
THE UNCONVERTED SUBCONSCIOUS IN PSYCHOTHERAPY: BIBLICAL FOUNDATIONS, PSYCHOLOGICAL EXPLORATIONS AND CLINICAL APPLICATIONS

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More than forty years ago the famous Christian missionary to India, E. Stanley Jones, introduced the concept of the unconverted subconscious (UnS). Jones asserted that the UnS was a major reason why Christians sometimes do not grow in their faith, fail miserably in their walk with Christ, and are divisive and even abusive within the Body of Christ. Moreover, he believed that parts of the UnS can contribute to a divided self, psychological disorders, addictive behavior, deep emotional pain, and relational brokenness. However, Jones did not elaborate on how this process works in the human psyche nor specifically the ramifications of the UnS in the life of the believer. In this article we discuss the UnS and its implications for working with Christian and non-Christian clients. We explore the UnS in light of both Scripture and psychology and then provide an overview of our clinical approach.

“The heart is more deceitful than all else and is desperately sick. Who can understand it?”

(The Prophet Jeremiah)

“The heart has its reasons, of which reason knows nothing”

(Blaise Pascal, *Pensees*).

“If the Son shall make you free, you shall be free indeed” (Jesus of Nazareth)

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E. Stanley Jones introduced the idea of the unconverted subconscious in his spiritual autobiography *A Song of Ascents* (1968). He referred to this concept not in terms of salvation and eternal life in Christ per se, but with regard to an un-surrendered part of the soul or psyche that often gets left behind during and after conversion and spiritual regeneration. According to Jones, the unconverted subconscious can play a major role in the spiritual walk of believers. Examples of this can be seen in those who live incongruent and defeated lives, struggle with impulse control and addictive behaviors, experience serious psychological dysfunction and relationship difficulties, fail to heal from experiences of the past, and suffer great emotional pain. However, Jones never fully developed the concept of the unconverted subconscious, nor did he attempt to explain the connection between the unconverted subconscious, spiritual deadness and derailment, and psychopathology in the life of the Christian. As we have further explored the idea of the unconverted subconscious both personally and in the lives of our clients, we have realized that it is a concept replete with clinical implications and applications—even for those who do not work from a psychodynamic perspective.

The purpose of this article is to examine the concept of the unconverted subconscious from a biblical and psychological perspective and to discuss its implications for believers and the church. Specifically, our objectives are as follows: (1) To introduce the construct of the unconverted subconscious and

contemplate its meaning and role in terms of biblical teaching and certain psychological schools of thought, most notably Object Relations Theory and Self Psychology; (2) To consider the connection among unconverted aspects of our subconscious, mental illness, and relationship difficulties; (3) To discuss some ways that therapists can help their clients recognize, understand and gain access to the unconverted subconscious in order to (with the help of the Holy Spirit) find release from the unhealthy influences of this domain of their psyche; and (4) To examine the creative and adaptive aspects of our subconscious mind along with the potential positive outcomes of engaging the subconscious in our work with clients. Later we provide a brief description of our clinical approach to working with individuals, couples, and families in terms of exploring needed areas of the subconscious, with a particular emphasis on parts talk and parts work.

The Meaning and Importance of the Subconscious

The idea that human beings are capable of having painful thoughts and feelings that lie below their immediate awareness, as well as compartmentalized areas of their personality that make parts of one's "self" difficult if not impossible to access by an act of the will, is not a new concept in the fields of psychiatry and psychology. Indeed, these notions are commonplace in both the classic and modern psychoanalytic literature. The idea of altered states of consciousness has also found support in both the research and clinical literature on hypnosis (Hilgard, 1977; Nash & Barnier, 2008). Moreover, since the 1970's even cognitive scientists have acknowledged the existence of unconscious perception and subliminal information processing; e.g., as with selective attention (I see only what I like), inattention (I don't see what I don't like), and automatism (I don't notice what I do). An abundance of research has suggested that cognitive schemas can guide awareness while remaining out of awareness. According to Daniel Goleman (1985, pp. 86-87), "We observe only their effects, not their identity." Where and how thoughts, feelings, drives, and impulses are stored in our minds has long been a matter of debate. However, we agree with Goleman that when schemas are driven by the fear of painful information, they can create blind spots in attention, knowledge, and understanding (e.g., dulled

attention aimed at reducing emotional pain). We believe these blind spots or *lacunae* can be present in all areas of life, including the spiritual. Distorted schemas on a social level can become shared delusions, such as in cultic forms of group think.

Our premise is made clear from the outset. Call it whatever we want, there is always a part (large or small, deep or shallow) of our mental life and experience that resides somewhere below our understanding that cannot be accessed through volitional or intellectual means. It is not our intention here to argue the technical differences between the "preconscious" and "subconscious" (e.g., Freud himself did not use, and in fact rejected, the term "subconscious" and never equated it with the "preconscious"), nor do we wish to differentiate between the "unconscious" and "subconscious" mind. Our contention is simply that, whether suppressed or repressed, part of our psychic material (i.e., thoughts, fears, memories, socially unacceptable ideas, wishes or desires, traumatic memories, and painful emotions), as well as the process by which this material interacts with other aspects of our psychic life, operates beneath the surface of our consciousness even though vestiges may seep to the surface through our dreams at night, daydreaming, and a variety of intuitive and *déjà vu* kinds of experience. Our preference here is to use the term "subconscious", primarily because the unconscious typically refers to a deep mental receptacle that includes most of our psychological and emotional experience (the iceberg below the surface), the majority of which we will never be able to gain access to through ordinary attempts or methods. Rather, our view of the subconscious refers to that portion of psychic life that lies somewhere just beneath the topsoil of mental life (the inverted iceberg).

We refer to the subconscious as both a part of the psyche; i.e., that part which contains mental and emotional material existing in the mind but not immediately available to consciousness; and as a process; i.e., mental activity beyond the level of consciousness that occurs without conscious perception, or with only slight perception, within the individual. Subconscious material is sometimes brought to consciousness through certain natural experiences (e.g., dreams; intuition; flashbacks) and therapeutic modalities (e.g., clinical hypnosis; free association). The subconscious includes material that was once conscious but has been forgotten or suppressed. This material is unique to the individual—a product of one's personality, temperament, and life-long experiences which form one's

worldview. The subconscious can carry unresolved issues and deep layers of pain and conflict; i.e., parts that are in conflict with conscious awareness. However, as Carl Jung (Singer, 1972) noted, at the same time parts of the subconscious can serve as a great friend, guide, and adviser to our conscious mind. Typically the subconscious is a force that can only be recognized by its effects, i.e., it expresses itself in the person's behavior or symptoms. Although these effects can be manifested in both positive and negative ways, it is often the negative effects that hamper or hinder change in our clients.

One implication of working on the subconscious level with clients is that while we commonly interface with one primary "self", in reality we always seem to be working with other parts of the self in therapy, including (assuming we know what to look for) those parts that operate somewhere below the client's level of awareness. With Carl Jung (Singer, 1972) we believe that the Self is the center of the total personality. It includes all that which is conscious and unconscious (or subconscious). While the ego is the center of consciousness, the Self is both the whole and the center; thus, it includes the ego. The self-system develops out of genetic predispositions such as temperament that we bring into the world, our real as well as internal (private) interactions with significant others, and the meanings we make out of these interactions. These factors must always be kept in mind when assisting clients both intra- and inter-personally. With regard to conversion, Jung is also correct in his observation that conversion is not unique to any one religion, or even a uniquely religious experience, although it may be. In addition, an astute investigator of religious experience, William James (1902), reminds us that subconscious factors play an extensive and decisive role in the conversion decision and experience, and that a long period of subconscious incubation often precedes sudden religious conversions (see also Scroggs & Douglas, 1977). In particular, given that God is an 'other,' the self-system relates to God out of its own understandings of self, others, and how relationships are and go, i.e., understandings of the self that can be in both the consciousness or subconscious mind (Rizzuto, 1979).

SCRIPTURAL FOUNDATIONS: BIBLICAL INFERENCES TO THE UNCONVERTED SUBCONSCIOUS

Although biblical proof for the unconverted subconscious is not possible, there are a number of

verses in the Old and New Testament which suggest that there is a part of our psyche that not only remains hidden from us, but one that may challenge both our spiritual relationship with God and our mental and emotional health. Our purpose here is not to engage in an in-depth analysis of particular verses but rather provide support for an overall theme of subconscious experience with regard to our thinking, motivation, behavior, emotions, and most importantly, our relationship with God. At the outset the issue of the known and unknown mind is one that must be viewed holistically when conceptualizing the human condition. We are fallen creatures at the spiritual, psychological, and biological level, and both physical death and spiritual death (apart from Christ) is a reality for us all. There is a foundational aspect that is innate to our fallen condition which affects our ability to know ourselves and others in a complete and multi-dimensional manner. Moreover, there is cognitive and a spiritual part of us that knows and a part that does not know, even things about ourselves, including a part that cannot readily know all that is "unconverted" within our mind and heart.

Perhaps the best place to start in terms of a Scriptural analysis is with Romans Chapter 1 (see Carson, France, Motyer, & Wenham, 1994; Marshall, Millard, Packer, & Wiseman, 1996). In this chapter Paul addresses believers in the church in Rome who, although they knew God, suppressed the truth in unrighteousness (v. 18) in such a way that their foolish heart was darkened (v. 21). It seems apparent that, after coming to faith in Christ, these believers held something back for themselves and were hence given over by God to their degrading passions (v. 26). Does this chapter have important implications for modern day believers in the same way that it did for the early Romans? In addition, is all of what we hold back, as well as the very process of holding back, a fully conscious experience, or can part of it be just beyond our level of immediate awareness? The Apostle Paul may acknowledge the impact the subconscious has on our life when he explains in Romans 7:13-25 his own lack of understanding as to why he does not do what he ought to do and yet does what he knows he should not do. Indeed, the Scriptures make it clear that, for now we are works in progress (Phil. 3:13-14) and that we know in part and see through a glass darkly, although someday we will know completely all that God wants us to know (1 Cor. 13:12).

The Meaning of Heart and Soul in the Bible

In the Scriptures, the word “heart” (Hb. *lebb* or *lebbabb*; Gr. *kardia*) connotes not only the center of spiritual activity but also all the operations of human life (Cruden, 2001; Marshall, Millard, Packer, & Wiseman, 1996; Strong, 2007). The heart is the home of personal life and is the seat of the conscience (Rom. 2:15). In the Old Testament, heart is actually used in place of conscience, for which there is no word in Hebrew (see Job 27:6; I Sam. 24:5; 25:31). In the heart also reside the emotions, passions, and appetites (Lev. 19:17; Ps. 104:15). Heart is also sometimes used for “mind” (Num. 16:28). Since the heart is by nature wicked (Gen. 8:21) and influences one’s entire life and character (Ps. 73:7; Matt. 12:34; 15:8, 17-20), it must be cleansed and made whole by God (Ps. 51: 10-14; Rom. 10:9-10; II Cor. 1:22). Rejection of God and His word hardens the heart (Ps. 95:8; Prov. 28:14). The heart sometimes points to that which is innermost, hidden, and deepest (Ps. 119: 9-11), that is, the inward man (Eph. 3:16-17; I Pet. 3:15-16). In sum, heart in the Bible is sometimes used for mind and understanding (the place where consciousness is carried out), the human will, our character and personality, our affections, our conscience, our moral choices and operations, and our place of doing good and evil. In essence, it is the center of who we are and all the faculties of our self. Heart always takes precedence over other descriptions of our inner life (Deut. 6:5; Matt. 22:37; Mark 12:30,33; Luke 10:27). It is the heart which makes a person who and what he or she is and governs all our actions (Prov. 4:23; Mark 7:21-23; Luke 6:45).

Although not generally the case throughout scripture, heart and soul are sometimes used interchangeably (Deut. 6:5; 26:16; Matt. 22:37; Mark 12: 30, 33). On the other hand, heart and soul are never treated as exactly the same in the Bible. In the Old Testament, soul (*nepes*, *nephesh*), like spirit (*ruach*), has a variety of meanings, including life, living being, self, person, desire, appetite, emotion, and passion. In Hebrew there are overlapping uses of *nepes*, *leb* (*lebab*), and *ruach* (spirit). Most commonly the word soul refers to the person or individual. In the New Testament, the word soul (*psyche*) refers to life (Rom. 11:3; 16:4; I Cor. 15:45; II Cor. 1:23; I Thes. 2:8), desire (Eph. 6:6; Col. 3:23), emotion (I Thes. 5:23), and the person (Gen. 2:7; Mt. 10:28; 16:26). On other occasions Paul uses spirit (*pneuma*) to denote the higher aspects of the Christian life (e.g., I

Cor. 2:11-15). Some theologians and New Testament scholars suggest that there is no difference in essence between *psyche* and *pneuma* in the New Testament, but rather that the difference is one of function (Kerr, 1979).

Biblical Examples of a Possible Subconscious at Work

There appears to be strong implication in Holy Writ that there are indeed hidden aspects or parts of our hearts that are separate from our conscious awareness. It may be that it is in these walled off rooms that our unconverted subconscious resides and works it ways both before and after conversion. There are numerous examples that point toward this phenomenon in Scripture. For instance, in the Old Testament Abraham was called by God to go to a new land and become the father of a great nation. Thus, he is the spiritual father of both the Jewish and Christian people. However, Abraham doubted God on a number of occasions even though he had a close relationship with God. He was even deceitful at times, claiming his wife was his sister. He gave in to the temptation to take another woman to fulfill God’s promise. He continued to struggle until God asked him to offer up his son on an altar. Abraham’s grandson Jacob (supplanter, held by the heel) followed in his footsteps. Later he would be called Israel (one who wrestles with God). Jacob was a liar and deceiver for much of his life. It took many years of wrestling with God for him to cease from this behavior and start trusting in God. King David, a murderer and an adulterer, was yet also called a man after God’s own heart. Perhaps David is one of the best Old Testament examples of someone who had his unconverted subconscious redeemed by God (Ps. 51). Finally, on many occasions, as Isaiah reported (29:13), the people of God drew near to the Lord with their words and honored Him with their lips but were still far from Him in their hearts. This appears to be self-deception operating on a grand social scale.

In the New Testament there are examples that may seem obvious—Judas who betrayed Jesus, and Simon Peter who Jesus referred to as Satan for going against him. Later Peter denied Jesus and had to be restored by the Holy Spirit. It would be ten years after the start of the church before Peter would be compelled by a vision to reach out to the Gentiles. Even after that the Apostle Paul, a former persecutor of believers, would confront Peter for trying to get

Christians to conform to the traditions of the Jewish traditions. Each one struggled with their issues while trying to serve God. Another example is captured in Jesus' story of the rich young ruler. When this man came to the Master, the Lord saw the man's "self" in its entirety, i.e., as he really was. Although the young ruler seemed to exhibit a keen interest in following the Lord and even indicated that he had kept all of the commandments from his youth, it is possible that Jesus and His disciples could see a part of this man's subconscious holding him back after the Lord told him to sell all he had and give the money to the poor. Indeed, the man then "... went away grieved, for he was one who owned much property" (Mt. 18:22). On the other hand, it may also be that a part of this man's true soul or self was the unseen and unconverted part of him that walked to Jesus that day, wanting and needing to follow Christ but unsure as to why.

Scriptural Support

Our semantic summaries of the verses in the following table are intended to provoke further contemplation about the mysteries of the human heart. Although not an exhaustive list, we begin with the condition of the believer which suggests that there may be areas of our thought and emotional life, as well as our relationship with God, which reside below the surface of awareness. A summary of verses that highlight God's "remedy" for a damaged or fallen human heart, including His responsibility and ours, is also provided in Table 1.

PSYCHOLOGICAL FOUNDATIONS FROM A CHRISTIAN PERSPECTIVE

E. Stanley Jones and the Unconverted Subconscious and Its Implications

It seems evident from some of Stanley Jones' works that he was an avid reader of Freud, Jung, and other psychoanalysts. His interest in the subconscious may have also been ignited by his own deep-seated struggles during his early years as a missionary in India. Here he often felt powerless and defeated in his faith in the face of such great challenges (see Graham, 2005; Jones, 1975). In addition, one gets the impression from Jones' (1968) description of his 60-some years of working in India and ministering to people around the world that he was often curious and even mystified by the seemingly unconverted aspects of people's souls who had sincerely come to Christ but yet remained partly connected for the rest

of their lives to the Hinduism, Buddhism, or other religious traditions in which they were brought up. Indeed, this often pluralistic and syncretistic nature of Christian conversion on the mission field (as well as when he was at home in the U.S.) may have also played a part in the development of his notion of the unconverted subconscious.

Central to the unconverted subconscious, according to Jones (1968), are three main primitive drives: the egotistical sense of Self, sex, and the herd (our social instinct) that stem from a long racial history. At any given moment any one of these primal urges may be dominant. However, Jones contends that the Self is the supreme ruler ("I want what I want when I want it"). In this way, innate depravity is the self surrendered to none other than itself, thus, "... the self become God" (p. 52). Jones continues:

In conversion a new life is introduced into the conscious mind as we consciously accept Christ as Savior and Lord. A new love and a new loyalty flood the conscious mind. The subconscious mind is stunned and subdued by this new dominant loyalty to Christ, introduced into the conscious mind through conversion. Sometimes it lies low for long periods, subdued but not surrendered. It waits for low moments in the conscious mind and then sticks up its head and, when it sees an opportunity, takes over the conscious mind. Then we have a house divided against itself. (1968, p. 52)

Jones' own personal revelation about and restoration of this issue after years of struggle came while reading Hannah Whitehall Smith's (1875) *The Christian's Secret of a Happy Life*, soon followed by a complete surrender of his entire soul to the Lord and a dynamic filling of the Holy Spirit like he had never before experienced. He continues:

He had been with me, with me in the conscious mind in conversion. Now he was in me, in me in the subconscious. When he was with me in the conscious, it was conversion limited, for the subconscious was not redeemed; cowed and suppressed, but not redeemed. Now the subconscious was redeemed... With these drives redeemed it was conversion unlimited, nothing left out of its way. (Jones, 1968, p. 53)

However, as Jones reminds us, complete surrender of the subconscious and conscious mind is an ongoing process in the Christian life. This is because our basic human needs and drives are not eliminated upon conversion to Christ but always remain. Indeed, Jones was adamant that sanctification is a life-long endeavor (1 Thess. 4:3-7). Although the conscious and subconscious are an integral part of us, they can and must be continually cleansed and consecrated for Kingdom purposes so that we are no longer at war within ourselves. Jones concludes:

TABLE 1

I. The Condition of Our Heart and Inner Self

The inward thoughts and heart of a man are deep.

Psalm 64:6

The human heart is difficult to know.

Jeremiah 17:9

The heart keeps its own secrets and is capable of deceiving itself.

Jeremiah 37:9; 42:20; James 1:26; I Corinthians 3:18; Galatians 6:3,7; I John 1:8

Only the Lord knows the secrets of the heart.

Psalm 44:21

Our hearts can be hardened.

Matthew 19:8; Mark 6:52; Romans 1:21

Our heart is the seat of our conscience, and we need to have our hearts sprinkled clean from an evil conscience and draw near to God with a sincere heart.....

Hebrews 10:22

People can have their consciences seared as with a branding iron.

I Timothy 4:2

Our conscience can be weak.

I Corinthians 8:7

Acting contrary to the convictions of our conscience can defile us and contribute to mental disturbance because of the guilt it creates.

Rom. 14:23; I Cor. 8:7, 12

Failure to maintain a good conscience can be a causative factor in our becoming shipwrecked in our faith.

I Tim. 1:19

The flesh sets its desire against the Spirit, and the Spirit against the flesh, because these are in opposition to one another, thus preventing us from doing the things that please God.

Gal. 5:17

We can be double-minded, and hence, unstable in all our ways.

James 1:8

It is possible for believers to be blind and short-sighted.

II Peter 1:5-9

We can set ourselves against the truth as set forth by others, and also deny the truth to ourselves.

II Tim. 3:8; I Cor. 3:18; Gal. 6:3, 7

Continuing to walk in sin blinds us from the truth.

I John. 2:11

Our own heart can condemn us (but God is greater than our heart and knows all things).

I John 3:20

We can worship the Lord with our lips, but our heart may be far from Him.

Isaiah 29:13; Matthew 15:8

When we do not walk in the spirit there are consequences.

Gal. 5:19-21

Note 1: As a believer the Apostle Paul struggled against parts of himself (fleshly and spiritual). Romans 7 (e.g., 7:23)

Note 2: The Psalmist wrestled in a similar manner with contrary parts in himself (as did many other heroes of the Bible).

Psalm 51

Note 3: If a person is not careful their condition could be worse if they do not grow in the understanding of God's word.

Matthew 12:43-45

Table continues next page

TABLE 1 (continued)

II. The Promises of God in the Life of the Believer and Our Responsive Act

There is a difference between wise counsel and unwise counsel.

Psalm 1:1-3

The Word of God.....judges the thoughts and intentions of the heart.

Hebrews 4:12

The Lord knows the secrets of our heart.

Psalm 44:21

God searches the heart.

Jer. 17:10; Romans 8:27

Man looks at the outward appearance, but God looks at the heart.

I Samuel 16:7

The Lord desires a broken and contrite heart.

Psalm 34:18; 51:17

We need the Lord to create a clean heart within us.

Psalm 51:10

The Lord desires truth in the innermost being, and in the hidden part He makes us to know wisdom.

Psalmist: 51:6

We are to speak truth in our own heart.

Psalm 15:2

The double-minded are to have their hearts purified.

James 4:8

We are to submit and draw near to God and resist the devil; then God will draw near to us. We must also cleanse our hands, purify your hearts, and humble ourselves in the presence of the Lord, and then He will exalt us.

James 4:7-8,10; Eph. 6:10-13

We must remember that He who began a good work in you will perfect it unto the day of Christ Jesus.

Phil. 1:6

We must be transformed through the renewing of our mind.

Romans 12:1-2

We must lay aside every encumbrance and the sin which so easily entangles us.

Hebrews 12:1

If we walk by the Spirit we will not carry out the desires of the flesh.

Galatians 5:16

When we live by the spirit the fruits are obvious.

Gal. 5:22-23

God desires that we have faith with a clear conscience.

I Timothy 3:9

If our heart does not condemn us, we have confidence before God.

I John 3:21

We are to keep our heart with all diligence, for from it flows the springs of life.

Proverbs 4:23

We must abstain from fleshly lusts which wage war against the soul.

I Pet. 2:11

That the subconscious mind can be redeemed is good news. For the area of the work of the Holy Spirit is largely in the subconscious mind. So if we surrender "all we know"—the conscious mind—"and all we don't know"—the subconscious—then the Holy Spirit takes over the areas in the subconscious which have hitherto been "enemy territory" and now makes them friendly territory. The subconscious works with you, a friend and ally.... an important ally of the new life. (1968, p. 54)

We might ask then, Are there times when we prevent or hinder the Holy Spirit from His complete work of functional sanctification (as opposed to positional sanctification) in both our conscious and subconscious mind, and the healing of broken parts of our inner selves, beginning at the time of conversion and then throughout our Christian life (Rom. 12:1-3; 11:25)? While justification happens in an instant and we are made right with God, we also understand that sanctification is a lifelong pursuit, with the goal of becoming mature or complete in Christ, lacking in nothing (Rom. 5:1; I Cor. 6:11; Gal. 2:16; I Thess. 5:23). In addition, as Stanley Jones suggests, do we secretly, and both knowingly and unknowingly, hold back parts of ourselves from the process of regeneration at the time of conversion and during the sanctification process often long after? If so, why? We would suggest that it is in part due to a host of painful life experiences and the reservoir of unresolved hurt, fear, shame, sadness, grief/loss, regret, disappointment, disgust rejection/betrayal/abandonment, contempt, and other core emotions that keep us from fully surrendering our lives to the Lord, along with a fear of losing ourselves and our sense of personal control and freedom. Is it then possible that psychotherapy can assist in the process of restoring people to wholeness just as God often uses modern medicine to heal our bodies? Jones (1959, 1968) asserts that spiritual regeneration and eradication of the "old man", and the ongoing suppression of and struggle with the sin and evil that accompanies our natural urges, are both characteristic of the Christian life. However, he is also emphatic that when we are truly walking in the Spirit and not in the flesh, God continually cleanses and sanctifies us and gives us power to live more like and for Christ. Thus, according to Jones the Christian life is much more one of surrender and consent than one of constraint.

From our viewpoint, extensions of E. Stanley Jones' notions to deficiencies in clients' functioning (be they Christians or non-Christians) may be seen in several areas, including: *mental* (e.g., negative self concept, confusion, contradictions, and the agony

of cognitive dissonance); *emotional* (e.g., damaged primary and secondary emotions, and the pain of emotional repression and splitting); *marital/family* (e.g., separation and conflict in our most intimate associations); *social* (e.g., both peripheral and significant personal relationships that go awry); *spiritual* (e.g., un-surrendered parts of self that keep people angry and separated from God and believers from experiencing freedom in Christ and the power of the Holy Spirit); and *physical* (e.g., traumatized aspects of self that affect physical health and functioning). Hence, any inquiry into the unconverted subconscious demands an investigation into the psychology of self-deception; lacunae; the processes of splitting, compartmentalization and fragmentation in the service of the ego; and the role of intuition in the therapist's work with the client (see also Ernest Hilgard's notion of our Hidden Observer, 1977).

Another implication of the unconverted subconscious can perhaps be seen in reference to today's church, and it may be one that exists on a grand scale. For example, we know what happens when things go bad with both ordinary and high profile Christians, for example, when they "fall from grace", but we have never been able to fully explain the major reasons why (i.e., the reasons behind the apparent reasons). We know that countless everyday believers fail to grow in grace, experience the joy and freedom that is in Christ, and live a nominal if not defeated Christian life, but why? We also know that there are pastors and church leaders who live secret sectioned off lives of personal, marital, or family misery or immorality, and who often seem to place their own pride, egos, agendas, and job security above the needs and best interests of those in the church. We all have seen family members and lifelong Christian friends betray and undermine one another over money, wills, status, position, jealousy, power, and principle. Further, many of us have observed if not experienced Christians abandoning their brethren in times of difficulty and even shooting their wounded who have experienced deep loss, trauma, disability, mental illness, or other forms of brokenness. In addition, it is frightening to contemplate how many denominations and congregations throughout history have split over fleshly, trivial matters that have dishonored God, weakened the Body of Christ, and deeply tarnished our Christ-like witness to a hurting and lost world. Can we attribute all of these events to laziness or disobedience, or solely to a battle between flesh and spirit or the old and new man or

the tempting of Satan? Could it be, as Stanley Jones postulates, that there is also a part of some or all of us that is never fully converted (or as those from other Christian traditions might prefer, "fully sanctified") when we come to Christ?

While it is Christ's desire for every person to grow up in Him, ultimately we are the ones responsible to God and each other for continually examining ourselves to make sure we are growing in our faith and living a life that is pleasing to God (I Cor. 11:28; II Cor. 13:5). Surely many of these choices and behaviors, perhaps most, are conscious and deliberate; however, for many individuals and groups their difficulties may lie somewhere in their subconscious minds as manifested, for example, through a nonintegrated and unhealthy sense of self that can be destructive to one's true intimates, friends, fellow parishioners, or all of the above. Hence, the need is great for a holy and therapeutic work on the part of the Holy Spirit, perhaps for many believers in cooperation with a competent, creative, and courageous counselor or therapist. With Gordon McDonald (1988) we firmly believe that it is possible for fallen and deeply injured Christians to rebuild their broken world, both internally and relationally.

We might also ponder whether the unconverted subconscious is a concept that may extend beyond our relationship with God and helping our Christian clients heal and grow in their relationship with the Lord. Indeed, there may be other "unconverted" elements in both our clients and ourselves operating in the subconscious that need to be acknowledged, understood, and dealt with emotionally before we can help them (be they Christian or not) move forward in their lives and relationships. For example, what about the husband who has never fully committed himself to his wife or perhaps even the idea and institution of marriage, but only after a few years of challenging adjustments realizes that he has an imperfect mate and so begins to look outside his marriage to meet his emotional and physical needs and somehow justifies this in his own mind and heart? Or, the mother who has never been aware of her own favoritism toward one child in the family, and this not only at the expense of the other children but despite the fact that this particular child has taken advantage of the mother throughout most of his or her teenage and young adult years? In addition, what about the senior pastor of a growing church who has been clean and sober for 20 years but whose personal charisma and charm are

matched only by the self-centered and protective forces that lie within his unconverted subconscious? Although he would openly acknowledge to his congregation that he is still and will always be in recovery, he has little to no idea how much and in what unhealthy ways the hidden and neglected areas of his psyche and addictive personality are playing out in his work and role as a pastor. These could range from his ego-based leadership style (e.g., his choice of church "leaders" to complement his leadership goals and approach), to his inability to connect with his congregation as a real person, to his teaching and preaching. Then when the going gets tough, who will this pastor really support in his parish and sometimes even his own family? Indeed, Jesus' words of "Physician, heal thyself" resonate ever so strongly to many pastors, elders, and other church leaders today, as well as to many of us who are Christian counselors and therapists.

Some Reactions to Jones' Notion of the Unconverted Subconscious

Although it is important to keep in mind that E. Stanley Jones was writing before object relations theory and other modern analytic perspectives had fully taken their place in psychology, psychiatry, and related fields, his views on the unconverted subconscious are noticeably Freudian. For example, some readers may find Jones' notion of drives outdated, negative, or unhelpful to the believer. His idea of "drives redeemed" may be one that splits things into bad and good objects instead of providing a forum for integration so that through awareness one has other choices and can engage in the kind of relationships with God and others that are healing to their story. Some may also ask how we hold parts of ourselves or others accountable for that which we don't know exists, i.e., that we are not aware of. It does appear to be the case that many people who are hurting themselves and others are often not really aware of what they are doing, and even less so why they are doing what they are doing. They seem to be behaving in the only way they know and keep doing the same things with the same results. Part of the problem may also be that Christians have often presented conversion in a way that appeals more to the head than to the heart and without enough focus on relational accountability and the provision of a spiritual and emotional "home" where people can be real and yet safe. How then can pastors, counselors, and oth-

ers in the church be trained to aid in the 'process' of conversion by understanding the awareness and integration needed in the Christian walk?

From an object relations point of view, our main need or drive is for connection, i.e., relationship. Although parts of us get broken in relationships, they also get healed in relationships. Some may also see the "unconverted subconscious" as a 'bad object' ... enemy territory... something not eliminated at conversion. To others there may be some shame involved in the concept of the unconverted unconscious because at some level one suspects or senses that he or she has not fully surrendered to Christ but struggles greatly with doing so. We might also wonder though how the self can surrender that which it is not aware of. As mentioned, it relates from the only place it knows. However, this may be exactly Stanley Jones' point. For some believers, perhaps many, there do appear to be some aspects of an un-surrendered self lurking somewhere within their subconscious. To acknowledge this possibility is to neither condemn or diminish the extreme value of each person to the Lord God, nor the unique and important role of each believer within the Body of Christ. Our call is to understand how Christ wants our whole self, how our brokenness often prevents this, and how God works through Christian relationships to redeem what has been lost. Coming to understand why we do what we do also helps us to see or imagine better choices. To suppress is not as helpful as to understand and to integrate. God has designed the church to be the place where the old and new can become integrated in an intentional, deliberate way, through relationships of care, accountability, and grace. However, since many churches do not readily welcome psychological help for its members, and some teach that we need only to pray and believe in God to solve our problems, there remains a dilemma. There is little doubt that the modern church has given us mixed messages about these matters, and this must change. There is still a great deal of shame in admitting the need for help and acknowledging serious marital or family difficulties or personal problems that include moral failure, depression, anxiety, addictions, and other forms of mental illness.

CHRISTIANS AND MENTAL ILLNESS

As has been mentioned, mental illness and serious relationship difficulties are two of many outcomes of the Fall of man. Indeed, one could argue that susceptibility to both mental disorders and sexual perversion

came as a judgment upon humankind for their failure to obey and worship God alone (see Romans 1:24-28). As the Christian psychiatrist Marion Nelson (1967) commented decades ago, this does not mean that we all will develop a mental disorder or engage in sexually perverse behaviors, but that we are all capable and vulnerable. Nelson goes on to note that the Apostle Paul's list of things which men practice that are not proper can be seen as not only sinful but also in some cases as symptoms of psychological disorders. One could assert as well that the splitting of our minds into our conscious and subconscious is also a ramification of the Fall, even though the subconscious itself contains both positive, growth-promoting, survival oriented mechanisms along with negative and self-destructive elements. In this way our subconscious can be a blessing and a curse. One sign of psychological and emotional maturity may be that the positive, adaptive aspects of a person's subconscious far outweigh the harmful, self-perturbing components. Nelson accurately points out that, although psychological disorders are not sinful in themselves, failure to make an effective attempt to reduce or resolve one's inner pain and conflict and/or serious relationship difficulties may indeed be sinful, for it reduces our efficiency as instruments of God (see 2 Cor. 4:7; 7:1; I John 3:3). Moreover, failure to seek the proper help when we need it cripples believers and may prevent them from presenting themselves wholly to God for His service (Rom. 6:13, 19; 12:1).

This is significant in light of the fact that Christians not only face the same challenges and suffer the same conflicts as non-Christians, but also the additional battles between the old and new man (Eph. 4:22; Gal. 5:17; Rom. 7:18-24). In our view, failure to understand the role of the subconscious in this battle places believers at great risk for a host of psychological, emotional, relational, and moral difficulties and has been one of the reasons why many well-meaning Christian counselors and therapists have experienced limited if not mediocre success in working with their more challenging clients. Further, physical illness or disease, psychological and emotional pain and conflict, and spiritual conflict and distress may all functionally be both a cause and an effect. More specifically for our purposes here, although psychological and relationship oriented pain and difficulties may to some degree have physical, moral or spiritual sources, it is the root of the problem where the symptoms lie that must be dealt with as effectively and thoroughly as possible. Our belief is that mental,

emotional and relational conflicts require competent therapeutic intervention on all of these levels. Part of this clinical competency with many clients and presenting issues may involve working with both the conscious and subconscious mind, and with some believers on various aspects of the unconverted subconscious. With Nelson (1967, p. 34) we agree that "... It is unrealistic for any Christian to expect God to magically remove a psychological problem that is buried in the subconscious mind, or to permanently remove the symptoms of such problems through faith and prayer... This would be like expecting God to cure appendicitis without a doctor."

PSYCHOLOGICAL EXPLORATIONS FROM THE SECULAR LITERATURE

Contributions of Object Relations Theory and Self Psychology

Modern psychodynamic theories have much to teach us about the workings of the subconscious mind. Although based on drive and ego psychology, the focus of object relations theory (see e.g., Glickauf-Hughes, 2006; Scharf & Scharf, 2005, 2000) and self psychology (Buirski & Kottler, 2007; Kohut, 1971; Lessem, 2005) are on interpersonal relationships—first and foremost with our primary caregivers (external objects) during critical developmental stages. Although objects are usually persons, they can also be parts or symbols of persons. Internalized objects are a person's mental representation of another; i.e., memories, ideas, or fantasies about a person as well as way of relating to a person. The inner representation is never the same as the actual person, characteristic of that person, or one's relationship with that person. Further, over time the self and object can become blurred to the point where the distinction between the self and the external object is unclear (see also St. Claire & Wigren, 2003). It is our intention here to provide an overview of object relations theory and self psychology and show how they are complementary, for example, in certain notions of the "good and bad self" and other. We will then discuss their implications to the unconverted subconscious.

The major need of and motivation for humans are for close personal relationships, and it is our early experiences with these "external objects" (or parts of them) which are modified as they are internalized; that is, they become organized into cognitive schemas (mental representations) of one's self in

relation to those objects or important others. These schemas or internal objects then influence the way we relate to the external world by the patterns that emerge in one's subjective experience of the caretaking environment. Unhealthy or specific deficits or trauma experienced in relation to these or other significant people in our inaccurate schemas (cognitive structures that organize knowledge and thoughts) that result from developmental years can give rise to a host of character and personality disorders that can influence the nature and quality of our personal relationships throughout life (e.g., in love, work, and play). One such developing schema is our image of self, which includes both conscious and subconscious mental representations of oneself. A loving and responsive caregiver helps the child self-soothe and regulate feelings so that eventually the child is able to develop an individuated view of self (versus an unhealthy sense of narcissism) that is worthy and lovable, an attitude toward others that is trustworthy and caring, and finally an understanding of and appreciation for "whole objects" (other people as having rights, feelings, needs, hopes, strengths, weaknesses, and insecurities that are both similar to and yet different from our own). In contrast, poor object relations can contribute to a negative view of self and others, poor reality testing, increased lacunae, heightened anxiety, deficits in coping, and affect deregulation.

Primitive defense mechanisms in infancy and early childhood such as denial, splitting, projection, and projective identification are used to manage intense feeling states (e.g., anxiety, frustration, rage). They are soon accompanied by more sophisticated defenses such as repression, regression, displacement, reaction formation, and dissociation. An extreme pathological form of dissociation, of course, is Dissociative Identity Disorder where there may be a number of different several "selves" in the same person but usually only one that is consciously manifested at any given time. Dissociated states may occur when, in reaction to a traumatic event (or series of events), a person splits the event into components that can be faced in the moment and those that cannot. These latter components are repressed but may then be recalled later through trauma triggers or flashes of intuitive or introspective experience.

In Freud's view all defenses in one way or another involve some degree of repression. To Freud, repression is the quintessential lacuna, for repression involves not just forgetting but forgetting that we

have forgotten (i.e., the act of repression is repressed along with the content of what is repressed). As Goleman (1985) reminds us, in repression entire classes of items that evoke psychological threat and confusion and emotional pain can get locked out of awareness, and this "... pain can be of many varieties: trauma, 'intolerable ideas', unbearable feelings, anxiety, guilt, shame, and so on" (pp. 112-113). All of our psychological defenses then are "... recipes for the ways we keep secrets from ourselves" (p. 113), and ripe candidates for repression include unacceptable sexual impulses and desires, aggressive urges, and "... most especially, disturbing memories" (p. 120). Goleman asserts that these secrets are retrievable only under extraordinary circumstances. Moreover, as creatures of habit, human beings are notorious for resisting change and not learning and profiting from their own experiences. How is it, for example, that parts of our "selves" that are inaccessible to our awareness keep us from being fully functional in the spiritual arena of our lives? Or, how is it that the subconscious "self-other" meanings keep playing out in some or all of our relationships, including the one with the God we believe in? Given the depth and complexity of our psyche then, one can begin to understand how the unconverted subconscious can take shape and function in the spiritual arena of our lives as much as any other.

In self psychology (Kohut, 1971) a caregiver's failure to mirror or adequately respond to the infant's healthy sense of grandiosity leads to an inner sense of emptiness, badness, and shame. The child may then develop a greater sense of grandiosity and even narcissism in order to compensate for early disappointments, failures, and trauma experienced in relation to their caregiving holding environment. Defense mechanisms such as splitting and idealization/ devaluation may then contribute to segmented parts of oneself in an effort to block that which comes from the pain and realization that there is something fundamentally bad or flawed about one's Self (or at least there must be). Splitting (a subconscious process) occurs when a person cannot keep two or more contradictory thoughts or feelings in mind at the same time (e.g., love and hate; trust and mistrust) and therefore compartmentalizes these thoughts and feelings in a way that they can focus on just one of them (or one set). With splitting, objects tend to be represented as either "good" (satisfying one's needs and desires) or "bad" (not satisfying or interfering with these needs and desires), worthy or

unworthy, powerful or defenseless, and so forth. This may include, for example, a "good me", "bad me", and as Harry Stack Sullivan (1953) would add, a "not me" that can result from the uncanny emotional reactions that accompany trauma, loss, or neglect. Feelings associated with each of these concepts of self can include: (a) Good me (love, joy, contentment, interest, hope, empowerment); (b) Bad me (helpless, hopeless, worthless, dependent, unlovable, self-hate, flawed broken, shattered, wounded); and (c) Not me (apathy, indifference, despair, lonely, alone, non-existent). According to Sullivan, uncanny emotions may render the individual helpless in terms of the mind's ability to process, store, and make sense of these kinds of experiences. Since many of the schemas that encode these self concepts remain out of awareness, particularly with regard to the "bad me" and the "not me", the person can find no words or content that make it possible to cope with these powerful emotions. Moreover, some unhealthy defenses may have taken over, thus making the development of an integrated sense of self a difficult task for these individuals.

Those who fail to eventually integrate both the good and bad aspects of oneself and others (an important developmental task) are more likely to develop mental health problems and sometimes personality disorders at some point in life (e.g., narcissistic possibly being the quintessential example). With borderline personality disorder, for example, the boundaries between self and others are not clear. These persons often suffer intense fusion anxieties in intimate relationships. Significant others in particular tend to be viewed as either all good or all bad at different times, depending on whether these people satisfy one's needs and desires or frustrate them. Identity diffusion, mood swings, and chaotic relationships are but some of the common characteristics of these individuals. Therapists must be aware that they too are likely to become objects of splitting with these clients and others with certain personality disorders. Moreover, various defenses in the client can also contribute to a host of psychopathological and relationship difficulties.

An example may prove useful at this juncture. Various forms of projection are common in the realm of intimate relationships. For instance, a man may have an impulse toward marital infidelity that he projects (attributes) to his spouse, only to find that after some time his wife begins to emotionally distance from him and show mistrust. After some time

his wife begins to feel like she is being pressured or coerced to play a part in her husband's unconscious interpersonal script, although she may not be consciously aware of these thoughts and feelings in herself. Her behavioral and attitudinal responses then confirm to her husband that she must indeed be having an affair, and/or that he is therefore justified in having an affair because she is so emotionally and physically unavailable to him. Therapy from an object relations and self psychology perspective may entail helping these clients modify maladaptive interpersonal schemas and gain insight into their subconscious world through a greater understanding and expression of their subjective pain and experience along with the therapist's empathic confrontation and interpretation of their projective identifications. This process may also help them rework developmental issues such as separation-individuation and gradually transform unhealthy representations of self and others.

Narcissism plays a central role in *self psychology* in that a person may interact with external objects as though they are part of the self, or in terms of the object performing essential functions for the self—all of which can become personally pathological as well as harmful to one's interpersonal relationships. According to Kohut (1971), developmentally, narcissistic injuries are inevitable and even necessary to temper ambitions and ideals with realism through the experience of more manageable frustrations and disappointments. It is the persistence and lack of recovery from these injuries that can lead to psychopathology. Misuse or overuse of the defenses can also contribute to self-deception and other various lacunae. In addition, according to *objects relations theory*, trauma (e.g., loss; abuse; serious injury, illness, or disability) can disrupt or delay development, with the result being a child who never emotionally matures, and one with a diffused identity and lacking in the ego strength to form and maintain healthy relationships. On the other hand, healthy narcissism is manifested by a strong, vital, cohesive self striving toward the full realization of one's talents and skills, including that which occurs in the service of others.

Successful therapy. We agree with Hyman Spotnitz (1969; Spotnitz & Meadow, 1976) that both schema reformation and corrective emotional experiences are needed in order to help the client work through what they missed during childhood and the resultant distortions in self-other relating. Part of this will occur through the process of transference as clients gradually internalize some of the therapist's

positive and reaffirming self-object functions. Part of it will also occur as client complaints and symptoms are examined through the meanings that generate them (Trembley, 1996).

Spotnitz (1976; see also Spotnitz & Meadow, 1976) believed that narcissistic defense was the central factor in most mental disturbances and is characterized by self-hate rather than self-love. The aggressive feelings and urges of most clients are directed towards the self more than toward other people. Defense analysis is often used to clarify, confront, and interpret the defense mechanisms a client uses so that he or she may hopefully gain greater control over these defenses. Also, a major task of therapy is to understand and use how the relationship unfolds in the therapy room; it is in the context of the therapeutic relationship that subconscious dynamics are seen, experienced and can be addressed firsthand. The end goal is a client with greater self-awareness who can recognize and make known his or her needs for acceptance and validation genuinely and honestly to others and respond to others in like manner. It is a client who has a more positive, realistic self-concept and an increased ability to relate to others as whole objects separate from oneself, rather than using people for self-gratifying reasons.

In sum, according to object relations theory, since parenting behavior and much of the family drama is internalized into the child's personality while growing up, throughout childhood and adult life people both consciously and subconsciously seek out others who will fulfill the roles (play the parts) of this family drama so that we can take care of unfinished business. This is done through distortion and manipulation of others in an effort to meet our needs and fit our blueprint, albeit in ways that are commonly outside our conscious awareness and thus much more difficult to resolve. Perhaps it is true that, in the end, it is always the unresolved distortions and conflicts in our most important human relationships that bring most people into therapy.

Special populations pose special challenges for therapists. As an illustration, when interviewed recently about his view of working with the subconscious in his male incarcerated young adult clients (some who have religious backgrounds), one of the co-authors of this article had this to say.

When working with adolescent male offenders they typically enter into therapy keenly unaware of their underlying thoughts and feelings. They often have forgotten what they sought to forget in an attempt to cope and manage problems

and pain at a deep meta-level. In my clinical workings I have discovered that they are unable to make the unsaid said. I have found that they must develop a sense of trust not only of me but of the process itself. Many have experienced a lifetime of adult induced therapy, but have they experienced a holding environment that speaks to them beyond what words can say, at the level of the subconscious? Often the young men who leave my office feel deeply that "he gets me, he understands who I am and I don't know why," and they are ready to begin the process of unraveling their box of tangled and soiled string to begin the trans-positional and introspective unknotting—one snarled piece of life string at a time. If you cannot identify the significance of their subconscious actuality that is more real than their conscious reality, much resistance will be experienced by the therapist who seeks to understand and help these male adolescents who find themselves within our criminal justice system.

The role of the therapist. In object relations therapy the therapist helps the client resolve the pathology of past relationships that are getting played out repetitively in the client's present relationships, including the relationship with the therapist. Although there is some use of confrontation and interpretation on the part of the clinician, a re-experiencing of crucial object relational issues such as intimacy, control, transparency, dependency, autonomy, and trust in association with the therapist is the transforming component of therapy. Hence, we believe that objects relations therapy is in many ways an emotion-focused approach. The therapist understands and holds the client's distorted object relations, while at the same time resists the client's subconscious need and attempt to draw the therapist into the same kind of relationship the client has experienced with other significant people in his or her life. Throughout the therapy a healthy balance of dependence and independence are tolerated in the client. Therapists can also rely on and use their own subconscious to help make the unknown known and the "unsaid said" in their work with clients. Still, all that is hidden need not, and in fact should not, be uncovered in therapy. The clinician must use great wisdom in discerning what truth or truths need to be revealed, and highly sensitive and skillful in uncovering these truths. For example, recurring thoughts and moral transgressions that harm others and make one a slave to oneself need to be broached; however, some blind spots that may be benign if not necessary for survival are better left alone. In short, whatever is contradicted needs to be in the service of the client's recovery and healing and be paced so that the client is able to both tolerate as well as assimilate these contrasts and contradictions. Of course, since thera-

pists have limited control as to what happens in psychotherapy, especially with unpredictable and highly complex clients and client situations, knowing how to respond to a client's inner core when it does come out and continually maintain a holding environment is both an art and a science.

Both modern and classical analytic approaches to working with clients are almost entirely verbal. As a general rule these approaches place the self in relationship to their subconscious or unconscious as an adversary, at war with itself to keep what is unconscious hidden. The therapist encourages the unspoken or unspeakable to reveal itself through a variety of analytic means (e.g., expressive techniques such as free association, dream analysis, autosuggestion). We believe it is already there in the room . . . if we are paying attention. The language of the unconscious is then decoded and interpreted through a variety of methods ranging from free association to dream analysis to slips of the tongue. The role of the analyst is to make what was subconscious conscious; however, even Freud acknowledged that insight and awareness alone would not often bring about change. Indeed, the unspoken reveals itself in the client's presentation and symptoms. It is there to be noticed and worked on as the therapist finds a way to introduce it and to invite a change in perspective and an experience of emotional working through over some period of time.

Spotnitz (1969, 1976) emphasizes the development of the narcissistic transference in working with clients. Transference is manifested in both verbal and nonverbal ways through behavior, as well as the client's symptoms, symbolic communications, and most notably, the transmission of feeling states or "induced feelings." More than promoting intellectual insight, Spotnitz's approach is primarily intended to initiate emotional and maturational breakthroughs in the client. With this technique Spotnitz was apparently able to help many patients who were previously viewed as beyond help by many in the psychoanalytic community (Sheftel, 1991), in our view because of a greater emphasis on corrective emotional experiences. This is because clients are often stuck and damaged at the deep emotional level, with many of these emotional experiences operating outside of awareness and in a way that both precedes and precludes language-based knowing, i.e., they are locked within the inner recesses of the subconscious (see also Greenberg & Safran, 1987). Indeed, human emotions have a life all their own, are a primary

motivator of behavior, and are often feared, avoided, and denied by our clients.

**REJOINDER: STANLEY JONES'
ASSESSMENT OF MODERN PSYCHOLOGY
AND THE REMEDY FOR AN
UNCONVERTED SUBCONSCIOUS**

Despite the many uses of modern psychology for helping people with psychological, emotional, and relational difficulties that Jones' would acknowledge, a spiritual problem can only have a spiritual answer. Of course, the ultimate answer to one's spiritual needs is the Lord Jesus Christ. Elsewhere Jones (1966) discusses the limitations and pitfalls of modern psychology's three main affirmations about the Self: to know thyself, to accept thyself, and to express thyself.

The advice of modern psychology points toward self-assertion, which means to put your self at the center. And anything that leaves you at the center is off-center. It feeds the disease it is trying to cure, namely, self-centeredness.... But whether an offer or a demand, the deepest necessity of human nature is to surrender itself to something, or someone, beyond itself. Your self in your own hands is a problem and a pain; your self in the hands of God is a possibility and a power (pp. 24-25).... So the best that secular psychology can do is improve the self, here and there. Cure it from its basic disease? No. For it leaves untouched its basic relationship with God. And with that untouched the basic disease of self-centeredness remains—remains unhealed. (p 22)

According to Jones, self-realization can only come through a complete and daily self-surrender to Christ and walking in the fullness of the Holy Spirit. It is when believers hold back parts of themselves, or something for themselves, during conversion and/or throughout the Christian life that spiritual growth is thwarted and unhealthy dissonance has an opportunity to take root. As Jones reminds us, we can be heartily committed to our faith and yet not fully surrendered to Christ. Only when Christians continually surrender all aspects of their lives and self to the Lordship of Christ does their subconscious mind have a chance to be healed and come alongside their conscious mind in their walk with Christ (Jones, 1968). Indeed, "... it is a paradox, but you are never so much your own than when you are most His. Bound to Him you walk the earth free" (1966, p. 33).

He concludes (1966, pp. 92-93):

Many are correct in their actions, but they are wrong in their reactions. The actions are usually determined by the will, but the reactions come out of the subconscious, and the subconscious is where the un-surrendered self lurks. Touch it and it

will blow its top. The modes of life come out of the conscious, but the moods of life come out of the subconscious. So the conversion of the actions is important, but the conversions of the reactions is just as important or in some ways more important than the actions. Without a complete self-surrender the conversion of the reactions is impossible. For reactions spring from the subconscious...

However, given that all areas of a person's inner life and experience are connected in some way, it may be that for some believers becoming aware of and dealing with unconverted aspects of their subconscious may also be aided through the assistance of a caring and competent psychotherapist or counselor. Highly skilled therapists can help individuals face and eventually work through their inner fears and conflicts that are making it difficult to fully surrender everything to God, both consciously and subconsciously. Such becomes our focus as follows.

**OVERVIEW OF OUR CLINICAL
APPROACH**

We integrate a relational, creative/experiential, and emotion-focused approach with more traditional talk therapies in helping the client become aware and therefore have a chance to contradict what was held as 'truth' about self and others (Trembley, 1996). It involves tapping the client's subconscious and attempting to promote emotional breakthroughs in therapy (see e.g., Carson & Becker, 2003; 2004; Greenberg & Safran, 1987; Greenberg, Watson, & Lietaer, 1999). In the relational approach the focus is less on techniques but more on how the symptoms are playing out in the therapeutic relationship. Much of the work can be one of contrast and contradiction.

However, we also employ a variety of experiential and emotion-focused interventions in an effort to explore and uncover hidden pain and the fear, shame and other core emotions lurking in the subconscious which often underlie mental anguish, relational difficulties, and unhealthy decision-making. Our belief is firmly rooted in the old adage: "Tell me and I will probably forget. Show me and I might remember. Involve me and I will always remember." In this way, psychotherapy is not just a dialogue but an experience, with keys parts of oneself, the therapist, and significant others both in and outside of the counseling setting (psychologically and emotionally speaking) being involved. With religiously oriented clients our intention is to carefully, skillfully and compassionately make the client aware of the unconverted subconscious that may be playing a part in the

client's symptoms, while providing an environment of safety, trust, and unconditional positive regard where the client can become aware of and interact with parts of themselves they are afraid to confront and issues they are reluctant to address.

In working with the unconverted subconscious (in a spiritual sense) and other aspects of the subconscious, one of our primary approaches is to use parts talk and parts work. This is done to help clients identify and often externalize aspects of the unconverted subconscious, then have them interact (verbally and non-verbally) with parts of their own unconverted subconscious and those of others in session, as well as other isolated and estranged parts of themselves. Hence, parts work may include (a) identifying, labeling, and sometimes externalizing parts of the unconverted subconscious; (b) client dialogue with the unconverted subconscious; i.e., using heart talk vs. head talk; and (c) through some Gestalt applications, speaking to the pain rather than resistant parts of the client, and having clients speak from that part to the therapist or other key individuals who are physically or mentally present in the room. In an effort to engage the emotions and senses in individuals, couples and families, we also use a host of expressive therapies that may include sculpting; psychodrama and other forms of role play and role reversal; letter writing and journaling; music, poetry, story-telling and metaphor; drawing and collage work; the use of props and other objects to help make abstract ideas more concrete; non-verbal methods such as eye and hand talk; and various types of mental imagery, creative visualization, and imagination.

Hence, our general goals in working with clients from this perspective are threefold: (1) To understand and clarify the reasons for the subconscious material in the first place and to integrate it into the client's story, both past and present; (2) To create a safe environment where these subconscious parts of the self can 'show up' and be accepted, understood, and contradicted; and (3) To be aware as therapists to not participate in feeding the shame that is often associated with subconscious material (i.e., unworthiness, judgment, etc.). Some specific guidelines are outlined that may be helpful to working with clients' unconverted subconscious. These are:

- * When possible and clinically advisable, speak directly to the client about the notion of the unconverted subconscious—even if in a hypothetical or possibility sense (i.e., educate and illuminate for a possible client "buy in").

- * Hypothesize early on with clients about certain parts of the subconscious that may or seem to be keeping them stuck or contributing to their difficulties or pathology.

- * Use immediacy in responding to the client's verbal cues and non-verbal behavior, and make clients aware of your own inner feelings and dialogue—sometimes spontaneously as they appear and at other times at appropriate and strategic junctures in therapy.

- * Allow and encourage clients to take the initiative in exploring and expressing their own unique and highly personal inner conflicts, ambivalence, and contradictions about anything they deem important in their lives (including any and all feelings and all sides of any issue), while at the same time helping them focus on what is most germane in the moment.

- * Help clients get in touch with and have the courage to express their attachment-based needs.

- * Help clients realize that emotional healing and relational freedom and restoration come not from overcontrolling, denying, suppressing or repressing their feelings, but by allowing their feelings to come through, having an opportunity to understand and work through them in a safe and caring environment.

- * Help clients understand the connections between past and present object relationship dynamics.

- * Encourage clients to tell their trauma story or stories that allow for both cognitive reprocessing and emotional working through.

- * Help clients understand that while our conscious mind may be completely willing and able to make a change, either in ourselves or a relationship, our subconscious mind may be in conflict with our conscious mind and sabotage our every effort, and that it is our subconscious mind that usually wins this battle. This is because desire and emotion often seem to win out over logic.

- * Help clients find and experience "back door" ways that are safe for them to tap into, explore, and reveal or express their subconscious, including anything and everything that may exist in the spiritual and religious arenas.

- * Help clients engage in creative experiencing when they are both in and outside of session. Creative experiencing helps stimulate the right side of the brain that includes images, sensual stimuli, and emotions, and also frees up the intuitive part of ourselves. Creative experiencing that involves combinations of our senses (e.g., vision, sound, and touch)

are most likely to impact both our consciousness and subconscious life.

* Have clients reinforce what is learned and experienced in and outside of session, both through repetitive imaginary experiencing as well as actual behavioral rehearsal. In this way the conscious and subconscious can begin to work more in harmony. In addition, focus as much on strengths and possibilities with clients as on the realities of what needs to be changed.

* Help Christian clients, through a restorative grace attitude and approach, make connections between certain aspects of their unconverted subconscious and difficulties in their walk with Christ that may be manifested in immorality, stubbornness, selfishness, misguided priorities, or a host of other choices and behaviors that keep their inner life stagnant or unhealthy and thus harm their relationship with God and others.

CONCLUSION

The centerpiece of early object relations for human beings is our relationship with our primary caregivers. For most people these are our parents, with mothers and fathers (or their equivalent) fulfilling unique roles and functions. However, even the best earthly parents fall short in their parenting practices, and the vast majority of children around the globe do not grow up in perfect homes—in fact, many far from it. Children also come into this world with their own set of challenges, including that of the development of our self concept. Since we acquire a grand schema for a good or good enough mother and father in the early years of life and also internalize various schematic "parts" of our primary caregivers into our own psyche (and continue to do so indefinitely), it is perhaps then no surprise that countless millions of people (even many born again believers) have difficulty relating to our ultimate Relational Object—God as "Father." For many, their internalized self-other concept may affect their image of God. Moreover, given that some aspects of our self-concept can take on a "good me", "bad me", and "not me" dimension in relation to our mother and father—not all of which remains known on a conscious level—one can begin to understand, at conversion to Christ (whether we are 8 or 80), that there can easily remain parts of ourselves that reside in the secret chambers of our subconscious mind. In addition, despite the fact that the role of the church

should be one of acceptance, forgiveness, and restorative grace, countless numbers of people have grown up in overly restrictive, emotionally unhealthy, and even abusive church environments that have included exploitative and even abusive church leaders. It is no wonder then that the subconscious minds of many believers today have been severely damaged. It is this conglomerate part of our heart and psyche that may constitute our unconverted subconscious. An encounter with the unconverted subconscious may be the first step toward change in many of our Christian clients (and clients who have turned away from their faith and religious upbringing), followed by a process that often involves connecting parts of the past to the present. This is because, as many in the trauma field have reminded us, the past is indeed the present.

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