

Interventions That Apply Scripture In Psychotherapy By Fernando Garzon

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Summary

The article *Interventions That Apply Scripture in Psychotherapy* by Fernando Garzon (2005) examines core issues pertaining to therapists' use of Christian teachings as contained in the bible to the benefit of clients. The paper uses a hypothetical case study of a 30-year-old construction worker named "George" facing depression, low self-esteem, and insomnia. The article uses George's case to prescribe a number of strategies that Christian counsellors can employ in working with Christian clients. It takes the problem-solving approach by highlighting potential problems that come with the Christian approach and possible answers.

Through this case, Garzon (2005) presents issues that may crop up in relating to and counselling clients. The author informs his audience about the potential ethical pitfalls that face the practice, such as dual relationships between Church and state that are characterized by one actor imposing values on the other in such a kind of therapy. Another critical issue is the client's informed consent over the use of Christian teachings as opposed to the contemporary secularized psychological approach. Garzon is insistent that a client must be positive about the integration of Christian teachings in the intervention. He addresses both implicit integration and explicit integration with psycho-educational approaches that are offered in most cases.

The author has also introduced the behavioural approach in the Christian context. The behavioural approach may seek to alter behaviour by choosing to bring change in behaviour through theology or psychology. Garzon cited the example of a job in the bible when he was dealing with grief. However, Garzon cautions counsellors against pushing their views on their clients. This is in recognition of the fact that biblical teachings are open to different interpretations depending on one's own character, expectations, and experiences in life. As such, counselors should give clients room, if they are believers, to make their own interpretations of the scriptures by providing guidance only. The author suggests giving scripture verses to the clients so that they can read on their own.

Analysis

The article by Garzon (2005) caught my attention since I have been using sacred texts as a guide for more than twenty years. To some degree, I was attracted to the paper because I wanted to approve the way I have been directing individuals in the course of recent decades. Moreover, I needed to peruse the article to check whether it would have been important to "protect" what I feel is a

fundamental component that recognizes Christian directing from other customary psychotherapies—to be specific, the utilization of sacred texts in guiding.

At first glance, I was looking for scientific evidence to support and validate my strong and heartfelt position concerning the importance of scriptures in counselling. Having originally trained in experimental psychology, I had hoped to find solid empirical research that yielded “hard data” to defend my “cause.” To some extent, I was disappointed to find that Garzon’s (2005) article consisted entirely of a hypothetical case study of a man named “George.” However, as I carefully read the article, I was pleasantly surprised by the ways that the author used “George” to illustrate how scriptures can be utilized effectively in counselling while at the same time being sensitive to the client-specific factors—such as George’s unique history, and his religious training and experiences.

After I finished the article and “sat back” to think about it, I wondered whether it would be possible to actually conduct experimental research on the use of scriptures in counselling. I tried to imagine what such research would “look like” in terms of experimental design and other research-based considerations. After a bit of reflection, I decided that I would do a literature review and see if there is any extant, solid, scientific research that confirms what I have discovered to be self-evident throughout my Christian counselling career—namely, that the truth, as contained in the scriptures, is a *sine qua non* for genuine Christian counselling.

Application

Borrowing from Garzon’s article, a counsellor can apply the approach to address a situation facing a hypothetical client. For now, a hypothetical client is a 27-year-old man named Alex who served in the US Army for several years before retiring. He enlisted in the army immediately after graduating from high school, and he figured that serving in the army was his ultimate calling. However, since he retired from the service, he has been facing difficulties in finding employment. Recently, he was forcefully admitted to a Veterans Administration Hospital, showing symptoms of PTSD and self-destructive ideas. He had not been sleeping well and was experiencing unpleasant flashbacks to a period when he was serving on a tour in Iraq when he delayed in shooting a suicide bomber, leading to some soldiers in his unit being blown up into pieces. Such memories were not pleasant and have affected him a lot in the recent past.

Alex was brought up under the Roman Catholic Church but had not been particularly keen on practising the faith. However, after returning home and meeting up with some families who had lost loved ones serving in his unit, he had grown to question his faith a lot. During his stay in the hospital, he specifically requested a Christian counsellor to guide him through his mental anguish. The case was allocated to a psychotherapist student working on his master’s program as a learning case with the guidance of the instructor. The therapist was an avid Christian who had his theology course.

To start with, the primary issue that should be considered in this situation would be informed consent.

According to Garzon (2005), any usage of Christian teachings in counselling should be preceded by “clear, informed consent procedures” (p. 114). However, the current hospital setting would not offer the necessary support infrastructure in terms of a church or other faith-based paraphernalia. Furthermore, it is not clear that such a formalized hospital under government sponsorship would agree to such a Christianized therapy as opposed to more secular professional help that is more recognized and acknowledged in such settings. Thus, it is not clear that the client’s informed consent to faith-based counselling would be acceptable to the authorities and would be considered professional enough.

Another possible issue to crop up would be the faith differences between the client and the counsellor. Given that the counsellor is Pentecostal and the client is adverse to Roman Catholicism, core fundamental issues between the various denominations could serve as setbacks to the working of the parties. It might be amazingly troublesome for the counsellor to treat the customer in a manner that would not antagonistically influence the customer’s nature of care and his treatment result based on subtle differences in their beliefs.

Past the aforementioned potential pitfalls, there are two possible ways to address the issue. Given the client’s conditions, the counselling can be approached either behaviorally or psychologically through the usage of a procedure called “sign controlled” calming down. This procedure includes utilizing an interim vibration (from a gadget taking after a pager) to incite the client to take a moderate full breath at different intervals throughout the day. As the client breathes in, he can be instructed to state, “I am... ” Then, when exhaling, the customer can state, “relieved of the burden... ” This way, the counsellor can use the scriptures to show that the death of his mates in Iraq through an explosion was not his own doing but rather the work of God. In this way, the client learns how not to carry the burden of the death of his colleagues and attributes such deaths to the workings of God, who teaches that all things work for good for those who believe in God.

Reference

Garzon, F. (2005). Interventions that apply scripture in psychotherapy. *Journal of psychology and theology* 33(2): 113-121.