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Bringing Love and Joy Into Counseling

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Currently many theories within the field of psychology ascribe to a hidden assumption that individualism is a value one should pursue in order to obtain an ideal life. The assumption of individualism is that happiness comes from living a life focused on the self, seeking self-fulfillment. This article looks at the impact this assumption has had on the practice of psychotherapy and asserts that happiness is found through living one’s life in accordance with the moral standard of love, or charity. A definition of love is given, and the article discusses and illustrates with clinical examples how love has the power to act as a healing agent. Finally the dangers of misinterpreting love are examined.

Slife and Williams (1995) assert that all psychological theories contain assumptions about the nature of the world and human beings. For every assumption about human nature there is an implication about how human beings can or even should behave as they strive for an ideal life. Accordingly, counselors may benefit from recognizing implications within the assumptions inherent in psychological theories and ideas within which they operate. The purpose of this article is to explore a value/virtue that has not been sufficiently explored within the practice and study of psychology. That value is charity, or the pure love of Christ (Moroni 7:47). After exploring charity, the authors discuss connections between love and joy, and hypothesize that living one’s life in congruence with charity will lead one to feelings of happiness or joy.

Many assumptions common in psychological theory and practice have grown out of the culture and belief systems pervasive when Freud first developed his theory of psychoanalysis. Freudian psychological thought emerged at a time when natural science was seen as the principal way of knowing (Rychlak, 1981). While Freudian theory was consistent with many of the assumptions found within the natural sciences (e.g. determinism, naturalism, ethical relativism, reductionism, ethical hedonism), Freud’s overall theory of psychoanalysis fell short of achieving the goal of explaining behavior in observable terms. Freud’s concepts of the id, the ego, and the superego were not observable constructs, and consequently others in natural science areas (e.g., biologists, chemists, physicists, etc.) considered psychology as a pseudoscience. Indick (2002) explains how in...
reaction to these negative perceptions from other scientists during the early 20th century, in an attempt to ‘alleviate their deep sense of physics envy,’ post-Freudian psychologists adopted empiricism, taking the hard sciences' prize of statistical power and translating it into a boon of academic, economic, and political power” (p. 24).

With the imitation of hard sciences within the field of psychology came certain assumptions and implications. One assumption was that through the use of the scientific method psychologists would be able to be objective and value-free in their study of human behavior. This ability to remain objective and value-free would eliminate bias in the understanding of human behavior (Elmes, Kantowitz, & Roediger, 1995). However, this assumption of objectivity held within it the implication that it would be ideal for psychologists to remain value-free and objective within the research and practice of psychology. Thus the study of psychology was perceived as an objective, value-free enterprise.

As the field of psychology advanced and large numbers of studies were undertaken, many (i.e., Bergin, 1980; Cushman, 1993, 2002; Gergen, 1985; Hoshmand, 2001; Kirshner, 1993; Martin & Sugarman, 1999; Parrott, 1999; Richardson & Fowers, 1998; Slife & Williams, 1995) found it impossible to remain value-free while conducting therapy or practicing psychology. Accordingly, these theorists began to note an implied value system underneath the original assumption that psychology could be value-free (Richardson & Fowers, 1998).

Once psychologists began to understand that their work could not be absolutely value-free, some researchers began to investigate what psychological theories promoted as idealistic values for human beings. One of the primary values found within many theories is individualism. In fact, Richardson and Zeddies (2001) pointed out that individualism is the “disguised ideology” that has led many individuals to be obsessed over the self, seeking for factors that lead to an individual's happiness, satisfaction, and fulfillment (Frank, 1978; Richardson & Fowers, 1998). This level of obsession with the self is evidenced by the fact that “everyday conversations are larded with references to identity, self-concept, self-esteem, self-image, self-fulfillment, [and] self-actualization” (Hewitt, 1989, p. 3). In fact, Erich Fromm (1947) predicted as early as the 1940s that if psychology remained obsessed with the self, the obsession would eventually lead to a narcissistic culture. Further, Hoshmand (2001) argues that psychology has created a new culture, a culture of the self that has brought about a generation of individuals fittingly labeled the “me generation” (p. 108), where each person practices the art of “self-worship” (Vitz, 1977, p. 10).

Individualism holds many implications for the practice of psychotherapy. First is the implication that most clients presenting for therapy will benefit by seeking after characteristics associated with individualism: i.e., “individual autonomy, fulfillment, happiness, personal success, interpersonal intimacy, and so on” (Dueck & Reimer, 2003, p. 428). Consequently, “most psychotherapies unwittingly promote a form of ‘expressive individualism,’ the idea that if individuals are free to pursue their private economic self-interest, society as a whole will benefit” (Doherty, 1995, p. 8).

A potential danger in individualism is that the self becomes “the center of his [or her] moral universe, and concern for others is believed to follow from his [or her] own self-realization” (Frank, 1978, p. 6). Consequently, a sense of well-being or happiness is assumed to be derived from focusing on the self, excluding any obligations toward others. The effects of this indoctrination can be seen in the clients who when asked what they want out of life or what they want out of therapy report that they want “to be happy.” Following this statement, they reveal their indoctrination with individualism: “I need to take time off and just focus on me,” or “From now on, I am going to do what I want and not try and please everybody else,” or “I need to find out who I am—until I do I am not going to start any meaningful relationships” or “I am going to try and find happiness on my own.” These phrases exemplify the fact that clients believe this valuing of the individual over others will lead them to happiness.

Not only are clients accepting psychology’s emphasis on self-satisfaction, many counselors are inadvertently believing and accepting that putting the individual’s wants and needs first will lead to better mental health and personal happiness. Psychotherapists-in-training are instructed on how to be “self-experts” (Cushman, 1990), with many of the theories promoting individualism over responsibility toward the other. Richardson and Woolfolk (1994) have contended that one of the principal problems in the training of upcoming psychologists is that while students learn different theories of change
(i.e., psychodynamics, cognitive-behavioral, gestalt, systems, postmodernism, etc.), only a few are trained to critically evaluate the moral values embedded within these theories. Consequently, counselors and clients are choosing solutions according to a particular philosophy of how to become happy with no tools to evaluate the correctness of the proposed solution.

There are great dangers for both clients and psychologists in ascribing to individualism as a philosophical ideal. When psychologists assume that individualism will lead their clients to happiness, they exclude other ideals, values, virtues, beliefs, or ways of life. As a result, many psychologists are not trained to explore other viable ways of obtaining happiness or joy.

**The Need for Love in Psychology**

The issue of love is crucial for counselors in the latter days. The Savior Himself prophesied that in the latter days there will be great problems. For example, He stated that “because iniquity shall abound, the love of many shall wax cold” (Matt. 24:12). One sign of this iniquity is the support society gives to an individual’s right to choose the most convenient course for himself over greater moral or spiritual obligations (Draper, 2001). As Paul stated, in the last days “men [and women] shall be lovers of their own selves” (2 Timothy 3:2). Draper (2001) has stated that “the American past has resulted in “a kind of myopia in which the people could not see past themselves” (p. 76). Within the practice of psychology, many “have expressed the concern that the idea of taking personal responsibility for one’s actions is vanishing from the public arena, and that therapists have become magicians who can make moral sensibilities vanish under a veil of psychological rhetoric” (Doherty, 1995, p. 5).

This danger is demonstrated in a clinical case as told by Doherty (1995) in his book *Soul Searching: Why Psychotherapy Must Promote Moral Responsibility.* Doherty was working with a husband/father who had decided to divorce his wife. In their therapeutic work together, the client stated it was too hard for him to see his ex-wife, and thus he had decided to stop having contact with his children as well. Doherty, as the therapist, was troubled on a moral level, considering how this decision would affect the children as well as the father. However, as he looked to his training and to research in the field of psychology, he could find little research on how to address these moral concerns. All he could find was focused on how this decision would affect the client himself and what he, as the therapist, could do to help the client carry through with it. In the end, Doherty decided to take a risk and point out the effects this decision would have on the client’s children and the parental commitment the man had to his children.

This approach proved to be successful with this client, but in its wake Doherty was astonished to see how many interventions and theories within the practice of psychotherapy are based on self-interest rather than moral commitments. This is why charity, or love, is so crucial within the practice of psychotherapy. It is crucial because love implies a moral obligation toward the other.

Love has been avoided within psychological literature and left to the fields of philosophy or theology (Parrott, 1999). This paper is not arguing that all theories within psychology or psychotherapy promote individualism at the expense of one’s moral obligations. Several psychotherapists, such as Abraham Maslow, Irvin Yalom, Rollo May, Carl Rogers, M. Scott Peck, Viktor Frankl, Frank Richardson, Richard Williams, Edwin Gantt, etc., have argued for an approach to psychotherapy that esteems other-centeredness. However, psychologists are still reluctant to research the impact of charity.

This reluctance must be overcome; today, as never before, individuals are turning to psychologists for the answers to moral and spiritual problems (Cohen, 2002). Many in society who used to look to religion, family, or God for solutions to their moral and spiritual problems are now turning to psychologists, counselors, and therapists as the “new moral authorities” or as “secular priests” (Richardson & Zeddies, 2001, p. 150).

Psychology as a science may not find it desirable to talk about love and its meaning within the practice of therapy; but whether or not it is desirable, it is necessary. Clients are looking to psychotherapists to answer their questions about why their lives feel empty, meaningless, and unhappy (Cushman, 1990). The current ideology of psychology preaches that individualism will bring about the meaning and happiness they desire. But “surging selfishness . . . has shrunk some people into ciphers; they seek to erase their emptiness by sensations. But in the arithmetic of appetite, anything multiplied by zero still totals zero!” (Maxwell, 1999, p. 23). Therefore,
counselors must turn away from this focus on the self because “selfishness is really self-destruction in slow motion” (Maxwell, 1999, p. 23). Further, the Prophet Joseph Smith stated, “Let every selfish feeling be not only buried, but annihilated; and let love to God and man predominate” (Smith, 1993, p. 203).

Not only can Christlike love help our clients, but it is potentially the most powerful tool counselors have:

Love is a potent healer. Realizing that, Satan would separate you from the power of the love of God, kindred, and friends that want to help. . . . He wants you to believe you lack the capacity to help yourself and that no one else is really interested. If he succeeds, you will be driven to further despair and heartache. His strategy is to have you think you are not appreciated, loved or wanted so that you in despair will turn to self-criticism, and in the extreme to even despising yourself and thinking you are evil when you are not. (Scott, 1994, p. 8)

Psychologists commonly have people come to therapy feeling self-critical or even despising themselves. A vital intervention to help heal these wounds is to show charity, even Christlike love, because love is a potent healer. Additionally, counselors can help clients to see how loving others, in contrast to loving only oneself, can lead to positive benefits. Scott (1994) further stated that feelings of depression or self-criticism can be cured by “reaching out in love to another in need. That may sound cruel and unfeeling when you long so much for healing, but it is based upon truth. Paul taught ‘Bear ye one another’s burdens’” (pp. 8-9).

To understand this form of love, one must define charity. There are four kinds of love: affection, romance, friendship, and charity (Draper, 2002). This paper will focus on the form of love known as charity.

**Charity**

Counselors are involved in the process of healing. Counselors do not heal clients, but they help clients find ways of living that are healing for them. Charity is healing (Scott, 1994), and more importantly, true charity never fails (I Corinthians 13: 8). I Corinthians 13: 2-3 states:

And though I have the gift of prophecy, and understand all mysteries, and all knowledge; and though I have all faith, so that I could remove mountains, and have not charity, I am nothing. And though I bestow all my goods to feed the poor, and though I give my body to be burned, and have not charity, it profiteth me nothing.

Applying these writings to modern counselors, one could say: “If I were to go to the best schools in counseling and study day and night, go to the most prestigious conferences where I would be instructed by the best and the most prestigious names in our field, learn every technique and every theory of change, if I were to do a great deal of research and write numerous books that changed the whole world of psychology with new insights, and still I did not show charity within my therapeutic practice, I am nothing.”

For a therapist, charity is one of the most powerful tools to help another heal from past and current wounds:

To remove love, or charity, is to remove the active agent within the healing process. May (1975) used an analogy that applies to charity. The analogy follows that charity is to therapy as the heart is to the body. Our heart pumps blood to all our organs and extremities, thereby making it possible for them to function. Similarly, charity pumps the fuel that makes all other therapy processes, techniques, and interventions function. While our physical organs need blood to function, Lewis (1952) argued that our spirits need God to run and function properly. There is no substitute for God. None that is truly healing. As God is love (1 John 4:8), charity, or the pure love of Christ (Moroni 7:47), is the fuel that our spirits need to exist and be happy. As charity is the sine qua non of the gospel of Christ (Robinson, 1995), it is also the sine qua non of therapy. There is a grand key here, probably the grandest of them all. It is this: The heart and soul of the gospel is love, and all the rest is commentary. Whatever else we may perceive religion to be, we are wrong—for true religion is love in action— God’s love for us and our love for God and for our neighbors. (Robinson, 1995, p. 137)

This same statement could be made concerning the practice of therapy. Whatever else we perceive therapy to be, we are wrong, for true therapy is love in action.
DEFINITION OF CHARITY

Charity requires that we not love as the world loves, but love as God loves (Draper, 2002). Is it possible for us to love as God loves? The answer is a qualified yes. It will take a great deal of time and energy to learn this love, and it may not even be possible within this life. However, our goal each day is to take a step closer in our abilities to love as God loves and thereby grow in our ability to help our clients. Thus, gaining charity requires a lot of those wanting to be counselors. For charity asks us to be true to the very best within us—but is this not what God asks of us already?

Paul defines the attributes associated with charity:

Charity suffereth long, and is kind; charity envieth not; charity vaunteth not itself, is not puffed up, Doth not behave itself unseemly, seeketh not her own, is not easily provoked, thinketh no evil; Rejoiceth not in iniquity, but rejoiceth in the truth; Beareth all things, believeth all things, hopeth all things, endureth all things. (I Corinthians 13: 4-7)

This scripture articulates the great healing power that charity holds and demonstrates its contrast to the current ideology of psychology. For all the aspects of charity, as the apostle Paul describes here, require one to become selfless. Meanwhile, many theories within psychology, with its disguised ideology of individualism, preach for “self-worship” over selflessness. In contrast, Paul’s message is that until we take the self out of self-esteem, out of self-fulfillment, and out of self-actualization, we will never know our true worth, and we will never know true fulfillment of who we really are or could potentially become. We will never know happiness. For love, or charity, and happiness are inseparably connected. If we have this charity of which Paul speaks, we forget the self. As Chesterton (1959) asserted:

How much larger your life would be if your self were smaller in it; if you could really look at other men with common curiosity and pleasure . . . You would begin to be interested in them . . . You would break out of this tiny and tawdry theatre in which your own little plot is always being played, and you would find yourself under a freer sky, and in a street full of splendid strangers. (pp. 20-21)

Charity “frees us from the slavery of the self,” so we can finally find ourselves free from our past bondage and able to find indispensable happiness and joy in serving others (Draper, 2002, p.113). How different would the practice of therapy be if the therapist attempted to love every client who stepped through the door—focusing less on himself or herself and more on the client? How different would our clients’ lives be if we could help them focus less on themselves and more on the needs of those around them? Would we not all be happier? According to the virtue of charity, the answer is a resounding yes.

An experience related by Viktor Frankl (1988) from his work with a particular client illustrates the point:

Recently, I received a telephone call at three in the morning from a lady who told me that she was determined to commit suicide but was curious to know what I would say about it. I replied with all the arguments against this resolution and for survival, and I talked to her for thirty minutes—until she finally gave her word that she would not take her life but rather come to see me in the hospital. But when she visited me there it turned out that not one of all the arguments I offered had impressed her. The only reason she had decided not to commit suicide was the fact that, rather than growing angry because of having been disturbed in my sleep in the middle of the night, I had patiently listened to her and talked with her for half an hour, and a world—she found—in which this can happen, must be a world worth living in. (p. 8)

The fact that this therapist showed an act of love, compassion, or kindness by patiently listening to this client in the middle of the night was more influential than any therapeutic intervention. This story demonstrates that love is a potent healer and why it is crucial to our practice as psychologists.

THE GREAT CONUNDRUM: HOW TO FIND HAPPINESS

Another reason love is so vital to our practice as therapists is that love is connected to joy. As stated earlier in this article, many theories of psychology assume that happiness will be found by focusing on the self, which is an inadequate solution.

We have made of therapy a new kind of cult, a method in which we hire someone to act as a guide to our
successes and happiness. Rarely does one speak of duty to one’s society—almost everyone undergoing therapy is concerned with individual gain, and the psychotherapist is hired to assist in this endeavor. (Doherty, 1995, p. 12)

The problem is that happiness is not something one can seek after by focusing on the self. It is not something one can obtain by setting goals and looking for it. Happiness is a byproduct of living your life the way you should or the way you know you could (Romney, 1973). Consequently, a client who says he or she is not happy is probably not currently living life the way he or she should or could. Frankl (1992) highlighted this fact when he stated that the more one seeks after happiness, the farther away happiness will get:

Happiness, cannot be pursued; it must ensue, and it only does so as the unintended side-effect of one’s personal dedication to a cause greater than oneself or as the byproduct of one’s surrender to a person other than oneself. Happiness must happen . . . you have to let it happen by not caring about it. I want you to listen to what your conscience commands you to do and go on to carry it out to the best of your knowledge. (p.12)

Happiness is obtained only through living life the way we know we should or could.

Christian philosopher C.S. Lewis (1952) refers to the belief that there are things in life that we morally or ethically know we should do as the Moral Law. Lewis argues that this Moral Law is real, just as the law of gravity is real. God gave us this Moral Law, and when one goes against it, chooses not to follow it, unhappiness results. In contrast, when we follow the Moral Law, happiness follows. As Nelson (2003) stated, “Happiness comes through obedience” (p. 9). If the Moral Law tells us how we should live our lives, and living as we should results in happiness, then happiness should be viewed as a byproduct or an artifact of following the Moral Law.

Some would argue that following the Moral Law does not always result in happiness, but may sometimes result in sorrow, suffering, or ridicule. For example, one who believes it is morally wrong to have premarital sex and decides to live in accordance with this moral value may be ridiculed by peers or treated with contempt. This would suggest that living in accordance with one’s morals does not always result in happiness. However, Brown (1996) has found that an individual’s values function as a type of cognitive filter through which all external stimuli are evaluated. Thus values serve as a type of colored glasses that influence the way we assign meaning, worth, and value to people, objects, and behaviors. Being engaged in behaviors or actions that accord with one’s moral values brings greater meaning and significance to experience. Consequently, acting in congruence with one’s values may not result in people’s approval or in immediate gratification, but it does bring a sense of profound meaning. Realistically, living in accordance with the Moral Law requires self-discipline and self-mastery and does not always result in respect from others. However, the happiness or joy that results from living in accordance with the value of charity comes from the feeling that one has lived in harmony with what one believes.

As stated earlier, many clients say they want to find happiness, so they search for it. However, studies have found that individuals do not find happiness in wealth, material possessions, power, prestige, or similar advantages (Bargh & Alvarez, 2001; Kasser, 2002; Lane, 2000; Westman, 1990). Remember, happiness does not come from searching; happiness comes from following the Moral Law within each of us and behaving as we know we should or could.

This is why the disguised ideology of individualism is dangerous to clients as well as to counselors. C.S. Lewis (1952) postulated that once an individual focuses on the self, that person realizes that he or she can put the self first, over all others, including God and His Moral Law. Individuals then become their own masters.

[They] invent some sort of happiness for themselves outside of God apart from God . . . The reason why it can never succeed is this. God made us: invented us as a man invents an engine. A car is made to run on gasoline, and it would not run properly on anything else. Now God designed the human machine to run on Himself. He Himself is the fuel our spirits were designed to burn, or the food our spirits were designed to feed on. There is no other. That is why it is just no good asking God to make us happy in our own way without bothering about religion. God cannot give us happiness and peace apart from Himself, because it is not there. (pp. 53-54)

Lewis makes a powerful assertion when he maintains that God is the spiritual nourishment that our spirits need and that there is no other alternative than God to gaining happiness. One cannot find happiness when
acting against the Moral Law. As Alma states in the
Book of Mormon, “wickedness never was happiness”
(Alma 41:10).

A Proper Love of the Self

Christ admonished us to love others; he also
admonished us to love ourselves. Christ stated that there
are two great commandments: first, to love God, and
second, to love one’s neighbor as oneself (see Luke 10:
27). Christ could have given three great commandments:
to love God, to love others, and to love oneself. But what
He taught was two great commandments, possibly to
Teach us that our ability to love others is tied to our
ability to love ourselves. Thus the need to learn to love
ourselves and to build our self-esteem is a worthy goal.
In fact, Maxwell (1969) stated that “since self-esteem
controls ultimately our ability to love God, to love
others, and to love life, nothing is more central to our
need than to build justifiable self-esteem” (p. 90).

A common definition of self-esteem is to esteem or
appraise one’s behaviors or characteristics. To build self­
estime, an individual is counseled to focus solely on the
self: “work to improve yourself;” “set your own standards
for evaluating yourself;” “modify negative self-talk and
attributions;” and “control your self-esteem through how
you see yourself” (Johnson, 2000, p. 394).

A sense of self-esteem that complements charity is
different. “It is not blind, arrogant, vain love of the self,
but it is self-respecting, unconflicted, honest esteem of
ourselves. It is born of inner peace and strength” (Faust,
as cited in Bell & Faust, 1999, p. 423). By combining
charity and self-esteem we recognize our obligation to
care for others. Therefore, we learn to love and take care
of ourselves in order to increase in our abilities to love
others and provide service and care for them.

HUMILITY IN SELF-Esteem

Within psychological literature the virtue of humility
is often equated with self-deprecation, low self-worth,
or weakness (Hargrave, 2000; Tangney, 2002); thus it is
understandable that humility has been associated with low
self-esteem (Klein, 1992; Knight & Nadel, 1986; Langston
& Cantor, 1988; Weiss & Knight, 1980). Nevertheless, “it
is unfortunate that this virtue has come to be synonymous
for self-deprecation and abjectness. This definition throws
us off so that we are unable to see models of this virtue”
(Draper, 2002, p. 112). Humility is not thinking that we are
of little worth or putting ourselves down. Tangney (2002)
stated, “True humility is a rich, multifaceted construct
that is characterized by an accurate assessment of one’s
characteristics, an ability to acknowledge limitations, and a
‘forgetting of the self’” (p. 411). In fact, C.S. Lewis (1952)
suggested that if you were to meet a humble person, you
would not meet a person who is always stating that others
are always better than he is, or that he is not good at
anything. No indeed. If you were to meet a truly humble
man, you would not even know it, for he would probably
be a person who seemed intelligent, as well as very cheerful,
who took time to listen to you with real interest. He would
be a person who who would not “be thinking about humility:
he [would] not be thinking of himself at all” (p. 114).
Consequently, humility is a form of self-respect. “Humility
. . . allows us to concentrate on others because we are secure
with ourselves” (Draper, 2002, p. 113). Humility leads to an
increase in our ability to accept and love ourselves, gaining
true self-esteem, which then heightens our abilities to
experience charity for others.

Two Dangers of Misinterpreting Charity

While charity is the sine qua non to therapy, there are
multiple dangers associated with the misinterpretation
of this form of love. One common danger is becoming a
“service martyr.” A second common hazard is in assuming
that charity is always “touchy-feely” or “warm-and-fuzzy” and
never requires tough decisions or actions. If we misinterpret
charity, there is a high potential for harmful outcomes.

“Service Martyrs.” One of the first dangers of misinterpreting
charity was discussed by Draper (2002):

Giving one’s life does not have to mean martyrdom.
John [the apostle] had a better way of giving one’s life—
through service. To do so takes the ability to see through
the eyes of love. When we see a brother or sister in need,
our job is to respond. (p. 94)

When one provides service with a “victimized” approach,
one becomes a “service martyr.” A service martyr is one who
serves others, but with selfish motives rather than selfless or
altruistic intent. Altruism is "an unselfish interest in helping someone" (Santrock, 1993, p. 450).

Misinterpreting charity in this way can be a great danger for our clients. An example of this type of misinterpretation occurred in the work of one of the authors, who at the time worked at a clinic with a client who behaved as a service martyr. She was a religious woman who believed that one should always help others. She woke up early to go to work so she could earn money to help care for her family. When she got home she took care of a brother with a disability, who needed assistance. She also sacrificed her time and energy to take care of her boyfriend. At first, the therapist and supervisor felt sorry for this poor woman who was sacrificing herself to serve others and receiving no gratitude for her sacrifice. Accordingly, her therapist moved to help this client establish better boundaries that would enable her to say "no" to some of the requests made of her and alleviate the heavy burden of being responsible for all those around her.

However, as the therapist and supervisor worked to help this client establish more appropriate boundaries with others, they reached an interesting discovery. The woman did not go to work, help her brother, care for her boyfriend, and do all the other acts of service out of charity. She did them so that she could feel better about herself. She reported feelings of low self-worth, and she said that the only time she felt good about herself was when she was taking care of others. The result of her constant caretaking was that the others in her life became totally dependent on her. As long as she had others to care for, she could avoid facing the fact that she disliked herself and was miserable. On the surface she made herself out to be a victim of others' neediness and her kind heart, but below the surface she needed these others to depend on her in order to elevate her feelings of low self-esteem. As therapy progressed, her belief was revealed that the only way she deserved to be happy or loved was if she sacrificed herself for the needs of others.

This lack of necessary self-love is a major characteristic of service martyrs. Many times they perceive themselves as unlovable. Accordingly, service martyrs lay their bodies on the altars of service and maintain the mistaken belief that sacrificing themselves will buy a type of redemption as they live a life of martyrdom. Service martyrs make the mistake of trying to replace the power of forgiveness provided by God with their own sacrifice. They believe that if they sacrifice enough, they will be worthy of God and the power of forgiveness. This common misconception is a danger that comes out of misinterpreting the form of love known as charity.

This misinterpretation of charity is also a great danger to therapists, since therapy is a service occupation. The Code of Ethics issued by the American Psychological Association (APA, 2002) teaches therapists not to engage in counseling for unjustified personal gains; this includes counseling others in order to meet the therapist's own needs. When therapists become service martyrs, their clients pay a high price, including client dependency, lack of cohesiveness between client and therapist, ineffective terminating procedures, competency issues, and egoistic counseling--none of which is conducive to the therapeutic process.

One of the principal dangers to clients of service martyr counselors is the dependency that can emerge as the therapist places his or her personal need to be wanted and needed above the client's need to be empowered and strengthened. A pattern develops in which each time the client begins to improve, the service martyr therapist no longer feels needed and consequently pulls for more issues from the client. In a sense, service martyrs are parasites who prey on the suffering of others, bringing more misery to their clients under the guise of being helpful.

The fact that selfishness has no place within counseling is exemplified by the greatest counselor who ever lived on the earth, Jesus Christ, as he stated, "For even the Son of man came not to be ministered unto, but to minister, and to give his life a ransom for many" (Mark 10:45). To be effective therapists, we must exercise the charitable love Christ described and lose ourselves for the sake of our clients. "For whosoever will save his life shall lose it: and whosoever will lose his life for my sake shall find it" (Matthew 16:25).

We must be careful, however, not to confuse our clients' experiences with our own, not to feel what they feel so much that we are incapacitated. It is through caring charitably for them that we can still be of assistance. As one theorist put it, "I experience [another's suffering] precisely as his suffering, in the category of the other, and my reaction to him is not a cry of pain but a word of consolation and a gesture of assistance" (Morson & Emerson, 1990, p. 185). Charity requires remaining outside of another
person's experience enough that the client's emotions do not immobilize the counselor. This allows the counselor to reach out and to comfort, rather than collapse in pain. Such charity asks a lot of counselors, but anything worthwhile and meaningful is difficult.

The misinterpretation of love

The second danger of misinterpreting charity is to believe that love always takes a “touchy-feely,” “warm-and-fuzzy” form that will never require one to do anything difficult or demanding. In its practice, charity can be a very tough form of love. Speaking of charity, Draper (2002) stated, “That is what real love is: tough, because it demands the very best of others; and realistic, because it demands only what they can give” (p. 118).

Charity means having a standard. Therefore, as therapists, we must promote the standard of love. We cannot force our clients to live this standard, but we must promote it. The clients have the right to choose whether or not they will follow this standard, but as therapists, we cannot ignore the standard. This means we must make our clients aware of the standard and the consequences of breaking it. More importantly, we cannot try to help our clients escape the consequences of their actions. In fact, one of Hillman and Ventura's (1992) greatest arguments against the current practice of psychology is that it attempts to shift responsibility for a person's actions onto childhood experiences, parents, society, etc., without ever looking at how the individual is responsible for his or her own problems. These authors assert that those who ascribe to the culture found within psychology have become a generation of finger-pointers, deciding whose fault it is when we feel guilt for going against the Moral Law within us. This finger pointing precludes one from ever searching to uncover any personal responsibility within our relationships.

Charity requires that if therapists are going to love their clients, they must allow the clients to suffer the consequences of their decisions that go against the Moral Law. In fact, allowing someone to hurt after a bad decision helps him or her to make better decisions in the future. Love has a standard, yet this love is perfect. Just as the standard never goes away, neither does the love. We will always be here for those who will not live up to the standard, and we will always be the bearer of that standard in their lives.

This is how practicing love is tough for the therapist. The heartbreak of charity occurs when clients repeatedly fail to live up to love's standard or ask us to assist them in easing their conscience when they choose to go against this standard. As therapists, we can never use this standard breaking as an excuse to stop showing charity towards our clients. We must love them even when they make poor choices. Remember the words of Christ: “They that be whole need not a physician, but they that are sick” (Matthew 9:12). To act as a physician is to love, for love is a potent healer. Therefore, we must be loving towards those who are sick (i.e., those who make poor choices).

A clinical example of tough love was told by a therapist who had a client report in session that she had never been given a birthday cake. The client told the counselor that her birthday would be on the day the two of them would next meet for a session. The therapist's first instinct was to make her client a birthday cake and give it to her at their next session. However, as she thought longer about this idea, she realized that making her client a cake would be an attempt to meet her own needs “to try and make up for all of [the client's] childhood pain, or to cause her to feel celebrated” (Bennion, as cited in Adams, 2005, p. 201). As the therapist thought further, she worried that making her client a birthday cake would further “her sense that only a powerful 'other' could make her feel happy and loved ... implying that she was not capable of taking steps to make her birthday a happy one” (Bennion, as cited in Adams, 2005, pp. 201-202). Thus, the therapist decided not to make a birthday cake and to discuss her reasons for not doing so at their next session. After the discussion, the client stated she understood her therapist's reasons for not making a cake; however, it turned out that later that night the client's friends threw a surprise party for her where she received two birthday cakes. In this clinical example, the therapist was working from the standard of charity with her client. When the therapist forgot her own desire to “fix” things for her client and instead considered what was actually best for the client, she was able to make a decision that empowered her client and held herself and her client to the standard of charity.

This standard of charity is also seen during Christ's suffering on the cross. Heavenly Father showed the tough side of love when He withdrew His Spirit so that Christ could experience all forms of suffering and
love us perfectly. Christ cried out in agony, "My God, my God, why hast thou forsaken me?" (Matthew 27:46). Perhaps one could mistakenly assume that this withdrawal was unloving and cruel, as God forsook His Son in a moment of great agony. However, in this act God was perfectly loving to his Son, for He withdrew the comfort of His Spirit so that Christ could reach His very best. Isn't Christ's best better than ours? Yes, but God still asked Christ to reach this best, even when His Son pleaded with him, "If it be possible, let this cup pass from me" (Matthew 26:39). God did this with a perfect love, demonstrating how we should love as well.

In God, we meet love in its purest form. We must not confuse such love with sentimentality. Sentimentality takes the easy way out, refusing firm action, or doing the distasteful, or looking at the long-term good. In the process, it leaves the loved one uncorrected in his sin, thus reinforcing the very flaw that true love should try to eradicate. (Draper, 2002, p. 119)

Once again, love has a standard; it is not taking the easy way out. It is loving others enough to seek to help them find the very best within them.

Thus, charity is not to be thought of as an easy-going, anything goes, warm-and-fuzzy, touchy-feely love that never holds one to a standard. Charity not only demands that we follow the letter of the law (as outlined in APA and ACA ethical guidelines), but also requires us to follow the spirit of the law, or the Moral Law within us. "The Lord makes no distinction between temporal and spiritual commandments, for he has said that all of his commandments are spiritual" (Hunter, 2002, p. 13). Thus charity expects us to practice what we preach as professionals. Just as we expect our clients to live to the very best within them, we as counselors must live to the very best within us—both inside and outside the therapy suite.

Consequently, charity is the ultimate tough love because it asks us to give our all; it asks us to hold the integrity of Job (Job 27:5). As we do, we will be blessed with knowledge of how to help our clients gain happiness, for we will be living the formula of that success: love.

**Conclusion**

In the words of Doherty (1995),

We all know that it takes more than knowledge and skill to be a good therapist. It takes... "virtues." Virtues can be defined as a predisposition to do what is good or right. (p.116)

Love, in the most pure sense, is a virtue that counselors can embody if they wish to live according to a higher standard than those often associated with the theory and practice of counseling. Doing so, however, remains very challenging, because love (in this sense) requires us to ask what is "good" and what is "right" for our practice and our clients. We do not propose, however, that goodness and rightness are the sole purview of the counselor. Decisions about a proper course of action in the pursuit of the good life must be made with the client collaboratively. Over the course of counseling, the counselor holds lovingly to the standard of Moral Law. This approach to counseling, however, is never easy, and it may cause us to go against some of the key assumptions in our field. Seligman (1998), in discussing the field of psychotherapy, stated that "treatment is not just fixing what is broken, it is nurturing what is best within ourselves" (p. 4). Many psychological theories have asserted that the best way to live to the highest within us is through self-fulfillment. In contrast, the Gospel of Jesus Christ states that the best way to live to the highest within us is to show love, or charity, toward others as well as ourselves. This is the challenge we face as counselors.

**References**


