

CRU COUNSELING POLICY

The heart of our philosophy of growth and providing care for our staff

During the 1990's we recognized that in order to grow our effectiveness we needed to address three areas: evangelism, leadership development and character and spiritual growth. We adopted a model for biblical character growth which became core to our leader and staff development. Part of implementing this model which emphasizes that character growth occurs in the context of grace, truth and time - was a recognition that the ministry of Cru has the perfect small group environment to really help people grow and live in light of the growth framework.

Our premise was that our small groups would be a place where we would not only engage people in Win, Build and Send but that their lives could be transformed spiritually and emotionally as well. In that context even potential clinical issues might be healed or exposed.

Our desire was to ensure that all of our staff could learn how to create growth environments at the local field level. This was not to negate the need for counseling, but in training our staff and students in understanding and living in light of growth principles, we would see transformation of life and character in community much as Ephesians 4 describes.

So how does this relate to staff care? On a foundational level we want all of our staff to be a part of staff and people care. We want them to become increasingly proficient in creating a healthy growth culture as they engage in winning, building and sending. We want them to get people into a small group or growth community. They need to understand and lead out of the Growth Model, the three elements of growth, and the four developmental tasks. We want to make facilitating a growth culture a normal part of our roles.

So then how do we view counseling? The role of counseling is vital. However it is subservient to our leadership development staff care process, where we desire the primary place of growth to take place in the context of our ministry communities. Yet we recognize that there are times that there are some functional, clinical or relational issues that will require professional expertise beyond the scope of our foundational ministry community. In those cases the help of a counselor is necessary.

The policy of counselors at Cru

Cru recognizes that mental health therapy can be a valuable aid to growth when it is most often offered by a competent mental health professional who is a committed believer and who integrates Biblical principles and the ministry of the Holy Spirit into the therapeutic process.

It is the policy of Cru that when Cru employees are referred to or choose to seek mental health therapy, the professional services must be offered by a professional who is not an employee or missionary with Cru.

Cru employees whether paid or RMO (Religious Missionary Order), who have mental health training, or even if they have a license, may not provide professional services to anyone inside or outside the ministry, whether paid or not.

Cru employees who after going through our graduate studies application and choose to seek additional mental health education are not permitted to pursue licensure.

Cru employees and missionaries are permitted to engage in pastoral care, which includes Biblical and personal input, discipleship, coaching and mentoring.

Professional mental health care uses psychological disciplines to examine the mental and in some cases physical causes of destructive human behavior and applies psychological techniques or tools to help the person address the harmful results. The therapist typically engages in a process of diagnosis, which can use mental health diagnostic tests, develops a treatment plan designed around the particular psychological discipline in which the therapist is trained, and engages in a therapeutic process with the client to implement the treatment plan.

Coaches and Mentors while on occasion may use some therapeutic devices or tools in their interactions, such as good listening techniques, they do not engage in a formal diagnosis, do not develop a treatment plan, and do not engage in therapy.