

Homosexuality and the Struggling Christian

PCP 539 Counseling Issues in Life-Span Development  
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### Abstract

This paper will include information reviewed from the pertinent literature currently available to address the needs of the Christian struggling with same-sex attraction. Excerpts from the literature will address the following areas: considerations for the counselor, considerations for the client (the struggling Christian), considerations for causality of same-sex attraction (homosexuality or lesbianism), and the considerations for change for the struggling one.

## Homosexuality and the Struggling Christian

Same-sex attraction, acted out in either homosexual or lesbian behavior, is a growing problem surfacing among Christians across the United States. Christians can and do struggle with same-sex attractions. It is time the Church recognized this need, and prepared itself to help those struggling. Pastors, lay-leaders, Sunday school teachers, counselors, family members, and strugglers will benefit from the helpful literature presently available.

In this paper, the term “counselor” can apply to anyone who is in a position to work with and encourage, to come along side of and help, a Christian who is struggling with same-sex attraction. The term “client” refers to the one seeking help, the Christian who is attracted to persons of the same-sex.

### Considerations for the Counselor

First and foremost, William Consiglio in his book, *Homosexual no more: Practical strategies for Christians overcoming homosexuality* (1991), recommends for the counselor:

As you embark on this work with your overcomer, you are entering a complex emotional, psychological, and spiritual journey of healing. You need the armor of God to protect yourself from the enemy’s attacks. Remember, you are rescuing a child of God from the darkness which Satan has cast upon his life. Therefore, you should spend time in prayer. (p. 24-25).

Consiglio feels that the counselor must have a deep conviction that homosexuality can be overcome. Counselors must hold out hope for the client. On page 41 of his book, Consiglio emphasizes “the importance of building a committed relationship” with your client. He further states:

Since overcoming homosexuality has so many ups and downs, your overcomer will need to experience you as a person whom he can trust and turn to when he has doubts and discour-

agements. You will need a good deal of patience and steadfastness. You will need to be for him a godly example. Your faithfulness, caring, patience, ability to be non-judgmental, and endurance will be for him God's love made tangible.

Dr. Earl Wilson is a Christian psychologist who has counseled homosexual clients for years. In his book, *Counseling and homosexuality* (1988), he gives practical tips and information for the Christian counselor from both a psychological and Christian perspective.

In chapter 2 "Confronting Your Own Values, Dr. Wilson begins with: "Listening Opens Up Many Doors" (p. 26). Listen first; "Ask them [the clients] what they value—don't tell them what they should value" (p. 27). "Don't be afraid of your values" (p. 28). "The key is not so much what you believe and what you share but how you share it" (p. 28). "Don't stereotype" (p. 29). Don't label people. Look at the individual. "Attitudes Get in the Way" (p. 30). Dr. Wilson quotes Gary Collins, "*In any helping relationship, the personality, values, attitudes, and beliefs of the helper are of primary importance*" (p. 30).

There are "areas of special concern" related to attitudes and values. The first of these is prejudice; "You don't have to be without prejudice to counsel persons with same-sex preference, but you do need to be aware of your prejudice so that you can behave responsibly" (Wilson, p. 32). "Prejudice is usually broken down by getting to know someone who represents that toward which you hold the prejudice" (Wilson, p. 32).

The second area of concern is shock, which is "usually either an extension of prejudice or lack of social awareness" (Wilson, p. 33). There are two types of shock. Type I is "shock over the type of activities in which the counselees have engaged" (Wilson, p. 33). "Remember, many bad things happen to people, and people do self-destructive things. They need help, not judgment" (Wilson, p. 34). Type II is "shock over the persons, some of them prominent religious and civic leaders, who are struggling with the problem" (Wilson, p. 33). This shock is "caused by a

realization that no one is immune from sin or tragedy” (Wilson, p. 34). The counselor must be careful not to exacerbate the client’s problem by their (the counselor’s) response (Wilson, p. 34).

“Another special concern is *homophobia*. . . . the fear of homosexuals or the effects of homosexuality” (Wilson, p. 35). The natural tendency is to fear what is not understood (Wilson, p. 35).

The last special concern is “*personal sexual threat*” (Wilson, p. 36). Wilson says that “most people have had the experience of feeling attracted to a person of the same sex at one time or another and have wondered if they themselves could be latently homosexual” (p. 36-67). Later Wilson adds, “All counseling involves sexual threat for the counselor because counseling is a very intimate business” (p. 37). Wilson encourages that this threat does not need to hinder the counselor, if the counselor will: “*Be responsible for your feelings. Realize that just because your feelings may be confused or inappropriate you don’t have to act upon them. God wants you to take charge of the feelings rather than give them control over you*” (p. 37).

Dr. Wilson finishes this chapter with the encouragement to work “within your own value system” (p. 37). He says that “You do not have to counsel all people and you do not have to sacrifice your own values to counsel” (p. 37). “*If you cannot come up with goals which are mutually acceptable to you and the client then you should terminate the counseling relationship*” (Wilson, p. 38).

“Counselors are social activists whether they like it or not. You have to stand up for what you believe and you have to stand up for your clients.” (Wilson, p. 181)

I particularly appreciate the input of Dr. Joseph Nicolosi regarding the therapeutic relationship and the dynamics of transference and countertransference in his book, *Reparative therapy of male homosexuality*” (1991). He states on page 169:

The critical and often the most painful dimension of psychotherapy is looking honestly at those feelings the client has transferred to the therapist from previous relationships. During the course of treatment a broad spectrum of unresolved and unconscious conflicts, defenses, and desires from previous significant relationships are transferred onto the therapist. The client sees the therapist through the eyes of the child he once was. Transferred feelings include fear, anger, aggressive-defensive reactions, and sexual desires.

Nicolosi also addresses the issue of the therapist's gender in dealing with clients of the same or opposite sex. His position is that while male clients may benefit from working with a female therapist, in the long run, it is better if the male client works with a male therapist, because "only a male can stimulate reenactment of the conflictual feelings experienced with males, particularly problems with trust and the needs for male acceptance. Only through men can masculine identity be found" (Nicolosi, p. 179).

#### Considerations for the Client

In chapter two of *Homosexual no more: Practical strategies for Christians overcoming homosexuality* (1991), entitled: "Answer these four questions: ten facts about homosexuality", William Consiglio brings forth the following questions for consideration for the client: "Do you know that you have to change?" (p.27); "Do you want to change?" (p.30); "Do you know that you really can change?" (p. 33); and "Do you know how to change?" (p.38).

Recovery is being able to go on with your personal and relational life goals and plans with minimally bothersome homosexual feelings, thoughts, desires, and attractions (temptations), and avoiding all homosexual behavior, by 1) knowing what you are experiencing physically and emotionally, and 2) by choosing what to do and what not to do; based on a foundation of personality renewal and healing through the sustaining power of the Holy Spirit. (Consiglio, p. 34).

The ten facts that Consiglio outlines in chapter two are as follows: Fact 1: “God calls homosexual behavior SIN, and the overcomer must work to change this behavior and orientation” (p. 27). Fact 2: “You want to change, and have decided to change based on the trustworthiness of the Word of God” (p. 33). Fact 3: “Homosexuality can be overcome” (p. 33). Fact 4: “It is the willful indulgence in homosexual behavior (thoughts and actions) which is sinful, not the disorientation” (p. 36). Fact 5: “Homosexuality is learned” (p. 36). “God made no one homosexual; nor did one’s genes, hormones or biology” (p. 36). Fact 6: “No one chooses to be or feel homosexual initially” (p. 37). Fact 7: “Homosexuality has very little to do with sex” (p. 37). “It has more to do with an emotional and psychological wound which leaves a person feeling deprived, empty, unfulfilled and incomplete in the bonding that he needed to experience with the same gender parent” (Consiglio, p. 37). “The sexual aspect of homosexuality is an attempt to meet the love and intimacy needs which were never adequately formed between the child and the same-sex parent” (Consiglio, p. 38). Fact 8: “Homosexuality is an emotional, psychological, spiritual problem” (p. 38). As such, it needs to be approached from both psychological and spiritual perspectives. Fact 9: “Recovery is a process that takes time” (p. 38). Fact 10: “Homosexuality is not only your private trouble; it is a public issue” (p. 40).

For Davies and Rentzel in their book *Coming out of homosexuality: New freedom for men & women* (1993), one of the things that the struggling Christian might ask is: “How long will this take?” How long it takes, depends on the client’s: commitment to Christ and the change process, past homosexual or lesbian involvement, reasons for becoming involved homosexually in the first place, participation in the process of change, and God’s sovereignty (Davies & Rentzel, pp. 25-26). The client will need to consider each of these things as they grapple with the change process.

#### Considerations for Causality

According to William Consiglio in *Homosexual no more: Practical strategies for*

*Christians overcoming homosexuality* (1991), “Homosexuality is not an alternative sexuality or sexual orientation, but an emotional disorientation caused by arrested or blocked emotional development in the stream of heterosexuality” (p. 22). Homosexuality “primarily develops out of the early childhood experience of a poorly established love-bonding relationship with the parent of the same gender. This seems to be the most critical factor” (Consiglio, p. 58).

William Consiglio (1991) identified six stages of homosexual development. The first stage is “Low Self-Esteem (LSE)”, which arises from dysfunction in the family of origin (p. 60). It involves one’s “inability to accept oneself (one’s self) emotionally” (p. 61). “Having one’s emotions and feelings acknowledged, understood, accepted and responded to gives the young child an adequate and acceptable SELF or Self-Esteem” (p. 61). Therefore, “acceptance of one’s inner self or feelings is fundamental to all emotional healing and growth for a person who has experienced a dysfunctional family background” (p. 61). The second stage is “Gender Emptiness (GE)” (p. 61). With a foundation of LSE, the child is “emotionally vulnerable in many ways” (p. 61). Negative comments made by others, develops gender identity insecurity. “Because he experienced humiliation, intimidation, fear anxiety, embarrassment, shame, criticism, poor modeling or insufficient modeling, lack of opportunity to experience success, acceptance, belonging with his same gender parent and peers, gender identity security is arrested” (p. 61) Therefore, gender self-acceptance is crucial to healing. The third stage is “Gender Attraction (GA)” (p. 61). The person with GE “experiences an emotional deprivation which makes him very needy or hungry for other males to accept, approve and be close to him” (p. 61). Because of his identity insecurity, the young male is looking to other males for his identity (p. 62). Because of his need, his interest in other males intensifies. “This need for emotional intimacy and attachment becomes a major underlying dynamic of the homosexual preoccupation” (p. 62). The fourth stage is “Sexual Attraction (SA)” (p. 62). This surfaces in adolescence. Interest and attraction becomes



“sexualized and eroticized” (p. 62). The fifth stage is “Homosexual Reinforcement (HR)” (p. 62). At this stage, attraction (SA) leads to action and “sexual activities which reinforce and habituate the disorientation” (p. 62). Finally, the sixth stage is “Homosexual Identity (HI)” (p. 63). Because the individual must come to terms with his sexual identity and orientation, “he begins to justify his lifestyle or homosexual behavior and forms an identity as a homosexual or “gay” person” (p. 63).

In their book *Coming out of homosexuality: New freedom for men & women*, Davies and Rentzel list in chapter four, the most common backgrounds of the people they meet who are coming to them for help. “The main areas where the patterns emerged were: early childhood development, family background, temperament and interests, peer pressure, and sexual abuse (p. 43).

Events in early years do not cause homosexuality or lesbianism but these events can set the stage for problems to develop later in life. “Ideally, an infant’s first year or two of life is spent developing a deep, secure bond of love with the mother that leads to a healthy sense of personal identity” (Davies & Rentzel, p. 44). According to Erik Erikson’s psychosocial development stages, at this age, the child is developing basic trust. At this foundational level, if development is disrupted, the child is vulnerable to all kinds of problems (Davies & Rentzel, p. 45). “Babies who do not achieve ‘basic trust’ see the world as a frightening and unpredictable place” (Davies & Rentzel, p. 45). Without foundation of security, “they tend to view all new events and people with a negative expectation” (Davies & Rentzel, p. 45).

Infants who do not come into a “sense of being” grow up sensing an inner emptiness or chasm, a ‘separation anxiety.’ This can manifest itself later in life through an overwhelming drive to connect with and find their identity in another person.

Failure to achieve “basic trust” or a “sense of being” are conditions found throughout society and do not, in themselves, cause homosexuality or lesbianism. But

children who start life lacking this foundation are extraordinarily vulnerable to all developmental disruptions, including those that shape their sexual identities (Davies & Rentzel, p. 45).

Sexual identity is shaped by the bonding or the disruption of the bonding with the same-sex parent. (Davies & Rentzel, p. 45).

Davies and Rentzel also point out that temperament is another factor to consider in the developmental process of same-sex attraction.

Boys born with a sensitive, intuitive, artistic nature can be more vulnerable to disruptions in their relationships with their fathers. In fact, if a little boy like this experiences rejection and ridicule from his dad, it's almost a sure bet that he will have sexual identity struggles later on (p. 46).

Similarly, if a little girl is aggressive and has "tom-boy" characteristics, how her mother responds to this will effect the daughter's sexual identity development. Of course, what happens to the sensitive artistic male child in elementary school also impacts his sexual identity development, and the same goes for the aggressive, athletic, "tom boy" girl. If the either child feels rejected by peers of the same sex, there can develop a sense of "same-sex love deficit", which leaves them vulnerable in the future to same-sex attraction and involvement (Davies & Rentzel, p. 47).

Even though "family dynamics, temperament and peer pressure strongly shape a person's sexual identity, the single factor that most powerfully propels a girl toward a lesbian identity is sexual abuse: incest, rape or molestation" (Davies & Rentzel, p. 49). "Any kind of sexual interchange between a child and anyone bigger, stronger or older" constitutes sexual abuse (Davies & Rentzel, p. 49).

The junior high and high school years are a challenge for most youths. Puberty onsets; peer pressure intensifies.

Most people from a lesbian or gay background feel different or may even be labeled “queer” from an early age. But the full significance of these labels hits, usually in the junior high years, when the first strong rushes of sexual attraction come surging up—an turn out to be surging in the wrong direction (Davies & Rentzel, p. 51).

The reality is “even though our culture is superficially more tolerant of homosexuality than it once was, most high school kids do not want to be gay” (Davies & Rentzel, p. 52). If a youth senses same-sex attractions, he or she may “repress them, ignore them and hope they will go away” (Davies & Rentzel, p. 52).

“The last step in the development of a lesbian or homosexual identity usually comes in the decade after high school, when all kinds of options are spread before us” (Davies & Rentzel, p. 53). At this time of life, young adults usually are experiencing life on their own for the first time. Without the constraints of “parents and the people we grew up with, many of us use the post-high school years to try anything in the search for our life’s direction and identity” (Davies & Rentzel, p. 53).

In his book, *Counseling and homosexuality* (1988), Dr. Earl D. Wilson covers the “Causes of homosexuality” in chapter four. In that chapter he discusses the reparative urge: a desperate effort to have unmet needs met. (Wilson, p. 58). Dr. Wilson quotes Dr. Elizabeth Moberly:

From amidst a welter of details, one constant underlying principle suggests itself: that the homosexual—whether man or woman—has suffered from some deficit in the relationship with the parent of the same sex; and that there is a corresponding drive to make good this deficit—through the medium of same-sex, or “homosexual” relationships. (p. 57).

Wilson discusses the “Biochemical Contributions to Homosexuality” on pages 69-72 in this chapter. He quotes Dr. John Money and his associates at Johns Hopkins University. In a review of

Dr. Money's work entitled "Sin, Sickness, or Status? Homosexual Gender Identity and Psychoneuroendocrinology" he stated:

As in subhuman primates, in the human species sexueroetic status is dependent not only on prenatal hormonalization, but also on postnatal socialization effects. There are several different human hermaphroditic syndromes each of which makes its own specific contribution to the science of homosexuology and to the understanding of genetic, prenatal-hormonal, pubertal-hormonal, and socialization determinants of being gay, straight, or bisexual. In combination, they indicate that sexual orientation is not under the direct governance of chromosomes and genes, and that, whereas it is not foreordained by prenatal brain hormonalization it is influenced thereby, and it also strongly dependent on postnatal socialization. (Wilson, p. 69).

In this chapter, Wilson also discusses the findings regarding the presence or absence of hormones in utero, as well as prenatal stress factors, that might predispose a male to appear more feminine and a female to appear more masculine (p. 71). However, nothing has been drawn conclusively to say that this factor alone causes homosexuality. Other factors must also come to play.

#### Considerations for Change

In *Homosexual no more*, Consiglio proposes his reorientation therapy in chapter one. "Reorientation therapy is an approach to helping overcomers remove the emotional, homosexual outlets which have become habitual" (Consiglio, p. 22). Consiglio goes on to say that "The external behavioral outlets that continue to reinforce homosexuality must be diminished and eliminated. There are basically five: sexual encounters, emotional dependencies, masturbation, pornography, and visual indulgence or lust" (p. 22-23). In chapters five through nine of his book, Consiglio covers the external and internal changes, which heal homosexuality.

Recovery is a process. Spiritual growth is a process. In *Coming out of homosexuality*, Davies and Rentzel say that “working through character faults and past hurts, immaturities and insecurities is a long process for everyone, not just the recovering homosexual or lesbian” (pp. 27-28). The goal is “wholeness in all areas of life, including the capacity for healthy, close relationships with the opposite sex. This dynamic of life is true for everyone, male and female, whether they are single or married (Davies & Rentzel, p. 27). “Rather than opposite-sex lust, healing for both women and men means experiencing sexual interest in the opposite sex, as well as having healthy friendships with both men and women. To us this constitutes true, godly heterosexuality” (Davies & Rentzel, p. 27).

Many people strive for our cultural norm, rather than seeking the level of sexual purity to which God calls us. For example, you may wonder if you will ever experience a strong, even passionate, lust when looking at an attractive member of the opposite sex on the beach. It’s possible, but this certainly is not our goal in being healed. God does not replace one form of lust with another (Davies & Rentzel, p. 27).

Davies and Rentzel quote Frank Worthen, “*Our deliverance from homosexuality comes from a Person [sic], rather than a method*” (p.29). According to Frank, “the interesting thing about the change process is that change itself is not our goal. Change is what results as we pursue a far more important and compelling goal: knowing, loving, and ‘beholding’ Jesus” (Davies & Rentzel, p. 29).

In coming out of homosexuality, we sometimes focus too intensely on our inner hang-ups, misbeliefs, past hurts and sinful tendencies. Looking inward, we may feel as if we’re gazing into an ever-deepening pool of confusion and despair. Release and healing come as we look upward—to Jesus—and enter more deeply into fellowship with him. (Davies & Rentzel, p. 29)

### Conclusion

There are many considerations for the counselor and for the client alike. Causality is a multi-layered development process that can take years. Change is possible. Growth is possible. Hope and help are available. The old proverb “It takes a village...” is true. To help the struggling Christian to overcome same-sex attraction, it will take the support, encouragement, and understanding from the struggler’s family, friends, church, and community, in order for that person to be able to make the necessary and wanted changes in his or her life.

References

Consiglio, W. (1991). *Homosexual No More: Practical strategies for Christians overcoming homosexuality*. Wheaton, IL: Victor Books.

Davies, B. & Rentzel, L. (1993). *Coming out of homosexuality: New freedom for men & women*. Downers Grove, IL: InterVarsity Press.

Nicolosi, Joseph. (1991). *Reparative therapy of male homosexuality: A new clinical approach*. Northvale, NJ: Jason Aronson, Inc.

Wilson, E.D. (1988). *Counseling and homosexuality*. Waco, TX: Word Books.

## Appendix

## Annotated Bibliography

Bergner, M. (1995). *Setting Love in order: Hope and healing for the homosexual*. Grand Rapids, MI: Baker Books.

This is a personal account of Mario Bergner's ten-year journey out of homosexuality through faith and through psychological understanding. Reader's can not only appreciate Mario's victory, but also apply truth to their own situations. This is insightful for the counselor and the client.

Comiskey, A. (1988). *Pursuing sexual wholeness guide*. Santa Monica, CA: Desert Streams Ministries.

Andrew Comiskey developed a support group for homosexual strugglers who wanted to change; thus began the Living Waters Sexual Redemption in Christ program. This guidebook is an excellent companion to Comiskey's book by the same name. This twenty-lesson guide can be used by individuals alone, or for group therapy sessions. Each chapter includes teaching, reading assignments, and questions to consider. There are excellent articles in the Appendixes. Tapes that coincide with the lessons can be ordered, but only in complete sets of twenty. This is an excellent resource for the counselor or the client.

Comiskey, A. (1989). *Pursuing sexual wholeness: How Jesus heals the homosexual*. Lake Mary, FL: Creation House.

Like the guidebook mentioned above, this book provides practical and Biblical answers for those want to overcome homosexuality. Some of the topics addressed are orientation change, sexual wholeness, breaking addiction, repentance, etc. This book is recommended reading for the assignments in the guidebook.

Consiglio, W. (1991). *Homosexual No More: Practical strategies for Christians overcoming homosexuality*. Wheaton, IL: Victor Books.

Dr. Bill Consiglio is founder and director of HOPE Ministries of Connecticut, which provides educational and counseling support services for Christians who are overcoming homosexuality. HOPE Ministries is a part of Exodus International. This book discusses what he calls the six stages of homosexual development, covers basic questions and facts about homosexuality, and addresses reorientation therapy as a way out of homosexuality. This book is written to the counselor, as well as to the male struggling with homosexuality.

Dallas, J. (1991). *Desires in conflict: Answering the struggle for sexual identity*. Eugene, OR: Harvest House.

Joe Dallas is the president of Exodus International, a worldwide referral and resource network of ex-gay ministries. This book is written directly to the one who is struggling with homosexuality. However, the information provided in this book will help those working with these strugglers.



Davies, B. & Rentzel, L. (1993). *Coming out of homosexuality: New freedom for men & women*. Downers Grove, IL: InterVarsity Press.

Excellent resource which covers biblical and scientific evidence for change and the dynamics of change, the root causes of homosexuality, and the other components involved to help the person change. This book is especially good because it deals with homosexuality for males and females.

Diamant, L. (1987). *Male and female homosexuality: Psychological approaches*. New York: Hemisphere Publishing.

This is a very clinical book, written for the therapist's benefit. The author reviews homosexuality as viewed by the psychoanalytic, neo-Freudian and behavioristic approaches. This is a difficult read.

Exodus International homepage. <http://www.exodusintl.org>

This is an amazing website full of great, useful resources. Exodus is a nonprofit, interdenominational Christian organization, which promotes the message of "Freedom from homosexuality through the power of Jesus Christ". At this website, one can find ministry referrals worldwide, an extensive annotated bibliography, audio/visual resources, testimonies and much more. Should be on everyone's "favorites" list.

Harvey, J.F. (1987). *The homosexual person: New thinking in pastoral care*. San Francisco: Ignatius Press.

Father John Harvey, a professor of moral theology at De Sales School of Theology for 38 years, is the founder of Courage, an organization dedicated to counseling homosexuals. His book covers the psychological considerations: definitions of homosexuality, the distinction between homosexual activity and orientation; and compulsive versus non-compulsive activity. As a Catholic, he discusses what that Church teaches about homosexuality while considering what other theologians have to say on the subject. He also covers modern theories on the origins of homosexuality. He discusses the possibility of change of orientation and gives illustrations from Christians who have found healing and growth by receiving the "tough love" of Christ and the Gospel. This is not "light" reading for the average person. He uses psychological concepts and terminology.

Nicolosi, Joseph. (1991). *Reparative therapy of male homosexuality: A new clinical approach*. Northvale, NJ: Jason Aronson, Inc.

This is a well-balanced, well-written psychological approach to the subject of homosexuality. The author covers the developmental issues involved in homosexual formation. The author also outlines the issues for reparative therapy including the role of the therapist.

Payne, L. (1996). *The broken image*. Grand Rapids, MI: Baker Books.

Leanne Payne is an oft quoted in other books dealing with the subject of overcoming homosexuality for that reason and for the perspective that she brings of complete dependence upon God. She has seen the results of healing prayer in the lives of homosexuals and lesbians that she has counseled. I believe that this book will help the Christian counselor to remember Who is ultimately in charge of the process of healing.

Saia, M.R. (1988). *Counseling the homosexual*. Minneapolis, MN: Bethany House.

Michael Saia has had an extensive teaching ministry with Youth With a Mission. He has worked with, witnessed to, and counseled homosexual Christians for over fifteen years. This book is formatted as a practical, step-by-step guide for Counselors, Pastors, “Non-Professionals” and families who are endeavoring to reach and help those struggling with homosexuality. Thought, I feel that Saia has been simplistic in his address of the issues surrounding causation, there are other concepts that he brings forward that are worth considering.

Wilson, E.D. (1988). *Counseling and homosexuality*. Waco, TX: Word Books.

Dr. Earl Wilson is a Christian psychologist who has counseled homosexual clients for years. He gives practical tips and information for the Christian counselor from both a psychological and Christian perspective.