

## Making Biblical Truth Attractive to Hurting People

Biblical truth rightly applied brings great blessings is a principle that holds for all of life. How is it possible to be blessed when a person is hurting, really hurting? The person may have been diagnosed by some expert in the medical and counseling field and taught that victory comes only in terms of better or good feelings. The person himself may faced with the tension of seeking and getting relief that may or may not come. This lecture will explore ways of honoring God even when it seems humanly impossible or unlikely.

A goal of every believer is to practice and present biblical truth to others by word and deed. In God's providence, opportunities for doing both will come. One goal of biblical counseling is to emphasize the sufficient and far superior answer that God has provided in his Word. We do that by making biblical truth attractive. In our psychologized and medicalized culture, how do we that?

I. As a biblical counselor, I find that it is best to avoid discussing whether the person's condition is a "medical disease" unless there is *clear evidence* one way or the other.

A. By *clear evidence* I mean objective measures that determine the presence and activity of a disease.

B. Hopefully the person should be able to provide credible facts regarding the diagnosis.

C. But no matter the diagnosis you are to emphasize core medical facts remembering that you don't need to be a physician to do so.

D. Here are simple and helpful facts:

1. Something wrong in and with the body are core principles for helping the person understand what is going on.

2. Much of what is called "disease" is simply a label (for more information, see the "Labels: Categories and Descriptions of Psychological Disorders: A Biblical Analysis" lecture in this series).

a. How will you tell?

b. Train and work with a biblically-informed and motivated physician.

3. Symptoms are subjective, known only by self report.

a. They (examples: feelings of pain and fatigue) may or may not improve, and no cause may be found for them.

b. They may be related to:

1) Actual tissue damage in the body - disease.

2) The physical use of the body, as a good or bad steward.

3) Deteriorating bodies as part of God's judgment on sin and his and curse.

4) Unbiblical thinking and wanting.

4. Signs are objective, can be verified, and may or may not correlate with symptoms.
5. Example: arthritis and rheumatism have similar symptoms but different signs.
6. Ancillary studies such as blood work and radiographic studies may be helpful.

- D. Physical function can improve even if the disease itself isn't cured or controlled, and signs and symptoms (especially the latter) may remain.
- E. Actual disease pathology may improve even if symptoms remain.

## II. The importance of "having" a disease, condition, or label

- A. The person may want to know if the counselor (and doctor) agree on what to call 'it':

1. Determine the reason why it is important for him to know.
2. Determine the advantages and disadvantages for having a label and from whose perspective.
3. A proper diagnosis may allow the physician to provide specific and proven treatment, perhaps a better likelihood of "cure," "peace of mind," and cessation of ongoing diagnostic procedures.
4. But a label may be used as a reason for complaining often called symptoms, for obtaining disability, for eliciting understanding and sympathy from others, and for victim-hood.

- B. As a friend or counselor, agreeing or disagreeing that a "disease" is present doesn't change the fact that the person has symptoms, and it doesn't change my approach to him:

1. He is a real person with a real problem and real complaints.
2. A label may not be helpful from **my** standpoint (doctor or counselor or both), and better, from God's perspective.
3. The condition itself may not have an *organic* basis, but the person's symptoms are real.
4. **My** approach doesn't change according to what I think about the condition or whether I think the label is helpful.
  - a. I know that the person is a whole person who thinks, desires, and acts.
  - b. I know man is a duplex being.
  - c. I know that there is a connection between the inner and the outer man.
  - d. I know that thoughts, desires, actions and feelings are interrelated.
  - e. I can help him by ministering to the whole person.
5. For most physicians, the person's medical treatment does not change according to whether the person is a believer or not.

- a. The Christian physician's approach to the patient should differ from the unbeliever.
- b. Unbelievers don't have a relationship with Christ, the Holy Spirit, and the Word.
- c. Believers do, but too often they don't acknowledge the fact and value of those resources and function as an unbeliever.
- d. Believers, both doctor and patient, too often underutilize biblical truth in the practice of medicine and of receiving of medical care.

III. My goal is to show him the superior, clear, infallible, and authoritative answers that God has provided for him in the Bible irrespective of what his condition is called and in the time allotted to me.

- A. This will require *pushing the antithesis*: contrasting his view and mindset (really his thesis) regarding what is wrong and what is the best way to "handle it" with God's superior way of responding to God's providence (life).
- B. I want to move him away from the condition and treatment to the God of all of life including his problem and his response in light of that God and his Word.
- C. I will have him consider his approach to his problem and the results.
- D. When life is predicated on the "I wantsies" and entitlement, feelings are the person's guide and authority. The results are often:

- 1. Bondage
- 2. Victim-hood
- 3. A 'roller coaster' lifestyle wondering and worrying when relief will come and for how long

IV. The following truths are nonnegotiable:

- A. The Bible has much to say about all types of problems including his. Have him personalize them, his God and God's help.
- B. The Creator designed his body, and He has given him the owner's manual for life.
  - 1. Living to please God follows His design for every believer (Ephesians 1:4).
  - 2. Pleasing God follows Christ's life/example and pleases the Father (John 4:31-34; 2 C 5:9).
  - 3. God blesses His children who follow in His Son's footsteps.

C. Take heart: there is a God of promise and are biblical principles for addressing physical problems including pain and misery, and his response to them.

V. If he is a believer help him put God in the problem (He is already there!) properly.

A. Several questions that will help are:

- 1. Has God failed him by not providing a cure, relief, and/or a diagnosis?

2. What is God's purpose for placing him in his situation?
3. How does 2 Corinthians 12:6-10 assist him in addressing his situation?

B. Help him acknowledge that aggressively applying biblical truth:

1. Honors God
2. Is the best thing that he can do for himself and family
3. See Proverbs 3:5-8.

C. Help him rightly apply biblical truth which leads to victory even if cure doesn't come.

E. Help him acknowledge and act upon the fact that the application of biblical truth requires a right relationship to God and acting upon it at any given moment.

F. Gently but firmly remind him that a right relationship with God doesn't guarantee cure or healing. Look at Jesus and Paul.

G. Highlight his life by reference to Christ's highlight:

1. Pleasing God provides a satisfaction and contentment in this life that can resemble that which Christ experienced as the God-man: John 4:31-34 and 2 C 5:9.
2. True victory is a reality and only for the believer: Romans 8:35-39.

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