Master of Sacred Theology Thesis   Concordia Seminary Scholarship

5-1-1970

The Correlation of Selected Malady Concepts of Psychotherapy with Their Theological Counterparts, as Evidenced in the Pastoral Counseling Literature of 1945-1957

Robert E. Rediehs

Follow this and additional works at: https://scholar.csl.edu/stm

Part of the Practical Theology Commons

THE CORRELATION OF SELECTED MALADY CONCEPTS OF PSYCHOTHERAPY

WITH THEIR THEOLOGICAL COUNTERPARTS, AS EVIDENCED IN

THE PASTORAL COUNSELING LITERATURE OF 1945-1957

A Thesis Presented to the Faculty,
of Concordia Seminary, St. Louis,
Department of Practical Theology
in partial fulfillment of the
requirements for the degree of
Master of Sacred Theology

---

by

Robert E. Rediehs

May 1970

Approved by: _K. / J. Bretmeier_
　　　　　　　　　　　　　Advisor

Paul J. Bauermeister
　　　　　　　　　　　　Reader

TABLE OF CONTENTS

Chapter   **Page**

CHAPTER I

INTRODUCTION

The basic concern of this paper is whether or not psychotherapy and theology have anything to do with each other. There is much feeling in Christian tradition about the extent to which extra-theological studies relate to theology. The present paper will not deal with the efforts which have been made to point out a dissimilarity between these fields. Rather it hypothesizes that psychotherapy and theology are, in some sense, related, and that this can be demonstrated in the terminology and meanings of pastoral counseling.

Pastoral counseling literature will be examined for evidence that understandings of psychotherapy and theology have indeed been drawn upon, and that a "correlate" understanding of man, his maladies, and his needs for help, exists. Research as this has two semantic pitfalls. On the one hand, the researcher may do violence to history by failing to let authors who use different terms mean with them the different realities they intend. And on the other hand, one may be unwilling to search out the common meanings between different terms.

In attempting to avoid these difficulties, this thesis will employ a "correlational" method.[1] That is, hypothetical correlations between

_____

[1]The term "correlation" in this thesis is an application of Tillich's sense, that psychotherapy's ultimate "questions" are "answered" in theology. "Symbolically speaking, God answers man's questions, and under the impact of God's answers man asks them. . . . In using the

the subject areas will be suggested, and then the pastoral counseling literature will be examined for evidences of such meanings. This method will specify a psychotherapeutic concept and will juxtapose a particular theological concept. A brief discussion will suggest a tentative way in which these concepts may be tangent to each other. Then material from the pastoral counseling literature will be presented to which both psychotherapy and theology may have contributed. In each of two chapters in the paper, a portion of the thesis "design" (that is the tentatively correlated psychotherapeutic and theological concepts) will be followed by the pertinent research "findings" from the pastoral counseling literature. At the end of each chapter, and finally at the conclusion of the thesis, the confirmability of the hypotheses will be discussed.

The research design will rely on the psychotherapy of Ford and Urban[2] and the biblical theology of Richardson.[3] Since there are many "psychotherapies" and innumerable "theologies," these limitations are

method of correlation, systematic theology proceeds in the following way: it makes an analysis of the human situation out of which the existential questions arise, and it demonstrates that the symbols used in the Christian message are the answers to these questions." Paul Tillich, Systematic Theology (Chicago: The University of Chicago Press, c.1951), I, 61-62. See also Tillich's extended explanation of "correlation," especially his "third meaning," pp. 60-62.

[2]Donald H. Ford and Hugh B. Urban, Systems of Psychotherapy, A Comparative Study (New York, London, Sydney: John Wiley and Sons, Inc., c.1963), especially chapter 16, pp. 636-661.

[3]Alan Richardson, A Theological Word Book of the Bible (New York: The Macmillan Company, c.1950).

necessary to manage the subject. Ford and Urban's text has been chosen
because it is a recent and respected crystalization of many schools of
psychotherapy. Richardson's volume is used because it is one of the
most honored volumes of biblical theology concepts available in English,
and because biblical theology is vital for ecumenical thought. Lastly,
limitations are made on the literature of pastoral counseling, restricting
research to the volumes published in Britain and the United States of
America in the years following the Second World War.[4] The period
selected will be that from 1945, about the time when the renewal of the
social sciences began to impress the pastoral ministry extensively, to
1958, when the pastoral counseling movement was able to spawn many
volumes annually. These dates are somewhat arbitrary, though the period
is of historical interest because it was in these years that pastoral
counseling as a subject "came into its own."

Something should be said here about this paper's focus on the subject
of human "malady." "Malady" in the broad dictionary sense includes any of
man's "unwholesome conditions." This is no small subject. Originally,
the intention was to survey an even broader range of psychotherapeutic
and theological areas. This fuller study would have included, so to speak,

---

[4]In addition to the publications which are by their titles obviously
about the subject of pastoral counseling, a sample of several volumes
which were indirectly pertinent to the pastoral counseling movement have
been included. Several other related works have also been added for
illustrative footnoting, but these are indicated as falling outside the
paper's research responsibility and bibliography.

"where man is," "where he should be," and "what means can get him from
here to there," that is, malady, goal, and means. However, because such
a study would have been too extensive for the present paper, it was
necessary to limit the research to the matter of human maladies. Within
this area only selected malady concepts have been treated. This, it
should be noted, leaves for further research other malady concepts, the
entire area of goals, and the very important and neglected area of
means, therapy.

In the next two chapters the concept of malady will be discussed
in the following two ways. First, the research design notes Ford and
Urban's psychotherapy and Richardson's biblical theology with regard
to the role which malady plays within these disciplines, and the
research findings apply this to how the pastoral counseling literature
regards the role of malady. Secondly, the psychotherapeutic concept
of "disorder" is compared with the theological concept of "deviation,"
and this in turn is compared with the related meaning in pastoral
counseling.

At the end of both chapters a determination will be made as to
whether or not a correlation exists in the pastoral counseling literature.
A final chapter will gather these remarks into a general conclusion
regarding the thesis as a whole.

CHAPTER II

THE CONCEPTS OF THE PLACE OF MALADY WITHIN
THE DISCIPLINES OF PSYCHOTHERAPY AND THEOLOGY

Research Design

A discussion of malady may occupy a unique place in a system of
thought such as in that of psychotherapy, theology, or pastoral
counseling. There is no formal concept in the literature for this.
In lieu of a better term, for thesis purposes, this chapter will
attempt to conceptualize "the role which malady considerations have
within a discipline." The basic question is whether or not the dis-
ciplines of psychotherapy, theology, and pastoral counseling have
anything in common in this respect.

Ford and Urban's psychotherapy has nothing to say about its
relationship with theology. Biblical theology, as Richardson's
contributors present it, likewise does not speak of psychotherapy.
However, it is of importance to recognize the "self-contained" nature
of both disciplines.

For example, the human malady for Ford and Urban is expressly
psychological, partly sociological, and somewhat cultural, not at all
economic, or political, and is neither medical nor religious.[1]

---

[1]Donald H. Ford and Hugh B. Urban, <u>Systems of Psychotherapy, A
Comparative Study</u> (New York: John Wiley and Sons, Inc., c.1963), chapter
16, also chapters 15 and 17 <u>passim</u>.

"Sin" in biblical theology is essentially religious, that is,
having to do with a man's relationship with God.[2] Some would say that
it is, therefore, necessarily also political, social, economic, medical,
and psychological, and by implication extends to cover every aspect of
life. However, the fact is that Grayston's theology of "sin" is a
biblical theology and does not mention these contemporary sciences, nor
therefore limit itself to them.[3]

Yet both psychotherapy and theology deal with man's maladies. One
might infer from this fact alone that malady considerations may occupy
similar positions in both disciplines, though in other respects these

---

[2]Alan Richardson, A Theological Word Book of the Bible (New York:
The Macmillan Company, c.1950). In the article "Sin," p. 227, Grayston
grounds this matter by quoting such passages as, "How then can I do
this great wickedness, and sin against God?"

[3]Grayston's article on sin, notably p. 227, consistently refuses
to regard theology as primarily a matter of relationship with God, as
if it involved other relationships only secondarily. He sees these as
one, and in fact ignores any issue here. Grayston evidences no necessity
to relate theology to anything else. Remarks about contemporary dis-
ciplines and sciences, such as the following, are foreign to Grayston's
article: "Righteousness exalteth a nation, but sin is a reproach to
any people," suggests the political consequences of theology. "If a
man say I love God, and hateth his brother, he is a liar," suggests the
social. The Old Testament prophets inveighed against the rich robbing
the poor, and this shows the economic. Jesus' challenge "Whether it
is easier to say Thy sins be forgiven thee, or to say, Arise and walk?"
reflects the medical. Adam in the Garden, fearing for his sin, illus-
trates the psychological. Pilate's search for "What is truth?" is
philosophic, scientific, and more. But by refusing to relate theology
to any contemporary disciplines, when the language of which disciplines
is so common today, Grayston implies as strongly as possible that
theology is larger than any human faculty.

disciplines are distinct. The pastoral counseling literature could be
examined first from this perspective, asking, what does it say about
inter-disciplinary relations as they might specifically affect the
understanding of the human problem?

And there are even more direct cues regarding the role of malady
in these disciplines. Ford and Urban place primary significance on
man's malady, in that they recognize that it is only as studies of
diagnosis improve that appropriate treatment of disorder may be given.[4]
A theological view which parallels the psychotherapeutic, is Grayston's
when he writes, "To deny that Christians have sins is to deny the
gospel."[5] Theologically, consideration is given to Law "before" Gospel.
The second part of the question for research is, what role or place is
given to the definition of malady within the pastoral counseling
literature?

Research Findings

Though there is no direct comment on how malady might be involved,[6]
pastoral counseling provides voluminous arguments that psychotherapy and

[4]Ford and Urban, pp. 660-61.

[5]Richardson, p. 229.

[6]Many instances could be cited where there is no direct comment on
how malady might be involved in the inter-disciplinary matter. VanderVeldt
and Odenwald write, "There can be no doubt that psychoanalysis and other
depth psychologies have considerable success helping the mentally sick,
especially the neurotic." (James H. VanderVeldt and Robert P. Odenwald,
Psychiatry and Catholicism [New York: McGraw-Hill Book Company, Inc.,
1952], p. 155.) But what "neurosis" is, and what in this term psycho-
analysis and other psychologies might be grappling with, inasmuch as they

theology are essentially related. This bears on the problem at hand.

For example, Stern writes, "the psychological plane and the spiritual

plane are not independent of each other. On the contrary, they are

most intimately connected."[7] Roberts began his volume

> This book revolves around two main foci. Psychotherapy
> and Christian theology are different disciplines,--one
> might even say "radically" different. . . . But it is
> not enough to declare that each should be left free in
> its own sphere, and should be reminded of its limits
> when it encroaches illegitimately upon other spheres.
> In the end nothing of human concern can be excluded from
> the purview of either.[8]

---

are limited specializations, is not examined theologically. Another
example, from Guntrip, echoes the existential understanding of
neurosis. "For if the illness we call a psychoneurosis is due at
bottom to love-starvation, its cure is not likely to be achieved
simply by a scientific analysis of its history and results." (Henry
Guntrip, Psychotherapy and Religion [New York: Harper and Brothers
Publishers, c.1957], p. 153.) But how such an existential view
relates to theology, if at all, goes unexamined. Guntrip does, how-
ever, allow a certain breadth to the subject of man's malady when he
writes of it as anxiety. "Anxiety must be confronted in its normal
as well as neurotic forms." (Ibid., p. 9.) Again, "every person
must take upon himself the normal anxiety of finiteness (death),
meaninglessness and guilt." (Ibid.) However, no room is given to
how these malady terms, the latter being philosophico-theological
expressions borrowed from Tillich, might relate to psychological
science. The pastoral counseling literature seems weak in respect to
the human malady, either not discussing psychological categories
theologically, or not discussing theological analyses of malady
psychologically.

[7] Karl Stern, The Third Revolution (New York: Harcourt, Brace
and Company, c.1954), p. 253.

[8] David E. Roberts, Psychotherapy and a Christian View of Man
(New York: Charles Scribner's Sons, 1950), p. xi.

Both are "free" to be interested in everything of human concern. This
is a non-technical "common sense" argument.[9] The implication is that
there must be a theology of psychology and a psychology of theology.
It should be noted that the literature does not attempt to draw an
equation between the two,[10] but suggests a relationship. The presenta-
tion of the correlation in the pastoral counseling literature is
general, often vague, but emphatic.[11] From pastoral counseling's
extensive argument, and from the fact that both disciplines deal with
the same human being, it could be inferred that both focus on man's
maladies in not-unrelated ways.

---

[9]"In a sense one may speak of psychotherapy whenever one human
being tries to help another by some psychological approach. In
almost any relationship where one person through sympathy, under-
standing, and patience is trying to help another, one may say that
there is a kind of 'psychotherapy' taking place in a very broad sense
of the word. The father with his child, the priest with his penitent,
the nurse with her patient--all are trying to help others, to make
them happier, to increase the well-being of their lives. Obviously,
the professional psychotherapy of the psychiatrist is very different
because he uses many devices unknown to the layman, but in so far as
psychotherapy is an art of dealing with human beings, it is based on
the same basic concepts of sympathy and understanding." VanderVeldt
and Odenwald, p. 71.

[10]"Each will continue to carry on its work in accordance with the
concepts and methods that seem necessary or appropriate to those engaged
in the respective tasks." (Roberts, p. xi.) There seems to be, in all
such quotations, a will to leave psychotherapy and theology as two
professions, not making them one, but seeing them as related.

[11]Another example, one from beyond the present study, is Breimeier's
remark: "It is inevitable that the behavioral phenomena, conscious and
unconscious, noted separately by psychology and theology, should be
unrelated." Paul E. Meehl, et al. What Then Is Man? (St. Louis:
Concordia Publishing House, 1958), p. 239.

Morever, it may be directly observed in the pastoral counseling writings, that primacy is given to man's problems. Psychotherapy and theology meet on the common ground of man's suffering. Guntrip writes,

> It was inevitable that the religious and the scientific (medical) methods of mental healing should find themselves face to face with each other on the common ground of the mental suffering of human beings.[12]

Conclusion

In meeting the crises in society today, professionals often find themselves beside one another, ministering to the same individual, each listening, looking, and bringing his best understanding to bear. It would only seem natural here, where they witness the same human suffering, the same problematic patterns and realities, that their very perceptions can be a basis of dialogue between them. Despite the differences of the disciplines, some correlation of malady considerations is inevitable because both attempt to meet people at this juncture. Therapy and the Gospel "start" here.

The pastoral counseling literature of the postwar period indeed draws from correlate understandings of the primacy of malady considerations within the disciplines of psychotherapy and theology.

---

[12]Guntrip, p. 129.

CHAPTER III

THE CONCEPTS OF DISORDERED BEHAVIOR
AND DEVIATION FROM THE LAW

This chapter will examine the psychotherapeutic concept of
"disorder" and the biblical theology of sin as "deviation," and will
research the related meanings in pastoral counseling.

Research Design

Ford and Urban's analysis of the systems of psychotherapy leads

them to summarize man's maladies under the caption "The Development

of Disordered Behavior."[1] This sixteenth chapter, though it nowhere

defines disorder, associates it with the following ideas: that dis-

order is "inappropriate" behavior, that it is taught and learned, and

that it can be seen in various symptomatic characteristics better than

in general characteristics common among all cases. From this it appears

that the term "disorder" is used somewhat in the sense in which the

American Psychiatric Association uses it, namely as an "empty category,"

implying few controversial associations and connoting no specific

causation, or philosophy. "Disorder" to Ford and Urban apparently

means "not meeting a norm." Their fifteenth chapter, "The Development

of Normal Behavior," similarly relies on a general notion of what that

---

[1]Donald H. Ford and Hugh B. Urban, Systems of Psychotherapy, A
Comparative Study (New York: John Wiley and Sons, Inc., c.1963), p. 636.

norm may be, explaining normalcy simply as the product of heredity,
maturation, and learning.[2] The expression "disorder" is intended simply
as a tag to identify certain behaviors which fail to meet certain norms.

In Richardson's text, under Grayston's article on "sin," the first
of four Old Testament designations for sin is "deviation from the right
way."[3] This usage is found in several Hebrew terms which might be
translated "perverse," meaning "any deviation, distortion, crookedness
of what is properly upright."[3] Likewise, the terms 'awon (iniquity),
shagah (err), and 'wl (wicked).[3] This motif is most vivid in h t',
which means,

> to miss a goal or way; e.g. among the Benjamite warriors
> there were men "who could sling stones at an hair-breadth,
> and not miss" (Judg. 20.16). Hence sin is failing to do
> something in relation to man or God.[4]

At this point it is sufficient to establish the biblical religious
concept of missing the mark.

From the above, it is evident that these two concepts of man's
malady hold in common a notion of "behavior which is not according to
the norm." For purposes of thesis research, this will be regarded as
a potential area for general correlation: Ford and Urban psychothera-
peutically regard man's malady as "disorder," and Grayston's biblical

---

[2]Ibid., pp. 593-635.

[3]Alan Richardson, A Theological Word Book of the Bible (New York:
The Macmillan Company, c.1950), p. 227.

[4]Ibid. Only in passing does Grayston refer to this aspect of
sin in the New Testament term anomia, "lawlessness."

theology reports man's malady, in part, as "deviation." To what extent does the pastoral counseling literature evidence a relationship between these two disciplines as they commonly operate with the notion that "there is something about behavior which is not according to the norm"?

Ford and Urban's concept "disorder" does not deny that there is a notion of "order" which gives the term its meaning. However, it does insist on avoiding norms implicit in the medical model, the sociometric model, and in any of a host of approaches, each of which may be found wanting because of its lack of generality and its attendant lack of consensus in the field. Ford and Urban leave room for the fact that psychotherapeutic research and practice define norms in more limited ways, for example defining disorder as "not well," "patient," "having a history of psychological treatment," "having a presence of certain behaviors," "having an absence of certain behaviors," "falling outside a so-called normal range on a designated measuring instrument," and so on. But it is important to note that when Ford and Urban summarize psychotherapy's many approaches, they say almost nothing about the definition of disorder. Ford and Urban's tendency to discuss how disorder develops rather than what disorder is, has committed their own chapter to a specific definition nonetheless. Their several-page examination of the cultural criteria for assessing disorder evidences an anthropological model. Here cultural norms in the West are compared with those of the Arapesh Indians, the Chinese Communists, and so on.[5]

---

[5] Ford and Urban, pp. 640-641.

Theology's unique task is to utilize various models and analogies in order to refer beyond them to that which is inexpressible. Certainly Ford and Urban would not like to see their concept of "disorder" associated with the theological model. Nonetheless, a theologian from his perspective especially appreciates comprehensive attempts, such as Ford and Urban's, to encompass a great variety of models of human disorder. Theology is necessarily correlate with the sciences (and with any people's language for that matter) for the purpose of communicating transcendent reality. It is exactly in the languages with which man gropes for abiding norms for his behavior, that God, The Norm, would be made known. In psychotherapy's general and specific attempts to describe "disorder," theology finds new languages to express the concept of sin. For example, surely it is not "a sin" to be over seventy on the schizophrenia scale on the Minnesota Multiphasic Personality Inventory. Nor is it "a lack of sin" to be under that norm. Nonetheless, such deviations in a person's interpersonal and community relationships also involve the matter of that person's ultimate relationship with God.

Theology cannot expect psychotherapy to be interested in the theological model. But theology does have a responsibility to understand the psychotherapeutic data. It is not from a clinical viewpoint, but only from a truly theological perspective that "disorder" and "deviation" have any possible relationship. As Tillich would say, it is the philosophical implication of psychotherapy which correlates with

theology.[6] Here psychotherapy's ultimate "question" about order is
"answered" by a theology of God. In this way, theology as "the queen
of sciences" includes psychotherapy. Therefore, psychotherapy's con-
cept of "disorder" and theology's concept of "deviation" are not
distinguishable simply as a matter of one having to do with the
"horizontal" and the other with the "vertical." Grayston indicates
the correlation when he lumps these dimensions together, writing that
deviation is a failure to measure up over against "man or God."[7]
The disorder occurring between man and man is not unconnected to that
between man and God.

A further comment should be made here about criteria for norms.
Ford and Urban, despite their extensive discussion about the importance
of cultural criteria, never do specify which behaviors are appropriate
and which are not. This the therapist himself must do. No culture is
without norms. And there are keepers of these norms, the therapist
being one. Is an inability to think in logical sequences, as in
schizophrenia, inappropriate? "Only if one assumes it is bad to be
unable to do so," Ford and Urban reply.[8] The burden of assuming the
right norms, it should be noted, therefore falls squarely on the therapist
at the time he evaluates the particular client with a particular instrument.

---

[6]Paul Tillich, Systematic Theology (Chicago: The University of
Chicago Press, c.1951), I, 18.

[7]Richardson, p. 227.

[8]Ford and Urban, p. 640.

Biblical theology is somewhat parallel to psychotherapy in regard
to the use of cultural norms. As Whitehouse describes it,[9] behavior in
biblical culture was subject to civil and ceremonial laws (Greek: nomos),
but these norms were in turn subject to the final Law (Hebrew: torah),
God Himself. The civil and ceremonial or the "cultural" law was
regarded as a given part of a more basic relationship with God. The
cultural norms were given for the purpose of marking and mediating His
goodness. Yet insofar as the people of God misused these codified norms
in order to drive God out of their lives, this level of the law, when
not used as it was intended, became meaningless. It was the function of
the religious leader to use these laws in such a way as to bring the
Ultimate Law of life to bear on society and individuals. To interpret
the law within the specific circumstances of the people, to release a
person from a particular standard or to impose another rule as binding,
was to mediate relationship with God.

Psychotherapy and theology have this in common, the use of norms
on a cultural level. But whether the cultural norms are given reference
to an Ultimate Norm or not, depends on the therapist, the theologian,
or the pastoral counselor involved. Whether each of them realize it or
not, they as individuals, exactly because they are dealing with an infinite
variety of variables and values, also deal with an Absolute to which their
values are always subject.

[9]Richardson, pp. 122-125.

The psychotherapeutic discussion of disorder is involved with the reality of theological deviation, and vice versa. It is theology at its best which recognizes the presence and worth of Order in secular diagnoses. It also looks into its own sometimes stereotyped concepts of sin and beholds the "holy secular" with which both it and psycho-therapy must deal. The question for research therefore is, to what extent has the pastoral counseling literature attempted to recognize a relationship between psychotherapeutic "disorder" and theological "deviation"?

Research Findings

Research in the pastoral counseling literature shows that use is made both of psychotherapeutic notions of disorder and of a theology of deviation. These two viewpoints are frequently correlated.

Wise makes the association directly.

> The Bible looks upon man as destroying himself by
> rebelling against the law of God. Through his re-
> bellion his relationship to God is disturbed and this
> brings suffering. . . . While not to be considered
> as identical, there is a close similarity between the
> insight of religion that the laws of God are to be
> obeyed and that of psychotherapy that man must accept
> and learn to live on the basis of reality rather than
> on the basis of his wishes.[10]

---

[10]Carroll Alonzo Wise, _Psychiatry and the Bible_ (New York: Harper and Brothers, 1956), p. 20. See also p. 75 where Wise emphasizes the infantile "omnipotence" which throughout life is under obligation to meet a more mature relationship with others.

Wise is careful to say that the psychotherapeutic awareness of normative

realities in life and the biblical concept of the law of God, hardly

the same, are nonetheless similar.

Wise's elaboration of the matter deserves full presentation.

> Not only is God the Creator and man the being who is
> created, but God is also cast in the role of the law-
> giver and man in the role of one who is free to obey
> or rebel against law. The story of the revelation of
> the nature of life, or man's relationship to God in
> terms of law, of man's growing insight into this law
> and his ability to accept and conform his life to it,
> is a long, dramatic, and at many points tragic, story.
> Some of this story is to be found in the Bible; but
> it has been unfolding constantly since the Biblical
> account closed and is finding intense expression in
> human life today. Modern psychotherapy has rediscovered
> as its own an insight which is deep in Biblical under-
> standing. It is that rather early in life we must learn
> to give up activities which aim only at the immediate
> satisfaction of impulses and desires, and learn to find
> satisfaction through long-range goals which include the
> welfare of others; to postpone present satisfaction so
> that a more mature and enriching satisfaction may be
> obtained later; or even to endure present suffering in
> order to achieve a greater joy in the future. . . .
> These insights of the therapist are simply another way
> of saying that there are realities, described in terms
> we call law, that form the basic foundation upon which
> individual and social life may achieve its fullest
> expression and maturity. The Bible portrays these
> realities as rooted in the very source of our being,
> God.[11]

---

[11]Wise, p. 17. It could be noted here that Hulme, following the
Pauline and the Lutheran tendencies to disparage the "nature of law"
for engendering freedom, speaks of living "beyond the law," and of
"being captured in one's whole person" by what he calls "a dynamic
pull." He explains, "The only power capable of integrating both the
inner motive and the outer behavior around the will of God . . . is
love." "Love" is Hulme's way of expressing the qualitative aspect of
the will of God. (William E. Hulme, Counseling and Theology [Philadelphia:
Muhlenberg Press, c.1956], p. 141.) However, it should be noted that most

Here Wise has pointed out that guidance into the fullness of "the
nature of life" is given in the law of God. This created and revealed
order, Wise emphasizes, is related to the psychotherapeutic guidance of
the individual from the goals of a past phase of life to changing goals
of the present, as from childhood behaviors to longer-range socialized
behaviors.[12] Wise is saying that the realities of goals, laws, or
norms, psychotherapeutically and theologically, are inherent in every
life.

Outler, concerned about the relationship of humanistic psycho-
therapy to theology, substitutes the term "ethic" for "law" or "norm."

> This psychological [humanistic] ethic has rightly
> identified the main problems which any ethical system
> has to put in right relation. . . . The ordering of
> life, and with it the goodness and joy of life, come
> from truth and love as these are sought and manifested
> in human life. But this is primarily a human enterprise,

_____

of the pastoral counseling literature more nearly approximates the Old
Testament sense of "the Law." In that sense, "law" is that Word of God
in which the Psalmist, for example, could delight and find his salvation.
New Testament uses too would at times place power and promise within a
pattern for life, as when Jesus said, "A new commandment I give unto you."

[12]Two comments may be made here: (a) It will be recalled that it
is this very developmental theme which characterizes Ford and Urban's
discussion of disorder, pp. 648-658; (b) In connection with the develop-
mental view of life, Wise also notes pleasure-seeking and pain-avoiding
behaviors: the pleasure of present orientation, the pain of not deferring
certain satisfactions, the pleasure of coming to deferred satisfactions,
the endurance of pain for greater pleasure. Wise, p. 17. These are not
unrelated to Ford and Urban's list of behavior goals: pain-terminating
goals, pleasure-initiating goals, and the combination of these goals,
Ford and Urban, pp. 654-658.

and is promoted by men who know themselves to be the
arbiters of all values. Something like this is the
faith and the hope of the secular humanists among the
psychotherapists; they see themselves as ministers of
the religion of humanity, in which science is the chief
among the means of grace. Such an ethical viewpoint is
of great interest to Christians, who are inevitably
involved in the same questions of how life is rightly
ordered. We might well begin by noticing the important
points of agreement and mutual re-enforcement between
the analysis of the cleavages which separate them in
their prior assumptions. And, since we are more con-
cerned with an authentic ethic than with the strife of
systems, we will try to indicate the sense in which the
Christian ethic can receive and contain an ethic grounded
in Christian faith. It would be our claim that the two
ethics need not finally be rivals--that the Christian
ethic, with its wider and deeper dimensions of reference
to God's creative and redemptive love is the fulfillment
of the truth in all the human visions of the ordering of
human life. We have already stressed the agreement between
the psychological and the Christian ethics in their stress
on the importance of spontaneity and self-direction in
all significantly ethical action. It is unhappily a fact
that the ethical performance of the nominal Christians in
the churches is so fully adapted to the mores of the
community and the customary sanctions of society that
observers from outside often fail to recognize the Christian
ethic for what it is: an ethic without a code. "The moral
ideal for Christians lies not in a code, nor in a social
disorder. It lies in a life where love to God and man is
the spring of every thought and word and action."[13]

Outler is saying that basically there are only two realms of "order,"

that which is truly Christian and that which is not. These realms are

related, however. Of necessity a psychotherapeutically identified sys-

tem of ethics would be related to the ethics of any other system, also

to theology's system of ethics. The Christian should understand that his

---

[13]Albert C. Outler, Psychotherapy and the Christian Message (New
York: Harper and Brothers, c.1954), pp. 218-220.

theology actively includes any and all concerns about identifying an authentic ethic. Truly Christian theology embraces psychotherapy's concern about the ordering of life, and it does this within its recognition of the Maker and Redeemer of the ordering of that life. Outler notes that nominal Christians do not have this perspective, inasmuch as they elevate cultural codes to the status of absolute Law and fail to witness through these codes to the Kingdom of God.[14]

In this sense sin is a deviation which is not identical with the disorders which secular men describe. Knubel is correct when he emphasizes this. "Pure scientific psychology must exclude such concepts of sin," that is, concepts of deviation from not only cultural codes but from God who forgives and enables. However, Knubel makes the distinction on false grounds, supposing psychotherapy is not interested in values at all.[15] Of course, psychotherapy must be interested in values because it deals with human behavior. White sees a connection between theology and jurisprudence in that both attempt to ascertain objective

---

[14]Ibid., p. 220.

[15]Knubel cites Menninger for support. "'What science or scientist is interested in "justice"? Is pneumonia just? Or cancer? Or gravity? Or the expansion of steam? What criteria of "justice" can be applied to a broken arm or a weak mind? And to what good end? The scientist is seeking the amelioration of an unhappy situation. This can be secured only if the scientific laws controlling the situation can be discovered and complied with, and not by . . . concepts of equity based on primitive theology.'" Frederick R. Knubel, Pastoral Counseling (Philadelphia: Muhlenberg Press, c.1952), pp. 35-36.

values and objective guilt, but White falsely supposes that psychology

is different from them in that it is interested only in _felt_ guilt.[16]

Subsequent psychology has made it clear that this is not the case.

Both subjective and objective failures to meet norms are within the

domain of psychology.

It would be useful to explore the pastoral counseling literature

further for the relationship of specific psychological disorders to

theological disorder. The classic categories of psychosis and neurosis

were recognized disorders in the postwar period. It was said that the

neurotic is the one who builds imaginary castles and the psychotic is

the one who lives in them.

The schizophrenic, for example, was regarded as living in an inner

fantasy world of his own construction. The pastoral counseling literature

accepted the psychological insight that one person's religious fantasies

were no better than someone else's non-religious imaginings.[17] Psycho-

therapy and theology both recognized that _the_ problem lay deeper than in

the ideational forms alone. Both disciplines saw withdrawal from outer

reality as the basic problem. Though the patient saw things in his own

---

[16]Philip Mairet, _Christian Essays in Psychiatry_ (New York:
Philosophical Library, 1956), pp. 156-158. "It should not be a matter
either for surprise or reproach that psychologists are concerned with
the psychological and subjective results of wrong-doing, whether real
or supposed; but perhaps a good deal of misunderstanding could have
been avoided had they consistently spoken of a 'guilt-sense' rather
than of plain 'guilt.'" _Ibid._, pp. 157-158.

[17]_Ibid._, pp. 181-182.

way, his lack of contact with reality was regarded as "ab-normal" by
others. In attempting to help the patient, psychotherapy implicitly
followed a norm, the norm of increased communications through relation-
ship. Pastoral counseling followed the psychotherapeutic lead and
shared the goal of assisting recontact with reality through relation-
ships. The theological awareness of God as the Reality within this
process, however, was only vaguely expressed.[18]

Pastoral counseling gave more attention to neurosis no doubt
partly because of its commonness among "practicing Christians." The
neurotic was regarded as imposing on himself an unrealistic goal far
above his capacity to achieve. Reality was to him like a staircase on
which he would climb toward perfection driven on by his nagging
imperfection. Pastoral counseling took on this psychological description
as correlate with traditional theology. White, for example, saw the
disorder

> to consist in the subject's sense of the irrecon-
> cilable disparity of what he supposes he ought to be
> (or do) with what he supposes he really is (or does).
> We find this expressed in its most elemental form in
> St. Paul's "the good that I would, I do not: but the

---

[18]"If we are to find reality within ourselves, it will be seen
to inhere and extend through all . . . dynamic relationships. . . .
In our theological approach to reality we postulate as our first
hypothesis that God is a Person-in-Relationships at the creative
center of this dynamic cosmic community. It is our second hypothesis
that every human person is to acknowledge and improve the relatedness
of each person to God and to every other person." Paul E. Johnson,
Psychology of Pastoral Care (New York: Abingdon-Cokesbury Press,
1953), p. 303.

"evil which I would not, that I do. . . . O wretched man that I am, who shall deliver me from the body of this death?"[19]

This Pauline conflict is cited innumerable times in the literature.[20] The self-made ideal is noteworthy in Horney's depiction of the neurotic who makes himself his own god, refusing to accept his own given capacity and limitations, rejecting his real self, and living for an ideal self which will never exist.

> He is convinced that his way of life--his solution--
> is right, and that in this way alone can he find peace
> and fulfillment. He feels that his pride gives him
> inner fortitude and worth, that without his shoulds
> his life would be chaotic, etc. It is easy for the
> objective outsider to say that all these values are
> spurious ones. But as long as the patient feels that
> they are the only ones he has, he must cling to them.
> Moreover the patient must hold on to his subjective
> values because not to do so would endanger his whole
> psychic existence.[21]

White says of such an idealized norm, "The evidence appears strong that this archetype of completeness and perfection is powerfully operative in us all."[22] Pastoral counseling involved itself extensively with the psychology and the theology which described the neurotic disorder, but

---

[19]Mairet, p. 162.

[20]For example, Johnson saw the matter through Freudian glasses. "Paul is vividly describing precisely the conflict that Freud portrays as the distress of the ego caught between the lusty demands of the amoral id and the repressive restraints of the moral superego." Johnson, p. 16.

[21]Karen Horney, _Neurosis and Human Growth_ (New York: W. W. Norton and Company, Inc., c.1950), p. 334.

[22]Mairet, pp. 167-169.

as will be seen, it went beyond this to reject the entire hierarchical
notion of reality, where imperfect man is required to rise up to attain
the perfect norm of God high up somewhere. Norms, if there were to be
any, could not be such as to encourage further disorder. Wise and
others implied that norms which were "realistic" to the developmental
process would represent God's law better. "Reality" under God became
a new focus.[23]

The above demonstrates that the pastoral counseling literature of
the period did not always have a direct and simple correlation between
a theological concept of "deviation" and a psychotherapeutic one of
"disorder." The theology of the period regarded sin less as "falling
short of perfection" and more as "pride, rebellion, withdrawal from
relationship, and distrust." This more dynamic definition reflects the
psychological arts of the period, mostly psychoanalytic. "Disorder" was
not a commonly accepted term. Psychoanalysis and the other forms of
psychotherapy knew little about the sociometric approach, the establishing
of a base line of "normal population" responses, and the comparing of
the performance of various disordered persons against these norms.
Paralleling this, it was not popular for any theology to speak of sin
as a "deviation." Guntrip expresses the mood of this age in pastoral
counseling.

> Much Christian teaching would be nearer to the real
> problems of human living, and far more helpful in
> practice, if it were concerned less with what we might
> call theologically formalistic themes of the law of

---

[23]For example, Wise, p. 17.

> God and sin as disobedience to that law, and more
> concerned with man's need to develop mature selfhood,
> and the miseries and failures that spring from our
> actual immaturities. The preaching of theological
> formulations divorced from psychological insight be-
> comes unrealistic and does not truly contact the
> mind of the hearer.[24]

Guntrip was attempting to formulate pastoral counseling's psychological-

theological approach to the neurotic. He was correct in that a psycho-

logical understanding of the neurotic required attenuation of the legal

theme, at least as it was perfectionistically misunderstood in theology.

Guntrip's restatement of Christian purposes here is not necessarily the

most appropriate for meeting all kinds of human problems, but it is

representative of the sort of reorientation which pastoral care under-

went because of exposure to psychology. Guntrip's point is not simply

against a deviational aspect of sin, per se. Guntrip himself, for

example regarded "maturity" as a norm from which anxiety was at variance.

He also regarded "reality" as normative under God. What he was against

was the use of values simply as disenabling imperatives.[25] What he was

for was the use of "the goals of personal growth" as proper concerns,

psychologically and theologically. It must be concluded that the con-

cepts of disorder and deviation, not the terms, were still important.

---

[24]Henry Guntrip, _Psychology for Ministers and Social Workers_
(London: Independent Press Ltd., 1953), p. 148.

[25]Hulme's way of avoiding the "staircase notion" of sin was to
speak of it qualitatively instead of quantitatively. "The conflict
between what a man is and what he was meant to be is based upon the
qualitative difference between sin and righteousness." Hulme,
pp. 104-105.

It was difficult for pastoral counseling to explicate an
overarching correlation summarizing how all the varied human disorders
relate to deviation from God. The pastoral counseling literature cannot
be understood apart from what seem to be two presuppositions: one,
that God is absolutely involved. And two, that through His people He
would apply Himself to the varieties of human needs. So Guntrip wrote
specially about the neurotic. Denis Martin counseled regarding the
psychotic.[26] Roberts dealt with the humanist therapist himself.[27]

---

[26]Mairet, chapter X.

[27]Roberts' effort to deal with the "disorder" in the humanist
therapist is worth presenting in full here. He writes, "At least, so
long as the therapist's philosophical outlook is naturalistic, he is
likely to feel that, everything considered, man has done creditably.
For centuries cultural patterns have 'just growed,' like Topsy.
Amidst the laws which govern the maintenance or the destruction of a
clan, a nation, an empire, each generation has had to socialize its
infants in such a way that there would be protection for the group
against enemies from without and disruptive forces from within. The
resulting tensions between the will to live and the will to co-operate,
between hostility and love, between isolation and fellowship have been
inevitable. . . . The therapist is convinced that if what he and the
social scientists now know, or are learning, can be given adequate
implementation, then modern history will confirm the fact that man
is 'good' when given a decent chance. . . . Yet from a theological
standpoint it is impossible to overlook the symptoms of 'hoping-against-
hope' which accompany such an attitude. . . . It [the psycho-analytic
movement] has not looked at the other side of the picture, namely, the
extent to which the worst diseases of modernity have been connected
with a worship of human self-sufficiency. In one sense, to be sure,
the therapist understands these diseases better than any one else,
and he wants to divert human energy from idolatrous fixation upon the
interests of a particular race, nation or class so that they can be
directed to inclusive, humane ends. But his outlook is defective at
that point where he is held captive in the mentality which worships
'the best in man'--as though one could stop there. Without quarreling
with the ethical content of his vision of the goal for man, one must
nevertheless point out that this content is left hanging in a cosmic

The correlations of these disorders with their significance under God were many and varied. The literature did not unify all the approaches systematically.

The pastoral counseling literature struggled to express the relationship between disorder and deviation in a way that would be dynamic, enabling, and true to the disciplines involved. Outler is one who retained the theme of psychological "disorder" and the sense of theological "deviation," relating them and distinguishing them at the same time.

> He [man] stands, in the depths of his being, before
> God and over against God--a finite reagent to the
> infinite Agent. . . . God stands round the parenthesis
> of existence in which man lives, as Creator, Sustainer,
> Consummator. Man is made for sharing in such a creative
> and redemptive process, for he is made for faith, for
> commitment, for love. If this, or something like it,
> be man's true situation, it would follow that man's
> failure of fulfillment is a deeper tragedy than a
> deformity of the growth process. There is a human
> quandary which is something far worse than maladapta-
> tion or error. It is a distortion of the self's right
> relation to its ultimate ground, and concomitantly,
> with other selves. . . . This tragedy may express
> itself in many ways, in the psychodynamic processes of

---

vacuum. And one must add that there is little prospect of making
inclusive, humane aims more potent than the immediate, compelling
pressures of nationalism, totalitarianism and the class struggle
unless they can capture the religious energies of men. In the end,
these religious energies can be turned from unworthy objects to a
worthy one only by refusing to deify human qualities and purposes,
and by directing them, instead, to God Himself, in whom human freedom
and beatitude are grounded." David E. Roberts, <u>Psychotherapy and a
Christian View of Man</u> (New York: Charles Scribner's Sons, 1950),
pp. 113-114.

> neurosis or in low-level "normalcy." But deeper
> than maladjustment is the human estrangement which
> the Christian calls <u>sin</u>, which still confronts us
> as <u>the</u> human quandary, even when neurosis is cured
> or "normalcy" made tolerable.[28]

Outler is one of the few who provides cues for relating abnormality

and the specific emotional disorders mentioned earlier, to estrange-

ment from God. The purpose is, he says, always to "acknowledge our

disorder as estrangement from Him."[29] The question about norms for

disorder in psychology is not simply what these should be, but also

what one is saying with them ultimately. The points at which a

norm designates disorder have occurred, become occasions for the

ultimate question. At these points (often culturally and professionally

misidentified) are the conversational and inter-personal opportunities

to ask about the true values of God. They become the occasions at

which Law, that is God's evaluation of erroneous human values and

laws, opens people to the Gospel of Life, forgiveness and enablement.

> Outler adds,

> The Christian interpretation of the human quandary
> passes through the levels of maladjustment and
> deviation in behavior to the inner focus of self-
> hood and our primal relation to God.[30]

Through the deviations in man's social relationships can be seen the

deviation in his relationship with God. Thus psychotherapeutic

---

[28]Outler, pp. 129-130.

[29]Ibid., p. 145.

[30]Ibid., p. 132.

"disorder" and theological "deviation" meet in the concept of
relationships. In pastoral counseling the concept "relationship" be-
came a popular short-hand for the correlated "horizontal" and "vertical"
aspect of life.[31] Broken relationships always involve the psychological
and theological dimensions, disorder and deviation. As Johnson could
say, "The goal of religion is to acknowledge and improve the relatedness
of each person to God and to every other person."[32] Again, "relationship
with God is a central condition that affects all other relationships."[33]

Conclusion

The pastoral counseling literature appears to have succeeded in
drawing together the forms of psychotherapy and the content of theology
into a recognition of both the horizontal and the vertical aspects of
man's problem, specifically here an understanding of the relation of
disorder to deviation.

------

[31]"But divine guidance is by no means always a solitary matter.
The influence of other people may constitute a most important channel,
because we do not always know enough either of external realities or
of the subtle self-deceptions of our own minds. As the great theologian
Baron von Hugel once wrote: 'God works horizontally as well as verti-
cally.' We can profit greatly by the help of parents, teachers, people
with special knowledge or experience, and in some cases by the special
help of pastoral and psychiatric counsellors." W. L. Carrington,
Psychology, Religion, and Human Need (New York: Channel Press, c.1957),
p. 86.

[32]Johnson, p. 303.

[33]Ibid., p. 37.

CHAPTER IV

CONCLUSION

This paper shows that selected malady concepts of psychotherapy are correlate with certain theological counterparts. This is evidenced in the postwar pastoral counseling literature. The areas of correlation, hypothesized in the research design, are approximated in the research findings.

Specifically, correlations were found between psychotherapy and theology in regard to: (1) the concepts of the place of malady within the disciplines of psychotherapy and theology, and (2) the concepts of disorder and deviation.

The first correlational area is dealt with in Chapter II. Psychotherapy gives primacy to malady considerations, because of a concern that only as the human problem is identified is it possible to apply a relevant therapy. Biblical theology recognizes that man's malady is basic, so that if man's sin is denied then there is no need for a Savior. The psychotherapeutic and the theological concerns for the primacy of man's malady come together as pastoral counseling addresses itself to the problem of human suffering as its first concern (Guntrip).

The second correlational area is treated in Chapter III. Psychotherapy views disordered behavior as not meeting a norm. Biblical theology regards sin in part as a deviation from God's Law. Pastoral counseling brings together an appreciation of the psychotherapeutic notion of disorder and the theological view of deviation from the

Law (Wise). Pastoral counseling does this generally by assuming that
disorder on the "horizontal" dimension correlates with deviation on
the "vertical" dimension. That is, relationships between man and man
involve relationship between man and God (Johnson). Pastoral counseling
basically affirms that psychotherapy's concern for the ordering of life
is included within the theological concern for the ordering of life, and
this is proper because of Christian theology's recognition of the Maker
and Redeemer of life (Outler). Pastoral counseling appreciates the
potential presence and worth of Order implied in secular diagnoses,
and looks behind its own sometimes stereotyped notions of sin to behold
that disorder under God with which both it and psychotherapy must deal.
This can be seen notably in pastoral counseling's appreciation of the
psychotherapeutic description of neurotic disorder. The neurotic,
having developed typically under unrealistically judgmental parenting,
supposes that he must always do the impossible, with the unhappy con-
sequence that he is always climbing into God's throne and denying his
God-given capacity (Horney). In order to address the Gospel to this
problem, pastoral counseling tended to draw less on a theology about
disobedience to God, and more from a theology about unrealistic living
under God (Wise). Thus "unrealistic behavior" became one of the terms
which pointed up the correlation between psychotherapeutic disorder and
theological deviation.

The above two paragraphs' points may be restated in a summary form.
Differences are noted between the concept of the role of malady within

psychotherapy and that in theology (Roberts). The psychotherapeutic description of disorder and the theological concept of deviation, are hardly the same (Knubel). However, the psychotherapeutic data "asks a question" which only Christian theology can "answer" (Tillich). In this sense a "correlation" exists between these psychotherapeutic concepts and their theological counterparts.

Beach, Waldo, and H. Richard Niebuhr. *Christian Ethics*. New York: The Westminster Press, c.1955.

Bergsten, Göte. *Pastoral Psychology*. New York: The Macmillan Company, 1952.

Carrington, W. L. *Psychology, Religion, and Human Need*. New York: Channel Press, c.1957.

Curran, Charles Arthur. *Counseling in Catholic Life and Education*. New York: Macmillan, c.1952.

Dicks, Russell Leslie. *Meet Joe Boss*. New York: Abingdon Press, 1957.

Dubbelstein, Herman. *Psychiatry for Priests*. New York: P. J. Kenedy and Sons, 1953.

Doniger, Simon, editor. *Religion and Human Behavior*. New York: Association Press, c.1954.

Fenner, Herbert R. *The Servant of the Word*. New York: Charles Scribner's Sons, c.1941.

Grimes, Howard. *The Church Redemptive*. New York: Abingdon Press, c.1958.

Guntrip, Henry. *Psychology for Ministers and Social Workers*. 2nd edition. London: Independent Press Ltd., 1953.

_____. *Psychotherapy and Religion*. New York: Harper and Brothers Publishers, c.1957.

Hiltner, Seward. *Pastoral Counseling*. New York: Abingdon-Cokesbury Press, 1949.

Howe, Reuel L. *Man's Need and God's Action*. Greenwich, Conn.: The Seabury Press, c.1953.

Hulme, William E. *Counseling and Theology*. Philadelphia: Muhlenberg Press, c.1956.

_____. *How to Start Counseling*. New York: Abingdon Press, c.1955.

BIBLIOGRAPHY

Beach, Waldo, and H. Richard Niebuhr. <u>Christian Ethics</u>. New York:
    The Ronald Press Company, c.1955.

Belgum, David. <u>Clinical Training for Pastoral Care</u>. Philadelphia:
    The Westminster Press, c.1956.

Bergsten, Göte. <u>Pastoral Psychology</u>. New York: The Macmillan Company,
    1951.

Carrington, W. L. <u>Psychology, Religion, and Human Need</u>. New York:
    Channel Press, c.1957.

Curran, Charles Arthur. <u>Counseling in Catholic Life and Education</u>.
    New York: Macmillan, c.1952.

Dicks, Russell Leslie. <u>Meet Joe Ross</u>. New York: Abingdon Press, 1957.

Dobbelstein, Herman. <u>Psychiatry for Priests</u>. New York: P. J. Kenedy
    and Sons, 1953.

Doniger, Simon, editor. <u>Religion and Human Behavior</u>. New York:
    Association Press, c.1954.

Farmer, Herbert H. <u>The Servant of the Word</u>. New York: Charles
    Scribner's Sons, c.1942.

Grimes, Howard. <u>The Church Redemptive</u>. New York: Abingdon Press,
    c.1958.

Guntrip, Henry. <u>Psychology for Ministers and Social Workers</u>. 2nd
    edition. London: Independent Press Ltd., 1953.

-----. <u>Psychotherapy and Religion</u>. New York: Harper and Brothers
    Publishers, c.1957.

Hiltner, Seward. <u>Pastoral Counseling</u>. New York: Abingdon-Cokesbury
    Press, 1949.

Howe, Reuel L. <u>Man's Need and God's Action</u>. Greenwich, Conn.: The
    Seabury Press, c.1953.

Hulme, William E. <u>Counseling and Theology</u>. Philadelphia: Muhlenberg
    Press, c.1956.

-----. <u>How to Start Counseling</u>. New York: Abingdon Press, c.1955.

Johnson, Paul E. *Psychology of Pastoral Care*. New York: Abingdon-Cokesbury Press, 1953.

-----. *Psychology of Religion*. New York: Abingdon-Cokesbury Press, 1945.

Kean, Charles Duell. *The Christian Gospel and the Parish Church*. Greenwich, Conn.: The Seabury Press, c.1953.

Knubel, Frederick R. *Pastoral Counseling*. Philadelphia: Muhlenberg Press, c.1952.

Mariet, Philip, editor. *Christian Essays in Psychiatry*. New York: Philosophical Library, 1956.

McNeill, John T. *A History of the Cure of Souls*. New York: Harper and Brothers Publishers, c.1951

Oglesby, William Barr, Jr. *Pastoral Counseling in the Theological Curriculum*. Richmond, Va.: Union Theological Seminary, 1954.

Outler, Albert C. *Psychotherapy and the Christian Message*. New York: Harper and Brothers, c.1954.

Pike, James Albert. *Beyond Anxiety*. New York: Scribner's, 1953.

Roberts, David E. *Psychotherapy and a Christian View of Man*. New York: Charles Scribner's Sons, 1950.

Sherrill, Lewis Joseph. *The Gift of Power*. New York: The Macmillan Company, c.1955.

Stern, Karl. *The Third Revolution*. New York: Harcourt, Brace and Company, c.1954.

VanderVeldt, James H., and Robert P. Odenwald. *Psychiatry and Catholicism*. New York: McGraw-Hill Book Company, Inc., 1952.

Wise, Carroll Alonzo. *Pastoral Counseling: Its Theory and Practice*. 1st edition. New York: Harper, 1951.

-----. *Psychiatry and the Bible*. New York: Harper and Brothers, 1956.

Wood, Leland Foster. *Pastoral Counseling in Family Relationships*. New York: Commission on Marriage and the Home of the Federal Council of the Churches of Christ in America, 1949.