Counseling People With Psychological Diagnoses George Scipione

Engaging thr Heart

- I. Everyone has "people paradigms". Cf., *Advanced Course in Biblical Counseling*, pp 8-16.
 - A. People use shorthand to describe things so they do not need long explanations or mime!
 - B. Counseling has its language or "people paradigms". Cf., Graduate school Temple U course in Counseling Psychology.
 - 1. Who is man?
 - 2. What's wrong with him?
 - 3. How do you fix him?
- II. Not everyone is conscious of or admits his paradigms.
 - A. The history of psychology/philosophy
 - B. The modern/post- modern movements towards eclecticism: materialism; mysticism
 - C. Popular culture is shaped by these psychological paradigms and diagnoses.
- III. The DSM is the prevailing paradigm,
 - A. What is the DSM?
 - B. What is right/wrong with it?
 - C. How do you interact with its diagnoses?

Exposition of the Word

- I. The DSM approach to mental disorders.
 - A. The history of the DSM. Cf., John Applegate, "A DSM Primer" CCEF, 2011 National Conference.
 - B. Strengths:
 - 1. Real people helping real people
 - 2. Real observable mental/behavior problems
 - 3. Real attempt to be objective
 - 4. Real attempt to be accurate
 - 5. Real attempt to be helpful in research
 - 6. Real attempt to be helpful clinically
 - C. Weaknesses:
 - 1. The DSM is limited to general revelation/common grace data.
 - 2. The DSM is a-theoretical.
 - 3. The DSM is amoral.
 - 4. The DSM is politically/pressure group sensitive which undermines its objectivity.
 - 5. The DSM diagnostic labeling can backfire and create problems: victim mentality; Pygmalion effect, etc.
- II. The Biblical approach to mental disorders.
 - A. The history of Biblical revelation and redemption
 - B. Strengths:

- 1. Special revelation: God gives the necessary grid to examine creation, history and redemption.
- 2. Saving grace and the Holy Spirit help us to see life through mysteries. Cf., Calvin's concept of glasses.
- 3. The Biblical worldview is the true basis for science.
- 4. Westminster Confession of Faith, Chapter 1: 6,9,10
- 5. We are to live bound by the Bible, Deuteronomy 29:29.
- 6. The Bible gives *descriptive*, *diagnostic and directional* clarity, James 1:19-25.
- 7. The Bible is sufficient and superior: 2 Tim 3:15-17; 2 Pet 1:3-12.

C. Weaknesses:

- 1. There really are none!
- 2. The Bible is not a *Merck Manual* or a *Physician's Desk Reference*, but it is the foundation for them. Cf., J Halla, *Being Christian In Your Medical Practice*, (Greenville: Ambassador International: 2012).
- 3. The Bible may be misused.
 - a. The interpretation can be off: don't add/subtract, Deuteronomy 4:2; don't go to the right or left, Deuteronomy 5:32-33.
 - b. The application may be wrong as wisdom from above is needed, James 3-4.
- III. The DSM as a starting point in the light of the Bible.
 - A. A wise assessment: J Babbler, "Biblical Critique of the DSM IV", NANC National Conference 2007.
 - 1. The descriptive reality of the DSM is not deniable.
 - 2. The social sciences are not sciences.
 - 3. The whole is not greater than the sum of the parts.
 - 4. The Bible addresses all the parts.
 - B. "Accept" the label and review the DSM criteria: find out who gave the diagnosis, psychiatrist or GP.
 - C. Assess the counselee's worldview and his heart commitment to the label.
 - D. Translate the label into Biblical categories.
 - E. Negotiate the final authority of God and His Word.
 - F. Postpone the issue of drugs until the person is growing enough to consider tapering off with doctor oversight.

Exhortation for Life

- I. You need a wise pastoral approach to those with psychological diagnoses.
 - A. Prayer
 - B. Data gathering
 - C. Involvement with the counselee
 - D. Wisdom in interpreting the data biblically
 - E. Instructing and persuading the counselee to see things from God's perspective Ask God for wisdom to determine the best approach, direct or indirect.
 - F. Above all, treat the person as an image bearer of God!
 - G. Be humble in your diagnostic process and conclusions as God alone knows his body/spirit.

- II. You need to face psychological diagnoses in the context of discipleship.
 - A. Although he may be different in some significant ways, different, he needs discipleship, cf., *Introduction, Marriage and Family, Advanced* courses.
 - B. For examples of specific diagnoses see the studies on *Worry*, *Fear* in the *Introduction to Biblical Counseling*.
 - C. Always seek the wisdom from above for each individual with individual or multiple labels.
 - D. Patience and gentleness are needed. But never treat him as a victim. Limited liability but liability none the less.
 - E. People must be responsible for their limitations and liabilities.

Asher, Marshal and Mary, *The Christian's Guide to Psychological Terms*, (Bemidji: Focus Publishing, 2004)

Halla, Jim, *Being Christian in Your Medical Practice*, (Greenville: Ambassador International, 2012)