

SCHIZOPHRENIA

One of the most egregious errors that many Christians make, which is readily apparent among many biblical counselors, is erroneously concluding that those who suffer from schizophrenia have a spiritual problem rather than an illness and, therefore, just need a biblical solution!

Schizophrenia is defined as:

a long-term mental disorder of a type involving a breakdown in the relation between thought, emotion, and behavior, leading to faulty perception, inappropriate actions and feelings, withdrawal from reality and personal relationships into fantasy and delusion, and a sense of mental fragmentation.¹

Schizophrenia is not a common mental disorder, but, according to the American Psychiatric Association, there is no cure for it.²

E. Fuller Torrey, MD, is a research psychiatrist who specializes in schizophrenia and bipolar disorder (manic depressive illness). He is Associate Director for research at the Stanley Medical Research Institute, which conducts research on schizophrenia and bipolar disorder. In discussing the problem of stigma for schizophrenics, Torrey says:

People with schizophrenia and their families have to live with an extraordinary amount of stigma. Schizophrenia is the modern-day equivalent of leprosy, and in the general population the level of ignorance about schizophrenia is appalling.... A 1986 poll found

that 55 percent of the public did not believe that mental illness existed, and only 1 percent realized that mental illness is a major health problem. Other surveys have reported that **many people continue to believe that schizophrenia and other severe psychiatric disorders are caused by sin or weakness of character.**³

Torrey also says:

We still do not know whether “schizophrenia” is a single brain disease or several brain diseases with a final common pathway. What appears to be increasingly clear, however, is that classical “schizophrenia” **is indeed a brain disease** and not caused by a cold, rejecting mother; an unresolved oedipus complex; or ambiguous messages from the parent to the child.⁴ (Bold added.)

In his book *Surviving Schizophrenia*, which includes the latest scientific research findings, Torrey says:

Given the complexity of the brain and the fact that it is hidden away in a relatively inaccessible skull, it is hardly surprising that until recently we knew so little about schizophrenia. That is rapidly changing. What we now know about schizophrenia includes the following:

1. The disease is familial.
2. There are neurochemical changes.
3. There are structural and neuropathological changes.
4. There are neuropsychological deficits.

5. There are neurological abnormalities.

6. There are electrical abnormalities.

7. There are immunological and inflammatory abnormalities.

8. Individuals with schizophrenia are born disproportionately in the winter and spring.

9. Individuals with schizophrenia are born and/or raised disproportionately in urban areas.

10. Other abnormalities include pregnancy and birth complications, minor physical anomalies, and an absence of rheumatoid arthritis.

Torrey elaborates on each of the above 10 items and then briefly summarizes the extensive research by asking and answering a most important question:

In summary, what can be said about the brains of individuals with schizophrenia? **It can be said that schizophrenia is firmly and unequivocally established to be a brain disease, just as surely as multiple sclerosis, Parkinson’s disease, and Alzheimer’s disease are established as brain diseases.**⁵ (Bold added.)

Dr. John Street

Dr. John Street is a professor of biblical counseling at The Master’s University and Seminary (TMU&S). Street’s teaching and counseling reveal the influence of the biblical counselors found in the Association of Certified Biblical Counselors (ACBC), formerly titled National Association of Nouthetic Counselors (NANC), and the Biblical

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Letters

from  our
Readers

Martin and Deidre,

So wonderful you are now making your newsletter available online. I will do everything I can to promote your ministry and work. As I indicated in my previous communication, I am now able to make your newsletter available to [fellow believers]. California

Hello Martin and Deidre,

Have you ever studied the history as to why psychotherapy has become so popular among Evangelicals? I have had opportunity to study a bit of the Evangelical history (particularly in North America), and I discovered things that I NEVER heard of in all the years that I identified with the Evangelical movement.

In the late 1940s there was a significant new agenda that was voiced, and its popularity grew like a prairie fire. It began on three fronts: Billy Graham and his crusades, Fuller Seminary, and *Christianity Today*. The thrust of this neo-evangelicalism (as it was termed) was to re-focus their social involvement and, most devastatingly, re-evaluate some of the fundamental doctrines of the Christian faith. During the years of my Christian education, I never, ever heard of the shift that took place beginning in the 1940s. As I have studied this re-focused movement, it shone a whole new light on the problems that are so prevalent within Evangelical churches — and I would suspect that the roots of today's fascination with “mental health” are firmly entwined within this same era.

I have appreciated your vigilance in rooting out the heresies in this area of your expertise. Canada

Martin Bobgan,

I forwarded your current March/April newsletter to our elders. They do read them and are aware of the abuses and errors in the BCM [biblical counseling movement] area, thanks to your book *Person to Person Ministry*, which they have all read. I am so glad our pastor was receptive to your message and has directed the other elders and any in “counseling” capacity in the church to read as well. He had me order a bunch of them a while back. Our church is now informed and careful in this matter due to your message and your ministry. Thank you for your work. What a blessing you are in the current church climate we find ourselves in today!!! Minnesota

Dear Dr. Bobgan,

I want to express my gratitude to God for your ministry. I stumbled upon a YouTube recording of your presentation at the Metropolitan Tabernacle, UK, in 2008. I was glued to what you were saying and have since tracked down your web site and am consuming your books that you have graciously made available online.

I am a full-time Carer for my wife (and have been for nearly 15 years), who suffers from a number of mental illnesses. In that time, I have become convinced, just from experience, that psychotherapy, counselling (Christian or otherwise) causes far more harm than good.

Much of what you write about, unbeknown to me at the time, is similar, if not identical, to what God by His Spirit has been showing me over the last five or six years. I don't find many people who have seen similar here in Australia so it was incredibly encouraging to find another voice.

The churches and the Bible colleges here in Australia have been thoroughly infiltrated by psychoheresy and any challenge is met with “Christian hostility,” which is about as Christian as

Christian counselling. I am now studying for a Master's degree in leadership at a Bible college and resisting all units on counselling, because I know the lies they contain. I'm not interested in “falsehood-ology” as a study subject.

Australia

Hi,

Thank you for your ministry. I was a school and clinical psychologist before I was converted 35 years ago and called into the ministry. Your insights are so true, and psychology is so dangerous. I had, sadly, a church member say to me the other day that if someone was just allowed to “express her feelings” and to “get out her grievances” she would be healed. We need Jesus for everything, and I fully intend to respond to that person, and am preaching a sermon this week on the dangers of mind cure from a worldly perspective. God bless.

Pastor

Dear Bobgans,

I thank you for your articles on the anti-male APA Guidelines and the LGBT Agenda [PAL March-April, 2019]. Both discourses are weaponized by the State Department of “Corrections” and the Parole Board here. Men are conditioned to kowtow to the “religious” faith of “psychotherapy,” by implied threats of non-release to parole, camouflaged as “suggestions” of activities. These “programs” are driven by a female therapeutic staff here. Prisoner

Bobgans:

I appreciate your ministry. Please don't stop! I'm 29 years of age and I see the dangers of psychotherapy in the church! email

Thank you for writing to us. We read every letter, even though we are not able to answer each one personally.



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Counseling Foundation (BCF). As such, he leads the graduate program in biblical counseling at TMU&S.

An egregious teaching given by Dr. John Street at a Biblical Counseling & Discipleship Association Southern California Training Conference is in a talk in which he discusses thirteen psychological labels and avoiding the use of them. One of the labels he discusses is that of “schizophrenia.”⁶ He begins by saying, **“schizophrenia is just a nice Greek word for people who believe that they have personalities talking in the back of their head.”**

To begin with, Street has oversimplified a complex and not completely understood condition that comes in a variety of forms. It might surprise Street to know that there are some schizophrenics who do not “believe that they have personalities talking in the back of their head.” **His overly simplistic statement is medically appalling as any neuropsychiatric expert would tell him.**

Street then compounds his grievous error by saying, **“Actually working with schizophrenia’s not hard at all”** (bold added). To demonstrate how simple it is to work with schizophrenics, Street begins by saying, “If this represented all the schizophrenics in the world [at this point he stretches his arms out wide], only this many [he holds his thumb and forefinger almost together] are really genuine true Christians.” In other words, there are almost no “genuine true Christians” who suffer from schizophrenia.

Since only the Holy Spirit would know how many are and are not Christians, Street has obviously usurped the place of the Holy Spirit as he presumes to have knowledge that there is only a small number of schizophrenics who are believers, and he does so on the flimsiest and false biblical understand-

ing. **Such certain knowledge belongs only to God.**

Street proceeds to tell how one can **cure** schizophrenics by saying:

And of those people [schizophrenics] you have to settle one thing early. Who’s going to define your reality for you? The voices in the back of your head or the Bible? What’s God’s Word say? If you can settle that issue early with this: you can’t work with all these other people. All these schizophrenics think that they’re Christian; they’re not. But you’d only work with a Christian. Remember all counseling is pre-counseling until a person comes to Christ. Right? Well, if you can settle that issue early: Who defines your reality for you? Is it what God’s Word says or is it that voice in the back of your head that says hurt yourself or hurt that other person?

Hopefully Street’s counseling and that of those who follow his teachings will not increase the suicide rate among those who suffer from schizophrenia.

So all one needs to do is to make sure the schizophrenic is a Christian because, according to Street, “you’d only work with a Christian” and “if you can settle that issue early” and “who defines reality for you... God’s Word” or “that voice in the back of your head,” then and only then a possible easy cure. While teaching people to base their reality on God’s Word is sound advice, Street overlooks the complexity of schizophrenia and its range of symptoms.

Schizophrenia is one of the most enigmatic of the mental disorders and its cure has been elusive to this day. For Street to casually set aside the billions-plus dollars spent and the mul-

titudinous hours labored on research on schizophrenia by brilliant minds in his promotion of his personal opinion based on his proposed schizophrenia cure restricted to only an extremely small group of Christians that one is able to identify is reprehensible!

Harvard Medical School reports: “One in a hundred persons will at some time suffer from schizophrenia. **Its causes are obscure, and no way is known to prevent or cure it.**”⁷ (Bold added.) In his book *Surviving Schizophrenia*, E. Fuller Torrey, MD, refers to schizophrenia as “today’s most misunderstood illness” and says:

Contrary to the popular stereotype, schizophrenia is an eminently treatable disease. That is not to say it is a curable disease, and the two should not be confused. Successful treatment means the control of symptoms, whereas cure means the permanent removal of their causes. Curing schizophrenia will not become possible until we understand its causes; in the meantime we must continue improving its treatment.⁸

Street’s “cure” for “Christian” schizophrenics is based upon his say-so and could never be put to the scientific test; how could it be? To begin with, who or what establishes a person as a Christian, when Street says, “All these schizophrenics think that they’re Christian; they’re not”? Consider the amount of confusion and guilt that Street’s blundering opinion will cause Christians who already suffer from schizophrenia.

Just as Street erroneously justifies his use of the Bible to support his unbiblical problem-centered counseling, he also erroneously uses the Bible to support his corrupt medical understanding of schizophrenia and his supposed cure. Consider the person with schizophrenia, being counseled by Street or by someone

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Ψ Psych Notes

Psych Notes are selected from numerous articles from professional journals and other publications. The ones used are chosen for their possible interest to readers, but not necessarily because this ministry recommends them.

The Brain & Loss of Smell

“A diminished sense of smell could be a symptom of something as harmless as a seasonal allergy, or it could be a sign of a heightened dementia risk. People who become visually or hearing impaired often find ways to maintain a wonderful quality of life, while others find those sensory changes isolating—a life change that can lead to depression and other problems.

“When all your senses are working properly, you may not give them much thought. But when one of them starts to change, it’s important to pay attention and consult a doctor. And while impaired vision or hearing should prompt a visit to specialists in those fields, losing your sense of smell, for example, may be more puzzling.

“Zeina Chemali, MD, MPH, director of Neuropsychiatry Clinics at Massachusetts General Hospital, says that if you notice a reduction in your sense of smell, you should first consult your primary care physician if the change can’t be accounted for by allergies, an acute upper respiratory infection, or obstructive sleep apnea. ‘A progressive decrease in a sense of smell has been linked to neurodegenerative diseases, such as Alzheimer’s disease and Parkinson’s, as well as the low likelihood of a tumor around the olfactory nerve or orbitofrontal region of the brain.’ she explains. ‘A referral to a neurologist would help with a detailed assessment’” (excerpted from *Mind, Mood & Memory*, Vol. 14, No. 11, p. 4).

Salty Gut-Brain Connection

“Interestingly, there is a growing body of work showing that there is communication between the gut and brain, now commonly dubbed the gut–brain axis. The disruption of the gut–brain axis contributes to a diverse range of diseases, including Parkinson’s disease and irritable bowel syndrome. Consequently, the developing field of gut–brain axis research is rapidly growing and evolving. Five years ago, a couple of studies showed that high salt intake leads to profound immune changes in the gut, resulting in increased vulnerability of the brain to autoimmunity—when the immune system attacks its own healthy cells and tissues by mistake, suggesting that perhaps the gut can communicate with the brain via immune signaling.

“Now, new research shows another connection: immune signals sent from the gut can compromise the brain’s blood vessels, leading to deteriorated brain health and cognitive impairment. Surprisingly, the research unveils a previously undescribed gut–brain connection mediated by the immune system and indicates that excessive salt might negatively impact brain health in humans through impairing the brain’s blood vessels regardless of its effect on blood pressure” (excerpted from Johnathan D. Grinstead, “A New Connection between the Gut and the Brain,” *Scientific American Mind*, <https://www.scientificamerican.com/article/a-new-connection-between-the-gut-and-the-brain/>).

Marijuana and Violence

“Along with alcohol, the drug that psychotic patients use more than any other is cannabis: a 2010 review of earlier studies in *Schizophrenia Bulletin* found that 27 percent of people with schizophrenia had been diagnosed with cannabis use disorder in their lives. And unfortunately—despite its reputation for making users relaxed and calm—can-

nabis appears to provoke many of them to violence....

“The most obvious way that cannabis fuels violence in psychotic people is through its tendency to cause paranoia—something even cannabis advocates acknowledge the drug can cause. The risk is so obvious that users joke about it and dispensaries advertise certain strains as less likely to induce paranoia. And for people with psychotic disorders, paranoia can fuel extreme violence....

“In most cases, studies find that the risk is at least as significant as with alcohol. A 2012 paper in the *Journal of Interpersonal Violence* examined a federal survey of more than 9,000 adolescents and found that marijuana use was associated with a doubling of domestic violence; a 2017 paper in *Social Psychiatry and Psychiatric Epidemiology* examined drivers of violence among 6,000 British and Chinese men and found that drug use—the drug nearly always being cannabis—translated into a five-fold increase in violence...

“For centuries, people worldwide have understood that cannabis causes mental illness and violence—just as they’ve known that opiates cause addiction and overdose. Hard data on the relationship between marijuana and madness dates back 150 years, to British asylum registers in India. Yet 20 years ago, the United States moved to encourage wider use of cannabis and opiates.

“In both cases, we decided we could outsmart these drugs—that we could have their benefits without their costs. And in both cases we were wrong. Opiates are riskier, and the overdose deaths they cause a more imminent crisis, so we have focused on those. But soon enough the mental illness and violence that follow cannabis use will also be too widespread to ignore” (excerpted from Alex Berenson, “Marijuana, Mental Illness, and Violence,” *Imprimis*, Vol 48, No. 1).

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Porn Explosion

“Mere decades ago, saying porn in public might have resulted in sideways glances and quieted conversations. Now, porn is a mainstream pastime—and it ushers in several real-world problems....

“Health professionals may disagree on the exact parameters porn addiction should take. However, many experts understand the need to help people who are watching porn to the detriment of physical health, work and personal relationships....

“While health organizations play catch-up on this disorder, both men and women are taking in high amounts of porn content.

“The famed explicit site Pornhub recently stated that its site received over 30 billion hits in 2018, reports *Esquire*. Of those hits, the United States was the biggest consumer. Americans stayed on the site longer than any other nationality, and their time spent viewing porn increased from the previous year.

“According to Covenant Eyes, an Internet accountability software company, roughly 28,000 users are watching pornography every second. Users are also spending around \$3,000 on porn every second. For mobile Internet users, 1 out of every 5 mobile searches is for porn.

“Women aren’t excluded from this heavy porn-watching either. Pornhub released information in 2017 that revealed women spending more time watching porn than men, reports anti-porn advocacy group Fight the New Drug. Women were also more likely to search for harder versions of porn than men....

“Covenant Eyes states that 56 percent of divorce cases involved a partner’s obsessive interest in porn sites. In addition, 64 percent of Christian men and 15 percent of Christian women report watching porn at least once a month. This is a departure from the teachings Christians

adhere to in their worship” (excerpted from Dr. Manny Alvarez, “Porn Addiction: Why Americans are in more danger than ever,” <https://www.foxnews.com/health/porn-addiction-why-americans-are-in-more-danger-than-ever>).

The Gender Stress Gap

“Women are twice as likely to suffer from severe stress and anxiety as men, according to a 2016 study published in *The Journal of Brain & Behavior*. The American Psychological Association reports a gender gap year after year showing that women consistently report higher stress levels. Clearly, a stress gap exists....

“It’s not just inside the home, though. Research from Nova Southeastern University found that female managers were more likely than male managers to display ‘surface acting,’ or forcing emotions that are not wholly felt. ‘They expressed optimism, calmness and empathy even when these were not the emotions that they were actually feeling,’ the study said.

“Surface acting is a prime example of ‘emotional labor,’ a concept that the writer Jess Zimmerman made familiar in a 2015 essay for *The Toast*. The essay sparked a massive thread on MetaFilter, with hundreds of women speaking up about their own experience with emotional labor: the duties that are expected of you, but go unnoticed....

“Like domestic labor, emotional labor is generally dismissed and not labeled work, but research shows it can be just as exhausting as paid work. Emotional labor can lead to insomnia and family conflict, according to a study published in *Personnel Psychology*. Sure, circumstantial stress, like losing a job, may lead to these same issues, but emotional labor is not circumstantial. It’s an enduring responsibility based on the socialized gender role of women....

“The stress problem extends beyond mental health when you consider the

link between chronic stress, anxiety and heart health. Worse, most of what we know about heart disease — the leading cause of death in both men and women — comes from studies involving men, but ‘there are many reasons to think that it’s different in women,’ Harvard Medical School reported.

“For example, women are more likely to experience disturbed sleep, anxiety and unusual fatigue before a heart attack. Stress is so normalized, it is easy for women to shrug off those symptoms as simply the consequences of stress. Many women also do not experience chest pain before a heart attack the way men do, which leads to fewer women discovering problematic heart issues” (excerpted from “Kristin Wong, ‘There’s a Stress Gap Between Men and Women. Here’s Why It’s Important,’” *The New York Times*, 11/14/18, <https://www.nytimes.com/2018/11/14/smarter-living/stress-gap-women-men.html>).



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PsychoHeresy Awareness Ministries

**4137 Primavera Road
Santa Barbara, CA 93110**

805-683-0864

bobgan@pamweb.org

<http://www.pamweb.org>

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he has trained, who tries unsuccessfully to follow Street's plan, is not "biblically cured," and ends up concluding that he is willfully hearing "voices in the back of [his] head" and/or that he is eternally lost and rejected by God. Think of what might happen to one who not only continues to be plagued by voices, but enters into deep despair. **Hopefully Street's counseling and that of those who follow his teachings will not increase the suicide rate among those who suffer from schizophrenia.**

Imagine all those MABC students and those world-wide who see or hear Street's presentation on schizophrenia believing this egregiously false teaching and then counseling their counselees accordingly. These counselors will erroneously assume that **all** schizophrenics "have personalities talking in the back of their head" and that the counselor merely needs to determine whether the counselee is a Christian and proceed to lead the counselee to listen to God instead—and then: "**abracadabra,**" a cure!

And, imagine the potential lawsuits that may occur because of this teaching carried out by Street and all these biblical counselors who follow him. This is one more tragedy of Street's false teaching that is available at TMC&S and the BCDASoCal web site for anyone in the world to see and hear and erroneously believe and follow. Because of Street's position and background and because Dr. John MacArthur, who heads TMC&S, is so highly regarded world-wide, many will embrace these teachings.

E. Fuller Torrey, M.D, quoted earlier, is a research psychiatrist specializing in schizophrenia and bipolar disorder. Torrey is the executive director of the Stanley Medical Research Institute

and has written several important best-selling books on mental illness. Torrey is an eminent research authority, who has over many years seen numerous patients suffering from schizophrenia and bipolar disorder. Therefore, we were interested in Torrey's response to Street's teaching on schizophrenia.

We were also interested in Torrey's medical response to Street's belief that bodily diseases are "easily discernible" and that "a good thorough physical" will rule out disease, if the physical reveals "no sign of any organic abnormalities." In addition, we were curious as to what Torrey would say about Street's views on schizophrenia.

For the Ashers, "a schizophrenic should be considered an unbeliever until proven otherwise (even if he has a history of effective Christian ministry)."

Torrey responded to us as follows:

Dr. Street's advice betrays a woe-ful lack of knowledge. Depression and many other psychiatric disorders are physical diseases of the brain which are not detectable by "a good, thorough physical," including blood tests. Psychiatric disorders can be caused by genetic, infectious, metabolic, and other organic etiologies, some of which are detectable by a physical exam and blood tests, but **many cannot be.**

His [Street's] statement about schizophrenia is simply ignorant. I have known many "true Christians" who have schizophrenia. **The fact that Dr. Street is in a teaching position is scandalous.**⁹ (Bold added.)

Marshall and Mary Asher

The back cover of *The Christian's Guide to Psychological Terms*, Second Edition, describes its authors:

Marshall and Mary Asher are graduates of the Master's College with Master of Arts degrees in biblical counseling. They are both certified by the Association of Certified Biblical Counselors. Mary also holds a degree in psychology. Together they serve Christ as biblical counselors at Redeemer Community Church of San Antonio, Texas, where Marshall is an elder.¹⁰

Because we have been concerned about how some biblical counselors view schizophrenia, we turned to that page in Ashers' *The Christian's Guide*. Under the "Biblical Description" for schizophrenia, the Ashers say:

Schizophrenia is an exaggerated response to fear, guilt, and hopelessness. He has unmitigated guilt and much to fear. For this reason, **a schizophrenic should be considered an unbeliever until proven otherwise (even if he has a history of effective Christian ministry).**¹¹ (Bold added.)

Note the difference between Street's view of "Schizophrenics as Christians." For Street, "there are almost no 'genuine true Christians' who suffer from schizophrenia." For the Ashers, "a schizophrenic should be considered an unbeliever until proven otherwise (even if he has a history of effective Christian ministry)." Instead of "almost no" (Street), it is absolutely "no" for the Ashers.

Compare Street's cure, stated earlier, for the schizophrenic, which is the answer to his question, "Who's going to define your reality for you?" with the Ashers' cure from their brief response:

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“Teach the Gospel.... Confront them with their sin and point them to the Savior.... Regeneration will transform them.”¹⁰ In other words, once they are regenerated, they will no longer be schizophrenic, according to the Ashers.

Torrey’s remarks about schizophrenics as Christians apply to the Ashers, only more so because of their extreme position. Torrey would be clearly disappointed with the Ashers and doubly condemn their ignorant view of schizophrenics as “unbelievers.”

Rev. Dr. Robert J. K. Law and Malcolm Bowden

Rev. Dr. Robert J. K. Law and Malcolm Bowden, authors of *Breakdowns are good for you!* subtitle their book *A unique manual for True Biblical Counselling*.¹² The cover also asks a provocative question, which reveals the direction of the authors: “Is self-pity the cause of ‘mental illness’?” The authors claim they offer “True Biblical Counselling” (TBC) and give their readers the “true causes” of “mental illness”: self-centeredness and self-pity. Law was an experienced psychiatrist until he entered the Anglican ministry. Bowden is a creation science writer.

Robert Law and Malcolm Bowden begin their section on schizophrenia by saying:

Of all the various “mental illnesses” Schizophrenia is one of the most difficult for psychiatrists to deal with. Orthodox practitioners insist that it is definitely due to some cause over which the patient has no control, such as chemical imbalance, genetic inheritance, etc. We, and a few others, however, contend that it is almost entirely due to bad (**i.e. self-pitying**) behaviour. If there are any other external factors, then they are not the controlling cause but possibly

a minor contributory factor. If it can be shown to be a behavioural problem, as we hope to do, then virtually all other “illnesses” that lack any specific organic cause are even more easily explained as a behavioral problem. **Schizophrenia, therefore, is a “test case” of the two approaches.**¹³ (Bold added.)

Extraordinary claims without extraordinary evidence smack of quackery.

Before we discredit Law and Bowden through their “test case” of schizophrenia, we wish to challenge their reference to “a few others” who “contend that it is almost entirely due to bad (**i.e. self-pitying**) behavior.” We repeat, none of the individuals they favorably name, including Dr. Jay Adams and Dr. William Glasser, would endorse their unique position. Law and Bowden may claim Adams, Glasser, and others, but we predict they will not obtain a written endorsement for their self-pitying preoccupation from any of them.

Law and Bowden say their position is unique. Their position would be better described as extraordinary. They make a variety of extraordinary claims. Some extraordinary claims require faith to believe them; others require scientific evidence. **We state categorically that Law and Bowden’s extraordinary claims for “a full cure,” “proven totally effective with no relapse”¹⁴ require extraordinary evidence,** and they only provide evidence based on faith (theirs and their readers’) and not scientific evidence. **Extraordinary claims without extraordinary evidence smack of quackery.** Law and Bowden’s only evidence is anecdotal and personal testimonies, which require an extraordinary

amount of faith to believe. Anecdotes and personal testimonies may be interesting to read, but should never be relied upon for extraordinary claims, unless accompanied by scientific evidence. We are not impressed with anyone, regardless of academic credentials, who wreaks havoc with or ignores the scientific method related to their extraordinary claims.

We give two of many quotes that reveal Law and Bowden’s view of schizophrenia: (1) “Not wanting to take responsibility is a prime cause of depression and schizophrenia” and (2) “schizophrenia, like mental illnesses in general, is far from being an ‘illness’ but a moral problem of pride, self-centeredness, self-pity and avoidance of responsibility for guilty actions in the past.”¹⁵

In the section on schizophrenia, where Law and Bowden present “proof” for their position, they say:

Treating schizophrenia as a behavioural problem **definitely** produces results in returning patients to society both rapidly and with a very high success rate.

With all the evidence set out above, and much more could be quoted, we ask how anyone can honestly hold to the concept that schizophrenia is a “mental illness.” **Surely these facts are incontrovertible, and we would claim that our case is proven.**¹⁶ (Bold added.)

Their “case is proven” anecdotally, but **not scientifically!**

Dr. Heath Lambert

Dr. Heath Lambert is the senior pastor of First Baptist Church of Jacksonville, Florida. He taught counseling at Southern Seminary and served as the Executive Director of the Association of Certified Biblical Counselors from 2013 to 2018. Lambert authored the first

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chapter of the book *Counseling the Hard Cases (CTHC)* and titled it “Introduction: The Sufficiency of Scripture, the Biblical Counseling Movement, and the Purpose of This Book.” Lambert’s main theme is the sufficiency of Scripture for the hard cases. Lambert quotes Dr. Ed Welch as saying that the Bible is “able to speak to the common problems we all encounter.... But it also speaks to **distinctly modern problems** such as depression, anxiety, mania, **schizophrenia** and attention deficit disorder, just to name a few”¹⁷ (bold added). Welch is in error in that the problems listed are not “distinctly modern problems,” but merely modern names for symptoms that have always existed. However, Welch’s theme about the use of the Bible is coterminous with Lambert’s sum and substance subject of the sufficiency of Scripture for the “Hard Cases.”

Lambert notes that students ask about such hard cases as “**schizophrenia**, sexual abuse, eating disorders, bipolar” and “dissociative identity disorder”¹⁸ (bold added). The only other place **schizophrenia** is mentioned in *CTHC* is on page 172 where it is said, “The people who accept our invitation often come with difficult issues to overcome: **schizophrenia**, bipolar disorder, suicidal to name a few” (bold added). However, that chapter is about “Tony and Bipolar Disorder.” Schizophrenia is listed in passing as one of the hard cases. Nevertheless, there is **no example** in all ten *CTHC* cases of schizophrenia being cured, let alone dealt with. **But, a cursory reading of *CTHC* would lead one to conclude that schizophrenia can also be dealt with through Scripture alone, along with the other “Hard Cases.” With no clarification by Stuart Scott or Lambert as editors, such statements are extremely egregious.**

Psychiatrist Laura Hendrickson, MD, the biblical counselor who does the first case in *CTHC*, says, “There is no known cure for schizophrenia.”¹⁹ In contrast, Scott and Lambert’s view of a biblically curable schizophrenia is held by many biblical counselors and will be held by many more and pursued by others who undiscerningly read *CTHC*. This is doubly bogus by those who practice according to this view, first by the fact that true schizophrenia has no known cure, and, second, because Scott and Lambert list it as a spiritual disorder curable by biblical means. **That is not to say we cannot minister Christ to schizophrenics as we have in the past and currently do.**

“...schizophrenia is firmly and unequivocally established to be a brain disease....”

Dr. E. Fuller Torrey

Conclusion

We quoted Torrey’s summary of scientific research at the beginning of this article, and we repeat it here:

It can be said that schizophrenia is firmly and unequivocally established to be a brain disease, just as surely as multiple sclerosis, Parkinson’s disease, and Alzheimer’s disease are established as brain diseases.²⁰ (Bold added.)

Unfortunately the foregoing examples are quite characteristic of too many Christians who, out of ignorance, spiritualize schizophrenia! It is important for Christians to be aware that **in the future more mental-emotional-behavioral designations will be proven to be objectively based as biological causes of the symptoms are discovered.**

Recommendation

We recommend that Christians who minister to others begin with the understanding that all individuals, regardless of their mental-emotional-behavioral symptoms or designations, can be ministered to biblically, as long as a rational conversation can take place and that the content of the conversation is undergirded by love and is biblically-based.

All decisions regarding whether to take or stop psychotropic medications should be done only under the supervision of a medical doctor.

Endnotes

- 1 “Schizophrenia definition” <https://www.google.com/search?client=firefox-b-l&q=schizophrenia+define>, 12-12-2018.
- 2 “What is Schizophrenia?” American Psychiatric Association, <https://www.psychiatry.org/patients-families/schizophrenia/what-is-schizophrenia>, 12/12/2018.
- 3 E. Fuller Torrey. *Surviving Schizophrenia: A Manual for Families, Patients, and Providers* (5th Edition). New York: Harper, 2013, pp. 394-395.
- 4 E. Fuller Torrey. *The Death of Psychiatry*, Radnor, PA: Chilton Book Company, 1974, p. 158.
- 5 Torrey, *Surviving Schizophrenia*, op. cit., pp. 121, 130.
- 6 John Street, “Gathering Data: Discerning Problems Biblically,” Video Session Four, Biblical Counseling & Discipleship Association Southern California (BCDASoCal) Training Conference, Fall 2011, <http://bedasocal.org>. All of this critique of Street is from this same video.
- 7 Harvard Medical School *Mental Health Letter*, Vol. 2, No. 12, p. 1.
- 8 Torrey, *Surviving Schizophrenia*, op. cit., p. 156.
- 9 E. Fuller Torrey email 9/13/12.
- 10 Marshall and Mary Asher. *The Christian’s Guide to Psychological Terms*, 2nd ed. Bemidji, MN: Focus Publishing, 2004, 2014, back cover. Subsequent references to this book will be in parentheses within the text of this section.
- 11 *Ibid.*, p. 180.
- 12 Robert J.K. Law and Malcolm Bowden. *Breakdowns are good for you!* Bromley, UK: Sovereign Publications, 1999.
- 13 *Ibid.*, p. 47.
- 14 *Ibid.*, pp. 7, 21.
- 15 *Ibid.*, p. 57.
- 16 *Ibid.*, p. 55.
- 17 Heath Lambert, “Introduction: The Sufficiency of Scripture, the Biblical Counseling Movement, and the Purpose of This Book” in *Counseling the Hard Cases*, Stuart Scott and Heath Lambert, eds.. Nashville, TN: B&H Publishing Group, 2012, p. 17.
- 18 *Ibid.*, p. 24.
- 19 Elyse Fitzpatrick and Laura Hendrickson. *Will Medicine Stop the Pain?* Chicago: Moody Publishers, 2006, p.175.
- 20 Torrey, *Surviving Schizophrenia*, op. cit., p. 127.

