APPLICATION OF LARRY CRABB'S COUNSELING MODEL TO ADDICTION COUNSELING

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PURPOSE AND NECESSITY OF THE STUDY

This study aims to apply Larry Crabb's Counseling model to addiction counseling. Some theoretical and practical implications to professional Christian counselors regarding ways to integrate a Christian counseling model relevant to special and individual clients with a specific problem will be explored. In this post-modern society, there have been increasing numbers of various kinds of addicts. One of the very traditional and well-known forms of addiction is alcoholism. In the middle of 1990's, there was a severe and dangerous trend of using an inhalant among adolescents. However, in the face of a rapid growth of the use of personal computer in Korea and around the world, the more serious problem among youth group has been a PC addiction. There has been a comprehensive attempt to diagnose problematic behaviors within the category of addiction, especially in the areas of work, gambling, sex, and even religion (i.e., "Christology addiction").

This study will attempt to understand the Christian counseling model of Larry Crabb in application to a counseling theory. Because Crabb views the origin and development of human psychopathology from the perspective of dependence on God, his counseling model will contribute much to the field of addiction counseling field commonly known as "dependence behavior" (DSM-IV, 1994). This study is developed according to basic essential components of a theory of psychotherapy and counseling, perspectives of human being and personality, an explanation of psychopathology, and the goal of counseling and process of counseling. Towards the end, a discussion on and critique of Crabb's model will be given.

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VIEWPOINT OF HUMAN NATURE

Understanding Human nature is essential for developing a counseling theory. For example, the Freudian view of human nature is dynamic and geographical, that is, Freud believed in the transformation and exchange of energy within the personality (Cladding, 2000). For Freud, human nature could be explained in terms of a conscious mind, a preconscious mind, and an unconscious mind. Implicit in person-centered counseling is a particular view of human nature: people are essentially good, and humans are characteristically "positive, forward-moving, constructive, realistic, and trustworthy (Cladding, 2000). As a Christian counselor, one needs to develop his or her own assumption about human nature. This assumption should be based soundly on the Truth in the Bible, and it should contradict any teachings in the Scripture.

For Crabb, understanding of human nature requires two basic assumptions (Crabb, 1975). First, humans were made in the image of God. Crabb understands the meaning of the "image of God' as infinite and personal based on the Bible. An infinite God is a no contingent being, that is, He depends on nothing outside of Himself for His existence. Crabb insists that for a human being, it is critical whether or not this infinite beginning is personal or impersonal. If it is impersonal, then everything is a phenomenon of pure chance and can claim neither importance nor meaning. Regarding the aspect of personality, something more than absolute chance can be introduced. This leads Crabb to introduce B. F. Skinner's idea. Skinner denies that the beginning is personal, thereby rejecting the principle of randomness (Crabb, 1975). Skinner conducts experiments to discern the regularities in our universe and then repeats his experiment to make sure he has identified a stable regularity. Also, Skinner asserts that his theories are somehow true and should be implemented in practical ways in our society. In a world with an impersonal beginning, there is no knowable truth according to Crabb. Crabb claims that every assertion is a random occurrence based on random cerebral motion; Skinner's assertions are no exception. But, Crabb postulates that things work better if a certain pattern is followed and presumes a value decision about what "better" means. An adequate answer can be given only when there is an infinite reference point which is personal. In other words, if God is both infinite and personal, and if human is somehow made in His image, then humanity becomes finite because the infinite cannot create the infinite.

Evidently, the fact of creation defines the created being as contingent on his creator. Since humanity cannot be infinite like God, then the phrase, "made in His image" means that human being is personal just as God is personal. What this "personal" means becomes a crucial fact. Crabb's understanding of "personal" can be identified as the "deepest need of people." He insists that most psychological symptoms like anxiety, depression, and uncontrolled temper are either the direct result of or defensive attempts to cope with unmet personal need. Crabb points out another point that the basic personal need of each personal being is to regard himself as a worthwhile human being. To accept oneself as a worthwhile creature is absolutely necessary for effective, spiritual, joyful living (Crabb, 1975).

In relation to counseling model, Crabb's view of human being hinges on God's creation of humanity in His image. As Creator, God Himself is infinite; the infinite can not create an infinite, and an infinite God is not contingent on a created personal being. To Crabb, "personal," as applied to humanity, refers to the deepest need for personal relationship and longing to be regarded himself or herself as a worthwhile being. From these two concepts of human nature, Crabb explains human needs in terms of "significance" and "security" (Crabb, 1975). The meaning of "meeting the needs for significance" can be understood in some different ways. First, if humanity, as a finite being tries to derive from its context, he or she needs to have an infinite reference point to achieve meaning. To a Christian, this infinite reference includes the fact that Christ paid for human sin on the Cross and that one has the indwelling Holy Spirit, who works in him or her 'both to do and to will of his good pleasure' (Phil. 2: 13). Even though the first humans violated God's command not to eat the fruit of good and evil, people have been redeemed by the blood of Christ and have the right and privilege to live according to the Creator's blessed purpose. Belief in what Christ did on the Cross and the experience of the presence of the Holy Spirit result in a feeling of significant in people's lives. Another point of "significance" is in the area of selfacceptance. Crabb observes that many people go through life believing, "I could accept myself as a worthwhile person if I were smarter, better looking, more athletic, more talented, etc a little bit." However as a finite being, humans can never be satisfied and pleased with their ability, possession, appearance and talents. Only when a human being grasps the truth of God's design for His purpose, and when he or she

sets his or her will to be in the center of God's will, that self-acceptance becomes natural.

The second deep need of human being is security. The prominent humanistic psychologist, Abraham Maslow, perceives basic human needs according to five categories: biological needs, safety needs, attachment and affiliation need, esteem need, and self-actualization needs (Zimbardo, Weber, Johnson, (2000). Most of these needcategories closely relate to the need for security. To a Freudian, anxiety exists in peoples' deep mind. In order to prevent this anxiety, people can produce many kinds of defense mechanism such as projection, displacement, rationalization, repression and reaction formation. This means basically, for Freudians, it is very certain that a humanity is a "being of anxiety and fear," and, therefore he or she definitely needs security and safety. To object-relation theorists, it is highly essential for people to develop an integrated self; this integration formation comes from a stable and safe relationship with significant others. It is thus reasonable to state that every human being has a need to be secure and safe. Crabb offers two general ways to meet this need for human (Crabb, 1975). First, a man can put his worst foot forward to test the sincerity of those who say they love him. For example, a teen-age girl who was terribly afraid that she was unlovable had the disconcerting habit of becoming very mean to anyone who showed a warm interest in her. Another way of meeting the need for security is to put his best foot forward in order to gain acceptance. But he becomes trapped in the necessity of continually parading his weaknesses. Crabb urges Christians to lay hold of the liberating truth that one is free to be good because of he or she is already accepted by an infinite Person, who, through His death, has credited the former with total acceptability.

When these two needs are applied to addiction problem, various kinds of addition behaviors can be categorized into the main domains that Crabb earlier posited in relation to human nature. Crabb sees human beings with needs for significance and security (accepted). As a finite being, humanity cannot help feeling insignificant and insecure. Normally, traditional addictions like alcohol and drug are perceived as an attempt to remove negative feelings such as fear or depression; they are also presumed as a way of pursuing positive feelings such as euphoria or excitement. In other words, Crabb's model can clearly explain the very nature of alcohol or drug addiction in two ways. Addicts cannot feel significant and secure which are considered basic human needs, so they use substances to reduce the feeling of insignificance and security or pursue the feeling of significance and security.

Also, Crabb's model can apply to other different kinds of addiction like work and gambling. Shopping addiction, "Christology addiction," and sex addiction are also viewed through Crabb's "worst foot" and "best foot" models. For instance, workaholics are people who always put their best feet continually, but can never be satisfied at all. So, they are trapped in their malicious cycle of endless works, efforts and sufferings. Habitual gamblers try to feel significant by earning money and success on gambling but they area also bound to repeat their failures in achieving it. Shopping addicts purchase a bundle of stuff because they think these goods can make them feel significant in an attempt to put their best feet. Yet, hardly can they be satisfied with their purchase. A recent study on shopping addiction confirmed the possibilities that addicts have grown up in a family that reinforces a child by purchasing some things as a reward (Kang, 2002). "Christology addicts" try to feel significant and safe by giving much money to a church or absolutely following the commands of a charismatic church leader. However, without a sound and true belief in God, they can never feel significant and safe. For a sex addict, he or she endlessly pursue a sexual partner who can make him or her feel safe and secure. But without safe bond with anyone, he or she never experiences a sense of safety and security with the sexual partner and ends up hanging around with sexual partners always.

EXPLANATION OF PSYCHOPATHOLOGY

The next step in developing a counseling model is to explain human's psychopathologies. A counseling model should describe how various kinds of psychopathologies are developed and maintained with their systematic and logical concepts. In his book, *Effective Biblical Counseling*, Crabb creates a chart that shows "Abnormal Development Leading to Psychological Disorder" (Crabb, 1977).

PERSONAL N	EEDS
MOTIVATION	
BASIC ASSUMPTION	
BEHAVIOR	GOAL-ORIENTED
OBSTACLE	
FRUSTRATION (NEUROSIS)	SAFETY
CATEGORY OF OBSTACLE	OF FRUSTRATION
 Unreachable Goal External Circumstance Fear of Failure 	Guilt Resentment Anxiety

Effective Biblical Counseling (by Crabb, p. 136)

Crabb starts at the point of human nature with "Personal Needs," which covers the needs for significance and security. People develop motivation that impels them to do something to become significant and secure. People are willing to spend tremendous personal energy in an effort to satisfy these needs. Next, people set their own assumptions or conditions that they think these may be working to meet their motivation to be significant and secure (accepted). Crabb gives some examples of these basic assumptions: "If I had more money, then. . . " "If I never made a mistake, then . . . " " If I was granted recognition by my peer group, then . . . " "If I was never criticized, then . . . " "If I was never criticized, then . . . " "If I was never criticized, then . . . " "If I was never criticized, then . . . " "If I was never criticized, then . . . " "If I was never criticized, then . . . " "If I was never criticized, then . . . " "If I was never criticized, then . . . " "If I was never criticized, then . . . " " If I was never c

everyone accepted me, then . . ." to meet the security need. In the process of creating these basic assumptions, people set goal of their behaviors. If Mark made an assumption, "If I had more money, then I would feel important and valuable," then his goal behavior would be gaining lots of money as much as possible. According to Crabb, this goal-oriented behavior can be intelligent, realistic and sensible, or it can be ignorant, unrealistic, and utterly ineffective. The goal therefore may not be reached: the person will feel threatened as his needs remain unmet, and he will become anxious or resentful. One of the author's client who was in a middle school set the life goal to become the richest in the world and his academic score was just on the middle in his class and came from a middle-low class family in Korea. In this case, his goal-oriented behavior would be to study hard and to become the best student who can develop the number one software program in his future like what Bill Gates did in America. Or, his possible goal-oriented behavior would be to learn how to run a business right after quitting school. However, people should meet the obstacles that interfere with reaching the individual's chosen goal. If the obstacle can be overcome by making changes or adjustments in goal-oriented behavior, the threat of psychopathology, including addiction, will be averted. But, if the goal is based on unbiblical assumptions, the result is either partial satisfaction, or more treadmill-style chasing after fulfillment or despair. Crabb makes three categories of obstacles: unreachable goals, external circumstances, and fear of failure. When people meet those obstacles and hardly reach their goals because of these obstacles, then people may feel frustrated. Crabb also categorizes the basic psychopathologies according to the forms of frustration. People may develop guilt when they make "unreachable goals." People may develop resentment when they meet external circumstances that interfere with reaching their goals. People may feel anxious when they themselves develop fear of failure of reaching the goals.

The above Crabb's pathology model can apply to explaining and understanding addiction. Recently, addiction is categorized into three main parts: substance addiction, behavior addiction and process addiction (Kang, 2002). Behavior addiction includes all kinds of specific and observable behaviors such as work, sexual intercourse or exercise. Process addiction includes all kinds of unseen and processcentered behaviors such as relationship addiction, anger addiction and Christology addiction. To the author's understanding, Crabb's pathology model cannot be applicable directly to this classification of addiction. Rather, the counselors need to consider the addict's psychological dynamic that causes the addiction problems. Kaufman (1994) points out three main personality disorders that prevail among addicts: antisocial personality, narcissistic personality, borderline personality, and paranoid personality. The main difficulties in the deep mind among antisocial personality people are anger and mistrust in people in general. In other words, these antisocial personality people have been struggling from blazing anger and failure to form a trust in people whom they basically want to love. Then these antisocial personality addicts may be included in "resentment" category. These people may set a behavioral goal they want to reach, but they may repeat to fail to accomplish this goal because of their external circumstance. The author, for example, met a seventeen year-old boy at a juvenile delinguency school who wanted to be a medical doctor. But he realized that because his family is extremely poor, he can never enter a medical school. Right after realizing this, he set another behavior goal to become the number one man or boss of a gangster group. In his two different goals, the author finds out the same basic assumption and motivation that the boy had: "to become someone," which can be interpreted as a need for significance.

The second most prevalent personality disorder in addiction is narcissistic. By its nature, narcissistic personality disorder can be divided into two different groups--covert and overt. Usually the overt narcissistic group of people can be easily distinguished for its exceedingly boasting and competitive behaviors. In contrast, the covert narcissistic group of people can hardly be distinguished for its outwardly behaviors because members want to be most humble. To the author's understanding, this classification of narcissistic personality does not provide good knowledge or hint in explaining addition problem based on Crabb's model. Instead, bringing the idea of "ability level" may be more helpful to understand Crabb's pathology model. "Able people" are those who do their works well and adequately. "Unable people" are those who do their works poorly and badly. With the same psychological dynamic of "want to be recognized and important," an able man may set the goal to be an outstanding person in his area and pursues it diligently. As a result, this man may become a workaholic. In contrast, an "unable man" with the same desire and wants to be outstanding and important could repeat failures to feel

significant and important even with his ability. Consequently, he may overcome this sense of failure or guilty feeling or escape from those feelings to a euphoria with the aid of alcohol or drugs.

The third and fourth personality types, namely, borderline and paranoid, are the best examples of explaining anxiety in Crabb's model. The extinguished need for borderline people is to be connected and loved by forming a stable relationship because they hardly experience a stable and safe relationship with their significant others including a mother. The may even experience repeated abandonment from their loving people. So, they are very much sensitive any sense of abandonment, and try not to feel abandoned in various ways by making threats to commit suicide, soothing their anxious feeling by using substance, and testing the relationship with people by making unreasonable requests. The main psychological issue in a paranoid personality concerns people's perception to see them very negatively. This is because the paranoid personality develops a projected defense mechanism, which allows them to interpret people's idea or mind according to their own evaluation and judgment based on their negative attitude. As a result, they tend to believe that most people dislike them, and, in the process, make a very bad evaluation on others. In both cases, those people suffer from "Fear of Failure." Borderline personality suffers from "Fear of Failure to be accepted," while the paranoid suffers from "Fear of Failure to be liked." These people sometimes put their best feet on trying to gain people's recognition and love. But, sometimes they possibly put their worst feet to avoid experiencing failure and thus accomplish their need to be loved and accepted.

In summary, Crabb develops a psychopathology model out of his understanding of human nature, suggesting three main forms or abnormal psychologies like "guilt," "resentment," and "anxiety." When the author applies this model to addiction, two factors should be considered in explaining addiction problem. First, current classification such as substance, behavior, and process do not contribute to understanding Crabb's model. Secondly, giving consideration to the "ability level" of people can be very helpful. Lastly, an explanation of basic psychological dynamics or issues among addicts may be also helpful in understanding and applying Crabb's psychopathology model.

COUNSELING GOAL

Crabb stresses that the primary problem with people is misplaced dependency (Crabb, 1977). He thinks that this misplaced dependency comes from the third step of his pathology model, which is establishing "Basic Assumption." It means that unhealthy people usually set a wrong "Basic Assumption," and, this again comes from their wrong motivation to feel significant and safe. This depends, of course, on their own efforts that never guarantee the fulfillment of their motivation because of their finiteness as created beings.

Generally, a counseling goal could be formed in a theory when the theorist clarifies the state of "psychological healthiness." This goal needs to be well connected with the view of human nature and development of psychopathology. Freud, for example, claims that human nature could be explained in terms of a conscious mind, a preconscious mind, and unconscious mind. He assumes that the personality consists of three parts, namely, id, ego, and superego. Psychopathology develops if people would have much portion of an unconscious mind, but they are not aware of it. Also, if people would not have a strong ego that can moderate the conflict between id and superego, then psychopathology develops. Thus, the focus of counseling is on strengthening the ego so that perceptions and plans become more realistic.

According to Crabb, the truly well-adjusted person is one who depends on God alone to make him significant and secure. People are created in the image of God, the infinite being. Because of sin, people need to recover the personal relationship that is essential to the very nature of creation. Sin makes people come up with a wrong motivation and a basic assumption. To fulfill this wrong motivation and assumption, people set a behavior goal that is interfered by obstacles. Out of these obstacles, people develop psychopathologies like anger, anxiety, and guilt. Therefore, in order to solve this problem, people should correct their wrong motivation by trying to be significant and secure not by their own efforts; they also need to try to change goaloriented behavior from irrational and sinful to rationally biblical (Crabb, 1977). Crabb insists that ought to people depend on God the Creator for everything, including fundamental needs, within a bond of personal relationship. A person needs to think about the ground of his dependence, to believe what he must have, if he wants to truly feel as valuable being. Crabb catalogues some counseling goals of a few

leading theorists: Rogers renews feelings; Glasser renews behavior; Skinner renews circumstances. He adds Christ who renews minds (Crabb, 1977). As thinking and feeling change, goals will of course change because they depend on the basic assumption of how to meet personal needs. Accordingly, when thinking and feeling are straight, and the needs depend only on one's relationship with Christ, a person is in a position to always set reachable goals.

Crabb's goal in counseling stresses on accomplishing the significant and security. However, significant feeling and security feeling should not depend on a person's wrong basic assumption, that is, significance and security can be achieved by one's efforts. These are achieved by one's reliance on God the Creator, who acts within a person's life so that goals can be attained.

To an addiction counselor, quitting the addiction behavior and maintaining abstinence is the very goal of counseling. Starting from this problematic behavior-addiction, a counselor can trace back the flow of development of psychopathology to Crabb's model. For example, workaholics may sincerely assume that because of their outstanding accomplishments at a work place, significance and security are guaranteed. Alcoholics try to escape from their frustrations expressed in terms of guilt, resentment, and anxiety. So, if addiction counselors implement Crabb's goal of counseling, they can handle the addict's wrong basic assumptions and correct the same by transforming their minds. The aim here is to aid addicts to see that their unmet goals cannot be reached by means of their addiction behavior but by dependence on God. They need to know that God longs to establish a loving, personal relationship with them so they can experience true sense of significance and feeling of security.

PROCESS OF COUNSELING

The method on how to reach the counseling goal could be explained through a counseling process or procedure. Crabb, in his book, *Effective Biblical Counseling* (Crabb, 1977), proposes a diagram that identifies the stages of counseling.

Stage 1: Identify problem feelings

- Stage 2: Identify problem behaviors
- Stage 3: Identify problem thinking

TEACH

Stage 4: Clarify biblical thinking

Stage 5: Secure commitment

Stage 6: Plan and carry out biblical behavior

Stage 7: Identify Spirit-controlled feelings

STAGES OF COUNSELING (Crabb, 1977)

The author tries to apply Crabb's counseling stages to addiction counseling and discovers some practical points to consider. First, Crabb can be understood as a cognitive-approach counselor because he puts "teaching" in the center of the procedure and aims to change people's thinking as leverage for change. This implies that Crabb's model could only apply to people whose cognitive function is sound, with adequate skills to reason and correct their cognitive errors. Thus, addicts with serious brain dysfunctions can be ruled out in this model. Secondly, most addicts develop the problems over a long period of time. So, going through stages one to three is not simple and easy work for both counselor and the client. Undergoing through these stages requires much time and effort. Furthermore, feeling, thinking, and behavior are completely interconnected with one another, which makes it difficult to determine which one comes first and which one goes last. According to the recovery process of addiction, these first three stages can be repeated with different themes and issues among addicts. Third, considering the addiction problem, most psychopathologies are diagnosed by behavioral features that clients show or report. It follows that the starting point--identifying problem feelings—could be better replaced by the second stage, i.e., identifying problem behaviors. The author's clinical experiences reveal that most clients can explore and examine their behavioral changes more easily than the changes in their emotions.

At this juncture, two main addiction treatment models will be introduced in comparison to Crabb's counseling stages. Doing so will verify the author's points more clearly. Kaufman (1994), a psychiatrist, elaborates the addiction treatment process and the issues and tasks in his book, *Psychotherapy of Addicted Persons*. Phase 1: Achieving Abstinence Phase 2: Early Recovery (Sobriety) Phase 3: Advanced Recovery (Intimacy & Autonomy)

As shown above, the first two stages of treating alcoholics are mainly given to behavioral change and maintenance. At the last stage, counselors can deal with the deeper issues, e.g., loss, intimacy, despair or autonomy. In Phase 1, counselors need to assess the degree of addiction, help a client develop motivation for abstinence, and, if necessary, make detoxification, and make a plan for achieving abstinence. Phase 2 includes support and education for another object to depend on. In Phase 3, clients' deep psychodynamic issued are dealt with such as grief and loss, early traumas, transference and countertransference issues and personality problems.

Stephanie Brown, a psychologist at Stanford Alcohol Clinic, suggests a developmental model of recovery (Stephanie, 1985). She emphasizes the outstanding feature of her model in terms of treatment that combines Alcoholics Anonymous (AA) and psychotherapy. Brown works at reducing the lack of alcohol use experience for an expertise group and magnifies the treatment effect through combining the experiences of two groups: alcoholics and expertise. In her model, she divides a recovery process from alcohol addiction into four different stages as follow:

> Stage 1: Drinking Stage 2: Transition Stage 3: Early Recovery Stage 4: Ongoing Recovery

Brown also clarifies issues and cognitive and behavioral considerations in each stage. In drinking stage, a counselor investigates alcohol consumption and helps a client develop a behavioral history and drinking history. Cognitive interventions during this stage involve examination of the meaning and functions of drinking, and questioning the logic of control. She points out two ways of examination: accounting system and the illusion of free choice. The "accounting system" stresses on what is "reasonable and appropriate drinking" and what is "problem drinking." Denial and rationalization are two main components of illusion of free choice in using alcohol. In this process, recognizing the importance of the experience of "being alcoholic" is very significant, and this is the belief system that provides structure to an individual's view of the world, his actions in it, and his definition of self. Brown suggests not to ask "Why do you drink?" but rather, "What is the meaning/purpose/function of your drinking?" If, for example, someone says, "I drink 'at' my wife', then he may suffer from the relation difficulty with his wife, and it shows the direction for the changes he needs through counseling. Brown adds that alcoholic thinking refers not only to rationalization, denial and frame of mind, but also to the character trait that frequently accompanies drinking, which includes grandiosity, omnipotence, low frustration tolerance, hostility, and paranoia. In transition stage, usually alcoholics try to maintain abstinence. Obviously, to explore the meaning of being alcoholic is crucial. Brown clarifies that issues of power and helplessness are a central focus for understanding the meaning and function of alcohol. Early recovery is characterized by a change in identity and a corresponding change in behavior. Rather than breaking down denial and shifting identity, the focus is on solidifying the new identity and providing meaning and new behaviors to go with it.

Brown emphasizes that in the hierarchy of intervention, behavioral replacement and action substitutes have first priority because the loss of control is often experienced as a terrifying fear of drinking. The period of ongoing recovery is characterized by the stability of identity and abstinent behaviors, with much more attention given to the process of self-examination, encompassed within and reflected on the interpretation of self and others. The cognitive and behavioral controls are necessary to maintaining abstinence as a part of the new personal identity constructed from identifications with other recovering alcoholics and from the reworking of meanings of life events. In Brown's study, recovery from alcoholism is a new paradigm based on the change in identity and the change in frame of reference that accompanies it. In this ongoing recovery, careful handling of the fear of loss of control is also taken into consideration, along with the emergence of feelings and low self-esteem. As sober time accrues, the story changes to incorporate more and more of the realities of the individual identified as alcoholic. Therefore, the process of construction involves building a new identity that is rooted in the identity as an alcoholic.

Having examined the two treatment models by Kaufman and Brown, the author can then list down some similarities and differences with Crabb's model and apply Crabb's counseling process on addiction to recovery model. First of all, addiction counseling should start with close and thorough behavior examination in all stages of change. In this aspect, Crabb's process model could be considered too simple and linear. When counseling addicts, an addiction counselor meets clients in every different stages of recovery. So, it is very complicated and delicate to identify problems of feelings, behaviors, and thinking, and to figure out how these feelings relate to the clients' wrong thinking. The author's clinical experience indicates that even a counselor can figure out the main core psychodynamic that is controvert to a biblical teaching from the beginning of the counseling sessions; thus, the treatment should be given as support-oriented rather than insightoriented. Instead, counselors need to trace the problematic behavior that produces addiction problem very carefully. In the early stage of both counseling sessions and the terminal stage, a counselor needs to help a client maintain sobriety. However, if the "Spirit-controlled behavior and feelings" could be defined broadly as an alternative object, then Crabb's process model would have covered the addiction recovery process from the beginning to end except Stage 1, which is to identify problem feelings. The reason for this is that whenever a counselor makes an empathetic understanding with a client and focuses on feelings, then a client may continue to practice addictive behavior easily out of emotional disturbance. In addition, Crabb's model can give more active and positive answer to a client in terminal stage based on a secure commitment to establish new identity.

DISCUSSION AND CONCLUSION

In this section, some contributions or implications of Crabb's counseling model, along with some limitations when applied to a addiction counseling, will be discussed. Some implications and limitations of this study will also be stated.

Implications and Limitations of Crabb's Model in the Field of Addiction Counseling

Crabb can be considered as a sound Christian counseling theorist who builds up a thorough counseling model according to a system of a counseling theory. Especially, in view of human nature, Crabb stresses that people, as finite beings, need to depend absolutely on God the Creator. This fact points out the ultimate counseling direction for addicts, that is, to introduce God as an alternative object over addiction behaviors or substances. Crabb also shows and explains clearly the inner dynamics of various kinds of addicts: those who need significance and those who need security. He introduces the "worst foot and best foot models" in people's psychopathology; these metaphors aptly describe addiction behavior.

Crabb's process model of counseling provides an active and positive alternative behavior and feelings to addicts. This allows the goal of counseling addicts to develop more: not to quit the addiction behavior, but to build up the biblical way of thinking and feeling. The author points out that even a non-Christian counselor can successfully examine the deepest dynamic of addicts and find out some possible alternatives. Of course, some of these alternatives may be included in another category of what Crabb calls as a wrong "basic assumption."

However, when Crabb's model is applied to addiction counseling, several limitations could be identified. First, the nature of disorder necessitates a careful and thorough assessment of the client's addiction. In all stages of counseling addition, maintenance is crucial. Second, Crabb's counseling process model may be misunderstood by counselors should they put heavy emphasis on feelings and thinking. Because Crabb's model shows a general flow of counseling procedure for all psychopathology, specific consideration of each stage as applicable to a specific problem like addiction is lacking. For example, in the early stage of counseling, it is not recommended to addiction counselors to diagnose what is wrong thinking based on the Bible and how to deal with it before helping the clients to quit the addiction behavior. Third, when addiction counselors apply Crabb's model to clients, they need more systematic and professional training. It means that Crabb simply illustrates some examples of basic assumptions and motivation. But counseling stages may have different effects on the clients, depending on different basic assumptions. Therefore, systemic education of counseling procedure and psychopathology is definitely needed if a Christian counselor tries to apply this model in his or her counseling practice.

Implications and Limitations of this study

This study could contribute to the field of Christian counseling in a few but significant points. The study examined Crabb's model of addiction counseling so that the readers can understand how a Christian counseling model could be applied in detail. Christian theory builders may find in this study relevant insights into practical ways to formulate a Christian counseling theory. This study compared Crabb's counseling model on addiction counseling with other counseling theorists and clinicians. Readers will find in this study practical and realistic critique on Crabb's model. This study, however, covered major aspects on views of human nature and psychopathology and counseling process, so the critique or application can be superficial and even broad. As a result of this study, future explorations of relevant topics are in order: "Understanding Human Nature with Addiction Theory and Crabb's Model," "Different Christian Theories in Understanding Addiction," and "A Case Study-Application of Crabb's Model."

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