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## Resisting a Separatist Position as a “Distinctively Christian Psychology”

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The co-authors of this reflection on Skillen’s article embrace the challenge to respond in a thought-provoking, yet gracious spirit. In a pleasantly surprising manner, these relational values parallel the mutual dialog that we engaged in as we co-constructed this response. While sharing a common calling, the authors differ in some places of resonance and concern with Skillen’s work. This response reflects shared ideas, a sifting through the wheat and tares on behalf of what may be the ultimate responsibility of a Christian psychology.

As educators for graduate mental health professions in two different departments in an evangelical Quaker university, each author wrestles with these questions: What is our role in preparing Christians for a vocation within the mental health professions? How do we mentor students to become safe and effective clinicians who reflect the heart and mind of Christ? Our programs each embrace this common calling using different methodologies in compliance with licensing bodies and professional accrediting agencies that likewise support our Christian educational environment. In turn, our programs are transparent in disclosing our distinct faith orientation and our commitment to holding students accountable to the academic, professional, and clinical competencies commensurate with the practice standards of our respective professions.

A place of resonance with Skillen is an element within his call for principled pluralism. While neither

author fully endorses all aspects of Skillen’s conceptual framework, both acknowledge that communities legitimately long for greater public support to organize themselves within private systems informed by values of central importance to them. Principled pluralism might rest more comfortably if we acknowledge the government’s role in promoting an agreed-upon common good and then allowing communities the choice to implement those objectives in accordance with the unique needs of those communities. For example, imagine tax dollars for education justly dispersed in either the public or private arena, provided that these settings utilize qualified teachers and hold students accountable to basic academic standards. If the private sector agrees to abide by these basic (secular) standards, the general public might be less fearful of embracing pluralism and allow greater sharing of public funds to supplement private education. Such a mutual stance would flush out private sector settings that eschew best-practice educational programs, perhaps what Skillen wishes to avoid, while promoting a more just, pluralistic, and perhaps effective distribution of public funding.

Our mutual concerns center on Skillen’s ultimate agenda: a dedication to shaping public policy to reflect distinctively Christian values due to the belief that secular social systems (e.g. mental health practice) require professional behaviors contrary to Christian faith and practice. Under the guise of endorsing pluralism, Skillen argues that Christian mental health professionals should advocate for a “distinctly Christian psychology.” Such a system would include its own separate accrediting standards and would practice guidelines sanctioned by law, granting its practice equal legitimacy alongside secular psychology.

Skillen invites many points of entry into a dialogue, whether it be an elaboration upon elements of mental health practice that he may have misrepresented, to alternative viewpoints regarding the relationship between Christians and public institutions such as the military and public education, to his use of the subjective nature of truth to fuel speculation regarding the value of the social and behavioral sciences. However, the focus here will reflect upon a key concept embedded in Skillen’s call for a “distinctively Christian psychology.” While we support retaining laws protecting the right of private institutions to train professionals within their faith communities, we disagree with the creation of a separate Christian psychology as proposed by Skillen.

On a most basic level, these authors resist a distinctively Christian psychology that may inevitably overlay more pathological interpretations of faith as antidotes to human psychological struggle. For example, “Christian counseling” has been known to overtly

push for marital reconciliation despite the psychological and physical danger to its members, to shame vulnerable persons into believing that their distress reflects inadequate faith, and to blame physiological disturbances on demon possession. Each author regularly encounters various versions of these toxic faith approaches, and has known such practices to cost many people a loss of faith, and for a few, a loss of life. The proliferation of such counseling approaches speaks to the dangers of giving an ill-informed separate “Christian psychology” legal endorsement. Likewise, it adds to the urgency for placing well-educated and trained practitioners in religious environments with the skills to bring hope and healing congruent with that community’s understanding of faith.

Concern also exists that a separate Christian psychology would avoid taking to task why the Christian professional believes that one’s practice causes a compromise of faith values. This perhaps speaks to a lack of understanding about how to be authentic and transparent, yet not prescriptive (Bergin, 1983). In addition, it also leads to questions of discernment regarding whether one’s vocation is best suited as a mental health professional, rather than as a ministerial professional in which spiritual direction and discipleship are the central organizing principles informing the relationship.

On a deeper level though, disagreement with Skillen can be illustrated by a brief explanation of three elements characterizing what a distinctly Christian psychology might entail. First is an affirmation that faith informs understanding of the social and behavioral sciences, and likewise these disciplines inform the understanding of faith. The second and third elements identify two complimentary agendas embedded within the educational process: a commitment to the spiritual formation of the student, and the examination of how faith systems can undermine and contribute to individual and community health.

In the educational environment, these authors invite students to encounter Christ, and to seek a renewing of their hearts and minds in order to live a life characterized by love and justice as a direct reflection of one’s relationship with God (Romans 12:1-2; Micah 6:8) This involves a lifelong commitment to spiritual growth. It is a tough and painful challenge for most of us, yet a journey well informed by the social and behavioral sciences. Its ultimate purpose is so our lives might be lived in service to others in a manner that is balanced, life affirming, and renewing for persons on both sides of the equation. Likewise, spiritual development within graduate mental health education is naturally in service to training knowledgeable and skilled practitioners, given the direct link between successful therapeutic outcomes and the person of the therapist

(Blow, Sprenkle, & Davis, 2007).

A hallmark strength of mental health practice involves engaging in the observation of relational patterns within and between persons, families, and larger cultural systems. It means looking at recent and remote history for patterns of behavior passed down from one generation to the next, revealing, perhaps in code, hidden attitudes and beliefs that take root deep within our psyche. Taking a cue straight from scripture, we recognize that persons of faith must never assume that the sins of the past will not be repeated. So the biblical stories are told over and over, stories of how people of faith lose their way and stories of how God lovingly calls us back by a renewing of hearts and minds.

For Christian practitioners, this assessment of relational patterns must be applied to the faith communities we serve to discern how these systems support or undermine the well-being of its members and the larger community (Berardi Maher, 2006). Inevitably, this means identifying places where the human ego endorses manipulative ways of being to advance an agenda, with an exclusionary attitude viewed as God-endorsed. Volf (1996) writes extensively about the human processes at play through the generations when systems of thought and behavior intending to protect and nurture people of faith become oppressive, misguided, and hence distinctly evil. What is designed to be inviting and inclusive now becomes distorted and exclusionary.

Rohr (2003) echoes these observations as he speaks to how Christians have lost an understanding of encounter with Christ in a manner that changes the hearts and minds of both people and the institution of the church. He challenges us to examine how we have committed idolatry, creating an image of God after our own likeness. Hence, a distinctly Christian psychology may involve teaching students how to engage in this very type of critique of Christian systems and modes of thought, lest we endorse and promote the very types of attitudes and behaviors that ultimately divide communities and undermine just and caring relationships.

Skillen rightly observes that human relations appear increasingly distressed and contrary to God’s intentions. Concern for human pain and suffering is of central concern in the social and behavior sciences. Our profession is replete with theorists who surmise that we are becoming increasingly alienated from our relational nature, unable to discern right from wrong, and responding to others from a place of entitlement and exploitation (Borszormenyi-Nagy & Krasner, 1986; Erikson, 1964). Bellah, Madsen, Sullivan, Swidler, and Tipton (1985) echo this theme, citing how increasingly difficult it is for many to make sense of their lives and to find a moral compass to guide decisions from a ground of meaning shared by

the broader community. Their work, along with many others, voice concern that if mental health professionals do not understand these larger cultural patterns that undermine personal and communal health, we will merely endorse and perpetuate them (Doherty, 1995; Pipher, 1996).

The disciplines that shape mental health practice invite Christian professionals to engage in a rigorous process of deconstructing the myriad of influences that disorient us from our intended nature as relational beings. This includes examining how human ego influences our understanding of the Gospel and distorts our image of God, thus increasing our likelihood of promoting a Christian worldview of our own creation. We are challenged to examine ways we are then tempted to prey upon people's fears and good intentions to buy into our version of how a "distinctively Christian" citizen thus responds.

This challenge of helping the Christian student look for the relational patterns within culture (with one's faith community a central focal point), while nurturing one's relationship with self, other, and God, may be an element of a distinctly Christian psychology. Such training would allow the professional to take the knowledge and skills of one's chosen profession and be instruments of healing within human systems fraught with relational brokenness and distortion. Thus, a Christian psychology would be able to identify how persons of faith come to think and act in ways far removed from God's intention, yet boast as does Lamech (Genesis 4:23-24) that our hurtful behaviors are God-ordained and protected from scrutiny. Our mission is to look for these patterns within one's self and the greater community, and respond with the love of God so we may no longer be mesmerized, but renewed.

And as biblical history teaches, Christ's response to his faith community's blindness was not received warmly. He taught a new way of seeing, of responding. His message was not one of exclusion, but of clearing specks from our own eyes, of embracing other, of being moved and challenged by other, of seeing face to face. Loving our neighbor and our enemy is intimate and life altering for both sides of that relationship. Yet a heart and mind informed by the love of God is so contrary to human logic and defended tendencies. Hence, Christ was judged, ostracized, and eventually killed by his own faith community for teaching and embodying love.

We accept that the life and work of Christ is our example and primary source informing a distinctively Christian psychology. However, we must look at the whole story, including how the biblical narratives continually capture the way faith communities often struggle to embrace the transformative nature of God's

message. A distinctly Christian psychology needs to be informed by the story in its entirety. We thank Skillen for reminding Christian mental health professionals of the need to be active participants in the Public Square. However, we resist his call for a separate profession for fear it may be embraced within some of the very systemic ways of being that a Christian psychology might be called to dismantle.

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