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Irrational Christian Beliefs

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IRRATIONAL CHRISTIAN BELIEFS

A Thesis
Presented to
the Faculty of
Western Evangelical Seminary

In Partial Fulfillment
of the Requirements for the Degree
Master of Arts

by
Charles E. Jardin
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PREFACE

In light of present developments in counseling psychology, pastoral counseling is beginning to emerge as a separate and distinct discipline. Traditionally, the pastor has always been sought after in times of spiritual and emotional distress, and though he has always been a pastoral counselor by demand, the pastor has often viewed this responsibility as a function that was thrust upon him without choice. Often the clergy was poorly trained for this function, and as a result viewed this position as secondary in importance to such tasks as shepherding the congregation, equipping the laity for ministry, preaching God's Word, and administrating Church functions. However, due to the ever increasing need for counseling in the areas of interpersonal dynamics and the anxiety and tension associated with our present day society, the pastor has of necessity and demand been forced to reappraise his role. More and more pastors are now beginning to acquaint themselves in the areas of psychology and psychiatry in order to be better equipped to deal with the needs and demands placed upon them.

Unfortunately the vision of equipping one's self for pastoral counseling has not manifested itself in an overabundance of pastors seeking to enhance their counseling

skills, but rather the vision has been caught by only a small segment of those pastors involved in counseling. Behind the interest of those pastors who are actively seeking a scientific knowledge of counseling methodology, stand a majority of pastors who, for a variety of reasons, are only looking on.

Fortunately the present state of affairs is changing. More and more efforts are presently being made to develop a sound counseling methodology based on a Biblical foundation. Those who choose to sidestep this movement will find themselves lost in the unfamiliar theological climate of tomorrow.

It is my firm belief that the relief of emotional distress as well as the control of destructive beliefs should be the concern of every one, including the pastoral counselor. In order to develop a truly Christian community, it is the responsibility of everyone who reaches out to help another to familiarize themselves with that individual and the techniques necessary to help that individual develop a sound state of mental health.

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CHAPTER ONE

Introduction

I am convinced that for a person to be fully conscious intellectually he should not only be able to detect the world views of others but be aware of his own - why it is his and why in the light of so many options he thinks it is true.

- James Sire

We all make basic assumptions about ourselves, the character of the world in which we live, and God. Combined together these assumptions contribute to the development and foundation of a person's world view, which is a set of conscious and unconscious beliefs attempting to answer the basic questions in life. We strive to answer questions on the meaning of life, life after death, purpose in suffering, and the determining of moral behavior. However, much of the emotional stress that we face stems from our having a world view that is predicated on faulty or irrational premises. Because of the seemingly inherent inability to perceive reality correctly, the world views that are developed by some individuals are either not adequate enough to get them through life, or they develop into a view that is in direct contradiction with the way the world really is.

The existential school of psychology speaks of man's anxiety as coming from his encounter with some unanswerable problem like death. This one final human encounter directly challenges every person to develop a world view for his own emotional defense. Unfortunately, many world views are not grounded in authority or well thought out, and leave a person inadequately prepared for life as shown by Sire (1976). As a result there are several areas of emotional problems, including mental illnesses, that can develop from inadequate belief systems.

Albert Ellis, the founder and leading theorist of Rational-Emotive Therapy (RET), has developed a theoretical paradigm designed to deal with inadequate belief systems. However, after careful analysis and consideration of the presuppositions stated by Ellis in RET, one soon finds that, for the most part, his assumptions are based on an almost entirely humanistic level. As a result RET fails to incorporate the spiritual aspects of human nature, while at the same time failing to address those issues distinctly relevant to a Christian belief system.

It is a fact that Christians are often bewildered and discouraged by their problems. Rightly knowing they have found new life in Christ, they wrongly attribute their problems to failure to live up to scriptural standards. In order to address these issues, one needs to develop an adequate view of man that includes his physical, mental and

spiritual dimensions. This thesis will deal with the limitations of humanistic psychotherapy in light of the Christian belief system and some of the ways in which Christians, through irrational and unrealistic beliefs, have become emotionally and mentally disturbed. It is not the purpose of this thesis to disprove and negate Ellis' RET in its entirety. However, it is the purpose of this thesis to develop a greater understanding of man's spiritual nature in light of Ellis' rational-emotive paradigm.

CHAPTER TWO

Theoretical Foundations

Men are not disturbed by things, but by the
view which they take of them.

- Epictetus

The formulation of psychological problems in terms of faulty or irrational premises and a proneness to distorted imaginal experiences represents a sharp deviation from generally accepted formulations of the psychological disorders.

The organic-medical model assumes that many mental disorders are the result of temporary or permanent damage to the central nervous system. The same model applied to psychopathologic conditions assumes that the basic cause of psychopathology is either tissue damage or malfunction or an underlying "diseased" core.

In terms of the dynamic model, abnormal behavior involves an interaction between a set of inborn physiological events that begin to unfold shortly after birth and a set of crucial events occurring during the child's early years. These traumatic environmental events have their roots in the unconscious and any irrationalities observed on the conscious level are only manifestations of

the underlying unconscious event. The presence of self-deception and distortions, however, does not require the postulation of the unconscious, as illustrated in the dynamic model. Irrationality can be understood in terms of inadequacies in organizing and interpreting reality.

Psychopathological problems may not necessarily be the product of physical disease or deep-seated psychological trauma but may result from commonplace processes such as faulty learning, making incorrect inferences on the basis of inadequate or incorrect information, and not distinguishing adequately between imagination and reality. Moreover, thinking can be unrealistic because it is derived from erroneous premises, and behavior can be self-defeating because it is based on unreasonable attitudes.

With this in mind, psychological problems can be eliminated by developing an individual's ability to discriminate, challenging and correcting inadequate or incorrect information, and teaching more adaptive attitudes. Since introspection, insight, reality testing, and learning are basically cognitive processes, this approach to the neuroses has been labeled "cognitive therapy" (Beck, 1967, p. 318).

Cognitive Theory

Cognitive therapy teaches and enables individuals to apply the same problem-solving techniques that they have

used throughout life to correct irrational thinking. The basic premise of cognitive theory is that problems are derived from certain distortions of reality based on erroneous premises and misconceptions (Beck, 1976). These distortions have their foundation in defective learning during individual development. The formula for treatment in cognitive therapy is to help clients identify their cognitive distortions and to learn more realistic ways to formulate their experience.

The cognitive approach brings the understanding and treatment of the psychological disorder closer to an existential frame of reference. Emotional disturbances can be related to the kinds of misunderstandings a person has experienced at various times during his life. By placing emotional disorders within the realm of everyday experience, successful treatment can be initiated in most cases during the initial contact between the therapist and client.

Current developments within the major schools of psychology and psychotherapy have supported the importance of cognitive psychology in the etiology and treatment of psychopathological disorders. The growing support from behavioral and psychoanalytic schools of thought has been charted by Robert Holt (1964). Behaviorists and psychoanalysts have begun to realize certain limitations inherent within their theoretical approach by a neglect of the cognitive realm in human personality. The

psychoanalysts, who strove for depth, and the behaviorists, who prized objectivity above all else, have begun to realize that a denial of their basic values is not necessary in order to include a cognitive ideology in their theoretical foundation.

A new age is emerging in which strict adherence to an ideological school of thought is no longer of prime importance. More and more psychotherapeutic approaches are developing into a creative synthesis of different therapeutic modalities. While continuing to align themselves with their respective schools, many therapists are increasingly using cognitive techniques in their treatment of clients. Behavior therapy, for example, while ostensibly derived from laboratory experiments and from learning theory, is to a large degree an assortment of time-honored techniques individuals have used to deal with their own psychological problems.

The emergence of this common approach may be attributed in part to the endeavors of humanistic psychologists and psychiatrists who have been dubbed "the third force" (Goble, 1970). Humanistic psychology places a significant amount of interest and a willingness to accept at face value, conscious thoughts, goals and attitudes. These theorists focus on the person's ideas, his introspections, his observations of himself, and his plans for solving problems. This change of focus to a person's conscious thoughts,

wishes and ideals has been hailed by Allport (1968) as "a significant revolution." Referring to this approach as "attitudinal" therapy, he perceives points of congruence in the theories of such diverse writers as Adler, Erikson, Horney, Maslow and Rogers. In light of recent developments, the work of Albert Ellis should be added to this list.

Arieti (1968) has underscored the importance of cognitive theory in understanding human problems. He emphasizes that "A great deal of human life has to do with conceptual constructs. It is impossible to understand the human being without such important cognitive constructs as the self-image, self-esteem, self-identity, identification, hope, projection of the self into the future" (p. 1637).

Because cognitive phenomena are easily identified through introspection, they may be readily investigated. Due to the accessibility of the patient's cognitions to systematic investigation, many behaviorally trained writers (for example, Mahoney, 1974; Meichenbaum, 1974) have begun to examine the role of cognitive processes in the treatment of psychopathology.

Rational-Emotive Theory

Rational-emotive therapy (Ellis, 1957, 1962, 1971, 1974b, 1977) along with cognitive theory is founded in the humanistic school of thought, and is derived directly from a theory that assumes that psychological disorders arise from

faulty or irrational patterns of thinking. The thought patterns that typically manifest themselves in chains of preconscious, implicit verbalizations arise from assumptions that collectively constitute the individual's basic belief system.

The history of treatment approaches stressing the importance of belief systems and self-verbalizations is quite extensive (e.g., Korzybski, 1933; Shaffer, 1947). Shaffer defined therapy as a "learning process through which a person acquires an ability to speak to himself in appropriate ways so as to control his own conduct." This has been further validated by Luria (1961) and Vygotsky's (1962) research on the development of internalized control. Luria maintains that a child develops self-control by following first the verbal instructions of others, then by regulating personal acts through audible self-talk, and finally by learning this self-talk to the point that it becomes automatic. Although Adlerian psychology does not quite focus to the same extent on self-verbalizations, their emphasis on problem-solving in the here-and-now is in the tradition of rationalism that is the hallmark of rational-emotive therapy (Ellis, 1974a, 1974b; Harper, 1977).

Ellis' view of the primacy of preconscious thinking is in direct contrast with that of classic psychoanalysis with its paramount emphasis on the unconscious, although both

approaches stress the fundamental role of irrational thinking in the development of psychopathology. As rational-emotive theory developed, it increasingly deemphasized the acquisition of "historical" insight. As a result the emphasis was placed on the "here-and-now" cognitive factors that directly mediate maladaptive behaviors and emotions.

What makes rational-emotive therapy different from other cognitive-behavior therapies is the careful and systematic delineation of the specific types of cognitions that lead to cognitive dissonance and emotional disturbance. While most forms of cognitive-behavior therapy include the proposition that thoughts and emotions are intricately related, Ellis goes much further by categorizing beliefs according to a philosophy or conception of rationality. It is this systematic conception of rationality that makes rational-emotive therapy unique among other cognitive therapies.

The essence of rational-emotive therapy is seen in the A-B-C-D-E paradigm (Ellis, 1971, 1974b). A (the activating experience) refers to some real external event to which the individual is exposed. B (belief) refers to the chain of thoughts or self-verbalizations the person goes through in response to A. C (the consequences) symbolizes the emotions and behaviors that result from B. The A-B-C portion of the paradigm symbolizes Ellis' theory of emotional reactivity.

D stands for the therapist and/or client disputing the beliefs when they are irrational. For Ellis, this involves debating, discriminating and defining a process involving the "logico-empirical method of scientific questioning, challenging and debating" (Ellis & Grieger, 1977, p. 20). E symbolizes the effect of appropriately confronting one's irrational beliefs, that is, the client feels better, and functions more efficiently.

The goal of rational-emotive therapy is to eliminate or reduce the irrational consequences or emotional disturbances in clients. Two specific objectives are: the minimization of anxiety and the minimization of hostility or anger (Ellis, 1967, pp. 206-221). In addition, clients are taught to maintain a state of minimum anxiety and hostility through rational analysis of their disturbances.

Additional goals of mental health are implicit, if not explicit, in rational-emotive therapy. These include an enlightened self-interest that recognizes the rights of others; self-direction, independence and responsibility; tolerance of human fallibility; acceptance of uncertainty; flexibility and openness to change; scientific thinking; commitment to something outside of themselves; risk-taking or willingness to try new things; and self-acceptance. These goals are derivatives of the two major goals and are shared with many philosophers and other psychotherapists.

CHAPTER THREE

Humanistic Psychology

America has produced so . . . much cold, analytical, scientific psychology . . . that we've forgotten that it was man in all his richness that we set out to know.

- Gene F. Nameche

Humanistic psychology originated out of the dissatisfaction felt by many psychologists over naturalistic and psychoanalytic approaches to human personality. It was known as the "third force" in psychology and added humanism to behaviorism and psychoanalysis. Humanistic thinking represented a distillation of ideas from neo-Freudians, Gestalt psychology, existential psychology and phenomenology. The concept of humanistic psychology, which includes an ethical and a scientific orientation, has as its major proponents many experientially oriented theorists and practitioners, such as Abraham Maslow, Carl Rogers, Gordon Allport, Viktor Frankl, Rollo May, Karen Horney and Erich Fromm. In addition to these outstanding humanists are the cognitively oriented therapists who stress the potentialities of cognitive control over dysfunctional emotional processes. Such outstanding cognitive theorists

as Aaron T. Beck, Arnold Lazarus and Albert Ellis, have in many respects developed the most humanistic means of personality change that have yet been invented.

A basic presupposition of humanistic psychology is the study of man as a whole (as opposed to the study of his discrete traits and performances), with the intent of helping him live a happier, more self-actualizing and more creative existence. Ethically, it seems to mean the establishment of a set of rules for man to live by, characterized by an emphasis on human interests rather than on the interests of inanimate nature, of lower animals, or of some assumed natural order of god.

Ellis (1973) feels that to develop a proper and adequate view of humanistic psychology, one must stay within the scientifically verifiable realm, and avoid anti-intellectual, unscientific, magical and religious realms. The essence of humanism, in both psychological and ethical areas, is that man is fully acknowledged to be human - that is, limited and fallible - and that in no way whatever is he superhuman or subhuman. Ellis further contends that one of man's human and fallible traits is that "he has the ability to fantasize about, and to strongly believe in, all kinds of nonhuman entities and powers such as devils, demons, and hells, on the one hand, and angels, gods and heavens, on the other" (p. 2).

Ethical humanism, however, goes hand in hand with the

scientific method. For its fundamental postulate is that, until someone definitely proves otherwise, there is nothing beyond human existence; and that for a human being to substantiate, or scientifically validate, any hypothesis, this hypothesis must be backed by some form of data which is in some form empirically verifiable. Therefore, according to Ellis, any hypothesis which is not empirically verifiable is deemed to be theological, supernatural or magical, and cannot be considered in the field of general or psychological science.

Humanistic psychology, then, becomes the study of the whole individual by logico-empirical means that are distinctly human. It does not assume the presupposition that all humans are perfect, but rather that each human has the potential for human perfection. The purpose of each person, then, is to reach full potential and become self-actualized. According to this thinking, man is not just motivated to survive but to become better and better.

Self-actualization in the humanistic school of thought becomes the inherent ability of man to use his or her talents and capabilities to the fullest. It can be seen as a process in which, as basic human needs are met (i.e., hunger, thirst, sex), the person is freed to meet higher needs (i.e., security, love, self-esteem). As these human growth needs are met and fulfilled, the individual moves closer to a state of self-actualization.

CHAPTER FOUR

Humanistic Limitations

. . . his propensity for wickedness is something more than merely evidence of unrealized potential. . . it is a demonstration that something has gone dreadfully wrong from which there now seems no possibility of self recovery.

- Arthur Custance

The humanistic view of man contains much truth, and it is important to recognize the accuracy of many of its contributions to psychological thought. However, in terms of a "total" view of human nature, serious limitations exist. One of the more serious limitations of humanistic psychology is that it views human nature on a presuppositional basis that does not incorporate the spiritual dimension in human nature in its view of man. Humanistic psychology, in an effort to testify to the dignity, worth and value of man, ignores the evidences that man is a spiritual being who has spiritual needs and capacities. Christian theism explains the human being's spiritual nature in terms of his being created in the image of God (Genesis 1:26, 27), meaning that he was created to share in the very life of God.

Following his experiences as a longtime prisoner in bestial concentration camps, Victor Frankl (1963) pointed out the need for spiritual certainty inherent to human nature. He noted that people seem to lack purpose and meaning in life, even in the face of apparent satisfaction. It is as if humans have a capacity for life that is not met in this present life. Throughout the history of man there has never been a human culture discovered that has not in some form or fashion looked to a higher reality than their own to meet their needs (Grunlan & Mayers, 1979, p. 236 ff.). Many people openly admit a lack of spiritual reality in their lives and an alienation from God. It is alienation from a God who fulfills a true human need that is historic Christianity's explanation for man's having self-interest at the center of his being, and for his resultant bent toward evil. Fundamental to the Christian view of man is his fallen and sinful nature, and inherent bent toward evil (or away from good).

Though man has alienated himself from God, his potential for goodness and noble image can still be seen. It is through the Fall that we have an explanation for his self-centeredness, his inherent bent toward evil, and his spiritual longings. In this sense, the main effect of the Fall on man is that he has become the center of his own life, responsible for his own unhappiness, and is unable on his own to meet his deepest needs. This can be seen in the

strength of his selfish desires, his low self-esteem, his incessant guilt and his difficulty in practicing altruism. Without acknowledging these truths, humanistic psychology has attempted to beautify the fallen nature of man, and at best, has only managed to prolong its inevitable decay.

Humanistic psychology argues that at his core man is motivated toward good behavior and denies that man has a character flaw at the core of his being. It also holds that man's goodness is a result of his following the instincts of his inner nature. While founded on empirical observation, humanistic psychology seems to have missed the observation that while people have much potential for good, it appears that they also have instinctual tendencies that oppose goodness. Left to his own devices, man seems to move toward evil. The goodness that is found in man, more often than not, seems to come from societal restraints rather than an innate desire to do good. After a careful study of human nature, anthropologist Arthur Custance (1975, p. 31) concluded the following in regards to the problem of bad behavior in people:

We are not really more sinful or less sinful, but more restrained or less restrained, i.e., more cultured or less so. In short, the concept of the innocence of childhood requires some careful redefinition, and if by such innocence is meant innate goodness, it is a mistaken view of human

nature. The innocence of childhood results rather from lack of time and opportunity to realize the inborn potential for wickedness than for some natural tendency in the opposite direction. . .

Another point to consider is that few, if any, individuals become self-actualized. Humanistic psychology allows for every individual to reach their full potential, but at the same time fails to explain why people do not reach this potential. Self-actualization, or the potential for goodness, then, becomes an unrealized assumption and not the source of a systematic observation of the real world. Man, in this sense, has the potential for goodness, but yet he seems held back from ever totally realizing his potential.

It is evident in the humanistic school of thought that there lies a great deal of resistance to belief in a spiritual nature in man that renders him less than perfect. In an attempt to validate their presupposition that at his core man is motivated toward that which is good for himself and others, humanists rationalize man's inherent bent toward evil as an ignorance, or lack of use of inner potential to overcome his problems. However, without totally discounting the goodness of man, one must recognize that the evidence does point to the other side of their natures as well. Humanists are hesitant to deal with any aspect of human nature that might have negative effects on the development

of a positive self-image and an autonomous sense of self-direction. If there is fault in man, then there is the possibility of absolute right and wrong, an idea that the humanistic relativist seeks to avoid.

CHAPTER FIVE

Irrational Beliefs

No experience is a cause of success or failure. We do not suffer from the shock of our experiences - the so called trauma - but we make out of them just what suits our purposes.

- Alfred Adler

The ability of man's thoughts to influence his actions is not a new and novel concept. Historically this concept can be traced back to the ancient Stoic Epictetus, who contended that it is not events but our opinion of events that disturb us (Hadas, 1962). Marcus Aurelius, the Roman emperor, wrote a manual for the Roman soldiers so that they could endure great distress with equanimity. Shakespeare also perceived the role that our thoughts have over our feelings when he wrote, "It is our opinions of things which distress us, not the things themselves." Even Sigmund Freud acknowledged that the voice of the intellect, though soft, had a powerful influence over our feelings (Freud, 1945). And finally, we have the same theme mentioned in the Bible when the Apostle Paul wrote in Phil. 4:11, "Not that I speak in respect of want: for I have learned, in whatsoever state I am, therewith to be content."

Despite its historical development, the concept that all emotional problems are created in our minds was not recognized and incorporated into the realm of psychological wisdom until recently. This was largely due to the powerful influence that orthodox psychoanalysis and classical behaviorism exerted over the Zeitgeist of the early twentieth century. With the psychoanalytic emphasis on past traumatic events, and the behavioral emphasis on environmental contingencies, thinking in psychopathology was for decades, unresponsive to new thought.

The history of science is replete with instances of lack of acceptance of new discoveries or insights at given points in time. Even the greatest of minds have often been constrained by what has been called the Zeitgeist (the spirit or intellectual climate of the times). In this sense the acceptance and use of a cognitive approach to psychopathology was, in effect, limited by the dominant patterns of thought espoused by psychoanalysis and behaviorism. Slow change seems to be the rule for scientific progress.

Before the development of Freudian psychoanalysis and Watsonian behaviorism, there were centuries during which human behavior was thought to be controlled by demonic possession. Epictetus was largely forgotten until his thoughts were focused on again by the founder of the Rational-Emotive school of thought, Albert Ellis.

Unlike the orthodox psychoanalytic and the classical behavioristic psychologies, rational-emotive therapy places man squarely in the center of the universe. In this sense man is in control of his own emotional fate and has almost full responsibility for choosing to make or not make himself seriously disturbed. Incorporated in the rational-emotive view of man are biological and early environmental factors that weigh quite heavily in the chain of events that lead to human disorganization and disorder. However, at the same time it insists that the individual himself can, and usually does, significantly intervene between his environmental input and his emotionalized output. As a result of this ability, man is seen as having an enormous amount of potential control over what he feels and what he does. Moreover, when he unwittingly and foolishly makes himself disturbed by irrational and faulty assumptions about himself and others, he can almost always make himself undisturbed again by utilizing rational-emotive procedures (Ellis, 1973).

Ellis claims no originality for the concepts that make up rational-emotive therapy. While he discovered many of them through his own experience, he recognized that they were already formulated by many ancient and modern philosophers, psychologists, psychotherapists and social thinkers. Ellis' greatest contribution lies in the discovery that these beliefs should be questioned.

As his rational-emotive approach began to develop, Ellis became convinced that irrational, neurotic early learnings persisted, rather than being extinguished as they should be when they are not reinforced, because individuals persisted in reinforcing them by reindoctrinating themselves and resisting therapy and its insights. Ellis then turned to teaching his patients to change their thinking to agree with a rational approach to their problems. Ellis feels that about 90 percent of those treated by this method for ten or more sessions showed distinct or considerable improvement (Ellis, 1962).

Through careful research and study, Ellis (1962, pp. 60-88) has found and delineated eleven common irrational ideas or values that are universally inculcated in Western society and "would seem inevitably to lead to widespread neurosis" (p. 61).

IRRATIONAL IDEA NO. 1: "The idea that it is a dire necessity for an adult human being to be loved or approved by virtually every significant other person in the community."

IRRATIONAL IDEA NO. 2: "The idea that one should be thoroughly competent, adequate and achieving in all possible respects if one is to be considered worthwhile."

IRRATIONAL IDEA NO. 3: "The idea that certain people are bad, villainous and that they should be severely blamed and punished for their villainy."

IRRATIONAL IDEA NO. 4: "The idea that it is awful and catastrophic when things are not the way one would very much like them to be."

IRRATIONAL IDEA NO. 5: "The idea that human unhappiness is externally caused and that people have little or no ability to control their sorrows and disturbances."

IRRATIONAL IDEA NO. 6: "The idea that if something is or may be dangerous or fearsome one should be terribly concerned about it and should keep dwelling on the possibility of its occurring."

IRRATIONAL IDEA NO. 7: "The idea that it is easier to avoid than to face certain life difficulties and self-responsibilities."

IRRATIONAL IDEA NO. 8: "The idea that one should be dependent on others and needs someone stronger than oneself on whom to rely."

IRRATIONAL IDEA NO. 9: "The idea that one's past history is an all-important determiner of one's present behavior and that because something once strongly affected one's life, it should indefinitely have a similar effect."

IRRATIONAL IDEA NO. 10: "The idea that one should become quite upset over other people's problems and disturbances."

IRRATIONAL IDEA NO. 11: "The idea that there is invariably a right, precise and perfect solution to human problems and that it is catastrophic if this perfect solution is not found."

CHAPTER SIX

Humanistic Beliefs

When man is aware, he is aware that his choice makes a difference in the flow of his awareness, that he is not a bystander, but a participant in experience.

- J.F.T. Bugental

The eleven irrational ideas delineated by Albert Ellis are almost universal in our society, and when they are accepted and reinforced by continuous self-indoctrinations, they lead to emotional disturbances. Disturbed individuals are unhappy because they are unable to achieve their unreasonable "shoulds," "oughts," and "musts," and therefore, fall short of their ego ideal or self-expectations. Ellis (1962, p.89) stated that,

once a human being believes the kind of nonsense included in these notions, he will inevitably tend to become inhibited, hostile, defensive, guilty, ineffective, inert, uncontrolled, unhappy. If on the other hand, he could become thoroughly released from all these fundamental kinds of illogical thinking, it would be exceptionally difficult for him to become

intensely emotionally upset, or at least to sustain his disturbance for any extended period.

While Ellis' fallacious ideas are almost universally accepted in our society, his views apply to people in general and make general assumptions about human beings and about the nature and genesis of their unhappiness or emotional disturbances. The following assumptions are among those delineated by Ellis (1962) in rational-emotive therapy:

1. Human beings are uniquely rational, as well as irrational.
2. Emotional or psychological disturbance is a result of irrational and illogical thinking.
3. Human beings are biologically predisposed to irrational thinking.
4. Since thinking accompanies emotion and emotional disturbances, irrational thinking necessarily persists if the emotional disturbance persists.

While these assumptions, when applied to human nature in general, do seem to represent a generally accepted universal belief system, they are predicated on a distinctly humanistic belief system. In this sense, specific application of these constructs can only apply to those who adhere to a humanistic belief system. For those individuals

who operate under a different set of beliefs, such as Christians, Ellis' views are only valid inasmuch as they apply to all individuals in a general sense.

Ellis' humanistic presuppositions do not allow any latitude for moral and spiritual certainty. His definition of "rational" is also based on a distinctly humanistic philosophy. Personal ethics, including sexual ethics, are derived from a few, if any, principles. Basically, situationally relative ethics can be derived by humans based upon whether their conclusions result in pleasure or pain and whether they are in both one's long and short-term interests. Relations with other people are a matter of enlightened self-interest. Thus, Ellis espouses most rules of social ethics as being in a person's best interest, but, eschewing dogmatic thinking and all absolutes and imperatives, Ellis holds that people do not have to abide by these rules.

Because of its moral relativism and straightforward attacks on many of the sacred myths, superstitions and religiosities that are so prevalent among human beings, rational-emotive therapy is often viewed as being anti-Christian. Especially when it contends that people do not absolutely need love or someone stronger than oneself (e.g., God) on whom to rely.

In light of the above mentioned argument, one cannot deny that to some degree the seat of neurotic disturbance

lies within one's internalized thought processes. It seems also reasonable to conclude that faulty or irrational thought patterns which are expressed in self-defeating verbalizations can, in fact, lead to emotional disturbances. However, the degree to which a thought pattern is considered to be irrational is a relative issue that lies solely within an individual's belief system.

CHAPTER SEVEN
Christian Beliefs

God said it, I believe it, and that settles it!

- Author Unknown

Central to the Christian belief system is the authority and sufficiency of the Bible. Christianity holds the Bible as God's record, uniquely inspired by the Holy Spirit. It has been given without error, faithfully recorded by holy men of God as moved by the Holy Spirit, and subsequently transmitted without corruption of any essential doctrine.

God's uniquely inspired record serves as the authority for Christian truth and contains all things necessary to salvation and Christian living. Therefore, any rule of life which fails to measure up to the Holy Scriptures is seen as inadequate, and anything less than Scripture lacks God's divine dimension and can lead man astray.

Man's view of inspiration is the key to his view of the Scriptures. "All scripture is given by inspiration of God" (II Timothy 3:16). The Holy Spirit inspired the prophets who faithfully recorded the message. However, whenever man is involved in the process, there is the possibility of error. But the message itself miraculously bears record to God's divine inspiration and preservation of His Word.

While the Bible does contain all things necessary for Christian living, blind faith without question has often led to misunderstanding and misinterpretation of Biblical revelation. Throughout the centuries the Church has sought to interpret God's divine revelation in the development of its theology, and as the basis of its authority. As a result the religious dogma and tradition of the Church has influenced man's understanding and interpretation of Biblical revelation.

The belief that one should not question the authority of the Church is a fundamental precept that has been passed down through generations since the foundation of the Church. For years unyielding dogmatic allegiance to the Church was given without question. Those who sought reformation within the Church were often labeled heretics and persecuted for their beliefs and actions (cf. Fox's Book of Martyrs, 1926). It was this belief that created the stagnant period of the Middle Ages with its appeal solely to Scriptures, and its reliance on dogma. The ideological standards set by the Church during the Middle Ages, in many ways, continue to be a stumbling block for those who unyieldingly accept the Church as the absolute and final authority in matters relating to Biblical understanding and Christian living.

Christians have often, through necessity and the fear of disassociation, adapted their ways and beliefs in order to live up to the Church's ideological expectations in spite

of some very real and discernable problems. In terms of modern psychological insight, Leon Festinger (1957) has illustrated this point in his theory of cognitive dissonance. The theory of cognitive dissonance holds that an individual will change his beliefs in order to fit his actions. It is for this very reason that Christians have suffered through the centuries with feelings of guilt over physical and mental problems. The belief that Christians are immune from physical and mental disorders, and those who do suffer have sin in their lives, has controlled the lives of believers throughout the history of the Christian Church. Nowhere in the Bible has God promised relief from the troubles, be they physical or mental, inherent to mankind. But the Church, through its naivete and ignorance, has held some very strong convictions about the relationship of perfect peace in the life of the believer and truly appropriating the adequacy of Christ. With this belief hanging over them, Christians have for centuries denied any problems that might indicate sin in their lives or a less than perfect Christian walk.

Several years ago, psychologist Paul Hauck (1972, pp. 45-47) came across a young man who had sought his help to gain relief from a recent but deep and disturbing depression. He related his problems as a concern over adultery. He once belonged to a fundamentalist faith, which he accepted fully and received great comfort from - except

for its ruling that he was living in adultery, when it was discovered that he had remarried. The church he belonged to held that the only acceptable Biblical basis for divorce was unfaithfulness. The young man left the church only to be followed, in later years, by feelings of intense guilt over living a life in sin.

As their conversation deepened, it was learned that the young man had serious doubts about Scriptural interpretation as it related to his situation, but felt guilty anyway. Repeatedly he made reference to the fact that it had to be true because it was stated clearly in the Bible. Dogmatic faith, such as this, is not uncommon in the Christian Church of today. Many Christians have unyieldingly submerged their own convictions to those of the Churches.

Dr. Hauck was never fully satisfied throughout the course of counseling that Irrational Idea No. 2 was the basis of his problem. He began to realize that this young man had a more fundamental irrational idea that forbade him from questioning the authority of the Church. The result of this young man's conviction was to internalize his feelings of guilt and blame himself for being an adulterer. As a result of this young man's dilemma, Dr. Hauck postulated a twelfth irrational ideal in order to account for his seemingly dogmatic conviction. This conviction was expressed as:

IRRATIONAL IDEAL NO. 12: "The idea that beliefs held by respected authorities or society must be correct and should not be questioned."

Hauck (1972) suggests that "the greatest support for postulating a twelfth irrational idea comes from the nature of rational-emotive therapy. Emotional disturbance is overcome only after an individual has overthrown his illogical beliefs. Unless he challenges the authorities or society that taught him the first eleven, he cannot change any of them" (p. 49).

Further reflection over this conclusion led the author of this thesis to wonder about the presence of this idea among other people, specifically those with a fundamental Christian belief system, what its effects are, if any, and how it fits with the eleven irrational beliefs postulated earlier by Ellis.

CHAPTER EIGHT

Irrational Christian Beliefs

Not that I speak in respect of want: for I have learned, in whatsoever state I am, therewith to be content.

- The Apostle Paul

It is a fact that Christians are often bewildered and discouraged by their problems. Rightly knowing that they have found new life in Christ, they wrongly attribute their most frustrating problems to personal spiritual failure. This sense of personal spiritual failure, more often than not, comes from irrational and erroneous thinking often generated through religious indoctrination, the Churches reliance on dogma and time-honored standards held by the Christian community.

The question as to why many Christians develop emotional or mental disorders is a subject of much discussion among Christians. Some feel that there is no valid reason for a Christian to become emotionally or mentally disturbed. They argue that the benefits of Christianity for this life are sufficient to prevent any such disorder. "Since the Lord can do anything, why can't He cure a Christian with an emotional or mental problem?",

they ask. Others feel that emotional and mental suffering always stems from personal spiritual failure or sin.

The idea that a Christian can know perfect mental peace at every moment is irrational, unrealistic and unscriptural. The fact is that Christians are still human and subject to the same physical and psychological limitations inherent to mankind in general. Even Christ was not in perfect mental peace at every moment, as indicated by the gospel accounts of His times of anguish and distress (Matt. 26:37-39; Mark 14:33-34; Luke 22:44; John 12:27).

Christians suffering from emotional or mental problems often receive a lot of advice, some useless and some that only helps relieve a few symptoms of their disorder. They are either given sympathy and encouragement, or criticism and exhortation to straighten up and exercise more faith in God. Well-meaning friends usually urge them to read the Bible, pray and draw near to God. While such measures may give temporary relief from suffering, they do not often effect a cure to the problem. To get permanent relief, one must remove the cause of the symptoms.

When the cause of the symptoms stems from irrational, unrealistic and unscriptural beliefs, relief can only come through identifying the irrational belief or beliefs, challenging these beliefs until disbelieved, and substituting rational beliefs for them. Rational-emotive therapy can provide the medium through which this process

can be accomplished. The specific application of rational-emotive therapy will be covered in the next section of this thesis.

As postulated in this thesis, the seat of neurotic disturbance for the Christian often rests within the individual's belief system and thought processes. Obviously not every belief the Christian has creates a disturbance, only some. In the following section the author has delineated some of the common irrational ideas and beliefs that cause Christians to suffer. Some will seem so obvious that one is inclined to say, "What's so new about that?" Actually, they are not obvious at all. These ideas and beliefs are rigidly believed by millions of people throughout the Christian world. The author concludes that the following irrational ideas and beliefs can cause emotional and mental distress. This is not meant to be an all-inclusive representation of the irrational ideas and beliefs Christians often hold, but rather the following is a representation of the more common irrational ideas and beliefs held by many Christians.

IRRATIONAL CHRISTIAN BELIEF NO. 1 - Because I'm a Christian, I will not suffer from physical, psychological, or spiritual problems.

There exists today some confusion as to what benefits one can expect from becoming a Christian. Some Christians

unrealistically believe that upon the acceptance of Jesus Christ into their lives that they become immune to every physical, psychological and spiritual problem that arises. Others believe that with salvation comes a cure for each of these problems. The fact is that nowhere in the Bible has God promised freedom from all the troubles in our present life, although it is true that in the future heavenly life, He will give us freedom from pain and unhappiness (Rev. 21:4).

There is, however, the promise from God that He would be with His children through whatever trials and tribulations might befall them (Matt. 28:20). In other words, a Christian can and will suffer from the problems inherent to mankind, but along with his suffering is a source of help for his problems that non-Christians do not have. God has promised to provide either resolution or endurance for the problems that may befall his Children (1 Cor. 4:9-13; 10:13; 12:9; Heb. 4:16).

It must be remembered that while God has promised to help His children, He did not promise to directly remove the problem or cure the disease. God's help can come in many ways and forms. God may direct us to a doctor or counselor to help us with our problem, or He may give us the grace and strength to endure the hardship.

Growth for the Christian comes through struggle. Without the opportunity to overcome the trials and

temptations of life, no spiritual growth will occur in the life of the Christian. In fact, it is the problems of life that afford the Christian an opportunity for direct application of the practical, everyday benefits of being a Christian.

Christianity's greatest example of spiritual growth through suffering comes from the life of the Apostle Paul who suffered all things that he might gain Christ (Phil.3:8). Paul suffered want, yet he learned as a Christian to accept whatever circumstance he was in as an opportunity to grow in the Lord, who enabled him to be content.

As noted earlier, even Christ did not have perfect peace of mind during every moment of His life. Christians must accept the fact that they are not exempt from mental illness, "for He causes his sun to rise on the evil and the good, and sends rain on the righteous and the unrighteous" (Matt. 5:45). Christians are just as vulnerable to emotional and mental problems as non-Christians. The difference, as mentioned earlier, is that Christians have additional spiritual resources upon which they can rely. God will at times permit mental illness to come into the lives of His children, but at the same time He also provides some relief through human understanding, sympathy, encouragement, guidance, counseling and even medical treatment. The Christian has faith that there is a divine

purpose in his suffering for an ultimate good which he might not understand this side of eternity, but this does not mean that he cannot use all the means available to him to alleviate that suffering.

IRRATIONAL CHRISTIAN BELIEF NO. 2 - My mental, physical, and spiritual problems are the direct result of sin in my life.

The concept of a Christian's suffering being the direct result of sin in their lives has been passed down throughout the history of Christianity. Many Christians have viewed mental illness as a sort of divine retribution for acts committed against God. As a result, many Christians have looked for some unconfessed sin in their life as the source of their suffering, rather than looking for other mitigating factors that might account for their distress.

In order to develop a proper understanding of the relationship between mental illness and sin, one must first understand what mental illness and sin are. The concept of mental illness is based on a relative description of what is normal. Normalcy, for the most part, is a statistical concept based on cultural norms and mores. However, mental illness, in a general sense, can be viewed as any behavioral disorder, whether functional or organic, which is of such a severity as to require professional help and (usually) hospitalization. Whereas the consequence of sin is viewed as a separation between God and man. In other words, sin is

any act by which man is separated from the holiness and righteousness of God, but not His love. To therefore equate mental illness and sin as two intrinsically parallel concepts is a basic misconception.

To view mental illness as sin is both unrealistic and irrational. Realistically, if mental illness is the result of sin, then the whole of mankind is mentally ill, for basic to the Biblical view of man is the belief that "all have sinned and fallen short of the glory of God" (Rom. 3:23). It is irrational for the following reasons. First, it is a misconception that Christians cannot or should not become mentally ill. Christians are subject to the same laws of nature as pagans. Though their minds be transformed in the image of Christ, their bodies are still subject to human limitations. It is true, as mentioned earlier, that Christians have God's healing power available but this healing power may include human help when God makes it available.

Secondly, it is a theological misconception to think that mental illness is always the direct result of sin. This is not, however, to say that mental illness cannot be the result of a sinful life. Sin in certain cases may play a part in causing the mental illness. For example, in the case of depression, the guilt feelings that cause the depression may indeed be a guilt of past sin. This does not make the depression itself sin, even though it may be sin

related.

There are many different kinds of mental illness. And with this there are many causes for mental illness. Mental illness can come through physical illness, accident or other uncontrollable factors that may not necessarily involve sin. It can be, in some cases, the product of physical disease or deep-seated psychological trauma, and in other cases, a learned set of maladaptive behaviors. Many times Christians blame their mental illness on sin, when in fact mental illness can result from a variety of circumstances unrelated to personal sin.

It may be that sometimes man's folly can indeed lead to results that are painful, but to conclude that God punishes His children by inflicting mental illness on them is unfounded. He is a God of righteousness and justice, but not vindictiveness. Suffering may be part of God's permissive will, allowed temporarily for the purpose of yielding a greater blessing, but to suggest that mental illness is the result of unconfessed sin is irrational.

IRRATIONAL CHRISTIAN BELIEF NO. 3 - Increased Bible reading and prayer will cure whatever mental illness I have.

To say that God will cure whatever psychological disorder I have through increased Bible reading and prayer is unfounded and irrational. It is true that God is omnipotent and sovereign and can do anything He desires.

However, God does not always choose to exercise His powers on our behalf. To say that God will effect a divine cure, through Bible reading and prayer, is to limit God to only one choice. By doing this we, in effect, are reducing God to a purely human level by not allowing God the freedom to exercise His will for our lives. The issue here is really whether Christians have a right to expect God to cure their illnesses in a way that circumvents His natural laws rather than working through people and the knowledge He has given them. God works through doctors to cure our physical disorders, and through pastors and His Church to cure our spiritual disorder. It is reasonable that God should work through mental health professionals to cure our mental disorders.

Physical disorders can result from ignoring God's laws concerning the body. The person who disregards God's Word (i.e., the Bible) and the principles set down in it for Christian living will often suffer spiritual problems. The same principle applies in the psychological realm. The individual who ignores and disregards the rules for good mental health will often suffer from psychological disorders. This is not to say that by following rules for good mental health, one will never suffer mental illness, but rather the likelihood of suffering mental illness is increased by not following sound principles for good mental health.

Often, when suffering from mental illness, Christians will go directly to God for relief from their distress, yet at the same time they may be careful to avoid asking God to help them recognize the problem causing their suffering. When God created man He gave him a mind, and with his mind came the ability to make use of whatever truth is available, including information about psychological problems. When Christians experience psychological problems, God expects them to try to discover the cause of their distress and to do something about it, using the resources He has given them.

Because the causes of psychological distress are often hidden in the subconscious and inaccessible, because they are painful to deal with on a conscious level, the help of another person is often necessary in discovering them. If a Christian needs the help of a counselor or psychologist to discover the root of their distress, this is not an indication that God has failed or that the Christian lacks faith, but rather that the knowledge they have for dealing with the problem is limited, and one more experienced is needed. There is no sin in seeking the help of others. While the Bible contains all things necessary to salvation and Christian living, it does not contain all the truth God has given man. God has ordained knowledge outside of the Bible and given it to mankind through natural revelation in order to help one another. Truth is truth wherever one finds it, and truth in one area cannot contradict truth in

another area. While it is true that the Bible does provide a number of principles that support mental health, it does not contain all things necessary for the effective treatment of mental illnesses. Increased Bible reading will build faith (Rom. 10:17) and inspire man towards victorious Christian living (1 John 5:4), but to believe that it will cure mental illness is unfounded.

There are, however, instances in which Christians have no available resources for relief from mental illness, and turning to God through prayer may be the only means available for help. Such would be the case of a missionary who is isolated from other people, and in severe psychological distress. In such a case, God may either help the individual to endure the distress that they are experiencing, or God may choose to miraculously heal that individual.

There are also instances in which a Christian who has a psychological problem with distressing symptoms will show no improvement. Just as cancer cannot always be removed, sometimes psychological problems occur that are inaccessible and incurable. In such cases God gives grace to endure that which cannot be removed. In 2 Corinthians 12:7 Paul speaks of his thorn in the flesh, a weakness or infirmity which God would not resolve in answer to Paul's prayer. God instead chose to give him grace to withstand it (vs. 9). Similarly, Christians are encouraged by God to go to Him in prayer and

ask for help to endure the effects of their problems (Heb. 4:16).

In 1 Corinthians 10:13, Christians are told that, "God is faithful, and will not allow you to be tempted (tested) beyond what you are able; but with the temptation (testing) will provide the way of escape also, that you may be able to endure it." Christians have used this verse at times to justify the concept that, since God has provided a way out of any testing, there is no excuse for any Christian to ever suffer mental illness. They assume that suffering from any form of mental illness indicates spiritual failure on the part of the Christian. However, as mentioned earlier, there are times when spiritual failure (i.e., sin) can result, or play a part, in the development of mental illness (e.g., depression).

It is important to understand that the endurance spoken of in 1 Corinthians 10:13 is somewhat dependent upon the obedience of the believer. A way out may exist, but the Christian may not utilize it or even be aware of it. It is not beyond God to use mental illness as a means of growth for the Christian. The Christian who suffers from mental illness may feel as though he has not endured, but if he comes through the experience of a healthier person psychologically and spiritually, then he has endured and profited from the experience.

Yet many Christians dogmatically believe that God will

cure mental illness if they merely read their Bible, pray, and wait to be cured. Such people usually keep this unrealistic view because they are unwilling to face up to the problems within themselves. They avoid any help that might lead to the discovery of a problem that they are not willing to face. Often this is the result of unrealistic expectations placed on them by the Church and Christian community.

In conclusion, while increased Bible reading and prayer may be effective means for dealing with spiritual problems, psychological disorders are usually best approached through counseling and psychotherapy, and other distinctly psychological approaches. Christ Himself said that one who is sick needs a physician (Matt. 9:12). Christ recognized that those trained in the treatment of illnesses, including mental illness, have a legitimate place in the life of the Christian. It is irrational and unrealistic for any Christian to believe that God will cure their mental suffering through increased Bible reading and prayer when trained professional care is available. God has never promised such miraculous cures in the present.

IRRATIONAL CHRISTIAN BELIEF NO. 4 - Because I'm a Christian, only God can cure my mental illness.

To suggest that God is the only one who can cure mental illness in a Christian is, in effect, suggesting that the

knowledge and truth discovered through scientific methodology is limited entirely to the secular world. God has given to man a certain amount of knowledge about psychological matters. Along with this knowledge, God has given man the ability to use this knowledge therapeutically in order to help disturbed people. It is irrational for the Christian to believe that God does not work through trained mental health professionals since God uses doctors to treat physical disorders and pastors to help people with spiritual problems. To suggest any differently is to limit the ability of God to exercise His will.

This is not to say that Christians should not also pray to God and have faith that He will help them. Both prayer and faith are mighty tools at the disposal of the Christian. Great things have happened to faithful and praying Christians. However, the question is, "By what means will God cure mental illness in His children?" Some Christians mistakenly believe that as far as mental illness is concerned, God is the only one who can help them and He is all that is necessary. Yet, they are quick to acknowledge God's ability to work through doctors and pastors in the treatment of physical and spiritual problems. This seeming incongruity, while irrational and illogical, is held by many Christians.

The reason given sometimes for the Christian's reluctance to seek competent psychological treatment outside

of the Church is that non-Christian mental health workers may lead them morally astray. While the Christian always runs this risk in dealing with a secular world, most competent mental health workers will respect and work with the moral principles held by the Christian. In addition, Christianity is experiencing the growth of a new breed of mental health professionals specializing in a Biblically based psychology that incorporates a Christian value system. With this in hand, the Christian suffering mental distress need not fear seeking competent psychological help.

Another reason why some Christians are reluctant to seek help for mental illness is the stigma attached to it by the Christian community. These Christians feel exceedingly guilty for not living "the victorious Christian life." As a result they are reluctant to admit that they have psychological problems. They would much rather call them "spiritual problems" and try to seek a cure through spiritual methods (such as increased Bible reading and prayer). In reality these Christians are merely deceiving themselves. The Bible instructs Christians to recognize the truth and think upon it (Phil. 4:8). If a Christian has a psychological problem, they should admit their need for help, which may involve seeking competent psychological treatment.

To expect God to miraculously cure mental illness would be like expecting God to miraculously heal a broken

leg. In both of these cases, God has already provided for His children through the knowledge He has given mankind. There is no reason for God to directly intervene from heaven with a miraculous cure. To claim that an omnipotent God never uses other people to effect a cure for mental illness is unrealistic and irrational. God has already intervened by giving doctors the knowledge to mend broken legs, and psychologists the knowledge to relieve mental disorders. It is a mistake to believe that God cannot divinely cure mental illness, but it is even a bigger mistake not to recognize the help that God has already provided.

IRRATIONAL CHRISTIAN BELIEF NO. 5 - By living a godly and obedient life based on sound Biblical principles, I will be assured freedom from mental illness.

The belief that the Bible has all the answers necessary to avoid mental illness is unfounded and irrational. While it is true that the Bible contains all things necessary for Christian living, some Christians believe that by living a godly and obedient life, following sound Biblical principles, one will be guaranteed immunity from any mental unrest. This is not true and there is no Biblical support for this belief.

This is not to say that by living a godly and obedient life based on sound Biblical principles one will not gain some measure of peace in their lives. God blesses those who

follow His Word and are obedient to His commands. 1 Peter 3:10-13 teaches that the life of a Christian will be blessed through obedience to God's Word. However, in the same chapter, Peter points out that even an obedient Christian may experience suffering. Peter goes on to further explain that suffering is not always the result of doing evil, but may simply be the will of God for the life of the believer. Paul, in 2 Timothy 3:12, says that all who live godly lives will suffer persecution. Persecution often involves physical and mental suffering.

As mentioned earlier, growth in the life of the Christian often comes through trials and tribulation. To expect God always to work through positive and rewarding experiences is unrealistic. Growth comes through victory, and victory through struggle. Without struggle the Christian does not have the opportunity to overcome and grow from an experience.

Too often Christians are caught up in the belief that all things work together for good (Rom. 8:28), without realizing that the "good" referred to means good from God's point of view. As a result they begin to question their own spirituality rather than accepting their suffering as a vehicle used by God to effect growth in their lives. In this sense, it is true that Christians suffer mental illness because God has permitted them to suffer in this way. If God had wanted to prevent it, He could have. The good

things mentioned in Romans 8:28 sometimes involve experiences such as anxiety, tension and stress that produce mental illness in the life of the godly and obedient Christian. Although these experiences are unpleasant, they are also good because of the growth they are intended to produce in the life of the believer (2 Cor. 12:7; 1 Peter 1:6-7; 4:19).

God in His sovereignty regulates the lives of all Christians. The trials and tribulations He sets before His children are often used to achieve purification in their Christian lives (2 Cor. 7:9, 11); to produce patience (Rom. 5:3; James 1:3); to produce humility (2 Cor. 12:7-10); to produce dependence upon God (2 Cor. 1:8-9). These are obviously good reasons for God to bring suffering into the lives of obedient Christians. Throughout the history of Christianity, the godliest of saints seem to have suffered the most. But through their suffering, they have drawn even closer to God.

Although God blesses the godly and obedient Christian, they are not immune from the trials and tribulations of life. God permits trials in the life of every Christian for a good purpose. This happens in the physical, spiritual and psychological realms. The Christian who properly faces the trials will often experience increased spiritual growth in their lives (Heb. 12:10-11). By recognizing the trials of life as opportunities for greater growth, rather than the

chastisement of God, the Christian can experience the change in his life that God had intended.

CHAPTER NINE

Treatment

Finally, brethren, whatever is true, whatever is honorable, whatever is just, whatever is pure, whatever is lovely, whatever is gracious, if there is any excellence, if there is anything worthy of praise, think about these things.

- The Apostle Paul

As mentioned earlier in this paper, the presence of mental illness in a Christian does not necessarily indicate a sin or spiritual failure. Mental illness can be the result of physical or psychological factors adversely working in the life of the Christian. However, the relationship between spiritual, physical and psychological factors is one that should not be overlooked. Physical disorders can lower one's resistance to psychological disorders. Likewise a psychological disorder can aggravate a person's physical illness. Often spiritual failure can result in discouragement or depression and effect physical and psychological disorders. In turn, a Christian's ability to utilize spiritual principles may be decreased by either physical or mental disorders.

In order to effectively evaluate the etiological

factors contributing to mental illness, the physical, psychological and spiritual dimensions of man must be taken into account. The physical dimension can be evaluated accurately only by a medical doctor. To evaluate the psychological dimension, a trained and competent psychologist or psychiatrist is often required. While a minister with theological training is the best equipped to evaluate the spiritual dimension. What is essential is an individual with a knowledge and understanding of spiritual truth and its proper application to everyday life.

However, when mental illness is the result of a faulty or irrational belief system, competent psychological and spiritual training, in and of themselves, may not be sufficient to effectively deal with the problem. What is needed, then, is an integrative approach to treatment that combines both, effective psychological intervention with spiritual knowledge and truth.

The most effective psychological therapy for the treatment of faulty and irrational beliefs has been rational-emotive therapy, developed by Albert Ellis. As mentioned earlier in this paper, rational-emotive theory postulates that people become disturbed when they believe faulty, unrealistic and irrational ideas. These beliefs then become internalized, silent, conscious or unconscious comments that the person makes to himself. It is these ideas or beliefs that cause the disturbance within the

individual rather than the actual event itself (Hauck, 1972).

The goal of RET is to eliminate or reduce the irrational consequences or emotional disturbances in clients. Three specific objectives are: (1) to eliminate anxiety, guilt and depression; (2) to minimize anger, hostility and violence; and (3) to reduce low frustration tolerance and inertia in clients through rational analysis of their disturbances. Additional goals of RET include an enlightened self-interest that recognizes the rights of others; self-direction, independence and responsibility; tolerance of human fallibility; acceptance of uncertainty; flexibility and openness to change; scientific thinking; commitment to something outside of themselves; risk-taking or willing to try new things; and self-acceptance (Ellis, 1967, 1973).

Treatment in RET generally involves a four step process in which the therapist helps the client to replace their illogical and irrational ideas and beliefs with logical and rational ideas and beliefs. The first step is to show clients that they are illogical, to help them understand how and why they became so, and to demonstrate the relationship of the irrational ideas to their unhappiness and emotional disturbance.

In the second step, RET goes beyond this by showing clients that they maintain their disturbance by continuing

to think illogically, that is, that their present irrational thinking is responsible for their condition, and not the continuing influence of early events.

The third step is to get clients to change their thinking and to abandon irrational ideas. While some approaches depend upon clients doing this themselves, RET recognizes that illogical thinking is so ingrained that clients cannot change it by themselves.

A final step goes beyond dealing with the specific illogical ideas of clients, and considers the main general irrational ideas, together with a more rational philosophy of living, so that clients can avoid falling victim to other irrational ideas and beliefs.

The result of this process is that clients are able to develop a more rational approach to life; they substitute rational attitudes and beliefs for irrational ones. Once this is accomplished, the negative, disturbing emotions are eliminated, along with self-defeating behavior.

While RET has made an enormous impact on both professionals and the public in recent years, it is purely humanistic, existentialist and hedonistic. It makes growth and happiness the relevant core of a person's intrapersonal and interpersonal life. Personal ethics, including sexual ethics, are derived from a few principles. Basically, situationally relative rights and wrongs can be derived by humans based upon whether their conclusions result in

pleasure or pain, and whether they are in both one's long and short-term interests.

Because Albert Ellis straightforwardly attacks many of the values, ethics, beliefs and moral standards held by the Christian Church and community, RET is often viewed as anti-Christian. Especially when it contends that people do not absolutely need love, and that "rational belief," as defined by Ellis, includes atheism. However, to discount the value and effectiveness of RET based on the values of its founder would be a regrettable mistake.

It is ironic that Albert Ellis, who holds such unorthodox views on religion, should be the one to offer a system of treatment so highly applicable to the problems inherent to Christianity covered in this paper. The integration of Christian values in the application of RET should come very easily to the pastoral counselor, since RET is basically in harmony with many of Christianity's most highly valued beliefs. The fact that there is not perfect agreement should not deter him from recognizing the similarity between rational thinking and Scripture. Many of the principles and techniques of RET can be directly applied to irrational Christian beliefs without dogmatically accepting the total views of Ellis' philosophy.

The goals of psychotherapy, to bring symptomatic relief and to help a person grow toward improved mental health, are more likely to be realized in a person who can appropriate

and apply his faith. However, when the spiritual truth that the person draws upon is based on faulty and irrational assumptions, they are more likely to be alleviated by a Christian counselor who can help recognize these destructive elements without attacking the individual's faith. RET offers both counselor and counselee a rationale that can be applied in complete harmony with their Christian point of view.

References

- Allport, G. The Person in Psychology. Boston: Beacon Press, 1968.
- Arieti, S. The present status of psychiatric theory. American Journal of Psychiatry, 1968, 124, 1630-1639.
- Beck, A. T. Depression: Clinical, Experimental, and Theoretical Aspects. New York: Harper & Row, 1967.
- Beck, A. T. Cognitive Therapy and the Emotional Disorders. New York: International Universities Press, 1976.
- Custance, A. Man in Adam and in Christ. Grand Rapids: Zondervan, 1975.
- Ellis, A. Outcome of employing three techniques of psychotherapy. Journal of Clinical Psychology, 1957, 13, 344-350.
- Ellis, A. Reason and Emotion in Psychotherapy. New York: Lyle Stuart, 1962.
- Ellis, A. Goals of Psychotherapy. Englewood Cliffs, N.J.: Prentice-Hall, 1967.
- Ellis, A. Growth Through Reason. Palo Alto, Calif.: Science & Behavior Books, 1971.
- Ellis, A. Humanistic Psychotherapy: the rational-emotive approach. New York: Crown Publishers, 1973.
- Ellis, A. Humanistic Psychotherapy. New York: McGraw-Hill, 1974. (a)

- Ellis, A. Rational-Emotive Therapy. In A. Burton (Ed.), Operational Theories of Personality. New York: Brunner/Mazel, 1974. (b)
- Ellis, A. The Biological Basis of Human Irrationality. Journal of Individual Psychology, 1976, 32, 145-168.
- Ellis, A., & Grieger, R. Handbook of Rational Emotive Therapy. Berlin & New York: Springer-Verlag, 1977.
- Festinger, L. A Theory of Cognitive Dissonance. Evanston, Ill.: Row and Peterson, 1957.
- Fox's Book of Martyrs. Grand Rapids: Zondervan, 1967.
- Frankl, V. G. Man's Search for Meaning. New York: Pocket Books, 1963.
- Freud, S. The Psychoanalytic Theory of Neurosis. New York: W. W. Norton, 1945.
- Goble, F. G. The Third Force: The Psychology of Abraham Maslow. New York: Grossman, 1970.
- Grunlan, S. A., & Mayers, M. K. Cultural Anthropology. Grand Rapids: Zondervan, 1979.
- Hadas, M. (Ed.). Essential Works of Stoicism. New York: Bantam Books, 1962.
- Harper, R. A. RET's place and influence in contemporary psychotherapy. In J. Wolfe & E. Brand (Eds.), Twenty Years of Rational Therapy. New York: Institute for Rational Living, 1977.
- Hauck, P. A. Reason in Pastoral Counseling. Philadelphia: Westminster Press, 1972.

- Holt, R. The emergence of cognitive psychology. Journal of the American Psychological Association, 1964, 12, 650-665.
- Korzybski, A. Science and Sanity. Lancaster, Pa.: Lancaster Press, 1933.
- Luria, A. The Role of Speech in the Regulation of Normal and Abnormal Behavior. New York: Liveright, 1961.
- Mahoney, M. J. Cognition and Behavior Modification. Cambridge, Mass.: Ballinger, 1974.
- Meichenbaum, D. H. Cognitive Behavior Modification. Morristown, N.J.: General Learning Press, 1974.
- The New Testament In Four Versions. (Christianity Today Edition). New York: Iversen-Ford, 1963.
- Shaffer, L. F. The problem of psychotherapy. American Psychologist, 1947, 2, 459-467.
- Sire, J. W. The Universe Next Door. Downers Grove, Ill.: Intervarsity Press, 1969.
- Vygotsky, L. Thought and Language. Cambridge, Mass.: MIT Press, 1962.