

COUNSELING ISSUES I

COU321

Dr. Kenneth Meadors

Counseling Issues
COUN201

Syllabus

Dr. Kenneth Meadors

- 1. Introduction**
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- 12. Review and Exam**

Your grade will depend upon the following:

- 1) Attendance. (All absences must be excused and the class must be made up).
- 2) Grade on first 36 questions.
- 3) Grade on second 18 questions.
- 4) Final exam grade.

5)

1. INTRODUCTORY ISSUES

Care and Counseling

Purposes of Christian Counselors:

- 1) Counseling attempts to provide encouragement and guidance for those who are facing losses, decisions, or disappointments.
- 2) Counseling can stimulate personality growth and development; help people cope more effectively with the problems of living, with inner conflict, and with crippling emotions; assist individuals, family members, and married couples to resolve interpersonal tensions or relate effectively to one another; and assist persons whose life patterns are self-defeating and causing unhappiness.
- 3) The Christian counselor seeks to bring people into a personal relationship with Jesus Christ and to help them find forgiveness and relief from the crippling effects of sin and guilt.
- 4) Ultimately, the Christian hopes to help others become disciples of Christ and disciplers of others.

Pastoral Care

Pastoral care refers to the church's overall ministries of healing, sustaining, guiding, and reconciling people to God and to one another. This includes the ministries of preaching, teaching, discipline, administering the sacraments, nurturing people, and caring in times of need.

Pastoral Counseling

This is the specialized part of pastoral care that involves helping individuals, families, or groups as they cope with the pressures and crises of life. Pastoral counseling uses a variety of healing methods to help people deal with problems in ways that are consistent with biblical teaching. The ultimate goal is to help counselees experience healing, learning, and personal-spiritual growth. Traditionally, pastoral counseling is the work of an ordained pastor. However pastoral counseling can and should be a ministry of sensitive and caring Christians, whether or not they are ordained as clergy.

Pastoral Psychotherapy

This is a long-term, in-depth helping process that attempts to bring fundamental changes in the counselee's personality, spiritual values, and ways of thinking. It is a form of help-giving that seeks to remove blocks, often from the past, that inhibit personal and spiritual growth. It is the work of a trained specialist.

The Work of a Counselor

Counseling can be gratifying work, but it doesn't take long for most of us to discover that this also can be emotionally draining, difficult work. Counseling involves intensive concentration and sometimes brings pain when we see so many people hurting. When these people fail to improve, it is easy to blame ourselves. As more and more people come for help, there is a tendency to keep increasing our counseling loads, pushing ourselves closer to the limits of our endurance. Sometimes the counsees' problems remind us of our own insecurities or conflicts and this can threaten the counselor's own stability or feelings of self-worth.

The Counselor's Motivation

A sincere desire to help others is a valid reason for becoming a counselor. But there are other issues, sometimes unrecognized, that can interfere with your effectiveness. When you counsel primarily to meet your own needs, you are not likely to be of much help to your counsees.

- 5) **The Need for Relationships.** If a counselor has no close friends apart from counsees, his need for a relationship may hinder the helping. If you notice that you are looking for opportunities to prolong the counseling, to call the counsee, or to get together socially, it may be that the relationship is meeting your need for companionship. At this point the counselor-counsee involvement has ceased to be a professional relationship.
- 6) **The Need for Control.** The authoritarian counselor likes to "straighten out" others, give advice, and play the problem-solver role. Some dependent counsees may want this, but eventually most people resist controller-type counselors because they don't really help.
- 7) **The Need to Rescue.** The counselor often has a sincere desire to help, but this counselor takes responsibility away from the counsee by showing an attitude that says "you can't handle this; let me do it for you." When the rescue technique fails (as often happens), the counselor feels guilty, inadequate, and deeply frustrated.
- 8) **The Need for Information.** In describing their problems, counsees often give interesting tidbits of information that might not be shared otherwise. When a counselor is curious, he or she sometimes forgets the counsee, pushes for extra information, and often is unable to keep confidences.
- 9) **The Need for Personal Healing.** Most of us carry hidden needs and insecurities that could interfere with our people-helping work.

The Counselor's Role

Several potential areas of role confusion.

- 10) ***Visiting Instead of Counseling.*** Visiting is a friendly activity that involves mutual sharing. Counseling is a problem-centered, goal-directed conversation that focuses primarily

on the needs of one person, the counselee. All counseling will involve periodic visiting, but when visiting is prolonged and primary, counseling effectiveness is reduced.

- 11) ***Being Hasty Instead of Deliberate.*** It is true that counselors should not waste time but it also is true that counseling cannot be rushed. When the pace is deliberate and relaxed, the counselor is less inclined to make hasty judgments and the counselee is more likely to feel the support and serious interest of the counselor.
- 12) ***Being Disrespectful Instead of Sympathetic.*** Some counselors quickly categorize people and then dismiss individuals with hurried evaluations, quick confrontation, or rigid advice. No person likes to be treated with such disrespect.
- 13) ***Being Judgmental Instead of Unbiased.*** There are times when counsees must be confronted about the sin or unusual behavior in their lives, but this is not the same as condemning or preaching at people in the counseling office. When counsees feel attacked they either defend themselves, adopt a resigned “what’s the use?” attitude, or go along with the counselor temporarily and grudgingly.
- 14) ***Being Directive Instead of Interpretive.*** This may reflect the counselor’s unconscious need to dominate and control. The counselor and counselee must work together as a team in which the counselor serves as a teacher-coach whose eventual goal is to withdraw from the playing field.
- 15) ***Being Emotionally Overinvolved Instead of Remaining Objective.*** There is a fine line between caring and becoming too involved to be helpful. This is especially true when a counselee is deeply disturbed, confused, or facing a problem that is similar to the counselor’s own struggles.
- 16) ***Being Impatient Instead of Realistic.*** Many counselors become discouraged and sometimes anxious when they don’t see immediate positive progress in their counsees. Problems frequently take a long time to develop, and it is unrealistic to assume that they will disappear quickly and always in response to the counselor’s interventions. Most often it takes time for counsees to give up their old ways of thinking or behaving and to replace these with something new and better.
- 17) ***Being Artificial Instead of Authentic.*** Counselors sometimes burden themselves with the belief that they must be perfect, must always know the appropriate thing to say or do, must never make mistakes, and must always have the knowledge and skills to let them handle any kind of counseling situation. They are so anxious to be professional and successful that they appear artificial, aloof, and sometimes pompous. It is difficult, perhaps impossible, for a counselee to relax and share honestly with a counselor who gives the impression of being perfect one who “has it all together.”
- 18) ***Being Defensive Instead of Empathic.*** At times most counselors feel threatened in counseling. The ability to listen empathetically is hindered when we are being criticized, aware that we aren’t helping, feeling guilty, or afraid of being harmed by a counselee.

Good rapport with counsees can cover a multitude of counseling mistakes, but we should not use this as an excuse for sloppy and incompetent counseling.

2. THE COUNSELOR'S VULNERABILITY

Counseling would be easier if we could assume that every counselee wanted help, was honest, and would cooperate fully in the counseling. Some counsees have a conscious or unconscious desire to manipulate, frustrate, or not cooperate. This is a difficult discovery for the counselor who wants to succeed and whose success chiefly comes when people change. By agreeing to help we are opening ourselves to the possibility of power struggles, exploitation, and failure. There are three common ways by which people frustrate the counselor and increase his or her vulnerability.

Three Ways Counsees Frustrate Counselors

- 19) **Manipulation.** You may be manipulated by the counselee by becoming more involved than you should by doing things for counselee which would not be required in a normal counseling situation. Sometimes people ask for help with a problem, but they really want your attention and time, your sanctioning of sinful or otherwise harmful behavior, or your support as an ally in some family conflict. Sometimes people come because they hope concerned mates, family members, or employers will stop complaining about the counselee's behavior if it appears that counseling is taking place. When you suspect such dishonesty or manipulation it is wise to raise this with the counselee and expect that the counselee may disagree. Then proceed to structure the counseling in a way that will prevent manipulation or exploitation of the counselor in the future.
- 20) **Countertransference.** This occurs when the counselor's own needs interfere with the therapeutic relationship. For example, you have strong sexual or romantic feelings toward your counselee and you are tempted to fantasize about the counselee between sessions. You find ways to avoid certain clients whom you dislike but spend extra time and longer sessions with others. You could become so emotionally entangled with the counselee that your objectivity (and counseling effectiveness) has been lost.
- 21) **Resistance.** People may come for counseling, but for various reasons, resist change. Sometimes problems provide benefits that the counselee is reluctant to give up (personal attention from others; disability compensation; decreased responsibility; more subtle gratifications such as self-punishment for wrongdoing; or the opportunity to make life difficult for others. Some people get a sense of power and accomplishment by frustrating the efforts of others, including the professional counselor. When counseling begins, the counselee's psychological defenses may be threatened. This could lead to anxiety, anger, and noncooperation that sometimes may not even be conscious. When counsees are relatively well-adjusted, resistance can be discussed gently and openly. The counselee must be informed that responsibility for improvement ultimately rests with the counselee. The counselor provides a structured relationship and must recognize that one's effectiveness as a counselor is not always correlated with the improvement rate of counsees.

The Counselor's Sexuality

Whenever two people work closely together on a common goal, feelings of camaraderie and warmth often develop between them. When these two people have similar backgrounds and are of opposite sex, these feelings of warmth frequently have a sexual component. This sexual attraction between counselor and counselee has been called “the problem clergyman don’t talk about.” Whether we talk about it or not, this is a problem that almost all counselors encounter, at least periodically.

Counseling often involves the discussion of intimate details that would never be discussed elsewhere--especially between a man and a woman who are not married to each other. This can be sexually arousing to both the counselor and counselee. The potential for immorality is even greater if:

- 22) The counselee is attractive and/or tends to be seductive.
- 23) The counselor is not having emotional and sexual needs met elsewhere.
- 24) The counselee indicates that he or she really needs the counselor.
- 25) The counseling involves detailed discussions of sexually arousing material.

How to Deal with These Situations

26) ***Spiritual Protection.***

- a) Meditation on the Word of God, prayer, and reliance on the Holy Spirit protect us in crucial situations.
- b) Also, the counselor should watch what they do with their minds. Focus on that which is true, honorable, right, pure, lovely, and good.
- c) Find another believer to whom you can regularly be accountable for your actions.
- d) Be careful not to fall into the dangerous trap of thinking, “It happens to others but would never happen to me.”

27) ***Awareness of Danger Signals.***

- a) External.
 - i) Growing dependence--the counselee’s increasing requests for time and attention.
 - ii) Affirmation and praise.
 - iii) Complaints about loneliness--sometimes accompanied by statements about the counselor’s compassion and desires to help ease the pain.
 - iv) The giving of gifts.
 - v) Physical contact.
 - vi) Other seductive behavior--”how a woman dresses, whether she wears perfume, makes subtle suggestions or jokes about your irresistibility as a man, sends messages about her availability when her husband is away, or increasingly talks about sexuality in the counseling sessions.”
- b) Internal (in the counselor).
 - i) Thinking about the counselee between sessions and admiring his or her personality traits.

- ii) Comparing the counselee with your spouse, forgetting that the counselee is new, different, nondemanding, and possibly very impressed with you.
 - iii) Finding excuses to be with the counselee, perhaps in social gatherings or prolonged counseling sessions.
 - iv) Beginning to have sexual fantasies about the counselee.
 - v) Wanting to share your own problems with this person who seems so sensitive and caring.
- 28) ***Limit Setting.***
- a) Clearly decide on the frequency and length of counseling sessions, then stick with these limits.
 - b) Refuse to engage in long telephone conversations.
 - c) Be careful of physical contact.
 - d) Meet in a place and seat yourself in a way that discourages wandering eyes or an opportunity for personal intimacies.
 - e) Discourage lengthy detailed discussions of sexual topics.
- 29) ***Examining Attitudes.***
- a) Yielding to sexual temptation can ruin one's reputation, marriage, and counseling effectiveness.
 - b) Sexual involvement outside of marriage is sin and must be avoided.
- 30) ***Support Group Protection.***
- a) One's Spouse. Sometimes because of fear, embarrassment, or a desire not to hurt, the counselor never discusses this issue with his or her mate. As a result we miss a good opportunity for in-depth marital communication, support, and reassurance. If a counselee becomes a serious threat to the counselor's marriage, it is probable that there were underlying problems in the marriage before the counselee came along.
 - b) Discuss one's feelings with another trusted counselor or close friend.

3. COUNSELING EMOTIONAL ISSUES

Issues:

- 31) Anxiety
- 32) Loneliness
- 33) Depression
- 34) Anger
- 35) Guilt

ANXIETY

Anxiety is an inner feeling of apprehension, uneasiness, concern, worry, and/or dread that is accompanied by heightened physical arousal. In times of anxiety, the body appears to be on alert, ready to flee or fight. The heart beats faster, blood pressure and muscle tension increase, neurological and chemical changes occur within, sometimes perspiration appears, and the person may feel faint, jumpy, and unable to relax. Anxiety can arise in response to some specific identifiable danger, or it may come in reaction to an imaginary or unknown threat. This latter kind of anxiety has been termed “free-floating;” the anxious person senses that something terrible is going to happen but he or she does not know what it is or why.

The Bible and Anxiety

- 36) Anxiety in the form of realistic concern is neither condemned nor forbidden.
 - a) To ignore danger is foolish and wrong
 - b) Wrong and unhealthy to be immobilized by excessive worry
- 37) Anxiety as fret and worry.
 - a) Comes when we turn from God, shift the burdens of life on to ourselves and assume that we are responsible for handling problems.
 - b) Anxious people are often impatient people who need help in handling their pressures realistically and within God's perfect time schedule.
 - c) Often helpful to understand the causes and effects of persisting anxiety.

Counseling and Anxiety

- 38) Recognizing own anxieties
- 39) Calming tension
 - a) Encourage counselee to sit quietly, breathe deeply, and try to relax muscles
 - b) Close eyes and imagine relaxing on a beach
- 40) Showing love
- 41) Identifying causes

- a) Observation - "Does counselee show evidence of added anxiety when certain topics discussed?"
- b) Reflection
 - i) When are you the most anxious?
 - ii) When are you not anxious?
 - iii) When was the last time you felt really anxious?
 - iv) What was happening in your life at that time?
- c) Contemplation
 - i) Raise some possibilities and watch for signs of anxiety
 - ii) Then discuss your hunches
- 42) Encouraging action
- 43) Giving support
- 44) Encouraging a Christian response
 - a) Rejoice
 - b) Be gentle
 - c) Pray
 - d) Think
 - e) Act

THE ISSUE OF DEPRESSION

Signs of Depression

- 45) Sadness, accompanied by pessimism and hopelessness
- 46) Apathy and inertia
- 47) General fatigue; loss of interest
- 48) Low self-esteem, accompanied by self-criticism and feelings of guilt, shame, worthlessness, and helplessness
- 49) Loss of spontaneity
- 50) Insomnia and difficulties in concentration
- 51) Loss of appetite

The Bible and Depression

- 52) David in Psalms 69, 88, and 102
- 53) Job
- 54) Moses
- 55) Jonah
- 56) Peter

Counseling and Depression

- 57) When counselee is passive, nonverbal, poorly motivated, pessimistic
- a) Counselor reaches out verbally in more active role
 - b) Optimistic reassuring statements
 - c) Sharing of facts about how depression affects people
 - d) Patiently encouraging counselees to talk
 - e) Asking questions
 - f) Giving periodic compliments
 - g) Gently sharing Scripture
- 58) Ask counselee talks about depression
- a) Listen attentively
 - b) Watch for evidence of anger, hurt, negative thinking, poor self-esteem, and guilt, which you might want to discuss later
 - c) Encourage counselees to talk about life situations that are bothersome
 - d) Avoid taking sides, but try to be understanding and accepting of feelings
 - e) Watch for talk about losses, failures, rejection, and other incidents that may have stimulated the current depression

COUNSELING AND ANGER

- 59) Help counselees admit anger
- a) Anger that is denied will never be eliminated
 - b) Point out some signs of hidden anger
 - i) Depression
 - ii) Physical symptoms
 - iii) Criticism
 - iv) Tendency to gossip or not cooperate
 - v) Impatience
- 60) Help counselees express anger
- a) Evidence that ventilation and continual talking about anger tend to increase anger instead of reducing it
 - b) Sports and hobbies can redirect our energies
 - c) Try to deal with your hurts and anger as they arise, one at a time, which keeps anger from building up
 - d) If someone has hurt you, tell the personal and say why it has hurt and made you feel angry
 - e) Recognize that the other person has feelings too, and try to understand these
 - f) Listen and accept any explanation or apology that may be offered and try to be forgiving
- 61) Help counselees consider the sources of anger
- a) What is making me feel angry?

- b) Why am I feeling anger and not some other emotion?
 - c) Am I jumping to conclusions about the situation that threatens me and makes me feel afraid or inferior?
 - d) Is there something about this situation that threatens me and makes me feel afraid or inferior?
 - e) Did my anger come because I had some unrealistic expectations?
 - f) How might others, including the person who is angering me, view this situation?
 - g) Is there another way to look at the situation?
 - h) Are there things I can do to change the situation in order to reduce my anger?
- 62) Focus on humility, confession, and forgiveness
- 63) Teaching self-control

THE ISSUE OF GUILT

Types of Guilt

- 64) **Objective Guilt.**
- a) Legal guilt. The violation of society's laws.
 - b) Theological guilt. Involves a failure to obey the laws of God.
 - c) Personal guilt. The individual violates his or her own personal standards or resists the urgings of conscience. No laws have been broken and neither has the guilty person disobeyed God. For example, if a father determines to spend each Sunday with the family, he experiences guilt when business keeps him away from home over a weekend. His overweight wife may feel guilty when she indulges in a tempting dessert.
 - d) Social guilt. When we break an unwritten but socially expected rule. Examples: a person behaves rudely, gossips maliciously, criticizes unkindly, or ignores someone who has a need.
- 65) **Subjective Guilt.** This is the uncomfortable feeling of regret, remorse, shame, and self-condemnation that often comes when we have done or thought something that we feel is wrong, or failed to do something that should have been done.
- a) Appropriate guilt. When we have broken a law, disobeyed biblical teachings, or violated the dictates of our conscience and feel remorse in proportion to the seriousness of the act.
 - b) Inappropriate guilt. Out of proportion to the seriousness of the act.

Counseling and Guilt

66) ***Understanding and Acceptance.*** We must not attempt to minimize the reality of sin, and neither do we take an attitude of moral superiority. We approach others with an attitude of love and a willingness to understand.

67) ***Insight.***

a) Are there things in your life that are making you feel guilty? What are these?

b) How have you dealt in the past with your guilt feelings?

c) What things have been helpful? What has not helped?

d) What were your parental expectations about right and wrong?

e) Were your parents' standards so high that you could never succeed?

f) What happened when you failed?

g) Was blame, criticism, and punishment frequent?

h) What did your church teach about right and wrong?

i) Was there a clear biblical basis for the church's teachings?

j) What are some things that make others feel guilty but don't seem to bother you?

68) ***Repentance and Forgiveness.***

a) "I can't ask for forgiveness."

b) "I don't feel forgiven."

c) "I know God has forgiven me, but I can't forgive others."

4. COUNSELING DEVELOPMENTAL ISSUES

Stages of Development

- 69) Childhood
- 70) Adolescence
- 71) Young Adulthood
- 72) Middle Adulthood
- 73) Later Adulthood

Counseling Children

- 74) Unlike adults, children (especially very young children) often lack the verbal skills or self-awareness to discuss their feelings and frustrations.
- 75) These techniques, along with the use of psychological tests, are used by child specialists to build rapport, elicit information, uncover childhood problems, and provide opportunity for giving help.
- 76) Talking is also helpful. Children are spontaneous and sometimes share their worries and concerns openly. Sometimes it is helpful to ask questions about what makes the child happy or unhappy, what is scary, what is the funniest or saddest thing he or she can think of, what the child would ask for if he or she had three wishes, or similar questions that have potentially revealing answers.
- 77) Although the goals of child counseling depend largely on the stated and identified problems, counselors often seek to reduce irrational fears and disturbing behavior, resolve conflicts, increase the child's ability to express feelings, improved interpersonal relationships at home or school, and teach skills.
- 78) Counseling may involve instruction, play therapy, skills training, the demonstration of kindness and respect, and the giving or withholding of reinforcement.

Child counselors should remember the obvious but easily forgotten fact that children are people. They have feelings, needs, and insecurities. At times they try to manipulate adults, but children respond to love and firmness. They need to be treated with sensitivity, empathy, warmth, consideration, and a respect that does not treat them with disdain or convey a smug adult superiority.

Counseling with Parents

Most often, the parents come seeking for help and the child is seen later, with or without the parents being present.

General Issues

- 79) Appreciate the parents' position. Child rearing can be frustrating, and it can be assumed that most parents want to succeed. It doesn't help to blame, criticize, or demean the parents with whom you counsel.
- a) Try to discourage the parents from condemning each other for the child's problems.
 - b) Attempt to understand the parents' perspectives and express your desire to work together in helping the parents help their children.
- 80) Use various approaches.
- a) Some parents need simple information or a clearer understanding of the situation.
 - b) Others may need advice, cautioning, support, encouragement, and/or suggestions for dealing with problems.
 - c) Sometimes it is necessary to challenge "parental myths," such as "children should be seen and not heard," "all teenagers are rebellious," "boys are harder to raise than girls."
- 81) Be sensitive to parental needs.
- a) Many parents feel self-doubt, a sense of being overwhelmed, competition, jealousy, a fear of losing one's children, or a need to be in authoritarian control of the family.
 - b) In counseling, such needs should be identified, discussed, and reevaluated.
- 82) Be aware of family dynamics.
- a) Whenever a child has a problem, it is assumed that the whole family is dysfunctional in some way, and the whole family comes for treatment.
 - b) When you counsel with children, try to learn about family issues that might be creating or complicating the child's problems.
- 83) Model the parental role. If the counselor talks to the children in the parents' presence, this can be an example of adult-child respect and interaction.

Adolescence

Three Periods of Adolescence

- 84) ***Preadolescence.*** Begins around age ten or eleven and continues for at least a couple of years. Begins with a bursting of biological changes that can evoke simultaneous feelings of anxiety, bewilderment, and delight.
- 85) ***Middle adolescence.*** From ages fourteen to eighteen when the young person is in high school.
- a) Period of fewer physical changes but adolescent must adapt to his or her new identity as a person with an adult body.

- b) Sexual urges become more intense, especially in boys, and control is difficult in view of peer pressures, strong needs for intimacy, and the temptations from a hedonistic society that no longer considers self-control to be important or even possible.
 - c) Peers become more significant.
 - d) Three influences become important.
 - i) Sex.
 - ii) Drugs.
 - iii) Motor vehicles.
- 86) ***Postadolescence.***
- a) Begins when high school ends.
 - b) Faced with the tasks of moving comfortably into adult society, assuming adult responsibilities, shifting to an independent status, and formulating a distinct lifestyle.
 - c) Planning for the future, getting further education, choosing a mate, and moving into a career are all tasks that take time and energy.

Causes of Problems in Adolescence

- 87) ***Physical changes.***
- a) Growth spurt, skin problems, excess fat, periodic decreases in energy, changes in body proportions, development of body hair, lowering of voice pitch, and other physical changes can each influence adolescents psychologically.
 - b) At a time when it is important to look attractive, a teenager's physical development can bring embarrassment and dissatisfaction, especially if the biological changes are obvious to others or if maturation is slow in coming.
- 88) ***Sexual changes.***
- a) Sexual fantasies, masturbation, heavy petting, and adolescent sex can all produce guilt.
 - b) Confusion over one's identity.
 - c) Fear of AIDS or venereal diseases.
- 89) ***Interpersonal Relationships.***
- a) Changes in relationships with parents, peers, and others in society.
 - b) Important to be liked and accepted by other adolescents, especially those of the opposite sex.
 - c) As they move away from parental control, young people need to feel that their environments have stability.
- 90) ***Changing Values, Morals, and Religious Beliefs.***
- a) At first, accept parental standards with little question or challenge.
 - b) As get older, begin to question parental viewpoints and peers have greater impact on the molding of beliefs and values.
- 91) ***The Move to Independence.***
- a) Aware they are no longer children, adolescents want freedom in large doses, but handle it better in small and slowly increasing amounts.

- b) An old cliché says that parents often find it easier to give their children roots than to give them wings.
- 92) ***Acquiring Skills and Building Self-Esteem.***
 - a) Teenagers do not feel good about themselves unless they have physical attractiveness, intelligence, and money. Rarely are these all present and frequently there are feelings of self-condemnation, social incompetence, academic and athletic ineptness, and spiritual failure that are emphasized whenever there is criticism, social rejection, or the inability to succeed in some important task.
 - b) Self-esteem problems sometimes come because adolescents are lacking in social skills.
- 93) ***Concerns about the Future.***
 - a) Concerns about careers, college majors, values, lifestyles, and what to do with their lives.
 - b) Often adolescent decisions can have lifelong implications.

Counseling and Adolescence

Two approaches:

- 94) Counseling the adolescent.
- 95) Counseling the parents.

Counseling the Adolescent

Often, parents and teenagers are confused, disappointed, and hurt over the interpersonal tensions and adolescent pressures that have developed. Frequently there is anger, a loss of self-esteem, anxiety about the future, and feelings of guilt over the past. The counselor who understands and accepts such problems without taking sides can have a significant impact on both parents and teenagers.

- 96) ***Rapport Building.***
 - a) Honesty and respect, mixed with compassion and gentle firmness.
 - b) If there is resistance, deal with it directly and give the counselee opportunity to respond.
- 97) ***Transference.***
- 98) ***Problem Identification.***
- 99) ***Goal Setting.***

Counseling Parents

- 100) Support and encouragement.
- 101) Family counseling.
- 102) Limit setting.

103) Spiritual guidance.

Adulthood

- 104) Young Adulthood
- 105) Middle Adulthood
- 106) Later Adulthood

Young Adulthood

Challenges of young adult years:

- 107) ***Competency.***
 - a) Physical skills.
 - b) Intellectual, problem-solving skills.
 - c) Self-management skills.
 - d) Interpersonal skills.
 - e) Emotional skills.
 - f) Spiritual skills.
- 108) ***Independence.***
 - a) Developing self-sufficiency.
 - b) Building an identity.
 - c) Finding values.
 - d) Coping effectively.
- 109) ***Intimacy.***
- 110) ***Direction.***
 - a) Choose occupation.
 - b) Choose marriage partner.

Counseling Young Adults

- 111) Frequently, counselees need reassurance that their problems are common and not evidence of mental illness.
- 112) Need for guidance in the making of decisions.
- 113) Help in choosing a career or forming an identity,
- 114) Support and encouragement during times of turmoil or uncertainty.
- 115) Counsel in resolving interpersonal conflicts or building intimacy.
- 116) Help in dealing with sexual feelings including struggles and fears about homosexuality.

- 117) Assist in coping with stress, anger, feelings of failure, depression, or thoughts of suicide.

Middle Adulthood

Causes of Middle Age Problems

- 118) Deepest anxieties about decline and dying.
119) Time is getting short and important life goals not likely to be reached.
120) Four major categories of change.
- a) Physical.
 - i) Count years from time of retirement or death.
 - ii) Changes in learning and memory.
 - iii) Boredom.
 - iv) Fear.
 - b) Psychological.
 - c) Vocational.
 - d) Marital/family.
 - i) Bored with family routines of middle life.
 - ii) Often decline in intimacy.

Later Adulthood

Causes of Problems in Old Age

- 121) ***Physical causes.***
- a) Cosmetic.
 - b) Sensory.
 - c) System changes.
 - i) Bones become brittle.
 - ii) Rheumatoid arthritis.
 - iii) Osteoporosis.
 - d) Sexual change.
 - e) Disease and illness.
- 122) ***Mental.***
- 123) ***Economic.***
- 124) ***Interpersonal*** - Loss of social contact.
- 125) ***Self-esteem.***
- 126) ***Spiritual and existential.***
- a) Reality and inevitability of death.
 - b) Burden of guilt and sense of failure that don't know how to handle.

; 5. COUNSELING INTERPERSONAL RELATIONS ISSUES

Human beings are social creatures. At the time of creation, God said it was not good for human beings to be alone. He gave Adam a companion, instructed the human race to multiply, and has permitted us to expand into the billions of people who now occupy planet Earth.

1. THE BIBLE AND INTERPERSONAL RELATIONS.
 - 1.1 Book of Proverbs good source of teaching about good relationships between people.
 - 1.2 Sermon on the Mount concerns interpersonal relations.
 - 1.3 Paul warned Timothy not to be quarrelsome, especially over unimportant things.
 - 1.4 Other Bible passages offer instructions to live in harmony, to demonstrate love, and to replace bitterness and wrath with kindness, forgiveness, and tender-hearted actions.
 - 1.5 Good interpersonal relations begin with Jesus Christ.
 - 1.6 Good interpersonal relations depend on personal traits.
 - 1.6.1 For real peace to be felt within or to occur between individuals, there must first be a peace with God.
 - 1.7 Good interpersonal relations involve determination, effort, and skill.
 - 1.7.1 Consistent development and application of skills such as:
 - 1.7.1.1 Listening carefully.
 - 1.7.1.2 Watching.
 - 1.7.1.3 Understanding oneself and others.
 - 1.7.1.4 Refraining from unkind comments or emotional outbursts.
 - 1.7.1.5 Communicating accurately.
 - 1.7.2 Can be taught by a perceptive Christian counselor.
2. THE CAUSES OF PROBLEMS IN INTERPERSONAL RELATIONS.
 - 2.1 ***Satanic involvement.***
 - 2.2 ***Personal attributes, attitudes, and actions.***
 - 2.2.1 A self-centered need to be noticed, to be in control, to have one's own way, or to have money, prestige, and status
 - 2.2.2 A non-forgiving, bitter attitude
 - 2.2.3 A tendency to be hypercritical, judgmental, and angry
 - 2.2.4 An insecurity that involves feelings of threat, fear of rejection, and a reluctance to trust others
 - 2.2.5 Prejudice, often unrecognized or denied
 - 2.2.6 An unwillingness or inability to "open up" and share one's feelings and thoughts

- 2.2.7 A failure or unwillingness to recognize individual differences (this is the erroneous idea that not everybody thinks, feels, and sees situations in a similar way)
- 2.2.8 Unwillingness to forgive, holding grudges, or demands to have one's own way are sinful but can be avoided at will and without counseling assistance
- 2.2.9 Fear of getting close, innate shyness, or a reluctance to trust others may be ingrained attitudes are more difficult to change without help
- 2.2.10 Interpersonal problems more prevalent when difficult people are involved
 - 2.2.10.1 Abrasive personalities who are arrogant, frequently cynical, insensitive, intimidating, and inclined to explode in anger when they don't get their way
 - 2.2.10.2 Complainers who find fault with everything but never do anything about their complaints.
 - 2.2.10.3 Silent, unresponsive individuals who are difficult because they say very little and rarely reveal what they are thinking or doing.
 - 2.2.10.4 Negative personalities who take the pessimistic attitude that whatever you propose won't work.
 - 2.2.10.5 Know-it-all experts tend to be pompous, condescending, verbose, and unwilling to cooperate.
 - 2.2.10.6 Indecisive people who never act or make decisions until they can be absolutely sure that a decision is correct.
- 2.3 ***Communication failure.***
 - 2.3.1 The process of communication hindered if:
 - 2.3.1.1 The sender is unclear in his or her own mind about the message.
 - 2.3.1.2 The sender is afraid, ashamed, deceptive, or otherwise reluctant to send a clear message.
 - 2.3.1.3 The sender does not put the message into clearly understandable words or gestures.
 - 2.3.1.4 The sender says one thing but conveys a different message by behavior.
 - 2.3.1.5 The sender mumbles, yells, or in other ways distorts the message so it is not sent clearly.
 - 2.3.1.6 The sender is afraid, ashamed, unsure, or otherwise reluctant to send a clear message.
 - 2.3.1.7 The receiver is unable to understand the message.
 - 2.3.1.8 The receiver is distracted from listening, or does not want to listen, perhaps because of disinterest, mistrust, fear of being persuaded, or some other reason.
 - 2.3.1.9 The receiver adds his or her interpretation to the message, or misses ideas that are too threatening to hear.

- 2.3.2 When communicators do not know each other, must depend on words and widely understood gestures.
 - 2.3.3 When communicators know each others communicate by facial expression, tone of voice, a half-sentence, or even a grunt.
3. THE EFFECTS OF POOR INTERPERSONAL RELATIONSHIPS.
- 3.1 **Physical.**
 - 3.1.1 Fatigue, tense muscles, headaches, stomach upsets, ulcers.
 - 3.1.2 A variety of other biological reactions develop especially when tensions are denied or kept hidden.
 - 3.2 **Psychological.**
 - 3.2.1 Depressed, guilty, put down, lacking in self-confidence, and anxious.
 - 3.2.2 Anger, bitterness, cynicism, and attempts to dominate, manipulate, or get revenge.
 - 3.3 **Social.** Verbal aggression, violence, withdrawal from others, and the breaking of previous relationships.
 - 3.4 **Spiritual.** In broad sense, all interpersonal tension is a result and reflection of sin.
4. COUNSELING AND INTERPERSONAL RELATIONS.
- 4.1 **Getting along with people involves the development of personal characteristics** such as self-awareness, kindness, concern, sensitivity, and patience.
 - 4.2 **Skills such as the ability to listen, communicate, and understand.**
 - 4.3 **Changing the individual.**
 - 4.3.1 Gently point out personal flaws and self-defeating behaviors.
 - 4.3.2 Try to give specific examples to support your observations and invite the counselee to respond.
 - 4.4 **Modeling good relationships.**
 - 4.4.1 Sometimes confrontation and discussion of painful topics.
 - 4.4.2 Also consistent encouragement.
 - 4.5 **Teaching conflict resolution.**
 - 4.6 **Reconciling differences.**
 - 4.6.1 Take the initiative and go to the person who has wronged you.
 - 4.6.2 Call some witnesses.
 - 4.6.3 Tell it to the church.
 - 4.7 **Teaching communication skills.**
 - 4.8 **Changing the environment.**
5. PREVENTING POOR INTERPERSONAL RELATIONSHIPS.
- 5.1 **The biblical teaching about good relationships.**
 - 5.2 **A daily walk with Jesus Christ** (prayer, meditation of Scripture, confession of sin, and a willingness to seek and obey divine leading.

- 5.3 *A self-examination that leads to the removal, with God's help, of bitterness, cynicism, and other personal attitudes or actions that could stimulate dissension.*
- 5.4 *An understanding of conflict and a practice of those tactics that reduce conflict.*
- 5.5 *The guidelines for effective communication.*
- 5.6 *The reduction, avoidance, or elimination of conflict-producing environmental stress.*

6. COUNSELING VIOLENCE AND ABUSE ISSUES

6. DEFINITIONS.

- 6.1 **Child abuse.** Involves the “physical or mental injury, sexual abuse or exploitation, negligent treatment, or maltreatment of a child under the age of eighteen, by a person who is responsible for the child’s welfare and under circumstances which indicate the child’s health or welfare is harmed or threatened thereby.
- 6.2 **Mate abuse.** Most often has the wife as the victim and includes deliberate physical assault, threats of violence, emotional abuse (including ridicule, demeaning behavior, and neglect), and forced involvement in sexual acts.
- 6.3 **Elder abuse.** The maltreatment of older people and includes rough handling, beating, negligence, verbal condemnation, withholding of food or medication, financial exploitation, sexual mistreatment, and ignoring the person’s needs for comfort and human contact.
- 6.4 **Sexual abuse.** May overlap with any of the above and includes exhibitionism, forced intercourse or other sexual behavior which the victim resists, or fondling the sex organs of a minor or other person who is naive or powerless to resist.
- 6.5 **Other.** Use of children in the production of pornography, rape, criminal violence, physical assault of students by teachers, sexual exploitation of counselees by their counselors, harassment of neighbors by juveniles, the physical and emotional exploitation of employees by their employers, and most other behavior where one human being deliberately inflicts physical and emotional pain in an effort to harm a helpless and unwilling victim.

7. THE BIBLE AND ABUSE.

- 7.1 No where does the Bible sanction or approve of child, mate, elder, or sexual abuse. Jesus not only condemned murder but the harboring of angry thoughts toward another person. “Do not judge.”
- 7.2 In Colossians, husbands are told to love their wives and not be harsh with them.
- 7.3 Fathers are instructed to “not embitter your children, or they will become discouraged.”
- 7.4 Employers are instructed to provide “what is fair and right.”
- 7.5 Believers are told to get rid of all bitterness, rage, anger, brawling, slander, malice. Instead we are to be kind and compassionate to one another; forgiving each other.
- 7.6 There is to be “no hint of sexual immorality, or of any kind of impurity, or of greed, because these are improper for God’s holy people.
- 7.7 In time, and with God’s help, people can learn to love their persecutors, pray for their enemies, forgive their abusers, and trust God for inner peace in the midst of difficult life situations.

8. THE CAUSES OF ABUSE.

- 8.1 **Environmental stress.** Whenever people get really frustrated, a common reaction is to respond to these feelings by verbally or physically lashing out at some other person or object.
 - 8.1.1 It is easy for a parent to get frustrated with crying, whining children and to wish there was some way to “shut up that kid.”
 - 8.1.2 It is easy to get frustrated at elderly relatives who get increasingly dependent.
 - 8.1.3 Stress in the life of an abuser is never an excuse for violence, even if the victim creates the stress.
- 8.2 **Learned abuse.** Children who are abused or who observe violence in their parents, often become abusers in later life. One study of elder abuse found that one in four hundred children who are reared nonviolently attack their parents in later life, compared to one in two children who are abused by their parents.
- 8.3 **Personal insecurity.** Studies often show that abusers are people who feel insecure, impulsive, and threatened. Some child batterers feel inadequate as parents, so they attempt to manage their offspring with violence. There can also be ongoing power struggles between the abuser and the victim.

9. THE EFFECTS OF ABUSE.

- 9.1 **Feelings.** Victims often feel angry, afraid, ashamed, guilty, embarrassed, confused, and worthless. Many victims report feeling violated, dirty, vulnerable, and afraid to trust others. Depression is common and sometimes there is self-pity and self-blame.
- 9.2 **Thinking.** People who have been abused often have low self-concepts and think of themselves as being unattractive, incompetent, inadequate, dependent, and unwanted by others. Often victims have low morale and impaired concentration.
- 9.3 **Actions.** Abuse sometimes leads victims to develop antisocial behavior, learning disabilities, interpersonal tensions, inefficiency at work, and a tendency to become violent and abusive themselves.

10. COUNSELING AND ABUSE.

- 10.1 **It can be very difficult counseling with victims of abuse.** A perusal of the counseling literature could indicate that counseling with abuse victims has not yet proven to be particularly effective, and the challenge is complicated further by the fact that each victim or abuser is unique and needs to be treated somewhat differently from the others.
 - 10.1.1 At times the counselor may have difficulty knowing if they should believe the reports of abuse that come from young children or old people.
 - 10.1.2 At other times we may suspect abuse but wonder what to do if the counselee denies it.
 - 10.1.3 Female counselees are often too ashamed or embarrassed to talk with a male about abusive sexual experiences.

11. HELPING CHILDREN OF ABUSE.

- 11.1** *Children rarely report sexual or physical abuse*, sometimes because they don't know who to tell. Often they have been threatened with further harm if they talk to anyone about the abuse.
- 11.2** *You can suspect abuse or neglect by observing several of the following:*
 - 11.2.1** The child seems unduly fearful, especially of parents.
 - 11.2.2** The child is poorly groomed or inappropriately dressed for the weather.
 - 11.2.3** The child appears undernourished or inappropriately fed.
 - 11.2.4** The child's injuries or sicknesses are inappropriately treated in terms of bandages or medication.
 - 11.2.5** The child is withdrawn and depressed or overactive and aggressive.
 - 11.2.6** The child seems disinterested, unable to concentrate, inclined to cling to adults other than the parents or unable to get along with other children.
 - 11.2.7** The parents are rigid, highly demanding of their children and inclined to punish harshly.
 - 11.2.8** The parents have experienced multiple stresses such as marital discord, divorce, debt, frequent moves, job loss, or other pressures.
- 11.3** *Sometimes there will be inappropriate behavior such as aggression, altered sleep patterns, or inappropriate sexual behavior.*
- 11.4** *It is true that children have vivid imaginations* and sometimes make up stories, but young children do not have the capacity to fantasize about something that they haven't experienced. Listen carefully if they give hints about abuse; if you can, ask them to describe what they mean in more detail.
- 11.5** *Remember that abusers often demand that their young victims keep the abuse secret.*
- 11.6** *The child of any age faces an unbelieving audience when she complains of ongoing incest.*
- 11.7** *Child abuse, including incest, is an issues that involves the whole family.* Most counselors try to involve the entire family into the counseling process, especially when the abuse occurs within the home.

12. HELPING THE ADULT VICTIMS OF INCEST AND ABUSE.

- 12.1** If you suspect abuse in a counselee, do not hesitate to raise the issue gently. Mention that the problem is common, that victims do not deserve the abuse, and that people can get over their feelings of shame and hurt.
- 12.2** Often the gentle, caring, nonjudgmental encouragement of a sensitive counselor is all the counselee needs to break a long-guarded secret and to deal with the bottled-up feelings and questions about abuse.

13. HELPING THE ABUSER.

- 13.1** When confronted with their violent actions, many abusers deny what they have done, excuse their actions, or try to shift the blame onto the victim or somebody else. The reality of fines, imprisonment, and social disgrace makes denial less possible and forces at least first-time abusers to get serious about counseling.
- 13.2** Counseling abusers is often a long-term process dealing with the counselee's anger, low self-esteem, and lack of self-control. Many lack communication, problem-solving, conflict-resolution, and stress-management skills.
- 13.3** Since many victimizers were earlier victims of abuse, it often is important to deal with attitudes and insecurities that have built up over a lifetime. Some abusive counsees have never learned how to express their feelings in nonviolent, socially appropriate ways.
- 13.4** Some are entrenched in erroneous beliefs--like the myths that victims enjoy the battering; that victims encourage it; or that violence is the macho way to assert authority. All of these attitudes must be challenged and changed if abuse is to cease.
- 13.5** Many reports stress the value of group treatment. By meeting with other abusers, the counselee sees people who understand because they have similar problems. As they interact in the group, counsees can learn to express feelings in ways that are nonviolent, can feel acceptance and support, and can be helped to develop needed communication, stress-management, and social skills.
- 13.6** Abusers also need to understand forgiveness, including the ability to forgive themselves. They need to see that abuse is not an unpardonable sin.

7. COUNSELING IDENTITY ISSUES

“How to Develop a Good Self-image”

14. **LOVE THY NEIGHBOR AS THYSELF.**
 - 14.1 (Mat 22:39 KJV) And the second is like unto it, Thou shalt love thy neighbour as thyself.
 - 14.2 (Mark 12:31 KJV) And the second is like, namely this, Thou shalt love thy neighbour as thyself. There is none other commandment greater than these.
 - 14.3 (Rom 13:9 KJV) For this, Thou shalt not commit adultery, Thou shalt not kill, Thou shalt not steal, Thou shalt not bear false witness, Thou shalt not covet; and if there be any other commandment, it is briefly comprehended in this saying, namely, Thou shalt love thy neighbour as thyself.
 - 14.4 (Gal 5:14 KJV) For all the law is fulfilled in one word, even in this; Thou shalt love thy neighbour as thyself.
 - 14.5 (James 2:8 KJV) If ye fulfil the royal law according to the scripture, Thou shalt love thy neighbour as thyself, ye do well:

15. **WHAT DO YOU THINK OF YOURSELF?**
 - 15.1 *What is your concept of yourself?*
 - 15.2 *How do you value yourself?*
 - 15.3 *Do you love yourself?*
 - 15.4 *Do you like yourself?*
 - 15.5 *We need to see ourselves as God sees us.*
 - 15.5.1 He sees us as someone of worth.
 - 15.5.2 He sees us as someone who is worth sending His son Jesus to die for.

16. **DEFINITIONS.**
 - 16.1 *Self-image and self-concept.* How you described yourself in terms of your character traits, strengths, thoughts, attitudes, and feelings.
 - 16.2 *Self-esteem.* Your personal evaluation of your worth, competence, and significance.
 - 16.2.1 If you don't like yourself, you probably don't think others like you.
 - 16.2.2 If you hate yourself, you probably can't love others properly.

17. **WHAT ABOUT SELF-LOVE?**
 - 17.1 *Some Christians are critical of “self-esteem,” “self-love,” and “self-image.”*
 - 17.2 *David Carlson's definition of self-love.*
 - 17.2.1 Accepting myself as a child of God who is lovable, valuable, and capable.
 - 17.2.2 Being willing to give up considering myself the center of the world.

- 17.2.3 Recognizing my need of God's forgiveness and redemption.
- 17.3 *Robert Schuller's definition of self-esteem.*
 - 17.3.1 Comes when a person realizes that Christ, who died an atoning death for me, comes to live in me through the Holy Spirit.

17.3.2 Self-esteem can be seen as "the sense of value that comes to me when I have been restored to a relationship with God as the Heavenly Father, and I have the assurance that I am worth a lot. Christ died on the cross for me. If he thinks that much of me, I had better start thinking something good about myself.

18. THREE ESSENTIAL COMPONENTS OF A HEALTHY SELF-IMAGE.

- 18.1 *A sense of belongingness--of being loved.*
- 18.2 *A sense of worth and value--inner belief and feeling.*
 - 18.2.1 I count.
 - 18.2.2 I am of value.
 - 18.2.3 I have something to offer.
- 18.3 *A sense of being competent.*

19. THE EFFECTS OF INFERIORITY AND LOW SELF-ESTEEM.

- 19.1 *People with feelings of inferiority may:*
 - 19.1.1 Feel isolated and unlovable.
 - 19.1.2 Feel too weak to overcome their deficiencies and lack the drive or motivation to defend themselves.
 - 19.1.3 Be angry, but afraid of angering others or drawing attention to themselves.
 - 19.1.4 Have difficulty getting along with others.
 - 19.1.5 Be submissive, dependent, and so sensitive that their feelings are hurt easily.
 - 19.1.6 Be less inclined to disclose themselves to others for fear of rejection.
- 19.2 *Lowered self-esteem and inferiority also may contribute to:*
 - 19.2.1 A lack of inner peace and security.
 - 19.2.2 Low self-confidence.
 - 19.2.3 Social withdrawal.
 - 19.2.4 Jealousy and criticism of others.
 - 19.2.5 Interpersonal conflict.
 - 19.2.6 Self-criticism, self-hatred, and self-rejection.
 - 19.2.7 Depression.
 - 19.2.8 A drive to gain power, superiority, or control over others.
 - 19.2.9 A tendency to be complaining, argumentative, intolerant, hypersensitive, and u
 - 19.2.10 An inability to accept compliments or expressions of love.
 - 19.2.11 An inclination to be a poor listener or a poor loser.

20. WHAT DOES THE BIBLE TEACH?

- 20.1 *Human Worth.*
 - 20.1.1 We are valuable in God’s sight.
 - 20.1.2 We were created in the likeness of God with intellectual abilities, the capacity to communicate, the freedom to make choices, a knowledge of right and wrong, and the responsibility to administer and rule over the rest of creation.
 - 20.1.3 He has sent angels to guard us, the Holy Spirit to guide us, and the Scriptures to teach us that we are the salt of the earth and the light of the world.
- 20.2 *The Biblical Teaching about Pride.*
 - 20.2.1 Christians who emphasize human depravity argue that self-esteem is a form of pride.
 - 20.2.2 Pride is characterized by an exaggerated desire to win the notice or praise of others. It is an arrogant, haughty estimation of oneself in relation to others. It involves the taking of a superior position that largely disregards the concerns, opinions, and desires of other people.
 - 20.2.3 Humility is characterized by “accurate self-appraisal, responsiveness to the opinions of others, and a willingness to give praise to others before claiming it for one’s self.
 - 20.2.4 The humble person accepts his or her imperfections, sins, and failures, but also acknowledges the gifts, abilities, and achievements that have come from God.
 - 20.2.4.1 Humility is not a self-negation or rejection of God-given strengths and abilities.
 - 20.2.4.2 Humility involves a grateful dependence of God and a realistic appraisal of both our strengths and weaknesses.
- 20.3 *The Biblical Teaching about Self-Love.*
 - 20.3.1 Self-love not equated with an attitude of superiority, stubborn self-will, or self-centered pride.
 - 20.3.2 Self-love is not an erotic or ecstatic self-adoration.
 - 20.3.3 Self-love means to see ourselves as sinners who have been saved by grace, people who are created, valued, and loved by God, gifted members of the body of Christ.
 - 20.3.4 We can love ourselves because God loves us, and we do not deny the abilities and opportunities that God has given.
- 20.4 *Misconceptions.*
 - 20.4.1 Self-worth not same as self-worship.
 - 20.4.2 Self-love not same as selfishness.
 - 20.4.3 Self-affirmation is different from self-conceit (we can be aware of ourselves without being absorbed in ourselves.
 - 20.4.4 Self-denial is not the same as self-denigration.
 - 20.4.5 Putting off the sinful nature is not the same as putting yourself down.

20.4.6 Humility is not the same as humiliation.

20.4.7 Being unworthy is not the same as being worthless.

20.5 *We have a positive self-esteem, not because of human works and human nature but because of God's grace and divine redemption.*

20.6

The Causes of Inferiority and Low Self-Esteem

- 1** Faulty Theology.
- 2** Sin and Guilt.
- 3** Past Experience.
- 4** Parent-Child Relationships.
- 5** Unrealistic Expectations.
- 6** Faulty thinking.
- 7** Community Influences.

Counseling People with Inferiority Feelings and Low Self-Esteem

- 8** Give Genuine Support, Acceptance, and Approval.
- 9** Seek to Develop Understanding.
- 10** Share the Biblical Perspective of Self-Esteem.
- 11** Encourage Self-Disclosure and a Realistic Self-Evaluation.
- 12** Stimulate a Reexamination of Experiences, Goals, and Priorities.
- 13** Teach New Skills.
- 14** Help Counsees Avoid Destructive Tendencies.
- 15** Stimulate Group Support.
- 16** Teach Counsees to Deal with Sin.

8 . COUNSELING ISSUES OF GRIEF

DEFINITION

Grief is a normal response to the loss of any significant person, object, or opportunity. It is an experience of deprivation and anxiety that can show itself in one's behavior, emotions, thinking, physiology, interpersonal relationships, and spirituality.

Any loss can bring grief: divorce, retirement from a job, amputation, the departure of a child to college or of a pastor to some other church, moving from a friendly neighborhood, selling one's car, losing a home or valued possession, the death of a pet or plant, loss of a contest or athletic game, health failures, and even the loss of one's youthful appearance, confidence, or enthusiasm.

Doubts, the loss of one's faith, the waning of one's spiritual vitality, or the inability to find meaning in life can all produce sadness and emptiness that indicate grief.

Most discussions of grief concern losses that come when a loved one or other meaningful person has died.

THE BIBLE AND GRIEF.

- 1. Jacob mourning over the loss of Joseph and refusing to be comforted.**
- 2. David grieving over the anticipated loss of his infant son and the death in battle of his grown son Absalom.**
- 3. Jeremiah lamenting the death of King Josiah.**
- 4. Christ has changed the meaning of grieving.**
 - 4.1 For Christian, death not end of existence; it is the beginning of life.**
 - 4.2 Does not eliminate the pain of grief and need for solace.**
- 5. Christ has demonstrated the importance of grieving.**
 - 5.1 Blessed are those who mourn, for they will be comforted.**
 - 5.2 When Lazarus died, Jesus was troubled and deeply moved.**
 - 5.3 He withdrew by himself (perhaps to grieve) when he learned that John the Baptist had been executed.**
 - 5.4 In the Garden of Gethsemane, Jesus was deeply grieved.**
 - 5.5 For Christian grief is normal and healthy.**
 - 5.6 Can also be pathological and unhealthy.**

THE CAUSE OF GRIEF

- 6. Grief arises because something or someone of value has been lost and the griever is faced with he emptiness and difficult task of readjusting.**

7. According to William Worden, the griever encounter four difficult and time-consuming tasks.
 - 7.1 To accept the reality of loss.
 - 7.2 To feel and consciously admit the pain of the loss.
 - 7.3 To adjust to an environment in which the deceased person is missing.
 - 7.4 To form new relationships.
8. Studies of widows show that most need at least three or four years to reach stability in their lives.
9. Normal grief usually involves intense sorrow, pain, loneliness, anger, depression, physical symptoms, and changes in interpersonal relationships.
 - 9.1 Often there is denial, fantasy, restlessness, disorganization, inefficiency, irritability, a desire to talk considerably about the deceased, and unconscious adoption of the lost person's mannerisms, and a feeling that life no longer has meaning.
 - 9.2 Though the mourner may never recover completely from the loss, most people eventually return to a state of productivity and the restoration of mental and physical well-being.
10. At times, grief is abnormal, pathological, and complicated.
 - 10.1 Intensified, delayed, prolonged, denied, or otherwise deviating from the more normal expressions of sorrow.
 - 10.2 It is grief that keeps the mourner in bondage to the deceased person and prevents one from coping and moving on with life.
 - 10.3 May be deep feelings of dejection, lack of interest in the outside world, a diminished capacity to love, withdrawal, and greatly lowered self-esteem.
 - 10.4 For some there is hyperactivity, a giving-up attitude of helplessness and hopelessness, intense guilt, a strong self-condemnation, extreme social withdrawal or moodiness, impulsivity, antisocial behavior, excessive drinking, and veiled threats of self-destruction.
11. Why some grief normal while other is pathological?
 - 11.1 Prior anticipation.
 - 11.2 Type of loss.
 - 11.2.1 Father, mother, spouse, or child.
 - 11.2.2 The intensity of grief is determined by the intensity of love.
 - 11.2.3 Grief more intense if the griever was very dependent on deceased.
 - 11.3 Beliefs.
 - 11.4 Background and personality.
 - 11.4.1 Best predictor of future behavior is past behavior.
 - 11.4.2 Handling grief may also be more difficult for people who are insecure, dependent, anxious, unable to control or express feelings, prone to depression, or living under stress.
 - 11.4.3 Some may prolong grieving because of the attention.

11.5 Social environment.

11.5.1 In America, emotional expressions are discouraged and grief is viewed as something that, while inevitable, should end as quickly as possible.

11.5.2 Have encouraged ourselves and one another to deny death and to respond to the bereavement of others with little more than cards, cut flowers, or casseroles.

11.6 Circumstances accompanying death.

11.6.1 Death untimely.

11.6.2 Mode of death incomprehensible, senseless, or tragic.

11.6.3 Survivor feels sense of guilt because he or she participated in the event that caused the death.

11.6.4 Extreme dependency on the lost person.

11.6.5 Intimate relationship with deceased.

11.6.6 Mourner's circumstances disallow the expression of grief

11.6.7 Dead person extracted promise that survivor would never grieve, be sad, remarry, or move.

11.6.8 Excessive attachment and proximity to the deceased person's possessions.

11.6.9 Griever believes that Christians should rejoice and never grieve.

THE EFFECTS OF GRIEF.

12. Periods or stages of grieve.

12.1 Period of shock, numbness, denial, intense crying, sometimes collapse.

12.2 Moves into prolonged period of sorrow, restlessness, apathy, memories of the past, loneliness, and sleep disturbances.

12.3 Then comes a slow waning of the grief symptoms and a resumption of normal life activities.

13. Effects of grief.

13.1 Physical effects.

13.1.1 Several studies show that grief hinders the body's immune system so that viruses and other disease-causing organisms are more difficult to resist, especially during the first six months of mourning.

13.1.2 The death rate increases significantly during the first few years of widowhood and there are marked increases in congestive heart failure, high blood pressure, strokes, and cancer.

13.1.3 Grief can put a lot of stress on the body at a time when people are least able to resist the onslaught of illness.

13.1.4 Stress can lead to exhaustion, weakness, headaches, indigestion, shortness of breath, loss of appetite, and inability to sleep.

13.2 Emotional-cognitive effects.

- 13.2.1 Grief affects both how person feels and thinks.
- 13.2.2 Depression is common.
- 13.2.3 Often there are feelings of anxiety, inner emptiness, guilt, anger, irritability, withdrawal from others, forgetfulness, declining interest in sex, dreams about the deceased, nightmares, errors in judgment, and feelings of loneliness.
- 13.2.4 For many, loss of zest, disorganization of routines.
- 13.2.5 Complication of activities that must be taken care of related to the death.
- 13.2.6 As the months pass symptoms of grief tend to fade, but sometimes they come back with renewed intensity when they are least expected.
- 13.2.7 Survivors experience anniversary reactions.
- 13.2.8 If continue for several years there may still be uncompleted or pathological mourning.
- 13.3 Social effects.
- 13.4 Pathological effects.
 - 13.4.1 Pathological grief reactions occur when grief is denied, delayed, never ending, or distorted so there is intense fear, guilt, helplessness, withdrawal, or other evidences of pathology.
 - 13.4.2 When grief pathological, survivor may show several of the following behaviors.
 - 13.4.2)1 Unwillingness to talk about the deceased.
 - 13.4.2)2 Tendency to talk of deceased in present tense.
 - 13.4.2)3 Open or subtle threats of self-destruction.
 - 13.4.2)4 Persisting and deep depression, often accompanied by guilt and low self-esteem.
 - 13.4.2)5 Antisocial behavior.
 - 13.4.2)6 Excessive hostility, moodiness, or guilt.
 - 13.4.2)7 Excessive drinking or drug abuse.
 - 13.4.2)8 Withdrawal and refusal to interact with others.
 - 13.4.2)9 Impulsivity.
 - 13.4.2)10 Persisting psychosomatic illnesses.
 - 13.4.2)11 Veneration of objects that remind one of the deceased.
 - 13.4.2)12 Refusal to change the deceased person's room or to dispose of his clothing.
 - 13.4.2)13 Resistance to offers of counseling or other help.
 - 13.4.2)14 Stoic refusal to show emotion or to appear affected by loss.
 - 13.4.2)15 A happy, almost euphoric attitude (sometimes explained as rejoicing in the Lord).
 - 13.4.2)16 Intense busyness and unusual hyperactivity.
 - 13.4.3 Most intense grieving will be completed within a year or two--if longer, strong clue there is pathological grieving.

COUNSELING AND GRIEF.

14. **Counseling and normal grief.**
 - 14.1 **Encourage discussions about death before it occurs.**
 - 14.2 **Be present and available.**
 - 14.3 **Make it known that expressing feelings is good and acceptable, but do not pressure the griever to show feelings.**
 - 14.4 **Do not be surprised at outpourings of crying, frustration, or withdrawal--let be known you are available and accepting.**
 - 14.5 **Be a careful listener.**
 - 14.6 **Try not to push.**
 - 14.7 **Help the grieving person make decisions and gently try to discourage making major decisions at least until a few month have passed.**
 - 14.8 **Gently challenge pathological or irrational conclusions, then give the grieving person o**
 - 14.9 **Provide practical help like meal preparation or baby sitting.**
 - 14.10 **Do not discourage grieving rituals.**
 - 14.11 **Pray for the bereaved and comfort them with scripture without preaching or using religious cliches as a means for stifling the expression of grief.**
15. **Counseling and pathological grief.**
 - 15.1 **Encourage discussion of counselee's relationship with the deceased.**
 - 15.2 **Encourage the expression of feelings and attitudes.**
 - 15.2.1 **Avoid cliches, exhortations, and insensitive quoting of Bible verses.**
 - 15.2.2 **If emotions not extreme give reassurance that these are natural and a part of the healing process.**
 - 15.3 **Help counselees understand grief process.**
 - 15.4 **Encourage talk about the future.**
 - 15.4.1 **Gently challenge irrational thoughts or plans that appear to be unrealistic or made in haste.**
 - 15.4.2 **Look for opportunities to encourage discussion of practical issues.**
 - 15.4.2)1 **Raising children.**
 - 15.4.2)2 **Meeting financial needs.**
 - 15.4.2)3 **Dealing with loneliness and sexual frustrations.**
 - 15.4.3 **Remember goal is to help counselees avoid denial and deal instead with the reality of the loss.**
16. **Counseling when children grieve.**
 - 16.1 **Children often interpret death, especially the death of a parent as a form of rejection.**
 - 16.2 **When sibling dies there often is guilt, confusion, feelings of isolation, and fear that "I may be next."**
 - 16.3 **Children are sensitive to any signs of adult insecurity and need to know that they will n**

17. Counseling when children die.

17.1 Often grief leads to tension, parental conflict, and miscommunication in the home.

17.2 Focus on the marriage and how the couple's relationship is surviving throughout the grief process.

17.3 Those who have lost children must be helped to express feelings, accept the loss, and le

9. COUNSELING FAMILY ISSUES

Biblical teaching on children and parental guidance can be divided into two categories: comments about children and comments about parents and parenting.

18. **Children.** In the Bible, children are seen as gifts from God that can bring both joy and sorrow. Young people are to be loved, honored, and respected as persons; they are important in God's kingdom and they are not to be harmed. Children are also given responsibilities: to honor and respect parents, care for them, listen to them and be obedient. Children are expected to obey forever; adults who leave their parents and cleave to a spouse are never freed from the responsibility of honoring older parents.
19. **Parents.** Mothers and fathers have a responsibility to model mature Christian behavior, to love their children, to care for their needs, to teach the young, and to discipline fairly. We are not to exasperate them. One write says that we exasperate children when we abuse them physically, abuse them psychologically (by humiliating them and failing to treat them with respect), neglect them, don't try to understand them, expect too much from them, withhold love unless they perform, force them to accept our goals or ideas, and refuse to admit our mistakes.

Christian parenting involves the following:

20. *Listening.* The good parent wants to hear God's commandments and to understand them so well that these become a part of one's being.
21. *Obeying.* Parents must obey the commandments of the Lord. When parents show no desire to obey God, their children are less inclined to obey parents.
22. *Loving.* We are to love the Lord with all our hearts. Parents exist first as individuals who love and serve God.
23. *Teaching.*
 - 23.1 Diligently.
 - 23.2 Repeatedly. Teaching is not a one-time effort. It must be repeated.
 - 23.3 Naturally. Daily family devotions are valuable, but parents are to teach whenever the opportunity arises.
 - 23.4 Personally. What one says is rarely as influential as what one does. The most significant teaching and child rearing occurs at home.

Causes of Child-Rearing Problems

24. *Neglect or abuse of the spiritual.* According to Ps. 78:1-8, children should receive spiritual instruction so they will put their faith in God, remember his faithfulness, and not become unruly, stubborn, or rebellious.

25. ***Instability in the home.*** When parents cannot cope with their stresses or when they do not get along with each other, children can feel anxious, guilty, and angry. They are anxious because the stability of the home is threatened; guilty because they suspect that they may have caused the strife; and angry because they often feel left out. Sometimes there is a fear of being abandoned. Counselors sometimes uses the term “throwaway kids” to describe children who are victims of parental instability. Instability in the home can lead to a variety of behavioral problems in children. Falling grades, conflict with other children, or petty crimes. Unstable homes tend to produce unstable children.
26. ***Psychological abuse.*** This type of abuse receives less attention than physical abuse. Children are abused psychologically when they are rejected subtly or overtly, nagged and criticized excessively, punished unrealistically (or not at all), disciplined inconsistently, humiliated persistently, shown love spasmodically, or threatened periodically with abandonment. Such children often experience personal problems or show disruptive behaviors that in turn are annoying to parents. Psychological abuse is not always deliberate. It may be the result of frustrated parents who do not know how to deal with certain child behaviors. Such parents need encouragement and guidance so psychological abuse can be prevented.
27. ***Unmet needs.*** There are the common needs of security, acceptance, discipline, and encouragement. Special children have special needs. All need love.
28. ***Physical influences.*** The stress of serious illness often leads to intense anxiety, negativism, withdrawal, resentment of parents, fear, and other psychological reactions.
29. ***Attention Deficit Disorder*** leads to inability to concentrate or pay attention, distractibility, impulsivity, impatience, inability to relax, hyperactivity, disorganization, mood swings, feelings of low self-confidence, difficulty in getting along with peers, sleep disorders, and anxiety. Frustrated teachers and parents often urge these children to settle down and to stop being so “fidgety,” but for many this is physiologically impossible.
30. ***Other influences.*** These include traumatic early experiences (such as accidents, a serious fire in the home, or a near drowning), peer rejection, the serious illness or death of a significant person, and the frustration of failure. These can lead to problems later in life.

Counseling and Child-Rearing Problems

Christian counselors have three responsibilities in working with the problems of children: counseling the children, counseling the parents, and making referrals.

31. ***Counseling Children.***

Children often can not or simply do not communicate as freely as adults. In such cases, a counselor uses techniques which may include observing children at home, asking them to make up stories, watch as the young people play with doll families, draw pictures, model with clay, or play house. These techniques along with certain psychological tests are used by child specialists to build rapport, elicit information, uncover childhood problems, and provide opportunity for giving help. Sometimes, children are spontaneous and share their worries and concerns openly. At times, it is helpful to ask questions about what makes the child happy or unhappy, what is scary, what is the funniest or saddest thing he or she can think of, what the child would ask for if he or she had three wishes, or similar questions that have potentially revealing answers.

The goals of child counseling depend on the stated and identified problems, yet counselors seek to reduce irrational fears and disturbing behavior, resolve conflicts, increase the child's ability to express feelings, improve interpersonal relationships at home or school, and teach skills. Counseling may involve instruction, play therapy, skills training, the demonstration of kindness and respect, and the giving or withholding of reinforcement.

Children need to be treated with sensitivity, empathy, warmth, consideration, and a respect that does not treat them with disdain or convey a smug adult superiority. Children respond to love and firmness.

32. *Counseling parents.* When counseling children it is important to see parents since your counseling can be undermined quickly by uncooperative or uninformed parents. Sometimes helping the entire family to function better may be the best way to help the child.

32.1 General Issues.

Appreciate the parents' position. It doesn't help to blame, criticize, or demean the parents with whom you counsel. Try to discourage parents from condemning each other for the child's problems. Attempt to understand the parents' perspectives and express your desire to work together in helping the parents help their children.

Use various approaches. Some need simple information or a clearer understanding of the situation. Others may need advice, cautioning, support, encouragement, and/or suggestions for dealing with problems.

Be sensitive to parental needs.

Be aware of family dynamics. Whenever a child (or adult) has a problem, it is assumed that the whole family is dysfunctional in some way, and the whole family comes for treatment.

Model the parental role. The counselor can model communication skills, a willingness to understand, and sometimes a kind firmness.

32.2 Theological Issues. What was written to the church would apply to the family; for the family is really the Church in miniature. Issues that concern the church (evangelism, Christian education, the teaching of moral standards and compassion, helping young people learn about the meaning of life and death) are issues that parents must also face in raising their children.

32.3 Psychological Issues.

There is the need for understanding. Help the parents to think of the world and family from the child's perspective. Remind parents that children have feelings and the need for significance, security, acceptance, love, praise, discipline, and faith in God. It can help to discuss specific examples of conflict or misunderstanding. What happened? Why? How could the situation have been handled better?

Families should be helped with communication. The family should establish a time for communication, perhaps over dinner. Children should know that their opinions, gripes and experiences are of interest to their parents and the parents should show a willingness to listen. Parents can also share their ideas, experiences, frustrations, and dreams.

Behavior management is of concern to many parents. Punishment tends to lose its effectiveness if it is repeated too often, and it rarely brings permanent change. More efficient is the rewarding of desired behavior and the nonrewarding of undesired behavior. Behavioral principles appear to work best when there is general stability in the family and a high level of involvement between the father and the children.

Much of your counseling will involve teaching parents how to be more skillful and effective in their child rearing. Sometimes parents need encouragement, perhaps mixed with a little humor.

32.4 Special Problem Issues. Parents often express concern over special problems such as autism, bed wetting, stuttering, school phobia, aggressive behavior, excessive nightmares, intense fears, or reactions to traumas such as accidents, deaths, or hospitalization. Many of these problems are transitory and often they are evidences of anxiety.

32.5 The Issue of Disturbed Parents. Sometimes children's problems stem from parental problems. When these parents are helped to deal with their own hang-ups and insecurities, children often improve spontaneously as a result.

32.6 Counseling Referrals. Counselors who primarily counsel adults might want to refer child counseling to those who specialize in such. Also, referrals may be made when parental problems are involved.

10. COUNSELING PREMARITAL AND MARITAL ISSUES

The biblical standard for marriage is found in Gen. 2:24, where a man “will leave his father and mother and be united to his wife, and they will become one flesh.” Three verbs in the verse indicate three purposes of marriage: “leaving,” “being united,” and “becoming one.” Marriage problems often arise because a husband and wife have deviated from the biblical standard. Some of the ways in which people deviate from these biblical standards for marriage:

33. ***Faulty Communications.*** Faulty communications probably is the most commonly mentioned cause of marital discord. Communication involves the sending and receiving of messages. Messages are sent verbally and nonverbally. When the verbal and the nonverbal contradict, a double message is sent. This leads to confusion and communication breakdown. Good communication also demands that the message sent is the same as the message that is received.
34. ***Underintegrated and Overintegrated Relationships.*** In underintegrated marriage, the husband and wife appear to grow apart over the years. There is little willingness to share confidences, to be vulnerable, or to develop mutual life goals. Overintegrated marriage occurs when a relationship has become so engulfing that both partners have lost their identities and feel trapped. Both partners blame the other for their problems and neither is able to stand back, look at individual needs, and evaluate one’s own faults that may be contributing to the tension.
35. ***Interpersonal Tension.*** Often there is tension that frequently centers on one of the following issues.
 - 35.1 **Sex.** These include lack of accurate knowledge, unrealistic expectations, fear of not being able to perform adequately, differences in sexual drive, inhibiting attitudes about sex, and insufficient opportunities for privacy.
 - 35.2 **Roles.** Often this tension centers on the nature and extent of the wife’s work or career goals.
 - 35.3 **Inflexibility.**
 - 35.4 **Religion.**
 - 35.5 **Values.** What is really important in life? What are our goals?
 - 35.6 **Conflicting Needs and Personality Differences.** When one spouse is open but the other spouse tends to hold things in, these differences can create problems. One research showed that impulsivity in the husband, frequently led to marital instability, distress, and divorce. Often these traits were noticed (and ignored) at the time of engagement, but they led to misery in the years that followed.
 - 35.7 **Money.** How are the family finances to be earned? Who controls the money? How is it to be spent? How much should be given to the church? What happens when there is a shortage of money?

36. ***External Pressures.*** Sometimes marital tensions appear or are made worse because of the pressure that comes from other people or from stressful situations.
- 36.1 In-laws who criticize or otherwise make demands on the couple.
 - 36.2 Children whose needs and presence often interfere with the depth and frequency of husband-wife contacts.
 - 36.3 Friends, including opposite sex friends, who make time demands on the couple.
 - 36.4 Crises that disrupt family stability and create stress for all who are involved.
 - 36.5 Vocational and career demands that put pressure on the husband and/or wife, create fatigue, and take time from the marriage.
 - 36.6 Financial reverses that put pressure on the family budget and lead to worry and sometimes disagreements about spending patterns.
37. ***Boredom.*** As the years go by, husbands and wives settle into routines, get accustomed to each other, and sometimes slip into self-absorption, self-satisfaction, or self-pity. When marriage is dull and routine, couples sometimes begin to look elsewhere for variety and challenge. This in turn creates further marital tension.

Counseling

38. ***Assess the Marriage.*** Why has the couple come for help? The stated problem may not be the only or the major source of difficulty. Counselees can be asked how they feel about each problem, how they have tried to solve the problems in the past, what has worked, and what has not.
39. ***Determine Counseling Goals.***
- 39.1 Recognize and formulate counselor goals.
 - 39.1.1 Identifying and understanding the specific issues that are creating the marital problems.
 - 39.1.2 Teaching the couple how to communicate constructively.
 - 39.1.3 Teaching problem-solving and decision-making techniques.
 - 39.1.4 Helping the couple to express their frustrations, disappointments, and desires for the future.
 - 39.1.5 Keeping the husband and wife together.
 - 39.1.6 Instilling hope.
 - 39.1.7 Teaching the couple how to build a marriage based on biblical principles.
 - 39.2 Determining Counselee Goals.
 - 39.3 Setting mutually acceptable goals.

PREMARITAL COUNSELING

Unlike other issues covered, premarital counseling is preventive in nature. It focuses on education and information. It is less concerned about healing wounds that exist than about building a union that will survive future attacks. Most people are enthusiastic about preventive counseling because they don't think problems will ever affect them. When a couple resists premarital counseling, it seems unlikely that they would seek counseling at the first sign of marital difficulty.

Reasons for Premarital Counseling

40. *Unrealistic Expectations that Can Lead to Disillusionment.* Most people who approach marriage think they have a unique relationship. They don't believe their marriage would be destroyed by the pressures that lead others to the divorce court. Premarital counseling lets couples express, discuss, and realistically modify their expectations for marriage. Conflicting expectations can be seen and hopefully resolved.
41. *Personal Immaturity that Can Lead to Insensitivity.* If one or both of the participants are self-centered, hypercritical, impatient, competitive, or striving for status before marriage, these traits will put a strain on marital stability later. People who are irresponsible before marriage tend to be irresponsible after the wedding. Premarital counseling should seek to uncover and discuss the self-centered tendencies that put strain on a marriage. The couple must be taught how to resolve differences and to develop sensitivity and a willingness to accept and meet each other's needs.
42. *Changing Roles that Can Lead to Confusion.* Confusion and conflict may follow when a man and woman each come to marriage with unclear roles and vague expectations about their own and each other's responsibilities. Premarital counseling provides an opportunity for a couple to begin communicating to discuss their different expectations and decide on areas of responsibility.
43. *Alternative Styles of Marriage that Can Lead to Uncertainty.* Criticisms of the traditional family are sometimes hostile, more emotional than logical, and contrary to biblical teaching. These issues may be clear to the Christian counselor, but may be confusing and uncertain for the counselees. With the guidance of the counselor who is patient, gentle, and not inclined to lecture, the couple can think through these issues in the light of the Scriptures.
44. *Loosening Sexual Standards that Can Lead to Immorality.* Sex before marriage is not new and neither is it rare, even among Christians. What is new is the increasing approval and acceptance of premarital sex, the widespread involvement of so many people in sex apart from marriage, and the flood of arguments that are used to justify behavior that clearly is condemned in Scripture. Nevertheless, the Bible still calls this immorality and issues like this should be discussed honestly, faced compassionately, and examined biblically.
45. *Previous Experiences which Can Lead to Overconfidence.* This would especially apply to those who have been married before. The counselor can help the couple see potential problems that even previously married people might miss and guide them to resolve issues that may have been unresolved following the previous marriage.

46. ***Circumstances that Can lead to Later Misery.*** Some couples bring circumstances into a marriage which need special attention. Some such issues may be a pregnant bride, rebound from a previous marriage or engagement, serious drug involvement, emotional problems or mental instability, serious mental or physical handicaps, no financial security, contrasting cultural backgrounds or religious beliefs, wide gaps in education or age differences, and knowing each other for a very short time. Couples may not see these as obstacles to a good marriage and for some these differences can and will be overcome. The counselor, however, needs to urge caution and thorough discussion of issues such as these before the couple moves ahead with marriage.

Most premarital counseling is done with relatively healthy individuals who can be helped to enhance and enrich a growing relationship. *Research data shows that this relationship most likely will lead to a growing and stable marriage when four characteristics are present:*

47. Similarity in social and background influences (such as religious affiliation, age, education, intelligence or socioeconomic level).
48. Personal-emotional stability and social skills (including an ability to communicate, positive self-concepts, and good emotional and physical health).
49. Good parental models (including a good relationship with parents).
50. Support from significant others.

If counselors are to be effective, they must be convinced that premarital counseling serves some useful purposes. There are several goals of premarital counseling:

51. ***Assessing Readiness for Marriage.*** This involves observation and discussion of several issues. Why does the couple really want to get married? What do they expect from marriage? How similar are their backgrounds? In discussions of these and other issues, the counselor can watch for signs of immaturity, rigidity, tension, and communication breakdowns.
52. ***Teaching the Biblical Guidelines for Marriages.*** Scriptural passages such as 1 Cor. 13; Eph. 5:21-6:4; Col. 3:16-21; 1 Cor. 7; and 1 Pet. 3:1-7 should be read, discussed, understood, and applied to the couple's relationship.
53. ***Guiding Self-Evaluation.*** With the counselor's encouragement, couples should consider their own and each other's strong and weak points, values, prejudices, beliefs, attitudes about the husband-wife roles in marriage, and expectations or plans for the future. To help with this evaluation, some couples find it helpful to work through one of the several premarital counseling manuals that are designed to prepare individuals for marriage.
54. ***Stimulating Effective Communication Skills.*** A failure or inability to communicate is one of the most fundamental problems in troubled marriages. Couples must be shown the value of spontaneous, honest, sensitive communication. They should be

encouraged to discuss their feelings, to listen carefully as they try to understand each other, and to talk through problems without putting down each other or hiding what they feel.

55. *Anticipating and Discussing Potential Stress.* There are certain to be adjustment problems when two people of different sex and family backgrounds come together. How will they handle finances, different values, in-law pressures and expectations, differences in interests, conflicts over choice of friends, and variations in spiritual beliefs and maturity? In counseling, couples should be encouraged to discuss potential stresses such as these.
56. *Providing Information.* In counseling, watch for knowledge gaps. If it appears that a couple needs information, this can be provided through the counselor's instruction, the distribution of books or pamphlets, or putting counselees into contact with others who can give accurate and helpful information.
57. *Planning the Wedding.* Premarital counseling can be a time for making sure that all legal requirements are met, going over details of the service, and urging the participants to take it easy on the expenses and activities of the wedding. It is important to help people recognize that for Christians a wedding can be a service of praise and witness to the couple's mutual commitment to Christ.

Format for Counseling

58. *Session one.* Encourage the counselees to talk about themselves, their backgrounds, and interests. Listen carefully and resist the tendency to begin dealing with problem areas. Ask why they want to get married and listen to their expectations about marriage. Discuss the premarital counseling. If you plan to give homework, talk about this. Ask about spiritual interests and the relationship that each has with Jesus Christ.
59. *Session two.* Discuss the biblical view of marriage; its origins, its purposes. Look at the major biblical passages and encourage the couple to participate by expressing their views.
60. *Sessions three and four.* Consider some of the practical issues of day-to-day living.
 - 60.1 What do they expect to get out of marriage?
 - 60.2 In what ways are they different from each other? How are they the same?
 - 60.3 What are the parents' attitudes toward the marriage? How do each plan to deal with in-laws after the marriage?
 - 60.4 Do they like each other's friends? How will they form friendships after the marriage?
 - 60.5 What do they like to do for recreation?
 - 60.6 Where will they live?
 - 60.7 Do they have a budget? How will they decide on finances?
 - 60.8 What are their attitudes toward children?
61. *Session five.* Discuss the meaning of love and its relationship to sex.

62. *Session six.* This involves discussion of the ceremony.

11. COUNSELING ADDICTIVE ISSUES

Alcohol/Drugs

An addiction is any thinking or behavior that is habitual, repetitious, and difficult or impossible to control. Usually the addiction brings short-term pleasure, but there may be long-term consequences in terms of one's health and welfare (short-term gain with long-term pain). Addictions tend to be progressive conditions that slowly exert more and more power and control over the individual. The addicted person may agree that the condition is harmful but stopping seems to be impossible.

THE BIBLE AND ADDICTION

The Bible condemns drunkenness and alcohol abuse but makes no specific references to drug abuse, eating disorders, workaholism, or most other addictions that concern us today. Nevertheless, *biblical principles such as the following can apply to the issue of addiction.*

63. Don't be mastered by anything.
64. Do obey the law.
65. Don't assume that drugs or other addictions resolve problems and reduce tensions. Stress is the major cause of addiction. When pressures build some people use alcohol or other drugs to hide the stress and give a feeling of euphoria and a sense that all is well.
66. Do keep the body pure. Our bodies are the temple of the Holy Spirit.
67. Don't expect to come to God through drugs.
68. Do practice temperance, self-discipline, and self-control.
69. Don't get drunk. We should not become drunk or addicted to any chemical substance or other addictive influence.
70. Do be filled with the Spirit.

Causes of addictions

71. *Parental and other adult examples.* A high percentage of teenage and adult addicts have grown up in homes where addiction and family instability are common.
72. *Peer and other social influences.*
 - 72.1 Disease-addiction theory. Maintains that drug abuse becomes a disease. Little evidence to support this idea.
 - 72.2 Gateway theory. The theory that use of one drug serves as a stepping stone to drugs that are more harmful.
 - 72.3 Social theory. Concludes that race, age, socioeconomic status, the neighborhood where one lives, educational level, peer influences, and similar issues can combine to determine if one takes drugs, what drugs are likely to

be used, how the habit is supported financially, and whether or not the drug use will continue.

- 72.4 **Psychological theory.** Considers whether personality traits, psychological stresses, inner conflicts, hidden fears, or individual needs contribute to drug abuse.
- 72.5 **Psychosocial theory.** Suggests that some people are problem prone because of personality, environment, stresses, or other influences.

HELPING THE ALCOHOLIC

How does one help an alcoholic? It might be useful to know some things that do not help. These include criticism, shaming, coaxing, making the person promise to stop, threats, hiding or destroying the alcohol, urging the use of greater will power, preaching, or instilling guilt. Most families try all of these, but they rarely work.

The treatment of alcoholism often is complicated by a number of parallel problems, each of which also needs to be treated. Some steps to take:

- 73. ***Get the Alcoholic to Admit the Need for Help.*** The alcoholic must be allowed to hit bottom in some way. Only then is the person willing to admit that he or she is powerless to control alcohol and unable to manage life without help. In a firm, factual, and nonjudgmental way, point out the nature of the drinker's actions.

Most addicts have high anxiety and low self-esteem. Try to be careful not to criticize or condemn in a way that arouses anxiety or is threatening. Convey acceptance of the person but not of the behavior. Listen to the alcoholic but do not give reassurance. Recognize that addicts are dependent, often childish, manipulative, and specialists in evoking sympathy. Show a noncondescending, firm, sensitive attitude to imply that responsibility for recovery must remain with the alcoholic.

- 74. ***Stop the Drinking.*** Detoxification usually involves the help of a physician. Most alcoholics need medical guidance to deal with the symptoms of withdrawal. The bigger task is to help the alcoholic to prevent relapse and keeping the individual free of further alcohol use. This involves counseling that has at least four goals.
 - 74.1 Getting medical attention to repair the damage caused by alcoholism.
 - 74.2 Helping the counselee learn to cope with stress and function effectively without alcohol.
 - 74.3 Creating a new identity without alcohol.
 - 74.4 Building or restoring self-esteem and dealing with guilt.

75. ***Provide support.*** Alcoholics and other drug abusers are often lonely, immature people who are being asked to change a lifestyle that is well entrenched and to give up a substance that they depend on and value. Much of the supportive help should be provided by the church where members of the congregation are understanding, familiar with the facts about addiction, and available to give encouragement and practical assistance.
76. ***Help with Stress Management.*** Counseling must show there are better ways to deal with stress than through alcohol and drugs. The counselee must learn that he or she can trust the counselor, who in turn must be patient and dependable.
77. ***Encourage Self-Understanding and a Change of Lifestyle.*** After the alcoholic has stopped drinking, how will life be different? One's style of life depends on making decisions concerning what will or will not be done now and in the future.
78. ***Counsel the family.*** Since alcoholism is a family problem, the whole family must receive support, understanding, and help. Often family members must be helped to see how they might be contributing to the addiction problem or how their protection of the drinker might prolong the condition. As the alcoholism develops, family members are forced to take responsibility for running the household. When sobriety returns, the family must readjust to this change and learn to accept the recovering alcoholic as a responsible member of the home.
79. ***Be Prepared for Relapses.*** It is not easy to work with chemically dependent people or their beleaguered families. The counselor can expect failures and after a relapse he or she must help the counsees pick up and keep working on the problem.

REVIEW STUDY GUIDE

Counseling Issues I COU201

- 80. Name four purposes or goals of Christian Counselors.**
- 81. Make a distinction between pastoral care, pastoral counseling, and pastoral psychotherapy.**
- 82. A sincere desire to help others is a valid reason for becoming a counselor. But there are other issues, sometimes unrecognized, that can interfere with your effectiveness. When you counsel primarily to meet your own needs, you are not likely to be of much help to your counsees. Name five needs of counselors which can interfere with counseling.**
- 83. Sometimes a counselor can become confused concerning his role in counseling. For example he may simply be “visiting” instead of counseling. Name five other potential areas of role confusion.**
- 84. By agreeing to help others, we are opening ourselves to the possibility of power struggles, exploitation, and failure. There are three common ways by which people frustrate the counselor and increase his or her vulnerability. What are they?**
- 85. What is transference? Give an example.**
- Counseling often involves the discussion of intimate details that would never be discussed elsewhere--especially between a man and a woman who are not married to each other. Name five ways to deal with such situations.**
- Define anxiety. What does the Bible say about anxiety?**
- Give seven signs of depression.**
- There are five major distinct ways a counselor can help a counselee in dealing with anger. What are they?**
- What are the three types of guilt?**
- Identify some of the interpersonal changes in adolescents which cause problems.**
- What are some other areas of concern for adolescents?**
- Which two ways can counseling adolescent problems be approached?**
- Identify four steps in the counseling process with adolescents.**
- The challenges of young adult years could be grouped into four major categories. What are they?**
- If individuals are to live successfully as adults, they must continue to develop competence in several skill areas. Name six such areas.**
- In finding direction for their lives, two major choices must be made by young adults if they are to move smoothly through this period of time. What are these two major choices?**
- What is the “Stuck Syndrome” of young adulthood?**
- What are some positive aspects of middle age? Some negatives associated with middle age?**
- What are some physical changes of middle adulthood?**
- What are some psychological changes of middle adulthood?**
- What is meant by “the sandwich generation?”**

What are the three major causes of interpersonal relations discussed in this course?

Prevention is always better than remedy. What would you instruct a counselee in preventing or improving poor interpersonal relationships?

There are four areas of family/marital concerns of middle adulthood. What are they?

What is meant by “the sandwich generation?”

Define child abuse.

Name three causes of child abuse.

- 86. Abuse can affect feelings, thinking, and actions. List three effects suffered by the abused in each of these areas.**
- 87. Name five ways one can help children of abuse.**
- 88. Why do children rarely report abuse?**
- 89. You can suspect abuse or neglect by observing several symptoms or signs. Name five such signs.**
- 90. Name three inappropriate behaviors which could indicate child sexual abuse.**
- 91. Most often when an abuser is confronted, what is the normal response? Name three possible responses.**
- 92. Counseling abusers is often a long-term process dealing with the counselee's _____, _____, and _____. Many lack _____, _____, and _____ skills.**
- 93. How you describe yourself in terms of your character traits, strengths, thoughts, attitudes, and feelings is your _____. Your personal evaluation of your worth, competence, and significance is your _____.**
- 94. What are three essential components of a healthy self-image?**
- 95. We have a positive self-image, not because of human _____ and human _____ but because of God's _____ and _____.**
- 96. Name five causes of inferiority and low self-esteem.**
- 97. Give a definition of “grief.”When does grief become abnormal, pathological, and complicated?How would you counseling someone who is suffering pathological grief?**
- 98. Biblical teaching on children and parental guidance can be divided into two categories: comments about _____ and comments about _____ and _____.**
- 99. Mothers and fathers have a responsibility to _____, _____, _____, and to _____.**
- 100. Name five causes of child-rearing problems.**
- 101. There are other influences, including traumatic early experiences, which can cause problems later in life. Name five such incidents or influences.**
- 102. What are the three major responsibilities a counselor has in working with the problems of children?**

103. Children often can not or simply do not communicate as freely as adults. In such cases, what are three techniques a counselor can use?
104. Sometimes children are spontaneous and share their worries and concerns openly. At other times, it is helpful to ask questions to help them open up. What are some questions which can be asked?
105. When counseling children, why is it important to also see the parents?
106. In marriage counseling, often there is interpersonal tension that frequently centers on one of the several issues. Name five such issues.
107. Sometimes marital tensions appear or are made worse because of the *external* pressure that comes from other people or from stressful situations. Name five such people or situations.
108. Name five counseling goals in marriage counseling.
109. Give five reasons for premarital counseling.
110. Name five goals for premarital counseling.

The first 36 questions are due at the beginning of the fourth week of classes. The second 18 questions are due at the beginning of the sixth week before the exam is administered. All questions should be answered on separate sheets and should be typed. If you do not have the means to type your assignment, then it becomes your responsibility to have someone type them for you (only typing; no answers from someone else!). Your grade will depend upon the following:

111. Attendance. (All absences must be excused and the class must be made up).
112. Grade on first 36 questions.
113. Grade on second 18 questions.
114. Final exam grade.