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# A Place for the Church within Professional Psychology

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# A PLACE FOR THE CHURCH WITHIN PROFESSIONAL PSYCHOLOGY

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There are various reasons why Christian psychologists may resist fully participating in a church community. Among these are historic tensions between science and religion, the complexity of multiple role relationships, cynicism related to clients' negative experiences in religious communities, and differing perspectives on attributions and human nature. Despite these obstacles, there are compelling reasons for psychologists to remain involved in church. Eight of these reasons are described—clustered into professional, relational, and transformational domains—and implications discussed.

Nearly two decades ago a colleague published an intriguing and important article, *A Place for the Bible within Psychological Science* (Johnson, 1992). After identifying obstacles to incorporating Scripture with psychology, Johnson articulated eight roles of Scripture in psychological science, including experiential, foundational, contextual, axiological, anthropological, canonical, dialogical, and creative roles. His was an important contribution to the integration literature for a number of reasons, but primarily because Johnson identified a pertinent risk—that Christian psychologists might overlook Scripture as they turn to scientific understandings of human nature—and then provided compelling reasons for Christian psychologists to stand firm in their valuing of Scripture.

A similar argument can be made for Christian psychologists valuing the Church. Drawing on the structure that Johnson (1992) introduced, the purpose of this article is to first identify obstacles facing Christian psychologists regarding involvement with church communities and then offer eight reasons why church involvement is important for Christians in psychology. Whereas Johnson's argument pertains to a macro perspective—valuing Scripture within the

larger discipline of Christian psychology—we offer more of a micro perspective by considering how professional psychologists may value church involvement in their personal and professional lives.

## OBSTACLES TO CHURCH INVOLVEMENT BY PSYCHOLOGISTS

### *Anti-Religious Sentiments in Psychology*

Psychologists tend not to be as religious as the individuals they serve, and clinicians in particular are significantly less likely to participate in a church congregation than most of the American population (Delaney, Miller, & Bisonó, 2007; McMinn, Hathaway, Woods, & Snow, 2009). The underrepresentation of religiosity within the psychological community is almost certainly reflected in clinical training, where many Christian psychologists encounter perspectives that threaten to undermine their theological assumptions. For some psychologists, when conflicting metaphysical suppositions emerge between psychological theory and Christian doctrine (e.g., supernaturalism), they choose to disregard, reject, or even disdain ecclesial wisdom (Carter & Narramore, 1979; Johnson & Jones, 2000). Epistemic objections can be caught up with these metaphysical complexities as well, as some Christian psychologists may struggle to value the differences between psychological science and some religious forms of human knowing often appealed to in the Church (cf. Carter & Narramore, 1979; Jones, 1994). Another formidable obstacle facing psychologists as they enter faith communities is axiological, as the challenge of making Christian values relevant in the ethics of professional psychology can seem out of reach (see Tjeltveit, 1992).

### *Anti-Psychology and Anti-Scientific Sentiments in Church Communities*

Complicating the historic tensions between psychology and the church is the prevalence of anti-psychological and anti-scientific sentiments, especially



in many conservative congregations. Spurred by a flurry of anti-psychology books in the 1980s and 90s (e.g., Adams, 1979; Bobgan & Bobgan, 1987; Bulkley, 1993; Hunt, 1987; Hunt and McMahon, 1985; Kilpatrick, 1985), deep suspicion of psychological methods and theories persists in many congregations, perhaps especially in conservative Protestant denominations. At times psychologists may be dismissive of these concerns, especially given their suspicion of religion described above, but it is important to remember the ideological threats facing the church in the early 20th Century as the influence of Darwin and Freud spread throughout the Western hemisphere. These threats created a bifurcation in most Protestant denominations, with some moving toward compassionate humanitarian objectives and others rooting themselves in doctrinal orthodoxy (the so-called social gospel vs. fundamentalism split). Groups that became known for doctrinal orthodoxy may resist both scientific and popular movements that threaten what they believe to be true. This is likely to frustrate psychologists, who tend to be scientifically minded, but it is also important to see value in the resistance they express. These groups help the church maintain its doctrinal roots in the face of changing social trends.

### *The Complexity of Multiple Role Relationships*

A perennial challenge for professional psychologists is keeping clients at an appropriate professional distance. It can be difficult for a clinician to know how to greet or address a client when paths cross in the public realm. There is a natural draw for community members to seek out psychologists who are known in the area, as who hold similar religious values to the client, making it a common experience for psychologists to be contacted by fellow parishioners for professional services. Even if a psychologist refuses to see clients from his or her church community, the psychologist cannot control which clients or former clients begin attending the same church as the psychologist. Thus, it is nearly impossible to avoid having current or former clients sitting alongside the psychologist in the same worship service or adult education class.

Therefore, becoming part of a church community means introducing multiple relationships. For example, a client wanting to discuss issues brought up in therapy may approach a psychologist after a worship service. The risk of multiple relationships

also means difficulty in attempting to build friendships and engage in fellowship with other church members. The risk of multiple relationships can also hinder the professional psychologist's ability to be involved in the church. For example, psychologists might be unable to take a position on the elder board or serve on another board, not knowing if a client or former client also served on that board, and it would be unethical to explain why because doing so would potentially reveal confidential information. Moreover, psychologists may feel they are unable to fully present their needs in front of the church body for risk of a client gaining too much personal information of the clinician. These needs may include personal prayer requests or other intimate requests that a typical church member may routinely present to the church.

### *Exposure to Stories of Toxic Faith Experiences*

Church communities can be places of great healing and hope—or not. Many psychologists have encountered various stories of how faith has been used in coercive ways, often involving the misuse of power by or moral failure of religious leaders. These stories can easily lead to cynicism, both for the clients and for the psychologists who help clients recover from the trauma they have experienced. And while some church communities may be the cause of psychological problems, some may foster beliefs and attitudes that prevent troubled parishioners from being treated. That is, some members of church communities may resist psychological healing, and clinicians will sometimes come across individuals whom misuse their faith to reinforce unhealthy mental and emotional conditions (cf. Narramore, 1994). From these stories and experiences, psychologists may grow increasingly more cynical and even come to view church congregations as potentially toxic breeding grounds for distorted attitudes of and beliefs toward mental health. Not surprisingly, some psychologists respond to this growing sense of cynicism by withdrawing from church participation.

### *Complexity of Attributions*

Social scientists are trained to consider various attributional perspectives. Psychologists learn to think about their thinking, a process known as metacognition, and they learn to associate methodological questions with the assertions made by a person in authority. This makes it challenging in a



church community when divine attributions are pronounced and accepted without critical evaluation. When a person proclaims, "God told me this," many psychologists may privately wonder, "How do you know it was God?" In a similar way, psychologists may have complex formulations of situations that seem quite simple in some church communities. For example, when a religious leader attempts to sharpen a person's sense of personal responsibility for an area of sin, psychologists may want to also look at formative life events that have contributed to the person's current situation. These attributional differences may cause psychologists to view some church communities critically, making committed church involvement difficult.

### *Different Perspective on Human Nature*

The psychological and Christian communities often differ in their anthropologies, sometimes disagreeing about matters as fundamental as the nature of humanness. For Christian psychologists, participation in a church body may force them to reconcile any competing perspectives that they have gleaned through their training as scientists. The creation, fall, and redemption of humanity—major Christian themes—will call for accounts that are distinctive from any provided by the science and theory of secular psychology (McMinn & Campbell, 2007). Thus, Christian psychologists involved with the church will have to forge a place for human beings as Divine creations made in the Image of God, sinful and fallen from grace, whom will be redeemed and restored through the return of Christ alone (McDonald, 1986; McMinn & Campbell, 2007). Perhaps in a church community they will even feel it necessary to concede that the "realities about human beings—the person, the soul, the consciousness—are beyond the range of psychological probing" (McDonald, 1986, p. 120).

We have described several obstacles that may make church involvement challenging for psychologists. Many more could be mentioned. Despite these obstacles, we believe the potential benefits are substantial. Perhaps the greatest benefit is for the sake of the church, the body of Christ, whose healthy functioning depends on involvement of people with various gifts and perspectives. Christian psychologists bring important perspective to the church. Beyond this, there are personal benefits to psychologists who choose to remain involved in the church, and to those who seek help from Christian psychologists.

## POTENTIAL BENEFITS OF THE CHURCH FOR PSYCHOLOGISTS

We discuss eight potential benefits for Christian psychologists remaining involved in faith communities. There are more, to be sure, but these eight provide an overview of our current understanding. We have roughly categorized the benefits into three larger domains: professional (having to do with the work of professional psychologists), relational (providing personal support for psychologists, and transformational (pertaining to substantive teachings of the church that may affect a psychologist's worldview and work).

### *Professional*

*Developing relationships with mental health gatekeepers.* Pastors are front-line mental health workers, and often serve as gatekeepers to the mental health professions (Weaver, 1995). Among the multiple tasks pastors perform in any given week, those seeking mental health care often approach clergy for assistance. Weaver (1995) noted that clergy are among the most sought out for mental health care. However, many clergy feel ill prepared for mental health care.

We presume that most Christian psychologists attend church for more noble reasons than building a practice, but it is still true that church involvement builds relationships with clergy who know other clergy, some of whom are likely to become referral sources. Psychologists can further heighten their visibility among religious communities by offering consultation support for clergy in their pastoral care work (Benes, Walsh, McMinn, Dominguez, & Aikins, 2000). As pastors and other church leaders become more familiar with a psychologist's work, the psychologist may also become increasingly well known among local ministerial associations. Many psychologists choose not to form professional relationships with members of their own church community, in order to avoid multiple role relationships, but they may still gain recognition in their community through their church involvement that, in turn, promotes referrals.

Along with developing a relationship with the pastor, the psychologist will also begin to know and develop relationships through fellowship in the church. As congregants become aware of a psychologist's work, they may become referral sources as well.



*Resources for clients.* Church communities can serve as a resource for clients of psychological services, recognizing both the need for social support and services that psychologists may not be prepared to provide (see McMinn & Dominguez, 2005). When a church community is functioning at its best, the “body of believers plays a role in the healing of the other” (Bland, 2005, p. 36). In these situations the church community may be seen as a lovingly responsive and compassionate asset to the therapeutic process, assisting psychologists in their work with clients. Psychologists who themselves participate in a church community may develop a heightened awareness of how religious involvement may help their clients.

The healing nature of church communities has helped restore broken souls over the centuries, both informally and through formal programs such as Celebrate Recovery, Stephen Ministries, and leadership restoration programs (Budd & Newton, 2003; McMinn, Staley, Webb, & Seegobin, in press; Zook, Abildness, & Haskell, 2005). Some psychologists depend upon faith communities to provide concurrent interventions to their clients in distress. When church congregations serve as sincere expressions of Christ—his teachings and his love—holistic change can occur in the lives of clients (Wilson, 1995).

In addition to the relational and psychological benefits of church involvement and participation in particular ministries, a healthy church can also serve as a resource for addressing the spiritual needs of individuals as they attempt to find meaning during difficult times of their lives—to mend and mature spiritually. Psychologists who attend to the spiritual needs of their clients often end up collaborating with clergy to provide holistic care.

*Collaboration.* In addition to providing practice-building opportunities and being a valuable resource for clients, involvement with the church offers psychologists opportunities to collaborate with clergy in ways that contribute both to the life of the church and the professional vitality of the psychologist. Sometimes collaboration is narrowly perceived as clergy providing referrals to psychologists. Although this may reflect a sort of collaboration, mutual bidirectional collaboration is ultimately more satisfying to clergy and psychologists (Edwards, Lim, McMinn, & Dominguez, 1999; Lish, McMinn, Fitzsimmons, & Root, 2003; McMinn, Aikins, & Lish, 2003; McMinn, Chaddock, Edwards, Lim, & Campbell, 1998). Bidirectional collaboration is that which ultimately benefits both parties. So, for exam-

ple, a psychologist may receive referrals from a pastor, and as the relationship develops the pastor feels comfortable seeking help from the psychologist as well. This might take the form of the psychologist leading a seminar in the church, consulting with the pastor regarding his or her pastoral counseling, providing assessment to help select missionaries or pastoral candidates, and so on. Likewise, pastors are often willing to consult with psychologists on issues of spiritual importance. An innovative approach to collaboration is to ask a pastor come to the staff meeting of a mental health practice to discuss theological and spiritual perspectives that are important for good clinical work. Edwards et al. (1999) reported a variety of ways that clergy and psychologists can collaborate effectively, ranging from involving a clergy person in the treatment of a psychologist’s patient to providing workshops together in church communities (including one with the intriguing title, “My Prostate and My Soul”). Others collaborated to promote health in prison settings or in municipalities. Some taught courses together in academic settings.

Of course these forms of bidirectional collaboration do not require that a psychologist regularly attend church, but active church involvement may help keep the possibilities of collaboration alive in the psychologist’s mind. If proximity promotes collaboration, then more collaboration is likely to occur when clergy and psychologists spend time together in a common community. One of the most likely ways for this to happen is for psychologists to be actively involved in a church community.

## *Relational*

*Experiencing healthy relationships.* Whether in the classroom, research lab or consulting office, psychological work can be demanding and stressful. Psychologists are typically in leadership roles, and may find it difficult to maintain relationships where there are equal amounts of disclosing and listening. Psychologists are charged with, among other things, an ethos of beneficence and nonmaleficence—to engage in caring relationships that seek to benefit, and not to harm, others (APA, 2002). The nature of this task, inherently ambiguous as it may be, means the psychologist engages in relationships that are therapeutically “imbalanced.” Where does a psychologist turn to develop balanced relationships in which both parties offer an equal amount of care? There are many possibilities, of course, but one is found in



faith communities that allow psychologists to develop friendships, participate in small groups, and work alongside others in collaborative ministry opportunities.

Christian communities attempt to cultivate and nurture relationships that are characterized by humility, and the quality of humility, in turn, helps psychologists develop into effective scholars and practitioners (Handelsman, 2001). Another distinctive element of healthy relationships that is experienced in Christian churches is agape, an ethic of relating to others with the Divine love that God has granted us (Nygren, 1953). Agape is a remarkable and defining feature of the Christian faith—of God (1 John 4:8)—and is fundamentally relational; it cannot be fully grasped apart from the ecclesial context. Psychologists who become involved in a church community will ideally come to experience interactions with others tempered by humility and agape, essential elements of healthy, ethical relationships (e.g., Nygren, 1953).

*Community of faith.* Church involvement not only allows psychologists to relate individually with others, but also provides a larger connection with a community of faith. Psychological work can be lonely and depersonalizing at times, making it important for psychologists to belong to a collective that helps establish meaning and perspective. A community of faith accomplishes this in two dimensions—historically and contemporaneously. Historically, the church has established doctrines, traditions, and liturgies that serve as deeply rooted reminders of God's sustaining, redemptive presence in our broken world. Christians also enjoy a contemporary community, sharing beliefs and values with others who find great hope in their faith. Psychologists can take part in this historical and contemporary community of faith by participating in collective worship, engaging in ministry, and utilizing their gifts to serve God and others.

Within a community of faith, psychologists have opportunity to step away from the one-sided relationships found in the professional world and make connections on a more personal level. A church body can surround a psychologist with encouragement and prayer, providing emotional and spiritual support in times of need. Although it is not the case for every local church, a community of faith can become a resource for restoration and rejuvenation. As Collins (2007) suggests, "Local bodies of believers can bring a sense of belonging to the members, opportunities to develop skills, support to those who feel weak, heal-

ing to troubled individuals, and guidance as people make decisions and move toward maturity" (p. 41).

### *Transformational*

In addition to the professional and relational resources that psychologists may find through church involvement, the church is also a place where spiritual transformation has occurred over many centuries.

*Spiritual practices.* In recent decades we have witnessed a resurgence of interest in spiritual disciplines as a means of personal transformation (e.g., Foster, 1988; Tan & Gregg, 1997). This has had at least two implications for the life and work of Christian mental health professionals. First, attention has been given to spiritual formation dimensions of how Christian counseling and psychotherapy may impact clients (e.g., Benner, 1988; McMinn, 1996; Moon & Benner, 2004). Second, and related to the first, attention has also been given to the personal spiritual life of the Christian mental health professional (McMinn, Moon, & McCormick, 2009; Moon, 1997). If personal and relational qualities of the therapist are important in the healing process—and they almost certainly are (Lambert, 2004)—then Christian mental health professionals do well to consider their own spiritual development and transformation.

Transformation is a process where a person moves toward Christ-likeness. This involves deliberately seeking a relationship with God and welcoming God's redemptive presence. Church involvement bears witness to the time-honored practices of spirituality that promote transformation—collective practices that often occur within a community of faith, and individual practices that are encouraged and promoted by communities of faith (Foster, 1988). These disciplines include prayer, meditation, Scripture reading, fasting, and worship, among others. The point of the disciplines—and one major purpose of church involvement—is to put a person in a position to encounter the transforming and sanctifying grace of God, revealed in Christ.

As with other forms of discipline, the spiritual life of a psychologist can become stagnant in the midst of demanding work that often involves discussing the traumatic and difficult dimensions of human experience. It might be tempting for a psychologist to retreat into the technical world of diagnosis and treatment under such circumstances, and perhaps to overlook the spiritual nature of the helping relationships in



which they are involved. Nouwen (1996) described it this way:

The danger is that instead of becoming free to let the spirit grow, future ministers may entangle themselves in the complications of their own assumed competence and use their specialization as an excuse to avoid the much more difficult task of being compassionate. The task of Christian leaders is to bring out the best in all people and to lead them forward to a more human community; the danger is that their skillful diagnostic eye will become more an eye for distant and detailed analysis than the eye of a compassionate partner... More training and structure are as necessary as more bread for the hungry. But just as bread given without love can bring war instead of peace, professionalism without compassion will turn forgiveness into a gimmick. (p. 135)

How, then, can professional psychologists remain sensitive to the sacred nature of their work as they sit with those who suffer and struggle in various ways? We suggest that the church is crucial in creating a foundation for the psychologist's own inward transformation, which ultimately is extended into their professional work. The church provides accountability and encouragement for spiritual practices that promote this sort of personal transformation.

**Theological roots.** But transformation is not merely an experiential, personal phenomenon promoted through spiritual practices. It is also an intellectual task that is accomplished by careful and proper thinking.

For example, psychologists have a guiding view of persons—an anthropology—that shapes their professional work. What gives a human being worth and dignity? What goes wrong that leads to struggle and suffering? What sorts of changes are necessary to help relieve and redeem suffering? These questions, anthropological in nature, guide the perceptions and interventions that psychologists offer. Christianity offers an anthropology, honed, honored, and taught by the church through many centuries. To borrow Johnson's (2007) term, this Christian anthropology can serve as a *foundation for soul care*.

Psychologists also encounter other anthropologies—views of humanity articulated by personality theorists and clinical pragmatists. These views are not necessary wrong, and they may help the professional psychologist design and offer effective treatments. But these other anthropologies can easily become competitors to a Christian anthropology for psychologists not committed to the sometimes arduous task of integration. Over time, a psychologist may stop viewing others through a lens of Christian anthropology, and the change may occur so gradually

that it is imperceptible to the psychologist. The church provides repeated exposure to a Christian view of persons, serving as an anchor point for psychologists as they grapple with other anthropologies.

Anthropology is only one example of theological rootedness. If space allowed, similar arguments could be made for epistemology, axiology, metaphysics, and so on. The point is that the church has articulated core Christian doctrines over many centuries. These should not be easily dismissed. The church helps us resist some of the fads of contemporary life and to evaluate psychological theories from a theological vantage point (Porter, 2010).

**Hope.** Whereas isolation, destruction, and desperation seem to characterize much of the human condition, Christian hope—redemptive expectancy—continues to resonate within the stories, teachings, and traditions of Christian communities. Psychologists invested in a church congregation encounter personal testimonies of recovery and reconciliation, growth, compassion, justice, peace, and love that are sometimes absent elsewhere; profound themes of redemption are plentiful in these narratives and offer encouragement, support, and consolation (cf. James, 1858).

Church participation may also introduce psychologists to teachings that heighten anticipation for everlasting life and eternal glory ahead—hopeful suspense fostered and refined within the Church (see Edwards, 1738/1999). To be sure, hope is not merely learned intellectually through sophisticated arguments and sermons on abstract theological concepts, but rather it is also known through the experience of shared relationships in the faith community. Psychologists, as members of a church congregation, may encounter fresh and inspiring perspectives on and symbols of hope founded on Scriptural truths and, united with others, begin to cultivate deeper personal meanings on the subject (see Romans 15:1-13). Moreover, participating with others in the living tradition of the Church may help to root psychologists in Christian orthodoxy, helping them resist contemporary heresies and focus on the hope set before them in Christ (Porter, 2004).

## CONCLUSION

Christian psychologists may experience various tensions regarding personal church involvement, but there are compensating reasons to suggest that remaining involved in a church community is



personally and professionally enriching. The church provides opportunities for spiritual growth, helpful reminders of biblical and theological perspectives, collaborative relationships with clergy, and sacred expressions of faith focused on the promise of redemption—personal and global.

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