵

I am not accusing those who advocate for the integration of “science” into our counseling as also advocating a denial of God. Yet, in advocating for the integration of “science,” one is necessarily making two distinct claims: (1) Scripture itself lacks pertinent information; (2) that advocating for Scripture alone is a misrepresentation of Scripture (Scripture gives us the basis to believe truth found in nature).

An Example of How the Issue May Arise

A text wrested from its home is like a child who has lost his parent and could wander anywhere. For example:

[. . .] do not be anxious about anything, but in everything by prayer and supplication with thanksgiving let your requests be made known to God. 7 And the peace of God, which surpasses all understanding, will guard your hearts and your minds in Christ Jesus.⁹⁶

Your counselee says, “I have prayed, and I don’t have peace.” Is your answer, “The Bible doesn’t work?” What if the matter is more complicated; the counselee has prayed and never received peace. She then went to a therapist who gave her

⁹⁵ “Resorting to Psychics in Uncertain Times,” *Psychology Today*, accessed June 7, 2024. <https://www.psychologytoday.com/us/blog/400-friends-who-can-i-call/202008/resorting-psychics-in-uncertain-times>. There is a strange interplay between spiritual concerns and science. See, e.g., Jason A. Josephson-Storm, *The Myth of Disenchantment Magic, Modernity, and the Birth of the Human Sciences* (University Of Chicago Press, 2017).

⁹⁶ *Philippians* 4:6–7.

advice on anxiety reduction which actually worked. She feels better now. How then can we tell her she “made a mistake?” Indeed, why do I not learn the same technique so that I might add to my work. There is an appeal to science for the purpose of showing compassion. Such was the opinion of Professor Dobbin of Southern Seminary:

The simple bifurcation sounds convincing until one grasped the foundation for expertise and understanding human nature for the pastor lies in the discoveries of psychology. And all this, Dobbins explained, psychology will help to an understanding of the individual himself, of the nature and cause of his trouble, of his deep moral and spiritual needs. The pastor, in order to be a skilled counselor, must become specialized in the field of psychology, armor reticularis and the psychology of religion. Naturally, these fields of study became a staple within the curriculum at southern seminary.⁹⁷

This comment concerns what happened nearly a century ago – that such is not a theoretical possibility or a matter from a century ago. I reference a lecture given by Brooks to Southeastern Theological Seminary in which he said,

However, given that counseling involves a diverse number of observations, skills, and topics that are not solely within the domain of spirituality Bavinck opens the door to learning from unbelievers in those aspects of counseling that appertain to this earthly life.⁹⁸

Are we holding to the ACBC statement of biblical counseling simply in a wrong way and wrong-headedly? Is it obstinate? David N. Entwistle writes in the book *Integrative Approaches To Psychology And Christianity*:

Psychology and theology—assistance with human thought—may both be concerned with human nature and functioning, but they approach the topic from different vantage points. Neither psychology

⁹⁷ Johnson, *Professionalization of Pastoral Care*, 16.

⁹⁸ I transcribed the quotation from the recorded remarks of Brooks: Nate Brooks, “Herman Bavinck, Patron Saint of Biblical Counselors: How an Old Dutch Theologian Helps Us Make Sense of Biblical Sufficiency” (lecture, RTS Charlotte Convocation 2022, Charlotte, NC, August 30, 2022), <https://rts.edu/resources/herman-bavinck-patron-saint-of-biblical-counselors/>.

nor theology consistently gets the story right, because both of them involve human thinking, but they can provide a wealth of information. Sometimes the perspective from one road or the other will prove more illuminating for a particular question. Still, both roads—psychology and theology as approaches to understanding human nature and functioning—can give us a fuller and more accurate picture than either could alone. That, in short, is the premise of this book.⁹⁹

The academic study of human behavior has produced a number of true observations (even though it is premised upon a truncated and false view of man).¹⁰⁰ Such was the hope of Dewey (as referenced above). There are observations which have been made by sociologists and psychologists who have made observations that humans who live now, in our culture, are likely to respond in certain ways. Workers using industrial machinery are less likely to be injured when they work in a well-lit room. A student is more likely to remember material when she takes notes with a pen and paper than when she types on her computer.

So, in agreement with the general proposition of Dobbins and Brooks, Entwistle contends that we should embrace the work of psychology on the ground that it too tells us about being a human being. While his tact may be seen more as a levels-of-explanation model rather than common grace, he ends in a similar place:

[I]t means that psychological explanations and theological explanations are not mutually exclusive. In fact, it suggests that both explanations are useful, the one stemming from an attempt to understand the human functioning within its natural context, and the other recognizing that human nature and functioning, though expressed in nature, have their origin and purpose rooted in the designs of the creator.¹⁰¹

Other Christian authors have made a similar argument:

⁹⁹ David N. Entwistle, *Integrative Approaches to Psychology and Christianity: An Introduction to Worldview Issues, Philosophical Foundations, and Models of Integration*, 3rd ed. (Cascade Books, 2015), 5.

¹⁰⁰ For example, imagine a Babylonian transported into the present. He could describe the shape and color of a stop sign, he could reproduce the shapes of the letters.

¹⁰¹ Entwistle, *Integrative Approaches to Psychology and Christianity*, 120.

A distinctively Christian approach to counseling and psychotherapy will have theological and philosophical underpinnings compatible with Christian faith; this will be most clearly reflected in its notions of personhood and philosophy of science. It will look at the task of the psychotherapist both from eternal and temporal perspectives and will fully acknowledge the reality of the supernatural. Sin and the consequences of the Fall will be taken seriously, as well as the reality of human and supernatural evil.¹⁰²

Arguing for an integration of the two disciplines, Entwistle notes that others have found 27 “models of integration.”¹⁰³ In his review of the different ways in which psychology and theology interact, he does mention the discipline of biblical counseling. He finds the discipline of “biblical counseling” to fall short in two fundamental ways:

This perspective seems problematic at two points. First it presumes that the Christian resources *sufficient for faith and practice* include all that is necessary for *psychological well-being*, and for which scripture functions as a counselling authority.¹⁰⁴ Second, it engages in theological reductionism by viewing the psyche primarily as immaterial (“soul”).¹⁰⁵

¹⁰² Stanton L. Jones and Richard E. Butman, *Modern Psychotherapies: A Comprehensive Christian Approach* (Downers Grove, Ill.: Intervarsity Press, 1991), 31–32.

¹⁰³ “In his analysis of current state of integration, Brian Eck identified twenty-seven models of integration.” Entwistle, *Integrative Approaches to Psychology and Christianity*, 163.

¹⁰⁴ This particular proposition is a place where I seem unable to follow Brooks. As I will explain at greater length below, these issues are not so neatly segregated.

¹⁰⁵ Entwistle, *Integrative Approaches to Psychology and Christianity*, 197. MacArthur responds (though not to Entwistle directly):

But the movement itself is certainly not taking the church in a biblical direction. It has conditioned Christians to think of counseling as something best left to trained experts. It has opened the door to a whole range of extrabiblical theories and therapies. Indeed, it has left many with the feeling that God’s Word is incomplete, insufficient, unsophisticated, and unable to offer help for people’s deepest emotional and spiritual problems. It has directed millions of Christians seeking spiritual help away from their pastors and fellow believers and into psychological clinics

John F. MacArthur, “Rediscovering Biblical Counseling,” in *Counseling: How to Counsel Biblically*, (Nashville, TN: Thomas Nelson Publishers, 2005), 3–4.

He develops this critique further a few pages on when he writes:

Regarding the proposition that MacArthur engaged in theological reductionism, it is notable that he did not portray the soul in holistic terms that could be seen as biological, psychodynamic, or social. He primarily perceives a soul that must be sanctified by moral obedience. While *moral obedience* is crucial for spiritual health, and while sinful behavior certainly bodes ill for psychological functioning, it is erroneous and injurious to see morality as the only determinant of psychological health. Furthermore, such reductionism tends not only to neglect biological, psychodynamic, and social sources of distress, but it puts the onus of responsibility for personal well-being solely on personal righteousness, while failing to recognize the importance of corporate sin, the effects of being sinned against, or the effects of living in a fallen world.¹⁰⁶

He thus portrays and conceives of biblical counseling at least as how it is presented in *Introduction to Biblical Counseling* as simultaneously scientifically defective and as theologically defective.¹⁰⁷ The lack of science is apparent on its

¹⁰⁶ Entwistle, *Integrative Approaches to Psychology and Christianity*, 201.

¹⁰⁷ The 1985 PhD thesis of Dr. Michael Firmin, "Behaviorism and the Nouthetic Counseling Model of Jay E. Adams," (professor at Cedarville College) hits both of these points in some detail. He argues Adams was not scientific but rather he was presuppositional:

First nouthetic counseling does not advocate methodological behaviorism. One reason is that Adams does not use the scientific method to derive or develop his theory. While he states he does not wish to "disregard science," Adams does not build his model on scientific data. He says forthrightly, "The conclusion in this book is not based upon scientific findings. My method is presuppositional" (236).

He concludes that Adams fails to meet the necessary criteria to be properly labeled a behaviorist. "An examination of Adams' model force. the conclusion therefore that Adams is not a behaviorist. His model does not subscribe to the necessary elements of ontological, methodological or applied behaviorism" (240).

Having established that Adams fails to meet the narrow requirements of a technical behaviorist, Firmin then proceeds to make the case that Adams developed a counseling to "include a behavioral orientation and outlook" (246). Firmin provides seven ways in which Adams show the influence of behavioral psychology. He later argues that Adams' model entails all 12 elements of an "applied behavioral focus" (251). Having made the interesting charge that Adams is both a behaviorist and not a scientific behaviorist, Firmin lays out the case that Adams has set forth a sub-biblical case, largely my contending that his (Adams's)

face: the counselors do not even have proper degrees.

The theological failing is perhaps less obvious. But Entwistle has described biblical counseling in Gnostic and Pelagian terms:¹⁰⁸ Gnostic in the understanding of a human being as a solely spiritual essence somehow divorced and segregated from the body; Pelagian in that what is required is bare moral obedience.¹⁰⁹

The criticism that biblical counseling is “unscientific” can be modified into the contention that biblical counseling is an uncritical thrall of outdated science. Jay Adams (one could argue) tried to baptize a slimmed down version of Mowrer’s behaviorism with Bible verses appended. Indeed, the recent argument by Brad Hambrick is that there have been two iterations of biblical counseling moving on from Adam’s behaviorism to Powlison’s recognition of the affections. Hambrick, and those with whom he works, are seeking to establish a third generation which will possess a better scientific basis, being grounded in verified clinical practice.

model is *the* not a biblical organization of the material: “he recognizes only behavioral methodology as legitimate Christian counseling. This focus causes him to neglect other equally important (yet non-behavioral) emphasis” (277).

Firmin thus makes a non-trivial case that Adams’s counseling model is both not sufficiently scientific and biblical. It is almost both but fails to achieve either end. Michael Wayne Firmin, “Behaviorism and the Nouthetic Counseling Model of Jay Adams,” (PhD diss., Bob Jones University, 1988).

¹⁰⁸ By gnostic, I do not mean any developed theory of Gnosticism which “by means of specious and plausible words, they cunningly allure the simple-minded to inquire into their system.” Irenaeus of Lyons, “Irenæus against Heresies,” in *The Apostolic Fathers with Justin Martyr and Irenaeus*, ed. Alexander Roberts, James Donaldson, and A. Cleveland Coxe, vol. 1, *The Ante-Nicene Fathers* (Buffalo, NY: Christian Literature Company, 1885), 315. Rather, the general hard cleavage between body and spirit, “For the Gnostics there were two realms: a realm of light and a realm of darkness. They judged the present material world, which included the human body, as evil.” Patrick J. Hartin, “Gospel of Thomas,” ed. John D. Barry et al., *The Lexham Bible Dictionary* (Bellingham, WA: Lexham Press, 2016.)

¹⁰⁹ Nomism in its various forms, such as Judaism, Pelagianism, Semi-Pelagianism Arminianism, Neonomianism, and Rationalism, deems the intellectual, moral, and æsthetic influence of the Word as the only influence that can be ascribed to it. It does not believe in a supernatural operation of the Holy Spirit through the Word. The truth revealed in the Word of God works only by moral persuasion. In some of its forms, such as Pelagianism and Rationalism, Nomism does not even feel the need of a special operation of the Holy Spirit in the work of redemption, but in its more moderate forms, such as Semi-Pelagianism, Arminianism, and Neonomianism, it considers the moral influence of the Word insufficient, so that it must be supplemented by the work of the Holy Spirit Louis Berkhof, *Systematic Theology* (Grand Rapids, MI: Wm. B. Eerdmans publishing co., 1938), 611.

The Third Place for Integrating Psychology

By ending with sufficiency in Christ, we come to sufficiency in Scripture. Either Scripture is sufficient or Scripture plus “psychology” is needed:

Psychology is no more a science than the atheistic evolutionary theory upon which it is based.¹¹⁰ Like theistic evolution, “Christian psychology” is an attempt to harmonize two inherently contradictory systems of thought. Modern psychology and the Bible cannot be blended without serious compromise to or utter abandonment of the principle of Scripture’s sufficiency.¹¹¹

I would certainly phrase my critique with a different nuance. But it is true that a model of the human being which denies the soul and God will have a rough fit with the Bible.

Sam Williams as editor of the most recent edition of the Southeastern Theological Review in an essay entitled, “Introduction: Cracks and Light in Christian Counseling” writes an effective (even if not deliberate) response to the broadside on “Modern psychology”:

The first article by Nate Brooks aims to fix a crack in some versions of biblical counseling that, according to Brooks, operate under a “maximalist” understanding of the sufficiency of Scripture. He proposes this can be repaired by a reappropriation of the many benefits of God’s common grace, applied by means of a “theologically robust theory of integration.” He contends, “Integration is no less reliant upon a theological method than is biblical counseling, and biblical counseling is no less reliant upon a method of integration than is Integrationism.” From our perspective, it doesn’t seem to be much of a theological stretch to assert that because both special grace or revelation and common grace or general revelation are divine, they are intended by God to be integrated, to cooperate with, and to complement one another. Yet we must preserve Scripture as our “first

¹¹⁰ Psychology as an academic discipline is often not explicitly based upon evolution. However, to constitute a “science” is to presume there has been no agency in the creation, and all things can be reduced to physical objects, however small.

¹¹¹ MacArthur, “Rediscovering Biblical Counseling,” 14; Powlison, *Biblical Counseling Movement*, 144–145.

truth discourse,” always granting it epistemic primacy and finality¹¹².

In other words, we should integrate the two disciplines, but not “too much.”¹¹³

A Tentative Assertion

It is impossible to know more than what is said. I am not the God who can see the heart (1 Samuel 16:7). The Neo-integrationists or “clinically informed” or “redemptive” biblical counselors expressly state these CGTs (Common Grace Tools) will permit us to properly address matters which hitherto have lain beyond our competence:

However, the reality of the real world means that there is a great need for church-based counselors to continue to help those in need of compassionate care and counsel that might not otherwise seek out care else-where or that have struggles that are more spiritual in nature. Christians across the spectrum of counseling and care need to remain sapiential in their practice of caring for those in need of Christ’s care. Licensed counselors need to remain grounded in the truth of Scripture and be conversant with theological literature on a variety of topics such as anthropology, pneumatology, and soteriology. The church-based counselor needs to recognize that being practically wise in their care and counsel involves recognizing the relevant “clinical” research and evidence-based practices that are used to treat individuals with the assortment of afflictions people will face.¹¹⁴ Finally, being sufficiently sapiential in our practice of counseling also means we all need to recognize our limits and collaborate with others when we find ourselves overwhelmed and underwater. In the end, it is Jesus

¹¹²Sam Williams, “Introduction: Cracks and Lights in Biblical Counseling,” *Southeastern Theological Review* 15, no. 1 (2024): 1–6, <https://doi.org/https://www.sebts.edu/wp-content/uploads/2024/04/Updated-15.1.pdf>.

¹¹³A great deal of the neo-integrationist movement appears to be operating on an ad hoc basis of what is useful and why. This is misplaced enthusiasm. Careful consideration of the relationship between disciplines and anthropologies requires more than proof that Mower was problematic and a couple of PET scans.

¹¹⁴The entire concept of “evidence based” practice does not present much evidence supportive of effectiveness. Jeffrey Lohr, Bunmi Olatunji, and Grant Devilly, “Threats to Evidence-Based Treatment of Trauma: Professional Issues and Implications,” *International Review of Victimology* 15, no. 2 (2008): <https://doi.org/10.1177/026975800801500204>.

who calms the storms, pulls us out, and holds us all together.¹¹⁵

Such contentions raise direct questions about science and the incorporation of such research in biblical counseling. If I knew that this counselee was the child of war refugees, how would my counseling change in the manner I approached them? How much or what “secular” research must I have to be gracious and a good biblical counselor?

Do I lack compassion for the sorrow and pain of this counselee if I simply do not “educate myself” on not just the personal history of this person but also the manner in which epigenetic factors express gene expression in subsequent generations? For certainly such is science. Every day seems to provide new discoveries on the nature of gut bacteria and the nervous system.

And if we are truly going to render a comprehensive integration, should we not require positions on the host of philosophical issues concerning the nature of the human being? I could contend that the neo-integrationists are woefully ignorant of the position of Henry of Ghent on intellect and will (which has unquestionable affect upon the method and content of counseling).

The Common Grace debate is driven by the contention that at the very least we must make use of neurology (LaPine also argues for Thomas) as a scientific addition to our biblical counseling.¹¹⁶ But observation can only reach so far. I ask these not as trivial “gotcha” questions but as real inquiry. If I need neurology, *on what principle do I exclude metaphysics of Thomas or the existentialism of Kierkegaard?* In 100 years, our science will be outdated, but the Dane (Kierkegaard) will still be current. Merely calling what I like “common grace,” as if that solved anything, is logically indefensible, even if it is rhetorically satisfying. To put the matter with

¹¹⁵Alex R. Wendel, “Sufficiently Sapiential Soul-Care: A Working Paper in Therapeutic Theology,” *Southeastern Theological Review* 15, no. 1 (2024): 21–31, <https://doi.org/https://www.sebts.edu/wp-content/uploads/2024/04/Updated-15.1.pdf>; Kristin L. Kellen, “Generational Dysfunction and Fulfillment in Christ (Matt 1:1),” *Southeastern Theological Review* 15, no. 1 (2024): 21–31, <https://doi.org/https://www.sebts.edu/wp-content/uploads/2024/04/Updated-15.1.pdf>.

¹¹⁶“As just suggested, the first step in my argument is to get a more nuanced psychological language or conceptual system on the table, that of Thomas Aquinas. I wish to demonstrate how Aquinas’s psychology is holistic, involving plasticity, and tiered.” Matthew A. LaPine, *The Logic of the Body: Retrieving Theological Psychology, Studies in Historical and Systematic Theology* (Bellingham, WA: Lexham Press, 2020), 41.

more clarity: philosophers coming from a Christian position (even as diverse as a medieval theologian or Kierkegaard) have a better claim upon our practice of soul care than a contemporary neurologist.

To begin with the contention that biblical counseling requires “science” is not a door which can be easily closed. In fact, what do you propose to say when psychedelic use is standard scientific practice (which it will soon be)? To turn the contention on its head, if I train someone in a biblical understanding of their condition based upon the “heart” rather than brain-body, I am uncompassionate?¹¹⁷

HOW THE “UNSCIENTIFIC” CHARGES LEAD TO THE UNCOMPASSIONATE CHARGE

As noted above, there are two primary criticisms which are made against biblical counseling. One argument is that biblical counseling is unscientific. I have addressed that charge above. There is a second charge which follows: biblical counseling is uncompassionate. The two are intimately related. If the purpose of “counseling” is to change thoughts and feelings by changing behavior (alone or first), then a counselor may run roughshod over feelings to reach behavior. “Do this and live,” you’ll be fine in the end.

It must be admitted that far too many people who claim to be practicing biblical counseling do talk like this. They give directions and insist on behavior. Their counsel is devoid of love. Their counsel sounds far more like Moses in *The Pilgrim’s Progress* than Christ weeping at the tomb of Lazarus (John 11:35).¹¹⁸

The charge that biblical counseling is “uncompassionate” can be rephrased to, “it is uncompassionate” because it ignores “science.” A related claim is that it is uncompassionate because it relies upon an outmoded behavioristic science. But how do I rate compassion on a scientific scale? It would take little work to show

¹¹⁷ As I have wrestled with these various issues and sub issues and arguments, I have come to genius of the “heart” as a manner of discussion the interiority of human life. An argument in favor of the “heart” over gut bacteria and epigenetic generational affects will have to wait for a subsequent essay.

¹¹⁸ “That man that overtook you was Moses. He spareth none; neither knoweth he how to shew mercy to those that transgress the law.” John Bunyan, *The Pilgrim’s Progress: From This World to That Which Is to Come* (Oak Harbor, WA: Logos Research Systems, Inc., 1995), 89.

horrors of science in psychology.¹¹⁹

Too many people who claim the name biblical counselor (often without any formal counseling training) are behaviorist and unkind. The church is filled with parodies of Jay Adams.¹²⁰ I and many people I know can testify to callousness infecting the mind and practice of many. I will stipulate, that there are truly unsympathetic men in the pastorate who are not elder qualified, much less compassionate. (And plenty of women are capable of callous behavior in the name of “biblical counseling.”)

The criticism of nouthetic counseling on this ground is so common it is even cited in the topic’s Wikipedia page.¹²¹ The charges which hinge upon biblical counseling’s faults—that is unscientific and (thus) uncompassionate—are not hard to obtain.¹²² A search engine will do just fine if you would like to find more examples. A more subtle version of this critique has been made by Brad Hambrick:

Here’s one answer. An emphasis on character formation and narrative reframing can easily result in the neglect, or sometimes even the denigration, of relief-oriented strategies in counseling. It can be construed that pursuing relief is to neglect, or even rebel against, pursuing Christlikeness. That is what critics of biblical counseling hear in David’s quote: medical relief from a sleep disorder is tangential

¹¹⁹ “Mystery Solved: We Now Know What Happened to Little Albert,” *Monitor on Psychology*, American Psychological Association, last modified January 2010, accessed May 20, 2024, <https://www.apa.org/monitor/2010/01/little-albert>.

¹²⁰ Powlison, *Biblical Counseling Movement*, 43, 113, 175. I did not have the honor ever meeting Mr. Adams. Those I know who knew him, speak well of him and do not accuse of personal unkindness. I have had friends of mine whom I know to be remarkably gracious be accused of unkindness which is untrue. I have spent myself on behalf of counselees who have been unkind. As a friend warned me, the person whom you give yourself most to and most for will accuse you of being loveless.

¹²¹ “Nouthetic Counseling,” Wikimedia Foundation, last modified June 9, 2024, accessed August 24, 2024. https://en.wikipedia.org/wiki/Nouthetic_counseling#CITEREFClintonOhlschlager2002.

¹²² Again, a number of examples could be provided. But the discussion about sin (1) can be spoken of in a manner which is harsh and judgmental of the sort, “Which say, Stand by thyself, come not near to me; for I am holier than thou” (Isaiah 65:5 KJV. You should learn the context for that verse). Yet, allowing for such misuses of the Bible, we must be clear: “There those who could rationalize their behavior on the basis of low self-esteem or of unconscious responses to hidden victimization.” Jim Owen, *Christian Psychology’s War on God’s Word* (Eugene: Wipf and Stock Publishers), 30.

to the work God did in David's soul.¹²³

He does not phrase this in terms of an accusation or a deliberate unkindness. There is nothing of a tone of judgmentalism. Rather, he couches his offer as providing a more therapeutic concern for ease of the counselee:

As just one example, where in our biblical counseling literature do we teach how to recognize the signs that a sleep disorder may be contributing to someone's struggle with emotional regulation and resilience? Our theology clearly teaches that the body has profound influences on the soul, but our assessment and intervention literature does not equip us to minister the implications. We acknowledge these realities, but do not offer instruction on how they impact our approach.¹²⁴

HOW THE WORD "COUNSELING" HAS CHANGED

Next, I will take a brief look at the evidence to show the factors which seem to drive the push toward integration. One of which is the changing nature of the word "counsel/ing." The word itself has a long history in the English language wherein counsel was a good word to describe what a pastor does with a congregant when he counsels.

The word was adapted by secular psychologists to describe what they do with clients. The psychologists then took over the space occupied by pastors to give

¹²³ "The next Generation of Biblical Counseling: A Tribute to the Legacy of David Powlison," Brad Hambrick, accessed August 28, 2024, 6, https://bradhambrick.com/wp-content/uploads/2024/06/A_Tribute_to_the_Legacy_of_David_Powlison.pdf.

¹²⁴ "The Next Generation of Biblical Counseling," Brad Hambrick, 90. I will admit to a substantial question about legality is raised by this contention. It is true that most (I have not confirmed with every state) have a statutory exemption for psychotherapist licensing for those engaged in religious work. When one's "counseling" entails advice about "gastrointestinal systems" (or other instances he provides in his essay), one is engaged in behavior which is not likely to be considered by a hostile administrative agency to be "religious" work and rather to be "psychotherapist/medical" work. I am not saying such concerns lie beyond the terms of Christian life. The Mosaic Covenant contains instructions on what to eat/not eat. I would defend Mr. Hambrick against a charge that he has violated the law. There is also the constitutional defense. But we must admit there appears to be a difference between eating advice and "You become what you worship."

“counsel”. However, what psychologists did was similar to pastoral counsel. When Jay Adams sought to retrieve the pastoral work of counseling, he also retrieved the word.

But by the time Adams had retrieved the word, its meaning had shifted. I contend that the change in meaning over time causes a not-quite articulated draw upon some biblical counselors to “counsel” like a therapist, not counsel like a pastor.¹²⁵ For instance, Alex R. Wendel, in his recent essay, “Sufficiently Sapiential Soul-Care: A Working Paper in Therapeutic Theology” writes:

Because of this great need to demonstrate the dignity of people and their dire need for God, there is an apologetic register to Christian counseling, especially in the “secular” or licensed arenas. Rather than pursuing a conflictual stance with regard to “secular counseling” there is a need for Christians to inhabit and help to shape the broader world of counseling.¹²⁶

My only purpose for this example is to demonstrate that the word “counseling” comes (now) embedded with the concept of “therapy” (or “counseling” as the word is used by a clinical psychologist). When we say, “biblical counseling,” we implicitly say, “biblical therapy” (whether we intend to or no). The word “counseling” seems to overwhelm the modifier “biblical”. The pressures of “science” and “empathy” have the effect of modifying “biblical”.

CONCLUSION

What Does this Prove

As stated above, this essay aims to prove the existence of criticisms which are sufficiently forceful to encourage one to search elsewhere, beyond the Bible, for solutions for counseling which would be both more scientific and more compassionate.¹²⁷ The subtle pressure of the title biblical *counselor* moves our

¹²⁵An industrious graduate student might take up for project evidence and show how the change in meaning of the title “counselor” affects Christian “counselors” in terms of their self-conception.

¹²⁶Wendel, “Sufficiently Sapiential Soul-Care.”

¹²⁷Lest anyone which counter an argument I am not making, I will make this point plain. The phrase “common grace” is used in any number of ways. To use the phrase in its most expansive

thinking toward therapy.

I will stipulate that biblical counseling is not scientific. It does not aim to be scientific. The scientific criticisms may at times be hard to follow (“He is not a behaviorist, but sure acts like a behaviorist without the science”), but it is real and persistent.

While the talk is in terms of “science,” the intellectual “air” is run about the premise that to do a thing correctly is to use the right *technique*.¹²⁸ Another way to understand the draw toward various “common grace” clinical methods and analysis can be found by analyzing the debate as a matter of “technique.” The concept of “technique” is related to the desire for “science.” “Technique” is the most efficient means to make use of scientific knowledge. As I said, this is a more fundamental issue than even the criticism of “science” or a lack of compassion. The *right* technique is “scientific,” it is “compassionate” (or more correctly, empathetic), and makes one a proper “counselor.”

Having read, communicated, and considered these matters at length, I believe the debates over common grace and the “tools” from common grace which we should use are a proxy war. During the Cold War, the Soviets armed one side and the Americans the other. The sides fought one another, but never directly. We debate over common grace, but the real conflict lies elsewhere.

manner, the use of any language is “common grace.” Any coherent thought, indeed, any thought could be “common grace.” If I read the original text of the Scripture in the original language straight from Paul’s hand, the Greek and the parchment and the ink are all common grace. No one is objecting to the use of words. The disagreement is over epistemology and methodology and purpose. That there are similarities between the method of modern therapy and historical Christian soul care practice is not explained by modern “science,” but by the imitation of modern therapists taking from Christian practice. Freud was none too secret about his purpose. I also fear the use of the word “grace” in the phrase seems to entail some super added help by God for certain people (beyond restraint of sin). I have been pondering an explanation which may be more workable (at least for our work). When one discusses how to build a bridge, he will face different questions than one asking, “How does the soul function?”

128 An entire essay could be devoted the concept of “technique” driving felt need for integration. Jacques Ellul, *The Technological Society*, trans. John Wilkinson (Vintage Books, 1964, New York: Random House, 1964); Jeffrey P. Greeman et al., *Understanding Jacques Ellul*, 1st ed. (The Lutterworth Press, 2012), 22. See, e.g., Robert L. Leathy, *Cognitive Therapy Techniques: A Practitioner’s Guide*, 2nd ed. (New York: The Guilford Press, 2017).

I will stipulate that biblical counsel can be direct and even painful. For example, the public element to call one who is unrepentant to repent can be painful.

I will stipulate that the criticism is real and often valid (I am personally struck by how Mowrer was a deeply troubled man whose influence upon Adams was likely complex in ways that Adams was not fully aware).

My disagreement lies not with the assertions that biblical counseling as practiced by the contemporary church is often lacking. I do not reject the criticism, but I do see the solution of a move toward therapeutic aims or means as compromising. The “faults” of biblical counseling post-Adams lie not with common grace but with being *insufficiently biblical*. Part of solving problematic thinking is to first identify the error. I am not critical of Adams’s contention that the we behave has profound cognitive, emotional, and spiritual value and effect. I can even agree with Hambrick that there is more to do. We have neither ransacked the Bible nor the enormous reflection of centuries of Christian work and mediation on relevant matters.

However, I do believe that the biblical counseling movement has been harmed and distracted by its attraction to the “scientific-kindness” of secular therapy. Our fault lies not in “failing” to sufficiently ape “common grace” theories or techniques.



The Association of Certified Biblical Counselors is committed to championing the sufficiency of Scripture for the Church as she engages the problems people face, speaking the truth in love. Christians have the responsibility to bring the truth of God to bear on the problems of everyday life, and to embody that truth in a life of love.

At ACBC, we seek to strengthen the Church to speak the truth in love by providing a quality training and certification process, a global network of like-minded individuals and institutions, and a source of practical and biblical resources for the Church.

In short, we seek to bring biblical solutions for the problems people face, upholding that the method God has given to do this is truth in love.

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