

How To Help People In Trouble

A Pastor's Perspective



by
Rev. J. L. Owens

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What is Counseling?

There are many definitions of counseling. There are many different styles of counseling. Conventionally, to give counsel is to give guidance and advice: to give assistance and direction to someone hurting, confused or emotionally injured. I do not, however, define counseling in this way. Counseling is defined simply as talking and listening. Me talking — you listening, you talking — me listening. I am sure there are many psychiatrists that would cringe at the simplicity of such a description. Nevertheless, I contend for this simplicity and advocate strongly for a passive stance to counseling for reasons that I will give later.

The Multipartite Man

Lets us start with briefly listing all the things that can go “wrong” with a person. A person may have problems in the following areas:

- | | |
|----------------------------------|--------------------|
| 1. Physically | 6. Substance Abuse |
| 2. Emotionally | 7. Employment |
| 3. Mentally | 8. Legally |
| 4. Financially | 9. Spiritually |
| 5. Martially or
Relationships | |

You can probably add others. What we usually do is divide a person according to his particular ailment and complaint then allocate him to the appropriate expert. So then, someone having a physical problem goes to a doctor, emotional to the psychologist, mental to a psychologist or special education therapist. Someone who is having financial difficulties goes to a financial advisor, martial to a marriage counselor or family therapist. The addict goes to a therapist or group therapy, and the unemployed goes to an employment agent or career counselor. The one with a legal problem goes to a lawyer. Finally, the one who has a spiritual problem goes to a Christian counselor or pastor for pastoral counseling. I see this compartmentalizing a problem for reasons that become clear when we attempt to define a “spiritual problem”.

What is a spiritual problem? Aside from the rare circumstances of demonic influence, any of the above can be a spiritual problem. The Christian who cannot pay his bills or keep a job is, no doubt, going to have his predicament effective his walk with God at some point. The woman who is living in a hellish marriage is a prime candidate for spiritual problem. Someone suffering from terminal cancer is guaranteed to have uncertainty about his or her faith. Anything can be a spiritual problem. The pastoral counselor has a considerable responsibility, as he is likely to be involved in an endless array of human circumstances.

Certainly, I am not suggesting that pastors attempt to assume or substitute the roles of doctors and lawyers or even psychologists. However, there is a vital function for the Christian counselor when specific occasions arise. You should never feel that you are inadequate when different circumstances occur with people. You can supplement while the other professionals attend to their appropriate causes, remembering that the influence that you have in the crisis may very well be the source to sustaining an individual's faith, as well as his sanity. It is regrettable for men of God detach themselves from the troubles that over-take their parishioners because they feel incompetent to deal with them. They dispatch them to spiritually unsympathetic people, who have absolutely no concern, yet alone skills, for their spiritual well being. When counseling is talking and listening there is always a needed and welcomed role for you in any situation.

A Brief scan in the History of Psychology

The discipline of psychology is just a little over a hundred years old. Christian thought has not had a prevalent place in its development. A balanced interrogation of theology and psychology in a scholarly and systematic approach has been all but nonexistent and remains a wide-open field. Christian psychology, more often than not, can basically be described as a psychologist who happens to be a Christian. It consists, unfortunately, of devout and learned Christian men using atheistic and secular psychological models. Thankfully, this seems to be diminishing. Educated and influential people of God are continually making an impact on this deficiency.

Modern psychology has its foundation with Sigmund Freud. Freud was a medical doctor who set out to give the science of neurology a "therapeutic" approach. At that time, the mentally diseased were put into asylums for study and experimentation. This was neurology. It did not attempt to 'heal' or 'cure' these unfortunates. (The word therapy means, "to heal"). Here, by Freud, was the birth of modern psychiatry.

It is important to understand that Freud had absolutely no Christian slants to his theory of personality. In fact, this first psychological model was based on atheism and evolution. Charles Darwin, a contemporary of Freud, was influencing the world with his theory of evolution. It was fast becoming the accepted science of the day. Freud's personality dynamics were none other than the evolution of the mind (the psyché), with the id serving as the base, primitive human instincts of man, the ego, evolving from the primitive id and the superego, then evolving, from both the id and the ego. Furthermore, Freud called religion the "universal neurosis" with God

serving as the object of the ultimate Oedipus complex. As time went on, Freud's predecessors constantly modified and redefined him. However, this modification consisted mainly of rearranging terms and concepts, but not redoing his worldview. The philosophic presuppositions remained.

Soon a new branch of psychology emerged: Behaviorism. This is the most common type of psychology in American culture today. (As Freudian, is the common in European countries). It was founded and represented by men such as John Watson, Ivan Pavlov, and B.F. Skinner. Behaviorists wanted to depart from the "mythological" aspect of id, ego, and superego and reposition to a more scientific approach to therapy. They emphasize behavior modification through positive and negative stimulus and response. Here again, God is absent. Man is seen as something between a computer and a laboratory rat. For behaviorists the human mind is a "blank state" to be conditioned for appropriate behavior. Such concepts as a "soul" and "spirit" are not thought of and unmentioned.

There is a third branch of psychology known as humanist psychology, presented by men such as Abraham Maslow and Eric Fromm. These are less scientific than the two previous and more philosophical in approach. Here, the emphasis is on the human spirit of man (again defined in a philosophical sense, not in a religious sense).

Because of this deeply rooted, non-religious history of psychology, it is very probable that when a Christian convert goes to one of these therapists, his Christian commitment will not be seen as an asset but, rather a liability. His faith and devotion to Christ will not be deemed as his strongest point but rather part of his problem, if not the problem. Again, the pastoral counselor becomes a crucial resource for countless people saved and unsaved.

To the more pragmatic aspects of counseling, it is important to differentiate between a natural crisis and a spiritual crisis. Remembering, as before stated, that any natural crisis can be a spiritual problem. The difference lies not in the type of problem, but rather in the role of the pastor, and the solutions offered. Most assuredly, Jesus is the answer to every problem any one can possibly experience. Unfortunately, however, not everyone is ready to receive Christ in every situation.

A spiritual crisis therefore, is a nonbeliever suffering with a particular calamity, whose soul becomes disposed for salvation. Aside, from the possible presence grief, depression, and anxiety that may accompany the crisis, his heart, mind and soul are responsive to the message of the gospel. He is ready to repent of his sins, and commit his life over to God. Here, the pastor while offering and extending his wisdom on the particular situation is more a pastor than a counselor. The pastor invites, and directs the convert to God, and while attending to his emotional ailment, the minister introduces him to a new founded salvation.

A natural crisis, in contrast, is when an individual, saved or unsaved, is ailing with any type of burden, and is in need of caring support. While you may see his problem as critical, he may not be ready to receive Christ. This does not, however, mean he does not need help and words of wisdom from you. Here, wisdom and patience must be employed. You can only trust, hope, and pray that the aid you extend will have a longer and more permanent impact on his life, eventually leading to his salvation. It is completely inadequate, and inappropriate to give an "altar call" solution to every situation brought before you. Homosexuals and alcoholics lose their jobs and

get depressed, just like everyone else. If a woman has trouble sleeping at night because of mental anxiety over troubles in her home, the fact that she smokes cigarettes may have little or nothing to do with her problem. Being baptized is not the solution to every emotional disorder. Being told to pray for the Holy Spirit is not what every hurting, troubled soul always needs to hear in the counselor's office.

It is fundamental to your effectiveness to be wise and able enough to discern the difference between a natural and spiritual crisis. The counselor's office is not to be a mere extension of the pastor's pulpit. People who come to church expect to be preached to, people who come for counseling do not. Counseling is not preaching. Counseling is talking and listening.

Why People Do Not Come For Counseling

Most people are reluctant to go for any kind of counseling. There are three main reasons. The first is the assumption that people should be able to work out their own emotional problems. Nobody wants to admit that there maybe something wrong with him, especially emotionally. A hurting person will often say:

"Don't worry about me, I'll work it out myself." or "No one can help me with this one, I'll have to do this on my own."

Christians easily camouflage this same mentality with religious nuances, such as:

"This is between me and the Lord." or "Only God can help me... just pray for me."

The second reason for hesitation is the connotation of mental illness. Some people feel that mental health counseling is for the "emotionally disturbed". For them, going for counseling would mean they are "paranoid schizophrenics", "manic depressives", or "criminally insane", etc. The social stigma of being "in therapy" is more than most people are ready to deal with, so they refrain.

Finally, and ironically, the third reason is the fear of reprimand from the counselor. People who are hurting, angry, and miserable are in their most sensitive state and are fragile. Too many counselors are simply overly aggressive and sometimes categorically brutal. Vibrate, well meaning counselors will often seize the opportunity to "straighten-out" a misguided life. More will be said about this later.

The important item to remember here is that when a person comes to you for counseling he has already battled and dealt with these three issues. That means he is, theoretically, willing to concede his inability to solve his own problems. He has accepted that he may be "losing it" and he is even willing to sit down and be scolded and lectured by you. Gentleness is imperative.

Sustaining

Regular friendship is based on mutual give and take. True friendship is having an equal amount of respect, caring, sharing, and giving. There should also be, to some extent, equivalent expectations of each other. One should be able to call on a friend in a time of need, to be able to solicit help or a “shoulder to cry on,” and even receive constructive criticism. True friendship is a precious blessing from God.

“I no longer call you servants... Instead, I have called you friends...” — Jesus Christ (John 15:15)

I advocate passivity in counseling. I call this non-aggressive approach of counseling sustaining. Sustaining is different from friendship because it is not mutual. With sustaining, there are no expectations from you as the counselor. It is all one way. The soul that you counsel can say what he feels and thinks without having to hear your opinion. He can confess any behavior, thought, or action without having to hear your moral judgment. With sustaining, you are there for him, he does not have to be there for you. He never has to make promises, nor does he ever have to apologize for any feelings he expresses. Offending you is never an issue.

This allowance may invite confessions that will arouse shock, disapproval, disbelief, and pastoral indignation. Your duty as counselor must temperate these emotions. It is not the time to be disappointed and angry. This is a time for healing. Credit them for their honesty and integrity and their desire for health and restoration. Also remember it is possible that it may just be the beginning of confessions. They may be “testing the waters” and you do not want to stifle them by your negative expressions. If you do, they will certainly never open up to you again. Sustaining is not weakness or being cowardly. Rather, it is constructive and non-judgmental listening that effectively causes reluctant individuals to divulge.

What Not To Give

In Counseling

You may be surprised to know some items I do not offer in counseling. All, of course, for the reasons above stated. The first is advice. In all fairness, sound advice is an essential part of good counseling, even in sustaining. However, passive counseling (talking and listening) is slow to give advice. Counselors are often too quick to give simple “band-aid” solutions in the form of advice. It takes time for a person to truthfully disclose the pain he may be experiencing. Listening and giving him the chance to expel may be more valuable than you giving him a five-minute lesson on life.

Secondly, reassurance is something that should be absent in all your sessions. Never say to anyone:

“Don’t worry. It’s going to be all right.”

You do not know that. Sadly, some situations do not get better. Some situations can even get worst. Be especially careful with using “reassuring” Bible verses:

And we know that in all things God works for the good of those who love him, who have been called according to his purpose.

(Rom. 8:28)

All things do work together for good. But for Gods’ good — not necessarily ours. Gods’ good certainly does not mean that our lives will always be void of unpleasant circumstances. Some of Gods strongest men and women of faith went through horrible situations that never got better.

And others had trial of cruel mockings and scourgings, yea, moreover of bonds and imprisonment: They were stoned, they were sawn asunder, were tempted, were slain with the sword: they wandered about in sheepskins and goatskins; being destitute, afflicted, tormented; (Of whom the world was not worthy:) they wandered in deserts, and in mountains, and in dens and caves of the earth. And these all, having obtained a good report through faith, received not the promise: God having provided some better thing for us, that they without us should not be made perfect. (Heb.11:36-40, KJV)

Finally, another virtue to refrain from is understanding, or rather the need to understand. The fact is, there are a multitude of problems and situations that you cannot know about having never gone through them. If you have never been divorced, you do not know what it is like to have a loved one walk out on you. You cannot understand. At best, you can only imagine. The words “I understand,” not only come across as “cheap counsel” but also can be piercingly painful to someone in agony. People tend see their ailments as unique and find little consolation in the idea that you may understand.

What is significant is that you do not need to understand. When counseling is talking and listening it is unimportant whether the counselor can identify with every condition. What matters is that your people can always find a concerned person who will listen.

Helping One To Think

Do not think that you are not doing anything except providing a “sounding board” for people. Extending a platform for ailing people to merely ramble about their problems offers no appealing solution.

When people are propelled into desperate and critical circumstances, it invites an array of emotions, feelings, and thoughts. It incites feelings of anger, confusion, disappointment, sadness, humiliation, fear, etc. Our psychology textbooks have chapters on every one of these subjects. We learn about them separately and neatly. Unfortunately, our people experience them in a compound manner, meshed together. Most people in a crisis are not even aware of some of the mixed emotions within them at the time. Some people have been angry for years and do not know it. Others are angry but do not realize that they are actually afraid. Your task is to help

them identify these emotions. You want to help them defuse and unravel their feelings. This is accomplished by helping them to think.

Thinking is simply “asking yourself questions”. Ask a question — get an answer— ask another question, and so on. In fact, most of your entire input will be in the form of questions:

“What are you thinking about?”

“What are you feeling right now?”

(Incidentally, these can be two very different things.)

“You sound angry?”

“Are you depressed?”

“Do you think you are being treated unfairly?”

Even if you are asked for your opinion and advice, you are going to turn it into a question.

Client: What am I going to do?

Counselor: What do you think you should do? What do you feel like doing?

Client: Do you think I’m wrong?

Counselor: Do you think you’re wrong?

(Or, less obvious) Why would you want to do that? How long have you been thinking this? What else could you do?

Through questions and helping them to think you can tell without actually telling. For example, a woman is rambling and complaining about a co-worker:

Client: “She walks around like a queen-bee, she always starting trouble. I’ll be so glad when they finally fire her!”

You may be tempted to say to her:

“Don’t be so angry! What do you care what she does? You should pray for her, maybe she has problems that you don’t know about.”

This advice and judgment will no doubt lead to her defense and possibly a minor confrontation with you. She will probably deflect entirely from her inner feeling and spent the next fifteen minutes building her case against this woman to protect and restore her now questioned sensitivity.

Consider the same statements rephrased in the form of questions:

Counselor: “You sound angry? Why do you let her get to you? What goes through your mind when she acts like that? Do you ever pray for her? (If no) Why not? Do you think she's having some sort of problem? Why do you think she acts like that?”

The exact same ideas are being conveyed but are far less confrontational. The former will cause her to perceive you as an accuser, the latter as a trusting ally. The first will cause her to defend; the other will cause her to think.

With the passivity of constructive listening and the skill of helping one to think, together they form the indispensable components to effective counseling.

In the following sections, I would like to examine some common topics that confront people today. I will also expand on the features that affect Christians in a unique way. It is important for the counselor to keep himself aware of the dynamics of certain psychological issues that afflict our parishioners. Education must be never-ending process.

Understanding Grief

Grief is one of the most common occurrences of our time, afflicting virtually everyone at one time or another. Grief is often mistaken for, and confused with, depression. There is a major difference. Depression is a clinical mental disorder. Grief, while including some depression, is a normal process. Grief is defined as: “a normal response to a loss.” This course of action is performed in five distinctive stages:

1. Shock
2. Denial
3. Depression
4. Anger/ Guilt
5. Acceptance

Although these stages need not advance in this order, all five must be experienced. Shock is usually the first stage experienced with acceptance ideally being the last. Consider, again, our definition: “a normal response to a loss.” Grief is normal. Not to grieve, therefore, is abnormal. Failure to go through all these stages is not a blessing but neurosis and can lead to serious problems.

Grief is a normal response to a loss, any loss — the loss of a loved one through death, the loss of a relationship, the loss of a job, the loss of health through illness, the loss of a pet.

The amount and the severity of grief will be determined by the seriousness of the loss. So, someone experiencing a death in the family will be expected to grieve more intensely than

someone who gets laid off a job, but that person will be expected to grieve more than someone whose pet parakeet dies.

Furthermore, all will go through the same five stages. Although the one with the death in the family may take several months or even years to complete the journey, the unemployed victim may make it through in a couple of days or weeks, while the unfortunate pet owner may settle in a mere hour or two.

Shock: Shock is a temporary escape from reality. It is characterized by “numbness; a lack of sensation and feeling”. Interestingly, this is a sort of natural defense mechanism and it performs a practical function in our catastrophes. It is what gets us through necessary events such as funerals, emergency room visits, etc. Some express this shock stage with such phrases as “It isn’t real yet” or “It hasn’t hit me yet.” This stoic attitude, as long as it is temporary, is harmless and again normal. It is also the ‘calm before the storm’.

Denial: “This can’t be happening” are typical words of one going through denial. This is also a stage that many people become entrapped and ensnared. A mother after the death of her young child leaves his room intact as if he comes home every day. A jogger after having his leg amputated explains to his family how he “can’t wait to get on the track again”. A man divorced by his wife months ago speaks of going out to dinner with her soon. These are painful and sometimes frightening events to witness.

Christians can have particular difficulties to deal with in this stage. Denial can often be camouflaged and disguised as “faith”. In the church, grieving souls may find a welcomed platform for their neurosis. Here, they can literally stand up and openly profess their denial and it is collectively cheered and encouraged.

“I thank the Lord, because I know He is not going to let me lose my apartment”.

“I know God is too good to let my family break up.”

“The doctors say I’ll probably need surgery but I know that the Lord is a healer.”

Such statements given in the context of a worship service are rarely identified as denial. It is rather vigorously embraced in the name of faith.

Faith and hope are real. They are essential for us to possess especially in times of crisis. However, it is imperative for the counselor to be able to distinguish the difference between genuine faith and denial. Beautiful Christian individuals in all their sincerity have had their innocent faith irreversibly shattered when their hopes, prayers and dreams never transpire. They, including many who applauded them, were left pathetically confused and frustrated. Their misguided proclamations of faith proved only to be a component of grief and denial.

Depression: Depression is the expected and familiar part of grief. Sadness, melancholy, and inactivity exemplify it. Again, it is normal and necessary for emotional health. Again, it is a problematic for the church.

Christians are supposed to be “happy people” constantly thankful and always praising the God of their salvation, even in times of troubles. Depression is, therefore, often not tolerated and not

welcomed among the congregation. This is quite an unfair, and an unrealistic expectation. It places unnecessary burdens on Christians. Unfortunately, what is likely to occur is the grieving parties will repress their depression, inevitably adding even more problems to their existing condition. All people, including Christians, need to advance through the difficult stage of depression.

The Book of Psalms is, arguably, the most beloved book of the Bible. Undoubtedly it is because so many can easily identify with its contents. In the Psalms, every human emotion possible is expressed: emotions of joy, thankfulness, anger, resentment, grief, despair, and depression.

Another thought for concern is the fact that depression is a leading cause of suicide. Suicide will be discussed at length later, for now, it should be understood there are a number of potential vulnerabilities in this delicate juncture. Caution and attentiveness should be exercised. Refrain from scolding and never instruct someone to “snap out of it.” You cannot snap out of depression. Carelessness and insensitivity can very easily drive the bereaved from this normal phase of grief depression to an abnormal clinical depression. Once again, the most effective procedure is to permit and create a gentle atmosphere in which the person can labor with and work out his feelings.

Anger/Guilt: These two powerful emotions are also inevitable to the process of grief. The anger felt and experienced here may be directed in several areas and is not always rational. Take, for example, a death in the family. A father dies of a heart attack and one can be angry with the deceased.

“How could he die now?”

“Now, what am I supposed to do?”

“How could he do this to us?”

Incidentally, these irrational questions reinforce the already existing elements of guilt experienced in the crisis. You can also feel angry with yourself, hence, guilt.

“If only I was there, perhaps I could have done something.”

“I never got to tell him how I really felt.”

“I should have been a better son.”

This stage can be most painful and difficult to get through.

Lastly, one can also be angry with God. Theodicy is the theological study of why God allows suffering. It is a question asked by many throughout their lives. It is predictably asked by grieving individuals at these times of loss and despair. Ironically, the problem is not in asking the question “why?” but rather in making premature conclusions about the question. At these confusing and painful times, answers to such questions are not easily understood. Too many atheists are born in hours of grieving sorrow.

Again, the Christian griever will find particular dilemmas. Anger is believed by many to be sinful or, at least, inappropriate for the household of the faithful. It is assumed that love and

forgiveness exempts the believer from all levels of anger. The Christian will wrestle with such the notions as: “How can a I ever be angry with God?” These erroneous ideas, of course, only add to the existing burdens of guilt.

Anger is a normal, healthy, and familiar emotion. One should never repress it or deny it even if it is directed at God. Typically, it is what you do with anger that makes all the difference. It is the embracing, retention and suppression of anger that proves to be detrimental.

Acceptance: Finally, and eventually, the bereaved graduates to the gratifying stage of acceptance. Here, the individual begins to tolerate his loss and learns to deal and cope with his pain. While memories will persist, sometimes for years, life goes on again.

Grief is common to all people. Everyone suffers loss. Therefore, no one is exempt from grief. Although the grief process is normal, failure to proceed through the five stages successfully can very well lead to and produce serious psychological problems. Everyone must endure all five stages. You cannot omit or “skip over” any of them, even if you are a Christian.

Sometimes a person will even digress into a previous stage. Occasionally, an individual will become stagnant in one of the stages. For one reason or another, he will refuse to advance. This immobility may be called grief-stricken. A person can become so severely grief-stricken that professional help may become necessary. To prevent this, the counselor’s task is to monitor the grieving victims through all five stages. When necessary, tutor the stagnated person into and onto the next stage. Questions like “Are you angry with God for this?” are invaluable in progressing a person through the phase of anger and guilt. Your non-judgmental stance will allow him to explore any important internal issues.

“Do you realize your wife probably won't be coming back?” or “How do you feel about the idea that you may never see her again?”

These and similar questions will effectively stimulate a person going through denial.

Remember, not judging also refers to the amount of grief you, personally, may deem necessary and appropriate. Losing a pet dog can be devastating for some people. It may take a very long time for some people to regroup from such a loss. Never minimize a loss like this, for example, by making comparisons like “It’s not like losing a child.”

Likewise, regarding the death of children, I have actually heard of people on more than one occasion counsel grieving mothers about the death of a child by saying, “At least you have another son.”

Watch and refrain from testimonials. By testimonials, I mean personal stories and experiences. Many have a tendency to want to share their personal accounts and attempt to apply them to current catastrophes.

“I know someone who lost their whole family in a car crash.” or, “You’re not the only one who’s gone through this.”

Frequently people will invoke Biblical testimonies that unwittingly inflict the same kind of damage:

“Look at the patriarch Job, he lost everything!” or, “Think about all the things Jesus had to suffer!”

These are substandard and unwise counsel. When a person is traumatized by a severe loss, just knowing that there is someone else going through something similar or greater, is little consolation.

Sustaining works marvelously with grief. Few methods of counseling are as effective as the one that allows a person to freely and without prejudice sort through the emotions and feelings that accompany grief.

The Question of Suicide

Let us start with some facts. Most people, at one time or another, think about ending their own lives. Sadly, some follow through with it. Incredibly, it has been reported, that in this country, more people die from suicide than from homicide. Alcohol and drugs, likewise, may perform an important function by preparing one for the act of suicide.

Statistics show that most people who kill themselves talk about it before they do so. These confessions can be direct or subtle. A threat can be as forthright as:

“I’m just going to blow my head off and get it over with.”

Or as subdued as:

“I just wish I were dead.” or,

“Sometimes I wish I could just go to sleep and not wake up.”

Threats of suicide, therefore, are a major warning sign. They should always be taken seriously. Unfortunately, they often are ignored. They become obscured by myths and misconceptions with erroneous declarations such as:

“Oh, they’re just looking for pity and sympathy.”

How sad it must be that someone would have to resort to such horrible threats just to get attention. If someone is so desperate that he has to threaten suicide in order to get attention, then you should, by all means, give it to him!

Another dangerous warning sign is any previous attempt at suicide. This makes a person a greater risk for two simple reasons. First, he has already deemed suicide as a viable alternative. Second, the fear of death may have already been confronted. With each confrontation and attempt, it may become less difficult to perform and complete the act of suicide.

Other signs will include sudden changes in moods and behavior, such as withdrawal, depression, crying, insomnia, loss of appetite, feelings of hopelessness, and, particularly, apathy. Even the most miserable of people will be reluctant to inflict trauma on their children, church, and loved

ones. Often, this noble sense of responsibility is the only thing precluding one from self-annihilation. Apathy will reveal itself with statements such as:

“I just don’t care anymore.” or, “I just can’t worry about them any longer.”

Such statements should be cause for greater concern.

In addition, the making of final arrangements should give rise to caution and notice. Giving away valuables and treasured possessions can manifest this. Also included is paying up bills, paying off notes, and especially the opening, renewing, or reviewing insurance policies and wills. Verbal arrangements are included as well with such statements as:

“If anything should ever happen to me I want you to look after my children.”

Passive counseling remains consistent with listening and asking questions. Questions included will be:

“Are you suicidal?” or, “Have you thought about killing yourself?”

If the answer is “no”, then that is fine. Never suppose that by talking about suicide you can put the idea into someone’s head. Thoughts of suicide are from within, not from without. If, however, the answer should be, “yes”, you will simply stay focused. Do not panic or express shock. You do not want to say, “Don’t talk like that.” Sustaining always allows the person his honest feelings without reprisal. Be careful not to inflict guilt with statements such as:

“What’s going to happen to your kids?”

“What’s your wife supposed to do?”

“Do you want to burn in hell?”

Incidentally, a suicidal person is virtually devoid of faith. Even a Christian, if suicidal, is at the end of his faith. At this point, he may not even believe there is a God. He laments:

“If there is a God then why am I in this situation.”

To rebuke his lack of faith will only increase his guilt. With increasing anger and depression, as he is apt to think:

“Great! Now God’s upset with me too!”

Admonishing him will only increase the likelihood of stifling the discussion of suicide permanently. This could be a grave mistake and one day can prove to be fatal.

Oddly, the next question to ask is going to be:

“How would you kill yourself?”

Risk-assessment would ascertain that if a person does not know or has not thought about a plan, he is less of a risk than someone who has a definite proposal. The candidate who states that he will shoot himself or take pills or smash his car into a wall is demonstrating that he has given the

idea more consideration and has greater suicidal tendencies. Again, while being concerned, you will remain non-judgmental. If the answer does reveal plans, the next questions you will explore is the probability of those plans. For instance:

“Are you in possession of a gun now?”

“Do you have any pills?”

“Do you own a car?”

An affirmative answer here puts him at an even greater risk and extreme caution and care should be exercised. Maintain a continuous yet non-aggressive line of questions:

“How long have you felt like this?”

“What’s been going on to cause all this?”

“You must really be hurting?”

Do not force issues that he does not want to talk about. Be patient, if a thought is relevant, he will express it eventually. Forbear his emotions. If he cries, never tell him not to. If he is angry, do not judge him or express disappointment or disapproval.

Very importantly, learn how to process silence. Frequently, an agonizing person will engage in long gaps of silence. The patriot Job and his friends did not speak for seven days.

Then they sat on the ground with him for seven days and seven nights. No one said a word to him, because they saw how great his suffering was. (Job 2:13)

A counselor can, at this point, often feel uncomfortable and will be compelled to break the silence. Do not. Usually, the most profound words are spoken by a hurting soul after a long, uninterrupted silence. Simply because he has been thinking! In fact, he himself may become uneasy and apologetic about the silence and the idea that nothing is being said. So that he is never pressured to “break the ice” you will then gently and simply assure him to take his time.

At the end of the session, he need not promise you anything. He should not have to “check in” with you later. It will be sufficient for him to know that if he needs to talk again you are available.

There are three basic reasons to why anyone would kill himself. They are:

1. A simple solution
2. An emergency solution
3. A resolution.

A simple solution may relate to such issues where someone is terminally ill. (Incidentally, there was an astonishing correlation between suicide and the epidemic of AIDS in the late ‘80s and early ‘90s) It is when someone is so grieved, desperate, scared, or humiliated, that suicide appears to be the easiest remedy.

An emergency solution may apply to people who are suddenly thrust into unbearable humiliations. It may include moral scandals and/or criminal offenses. It could be the loss of a significant career position or a relationship. Whatever the circumstances, again, the pain, anguish, confusion, and doubt can become so intolerable that suicide is perceived as the only escape.

Finally, there is the less frequent, but more puzzling, resolution of suicide. Here, death is not an escape or even an end, but rather a passage into a greater sphere of existence or honor. The Japanese Kamikaze pilots on their suicide missions saw their self-sacrifice as advancement to a higher honor. The tragedy of Jonestown in 1978 exemplifies this unique view of death and self-destruction, where nearly a thousand men, women and children willingly ended their own lives at the behest of Jim Jones. More recently, the suicide/homicide bombers in Jerusalem suit this category. Moreover, unforgettably, the hijackers that crashed planes into the World Trade Center on September 11 would be included in this baffling collection.

Suicide and the Bible

The amount of suicides recorded in the scriptures may astound you. It actually started with the very first humans. Adam and Eve, who willingly ate the forbidden fruit, knew that it would result in their deaths.

And the LORD God commanded the man, "You are free to eat from any tree in the garden; but you must not eat from the tree of the knowledge of good and evil, for when you eat of it you will surely die." (Gen. 2:16,17)

Adam, unlike Eve, was apparently not the victim of Satan's deception.

For Adam was formed first, then Eve. And Adam was not the one deceived; it was the woman who was deceived and became a sinner. (1 Tim. 2:13,14)

Together, their willful acts produced and introduced death into the world, both spiritually, as well as naturally.

There are plenty of others, including Abimelech (Judges 9), Samson (Judges 16), King Saul (1 Sam 31), Ahithophel, who incidentally was a counselor and an advisor, (2 Sam 17) Zimri (1 King 16) and of course the infamous Judas Iscariot (Mt. 27).

These do not include those who spoke about death and expressed suicidal tendencies such as Elijah:

While he himself went a day's journey into the desert. He came to a broom tree, sat down under it and prayed that he might die. "I have had enough, LORD," he said. "Take my life; I am no better than my ancestors."

(1 Kings 19:4)

Or Job (the entire third chapter):

"May the day of my birth perish... for it did not shut the doors of the womb on me to hide trouble from my eyes. Why did I not perish at birth, and die as I came from the womb?" (Job 3:3,10,11)

Or Jonah;

"Now, O LORD, take away my life, for it is better for me to die than to live." (Jon. 4:3)

Notice it is Jonah's anger, not depression that leads him to this state. (Jon. 4:1-3)

The Bible also reveals a forth cause of suicide: demonic influence. Jesus, referring to the Devil, said:

The thief comes only to steal and kill and destroy... (John 10:10)

Satan himself tempted Jesus to commit suicide:

Then the devil took him to the holy city and had him stand on the highest point of the temple. "If you are the Son of God," he said, "throw yourself down...." (Mt. 4:5,6)

This by no means suggests that every suicide or attempted suicide is the result of demonic possession. It merely introduces another aspect to the tragedy of suicide. One that you are most likely not read about in any psychology textbook.

Then there comes the difficult question of whether or not suicide is an unforgivable sin. This would be of a serious concern for a suicidal believer. Many people presume suicide to be unforgivable. Undoubtedly, this assumption has to do with the impracticalities of being able to repent after death. However, Jesus spoke of only one unpardonable sin: blasphemy against the Holy Spirit. To add another would simply be unscriptural.

And so I tell you, every sin and blasphemy will be forgiven men, but the blasphemy against the Spirit will not be forgiven. Anyone who speaks a word against the Son of Man will be forgiven, but anyone who speaks against the Holy Spirit will not be forgiven, either in this age or in the age to come.

(Mt. 12:31,32)

Notice our Lord speaks of forgiveness "in the age come". We have to believe that our God is majestic and gracious enough to pardon us, even if we never get to verbalize the words, "I'm sorry." Thankfully, repentance is not limited to the opportunities afforded us to articulate the words. True repentance is a condition of the heart, and only God in His omniscience, appreciates our inner and most secret intentions.

...The LORD does not look at the things man looks at. Man looks at the outward appearance, but the LORD looks at the heart.

(1 Sam 16:17).

Although suicide is not an unpardonable sin, it is still a sin. Furthermore, not only is suicide a sin, but sin is also suicide. It is the willfully jeopardizing of spiritual life.

But the widow who lives for pleasure is dead even while she lives. (1 Tim 5:6)

...I know your deeds; you have a reputation of being alive, but you are dead. (Rev. 3:1)

Adam killed himself spiritually, as well as naturally, when he disobeyed the Almighty. A “backslider” is none other than someone who commits spiritual suicide. It is someone who consciously decides to end his spiritual life.

Understanding Drug Addiction

The problem of drugs is becoming a frightening and increasing reality in our society and our churches. Drug abuse, directly or indirectly, has effected the lives of many parishioners today. Some of our attendants are former addicts. Some are recovering addicts. A few are living with family members who are addicts or users. Even some Christians are becoming allured to the deception of drugs abuse. When I speak of drugs and addiction, it includes alcoholism. Alcohol is a drug and can be a dangerously addictive substance.

The Enabler

An enabler is someone who will pity the addict. He will continuously accept him and his excuses. The enabler will always forgive and accommodate the addict. The loyal wife who always calls her drunken husband in “sick to work” is an enabler. The mother who will always come through with extra rent money for her addicted son is an enabler.

The addict is a master manipulator. He will always manage to convince the enabler that he is really trying, with such claims as:

“All I need is enough money to get me through this week.” or, “I have an appointment with the clinic, I’ll be going there Monday.”

He will also be capable of causing the enabler to believe fantastic stories like”

“I was robbed last night, they took all my money.” and, “My boss just fired me for no reason at all!”

The enabler will always be willing to give the addict “one more chance”. As long as the addict has a sympathetic enabler, he has no reason to change.

Here the counselor has an important responsibility. First, he must beware that he himself is not turned into an enabler. Secondly, he needs to safeguard any peripheral victims from the abuse of the addict. Your congregation will be inclined to help, heal and forgive, making them vulnerable targets for addicts.

Furthermore, this is the one time that you will deviate from passive sustaining. You want to assist the addict to psychologically deplete, to “bottom out”. It is only when he arrives at a dejected condition that he will consider modifying his behavior. Remember the story of the prodigal son.

After he had spent everything... and he began to be in need.... but no one gave him anything. When he came to his senses...

(Luke 15:14-17)

It took this shameful depletion of this boy’s dignity before he “came to his senses” and realized that he needed to change.

Do not be afraid to inform the addict that he is an addict and needs help. You need not be inclined to listen for hours about his troubles. Do not hesitate to tell him “no”, or even to invite him out of your office. This is tough love. It is not always easy. Tough love will say:

“Stay out and don’t come back here, until you are ready to make some changes!”

Tough love will even allow an addict to sleep in the streets or stay in jail. Tough love, for the addict’s sake, will refuse to become an enabler.

Another useless myth about addiction is the idea of attempting to discover why a person drinks or uses drugs. When an individual has a drug problem, “why” is not important. When a person has a toothache the dentist does not sit down with a patient and explore why they developed a cavity. He simply pulls or fills the tooth. The addict must remove himself from drugs. Searching for “why”, at this point, is futile. You can determine the reasons after the drugs are out of his life. Only then can this type of exploration benefit him as a future preventive measure.

Understanding The love-Sick Victim

In our culture, we are taught how to meet people and fall in love. Our movies, books, and magazines all display methods, styles, and examples of loving and living together. There is also an abundance of self-help and repair material to teach how to work out differences and sustain relationships. But, how to end a relationship is rarely taught. Breaking up is something couples are left to learn and do on their own. Consequentially, few are good at it. Some fail miserably. This failure can often leave one victimized by obsessive thoughts and behaviors. Included are such unacceptable activities as driving by an ex-companion’s house or repetitively calling and hanging up the telephone. In addition, rebounding into other relationships or engaging in superficial or promiscuous relationships is also telling indicators of a jilted lover.

Deep, persisting depression can render one helpless and crying every night. This heartbreaking image is actually is very common. A few can become so grief-stricken that they become completely immobilized. Agony is only amplified when such broken-hearted victims are addressed with empty words of consolation like:

“Don’t worry, you’ll get over him”

“I felt the same way when my girl left me.”

“There are plenty of more fish in the sea.”

“He was no good anyway.”

“Six months from now you’ll forget all about her.”

The counselor needs be responsive of the dynamics of the broken heart syndrome. Naturally, everything discussed in the grief section is applicable.

The Lovesick person is someone whose entire life has become engulfed by a relationship or a failed relationship. The story of Jacob and Rachel is often “romanticized”. (Gen.29) Jacob loved Rachael so much he was willing to work for seven years to acquire her hand in marriage. After that proved to be a deception he was agreeable to labor seven more years to obtain her.

The reality is that Jacob was obsessed with Rachel. Not being satisfied with his first wife Leah (which he received through Laban’s deception), he pledges to work another seven years for Rachel. His obsessive love for her led to the neglect and abuse of Leah. This mistreatment was so apparent that God Himself was displeased and intervened.

When the LORD saw that Leah was not loved, he opened her womb... became pregnant and gave birth to a son.

(Gen. 29:31,32)

When a person is rejected, it can result in unbearable grief. He plagues himself with the question “Why?” He torments himself with by obsessively speculating about what the other person is doing. Filling himself with resentment and bitterness for “allowing himself to fall in love this way ” he will vow never to let it happen again. He may toss at night with confusion and wonders how it could have ever ended.

Rejection

No one likes to be rejected. Being rejected seems to imply that not only is one no longer wanted, but also no one is no longer loved. This may not be true. The one doing the rejection usually has given much thought to it. Therefore, process of grief may have been in motion for some time, unbeknownst to the partner. By the time this person comes to a decision to actually leave, he or she may have already concluded the grief journey. In this state of acceptance, the only emotion left may simply be best wishes for the rejected party. Because of this settlement, the rejecter appears apathetic. The rejected partner is confused. He tries to figure out what happened. He fails to comprehend why his rejecting partner apparently is not in the same kind of pain as he is.

Obsessive thoughts give way to compulsive behaviors, which in turn, give way to obsessive thoughts and so on. A vicious cycle develops. This obsessive-compulsive pattern will be

compounded with guilt, anger and confusion. Guilt will be amplified with feelings of disgust and humiliation for this recently acquired behavior. Familiar inquiries are:

“How could this have happen?” and, “What is wrong with me?”

Anger will manifest for both the ex-partner as well as for himself. It is not uncommon to have extremely ugly and even violent thoughts. Vows like, “never again will I ever let anyone else hurt me like this” will be frequent.

Sustaining can help. You will need to provide them with relevant insight on what is happening, of course, in the form of questions.

“Do you think you’re hurting more than he is?”

“Would you want to reconcile with him if you could?”

“Do you feel if your hurt is getting any better or worst?”

It is very common for people to vacillate through their progressions. It is important that you do not express any disappointment with their progress or lack thereof. People will often make vows with you and themselves that they will not be able to keep. It is essential for the both of you to understand that the hurting party will think about his partner again. He may even choose call or contact his partner again. If he can accept this now, it may reduce any unnecessary guilt and aid him with any obsessive thinking thereby giving him the self-esteem needed to prevail.

Conclusion

Our parishioners and the people we counsel will encounter many situations. Unfortunately, we will not always possess all the answers. Many will come to you with the hope and expectation of you solving their problems. At best, you will only be able to help them cope. The fruit of your labor will not always be apparent. But your reward, in this life and in the life to come, will be secure.

Finally, remember confidentiality, and be careful that your parishioner’s problems do not inadvertently materialize into your Sunday sermons. Your congregation may not always personally thank you. Occasionally, they may even blame you for your “inactivity” and for the lack success in their lives. Nevertheless, your role in guiding and influencing their lives is a blessed privilege that the Shepherd of all Souls will both remember and reward.

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