The days when spirituality and faith were viewed negatively by psychology are gone. Though once considered as pathological at worst and irrelevant at best, postmodern times have opened the door to incorporating clients’ spirituality and religious beliefs into therapy. The American Psychological Association (APA) first gave serious acknowledgment to the vital role of faith in the practice of psychotherapy when it published Shafranske’s (1996) *Religion and the Clinical Practice of Psychology*. This edited volume did well, and it has been followed by a number of related books in the ensuing years.

The APA's expanding openness to the inclusion of spirituality in psychotherapy continues with its videotape series Spirituality, and the volume interviewing Mark R. McMinn grants specific focus to Christian counseling. This is commendable given that most Americans still identify with the Christian faith. However, this is the only explicitly Christian volume in this series thus far, whereas Buddhist-based mindfulness techniques get two, suggesting there is room to grow in matching the product to the population as there are far more Christians in America than Buddhists. Yet if only one example of Christian counseling is to be offered, McMinn was the right choice.

The host of the video, Jon Carlson, asks timely questions to elicit important aspects of McMinn's approach, one which McMinn cautions is only his and not reflective of all who do Christian forms of psychotherapy. Indeed, McMinn's is only one approach to what Christian psychologists have termed integration, the endeavor to take psychological data, theories, and techniques and mesh them with Christian teachings and theology. The interested reader can see a sampling of such approaches in Johnson and Jones (2000), but suffice it here to note there are a variety of methods for integrating Christian faith and psychology.

McMinn defines Christian counseling as framed by a set of values the therapist brings into the session and makes explicit. He maintains that all therapy is a form of applied moral philosophy; Christian counselors just make this more explicit than many others. McMinn's faith is essentially evangelical, and he terms his psychological approach relational cognitive therapy (to be detailed in his forthcoming book, McMinn & Campbell, 2007). He applies these mainstream therapy approaches in the context of Christian ideology that is shared by the client by adding two more dimensions to his work, the theological and the spiritual (McMinn, 1996), creating a “tripod” as a platform for clinical work.

The theological dimension roughly matches the notion of personality theory and is particularly rooted in the notion of people being
created in the image of God. McMinn ties this into the content of beliefs targeted in the cognitive-behavioral strategies. The spirituality aspect draws on Christian traditions of prayer, meditation, and other spiritual exercises used to enhance therapeutic change. Focused on the client’s drawing closer to God, this area is part of the relational focus of McMinn’s approach. Carlson correctly observes on the video that such an approach requires considerable biblical knowledge. McMinn agrees and notes that training to do this type of therapy is a particular area of challenge, as it requires multiple competencies. (The APA has approved several explicitly Christian doctoral programs that exemplify the effort to train in theology and spirituality in addition to psychology.) McMinn details the three stages of his approach, starting with basic cognitive techniques, followed by searching more deeply for cognitive schemas that underlie the client's distress, and concluded by a phase of focus on relational issues.

The highlight of the video is McMinn’s session with Celeste, an African American woman overwhelmed by the myriad responsibilities in her life. Celeste is wonderfully open and vulnerable for such a staged session, and although at times one senses the hurriedness of trying to cover many things in one session to demonstrate the approach, overall it is an impressive effort. McMinn demonstrates the essential qualities of a good therapist: a warm and welcoming demeanor, genuine empathy, accurate reflection, and gentle questioning. But one quickly notices a difference in that Celeste feels free to use the language of her faith to explain and try to cope with her problems, knowing it is shared with her counselor. Her efforts to earn God’s pleasure, the pressure she feels to be grateful to God, and the importance of her roles at her church all play central roles to understanding Celeste. As I watched, I tried to envision how this session might have gone if she did not feel free to raise these issues with a therapist who shared her faith. To omit these vital dimensions of Celeste’s life would almost inevitably compromise the effectiveness of the therapy.

McMinn’s cognitive techniques are apparent as he clarifies not only some beliefs that underlie Celeste’s distress but also his idea of her core cognitive schema that she must hold the world together through extraordinary effort. Careful and kind as he presses his point, McMinn suggests that part of this might be due to the cultural myth that the African American woman must take care of everything. Celeste agrees, as they also determine that her understanding of her faith contributes to her excessive responsibilities as she strives to please God.

Celeste’s insight is helpful to viewers as she observes that African Americans are quicker to embrace the church more than counseling, implying McMinn’s identification with the church is a key to her comfort in working with him. He challenges her schema rooted in the myth of the African American woman and offers instead the idea that “God loves me apart from what I produce.” Celeste resonates with this idea, and it is also worked out in a prayer exercise. Thus, McMinn takes a theological idea as a replacement cognition and works it out in a spiritual exercise, showing all three legs of his tripod at work.

This raises an interesting question. As this White male works with an African American woman, we assume cultural distance. Yet, they share a vital “culture” in common, the Christian faith. Unlike vague spiritualities that are commonly seen today, people who embrace a historic faith with institutions (the church) and standards of belief and practice (the Bible) may share in a culture that is commonly overlooked. In this session, McMinn is viewed as a part of Celeste’s culture of Christian faith to such an extent that he is able to correct a “myth” of her African American culture with a concept they share in their Christian culture, being loved and accepted by God unconditionally. I even wonder whether this White male might have more success with Celeste than an African American woman who did not share Celeste’s Christian faith. (Of course, this would mean the ideal therapist for Celeste might be a Christian African American woman.) If this is true, then the admission of Christian counseling to the society of accepted approaches to psychotherapy might lie more in its being viewed as a form of cultural diversity than simply as a form of spirituality, though I believe it is both.

McMinn represents his approach well, and he acknowledges the paucity of research in the area. This is clearly a gauntlet laid down for Christians in psychology to engage in more outcome research on what incorporating theological ideas, faith, and spiritual practices in therapy does to enhance its value and effectiveness.

The video is well produced by and large, although the set for the interview is a bit sterile. Each minute of the interview is numbered on the screen to aid in using the video as a pedagogical tool. It illustrates for Christians how to use their faith in therapy, but maybe its greater benefit is to exemplify to those outside the Christian community the importance of honoring and incorporating the faith of counselees.
References