

# **The Effectiveness of Biblical Counseling in Addressing Mental Health Issues Among Christian Youth in Nigeria**

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## **Abstract**

Mental health is an essential part of a person's well-being. Whatever affects mental health of a person will directly or indirectly affect a person's general health. Substance addiction and non-substance behavioural addictions affect the mental health of the youths in several ways. Several other psychosocial factors, such as unemployment, anxiety, and peer group influence, negatively impact the adolescent. The alarming rate of addiction to drugs and social media among the youth in Nigeria has become a cause of concern to parents, families, government and society at large. What also remains relatively unexplored is the mental health disparity, particularly salient among Christian youths in Nigeria. Therefore, the existing literature on biblical counselling reveals a significant gap in understanding its effectiveness in addressing mental health issues among Christian youths. This study aims to address these gaps by investigating the effectiveness of biblical counselling in addressing mental health issues among Christian youth, with a focus on longitudinal outcomes and comparison with secular therapies. However, despite the prevalence of mental illness and the increasingly high need for mental health care, patients with mental illness continually fail to receive adequate or timely treatment. The study adopted a descriptive method. The purpose of this descriptive

phenomenological study was to explore and describe Christians' everyday lives with a family member who experienced mental distress. The findings of this study can inform counsellors' practice and increase their awareness of the unique challenges and mental health needs confronting Christian youths in Nigeria. Mental health counsellors can use the findings to help facilitate a counselling process that is biblically relevant to religious clients. There is a need for a re-appraisal of how we use Biblical counselling to address mental challenges among Christian youth in Nigeria.

## **Introduction**

In recent years, mental health issues have materialized as significant challenges among youth, demanding effective interventions that cater for their exceptional necessities and beliefs. Many young individuals within Christian communities, experience anxiety, depression, and other mental health disorders, but often resist traditional therapeutic approaches due to perceived conflicts with their faith. This resistance can lead to a lack of adequate support and exacerbation of mental health issues. In our churches today, there are young people who are in need of Godly counsel. And, upon seeing these needs, we must prepare ourselves to better serve our youths by helping to guide them Biblically through this crucial time in their lives.

The present research is therefore considered significant as it aims at drawing the attention of Christians and the world at large to the potency of this indispensable tool (Biblical counselling) made available for Christian success and maturity<sup>550</sup>. In particular, the findings of this study will benefit

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<sup>550</sup> Biblical counseling recognizes the interconnectedness of mind, body, spirit and integrates psychological principles with biblical teachings, providing a unique framework for addressing mental health issues particularly among Christian youth. It aims to address the whole person rather than just symptoms, which is crucial for youth facing mental health challenges. Therefore, integration of faith based biblical counseling methods present a unique approach to mental health care

the field of full-time pastors who have been achieving little or nothing in their counselling ministry due to improper education on what it takes to counsel for effective results. Teachers, armed with the findings of this study, will be in a position to remedy problems of the non-existence of counselling or poor knowledge gained from untrained counsellors in their world.

The findings can help bridge the perceived divide between secular mental health practices and religious beliefs. By demonstrating how biblical counselling can effectively address mental health issues, the study may encourage individuals to seek help without feeling torn between their faith and the need for psychological support. This study seeks to explore the effectiveness of biblical counselling in improving mental health outcomes among Christian youth.

The study recommends biblical counselling as a solution to eradicate mental health challenges among Christian youth in Nigeria. Biblical counselling uses the Bible as a guide in counselling individuals as opposed to psychological theories<sup>551</sup>. Content in the Bible is studied as an exemplification of virtuous acts. Counsellors attempt to connect the Bible's meanings to the present world and personally relate its content to an individual's life. This form of Christian counselling is more often practiced in Protestant denominations within a religious setting or theological institution.

### **Techniques of Christian Counselling**

Christian counselling techniques will be comparable to those of traditional therapy, but with the assimilation of Christian belief

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that aligns with Christian beliefs and values. According to Adams the Holy Spirit operates through the Bible to change lives (*How to help people change: The four-step Biblical process*. Grand Rapids: Zondervan, 1986), 44.

<sup>551</sup> M. R. McMinn, R. C. Staley, K. C. Webb, W. Seegobin Just what is Christian counseling anyway? *Prof Psychol Res Pract.* 2010;41(5):391-397.

practices such as prayer and bible reading. Explicitly, Christian counselling can include the following approaches.

### **Cognitive-Behavioral Therapy**

Cognitive-Behavioral Therapy (CBT) can be used in Christian counselling with a therapist. This type of CBT is known as Religious Cognitive Behavioral Therapy (RCBT), which helps an individual process irrational and unhelpful thoughts pertaining to religious matters, such as feelings of guilt or religious doubt<sup>552</sup>.

In RCBT, religious concepts are used to facilitate healthier thinking and actions. The client is encouraged to utilise their religious beliefs to transform harmful feelings into a more positive view of the world. RCBT can also help with understanding your faith. It coincides with the notion of strengthening virtues such as hope, meaning, optimism and purpose.

### **Meditation**

Meditation can be an impactful strategy taught during counselling that helps one to focus their attention on the grace of God and how He has blessed their life<sup>553</sup>. It may also be combined with mindfulness techniques that teach how to be more in the present moment with God and feel a deeper connection with Him. Meditation also targets destructive thinking that may distract from a person's relationship with God. Therapists often remind the client not to judge themselves for these thoughts but to instead acknowledge them and begin the process of understanding the thoughts a bit further.

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<sup>552</sup> HG. Koenig. Religious versus conventional psychotherapy for Major depression in patients with chronic medical illness: Rationale, methods, and preliminary results. *Depress Res Treat* (2012), 460419. doi:10.1155/2012/460419

<sup>553</sup> K. L. Hansen, D. Nielsen, and M. Harris. Meditation, Christian Values and Psychotherapy. *Relig Psychother*. 32 no. 1 (2008); 41-51.

## **Prayer**

Clergy leaders may engage in words of prayer before and/or after biblical or pastoral counselling. During prayer, they can ask God for a successful session, as well as invite Him to provide spiritual guidance. Prayer is also used as a healing technique and meditation method that Christians believe allows them to communicate with God about circumstances that are burdensome. Prayer is a very sacred practice for those within the Christian faith that essentially connects believers to God.

Through prayer, a person is able to speak words of praise, gratitude, and humility to God but also ask for protection, deliverance, and intervention within their life and the lives of others. Clergy leaders providing counselling may partake in prayer to encourage and uplift the client, as well as help them feel the presence of God.

## **Bible Reading**

The Bible is used during biblical counselling as a learning tool for studying theology while relating its stories and philosophies to everyday life<sup>554</sup>. It can also be utilized in other Christian counselling as a way of providing additional support to what is being discussed and worked on in counselling. Scriptures or chapters within the Bible may be referenced to clients as words of affirmation or encouragement. Christians also use the Bible as a way to connect to God since it is considered a guide that He left for believers to follow.

The Bible is known to be a book crafted by God from collections of letters and books written by multiple authors throughout biblical times. It conveys lessons about God's Will and uplifting messages. The Bible's teaching that the Scriptures are inspired by God and therefore are infallible, inerrant and authoritative on every subject they address. The Bible is comprehensively

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<sup>554</sup> McMinn, Staley, Webb, Seegobin *Just what is Christian.*

sufficient that is, the Scriptures include all that God deemed essential to understand man's design and purpose; man's inherent nature; man's fundamental estrangement from God; the divine plan for reconciliation with God; the divine standard for human thought, emotion and behavior; the divine remedy for human problems; and divine counsel for how men and women can flourish, even in adversity, through a maturing personal relationship with God. Scriptures help to address the mental health issues among Christian youth today.

### **Mental Health among Nigerian Christian Youths**

There is alarming proof of the popularity of mental health disorders among Nigerian Christian youths. Collins perceived that one in four Nigerians has one form of mental health or the other<sup>555</sup>. Ngwu, Arop, Ekeng and Abuo opine that drug abuse interferes with the health and social function of an individual. Because of the depressing economic conditions in many countries of the world, there has been a sharp upsurge in social ills, crimes and drug use among youth, who are the building blocks of the nations<sup>556</sup>. The alarming evidence on the prevalence of substance abuse, its effects among Nigerian youths has raised concerns and challenges for all helping professionals. Drugs have taken centre stage in use. The greatness, suffering and burden in terms of incapacity and cost for individuals, family and society are astounding. They are consequently a major challenge to global development. No group is resistant to mental disorder, but the risk is higher among the poor, homeless, unemployed, persons with a low

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<sup>555</sup> G. A. Collins, *Christian counseling a comprehensive Guide* (United States, Thomas Nelson, 2007).

<sup>556</sup> M. E. Ngwu L.O. Arop, L. O., Ekeng and Abuo, The Impact of Rehabilitative Counseling on Drug Abuse and Addiction, an Aftermath of Strategic Review Perspective. *Panache's Journal of Archaeology of Egypt Egyptology*, 19 no. 1 (2022): 805-814.

level of education, victims of migration and refugees, and adolescents, among others<sup>557</sup>.

Drugs such as cigarette smoking, marijuana, cocaine, heroin and other substances are consistent parts of teen culture and modern-day youths. Drug abuse damages the mental health and steadiness of adolescents. Wang, Liu and Wang cautioned that drug abusers who display signs of stress, anxiety, depression and behavior changes, fatigue and loss or surge in appetite should be treated by medical experts and counsellors to save them from lethal diseases<sup>558</sup>. He added that drug use by adolescents helps them cope with feelings of depression and insufficiency. Alcohol and drug use among adolescents is a kind of social evil, difficult to control because the use of these substances provides immediate and powerful reinforcers with very unfriendly departure symptoms.

Whatever the motives for abuse of alcohol and drugs, the use of this substance has hostile snowballing effects on the central nervous system's impoverishment of hormonal activity, memory, learning ability and reasoning. Drug addiction and reliance are one of the problems confronting the youth. Addiction is anything or conduct that is customary, repetitive and very difficult or unbearable to control<sup>559</sup>. He further perceived that addiction brings short-term pleasure, but with longer-term drawbacks in terms of one's health, relationships, psychological happiness and spirituality. Addiction has turned out to be a chief health deathtrap globally, especially among youths. Drug addiction has led to mental disorders, which result in antisocial personalities and conduct. The American Society of Addiction Medicine<sup>560</sup> describes addiction as a chronic

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<sup>557</sup> Collins, *Christian COUNSELING*

<sup>558</sup> J. N. Wang, Liu, L. and I. Wang, Prevalence and Associated Factors of Emotional and Behavioural Problems in Chinese School Adolescence, 19, Cross Sections Survey, Childcare, Health and Development, 40, (2019): 319-326.

<sup>559</sup> Collins, *Christian counseling*.

<sup>560</sup> *American Society of Addiction Medicine*, ASAM, 2019. [www.asam.org](http://www.asam.org).

disorder that affects the reward, motivation and memory functions of the brain based on the use of substances that have a psychoactive effect. This results in a change in behavior and emotional response to stimuli related to substance use, comprising inability to withdraw from drug use constantly, impaired control of other conduct, yearning for the substance of abuse, inability to identify the personal problems that have arisen with drug abuse, and dysfunction in emotional response to situations<sup>561</sup>.

Addiction does not only refer to reliance on substances such as heroin or cocaine. Some addiction similarly includes an inability to stop participating in activities such as gambling, eating and social media. There are substance addiction and non-substance addiction or behavioural addiction, with both having similar symptoms like craving, impulse control problem, tolerance building, withdrawal mood swing, daily life disturbance, relapse and being engrossed with the addiction.<sup>562</sup> The addictive use could cause accidents in young people, resulting in death from a gas explosion via phones, psychological detachment, myriad negative effects on physical health and various types of mental illness. Smart phone addiction repeatedly arises along with medical conditions in

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<sup>561</sup> Pressure on adolescent to take their toll as adolescents often act out their problems in socially disapproved ways, excessive drinking, substance abuse, lying, stealing crime, gang violence, other forms of rebellion or delinquency gives adolescent a sense of power, feeling of independence as means of gaining a retaining the attention and acceptance of peers. Often however, they lack the critical skills to differentiate between valid information and that which can be harmful and manipulative. Aware that they are no longer children, adolescence want freedom in large doses. During the time many older adolescents feel pressure to make decision about career, values and life styles, and what to do with their lives. Some adolescents' decision can have lifelong implications and affect their mental health.

<sup>562</sup> E. E. Okwaraji, E. N. Aguwa, G. C. Onyebuke, and C. Chinweobi-Eze, 2015. Assessment of internet addiction and depression in a sample of Nigerian University undergraduates. *International Neuropsychiatric Disorder Journal*, 4 no. 3 (2015): 114-122.

other mental health conditions such as depression, anxiety and cognitive disorders.

Ngwu, Arop, Ntui, and Ebuara opine that internet experience delivers information and materials that are detrimental to the mental health, socio-emotional development and safety of young individuals. Several factors are ascribed to mental Health disorders, which are classified under biological, psychological, social and spiritual<sup>563</sup>. Biological disposition, as stated by Collins, comprises the influence of drugs, toxins or pollutants, hereditary, physical Health and congenital effects, deficient sleep, among others. Psychological stressors consist of frustration, feelings of insecurity, inner conflicts, pressure, frustration, family tension, parental neglect or abuse, upbringing that was so stiff or demanding<sup>564</sup>.

Furthermore, Uche and Ngwu added that styles of parenting have likewise been exposed to have an impact on the adjustment and behavior of youths. Social stressors are easy to see, particularly in Nigeria, where the standard of living is becoming excruciating for the common man<sup>565</sup>. Unemployment for the young people, political instability, insecurity, and social class, among others. Sani exposed situations that exacerbate the mental health of individuals to comprise, prevalent hardship wrecking Nigeria, prompted by economic downturn, massive youth unemployment has given rise to all kinds of youth restlessness in the country; therefore, Nigerian youth are vulnerable to mental health challenges<sup>566</sup>.

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<sup>563</sup> M. E. Ngwu, L. O, Arop, A. N. Ntui and M. O. Ebuara, Risk Factors and Youth Suicidal Tendencies in Tertiary Institutions in South South, Nigeria. *Global Journal of Educational Research*, 22 no. 3 (2023): 281-292.

<sup>564</sup> Collins, *Christian Counseling*.

<sup>565</sup> R. D. Uche, and M. E. Ngwu, Background Variable and Prevalence of Bullying among Secondary School's Students in Bayelsa State, Nigeria. *International Journal of Research and Development*, 1 no. 9 (2016): 65-81.

<sup>566</sup> A. L Sani, Psychotherapy and Counseling: Attitudes to Towards Mental Health Seeking Services among Secondary School Students, Kano State

Religion, as well, has a role to play, as every religion has magnificent ethical codes which should guide the attitude of adherents to life in general. Religion, for example, prohibits all kinds of vices and materialism and warns people of the hazards pending for them. Religion appears to be losing its control or grip on the moral virtues of society. There is a stark picture of secularization, materialism, and humanism as a negative outcome of globalization. Thus, the appreciated values which have given people direction have been battered. Robbery, rape, hard drugs, violence, shameless nudity, and glaring terrorism have taken over the moral values<sup>567</sup>. Parental and adult example moreover predisposes youths to drugs, because some adolescents grew up in a culture of drug takers, as most children become well familiar with drugs. Teenagers watch parents consume drugs, and adolescents follow the adult example, peers and other social influences.

### **Parents' Experiences of Children's Mental Distress.**

The adverse impact of children's mental distress affects many areas of a parent's daily life, including personal, financial, and social<sup>568</sup>. These parents struggled with issues of identity, loss of self, confidence, and loss of control. For example, parents reported anger and guilt regarding their children's mental health conditions, which were exacerbated by the accompanying persistent grief over the loss of their child's selfhood, personality, and deferred dreams<sup>569</sup>. Also, Eaton et al. found that mothers of children with emotional and behavioral

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Counseling for National Safety and Security. Conference proceeding for 47th International Conference of the Counseling Association of Nigeria (CASSON), (2023): 20-30.

<sup>567</sup> E. O. Anyacho, Emensim and Inter-Religious Dialogue and Peace Algeria, Obudu, Education Kienjoel Business Enterprises, 2001.

<sup>568</sup> M. M. A. Richardson, V. Cobham, B. McDermott & J. Murray, Youth Mental Illness and the Family: Parents' Loss and Grief. *Journal of Child & Family Studies*, 22 no. 5 (2013): 719–736.

<sup>569</sup> Richardson, Cobham, McDermott, & Murray, *Youth Mental Illness and the Family*.

disorders viewed themselves as failed parents. They were doubtful of their ability to parent their children<sup>570</sup>.

As Moses stated, parents' attitudes towards their children's mental distress, their response to the challenges they confronted, and the treatment they sought reflected their causation beliefs about their children's mental health<sup>571</sup>. Whether they viewed their children's mental distress as a temporary or permanent condition, rejected or embraced medical explanations to make sense of their experiences, all parents faced a range of feelings, including worry, sadness, guilt, and shame<sup>572</sup>. Financially, the cost of treatment was a burden that disrupted parents' well-being and functioning<sup>573</sup>.

### **Mental Distress in the Family**

The effects of mental distress on families are multidimensional, specifically, economic, social, and psychological. For instance, Fekadu et al. found that family affiliates of individuals suffering mental distress suffered job volatility, financial difficulties, worsening of physical health, and increased psychological problems such as depression. They likewise met dysfunctions in family and social relationships, as well as marital problems and poor family interconnection<sup>574</sup>. As such, distress in a person's life obstructs other individuals' running in the

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<sup>570</sup> K. Eaton, J. Ohan, W. Stritzke & P. Corrigan, Failing to Meet the Good Parent Ideal: Self-stigma in Parents of Children with Mental Health Disorders. *Journal of Child & Family Studies*, 25 no. 10 (2016): 3109–3123.

<sup>571</sup> T. Moses, Parents' conceptualization of adolescents' mental health problems: Who adopts a psychiatric perspective and does it make a difference? *Community Mental Health Journal*, 47 no. 1 (2011): 67–81.

<sup>572</sup> Moses, Parents' conceptualization of adolescents'

<sup>573</sup> Richardson, Cobham, McDermott, & Murray, *Youth Mental Illness and the Family*.

<sup>574</sup> W. Fekadu, A. Mihiretu, T. K. J., Craig, & A. Fekadu, Multidimensional impact of severe mental illness on family members: Systematic review. *British Medical Journal Open*, 9 no. 12 (2019), e032391.

family<sup>575</sup>. Mental distress in a family can break that family's identity. The disruption in family identity and members' functioning is acute if they live in the same home with the person experiencing mental distress<sup>576</sup>.

### **The Need for Biblical Counselling, sufficient for human problems**

Biblical counselling is epistemologically biblical exclusivism. Welch describes biblical counselling as “a hybrid of discipleship and biblical friendship. It starts with God speaking to His people”<sup>577</sup>. Biblical counselling is based on the fact that “the triune God has spoken to us through the Scripture”<sup>578</sup>. Biblical counsellors believe that “Scripture contains within its pages all of the principles and data we need to know how to live godly lives”<sup>579</sup>. Biblical counsellors strongly believe that only the truth of Christ can correct all problems<sup>580</sup>. The Bible, as the special revelation to people, is sufficient for human problems and counselling.

Counselling has to do with the authority of the Bible since the Word of God is true<sup>581</sup>. There is no inaccuracy in the Word of God. Clients must know the Word of God to be transformed.

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<sup>575</sup> A. Crowe, & K. P. Lyness, Family Functioning, Coping, and Distress in Families with Serious Mental Illness. *The Family Journal*, 22(2), (2014):186–197.

<sup>576</sup> P. W. Corrigan & F. Miller, Shame, blame, and contamination: A review of the impact of mental illness stigma on family members. *Journal of Mental Health*, 13 no. 6 (2004):537–548.

<sup>577</sup> E. T. Welch, “What is Biblical Counseling, Anyway?” *The Journal of Biblical Counseling* 16, no. 1 (1997): 2.

<sup>578</sup> Welch, “What is biblical counseling”, 3.

<sup>579</sup> J. R. Beck, The integration of psychology and theology: An enterprise out of balance. *Journal of Psychology and Christianity*, Vol. 22, No. 1. (2003): 24.

<sup>580</sup> D. A. Powlison, Don't worry. *The Journal of Biblical Counseling*, Winter. (2003): 54-65.

<sup>581</sup> Powlison, D. A. Questions at the Crossroads: The Care of Souls & Modern Psychotherapies, 2001. In M. R. McMinn & T. R. Philips (Eds.), *Care for the Soul* (Downers Grove: Inter-Varsity Press, 2001), 30.

The issue is whether the clients follow the Word of God or not. It is up to the clients to obey the Word of God or not. Counsellors should inspire clients to read the Word of God. Biblical counsellors should similarly know the biblical passages that address the clients' problems. As a result, the Bible, which is a special revelation, has all the answers to the client's problems. Counsellors should make evident the capability not only to know the biblical passages but also to interpret the given passages in an apt way. Counsellors should be able to apply the passages and interpretations to the client's problems. There are some different elements in counselling. The first one is hope for the clients. Hope is "a self-assured expectation"<sup>582</sup>. God made the promise of hope to people. Therefore, hope is very certain even though humans are suffering. Adams articulates that there are people who need hope in their lives: those with long standing problems, those with abnormally tough problems, those who have huge volume of problems, those who are harassed by fear, those whose hopes have been dashed recurrently in the past, those who have tried and failed, older people, depressed people, suicidal people, and people who have suffered life-shattering experiences<sup>583</sup>. If clients do not trust in God, they cannot have hope for their problems.

Welch recommends three significant steps of counselling for depressed clients. These are trust and worship in God, confession of sin, and obedience to God. This could be done when clients trust God. If they trust God and follow the way of righteousness, then they can have hope. The second is prayer. Prayer is continually the foundation for the counselling process from a biblical perspective. The counsellor should call the Holy Spirit to work through prayer throughout counselling. The counsellor begins the counselling session with a prayer. The issue of where, how, when, and who, and how prayer is used depends on the counsellors. They should adopt the use of

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<sup>582</sup> J. E. Adams, *The Christian Counselor's Manual: The Practice of Nouthetic Counseling* (Grand Rapids: Zondervan 1973), 39.

<sup>583</sup> Adams, *The Christian Counselor's*, 41-46

prayer in the counselling session. The power of the Holy Spirit will work through the prayer offered by both the counsellor and the clients. The third element of counselling is reconciliation and discipline<sup>584</sup>. The drive of counselling is reconciliation with God, self, and others. The reconciliation process begins with the confession of sins. The Holy Spirit will lead the client in how to confess, what to confess, and when to confess. God and others will forgive their sins through confession. Forgiveness will lead the client to have a reconciled relationship with God and others. Based on the reconciliation, clients can build new relationships. Building new relationships continually necessitates discipline and training. The process of building relationships needs training the clients consistently with God's will. Nonetheless, the sinful nature of clients will hamper the new relationships.

The process of counselling has four different components: teaching, conviction, correction, and disciplined training in righteousness<sup>585</sup>. The most significant work for counselling is the regeneration of clients to the biblical level of character. The four steps sketch how to change clients in the counselling process. The first one is to teach God's standard because He gives accurate strategies for change. God's standard is revealed in the Bible, which consists of biblical principles. To transform clients, counsellors should know what the client's problems are and what kinds of biblical principles apply to resolve the problems. Biblical principles should be applied for instant outcome or change. A Counsellor should teach clients to learn something under pressure. Clients have to learn the truth from a disturbed environment since learning from such an environment is one of the most imperative elements of teaching. The second step is conviction. The role of conviction relates to the consciousness of God. When clients go to God, they need a conviction of their sinfulness before God. Once they have conviction of their sins, then they can know that God is calling

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<sup>584</sup> E. T. Welch, Words of hope for those who struggle with depression. *The Journal of Biblical Counseling*, 18, no. 2 (2000): 40-46.

<sup>585</sup> Adams, *How to Help People*.

them to be changed. Counsellors should be able to prove that clients are sinners before God through data collection. If counsellors display adequate data to clients, then clients can have conviction that they are sinners. Then they can be guided to an agreement with God. They became sinners because they defied God. Counsellors should be able to use the Scriptures that contain sufficient information and data for the conviction of sin.

The third step is correction, which includes repentance, confession of sin, forgiveness, and restoration. Repentance implies “a change of mind about one’s beliefs, attitudes, and behavior that involves regret about sin and issues in a change of lifestyle as outward of a desire to be different”<sup>586</sup>. To repent, clients should confess their sins. They ask forgiveness from God and others ostensibly, and then abandon their sinful lifestyle. They can start living to please God. The last step is disciplined training in righteousness. Christian life deals with sanctification, which is a gradual process of change. To be righteous before God means to adapt to God’s standards. To stand before God, clients should be able to deal with their old, sinful way of life. Training has to do with both sides. One side of training is to give up old sinful lifestyles; the other is to build a lifestyle that meets God’s standard. This training has to do with the way of God, that is, a disciplined training in and for righteousness. There are three different stages in counselling: getting started, breaking through, and finishing well<sup>587</sup>. The first deals with matters concerning one session counselling, counselling environment, data collection and counselling agreement, the authority of counselling, hope for counselling, agenda of counselling, problems of clients, homework assignment, and counselling involvement. In the first stage of counselling, counsellors need to comprehend clients and elucidate the policies and involvement of counselling to clients.

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<sup>586</sup> Adams, *How to Help People*, 144.

<sup>587</sup> J. E. Adams, *Critical Stages of Biblical Counseling: Finishing well, Breaking Through, and Getting Started* (Stanley: Timeless Text., 2002).

The second stage tries to change clients actively. This stage comprises turning point, repentance, learning and understanding, homework assignments, crisis, and commitment. In this stage, counsellors use Scriptures for clients' problems that could result in self-discipline. Then, they have to deal with the opposition of clients by caring for them carefully. The last stage is the closure step that involves transition, follow-up, formatting termination, signs of termination, and the attitudes of the clients.

Crucial in Adams's system was the place of the Bible. The Bible contains all that is necessary for a life of godliness<sup>588</sup>. This is seen in the practical application of Paul's statement on the value of 'all Scripture' in 2 Timothy 3. Assisting others to transform is a four-step process made up of teaching, convicting, correcting and training in righteousness.

### **The Sufficiency of Scripture**

The doctrine of the sufficiency of Scripture has long been a watchword within the biblical counselling movement. Most major biblical counselling organizations use the term in their doctrinal or methodological commitments to explain the relationship between Scripture and counselling<sup>589</sup>. Interestingly, Jay Adams infrequently used the term within his major writings. His landmark 1970 *work Competent to Counsel* never uses the term or its derivatives, and within *More than Redemption, A Christian's Counsellor's Manual, and Shepherding God's Flock*, the only use is a scant reference to the Bible being "sufficient" for understanding what we need to know about God's will. Adams first significantly used the term in his 1986 book *How to Help People Change*. Here Adams understands 2 Tim 3:17 to declare that a counsellor "need never

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<sup>588</sup> Adams, *How to Help People*, 29.

<sup>589</sup> See Biblical Counseling Coalition, "Confessional Statement;" Association of Certified Biblical Counseling, "Standards of Conduct," I.A.; International Association of Biblical Counselors, "IABC Statement of Faith."

feel inadequate so long as he has the Bible. If he is inadequate, it is not because the Bible is inadequate but simply because he does not know his Bible adequately. The Bible has what he needs to meet all demands in counselling”<sup>590</sup>.

Any counsellor who desires to honor God and be effective must see the goal of his efforts as leading a person to the sufficiency of Christ. The view that man is capable of solving his own problems, or that people can help one another by “therapy” or other human means, denies the doctrine of human depravity and man’s need for God. It replaces the Spirit’s transforming power with impotent human wisdom<sup>591</sup>.

John Murray draws the following conclusion from 2 Tim 3:15-17: “There is no situation in which we (as men of God) are placed, no demand that arises for which Scripture as the deposit of the manifold wisdom of God is not adequate and sufficient.”<sup>592</sup> Our sufficiency in Christ is found in a deeper, fuller, applicatory, life-changing knowledge of the glory and excellence of God and the magnificence and preciousness of His promises. According to Green, God has called us to share “something of His moral excellence in this life, and of His glory hereafter. . . . The triple agency of the promises, the power and the Person of the Lord regenerate a man and make him a sharer in God’s own nature, so that the family likeness begins to be seen in him.”<sup>593</sup>

When considering sin, reformational counsellors will also reflect on the noetic (mental) and cardiac (heart) effects of sin on the formation of the science of psychology. As Kuyper discussed, sin causes distortions in the thinking and evaluating of non-

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<sup>590</sup> Adams, *How to Help People*,.30.

<sup>591</sup> John MacArthur, Jr., *Our Sufficiency in Christ* (Dallas: Word, 1991), 27, 72.

<sup>592</sup> John Murray, *Collected Writings*, 3:261, cited by Michael Green, *Second Epistle of Peter and the Epistle of Jude* (Grand Rapids: Eerdmans, 1968) 64. 8

<sup>593</sup> Michael Green, *The Second Epistle of Peter*, 64.

Christian scientists, leading to an antithesis between non-Christian and Christian thought and cultural activity<sup>594</sup>.

Perhaps the most significant theme of reformational Christianity is an abiding concern for the supremacy of God. Because of original sin, the human self is disposed to idolatry and to regard some aspect(s) of the creation as the center of the universe (in secular cultures, this is usually the Self). However, the triune God is the only fitting object of religious ultimacy since he is, in fact, the greatest, most glorious and beautiful being in the universe, and so the worthiest of human attention, devotion, and worship. Moreover, God made humans in his image, for these very purposes. Consequently, humans are the most psycho-spiritually healthy and whole as they center their lives on him, and have as the fundamental motivating principle of their lives, not the actualizing of their selves, but the furthering of his glory (which, in the Christian scheme of things, is really the only appropriate way to obtain fulfilment and genuine happiness)<sup>595</sup>. As a result, reformational counselling seeks to direct counselees toward a theocentric way of life and toward admiring, cherishing, participating in, and manifesting the glory of God<sup>596</sup>.

### **Effective Biblical counselling**

Christian counselling is effective for spiritual enrichment, strengthening one's relationship with God, and overcoming or

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<sup>594</sup> Abraham Kuyper, *Principles of Sacred Theology* (Wilmington, Delaware: Associated Publishers and Authors, n.d.).

<sup>595</sup> Jonathan Edwards, "The End for Which God Created the World", in *God's Passion for His Glory*, edited by John Piper (Wheaton: Crossway, 1998), 125-251; John Piper, *Desiring God: Meditations of a Christian Hedonist* (Sisters, Oregon: Multnomah, 1986).

<sup>596</sup> John Calvin, *Institutes of the Christian Religion* (Philadelphia: Westminster, 1960); Edwards, *A Passion for His Glory*; Richard A. Muller, *Post Reformation Reformed Dogmatics* (Grand Rapids: Baker, 2003).

managing mental health issues like depression<sup>597</sup>. It also helps individuals in enhancing positive traits and feeling a sense of purpose in life. Effective Biblical counselling depends on a Biblical anthropology and world view. A Biblical counsellor should promote holiness and a lifestyle in accordance with Biblical guidelines, thus shaping the counselee to the likeness of Jesus Christ. When a Biblical counsellor ministers the Word of God in a life-transforming way, then God himself changes the counselee from the inside out. The uniqueness of Biblical counselling is distinctly set forth by Meier et al<sup>598</sup>:

- The Bible is accepted as the final authority in the counselling process.
- The indwelling power of the Holy Spirit depends on.
- Biblical counselling deals effectively with the counselee's past by working with forgiveness and guilt.
- Biblical counselling is based on God's love.
- It deals with the person in its totality and takes cognizance of physical, psychological and spiritual aspects of human beings.

For Ganz, a point of departure for this kind of counselling is that an individual should become aware of their true nature. Only then is he able to acknowledge his sin-filled nature that needs a restored relationship with God through Christ<sup>599</sup>. Coe indicates that there can be no Christian plan for change apart

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<sup>597</sup> HG. Koenig. Religious versus conventional psychotherapy form Major depression in patients with chronic medical illness: Rationale, methods, and preliminary results. *Depress Res Treat.* (2012): 460419.

<sup>598</sup> P.D., Meier, F.B Minirth, F.B. Wichern, & D.E. Ratcliff, *Introduction to Psychology and Counselling: Christian Perspectives and Applications.* 2nd ed. (Turnbrige Wells: Monarch, 1991), :292.

<sup>599</sup> R. Ganz, *Psychobabble: The failure of modern psychology and the Biblical alternative* (Wheaton: Crossway Books. 1993), 56, 57.

from submission to Scripture. Biblical counselling goes beyond the alleviation of problems and personality change only<sup>600</sup>.

As stated by Crabb, most people cope with life by rearranging what they do. If a believer ignores what is happening in the inner person, he or she will be unable to effectively change what is happening to his/her overt behavior<sup>601</sup>. The inner Biblical change and spiritual growth the believer strives for is not only effected through dishabituation, but also entails rehabilitation while focusing on what God demands in His Word. This aim can only be achieved and sustained through the work of the Holy Spirit<sup>602</sup>.

### **Different Perspectives in Biblical Counselling**

MacArthur and Mack are of the opinion that in the 19th and 20th centuries, the church lost its pastoral skills. In the 20th century, the practice of counselling became infused with secular perspectives of understanding and helping people<sup>603</sup>. Johnson and Jones regard the issue of psychology and Christianity as being on a continuum: the non-religious perspective at one end of the continuum and at the other, the viewpoint of “Fundamentalistic Christians”, who accept only Biblical perspectives<sup>604</sup>.

Meier et al. maintain that despite their oneness in Christ and their belief in the Bible, pastoral counsellors still differ in their

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<sup>600</sup> J.H. Coe, Beyond Relationality to Union: Musing Towards a Pneumadynamic Approach to Personality and Psychopathology. *Journal of Psychology and Christianity*, 18 no. 2 (Summer 1999): 112.

<sup>601</sup> L. Crabb, L. *Inside out* (Colorado: Navpress, 1988), 32.

<sup>602</sup> J.E. Adams, *The Christian counsellor's commentary: Galatians, Ephesians, Colossians, Philemon*. Hackettstown: Timeless Text. Adams, 1994:103.

<sup>603</sup> J.F. MacArthur, & W.A. Mack, *Introduction to Biblical counselling: A basic guide to the principles and practice of counselling* (Dallas: Word Publishing. 1994), 44.

<sup>604</sup> Johnson, E.L. & Jones, S.L. A History of Christians in Psychology. In Johnson, E.L. & Jones, S.L., eds. *Psychology and Christianity*. (Downers Grove: Inter-Varsity, 2000), 12.

views of counselling<sup>605</sup>. The following exponents are examples of the main positions held in Biblical counselling and their perspectives on change: 3.1 Nouthetic counselling. According to Adams, the word nouthetic is derived from the Greek noun and verb forms, *nouthesis* and *noutheteo* (Col. 3:16), indicating that all Christians should teach and confront one another in a nouthetic fashion<sup>606</sup>. Adams regards nouthetic counselling as primarily concerned with behavior, value, motivation, and attitude change at the inner core of the counselee's being. Counselling should address the heart of human difficulty, man as a sinner, who looks to God to give him a new life, with new goals and purposes. The counsellor is not mainly concerned with how people can be changed, but rather asks the question, "Into what?" The nouthetic counsellor's reply to the mentioned question will be: "Into the likeness of Jesus Christ"<sup>607</sup>. Adams argues that the Word of God is the standard for what the counselee must become and also indicates how to become it. The Bible contains answers to the problems experienced in life, but these answers are only available to the believer who is in a proper relationship with God. Four elements are interrelated in the process of change: the work of the Holy Spirit, the counsellor, the counselee and the Bible<sup>608</sup>.

### **Larry Crabb's Integrative Model**

Crabb argues that psychological disorders are a product of a sinful pursuit of life apart from God<sup>609</sup>. The counselee needs to understand and be affected by the truth of the Bible. The following three assumptions govern Crabb's thinking:

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<sup>605</sup> Meier, Minirth, Wichern, & Ratcliff, *Introduction to Psychology*, 313.

<sup>606</sup> Adams, *How to help people change*, ix.

<sup>607</sup> J.E. Adams, Change them? ... Into what? *The Journal of Biblical Counselling*, 13 no. 2 (1995):17.

<sup>608</sup> Adams, *How to help people change*, 61 ff.

<sup>609</sup> Crabb, *Understanding people*, 21.

- The Bible is sufficient to provide a framework for counsellors.
- A relationship with Christ provides resources in resolving every psychological problem.
- The community of God's people functioning together in Biblical relationship is the intended context for understanding and implementing God's answers to life's problems.

Principles and ideas that are derived from psychology, according to Crabb, must remain consistent with Biblical teaching. He maintains that “where the Bible speaks, it speaks with authority, where it does not speak, counsellors must look to other sources of information to help”<sup>610</sup>. Crabb concludes that real change has occurred if the counselee finds joy in God and becomes involved with others in an improved relationship. In his book *Inside Out*, Crabb stresses that sanctification is regarded as inner work with outward consequences<sup>611</sup>. In another publication, *Connecting*, Crabb emphasizes that the fellowship into which the counselee has entered with Christ should be of such a nature that it will spill over to other people with the power to change their lives<sup>612</sup>. Crabb's definition of connecting is: “Something that occurs when the life of Christ in one person is poured into another and awakens in the emptiest recesses of that person.

Faw contends that the brain has always been a focal point for psychologists because it exerts a strong influence on human behavior and mental life. The brain can respond to events in the environment based on information it has built up over an

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<sup>610</sup> Crabb, *Understanding people*, 28 ff.

<sup>611</sup> Crabb, *Inside out*, 42 ff.

<sup>612</sup> L. Crabb, *Connecting. A Radical New Vision* (Nashville: Word Publishing, 1997), 5 ff.

individual's lifetime<sup>613</sup>. The problem concerning the mind-body is how to hold together the obvious characteristics of an individual and his overt behavior, and the characteristics of his internal mental state. It is expressed as the tension between the material and the immaterial, between brain and mind, between body and soul.

### **Biblical Counseling Addressing Medical and mental Issues**

Biblical counsellors admit that the challenges of life often have a physical component. Many emotional and cognitive struggles are the result of chaotic bodies affected by genetics, disease, physical and emotional trauma, and lifestyle choices, including sleep, diet, exercise and so forth. Biblical counsellors, consequently, should seek to partner with physicians, especially those who are committed to understanding the patient's situation both physically and spiritually<sup>614</sup>.

Many physicians, because of time constraints, struggle to offer the level of counselling they would wish to give their patients. Biblical counsellors longed for the opportunity to partner with physicians by assisting to meet the spiritual needs of these

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<sup>613</sup> H.W. Faw, *Psychology in Christian Perspective. An Analysis of Key Issues* (Grand Rapids: Baker Book House. 1995), 28.

<sup>614</sup> Though the remedies offered by biblical counselors are substantively different from secular remedies, this distinctiveness does not imply that biblical solutions are simplistic or instantaneously effective. The Bible presents spiritual growth in Christ through His Word as the means of change. God's own metaphor of growth implies time, attention, care and cooperation with God.

Furthermore, suffering and trauma are sometimes accompanied by complex physical, cognitive and emotional effects. While the biblical counselor helps the counselee see suffering through the lens of a biblical worldview that finds ultimate answers in the Scriptures, the counselor should not ignore the counselee's possible need for treatment from the medical community for physical needs. Counselees are fallen, complex people being helped by other fallen, complex people. Variables exist at every interaction as heart responds to heart and as both respond to or choose not to respond to God. By God's grace, the biblical counselor attempts to compassionately and skillfully point the sufferer to the only One Who can heal and restore wholeness as God works His change in the hearts of both the counselee and the counselor.

patients while the physician helps to care for their physical necessities.

Biblical counsellors, moreover, diagnose that there is growing neurobiological hopefulness among the general populace. Many medical and mental health professionals determine that if an emotional struggle cannot be traced to a definite measurable physical cause (e.g., brain trauma, endocrine malfunction, tumor, disease, infection, nerve damage), the problem is presumed to be a chemical imbalance or a genetic defect. Repeatedly, a psychiatric label is assigned to the difficulty, and commonly, a psychiatric drug is prescribed to ease the symptoms by chemically altering the patient's moods<sup>615</sup>.

Variances of opinion proliferate among biblical counsellors concerning the use of psychiatric medication by a counselee. In some situations, medication may be appropriate. In most cases, however, medication is not the only solution, nor is it generally the final or lasting solution. Largely speaking, many disorders commonly treated by psychiatrists and physicians by means of medication also have spiritual components that can be treated only by appropriate scriptural remedies. If, after examining the possible side effects, a counselee opts for a prudent use of a prescribed psychotropic drug, the biblical counsellor should not advise dismissing or modifying its prescribed use. To do so would be unethical and hypothetically dangerous for the counselee. It would likewise be unethical, nevertheless, for the biblical counsellor to remain quiet if it seems that the counselee is not sufficiently informed about potential risks associated with the medication. In such situations, the counsellor should

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<sup>615</sup> *Psychiatric Drug Withdrawal: A Guide for Prescribers, Therapists, Patients, and Their Families* by Peter Breggin, MD (New York: Springer Publishing Company, 2013), *The Intelligent Clinician's Guide to the DSM-5, Second Edition, Revised* by Joel Paris, MD, Professor of Psychiatry McGill University, Montreal, Canada (New York: Oxford Press, 2015).

strongly encourage the counselee to seek additional medical opinion<sup>616</sup>.

Equally, if a counselee chooses to suspend the use of a medication prescribed by the physician, the biblical counsellor should inform the counselee of the risk of stopping the medication apart from the care or advice of a physician. At last, the biblical counsellor should completely respect the counselee's decision and should seek to minister to spiritual needs in the power of God's Spirit for the glory of God, while the counselee looks to the physician to treat any medical conditions.

Biblical counsellors diagnose that, medical advances and developments in neuroscience arise swiftly. Such advances may result in data that, when assessed and construed from the perspective of the biblical worldview, may make available information that is useful in addressing the counselee's suffering. The biblical counsellor recognizes that no matter how physically or spiritually multifaceted the problem, a truly biblical worldview upholds that God never puts the believer in a position where he or she knows what is right to do without giving him or her the grace and the means to do so. The biblical counsellor similarly appreciates that in rare or severe situations, long-term medical care may be part of the grace and means provided by God, along with the biblical counselling process. The biblical counsellor, then, empathetically uses God's Word to reinstate the counselee's hope and to help him or her respond in a way that is pleasing to God and that

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<sup>616</sup> Psychiatric Drug Withdrawal: A Guide for Prescribers, Therapists, Patients, and Their Families by Peter Breggin, MD (New York: Springer Publishing Company, 2013); Will Medicine Stop the Pain?: Finding God's Healing for Depression, Anxiety, and Other Troubling Emotions by Elyse Fitzpatrick and psychiatrist Laura Hendrickson, MD (Chicago: Moody Publishers, 2006), The Counselor's Guide to the Brain and Its Disorders, Revised Edition by Edward T. Welch (Glenside, PA: Christian Counseling and Educational Foundation,

2015), and Charles D. Hodges, *Good Mood Bad Mood: Help and Hope for Depression and Bipolar Disorder* (Wapwallopen, PA: Shepherd Press, 2012).

nurtures a relationship with and growth in Christ, even when the etiology for suffering is virtuously physical or as yet undiscovered.

In all, clergy members' engagement with congregants' mental health needs reflects their interpretation of the biblical text and beliefs about psychiatry and psychology's role in addressing human problems<sup>617</sup>. The quality and level of their commitment depend on their mental distress causation beliefs. As such, clergy members can stimulate or deter congregants' access to mental health services<sup>618</sup>.

### **Biblical Counselling Addressing Trauma and Sexual Abuse/Assault**

The Scriptures recognize that both believers and unbelievers regularly face life-threatening, overwhelming and even protracted suffering because they live in the same world broken by sin<sup>619</sup>. The Bible admits that not all suffering is equal in strength, extent, duration or effects. Military experiences, devastating life circumstances, or criminal assault and abuse can leave the sufferer distressed. In some cases, such trauma may induce long-term effects that make daily life difficult for the sufferer.

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<sup>617</sup> S. Sullivan, J. M., Payne, A. M., Cheney, J., Hunt, T. F., Haynes, & G. Sullivan, The Pew Versus the Couch: Relationship between Mental Health and Faith Communities and Lessons Learned from a VA/clergy Partnership project. *Journal of Religion and Health*, 53 no. 4 (2014): 1267–1282.

<sup>618</sup> J. S. Payne, Variations in Pastors' Perceptions of the Etiology of Depression by Race and Religious Affiliation. *Community Mental Health Journal*, 45 no. 5 (2009): 355–365.

<sup>619</sup> God has given us provisions and answers to our various human needs in the Bible. This word of God is meant to come alive for our physical, mental, social and spiritual well-being. The word of God is instrumental to our brokenness in the world. The bible talks about joy, love, freedom and recover. Jesus made it clear in the book of John 14:6 Jesus saith unto him, I am the way, the truth and the life; no man cometh unto the father but by me.

God has revealed in His Word that He takes pleasure in being a Father to His people, particularly in their times of dangerous adversity and anguish. He gives His children grace for even the most extreme trial or suffering stumbled upon in life. The biblical counsellor identifies that while some sufferers will find instant comfort in God's providential, wise and loving provisions in His Word, others may fight to proximately comprehend, believe or accept those provisions and will need the counsellor to display God's love and grace to them during this lengthy process<sup>620</sup>.

The biblical counsellor identifies that the impact of trauma can be multifaceted and will differ from person to person, depending upon the physical, cognitive, emotional, social and spiritual resources and the state of the sufferer at the time of the incident and in its aftermath<sup>621</sup>.

Additionally, the biblical counsellor must be aware of the possible distressing responses that sometimes follow traumatic events, particularly flashbacks, nightmares and dissociation. Depending upon the nature of the trauma, these responses may not persist. When they do, nonetheless, the biblical counsellor, if properly trained, can ground the sufferer in the present

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<sup>620</sup> Christians believe that God has revealed Himself to man through the general creation and through the Bible. Christians acceptable of the authority of the scripture rests upon the presupposition of biblical infallibility. The Holy Spirit was given to Christians to abide them forever and Jesus called the Holy Spirit as "the Counselor". In the book of John 14:16, Jesus said "And I will pray the father and He will give you another comforter that he may abide with you forever". The Holy Spirit is the one that reminds us the word of God and actually applies the truth of God's word to the believers' life.

<sup>621</sup> For instance, the duration and intensity of the trauma, the age of the sufferer when the trauma took place and other similar factors also impact the responses. While some counselees may have received a psychiatric diagnosis at some point, the biblical counselor strives to view the counselee as a person under severe distress and will recognize that the complexities of each situation will often require a more thorough knowledge of the counselee and the nature of the situation. He also realizes that trauma sufferers must be allowed to disclose the details of their suffering at their own pace and to the extent to which they are comfortable.

during times of distress and assist in the development of a biblical perspective for handling those responses when they persist. The journey for both the suffering counselee and the counsellor can be difficult and painstakingly sluggish, but the result of seeing hurting believers experience healing grace from God, strength from His Word and greater effectiveness in His service brings glory to God.

Biblical counsellors realize that all trauma is disorderly and possibly debilitating to the life and spiritual health of believers. Nevertheless, the trauma that comes with sexual assault and abuse is particularly so and therefore presents exceptional challenges and opportunities for both the counsellor and the victim of such assault or abuse to grow in grace together as they trail divine healing and wholeness through the Gospel of Christ. When dealing with sufferers of sexual abuse and assault, the biblical counsellor will regularly need to seek to establish stability and safety for the counselee. This process often begins by assuring the victim that the perpetrator bears the entire blame for such crime(s) committed against the victim. The counsellor must undoubtedly communicate that the victim is not at fault for this harm done to him or her and must assist the victim in avoiding any self-blame for the abuse or assault. The counselee must be guaranteed that all sins against him or her will be righteously resolved by a just God who will not permit unrighteousness to go unjudged.

Biblical counsellors cognise that these matters associated with wellbeing and stability must precede other counselling determinations, for instance, helping to process disturbing memories; establishing proper beliefs about self, God and others; and the way the world works because of the Fall. Suitable time and grace should be given for biblical sorrow that comes with such trauma and loss.

As the counselee engages with God's truth, the biblical counsellor can likewise, when possible and advisable or appropriate, support in the process of repairing injured

relationships from the past. Also, the biblical counsellor inspires the counselee to consider founding healthy networks with others who can help navigate the process at a pace and manner contented with the counselee. During the course of this whole process, the biblical counsellor dependably points the counselee to the grace of God through the work of Jesus Christ, who Himself suffered physical abuse and assault so that His people might experience healing in the Gospel with help from His Spirit.

### **Biblical Counseling as a solution to Mental Health**

The premise of Biblical counselling is that God has provided every indispensable truth the believer needs for a happy and fulfilling life in our Lord Jesus. God has never left us without an assistant to our needs. 2 Peter 1:3 assures God has divinely provided us with everything we need for life through our knowledge of him who called us his own glory and goodness. In line with Crabb, the counsellor can only comprehend and communicate what he knows in a way that will change the life of the counselee if he uses Scriptural concepts as his frame of reference<sup>622</sup>. Collins underscores that a Biblical counsellor should use Jesus Christ as the final example of a counsellor. With sympathy, a counsellor should take in position next to the counselee so as to help him. A counsellor should repeatedly endeavor to intensify in Scriptural knowledge and grow in sanctification. Chiefly grounded in Biblical principles, he should also be experienced in the use of techniques that can help the counselee move towards change and spiritual growth, directing his focus on Christ. His work should not depend upon his own abilities, training, and counselling skills, but should be exercised under the direction and guidance of the Holy Spirit<sup>623</sup>.

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<sup>622</sup> Crabb, *Understanding*, 71ff.

<sup>623</sup> G.R. Collins, *How to be a People Helper* (Wheaton: Tyndale House, 1995), 172.

The Bible is God's infallible, inspired revelation in propositional form. In the book of Isaiah 40:8, we learnt that "the grass withers and the flower fades, but the word of our God stands forever". Biblical counselling describes a two-way communication where the scriptures are used as a helping tool. This approach of counselling is repeatedly more effective when the parties involved are believers. Or the non-believer counselee is open and willing to accept the word of God in his or her helping process. Dr Crabb L. Jr, *Effective Biblical Counselling*, feels that every Christian is called to a Ministry of inspiration and helping others, particularly those of the family of faith..."<sup>624</sup>

To be effective counsellors, we must have the right fruit. The Bible calls it the fruit of the spirit within us; these fruits of the spirit comprise: love, joy, peace, patience, kindness, goodness, faithfulness, gentleness, and self-control. The counsellor must let the Lord take charge of their lives so they can have the "wisdom that comes from above". The Bible upheld that those who help others should be spiritual<sup>625</sup>. To develop a Christian counselling approach, assessment of the client and where he is having conflict becomes essential to accomplish our goal in counselling.

### **Religion in Synergy Mental Health**

Religion stands as a spring of strength, hope, and purpose to billions of people in modern-day societies<sup>626</sup>. Many researchers fascinated by understanding the link between religion and

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<sup>624</sup> L. Crabb, *Effective Biblical Counselling: A Model for Helping Caring Christians become Capable Counsellors*. (Grand Rapids: Zondervan, 1977).

<sup>625</sup> Galatians 6:1 "who are responsive to and controlled by the spirit should set him right and restore and reinstate him without any sense of superiority and with all gentleness, keeping an attentive eye on yourself, lest you should be tempted also".

<sup>626</sup> R. M. Bonelli, & H. G. Koenig, Mental disorders, religion and spirituality 1990 to 2010: A systematic evidence-based review. *Journal of Religion and Health*, 52 no. 2 (2013): 657-673; Koenig, Research on religion, spirituality, 283-291.

mental health commenced numerous studies across multiple religions with decisive evidence about its positive contributions to welfare. Partnership Between Psychiatry, Counselling, and Christianity. Despite the antagonism that branded the relationship between religion and psychiatry, Verhagen recommended that collaboration and mutual influence between both institutions were still conceivable<sup>627</sup>.

Moreover, counselling organizations that stimulate counsellors' professional development support the inclusion of spirituality and religion in counselling as standard practice for mental health counsellors, irrespective of their therapeutic approaches. Hartog and Gow perceived that both adherents of Christianity and psychiatry could be complementary, although their validated descriptions of mental distress's causes and treatments may differ<sup>628</sup>. Nevertheless, the disbelief toward psychology and psychiatry continues, as many church leaders still oppose psychology for its secular and humanistic foundation<sup>629</sup>. Incorporation of psychology and religion remains a scratchy compromise for some clergy members because they believe their religious beliefs, which are foundational to their pastoral care ministries, stand in opposition to the ethics governing the practice of psychology, psychiatry, and counselling. They believe the values psychologists and psychiatrists endorse are mismatched with biblical teachings<sup>630</sup>.

The conflicting relationship between Christianity and psychiatry is apparent and well-indexed. While mental health

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<sup>627</sup>P. J. Verhagen, Psychiatry and religion: Consensus reached! *Mental Health, Religion & Culture*, 20 no. 6 (2017). 516–527.

<sup>628</sup>K., Hartog, & K. M. Gow, Religious attributions pertaining to the causes and cures of mental illness. *Mental Health, Religion & Culture*, 8 no. 4 (2005): 263–276.

<sup>629</sup>See A. S. Hodge, J. N. Hook, D. E. Davis, & M. R. McMinn, Attitudes of religious leaders toward integrating psychology and church ministry. *Spirituality in Clinical Practice*, 7 no. 1 (2020): 18–33.

<sup>630</sup>K. Pargament & J. Lomax, Understanding and addressing religion among people with mental illness. *World Psychiatry*, 12 no. 1 (2013): 26–32.

counselling is a relatively newer discipline and practice, in relation to psychiatry, mental health counsellors also have a history of being unconcerned with the role of religion and spirituality in mental health<sup>631</sup>. As a profession, mental health counselling has progressively incorporated religion and spirituality in recent years<sup>632</sup>. Nevertheless, many mental health counsellors continue to display a lack of respect for religion and their clients' religious beliefs<sup>633</sup>. Also, some counsellors reported uneasiness working with religious clients, regularly lacking the capabilities to integrate spiritual issues into counselling<sup>634</sup>.

Christian clergy members and mental health professionals may share many common goals, including helping people realize their identity, live profoundly, and experience social support<sup>635</sup>. Nonetheless, church leaders and congregants have likewise been skeptical of the values and practices that mental health counsellors sanctioned<sup>636</sup>. Many clergy members consider partnership with the mental health community a menace to

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<sup>631</sup> A.-M. Yamada, D. Lukoff, C. S. F. Lim & L. L. Mancuso, Integrating Spirituality and Mental Health: Perspectives of Adults Receiving Public Mental Health Services in California. *Psychology of Religion and Spirituality*, 12 no. 3 (2020): 276-287.

<sup>632</sup> L. Bohecker, R. Schellenberg & J. Silvey, Spirituality and religion: The ninth CACREP core curriculum area. *Counseling and Values*, 62 no. 2 (2017): 128-143.

<sup>633</sup> J. W. Crosby & N. Bossley, The Religiosity Gap: Preferences for Seeking help from Religious Advisors. *Mental Health, Religion & Culture*, 15 no. 2 (2012): 141-159.

<sup>634</sup> Yamada, Lukoff, Lim & Mancuso, *Integrating Spirituality*.

<sup>635</sup> Ultimately, clergy members' stance on the collaboration between psychology, counseling, and Christianity comes with potential ramifications for how they interact with families living with mental distress in their faith communities. Clergy members are decision-makers concerning what mental resources they are willing to offer to individuals living with mental distress. They can significantly influence their congregants' lives, and their views impact mental health experiences in faith communities.

<sup>636</sup> A. E. Smith, R. Riding-Malon, J. E. Aspelmeier, & V. Leake, A qualitative investigation into bridging the gap between religion and the helping professions to improve rural mental health. *Journal of Rural Mental Health*, 42 no. 1 (2018): 32-45.

Christians, believing that such experience will be harmful to their congregants' spiritual well-being<sup>637</sup>. Yet, some clergy members were willing to integrate mental health concepts into their ministries and collaborate with professional counsellors despite their suspicion<sup>638</sup>. These clergy members argued that understanding the relationship between religion and psychology was essential for comprehensively meeting the needs of families and individuals living with mental distress in faith communities<sup>639</sup>.

### **Christ's Redemption is the Primary Soul-Curing Dynamic**

In contrast to secular counselling, reformational counselling assumes a redemptive-therapeutic approach that places Christ's person and work in his life, death, and resurrection at the centre of the therapeutic enterprise. Whether directly or indirectly, all the counsellor's efforts are focused on helping the client benefit from Christ's person and work. As Calvin taught, union with Christ is foundational to Christian soul-healing:<sup>640</sup> Union with Christ is the central truth of the whole doctrine of salvation<sup>641</sup>. The outworking of union with Christ leads to the degradation of the old self and the vivification of the new self<sup>642</sup>. Reformational counselors will manage with their counselees, teaching them how to receive the cross and the resurrection more intensely into their beings, so that the Holy Spirit's

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<sup>637</sup> L. Baldwin & A. B. Poje, Rural faith community leaders and mental health center staff: Identifying opportunities for communication and cooperation. *Journal of Rural Mental Health*, 44 no. 1 (2020): 16–25.

<sup>638</sup> Hodge, Hook, Davis, & McMinn, *Attitudes of religious*.

<sup>639</sup> W. A. Kinghorn, American Christian engagement with mental health and mental illness. *Psychiatric Services*, 67(1), (2016): 107-110.

<sup>640</sup> John Calvin, *Institutes of the Christian Religion* (Philadelphia: Westminster, 1960), III.ii.24-25.

<sup>641</sup> See David B. Maddox, "Union with Christ: The Implications for Biblical Counseling," in *Introduction to Biblical Counseling*, edited by J. F. MacArthur, Jr. and W. A. Mack (Waco, Texas: Word, 1994), 116-130.

<sup>642</sup> Calvin, *Institutes*, III.xx.42-43; John Owen, "Of the mortification of sin in believers," in *The works of John Owen*, edited by W. H. Goold (Edinburgh: Banner of Truth, 1967), 6: 2-87.

application of Christ's work in the new creation may be eschatologically grasped in their hearts, lives, relationships, and stories in this age (see Romans 6:1-11; 2 Corinthians 5:17; Galatians 5:17-26; 6:14-15; Ephesians 2:1-10; 4:22-24; Colossians 3:1-1128).

## **Conclusion**

Findings from the literature show that many, if not all, mental illnesses result from sinful lifestyles and that only via repentance and getting right with God, as you might say, can people with mental illness find relief from their conditions. Christians who follow that belief often discontinue treatment for mental illness without discussing their decision with their doctors, largely because of their belief that complete healing occurred at a church service or prayer meeting. Nevertheless, such discontinuation can put patients at risk of experiencing acute or recurring episodes related to their mental health conditions (e.g., manic or psychotic episodes). It is also common among Christians who experience active, prominent symptoms of mental health conditions to delay treatment for years as they wait to be healed by God.

A large number of people struggle with mental illness in Christian communities, yet appear to feel isolated and rejected by their churches. Christian churches must consider how they should interact with such members of their communities, as well as those indirectly affected by mental illness. Psychiatrists and mental health providers can play a pivotal role in educating Christian patients on mental illness and its interaction with faith and spiritual practices. Although the literature on specific perceptions of Christians concerning mental illness remains scarce, the studies described above offer insights into Christian attitudes toward mental illness that perpetuate stigma and the underuse of mental health services among Christians. It was the objective of the present study to add to the knowledge of Christian attitudes toward mental illness by assessing both medical and spiritual therapy.