I am a psychiatrist who believes that the Bible is the greatest textbook of psychiatry ever written, and that humans cannot be understood apart from the God-human relationship. Since only forty-three percent of psychiatrists and psychologists believe in God, my colleagues are less than enthusiastic about these views. They take me as seriously as a duck-billed platypus, who is not quite sure whether to classify itself as a mammal or a duck. Yet, ironically, I am taken seriously as a psychiatrist, for I am Chairman of Psychiatry and Chairman of Ethics at Waterbury Hospital, a teaching hospital affiliated with Yale Medical School. He is also Chairman of the New England Evangelical Theological Society, as well as Director of the Soul Research Institute in Cheshire, Connecticut. This article is reprinted with permission from the Trinity Journal of Trinity Evangelical Divinity School (17NS, 1996).

Jeffrey H. Boyd is Chairman of Psychiatry and Chairman of Ethics at Waterbury Hospital, a teaching hospital affiliated with Yale Medical School. He is also Chairman of the New England Evangelical Theological Society, as well as Director of the Soul Research Institute in Cheshire, Connecticut. This article is reprinted with permission from the Trinity Journal of Trinity Evangelical Divinity School (17NS, 1996).


2Gallup Poll, Religion in America, The Gallup Report #259, April 1987, says ninety-four percent of Americans believe in God. References for the statement that forty-three percent of psychologists and psychiatrists believe in God: American Psychiatric Association Task Force Report 10: Psychiatrists’ Viewpoints on Religion and Their Services to Religious Institutions and the Ministry (Washington: American Psychiatric Association, 1975); C. Ragan, H. N. Malony, and B. Bert-Hallahmi, “Psychologists and Religion: Professional Factors and Personal Belief,” Review of Religious Research 21 (Spring 1980) 208-17. Table 2 on p. 212 shows that seventeen percent of psychologists were “orthodox” in ideology and another twenty-six percent somewhat orthodox. At the bottom of the page, the text adds together these two percentages, and arrives at forty-three percent believing in God. The article shows that psychologists are much less religious than academics in general, and than the American public.

teaching hospital affiliated with Yale Medical School, have been on the faculty of the National Institutes of Health, published articles in the *New England Journal of Medicine*, in the leading psychiatry research journals, and chapters in the leading textbooks. I am even one of the authors of the diagnostic system used in psychiatry. During 1995 I admitted, treated, and discharged from the hospital 712 psychiatric patients, most of them psychotic, desperate, suicidal, homeless and indigent people living on the street.

For the past twenty-five years I have been pursuing a single purpose, somewhat like Captain Ahab and Moby Dick. My goal has been to understand, write about, and promote the soul. The reason I got launched onto this odyssey is that I was once an ordained Episcopal clergyman praying that God would use me for whatever purpose He wanted. During those prayers I repeatedly felt called to write about the soul, and I repeatedly told God I would not do it, because I didn’t know how. That prayer experience slowly wore me down, so that my resolve to avoid this insane project crumbled like the sand castles I used to build on the beach as the tide came in. It became my “Mission: Impossible!”

From the beginning, I sensed that secular Americans and Episcopalians turn to psychotherapists for information about and treatment of the soul. Why would I say such an outlandish thing?

1. They call themselves psychotherapists after the Greek root *ψυχή* (soul);
2. They treat the natural, soulish (*ψυχικός*), horizontal and earthly aspects of the inner person;
3. In treating the mind, emotions, and personality they address what would have been considered traditionally to be faculties of the soul;
4. Sigmund Freud said explicitly that he was treating the soul;
5. Karl Barth said Freud was treating the soul;
6. The domain and semantic range of the words *ψυχή* and *ψυχή* in Scripture are precisely matched by the domain and therapeutic range of mental health experts in America.

However, I figured that secular mental health soul-therapists are incompetent because most have no expertise whatsoever in the major sources of information about the soul: the Bible, and two thousand years of theological anthropology. These contradictions, blatant to me from the beginning, were not easy to untangle in my mind, and led me to think I was tumbling down a rabbit hole into Alice’s Wonderland.

My first approach was to turn to the tradition of Carl Jung for guidance. After a year at the Carl Jung Institute in Zurich, I discovered that my analyst was a firm opponent of Christianity. She said that Jesus was neurotic. In order to become more of a whole person, Jesus would have needed to embrace His shadow—i.e., to become a little bit evil, to embrace Satan to some extent, give into an occasional temptation. The anti-Christian views of the faculty there, and their love affair with the so-called “shadow,” even to the point of saying that God also has a shadow, offended me.

The Bible is the greatest textbook of psychiatry ever written...humans cannot be understood apart from the God-human relationship.

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3I contributed to the writing of the *Diagnostic and Statistical Manual, Third Edition* (DSM-3R), as noted in the Anxiety Disorders section of the introduction.
4Freud wrote, *Psyche* is a Greek word and translates into German...
me mightily. After a year I left the Jung Institute, convinced that God may not have a shadow, but the Almighty surely must be a madman to have assigned me this task.

Little did I know how liberal Christians would subsequently fall in love with Carl Jung. For example, by far the most popular and widely-read biblical exegete in Germany today is Eugen Drewermann, a psychologist-theologian who interprets the symbols of the Bible along the lines of Jungian psychoanalysis, as if the biblical stories consist of dream images in a patient in psychoanalysis. One of Drewermann’s most popular books of biblical interpretation is Discovering the God-Child Within. Even the Vatican has endorsed psychological interpretation of Scripture, probably in response to the overwhelming popularity of Drewermann with lay people in Germany.

Little did I know how much the approach of Carl Jung would subsequently become the predominant view of the soul in secular America. In 1992 Thomas Moore published Care of the Soul, which rocketed to the top of the New York Times best-seller list, and stayed there a record number of years. As a follower of Carl Jung and James Hillman, Moore promotes the Greek gods such as Aphrodite, and seeks to enrich our soul by drenching his readers with non-Christian mythology. Moore, Hillman, and Jung explicitly promote polytheism.

Even today, I remain a skeptic about Carl Jung and the Jungian approach to the soul. Why? In the first place, because the ultimate goal and purpose of Jungian treatment is individuation and personal growth.

My goal has been to understand, write about, and promote the soul.

I think the ultimate goal of life is different: serving and loving God, sometimes to the point of becoming less of a person, denying myself, and taking up my cross to follow Jesus (Matthew 10:38, 16:24; Mark 8:34; Luke 9:23, 14:27). In the second place, I found that when I was interested in the so-called Collective Unconscious, I threw open the floodgates to a great sea of imagery, symbols, myths, and fairy tales, to Greek and Hindu gods. In short, I became deluged in an ocean of “spirituality,” which ended up being more compatible with Hinduism and Buddhism than with the Bible.

And in the third place, those who know the Jungian

7Eugen Drewermann is a Catholic theologian-psychologist-philosopher banned from teaching in Roman Catholic institutions. His critics say that he is not interested in the meaning of the biblical texts in the original, ancient culture. For example, some say that Drewermann’s book, Discovering the God-Child Within, simply uses the biblical texts as a springboard to get to the archetypal meaning which he thinks lies beneath the text, but which ends up sounding strikingly similar to the psychology of Carl Jung. His critics also say that his message is too soothing. Many Germans find Drewermann’s interpretation of biblical texts refreshing, making the texts alive and thought-provoking while traditional biblical criticism leaves them dry and tasteless. Like many Jungians, and post-modern scholars, Drewermann is in favor of each individual developing his or her own self. This places him in a position of opposition to authority of all kinds, which is why the Archbishop banned Drewermann from teaching in Catholic seminaries. It is no surprise, therefore, that Drewermann is very interested in existentialism and liberation theology. Schleiermacher is one of Drewermann’s sources, for Drewermann is a romantic theologian, close to Eliad. See B. Lang, “A New Voice in Psychological Exegesis: Eugen Drewermann,” a paper read at the Society of Biblical Literature Annual Meeting, Philadelphia, November 20, 1995.

8E. Drewermann, Discovering the God-Child Within (New York: Crossroads, 1994).


10T. Moore, Care of the Soul (New York: Harper Collins, 1992);
The secular mental health movement and Christianity are in competition.

The conviction that somehow the secular mental health movement and Christianity are in competition, attempting to do the same thing, one from a secular and the other from a biblical platform. I have been struggling to find some way to put that conviction into words in such a way that someone other than myself can understand what I am talking about.

If it were true that the secular mental health movement is somehow a kind of secular religion, worshiping the “self” as Paul Vitz has said, then it would appear that the psychotherapy approach is winning the horse race with Christianity. In secular magazines and television, it is the secular psychotherapists, not the clergy, who are viewed as the experts on human nature. In Self Magazine, Redbook, Cosmopolitan, McCall’s, Shape, and dozens of other magazines sold at the checkout counter of grocery stores, so-called “experts” tell Americans how to relate to their spouse, children, and parents, how to have more fun in bed, what depression and anxiety mean, how to master “stress.” They seek to give advice and guidance on virtually every important aspect of human life, without ever mentioning God.

I view secular psychotherapists as the mouthpiece and vanguard of the secularization of American society, particularly with respect to promoting a secular self-concept. Counselors are well-paid, commanding between one and two percent of the American gross national product. Secular psychological treatment is

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15In his famous book, The Triumph of the Therapeutic: Uses of Faith After Freud (Chicago: University of Chicago Press, 1987), P. Rieff argued that secular psychotherapy is replacing Christianity as the organizing principle of American society. He implied that this is a disaster. In order to exist, a culture needs central symbols that inspire individuals to curtail their self-interest, and to make sacrifices for the common good. In the past, when Christianity was more central to America, people sought to follow Christ’s lifestyle. But today, when psychotherapy is the central way of understanding the soul in America, everyone is out for his or her own self-interest, and there is rampant narcissism. American society is unraveling because the goals of “growth” and “self-fulfillment” do not motivate people to make sacrifices for the common good.

16Mental health and chemical dependency treatment represent about 15% of the health care dollar (about 8 or 9% for mental health and the other 6 or 7% for chemical dependency...
approximately a one-hundred-billion-dollar-per-year industry in the United States.\textsuperscript{17} Some Christians say they cannot afford to give five dollars a week to their church because they are giving a tithe to their psychotherapist.

In every city in which I have studied the Yellow Pages, I find there are as many listings for secular psychotherapists as for churches and synagogues of all denominations combined.\textsuperscript{18} Furthermore, they have a

\textit{We carry within us God’s breath and image.}

that the soul is something obscure and religious, which they have not seen recently, any more than they have seen a UFO. Yet I claim that secular psychotherapists have more names for the soul than Eskimos have names for snow. To name but a few: mind, heart, psyche, inner self, subjectivity, human nature, me, I, you, myself, yourself, cognitions, biopsychosocial model, self, whole person, consciousness, personality, psychic energy, libido, subjective experience, identity, essence, feelings, emotions, thoughts, being, inner being, who I am, who you are.

What I can’t figure out is why the pulpits of America are not ringing out with the message that appears so obvious, namely, that this is absurd. Were fifty thousand clergy each to preach a sermon saying that psychotherapists treat the soul, but are incompetent because they fail to appreciate most of what constitutes the soul, America would change profoundly within a year. But I have never heard a single sermon

synagogues. For example, in the city of Syracuse, New York, there are 433 listings for churches and synagogues, but 448 listings for mental health professionals offering psychotherapy (NYNEX Yellow Pages, Syracuse Metropolitan Area, May 1994-April 1995).

\textsuperscript{20}Boyd, \textit{Reclaiming the Soul}; and id., \textit{“The Soul as Seen Through Evangelical Eyes, Parts I and II.”}
on the subject.

A truck bomb would not work. Nor can I, a single man, bring about the needed change in psychiatry. But the clergy have it easily within their reach to destroy this secular self-concept which plagues America, and bring lay people back to a biblical self-concept.

Why do I say that the secular self-concept is absurd? Because the secular view of human nature is only a small piece of the pie. We carry within us God’s breath and image. We rebel against our Creator and assert our alleged independence, a sin which is encouraged by the vast majority of secular therapists. The God-human relationship is central to a biblical self-concept, and that relationship can only be restored if we accept Jesus’ substitutionary suffering. Our soul must be nourished by repentance, prayer, Scripture, and worship. But most important, we somehow survive death, and we will face a Judge.

My experience is that when lay people hear about the soul, their first thought is that human life does not end at a funeral, that they will face a Judge. It is that issue which, more than any, is missing from the secular self-concept. This is the cornerstone, or capstone, upon which either a secular or an evangelical self-concept is built. It is a time-honored wisdom in the evangelical world that emphasis upon our judgment by Christ, with an implied risk of hell, is central to keeping us aware that we are accountable. As Paul said, “You are not your own; you were bought at a price” (1 Cor. 6:19 NIV). I agree with Kenneth Collins’s book on the soul, that Christ came to earth precisely to deliver us from our bondage to ourselves. This is not a message I have ever heard from a psychotherapist.

What is essentially the central goal of psychotherapy? It is to promote autonomy, to maximize the potential and growth of the individual, to encourage the hidden aspirations of the person. That is why therapists ask, “How do you feel about that?” and never ask, “How does God feel about that?” The purpose of most therapy is to restore the fragmented self, and some of the most influential psychiatrists (such as Carl Rogers, Abraham Maslow, and Rollo May) have promoted the “self” as that which they are trying to heal. Dr. Heinz Kohut, heir to the Freudian estate, for example, calls his form of therapy “Self Psychology.” American consumers have understood the central purpose of psychotherapy, for what they say after consuming some of this “treatment” is, “I have learned to take better care of myself.”

Therapists ask, “How do you feel about that?” and never ask, “How does God feel about that?”

What is this “self”? (as in the word “myself”)? It is the secular name of the soul. Although the word “soul” is largely missing from our vocabulary, the word “self” has replaced it. Whereas “self” is a self-centered word, “soul” is a God-centered word. So “self” is not a good replacement for “soul.”

The problem with such an approach to psychiatry is that it contradicts key elements of Christian theology:

1. Humans cannot be understood aside from the God-human relationship. The God-human relationship is the fundamental reality around which everything else about human nature must be understood.
2. This is an abusive relationship, and, among abusive relationships it is an unusual one because the abused partner (God) is the more powerful of the two.
3. The estrangement and injustice caused by this abuse has been overcome by God’s initiative in sending Jesus as an atoning sacrifice, to reconcile humans and God, and re-establish an affectionate and interactive closeness between humans and God. Humans could not solve their own problem. Deliverance was needed.
4. The human heart—which is our core—is orient-

22Collins, Soul Care.
24“Mental Health: Does Therapy Help?” Consumer Reports (November 1995) 734-39 (no author is listed).
ed either for God or against God. Some people have a “pure heart,” meaning that they have been forgiven because of Jesus’ substitution in death (Matt. 5:8; 1 Tim. 1:5; 2 Tim. 2:22; Heb. 10:22; 1 Pet. 1:22). Others have a “hard heart,” meaning that they refuse to believe in Jesus, and therefore they continue to have a heart of stone vis-à-vis God (Matt. 19:8; Mark 6:52, 8:17, 10:5; Rom. 9:18, 11:7; Eph. 4:18; Heb. 3:8, 3:15, 4:7).

5. Among those who have been reconciled with God, there is a process of growth and blossoming that comes from walking in the faith. In other words, Christianity is a form of psychotherapy. We change. The technical name for this growth is “sanctification” (John 17:17-19; Acts 20:32, 26:18; Rom. 15:16; 1 Cor. 1:2, 6:11, 7:14; 1 Thess. 4:3, 5:23; 2 Thess. 2:13; Heb. 9:13, 10:29; 1 Pet. 1:2).26

Comparing these points with the gospel according to the secular mental health movement, there are striking contrasts. I view the psychotherapy emphasis on the “self” as encouraging patients to be more successful in pursuing their self-centered goals, i.e., it promotes the old Adam approach according to which we live in bondage to the flesh. I see it as a simple question: Who is the captain of my ship? Me or Christ? The concept of Saint Paul and John Calvin that we should despair of our own self-sufficiency is not one which ispouring out of the pulpit of secular psychotherapy.

When I first began to speak my mind as a psychiatrist, to admit that I was a double agent, a “sleeper” spy whom God had planted, I was naive. I thought that secular psychotherapists and clergy would be fascinated with my ideas about the soul. I was rudely awakened on both counts.

I have given Grand Rounds in Psychiatry discussing my view of the soul as that which psychiatrists treat. And I have lectured at Yale Medical School on the subject.27 The audience’s reaction is fascinating. The Christians and observant Jews are inspired by my talk, and they also begin to come out of the closet. Statistics indicate that about one-third of psychotherapists are followers of Christ, but my experience indicates that they bite their tongues until after they hear me speak. They are fascinated by my ideas, and feel their own inner struggle validated. The remainder of the audience, whom I have reluctantly come to think of as “pagans,” are silent. They do not attack me. But, overall, the response of the mental health movement to my ideas has been muted. For example, when I submitted an article to the Journal of Clinical Social Work, one of the reviewers who rejected my article wrote, “There is no reason to think of the Bible as a more important source of information than any other book.”

Although my articles on secular subjects had been published in the American Journal of Psychiatry, my article saying that psychiatrists treat the soul was rejected without comment. Clergy and Bible scholars astonished me by also reacting negatively to my ideas. My neighbor, Brevard Childs, for example, had me over for tea and politely explained to me that the word “soul” is a Hellenistic word that should not be used because it implies a self-concept which is incompatible with the Bible. He teaches Old Testament at Yale. And my old mentor, Krister Stendahl, former dean of Harvard Divinity School, and author of the School of Saint Matthew,28 likewise took an anti-soul stance in our initial conversations.29 In trying to understand this hostile response, I came to understand that there had been a debate about dualism30 earlier in the century, and that the word “soul” had even been dropped from most Bible verses. Not counting the Apocrypha, the word is found in the KJV 533 times. It is found less often in twentieth-century translations: NIV, 136 times; NRSV, 180 times; and the Living Bible, 88 times. Stendahl said to me, “The word ‘soul’ was a prominent part of the Bible throughout history until suddenly in the twentieth century when the word disappeared from the Bible almost entirely.”31 Krister Sten-

The human heart is oriented either for God or against God.

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27Boyd, “Where is the Soul in the Midst of All This Medical Technology?” presented at the Yale Program for the Humanities in Medicine, Yale Medical School, New Haven, CT, 13 April 1995.
29Stendahl subsequently admitted that I was correct that the word “soul” is needed if we are to deal with the mental health movement. He helped me write my book, Affirming the Soul. Stendahl reviewed the entire manuscript, wrote the preface, and is extensively interviewed throughout the book for his ideas about the biblical soul.
31Boyd, Affirming the Soul, 24.
dahl once wrote this:

The question about immortality of the soul is interesting for someone who is primarily a biblical scholar because he specializes in sixty-six so-called books that do not know of the immortality of the soul. The whole world that comes to us through the Bible, Old Testament and New Testament, is not interested in the immortality of the soul. And if you think it is, it is because you have read this into the material.

My experience is that I cannot state my case against psychiatry without using the word “soul,” but the problem is that the mere use of that word leads many theologians and most liberal clergy promptly to reject everything I have to say, because they take the word “soul” to mean a Platonic dualism which has been officially rejected by Bible scholars. This is a major obstacle that lies in the center of my path. Given that I understood my initial “Mission: Impossible!” assignment to be about the soul, I am reluctant to abandon that word. It is an evocative and rich term which means more to lay people than to clergy. I am now experimenting with various ways around that roadblock. For example, my next book will feature the word “heart” as the centerpiece of my message.

Although my ideas about the soul have received a cool reception from both psychiatrists and liberal theologians, I find that lay people are fascinated. After my work was reviewed in the New York Times, many lay people phoned me for psychiatric help. They tell me that they cannot trust other therapists, and that they avoid telling other psychiatrists about their faith because they don’t want to throw their pearls before pigs (Matt. 7:6).

Lay people, who are fascinated to hear any information about their souls, are so enthusiastic and encouraging that they keep me going in what is otherwise a difficult task. In my television and radio presentations of these ideas, I find that many lay people say that a light bulb has gone on in their heads vis-à-vis their understanding of who they are. Their self-concept changes from one defined primarily by the mental health movement to one defined primarily by the Bible.

I have discovered something that I wish were not true. I went around to the major book publishers at the latest convention of the Society of Biblical Literature, seeking books on biblical anthropology. The sales people at their respective publisher’s stands told me that neither Zondervan nor InterVarsity nor Word Publishing, neither Augsburg Fortress nor Scholars Press, publish a single book on theological or biblical anthropology!

Baker Book House publishes one book on biblical plants, but zero books on biblical anthropology. Shirley Decker-Luke of Hendrickson Publishers tells me that she is often asked for books on anthropology, and is sad that there is nothing in print. Most of the classic works in theological anthropology are out of print. One must turn to relevant chapters of systematic theology books to find anthropology. The bottom line is this: in the debate about human nature, mental health experts have a rich vocabulary while theologians are almost mute.

There are between one thousand and ten thousand books a year published on the secular view of human nature.

I am an anti-psychiatry psychiatrist. What I am opposed to is not psychiatry per se, but the naturalistic assumptions underlying most of the secular mental...
health movement, i.e., the assumption that humans can be understood without ever mentioning or thinking about God.

I continue to make my living as a psychiatrist. I do so for two reasons. First, because patients with chronic mental illness are the lepers of America. They often live in the homeless shelter, or are too paranoid even for that, and live in a cardboard box in the back alley of the city, pelted from above by sleet, snow, and hostile messages from Mars. Most of them have biological or genetic diseases. I feel Christ calling me to serve, not to walk away from, this constituency (Matt 25:40). The second reason I continue my work is because my more “normal” patients tell me that they need me, that I cannot abandon them, because an outspoken Christian is needed somewhere in the ranks of secular psychiatry.

Mostly I enjoy my work. But I have some internal conflicts. For example, when I spoke about the soul at one Episcopal church, a woman came up afterwards and said, “This is not good, that you are anti-psychiatry and yet you are Chairman of Psychiatry at Waterbury Hospital. I don’t like it. It would be like a Ford dealer saying, ‘Fords are not very good!’”

That made me feel guilty. But within five seconds, I recovered and continued my outrageous behavior. From an ideological viewpoint, I am not a good Chairman of Psychiatry, in the sense that I do not spend my time advancing and promoting the narrow interests of the psychiatry guild. The reason that I am a good chairman, and the reason that I have been elected chairman at all, is because other psychiatrists trust me, because I speak the truth plainly. Furthermore, my quixotic efforts to tilt against windmills are aimed at psychiatry in general, not aimed at any specific psychiatrist. Those who know me find me respectful of persons.

Let me end this article by telling you the stories of two patients, whose lives illustrate the profound discrepancy between the mental health view of the “self,” and the Christian view of the “soul.”

Case #1: Steve

Steve is a forty-five-year-old single man who has lived with his parents his whole life. His friends told him that it was time for him to grow up and leave home, that a forty-five-year-old man could not live with abusive parents and be psychologically healthy. Steve was unable to consider leaving home. Instead he felt neurotic, accepted his family’s definition of him as “weak,” and underwent years of psychotherapy to try to “fix” what was wrong with him. His mother was a paranoid schizophrenic who was often tense about whether the food was poisoned or whether there would soon be an invasion from Jupiter. Steve’s father was an angry man, always critical, never pleased. The father had regularly beaten Steve when Steve was an infant. Both parents expressed deep-felt contempt for Steve and for each other.

The bottom line is this: in the debate about human nature, mental health experts have a rich vocabulary while theologians are almost mute.

Over the years Steve had adopted ways of dealing with his parents by hiding his true feelings, sometimes even from himself. Although the parents thought Steve was “weak,” he was actually the glue that held the family together, and his affection was essential for the parents’ survival. His friends counseled Steve that he should be furious with his parents, but he was unable to feel anger at them. He felt pity, not hatred. His friends told him he needed to make something out of his life, not watch it go down the toilet.

After spending years in psychotherapy with other doctors, Steve came to me for help. After so much exposure to psychotherapists, Steve hoped to get a Ph.D. in psychology and become a therapist himself. He flagellated himself for being too “weak” to be able to leave home and pursue such a career. I listened to him complain about how meek and timid he was, and how neurotic he felt. His friends agreed with these indictments against him.

One day it dawned on me what to say. I told him that he should consider his priorities. He had made it clear to me that his first priority in life was to take care of his crazy parents, who could not survive without him. This was such a high priority for him that he was willing to make any sacrifice to accomplish it. All other priorities would have to play second fiddle. He should stop torturing himself about wanting to get a Ph.D. in psychology, I said, because that was not something he would be able to do without leaving home.

Steve replied that when he got to heaven he knew for sure that Jesus would meet him at the gate and say, “Well done, good and trusted servant, you have
served me by taking care of these incapable parents who were assigned to you.” It was at that point that I finally realized what Steve’s life was all about. His remark astonished him as much as it astonished me.

From that day, Steve’s spirit lifted. What had been a humiliating albatross—namely, his inability to leave home—became a source of pride. He felt he was doing God’s work. His self-sacrifice and martyrdom were seen as positive rather than neurotic. His unappreciative parents could not actually survive without Steve. Were he to leave home, his parents would probably split up, and his mother would probably become a homeless schizophrenic. He really did feel a religious calling.

I told Steve that I admired him, and that I would gladly trade places with him any day. Although I struggle to serve God, I do not live with a conviction that Jesus will welcome me at the Pearly Gates as a good and trusted servant. I would trade all my accomplishments in life to have what he has: an unshakable conviction that he is doing what he is called to do.

When I lectured about this at an Episcopal church, a woman in the congregation was horrified that I had encouraged what she called “enabling behavior” on Steve’s part. She thought I was incompetent as a psychiatrist. It was “unhealthy,” she said, for Steve to stay at home and support his crazy parents.

I replied that Steve’s life had blossomed ever since he realized that this was his calling as a Christian. He had more self-esteem, enjoyed more hobbies and outside interests, was more able to talk with friends, and no longer felt himself to be weird. Thus, by any method of measuring outcome, his life had improved because I approved of his religious calling.

Steve’s transformation represents a Copernican revolution. He finally realized that his whole life made sense only if he assumed that God was the center of value. His self-esteem was not based on being autonomous and independent of God, as his friends and psychotherapists had urged. There was no need for him to “grow up.” Steve still lives at home. He no longer feels neurotic. He has discarded the idea of getting a Ph.D. in psychology. He has also come to believe that one of his biggest problems in life has been the mental health movement. Not only have secular psychologists failed to realize what lay at his heart—namely, his faith—but his friends and psychotherapists have also been infected by psychological ways of thinking about what is “healthy” and what is “unhealthy.” Even clergy who are his friends have regarded him as neurotic. They, too, have assumed that psychological growth and taking good care of oneself are more important than seeking a religiously inspired calling.

The criticism leveled against me by the Christian lay person, indicting me for “enabling” Steve to “enable” his parents, is a vivid illustration of how the [liberal] Christian church has sold its soul to the devil. I find it remarkable when Christian compassion toward ailing parents is condemned by a Christian as “enabling.” Until recently the Fifth Commandment, “Honor your father and your mother,” was widely cherished in the Christian church. Today many Chris-

__His whole life made sense only if he assumed that God was the center of value.__

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Case #2: Leslie Dickerson

Leslie Dickerson had a devastating childhood. She...
felt unloved and unlovable as far back as she could remember. Emptiness, inner deadness, lack of self-worth, and painful rejection—these were the feelings she experienced in her soul, at the deepest level. She suffered rejection by her parents as well, and their rejection was the picture of them that she carried within her soul. As she grew up, she began to attempt suicide and to abuse alcohol and drugs. She was torn by rage, depression, and anxiety.

Eventually Leslie fell into the mental health treatment system, and she failed to improve with every known treatment: long-term intensive psychotherapy, family therapy, every known medication, and electric shock treatment. She suffered from the most untreatable of psychiatric conditions, borderline personality disorder. For a decade she was in and out of psychiatric hospitals. One time she spent three years continuously in a state mental hospital, misdiagnosed as schizophrenic. Her therapists all gave up on her as untreatable.

One day she gave birth to a daughter, and suddenly knew that she had a choice of either changing her life or losing the baby—if she didn't reorder her life, the state social workers would intervene. The dilemma motivated her to search more desperately than ever for a solution to her problems. Finally, she turned to Jesus Christ for the first time in her life, and prayed for forgiveness. For the first time ever, she felt accepted, she felt lovable, and peace such as she had never before experienced flooded her heart.

From that day forward, Leslie never again attempted suicide. As she took root in this new soil, a profound psychological reorganization occurred. It was based on the experience of feeling forgiven and accepted at her core. As bad as she thought she was, it had all been overcome at Calvary. Her badness, she said, had been washed away by the Blood of the Lamb.

Leslie has now been happy and free of psychiatrists for ten years. She works as a transcriptionist and is devoted to her two children and to her church. Her favorite name for God is “The Great Psychiatrist.” She has positive memories of the psychiatrists that used to try to help her, but she claims they did not have the medicine she needed. Before her conversion she had been haunted by an occasional auditory hallucination, and a paranoid dread of closed doors. Since her conversion she has been free of these psychotic symptoms, without any medication.

Leslie speaks of inviting Jesus into her heart. For more than an hour every morning, before her children wake up, she sits alone in a room and talks with Jesus, whom she calls her best friend. The conversation, she says, goes both ways. She prays about something, and a specific Bible verse then occurs to her. Reading this verse, she interprets it to be Jesus’ reply to her prayer.

I asked Leslie how she can tell that a certain idea is what Jesus wants her to do, rather than her own thought. She said there are three criteria:

1. The idea is consistent with what the Bible says.
2. The idea fits her life circumstances.
3. Peace and tranquility come into her life after the decision is made.

After she met Jesus, she discovered that her parents were quite different than she had thought they were. She now sees that they were the best parents they were capable of being. She has reestablished a loving relationship with both of them. In retrospect, she has discovered that her misperception of her mother as a malignant person was based on the experience of being sickly as an infant, so that the infant-mother relationship had gotten off on the wrong track. Although for many years she experienced her mother as “a bad mother,” the fact is that she had a decent mother who tried the best she could to care for an infant that could not be comforted.

Leslie speaks of taking Jesus into her heart, so that He dwells inside her. Jesus brought Leslie such a feeling of being accepted that she finally relaxed. Seeking a new relationship with her mother, she discovered that her mother had more to offer than she had ever imagined, and this led to a healing of their relationship. Jesus, she claims, also healed her self-esteem. “I used to be a mouse,” she says. “Now I roar like a lion.”

In all my years as a psychiatrist, I have met only one person who ever truly recovered from borderline personality disorder. Her name is Leslie Dickerson.40

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40Ibid.

Editor’s Note: Trinity Journal is published twice a year by Triniti Evangelical Divinity School, 2065 Half Day Road, Deerfield, Illinois 60015.