

Counsel the Word

The Institute of Soteric Counseling

The Reign of the Therapeutic—Someone's Asking Questions

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Something's going on at *The Los Angeles Times*. On New Year's Day, the paper ran not one, but two articles questioning America's therapeutic culture and addiction to the latest psychological or psychiatric fads. When a major American newspaper publishes two articles in one issue making this essential point, we ought to take notice.

In "Psychiatry's Sick Compulsion: Turning Weaknesses into Diseases," psychiatrist and philosopher Irwin Savodnik of UCLA argues that his own field of psychiatry is infected with a preoccupation that focuses on illusory diseases. Referring to the holiday season, Savodnik explains that the American Psychiatric Association [APA] has now identified a new disease—seasonal affective disorder, or SAD—and this may explain why some people feel depressed, frustrated, or elated during and after the Christmas season.

"As Americans rush to return Christmas junk, bumping into each other in Macy's and Best Buy, the psychiatric association ponders its latest iteration of feeling bad for the holidays," Savodnik informs. "And what is the association selling? Mental illness. With its panoply of major depression, dysthymic disorder, bipolar disorder and generalized anxiety disorder, the association is waving its . . . flag to remind everyone that amid all the celebration, all the festivities, all the

exuberance, many people will 'come down with' or 'contract' or 'develop' some variation of depressive illness."

What Savodnik describes is part and parcel of what many observers identify as the diseasing of America. Problems large and small, real and imagined are packaged as new diseases to be treated with everything from seminars to pharmaceuticals.

Irwin Savodnik is a well-known critic of modern psychiatry. Last year, he traced what he saw as positive developments in Russian psychiatry, even as he lamented that his colleagues in America are "moving in exactly the opposite direction." As he explained: "For the better part of the 20th century, psychiatry was dominated by psychoanalysis, so much that in the public eye the two were nearly synonymous. Five-day-a-week-on-the-couch treatment was de rigueur. Psychoanalysts authored most of the prominent textbooks in the field. Gradually, though, psychoanalysis, under attack from some sectors of the intellectual community, perceived as too expensive and unscientific, began to lose its grip on the psychiatric community." Abandoning psychoanalysis, American psychiatrists turned to drugs. "In the past 30 years," Savodnik suggests, "the overriding ideology of American psychiatry has shifted to a biological model. Psychopharmacology has become its therapeutic backbone."

In his most recent article, Savodnik points to the *Diagnostic and Statistical Manual of Mental Disorders* [DSM-IV], published by the APA. He warns that ads have recently appeared in psychiatric journals proposing that shyness be diagnosed as a new "syndrome" that will be soon on its way to becoming a disease.

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Savodnik bets that the next edition of the DSM-IV will include shyness as a disease.

“As it turns out, the association has been inventing mental illnesses for the last 50 years or so,” Savodnik recounts. “The original diagnostic manual appeared in 1952 and contained 107 diagnoses and 132 pages, by my count. The second edition burst forth in 1968 with 180 diagnoses and 119 pages. In 1980, the association produced a 494-page tome with 226 conditions. Then, in 1994, the manual exploded to 886 pages and 365 conditions, representing a 340 percent increase in the number of diseases over 42 years.”

Are we actually to believe that Americans are now afflicted with 258 “conditions” that did not even exist (or were absolutely unknown) in 1952?

A quick look through the DSM-IV will reveal that almost every living human being is afflicted with one or more of the “conditions” described in this encyclopedia of mental and emotional problems. More than anything else, this just goes to prove the adage of the psychotherapeutic industry-- you are either in therapy or in denial.

Most tellingly, Savodnik understands that more is at stake here than the professional concerns of psychiatry. His field, he acknowledges, “is a leading indicator, a barometer of social practice and political change.”

Political change is a big part of the equation. As Savodnik wrote in *The Los Angeles Times*, “It’s a natural step from using social and political standards to create a psychiatric diagnosis to using them to influence public policy.” Savodnik’s acknowledgement that politics plays such a big part in the development and diagnosis of psychiatric disorders is itself remarkable.

The “triumph of the therapeutic” so well described by Philip Reiff discounts personal responsibility and flies in the face of the Christian worldview. “Pathology has replaced morality,” Savodnik asserts. “Treatment has supplanted punishment. Imprisonment is now hospitalization. From the moral self-castigation we find in the writings of John Adams we have been drawn to Woody Allen-style neuroses. Were the psychiatric association to scrutinize itself more deeply and reconsider its expansionist diagnostic programs, it would, hopefully, make a positive contribution to our culture by not turning the good and bad into the healthy and the sick.”

In essence, Savodnik’s article is a shot fired across the

bow of his own chosen profession. But *The Los Angeles Times* also published a second article on a related theme in the same edition. In “Self-Help’s Big Lie,” Steve Salerno, author of *SHAM: How the Self-Help Movement Made America Helpless*, argues that the overselling of personal empowerment and self actualization “may be the great unsung irony of modern American life, destined to disappoint as surely as the pity party that it was meant to replace.”

Salerno’s target is the self-esteem industry that, he suggests, has “been unambiguously disastrous” for the country. He describes this overselling of personal empowerment as “the hyping of hope” that replaces personal responsibility and achievement with the illusion of self-worth based upon nothing at all.

“Self-esteem-based education presupposed that a healthy ego would help students achieve greatness, even if the mechanisms necessary to instill self-esteem undercut scholarship,” Salerno explains. “Over time, it became clear that what such policies promote is not academic greatness but a bizarre disconnect between perceived self-worth and provable skill.”

Thus, Salerno blames self-esteem gurus such as Dr. Phil McGraw, Oprah Winfrey, and Tony Robbins for leading the nation astray by promising that self-esteem is the tonic for all problems. Salerno cites management consultant Jay Kurtz, who argues: “The most dangerous person in corporate America is the highly enthusiastic incompetent. He’s running faster in the wrong direction, doing horribly counterproductive things with a winning enthusiasm.”

Savodnik and Salerno write from a basically secular worldview. In their own way, each sees the modern therapeutic industry as a self-deluding mechanism for inventing illusory diseases, medicalizing problems with psychotropic drugs, and deluding Americans into thinking that their problems have nothing to do with their own personal responsibility and moral actions.

Christians understand an even deeper problem with the therapeutic industry and the self-esteem fad. As human beings, we cannot possibly understand ourselves by merely observing ourselves and our fellow humans. We are not autonomous creatures and our worth is not rooted in our own existence, or in any skill or quality we may possess or develop.

Instead, we find our worth in the knowledge that we are

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made in the image of God, and we find our health only in knowing Him and honoring Him. Of course, this is made possible only through the redemptive work of Christ, who willingly assumed human flesh and went to the cross as a demonstration of humility, not vainglorious self-esteem. As psychiatrist Paul Vitz reminds, “self-esteem is a deeply secular concept.” The essence of the Christian worldview is not self-esteem, but human dignity. But then, a confident belief in human dignity, and a dismissal of the cult of self-esteem, may soon show up as a “disease” in a forthcoming edition of the mental health manuals

Homework

J. R. Ensey

Not all the help that troubled relationships need can be transmitted in a series of counseling sessions in the church office. Much of our responsibility centers around helping people help themselves. They do not need to stay plugged into a counselor for months or years. More than a few have become “addicted” to therapy sessions and to the attention that they receive from the pastor or counselor.

One of the ways to teach people how to solve their own problems is to assign them homework. If possible put an extra week between sessions and call for assignment work to be completed and handed in during that period. Since much of our counseling has to do with marital or familial relationships, find a passage that deals with interactions on those levels and require some study and writing.

Without sounding overly simplistic, we must concede that most problems, including those that fall into the categories just mentioned, are best dealt with as emanating from misunderstanding, or unforgiveness, lack of mercy, or some kind of breakdown in one's spiritual life. The problem needs to be attacked at its source, not merely at its outlying symptoms.

Paul submitted a classic example of spiritual victory in his efforts to keep the Colossian saints on the right path in Colossians 3:5-25. Reading through that section of inspired Scripture, one can find a number of admonitions that can be expanded on in a homework assignment. The source of a number of personal problems are mentioned there. Read the verses in both the KJV and the NIV. Here are some sample questions that might be

assigned from this passage:

- 1) What five things did Paul indicate were expressions of our “earthly nature”?
- 2) Why did he say that greed was the same as idolatry?
- 3) In verses 9 and 10, what are the expressed differences between the “old man” and the “new man”?
- 4) Define “forbearing” in v. 13.
- 5) What is the “bond of perfectness” [that which “binds them together in perfect unity” -NIV] spoken of in verse 14?
- 6) In what ways can we fulfill verses 18 and 19?
- 7) How can parents “provoke” their children to wrath (v. 21)?
- 8) Have you ever seen verse 25 fulfilled? Where? How?

Those are just a few examples of how the application of the Word of God can help people see the sources of their problems and the solutions from the Bible.

As David said, “Thy statutes are my delight; they are my counselors” (Psalm 119:24). They should be ours also.

The Power of Forgiveness

By Ilene K. Dewar

“And forgive us our debts, as we forgive our debtors.... For if ye forgive men their trespasses, your heavenly Father will also forgive you.” - Matthew 6:12, 14

Seldom do people get into the true dynamics of forgiveness. Forgiveness has a high price tag and few are willing to pay the cost. Most of us would much rather hash and re-hash the matter. We want to continually think about the offense and the offender. More than think about the offense, we want to make sure that, as many as will listen, will hear what has happened to us. After all, our feelings have been hurt and we need all the sympathy we can get for our wounds.

If the truth be told, we don't really want to forgive our offender. We would much rather feel hurt and wounded because our pride has suffered. We also feel justified in thinking that our offender needs to suffer. It's not retribution we seek, its pity; turn about

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is fair play

In order to deal with the issue of forgiveness, it is necessary to consult the expert. No, not Dr. Freud, Dr. Phil, or Dr. Laura, but the greatest Forgiver of all times, Jesus Christ. Jesus addressed the question of forgiveness in several biblical passages, including Matthew 18:15-35. There the Lord deals not only with the offender, but also with the offended. Healing cannot occur when all we do is think about, stew about, and rehearse the offenses. We must stop giving ourselves permission to think about the offender and the offense. Healing will occur much more quickly when the mind and heart are set on helping our offender be forgiven, than on our rights of restitution.

In the Matthew 18 narrative, Peter asks the Lord how many times he must forgive a brother who has sinned against him. When Jesus told us to forgive seventy times seven, he wasn't referring to the number 490. He was saying, make forgiveness a way of life. Practice it daily. Have a heart that seeks the offender's reconciliation to God, to the church and to himself, rather than seeking for the proverbial "pound of flesh."

We should look at our offenders and their offenses from the standpoint of our failures and our offenses against God and our fellowmen. Paul says, "Looking diligently lest any man fail of the grace of God; lest any root of bitterness springing up trouble you, and thereby many be defiled;" Hebrews 12:15. Have we already attained perfection? Have we already made the grade? Of course not, but we are striving for the mastery of our own life...lest we fail God's grace in not granting our offender forgiveness. We are learning to be Christ-like and it is a life-long process. It should be the aim and desire of each Christian to be like the Lord Jesus Christ. When we allow the sin of unforgiveness to grow in our heart, it takes up residence there and it puts down roots. The root of unforgiveness is bitterness. Where bitterness grows many, many are defiled by that sin.

We must be careful in all we do that we don't get bitter, for bitterness has far-reaching consequences. It infects all those around us. We must go beyond our petty thoughts and jealousies, hurt feelings and grudges of unforgiveness and truly be Christ-like.

An unforgiving spirit which turns into a bitter spirit

has been the cause of countless divorces, family break-ups, and church splits. But, Christ who is our life, wants us to have the love spoken of in I Corinthians 13 and from that love flows grace, peace, mercy, longsuffering, gentleness, meekness and forgiveness.

Some ask, "Can we forget?" We will never know until we change our unbiblical patterns of thinking and grasp the concept that forgiveness is a command. The less we think about something, the easier it is to forget it. We must do as Jesus did and choose to forget. God cannot really forget, except by choice. He chooses not to remember our offenses against us, once we repent.

The choice then is, do we want to forgive and forget or would we rather continue to suffer at the hands of our offender. We become a slave to our offender when we fail to forgive and when we continue to hold a grudge against him. Do we really want him to suffer for his wrongdoings until we think he has paid enough? Do we enjoy the attention we get from playing the part of a martyr? Or would we rather be like Jesus? In Psalm 119:165 we find these words, "Great peace have they which love thy law: and nothing shall offend them."

Let us always remember why we're in this race. It is not to destroy, defeat, and devour those around us. We're running this race in order to obtain the prize. (See Philippians 3:13-16.) Heaven is our goal. We must put off the works of the flesh and put on the attributes of Christ. We must be willing to suffer the loss of all things: our pride, our standing in life or whatever it takes to win Christ.

Think of what Jesus, the only truly perfect One suffered at the hands of others. He was the sinless one...nailed to a cross, hanging in disgrace with the sins of the entire world heaped upon His sinless frame; the Just for the unjust, the Best for the worst.

But, hear His voice crying out, "Father, forgive them, for they know not what they do."

Calvary's cry should ever be the cry of our heart. Father, forgive them, for they know not what they do."

When forgiveness is a way of life, we will have God's grace in order to make peace with those who oppose God, oppose us, and oppose themselves. We will have a right spirit in dealing with our offenders to help them see how their offenses have hurt us and others; how it brings shame and a reproach on the Lord and His church.

Will you forgive? Will you be like Jesus?

Is Therapy Really the American Character?

One of the most irritating titles awarded by a group to itself is “the helping professions.” The implication is that people such as utility workers, software engineers, credit analysts and truck drivers aren't helping anyone.

Sally Satel, a psychiatrist, and Christiana Hoff Sommers, a philosopher and conservative feminist, have written a cutting attack on what they call the culture of “therapism,” which, they say, is eroding Americans' individual and national character. Had they ventured across the Atlantic in the course of their research, they would have found that British society has once again adopted one of the worst exemplars of American culture.

Lumped in this category with professionals such as doctors and nurses, who do actually help people, are the therapists, counselors, facilitators and the rest of a farrago of ignorant, overpaid quacks. In one important sense, however, the soft end of the helping professions deserves the name: they're helping themselves to a fairly easy living.

There was a time when the American way of dealing with “stress” was to set the jaw determinedly and get on with settling the West or seizing Iwo Jima. No more. Now an army of the professionally sensitive, possibly not all of who wear huge earrings and drive orange Volvos, is forcing the public to get in touch with its feelings.

What one notices, reading through the stories in *One Nation Under Therapy*, is how much the disciples of therapism depend on attracting their subjects through involuntary means. For example, anyone who has had contact with the US family court system will notice how often therapism, in the form of testing or treatment, is ordered by judges or brandished by lawyers. To show a normal skepticism about the un-scientific methods involved would be, of course, proof of a hostile, anti-social, possibly criminal nature.

Satel and Sommers trace the origins of various therapeutic “disciplines,” including grief counseling, addiction treatment and the “humanistic psychology” that is at the core of most of these.

Self-indulgence is nothing new, but the contemporary therapy industry was created by a disaster that struck psychology and psychiatry: the development of an ef-

fective psychopharmacology in the 1960s and 1970s. Once the variants on the “talking cure” were rudely dethroned by drug treatments that were based on science and worked much of the time, there were a lot of potentially unemployed, unskilled therapists around. Fortunately, humanistic psychology, founded in part by Abraham Maslow and Carl Rogers, came to the rescue, and the therapists were saved from having to find useful work.

But for some professions, supplied by schools of education and departments of psychology, there is a cult of “niceness” that prevents tough questions from being asked about the quality of the product. Given a choice, Americans as individuals could take care of their own self-esteem, grief and actualization, whatever that is. As Satel and Sommers document, however, they are frequently not being given that choice.

--*Financial Times*, 24 July 2005, pg. W4

Following this article, the editor of the magazine in which I saw it reproduced (Midnight Call) had this to add:

“It's quite significant that the entire psychotherapy theory is more and more recognized as ineffective at the least and damaging at the most. Yet Christian psychology is flourishing. Not only is it being taught in virtually all colleges, universities and seminaries, but one of the largest American ministries bases itself exclusively on psychology. Psychoanalysis is nothing other than a religion that blames others for their sinful nature and aims to improve self. But the Bible says: ‘Set your affection on things above, not on things on the earth’” (Colossians 3:2).

Psychotherapy on the Road to ... Where?

By BENEDICT CAREY

New York Times

ANAHEIM, Calif. - The small car careened toward a pile of barrels labeled “Danger TNT,” then turned sharply, ramming through a mock brick wall and into a dark tunnel. A light appeared ahead, coming fast and head-on. A locomotive whistled.

“Uh-oh,” said one of the passengers, Dr. Martin Seligman, a psychologist and a pioneer in the study of posi-

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tive emotions.

But in a moment, the car scudded safely under the light, out through the swinging doors of Mr. Toad's Wild Ride and into the warm, clear light that seemed to radiate from the Southern California pavement.

“Well,” Dr. Seligman said. “I don't know that I expected to be doing that.”

One of several prominent therapists who agreed to visit Disneyland at the invitation of this reporter, Dr. Seligman was here in mid-December for a conference on the state of psychotherapy, its current challenges and its future. And a wild ride it was.

Because it was clear at this landmark meeting that, although the participants agreed it was a time for bold action, psychotherapists were deeply divided over whether that action should be guided by the cool logic of science or a spirit of humanistic activism. The answer will determine what psychotherapy means, many experts said, but its place in the 21st century.

“In the 1960's and 1970's, we had these characters like Carl Rogers, Minuchin, Frankl; psychotherapy felt like a social movement, and you just wanted to be a part of it,” said Dr. Jeffrey Zeig, a psychologist who heads the Milton H. Erickson Foundation, which every five years since 1980 has sponsored the conference in honor of Dr. Erickson, a pioneer in the use of hypnosis and brief therapy techniques.

“Now,” Dr. Zeig continued, “well, therapists are becoming more like technicians, and we're trying to find the common denominator from the different schools and methods to see what works best, and where to go from here.”

The meeting brought together some 9,000 psychologists, social workers and students, along with many of the world's most celebrated living therapists, among them the psychoanalyst Dr. Otto Kernberg, the Hungarian-born psychiatrist and skeptic Dr. Thomas Szasz, and Dr. Albert Bandura, the pioneer in self-directed behavior change.

“This is like a rock concert for most of us,” said Peggy Fitzgerald, 56, a social worker and teacher from Sacramento, holding up a program covered in autographs. Ms. Fitzgerald said she attended war protests during the 1960's, and “this has some of that same feeling.”

Calls to arms rang through several conference halls. In the opening convocation, Dr. Hunter “Patch” Adams—the charismatic therapist played on screen by Robin Williams—displayed on a giant projection screen photos from around the world of burned children, starving children, diseased children, some lying in their own filth. He called for a “last stand of loving care” to prevail over the misery in the world, its wars and “our fascistic government.” Overcome by his own message, Dr. Adams eventually fell to the floor of the stage in tears.

Many in the audience of thousands were deeply moved; many others were bewildered. Some left the arena.

At the conference, many said they found it heartening that psychotherapy was finding some scientific support.

For example, cognitive therapy, in which people learn practical thought-management techniques to dispel self-defeating assumptions and soothe anxieties, has proved itself in many studies.

The therapy, some participants said, has even attracted the attention of the Nobel Committee. The two men who developed it, Dr. Albert Ellis, a psychologist in New York, and Dr. Aaron Beck, a psychiatrist at the University of Pennsylvania, brought crowds to their feet.

A frequent theme of the meeting was that therapists could not only relieve anxieties and despair but also help clients realize a truly fulfilling life—an idea based on emerging research.

In his talk, Dr. Seligman spelled out the principles of this vision, called positive psychology. By learning to express gratitude, to savor the day's pleasures and to nurture native strengths, a people can become more absorbed in their daily lives and satisfied with them, his research has suggested.

A just-completed study at the University of Pennsylvania found that these techniques relieved the symptoms of depression better than other widely applied therapies, Dr. Seligman told the audience.

“The zeit is really geisting on this idea right now,” said Dr. Seligman, who has consulted with the military on how to incorporate his methods.

Dr. Dan Siegel, a child psychiatrist at the University of California, Los Angeles, was one of several speakers to

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emphasize how psychotherapy changes the wiring of the brain. For example, he said, brain imaging findings suggest that secure social interactions foster the integration of disparate parts of the brain.

“When I’m telling you my feelings, discussing memories, in this close relationship, I’m achieving better neurological integration,” Dr. Siegel said. “I’m repairing the connections in the brain.”

Many therapists at the conference said that if the field did not incorporate more scientifically testable principles, its future was bleak.

Using vague, unstandardized methods to assist troubled clients “should be prosecutable” in some cases, said Dr. Marsha Linehan of the University of Washington, who has developed a well-studied method of treating suicidal patients.

Yet it was also apparent in several demonstrations of the spellbinding thing itself—artful psychotherapy—that some things will be difficult, if not impossible, to standardize.

Dr. Donald Meichenbaum, research director of the Melissa Institute for Violence Prevention and Treatment in Miami, showed a film of the first session he conducted with a woman who was suicidal months after witnessing her boyfriend die in a traffic accident. After gently prompting her to talk about the accident, Dr. Meichenbaum then zeroed in on something he had noticed when the woman entered his office: she was clutching a cassette tape.

He asked about the tape and learned that it was a recording of her late boyfriend’s voice, expressing love for her. “I play it over and over, and it makes me so depressed,” said the woman, in a tiny voice.

And here Dr. Meichenbaum stopped the film and addressed the audience.

“The tape!” he said. “When during the session do you go for the cassette tape? What do you do with the tape?”

For several long moments not a creature stirred, not even a laptop mouse. This community of therapists was now trying to save a soul, a person who was alone and did not want to live. What to do with the tape?

“Consider between now and the next time I see you, in two days, consider whether you would be willing to play

the tape,” Dr. Meichenbaum went on to say he had told the woman. “I would be privileged and honored” to hear it.

“Why?” he now asked, turning to the audience.

“Because it not only increases the likelihood she’ll return but empowers her to come back” and take an active role in therapy. Which is exactly what she did, he said.

“Now, is any research study ever going to tell you exactly the right thing to do when your client comes in with a tape of her dead lover’s voice?” Dr. Meichenbaum asked.

Most of the audience of more than 1,000 people wandered out of the talk wide-eyed. One, Terrina Picarello, 40, a marriage and family therapist from Greensboro, N.C., said, “That is what you come for: inspiration.”

Ms. Picarello said that the conference was well worth the money she spent, more than \$800 in fees and travel, and the week she had taken off to attend, even though she found some of the presentations on marriage counseling disappointing.

“Way too much talking by the therapist, I thought,” she said, after one of them. “It seemed so old-fashioned, like it was drawn from another era.”

And there was the rub. As psychotherapy struggles to define itself for an age of podcasts and terror alerts, it will need ideas, thinkers, and leaders. Yet the luminaries here, many of whom rose to prominence three decades ago, were making their way off the stage. And it was not clear who, or what, would take their place.

Across the street at Disneyland, where just about any metaphor is available for the taking, Dr. Siegel was working out the meaning of the park for himself. A native of Los Angeles, he has many memories of visiting as a child, perhaps nowhere more so than the circular drive in front of Sleeping Beauty’s Castle.

“The circle of choice,” he said, looking around. “This is where you decide, where you think about your mood and which way you want to go—to Frontierland, Tomorrowland.”

By all appearances in Anaheim, the field of psychotherapy has arrived at the circle of choice.

The question is, How to get to Tomorrowland?

The Institute of Soteric
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The 5th Annual ISC Training Conference will be
held

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