

# Do Lay Christian Counseling Approaches Work? What We Currently Know

*Fernando Garzon*  
*Liberty University*

*Kimberely A. Tilley*  
*San Diego, CA*

Paraprofessional counseling has received empirical evidence of its effectiveness, yet the status of lay Christian counseling models remains unknown. The authors review the current research on such approaches. A few models evidence practitioner surveys, client satisfaction research, quasi-experimental studies, or outcomes-based case studies. One eclectic approach had a randomized waiting list control group study. Preliminary evidence for the effectiveness of Freedom in Christ (the Neil Anderson approach) and Theophostic Prayer Ministry was noted. In all studies reviewed, the authors identified methodological limitations; therefore, the broad need for well-designed efficacy and effectiveness research on every model is clear. With current data, we cannot say definitively that lay Christian counseling works. Consequently, the authors make recommendations on potential improved research designs and encourage further investigations.

The role of paraprofessional counseling is increasing both nationally and internationally. Internationally, the breadth of need (e.g., mainland China, Hou & Zhang, 2007), as well as efforts to reduce the cost of some socialistic healthcare programs (e.g., Great Britain, Clarkson, McCrone, Sutherby, et al., 1999) has driven the proliferation of these services. Nationally, limitations in mental health insurance benefits have increased the need and utilization of paraprofessional services. With increased usage comes increased need for empirical evaluation; therefore, this article explores the current research on paraprofessionals who use lay Christian models.

Paraprofessional counselors (lay counselors) are persons who lack formal credentialing, training, and experience as licensed mental health professionals, yet they are involved in the care of emotionally hurting people (Tan, 1997). Example venues for lay counseling include hotlines, peer counseling, home visitation programs, and church-based ministries (Tan, 1991).

Tan (1991, 1992, 1997) described three common models used in delivering paraprofessional counseling. The informal, spontaneous model provides support in natural settings (restaurants, homes, churches, etc.) through informal friendships. These paraprofessionals may or may not have some basic training in helping skills. No

ongoing supervision occurs. In the second model, the informal organized model, paraprofessionals still help in informal settings, but they receive systematic training and ongoing supervision. Finally, in the formal organized model, paraprofessionals counsel in more official settings such as a community agency or a church counseling center, receive regular supervision, and are usually trained by mental health professionals. Sometimes, hybrid models that combine the informal organized and formal organized models occur (Tan, 1997).

Research demonstrates the effectiveness of some kinds of paraprofessional counseling. Durlak (1979) reviewed 42 studies comparing professional and paraprofessional counselors. The studies focused primarily on mildly to moderately disturbed clients. Surprisingly, Durlak found no difference in client outcomes and some studies suggested paraprofessionals provided better care. Others reanalyzed the data using meta-analysis (e.g., Nietzel & Fisher, 1981; Hattie, Sharpley, & Rogers, 1984; Berman & Norton, 1985), yet similar results remained. Christensen and Jacobson (1994) conclude:

The later reviews often begin with a criticism of the previous reviews and then try to improve on the methodology. Yet, whatever refinements are made, whatever studies are included or excluded, the results show either no differences between professionals and paraprofessionals or, surprisingly, differences that favor paraprofessionals. (p. 9)

---

Please address correspondence regarding this article to Fernando Garzon, Psy.D., Center for Counseling and Family Studies, Liberty University, 1971 University Drive, Lynchburg, VA 24502. Email fgarzon@liberty.edu. Liberty University does not officially endorse lay Christian counseling approaches. Rather, it supports the theological and scientific examination of these strategies.

While more refined future studies matching specific diagnoses with particular clinical techniques (cf., Beutler, 2002) might lead to different comparative outcomes between lay counselors and professionals, current evidence supports no difference with generalized client populations. Given the number of studies done, one might anticipate strong current evidence for the effectiveness of lay Christian counseling. Yet, some conservative Christian groups, such as Nouthetic biblical counseling (e.g., Adams, 1970), exhibit a high distrust of psychology and thus have little interest in research or collaboration with mental health professionals. Many other lay Christian counseling approaches exist however (Garzon, Worthington, Tan, and Worthington, 2009). The authors found no summary of research on these approached in the literature.

Indeed, many questions exist regarding lay Christian counseling models: (a) How effective do clients perceive such counseling to be? (b) What does current outcomes research on lay Christian counseling models indicate?, and (c) What future studies on lay Christian counseling programs should be considered? This article will review the currently available research on lay Christian counseling models in an attempt to answer these questions.

## Method

### Definitions

For the purposes of this review, *lay Christian counseling* applies to paraprofessional religious ministries that affirm doctrinal tenets consistent with the Nicene Creed (a standard creed of Christian orthodoxy), that minister or counsel primarily face-to-face, have a clear focus on training non-professionals/non-clergy in their approach, and which focus on a wide variety of client types instead of focusing on one type (for example, Christian 12-Step programs for addiction and Exodus Ministries programs for Christians experiencing same-sex attraction).

The models found in this review appear to derive from evangelical Christian or Charismatic-related contexts. Lay Christian counseling has some commonalities with spiritual direction in that both may explore the client's spiritual life with the purpose of increasing the person's spiritual growth. Unlike spiritual direction, lay counseling also generally has a primary mental health goal (e.g., decrease anxiety, improve interper-

sonal relationships, etc.). Such goals are normally secondary in spiritual direction. Finally, spiritual directors are often clergy with additional training rather than lay people.

### Procedure of the Search

The writers consulted several databases (*Academic Search Premier*, *Blackwell Synergy*, *Medline*, *ATLA*, and *PsycINFO*) to identify pertinent lay Christian counseling research. Dissertations were also reviewed in the *ProQuest Dissertations and Theses* database. Search words used included lay Christian counseling, the names of a variety of lay Christian models (See Garzon, et al., 2009, for a table listing these models), the names of lay Christian counseling model developers, religious paraprofessional counseling, and spiritual paraprofessional counseling. Finally, faculty at various integration-focused psychology programs were contacted regarding any on-going lay counseling research.

## Lay Christian Counseling Research

The authors divide this review of the literature into early research (1980-1990) and then by the four categories described in Garzon, et al., (2009). The reviewed categories include Active Listening, Cognitive & Solution-Focused Approaches, Inner Healing Approaches, and Mixed Models. Nouthetic biblical counseling (e.g., Adams, 1970) was not included given its lack of research and the distrust of some of its leaders in using empirical methods. Specific models with research are briefly described with references provided for further details on the approach. Table 1 summarizes all the studies found in this review. The authors note overall findings, significant limitations, and make design improvement suggestions in the discussion section.

### Early Research (1980-1990)

The authors identified 3 early studies on lay Christian counseling (Boan & Owens, 1985; Harris, 1985; Walters, 1987), but the articles lacked specific information on the lay ministry approach used. Therefore, the ability to generalize this research to other lay Christian approaches is highly suspect. Many models have developed since this initial research.

### Active Listening Approaches

Stephen Ministry (Haugk, 1984; Haugk, 2000) represents a classic example of these models. The approach combines Rogerian principles of empathy, positive regard, and supportive listening with prayer, scripture, and biblical themes as

appropriate. No research was found on this or other active listening Christian approaches, although the developers voiced openness to this. See Garzon, et al., (2009) for a description of this ministry's training and organizational structure.

### ***Cognitive & Solution-Focused Approaches***

While a number of lay Christian cognitive approaches exist (e.g., Crabb, 1977; Backus, 1985; Tan, 1991), the authors found no outcomes research focusing exclusively on a lay cognitive, cognitive behavioral, or solution-focused strategies. It should be noted however that Christian cognitive therapy approaches have some studies with doctoral level clinical psychology graduate students or professional therapists as the treatment providers (See McCullough, 1999, and Worthington & Sandage, 2002, for meta-analyses). These suggest efficacy with mildly to moderately depressed clients. Lay models with an eclectic framework and a cognitive behavioral component have been researched however. Because of the multiple therapeutic strategies involved, these studies are described under the Mixed category (see below).

### ***Inner Healing Prayer Models (IHP)***

Hurding (1995) noted that these prayer approaches represent "a range of 'journey back' methodologies that seek, under the Holy Spirit's leading, to uncover personal, familial, and ancestral experiences that are thought to contribute to the troubled present" (p. 297). These troubles may be physical, emotional, or spiritual. See Garzon and Burkett (2002), and Garzon, et al., (2009) for more in-depth descriptions of inner healing prayer. The present authors reviewed only IHP research that focused on clearly identified models.

*Christian Healing Ministries (Francis MacNutt, CHM).* CHM displays a Christian inner healing prayer focus in lay training very similar to Elijah House Ministries described in Garzon, et al., (2009). One study (Matthews, Marlowe, & MacNutt, 2000) has been done on this approach.

*Theophotic Prayer Ministry (TPM).* Theophotic Prayer Ministry was developed by Ed Smith, a pastoral counselor, in the mid-1990's. Smith (2007) differentiates his approach from inner healing prayer strategies in several ways which will be acknowledged here. It is included in the general IHP research category because of its emphasis on addressing current life stressors through prayer focusing on the client's past, frequently involving childhood memories.

In TPM, the lay counselor asks the person to focus on the painful emotions involved in her currently distressing situation. The person is then encouraged to let her mind connect to "the original memory container" (Smith, 2007, p. 31) which holds the embedded lies amplifying the distress. "Lies" are similar to core beliefs or schema in cognitive therapy. Here Smith (2007) differentiates himself from typical IHP approaches. He emphasizes that it's the lies embedded in the memory versus the memory itself that is causing the person's distress. The person and prayer partner collaborate to identify the lies present in the memory that surfaces. Once these are identified, something similar to what a therapist might identify as an exposure protocol occurs. The person is asked to feel the affect around the beliefs in the memory without resisting the emotions or examining the rationality of the belief. Then, unlike cognitive therapy or exposure protocols, petition is made for the Lord Jesus to reveal the truth to the person about these beliefs. A variety of experiences at this point can occur as the client listens for Christ's response. Prayer continues until there is a sense of complete peace in the memory. Further information on TPM may be found in Smith's latest basic training manual (2007 at the time of this article). As some proponents of TPM have at times made dramatic claims based on anecdotal (testimony) evidence and critics have expressed concerns about possible harm from TPM (e.g., Entwistle, 2004), the need for research is apparent. Several surveys and one outcomes-based case study project have been done (Garzon, 2004, 2008; Garzon & Paloma, 2003, 2005; Tilley, 2008).

### ***Mixed Lay Christian Models***

Mixed approaches have similarities to Active Listening, Cognitive, and Inner Healing Prayer categories, but they have sufficient differences to lead to a separate category. They either reflect a more heterogenous application of various psychological theory bases, or a more thorough examination of theological aspects, such as the role of the flesh and the demonic in emotional distress, or both. One eclectic lay model and one theologically in-depth model was found with research. These models are described below.

*Eclectic with an Integrated Cognitive Behavioral Component (E-CBT).* Lay Christian counseling models with an eclectic base that incorporate a clear cognitive behavioral component have received two outcome studies (Toh, Tan,

Osburn, & Faber, 1994; Toh & Tan, 1997). Roge-ran, psychodynamic, and family systems elements also composed the eclectic base of these approaches.

*Freedom in Christ Ministries (FICM)*. FICM proposes that the unbiblical lies Christians believe often lead to spiritual and psychological distress (Anderson, 1990a/2000a). These lies can arise from the flesh, demonic deception, and messages received from popular culture (Anderson, 1990b/2000b). Seven key areas (described as "the Steps to Freedom," or "the Steps" in FICM literature) are seen as essential for resolution in order to resolve personal issues. These include confession and renunciation of occult/non-Christian religious involvement; confession of defensive strategies outside of Christ; forgiveness of others, self, and God; confession of rebellion to proper authority; repentance for areas of pride; confession and repentance in areas of habitual sin, and confession of family generation sin patterns (Anderson, 1990/2000b). For a more in-depth description of FICM, see Garzon, Garver, Kleinschuster, Tan, and Hill (2001), and Garzon, et al., (2009). Several preliminary effectiveness studies of FICM were identified (Garzon, Garver, Kleinschuster et al., 2001; Combs, 2006; Crabtree, 2006; Fisher, 2006; Seitz, 2006; Hurst, Williams, King, & Viken, 2008).

### Discussion

The writers identified above several convenience sample surveys and quasi-experimental studies used to investigate lay Christian counseling, along with one randomized waiting list control group study. A brief summary analysis of current research findings, limitations, and future design recommendations follow.

Surveys of practitioners (TPM) and surveys of client satisfaction (TPM, FICM) provide a sketch of the characteristics and satisfaction level of lay counselors and clients who appear to endorse these particular approaches. Such effectiveness evaluations appear very high. Design flaws in the surveys done however suggest the possibility of biased sampling, so these results must be taken with caution. The surveys do suggest that some mental health professionals are incorporating lay strategies into their practices. Also, several approaches (TPM, FICM, Cognitive) appear open to interact with mental health professionals for supervision and referral. Some have written explicitly describing potential models of

interaction (Cognitive, Tan, 1991; FICM, Anderson, Zuehlke, & Zuehlke, 2000). This is encouraging since it appears lay Christian counselors are at times treating quite complex conditions.

Improved methodology can reduce the biased sampling risk. A recent study of religiously-tailored interventions in Christian therapy (Wade, Worthington, & Vogel, 2007) suggests a potential design for improved representativeness of survey samples. In this study, therapists and their clients were recruited from seven different agencies in different regions of the country. Anonymous survey data examined a one week cross-section of the clients' experiences for that week's session and their satisfaction with the session and treatment up to that point. Information on the length of treatment, perceived effectiveness of treatment, the therapeutic alliance, and demographics were obtained. Since all clients for that week who saw therapists were given the opportunity to participate, the probability of a more representative sample increased.

Given that many of these lay counseling models are nationwide and have church-based ministry centers, the possibility of a similar methodology to Wade, Worthington, and Vogel's exists. Should such a study occur, efforts should be made to include lay Christian counseling centers for investigation that operate in ethnically diverse communities, as this was one weakness in the Wade, Worthington, and Vogel study.

Single group pre-treatment post-treatment short term follow-up studies (E-CBT, FICM), quasi-experimental studies (FICM, IHP), and outcomes-based case studies (TPM, FICM) have produced intriguing results meriting further exploration. A strength of these studies is their demonstration of an association between several approaches (E-CBT, TPM, FICM) and symptom reductions in naturalistic settings. For additional studies of a similar design, the writers recommend a time series pre-treatment symptom baseline to compare with the post treatment outcome, and longer term follow-up (six months or more). Only one identified study had a pre-treatment baseline (Fisher, 2006). Comparison groups also would be helpful. Only one study in this category (FICM; Hurst, Williams, King, & Viken, 2008) utilized such a group.

Mixed design qualitative studies may also be beneficial (Garzon, 2008). These studies permit in-depth exploration and comparison of both positive lay Christian counseling experiences and negative ones. For example, a quantitative survey

Table 1  
Summary of Lay Christian Counseling Research

| Lay Model                                                                | Study               | Participants                                                                                   | Design                                        | Measures                                                                                                                    | Major Findings                                                                                                                                                                                                  |
|--------------------------------------------------------------------------|---------------------|------------------------------------------------------------------------------------------------|-----------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Early Research (1980-1990)                                               |                     |                                                                                                |                                               |                                                                                                                             |                                                                                                                                                                                                                 |
| Non-model specific, early lay Christian counseling                       | Harris (1985)       | Four groups with each group having differing levels of "resource person" involvement<br>N = 44 | Pretreatment-post treatment                   | Schulman's (1978) self concept scale                                                                                        | All groups improved statistically and the addition of a resource person improved client outcome                                                                                                                 |
| Gerald Egan's work (1975) as foundation, along with specialized training | Boan & Owens (1985) | Current & past clients of Reformed Church in Carmichael, CA<br>N = 215                         | Lay peer evaluation and mailed client survey  | Likert scale peer evaluation instrument, client satisfaction survey                                                         | Level of client satisfaction with the lay ministry was not reported, focus appeared primarily on assessing the utility of lay peer evaluations, which were found to be useful in predicting client satisfaction |
| Non-model specific                                                       | Walters (1987)      | Clients who received lay counseling from the First Presbyterian Church in Boulder<br>N = 98    | Evaluations of client change and satisfaction | A primarily Likert-scale item questionnaire (psychometrically researched) developed by the Family Service Association (FSA) | Lay counselors compared favorably with FSA professionals on measures of client change and client satisfaction                                                                                                   |
| Active Listening Approaches                                              |                     |                                                                                                |                                               |                                                                                                                             |                                                                                                                                                                                                                 |
| Stephen Ministry                                                         | N/A                 | N/A                                                                                            | N/A                                           | N/A                                                                                                                         | No research was found on Active Listening approaches                                                                                                                                                            |

Table 1 continues next page

**Table 1** (continued)  
*Summary of Lay Christian Counseling Research*

| Lay Model                                          | Study                                 | Participants                                                | Design                                      | Measures                          | Major Findings                                                                                                                                                                                                                                                                                      |
|----------------------------------------------------|---------------------------------------|-------------------------------------------------------------|---------------------------------------------|-----------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <i>Cognitive &amp; Solution-Focused Approaches</i> |                                       |                                                             |                                             |                                   |                                                                                                                                                                                                                                                                                                     |
| Lay Christian cognitive approaches                 | N/A                                   | N/A                                                         | N/A                                         | N/A                               | Christian cognitive therapy models have been researched in psychotherapy (See Worthington & Sandage, 2002) with good results, but no cognitive therapy studies have utilized lay counselors in their investigation. No outcomes-related research on lay solution-focused counseling was identified. |
| <i>Inner Healing Prayer Models (IHP)</i>           |                                       |                                                             |                                             |                                   |                                                                                                                                                                                                                                                                                                     |
| Christian Healing Ministries                       | Matthews, Marlowe, and MacNutt (2000) | Rheumatoid arthritis patients<br>N = 40                     | Nonrandomized waiting list crossover design | Ten medical outcomes measures     | Statistically significant differences in two of the 10 outcome categories and a trend towards significance in 7 of the remaining 8 categories were found                                                                                                                                            |
| TPM                                                | Garzon and Paloma (2005)              | Attendees at an advanced TPM training conference<br>N = 111 | Convenience sample descriptive study        | Self report survey                | Lay counselors are working with a wide range of conditions using TPM.<br>High perceptions of effectiveness for TPM were found.                                                                                                                                                                      |
| TPM                                                | Garzon and Poloma (2003)              | TPM email database of purchasers of materials<br>N = 1,352  | Descriptive online survey study             | Self report web-based survey      | Similar high effectiveness perceptions with larger sample. Openness to mental health supervision indicated. No difference between lay counselors and licensed clinicians in effectiveness perceptions.                                                                                              |
| TPM                                                | Tilley (2008)                         | Email respondents from TPM database<br>N = 2,817            | Descriptive online survey                   | Online client satisfaction survey | Participants rated previous non-TPM counseling experiences as effective, but reported TPM's effectiveness as significantly higher in a variety of areas.                                                                                                                                            |

Table 1 continues next page

Table 1 (continued)  
Summary of Lay Christian Counseling Research

| Lay Model                  | Study                                       | Participants                                                           | Design                                                               | Measures                                                                                                                       | Major Findings                                                                                                                                                                                                                                                                |
|----------------------------|---------------------------------------------|------------------------------------------------------------------------|----------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| TPM                        | Garzon (2004, 2008)                         | Clients from both professional and lay counseling settings<br>N = 22   | Outcomes-based time series case studies with 3 month follow-up       | SCL 90-R, SWBS, ROS-R, DAS, BPRS, client satisfaction survey, blind independent review post treatment                          | Case results supported clear symptom improvement, decreased dysfunctional beliefs, and enhanced spiritual outcomes for most clients                                                                                                                                           |
| Mixed Lay Christian Models |                                             |                                                                        |                                                                      |                                                                                                                                |                                                                                                                                                                                                                                                                               |
| E-CBT                      | Toh, Tan, Osburn et al. (1994)              | Clients from La Canada Presbyterian Church, CA<br>N = 18               | Combined group pre-post outcome study                                | Target Complaints, BSC, SWBS, Brief Symptom Checklist, and the lay person's Global Rating of Client's Psychological Adjustment | No difference between 10 and 20 session groups. Combined group had significant decreases on the four outcome measures used pre to post counseling                                                                                                                             |
| E-CBT                      | Toh & Tan (1997)                            | Clients from First Evangelical Free Church in Fullerton, CA,<br>N = 46 | Randomized waiting list control group study with one month follow-up | Target Complaints, BSC, SWBS, and the lay person's Global Rating of Client's Psychological Adjustment                          | Significant improvements in target complaints, symptoms reported, spiritual well-being, and lay counselor ratings of client improvement occurred at post-treatment in the treatment group in comparison to the waiting list control group, maintained at one-month follow-up. |
| FICM                       | Garzon, Garver, Kleinschuster et al. (2001) | Graduate student class<br>N = 32                                       | Single group pre-post 3-week follow-up                               | RSEI, BAI, SCL 90-R, 12-item inventory                                                                                         | Significant decreases in several SCL-90-R subscales and the BAI. The RSE indicated increased levels of self esteem. Results maintained at the 3-week follow-up.                                                                                                               |
| FICM                       | Combs (2006)                                | Adult Sunday school participants at large evangelical church<br>N = 21 | Single group time series design with six week follow-up              | PAS, DES-II as screeners, the BSI, BDI-II, TSOS, and 12-item inventory as outcome measures                                     | Significant decreases in several BSI subscales and the BDI-II occurred. BAI results were not significant. The TSOS indicated significantly improved spiritual functioning. Results were maintained at the 6 week follow-up.                                                   |

Table 1 continues next page

**Table 1** (continued)  
*Summary of Lay Christian Counseling Research*

| Lay Model | Study                                   | Participants                                                                                                       | Design                                                            | Measures                                                  | Major Findings                                                                                                                                                                                            |
|-----------|-----------------------------------------|--------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|-----------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| FICM      | Fisher (2006)                           | Participants at 4-day FICM conference<br>N = 56                                                                    | Time series one group design with pre and post treatment baseline | SCL 90-R and a 12-item Likert scale questionnaire         | The Global Severity Index of the SCL 90R reflected a statistically significant symptom reduction pattern. Client satisfaction ratings at post conference and the three-month follow-up appeared positive. |
| FICM      | Hurst, Williams, King, and Viken (2008) | Participants at two FICM weekend conferences<br>Treatment group <i>n</i> = 33<br>Non-treatment group <i>n</i> = 18 | Non-randomized comparison group study                             | 12-item Likert scale questionnaire                        | Results for the treatment group indicated significant differences on all 12 items, and significant differences with the comparison group on all 12 items.                                                 |
| FICM      | Anderson, Garzon, & King (2002)         | Clients in a clinical setting<br>N = 10                                                                            | Times series effectiveness case study design                      | SCL 90-R, DAS, SWBS, and a 12-item questionnaire          | The results appeared to suggest a positive treatment effect overall. Therapists varied the timing of Steps implementation according to client characteristics.                                            |
| FICM      | Seitz (2006)                            | Clients were referred for treatment by lead pastor of a large church<br>N = 3                                      | Three time series design case studies                             | DASS, TSOS, SCID I, PAS, DES-II, the BAI, and the BDI-II. | Results for two clients with prominent Axis II features did not reflect a symptom reduction series pattern. The third client reduced in depression symptoms. Nonspecific factors could not be ruled out.  |

*Note.* BAI = Beck Anxiety Inventory (Beck & Steer, 1993), BDI-II = Beck Depression Inventory II, BPRS = Brief Psychiatric Rating Scale (Fisher & Corcoran, 1994), BSI = Brief Symptom Inventory (Derogatis, 1993), DAS = Dysfunctional Attitude Scale (Weissman & Beck, 1978), DASS = Depression Anxiety Stress Scale (Lovibond & Lovibond, 1995), DES-II = Dissociative Experience Scale II (Carlson & Putnam, 1993), E-CBT = Eclectic with a Cognitive Behavioral Therapy component, FICM = Freedom in Christ Ministry, PAS = Personality Assessment Screener (Morey, 1997), ROS-R = Religious Orientation Scale-Revised (Gorsuch & McPherson, 1989), RSEI = Rosenberg Self Esteem Inventory (Rosenberg, 1965), SCID I = Structured Clinical Interview for DSM IV Axis I disorders, SCL 90-R = Symptom Checklist 90-Revised (Derogatis, 1994), SWBS = Spiritual Well-Being Scale (Paloutzian & Ellison, 1982), TPM = Theophostic Prayer Ministry (Smith, 2007), TSOS = Theistic Spiritual Outcome Survey (Richards, Smith, Schowalter, et al., 2005).

with questions focusing on specific intervention aspects could evaluate whether the client experienced the lay model of interest or a "hybrid" developed by the particular lay counselor, while a qualitative semi-structured interview would permit comparisons of clients with positive lay Christian counseling experiences with negative ones.

The presence of only one randomized waiting list control group study (E-CBT category) after over twenty-five years of published lay Christian counseling models is disconcerting. The writers found no placebo or minimal support randomized control group or randomized active comparative group study of any lay Christian counseling approach in this literature review. Undoubtedly, more randomized efficacy and effectiveness studies are needed before a clear assessment of lay Christian counseling can be made. In addition to psychological symptom measures and spiritual outcome measures, these studies should include an instrument measuring the influence of client expectancy effects in treatment outcome, and consider the role lay counselor allegiance to the model might play in the results.

The authors recognize a caveat however for the lack of randomized comparative or control group studies in lay Christian counseling models. Most lay Christian counseling model developers have no research training. Only E-CBT developers had substantial training in this area. Not surprisingly, only this lay model had an investigation that utilized random assignment and a waiting list control group (Toh & Tan, 1997). An informal survey of each of the non-E-CBT model developers (See Table 1 in Garzon, et al., 2009, for a listing of the models contacted) indicated their willingness to cooperate with religiously-sensitive researchers who wanted to do studies on their approaches. Some have already started cooperating (e.g., Matthews, Marlowe, & MacNutt, 2000). This is an encouraging sign.

Challenges remain however. Only one clearly identified research team currently appears to be investigating lay Christian models. Integration-focused clinical psychology and counseling programs can change this. These have existed now for over thirty years; thus, the potential for these programs to get more involved in investigating lay Christian counseling models is apparent. Lay Christian counseling model developers need their empirical expertise. Given that some counseling professionals are incorporating lay interventions into psychotherapy, the time for research collaboration with lay model developers is now.

## Conclusion

Current findings on lay Christian counseling are very limited compared to paraprofessional counseling as a whole. Only one randomized waiting list control group study has been done, this on an eclectic approach with a CBT component. Numerous other lay models exist. Present preliminary studies on two approaches, one from the IHP category (TPM) and one from the mixed models category (FICM) provide a sketch of those receiving these approaches and give some preliminary evidence of effectiveness. These findings need to be confirmed with well-designed efficacy and effectiveness studies. In short, current data does not allow us to say definitively that lay Christian counseling works. Given the openness of lay model developers to collaborate on research, integration-focused graduate programs have an opportunity to address this important gap in the literature.

## References

- Adams, J. (1970). *Competent to counsel*. Grand Rapids, MI: Zondervan.
- Anderson, N. T. (1990/2000a). *Victory over the darkness: Realizing the power of your identity in Christ*, first/second edition. Ventura, CA: Regal Books.
- Anderson, N. T. (1990/2000b). *The bondage breaker*, first/second edition. Eugene, OR: Harvest House Publishers.
- Anderson, N., Garzon, F., & King, J. (2002). *Released from bondage*, revised edition. New York: Thomas Nelson Press.
- Anderson, N. T., Zuehlke, T. E., & Zuehlke, J. S. (2000). *Christ centered therapy*. Grand Rapids, MI: Zondervan.
- Backus, W. (1985). *Telling the truth to troubled people*. Minneapolis, MN: Bethany House.
- Beck, A. T. & Steer, R. A. (1993). *Beck anxiety inventory manual*. New York: The Psychological Corporation.
- Berman, J., & Norton, N. (1985). Does professional training make a therapist more effective? *Psychological Bulletin*, 98, 401-407.
- Beutler, L. (2002). The dodo bird is extinct. *Clinical Psychology: Science and Practice*, 9, 30-34.
- Boan, D., & Owens, T. (1985). Peer ratings of lay counselor skill as related to client satisfaction. *Journal of Psychology and Christianity*, 4(1), 79-81.
- Carlson, E., & Putnam, F. (1993). An update on the Dissociative Experiences Scale. *Dissociation*, 6(1), 16-27.

- Christensen, A., & Jacobson, N. (1994). Who (or what) can do psychotherapy: The status and challenge of nonprofessional therapies. *Psychological Science*, 5, 8-14.
- Clarkson, P., McCrone, P., Sutherby, K., Johnson, C., Johnson, S., & Thornicroft, G. (1999). Outcomes and costs of a community support worker service for the severely mentally ill. *Acta Psychiatrica Scandinavica*, 99, 196-206.
- Combs, J. (2006). Single group, time series design utilizing Anderson's Steps to Freedom. Ph.D. dissertation, Regent University, Virginia Beach, VA. Retrieved May 30, 2008, from Dissertations & Theses: Full Text database. (Publication No. AAT 3224989).
- Crabb, L. J., Jr. (1977). *Effective Biblical counseling*. Grand Rapids, MI: Zondervan.
- Crabtree, R. K. (2006). Concurrent validity of Ministry of Healing/Sonlife Questionnaire with Symptom Checklist-90-Revised. Psy.D. dissertation, Regent University, United States – Virginia. Retrieved May 30, 2008, from Dissertations & Theses: Full Text database. (Publication No. AAT 3238352).
- Derogatis, L. (1993). *Brief Symptom Inventory: Administration, scoring, and procedures manual* (4th ed.). Minneapolis, MN: Pearson Assessments.
- Derogatis, L. R. (1994). *SCL-90-R: Administration, scoring and procedure manual-I for the R (revised) version*. Minneapolis: National Computer Systems.
- Durlak, J. (1979). Comparative effectiveness of paraprofessional and professional helpers. *Psychological Bulletin*, 86, 80-92.
- Entwistle, D. (2004). Shedding light on Theophostic Ministry 1: Practice issues. *Journal of Psychology and Theology*, 32, 26-34.
- Fisher, W. (2006). A quasi-experimental design on "The steps to Freedom in Christ". Psy.D. dissertation, Regent University, United States – Virginia. Retrieved May 30, 2008, from Dissertations & Theses: Full Text database. (Publication No. AAT 3238341).
- Fisher, J., & Corcoran, K. (Eds.). (1994). *Measures for clinical practice* (Vol. 2, 2nd edition). New York: The Free Press.
- Garzon, F. (2004). Theophostic Ministry: What is it? Who's Using It? What Does the Research Show? *Reformation & Revival Journal, Special Issue: Counseling: The Cure of Souls*, 13(2), 101-113.
- Garzon, F. (Ed.) (2008). *Pursuing peace: Case studies exploring the effectiveness of Theophostic Prayer Ministry*. Xulon Press.
- Garzon, F. & Burkett, L. (2002). Healing of memories: Models, research, future directions. *Journal of Psychology and Christianity*, 21, 42-49.
- Garzon, F., Garver, S., Kleinschuster, D., Tan, E., & Hill, J. (2001). Freedom in Christ: Quasi-experimental research on the Neil Anderson approach. *Journal of Psychology and Theology*, 29, 41-51.
- Garzon, F. & Poloma, M. (2003, October). The Usage of Inner Healing Prayer in the Conservative Christian Population: An Exploratory Survey. Paper presentation at the international convention of the Society for the Scientific Study of Religion, Norfolk, VA.
- Garzon, F., & Poloma, M. (2005). Theophostic Ministry: Preliminary Practitioner Survey. *Pastoral Psychology*, 53, 387-396.
- Garzon, F., Worthington, E. L. Jr., Tan, S.-Y. & Worthington, R. K. (2009). Lay Christian counseling and client expectations for integration in therapy. *Journal of Psychology and Christianity*, 28, 113-120.
- Gorsuch, R., & McPherson, S. (1989). Intrinsic/Extrinsic measurement: I/E-Revised and single-item scales. *Journal for the Scientific Study of Religion*, 28, 348-354.
- Harris, J. (1985). Non-professionals as effective helpers for pastoral counselors. *Journal of Pastoral Care*, 39, 165-172.
- Hattie, J., Sharpley, C., & Rogers, H. (1984). Comparative effectiveness of professional and paraprofessional helpers. *Psychological Bulletin*, 95, 534-541.
- Haugk, K. (1984). *Christian caregiving: A way of life*. Minneapolis, MN: Augsburg Publishing.
- Haugk, K. (2000). *Stephen Ministry training manual*, Volume 1. St. Louis, MO: Stephen Ministry.
- Hou, Z.-J., & Zhang, N. (2007). Counseling Psychology in China. *Applied Psychology: An International Review*, 56, 33-50.
- Hurding, R. F. (1995). Pathways to wholeness: Christian journeying in a postmodern age. *Journal of Psychology and Christianity*, 14, 293-305.
- Hurst, G., Williams, M., King, J., & Viken, R. (2008). Faith based intervention in depression, anxiety, and other mental health disturbances. *Southern Medical Journal*, 101, 388-392.
- Lovibond, P., & Lovibond, S. (1995). The structure of negative emotional states: Comparison of the Depression Anxiety Stress Scales (DASS) with the Beck Depression and Anxiety Inventories. *Behavior, Research, and Therapy*, 33, 335-343.
- Matthews, D., Marlowe, S., & MacNutt, F. (2000). The effects of intercessory prayer on patients with Rheumatoid Arthritis. *Southern Medical Journal*, 93, 1177-1186.
- McCullough, M. (1999). Research on Religion-Accommodative Counseling: Review and Meta-Analysis. *Journal of Counseling Psychology*, 46, 92-98.
- Morey, L. (1997). *Personality Assessment Screener professional manual*. Lutz, FL: Psychological Assessment Resources.
- Nietzel, M., & Fisher, S. (1981). Effectiveness of professional and paraprofessional helpers: A comment on Durlak. *Psychological Bulletin*, 89, 555-565.
- Paloutzian, R. & Ellison, C. (1982). Loneliness, spiritual well-being and quality of life. In Peplau, L. A., & Perlman, D. (Eds.), *Loneliness: A sourcebook of current theory, research and therapy* (pp. 224-237). New York: Wiley Interscience.

Richards, P., Smith, T., Schowalter, M., Richard, M., Berrett, M., & Hardman, R. (2005). Development and validation of the theistic spiritual outcome survey. *Psychotherapy Research, 15*, 457-469.

Rosenberg, M. (1965). *Society and the adolescent self-image*. Princeton, NJ: Princeton University Press.

Seitz, C. (2006). Case studies utilizing Anderson's freedom in Christ treatment methodology. Ph.D. dissertation, Regent University, United States – Virginia. Retrieved May 30, 2008, from Dissertations & Theses: Full Text database. (Publication No. AAT 3209215).

Schulman, L. (1978). A study of practice skills. *Social Work, 23*, 274-280.

Smith, E. (2007). *Theophostic Prayer Ministry: Basic training seminar manual*. Cambellsville, KY: New Creation Publishing.

Tan, S.-Y. (1991). *Lay counseling: Equipping Christians for a helping ministry*. Grand Rapids, MI: Zondervan.

Tan, S.-Y. (1992). Development and supervision of paraprofessional counselors. In L. VandeCreek, S. Knapp, & T. L. Jackson (Eds.), *Innovations in clinical practice: A sourcebook*, (Vol. II, pp. 431-440). Sarasota, FL: Professional Resource Press.

Tan, S.-Y. (1997). The role of the psychologist in paraprofessional helping. *Professional Psychology: Research and Practice, 28*, 368-372.

Tilley, K. (2008). *Current perceptions of the effectiveness of Theophostic Prayer Ministry*. Unpublished doctoral dissertation, Southern California Seminary, El Cajon, CA.

Toh, Y-M., Tan, S.-Y., Osburn, C. D., & Faber, D. E. (1994). The evaluation of a church-based lay counseling program: Some preliminary data. *Journal of Psychology and Christianity, 13*, 270-275.

Toh, Y-M., & Tan, S. Y. (1997). The effectiveness of church-based lay counselors: A controlled outcome study. *Journal of Psychology and Christianity, 16*, 260-267.

Wade, N., Worthington, E., & Vogel, D. (2007). Effectiveness of religiously tailored interventions in Christian therapy. *Psychotherapy Research, 17*, 91-105.

Walters, R. (1987). A survey of client satisfaction in a lay counseling program. *Journal of Psychology and Christianity, 6*(2), 62-69.

Weissman, A. N. & Beck, A. T. (1978). Development and validation of the Dysfunctional Attitudes Scale: A preliminary investigation. (Paper presented at the annual meeting of the Educational Research Association, Toronto, Ontario, Canada).

Worthington, E., & Sandage, S. (2002). Religion and spirituality. *Psychotherapy, 38*, 473-478.

### Authors

*Fernando L. Garzon, Psy.D., is an Associate Professor in the Center for Counseling and Family Studies at Liberty University. His research interests include spiritual interventions in psychotherapy, lay Christian counseling, multicultural issues, and integration pedagogy.*

*Kimberely A. Tilley, Psy.D., is an Adjunct Professor at Southern California Seminary in San Diego, CA, and works as a Program Coordinator at Halcyon Crisis Center, which is a residential alternative to hospitalization built around a bio-psychosocial approach.*