

## Healing the Wounded: The Psalms and Therapy

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### ABSTRACT

*The dialogical spaces between the historicity of the written psalms and present experiences of suffering and loss are explored. It is found that the insights of Narrative Therapy resonate with the ways in which the psalmist(s) deal both with suffering and deliverance. This article describes how Ps 22 is used in training ministry students in the tenets of Narrative Therapy, and how Ps 46 functions in group therapy with women who have lost a child. The final section describes how the Psalms can serve – and have served – as intertexts in the therapeutic empowerment of people who are suffering because of a variety of losses. Here, the Psalms make an interdisciplinary landing between historical criticism and postmodernism, between tradition and experience.*

KEYWORDS: Narrative Counselling, Psalm 22, Psalm 46, Psalms and Suffering, Woundedness

### A INTRODUCTION

Reality as it *is* experienced is described by the Psalms metaphorically as a reality which *can* be experienced . . . They (the Psalms) open an imaginative space in which experiences can be located.<sup>1</sup>

This article explores the space created for experience in the psalms. In fact, it explores the dialogical space between real and metaphorical experience as described in the psalms, and the narrated experience of woundedness in Narrative Therapy, which is a fairly recent development in pastoral counselling.

Exploring the dialogical space between binaries in this way is in keeping with recent efforts to initiate dialogue between historical, critical and postmodern readings of the Bible. Achele, Miscall and Walsh<sup>2</sup> describe this dialogue as one between historically proven accounts and anti-essentialist open-

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<sup>1</sup> Thus, writes Ulrike Bail in an article on violence in Ps 55. See Ulrike Bail, "O God, Hear My Prayer: Psalm 55 and Violence against Women," in *The Feminist Companion to the Bible* (eds. Athalya Brenner and Carole R. Fontaine; Sheffield: Sheffield Academic Press, 1998), 248.

<sup>2</sup> G. Achele, P. Miscall and R. Walsh, "An Elephant in the Room: Historical Critical and Postmodern Interpretations of the Bible," *JBL* 128/2 (2009): 383–404.

ended questions, between historical reconstruction and narrative deconstruction, between landing in history and flying playfully, between suspect ideologies and new meanings and, finally, between suspicion and healing.

This article, then, dialogues between reconstruction and deconstruction, fixed and flying stories, discourse and alternative meanings, using the psalms, especially the psalms of suffering, as the intertext. The dialogue presupposes at least two other dialogical interchanges: First, a dialogue between the Bible as a book of histories and the Bible as a text that reflects indigenous wisdom and healing. Second, this article primarily presupposes a dialogue between lament as the contents of the psalms of suffering and the psalms as simultaneously containing the skills and wisdom for healing woundedness.

In the first part of this article, Ps 22, a well-known lament psalm, is used as a well-known psalm of lament to illustrate how Narrative Therapy can be taught to students. In doing this, I believe that the method, contents and aim of Narrative Therapy will become clear. In the second part of the article, Ps 46 (a Cantic of Zion) is used as an example of doing group therapy with women, adding a gender perspective to this article and the overall theme of the psalms as healing the wounded. In the third part of the article, the healing potential of various psalms is explored in the dialogical space between historicity and wellness, liturgy and healing.

## **B TEACHING NARRATIVE THERAPY**

Narrative Therapy became a viable therapeutic approach in the western world with the publication, in 1990, of *Narrative Means to Therapeutic Ends*, written by the founders of Narrative Therapy (Michel White from Australia and David Epston from New Zealand).<sup>3</sup> In the past twenty years, Narrative Therapy has found a specific application in pastoral work in South Africa, especially in students' training – both in and outside ministerial formation – in Pastoral Narrative Counselling. The University of Pretoria, which trains students for the Reformed ministry, gives priority to Narrative Therapy in its teaching of Practical Theology. The University of South Africa does so in its certificate courses (Short Learning Programmes), which train students for lay ministries.

Narrative Therapy takes social construction theory as its philosophical point of departure. Social construction theory simply states that, in the deep structure of reality, people are constructed by social discourses while, on the surface structure, these discourses are embodied in language. According to social construction theory, which depends heavily on Michel Foucault's work, a discourse is a grand narrative that is upheld by society with a view to influencing human behaviour and mindsets. Healing may occur when, during therapy,

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<sup>3</sup> See Michel White and David Epston, *Narrative Means to Therapeutic Ends* (New York: WW Norton, 1990).

harmful social discourses that obstruct healing are deconstructed to build healthy discourses that, in effect, nourish the telling of alternative stories.

When explaining Narrative Therapy to seminary or university students and an academic readership,<sup>4</sup> I turn to an acronym, and teach Narrative Therapy as the MEET process. This stands for narrative therapy's main elements: mapping the past, externalising the problem, empowerment against the problem, and thickening the alternative story. This acronym refers to an underlying principle of Narrative Therapy, that is, to create a dialogical space for counsellor and counsellee to meet, and for binaries to enter into dialogue. There is another type of "meeting," that is, negotiated in Narrative Therapy, namely the meeting between the indigenous knowledge of the counsellee and other forms of knowledge (e.g. acquired and academic knowledge).

How, then, can Ps 22 function as an intertext for teaching the values and techniques of Narrative Therapy to theological students?

Psalm 22 has an obvious structure.<sup>5</sup> The first part (vv. 1–21) is a prayer of lamentation, and the second part (vv. 22–31) is a psalm of thanksgiving. The latter part of the thanksgiving psalm (vv. 27–31) might even have been added later to adapt the psalm for liturgical use in the temple, or to give expression to evolving messianic expectations.<sup>6</sup>

When considering Ps 22 as a text that "flies," seeking new landing places to contribute to its listeners' health and healing, a place for this Psalm can be negotiated in the framework of Narrative Therapy (see my explanation above).

In vv. 1–8 the psalmist maps his problem. He describes the present faces of the problem and its history. At present, the problem shows its face in the psalmist feeling that God has abandoned him and that God does not answer to his cries (vv. 1–2). The problem has a second face: the psalmist is scorned by other people. He and his God are insulted and ridiculed (vv. 6–8). This affects his body and his mental health: surrounded by bulls, lions, dogs and evil men, his body and mind have lost their strength.

To assist the counsellee in mapping his or her problem through relative influence questions, during the initial phase of the counselling process, the narrative therapist discerns the discourses that keep the counsellee captive in a troubled state of mind and spirit. Significantly, the counsellor notes something else, that is, glimpses of what eventually can become the counsellee's alternative story. Inadvertently, Ps 22 provides excellent insight into this process. In the first

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<sup>4</sup> Christina Landman, *Township Spiritualities and Counseling* (Pretoria: Research Institute for Theology and Religion, 2008), 12–40.

<sup>5</sup> Arthur Weiser, *The Psalms* (London: SCM Press, 1962), 219.

<sup>6</sup> Leopold Sabourin, *The Psalms, Their Origin and Meaning* (New York: Alba House, 1970), 226.

21 verses, the psalmist talks about his problem and the alternatives to his problem in an even amount of words. He feels as if he cannot trust God (vv. 1–2), but it was in God that his forefathers trusted (vv. 3–5). He is scorned by others and feels like a worm and not a man (vv. 6) and his strength has been stolen from him (vv. 12–18); however, he can call upon God as his strength and his rescue (vv. 19–21). While co-mapping the counsellee's problem-saturated story, the counsellor helps the counsellee to identify the discourses that run his or her life. These discourses, of course, feed the problem. The problem needs to be externalised lest the counsellee internalises the problem and becomes, or remains, part of the problem.

In Ps 22 the dominant problem discourse seems to be that God cannot be trusted. When teaching narrative therapy to students with this text, the students (as the interviewees) time and again externalise "lack of trust" as the problem that steals away the psalmist's joy in life. Following the indigenous knowledge systems of his time, the psalmist now (vv. 13–14) describes the effects of the problem on his mental state which, in turn, affect his physical state. He feels poured out like water, and his strength has dried up like a potsherd, which are indigenous descriptions of anxiety and depression. The turn comes in v. 18 when the psalmist faces his problem, now externalised, and looks for sources of empowerment.

The psalmist empowers himself against the problem by inviting God to come to his salvation: "Haste thee to help me; deliver me from the sword and the dogs; save me from the lion" (vv. 18–24).

The psalmist's alternative story now takes shape (vv. 25ff.). The Lord has heard him. His trust in the Lord is reconfirmed. He will fear and praise the Lord. His alternative story is thickened with the hope that the meek will have enough to eat, that there will be future generations, and that the whole world will bow before the Lord, serve Him, and declare His righteousness.

Teaching Narrative Therapy employing Ps 22, then, points to the healing capacity of the psalms of lament which, in the final instance, do not seem to earn the designation "lament" at all. Psalm 22, for example, becomes an expression of healing, and the restoration of joy and trust, which does not render it a psalm of lament at all. Furthermore, teaching Ps 22 as an intertext for healing illustrates the viability of the task set by this article to undermine the binaries between fixed interpretations of a text and its ability to "fly" – in this case, between the Bible as historically cast in stone and the Bible as indigenous knowledge that can be explored in the present. Ultimately, Ps 22 thus speaks on the interface between lament and healing.

Psalm 22 is used in three additional ways in the classroom. First, students are encouraged to use it in self-counselling as they prepare to themselves become counsellors. Through Ps 22 (the biblical text carries great weight for

students), they learn the skills of identifying the problem discourses that keep them captive in destructive ways of thinking and acting; they learn to externalise their problem(s) and, through their indigenous coping systems, move towards an alternative story. Psalm 22 has been shown to be able to empower students, as "wounded healers" themselves, to walk the road of counselling.

Second, special provision is made in the classroom for students to set ideals for reconstructed stories by means of the values presented by Ps 22. Such reconstructed ideals, as identified by students in the past, are the right to voice one's pain before God, taking responsibility for another's pain, the right to hope, the right to have support systems, and the presence of human dignity in religious contexts.

Third, Ps 22 and the externalised problem of "Can God be trusted?" are used in the classroom to confront and problematise specific case studies. Examples of such case studies are the woman who takes her eight-year-old son to a hospital for a minor operation. Something goes wrong during this operation, and after three months in the intensive care unit, suffering from severe and painful convulsions, her son dies. Should this woman trust God again? A second case study is a man who lost his previous job and now suffers from constant anxiety in his new job, always fearing the worst. Is trust in God good treatment for this man, who is clearly suffering from post-traumatic stress syndrome? A third case is a woman who has been infected with HIV by her husband. She claims that she has become physically stronger through her trust in God: her CD4 count has risen since her confession of trust in God. Is the woman in denial, and dare a counsellor take this hope away from her? Through these case studies, Ps 22 is contextualised in today's problem circumstances and difficult religious issues, thus preparing students for actual situations where pastoral care and counselling is needed, often as a matter of life and death.

## **C PSALM 46 IN GROUP THERAPY WITH WOMEN**

Psalm 46 is headed by a musical note that it is to be sung to the melody of the young women: "A song according to *alamoth*," the latter referring either to virgins or young women. This may point to the fact that the psalm is based on the song women would sing at the bed on which a woman is giving birth. This in turn opens up the largely unexplored women traditions of Biblical times that are partly to be found on the surface but are probably largely hidden underneath the texts of the Bible, as in Ps 46. The four overt footsteps of the women traditions in the Bible are to be found in the four songs put in the mouths of four women. They are the Song of Miriam in Exod 15, the Song of Deborah in Judges 5, the Song of Hannah in 1 Sam 2, and, of course, Mary's Magnificat in Luke 1:47ff.<sup>7</sup> They are all songs of victory, celebrating that God can reverse the fate

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<sup>7</sup> See Kathleen A. Farmer, "Psalms," in *Women's Bible Commentary* (eds. Carol A. Newsom and Sharon H. Ringe; Louisville: HarperCollins 1992/1998): 145-152 (378).

of people. Miriam leads the people in song and dance after the defeat of the Pharaoh; Deborah, too, sings of the victory achieved over the enemy; and Hannah rejoices after the Lord has given her a son. Of course, Mary sings of victory to come when the meek will be strong, and the poor fed. All these songs bear a resemblance to the theme of Immanuel, and God is with us, expressed repeatedly and ritualistically in Ps 46.

That, then, seems to be a leading theme in the women traditions: God is with us; He leads us to victory and will enable us to rise above our circumstances. The women's songs are songs of hope and reversal.

Needless to say, it was the women who transferred the traditions and beliefs of the people to the children, by means of song and dance. Immanuel was, it seems, the name specifically given by women to name God, focusing on his nearness and the availability of his assistance, acknowledging him as their source of strength. The theme of God's proximity and guidance seemed to be a topic near to the heart of women, defining their relationship with God, their hope being intimately interwoven with their faith.

How is this relevant to the healing of women?

An example here is a single group therapy session I undertook with a group of Christian women who had each lost a child through an unexpected and unnatural death. The session began with the women telling the sadness-saturated stories of their children's sudden deaths. One woman's ten-year-old daughter had burnt to death in her sleep when lightning struck her aunt's house where she had been visiting. Another woman lost her son, who contracted malaria while building a church in Malawi as a Christian student volunteer. He died on Christmas, the day after he arrived back home.

The externalisation of the problem shared by these women was, of course, predictable: loss, anger, bitterness, sadness, and the like. What role, then, did Ps 46 play in empowering the saddened mothers against the effects of the loss of a child on their mental health?

Being a pronouncedly Christian group, the women declared themselves open to the consolation and encouragement provided by Ps 46 in the proximity of God (Immanuel) in traumatic and painful circumstances, and the availability of hope for the hopeless through faith. Furthermore, the women identified with the fears and resolutions expressed by the women traditions in the Bible as found in Ps 46. To know that there were women in the Bible who had also lost the children they had given birth to put the women in the group on the road to healing. To take note of how the women of the Bible eventually moved towards healing by means of their faith empowered the women in the group towards strategising and thickening alternative stories of hope and action. Taking their cue from the women of the Bible, the women in this group session declared

themselves open to learn skills that would enable them to grow around or larger than their losses, to name God and themselves in terms of the reversals that always seem a possibility to people of faith, and to ground their belief in alternative stories as stories of reversal.

It should be noted that the healing offered by Ps 46 is not that of healing passed onto women in their stereotyped roles of passivity and weakness. Instead, Ps 46 is based on the strong and active experiences of women, which are valued so highly that they were adopted in the temple's liturgy. Psalm 46 thus turns these female experiences into spaces of value, honour and agency for the empowerment of women who suffer loss today. The healing offered in Ps 46, then, is here negotiated in the dialogical space between the historicity of ancient female experiences and the contextuality of modern women who have recently lost a child. The values and agency fixed in women's songs long ago and adopted in the psalms of the temple, now fly freely in a contemporary context between hope and hopelessness.

#### **D THE PSALMS AND THERAPEUTIC EMPOWERMENT**

In the MEET process, after the problem has shown its face and has been externalised, the counsellor starts to co-author the counsellee's alternative story that is empowered by the indigenous knowledge and skills the counsellee already owns or to which he or she has access. When the counsellee's belief system allows him or her to appropriate biblical contents as indigenous wisdom, the psalms come to play a role in the empowerment of the counsellee in confronting the problem, and in the thickening of the alternative, healing story. For the religiously minded who do not regard the psalms as dogmas about how we should learn to trust in God, but as references to indigenous knowledge on how to deal with anxiety and fear, the psalms become sources of therapeutic empowerment.

In this part of the article, what follows now are references to the therapeutic potential of a number of the psalms, here simply organised according to their numbering in the "Protestant" Bible.

Psalm 1 assigns wellbeing to the person who walks, stands and sits wisely in wholesome contexts. Historically, the psalm has been read with an emphasis on the undesirable companionships described in the psalm, that is, the wicked, the sinners and the mockers. However, when the focus is on the acts of walking, standing and sitting wisely, possibilities are opened up today for discussing the psalm with people who are caught in toxic contexts and who lack the agency to move out of such contexts.

I walked, stood and sat with a group of young people who were caught in drug dependency using this psalm. With the psalm as the intertext, we discussed the reasons why young people were often seduced into walking, standing and

sitting unwisely, and invited into contexts where drugs are available. Being lonely was one such reason, as was being without hope for a future, or feeling that you did not respect your peer group and were too "chicken" to experiment with drugs. Having externalised "unhealthy space" as the problem keeping the youngsters captive in unwise and dangerous behaviour, and having identified things such as loneliness and peer-pressure that keep this problem entrenched, we then proceeded to explore ways of empowering the youngsters against the problem, thus making the Psalm fly to a modern environment. They came up with suggestions such as finding your inner strength, growing beyond your pain, seeing the beauty in things, exploring hope as a verb and leading a balanced life. Following the slogan-like pattern of Ps 1, which forbids the wrong type of walking, standing and sitting, the group furthermore formulated some "NO GO" slogans to "hang on to" when walking, standing and sitting became tough.

Traditionally, and especially in very pious communities, Ps 8 has been read as a reminder to humankind of the smallness of human beings. God is great and the universe is huge and people are but a spot in it all. However, in an environment that stresses human dignity, the psalm can be read in almost the exact opposite way. God made humans only a little less than heavenly beings. They have dignity and worth.

The message that human beings have worth in God's eyes is, of course, of high therapeutic value for people who have externalised "low self-esteem," as the problem holding them captive in patterns of behaviour that support the view that they are unworthy. People whose dignity has been stolen from them by poverty, rejection, abuse, or life-threatening disease benefit from this insight.

God does not abandon us, even in the grave. That is the message of Ps 16, when v. 10 is interpreted with a view towards life. This, indeed, is a message of great therapeutic significance. The psalm tells us what it is like to live and die with God. To live with God is to have someone who is and who will always be truly loyal to you (v. 1). It is a good life (v. 2), in which you will be cared for (v. 5), and in which you will become wise (v. 7). This life of abundance and care will continue, even in the grave (v. 10). A group of patients who were in the final stages of AIDS once read this psalm with one another. Although modern discourses surrounding AIDS have stripped the disease of its ugly face, this has led to AIDS-affected people dying in circumstances that are even more lonely, where they receive little sympathy from those around them. As it was, this group took courage from the promises of Ps 16; they learned that God had not abandoned them. They were healthily informed by the psalm that a spiritual relationship with God is a real relationship that offers real loyalty and real care.

Talking about care, Ps 27 points to a very important aspect of being cared for: the ability to accept care and, especially, to accept care based on faith in the midst of one's brokenness. The psalmist insists (vv. 7-10) that God will not hide himself from him (the psalmist) nor will God remain angry with him if he does



something wrong. In short, the psalmist accepts God's care unconditionally and insistently, and thus experiences blessedness in a time of suffering. This, of course, is a life skill pertinent to the survival of a majority of believers. This is the skill to convert faith into the acceptance of care in a time when suffering and loss are inclined to alienate one from one's faith.

Psalm 30, again, is a powerful pronouncement on the reversal of suffering, "Last night there were tears; today I laugh" (v. 6b); "Today I mourn, tomorrow I dance" (v. 12a). The healing power of these words is obvious. For someone whose life has changed suddenly and dramatically because of a loss of income, relationship or health, the insight that life can be reversed again brings hope and new life. Of course, the psalm can be converted into a message of false hope. People who have suffered loss are often only prepared to accept consolation if the loss is restored and life is exactly as it was before. A job lost must be regained. A relationship lost must be recovered as it was in its initial stages of excitement and love. A child who has died must be brought back to life. This is not what the psalm promises. This is not the experience or expectation of the psalmist. Instead, the psalm affirms life in spite of loss. No loss is final. There is always a chance to stand up and carry on with life.

In Psalm 31 the psalmist takes control over his suffering. He describes his predicament in terms not unknown to us today. He has become ill because of anxiety over life. He has compromised his energy because of the demands made on him. He has been abandoned by his friends, who now gossip about him and his mental state. Therapeutically significant is the way in which the psalmist changes from using the passive language of a victim (vv. 10–14) to employing active language as somebody who has taken control and agency in the journey of life (v. 15). The idea of moving from victim to agent is, of course, immensely empowering to people who are victimised by the people surrounding them, and Ps 31 refers to age-old skills on how to do this.

Indeed, the psalms bear witness to the reality of many more skills that can help us to deal with and survive suffering. As such, the psalms are of real therapeutic use for suffering believers today. Psalm 32 refers to what, today, we call "closure" – this psalm closes the door on suffering. Psalm 34 testifies to the comprehensiveness of divine care, a care that includes the physical. Psalm 36 depicts suffering and the mastering of suffering as an issue of attitude. Psalm 72 describes how prayers of affirmation can lead to well being. Psalm 97 recommends that a new life – that is, life after suffering – should be started without us bringing our old problems to this new life. Psalm 116 announces and celebrates redemption from the paralysis of fear and anxiety.

## **E CONCLUSION**

In my study Psalms 22 and 46 were used as a metaphor of how reality is experienced as an imaginative space where experiences are located. I explored

two aspects of this phenomena, as dialogical space between the historicity of the written psalms, and present narrated experiences of suffering and loss.

Narrative Therapy was adopted as a framework whereby a binary dialogical space is created between counsellor and counselee. A new form of engagement is negotiated, and indigenous knowledge and other forms of knowledge meet. To demonstrate this method, I firstly used Ps 22 as an intertext for teaching the values and techniques to theological students. The dominant problem of discourse identified in Ps 22 is that God cannot be trusted. Through the indigenous knowledge systems of his time, the psalmist describes his suffering but also empowers himself by inviting God to come to his salvation. An alternative story is shaped when the Lord hears him and reconfirms his trust in Him.

Within the classroom, students are, firstly, encouraged to use it in self-counselling, preparing to become counsellors. Secondly, students reconstruct their stories from the values presented by Ps 22, such as the right to voice one's pain before God, taking responsibility for another's pain, the right to hope, the right to have support systems, and the presence of human dignity in religious contexts. Thirdly, the question "Can God be trusted?" is used to confront and problematise specific case studies, whereby Ps 22 is contextualised relating to today's difficult religious issues. Thereby preparing students for real-life situations where pastoral care and counselling is needed, often as a matter of life and death.

In the second aspect, I explored, presents narrated experiences of suffering and loss, illustrated through Ps 46. Group therapy sessions were conducted with Christian women who shared similar pain of loss, anger, bitterness, and sadness, after losing a child. Psalm 46, based on the song women in the Bible used to sing to women giving birth, forms one of the many unexplored women traditions of Biblical times. In this regard I refer to similar lives of four women of the Bible that expressed their hardship and loss through song, such as the Songs of Miriam, Deborah, Hannah, and Mary's Magnificat.<sup>8</sup>

In this context, the women identified with the fears and resolutions expressed by those women traditions in the Bible and could find consolation and encouragement provided by Ps 46. Further, the women were encouraged by these Biblical women, to move towards their own healing through their faith. Their songs conveyed messages of victory, celebrating that God can reverse their fate, in turn shaping alternative stories of hope and action for the group. The message of Ps 46 enabled the women to move from being passive and weak, to being

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<sup>8</sup> Song of Miriam in Exod 15, the Song of Deborah in Judg 5, the Song of Hannah in 1 Sam 2, and, of course, Mary's Magnificat in Luke 1:47ff, as described in Farmer, "Psalms," in *Women's Bible Commentary*, 146.

strong, thereby turning female experiences into spaces of value, honour and empowerment.

This article showed that the psalms could acquire wings and land in spaces between historical criticism and postmodernism. Proven interpretations of psalms grow into open-ended stories. The psalms were deconstructed and narratively reconstructed. New meanings were found in ancient forms of healing, and I described how indigenous wisdom opened avenues of healing for the suffering believer of today. In the process, the psalms were open up imaginative spaces in which experiences are located, and in which healing becomes a real possibility.

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