Introduction: 00:04 Welcome to Engage 360, Denver Seminary's podcast. Join us as

we explore the redemptive power of the Gospel and the lifechanging truth of scripture at work in our culture today.

Dr. Don Payne: 00:16 Well, hello again from Denver Seminary, this is Engage 360. I'm

Don Payne. Thanks for being with us. Today's conversation is super exciting to me and one I've wanted to have for a long time, partly because it stir it scratches my nerd itch. And partly because it has really profound implications for how we think about ourselves, how we think about how we grow and how we come alongside others. The topic is neuroscience and our guest is a second timer with this, Dr. Adam Wilson from our

counseling division. Adam, welcome, welcome back.

Dr. Adam Wilson: 00:54 Glad to be here.

Dr. Don Payne: 00:56 As it turns out, neuroscience is one of Adam's specializations. I

don't know that you are formally a neuroscientist. That may be

a thing all of its own, out in another stratosphere.

Dr. Adam Wilson: 01:07 Yeah, definitely a thing of its own. No, I always start out every

class that I teach on this, making it very clear that I am not a neuroscientist, but I'm someone who, as a counselor, I started for my own purposes and for my clients started to explore neuroscience as it related to the issues that I was seeing and that we were facing and just kind of the field. And I'm a giant

nerd. So that helps.

Dr. Don Payne: 01:28 So this is either a match made in heaven or, or somewhere else.

For those who may not or maybe they've heard about neuroscience, but don't really know that much about it. Why don't you give us first a brief overview of the field? What are we

talking about when we use that phrase or that word?

Dr. Adam Wilson: 01:45 The term itself is a bit of a misnomer in that when you talk

about neuroscience, that'd be a very large umbrella. So it's an umbrella covering lots of different areas of study. So really it's anything that attaches neurological functioning to an area of study. So you can have a neurology proper studying the neurological systems of the body. So if you've, you know, a neurosurgeon would be someone who had studied neurology, but then you'll have things like neuro-psychology. So, the connection point between how we behave, how we think, how we feel and how that's connected to our neurological systems you can have a, you know, any area that connects neuroscience to another area is looking at how those nervous systems are at play, are affected by, are effecting the environment around us. So really neuroscience would be a large umbrella. And that's

really crucial because I mean, neuroscience is showing up in marketing and it's showing up in self-help and it's showing up in legitimate branches of medicine.

02:48

And so when we talk about neuroscience, we do have to be careful with our terminology, making sure our sources are accurate because there's a lot of what they call neuro bunk out there, which is people will drop some science on you. It sounds right. It could be right. But how would you know, right. Somebody dropping physics on you or deep space science, and it's kind of like, well, maybe I'm not sure. So yeah, it is a large branch, but when we talk about neuroscience in the field of say counseling you're not working with people who are directly doing the science. What you're doing is you're utilizing, what's known, what's been found, kind of what research and other areas have identified to then connect that to what we know or what we're seeing, what we want to be able to do. Things of that sort. There are branches within counseling where we can utilize neuroscience technology to help us in the counseling process. But really, again, it is a key cause it's a very broad, broad umbrella that covers many different areas.

Dr. Don Payne: 03:49

Yeah. I feel like we could have probably about 15 different conversations about this from just as many angles, but as you engage neuroscience from a counseling perspective and as a professor of counseling, what are some of the key elements that you draw upon, or some of the key points of reference within that big field of neuroscience that kind of come to the surface for what does it mean to help people and help people heal, help people grow?

Dr. Adam Wilson: 04:18

So I'll start off with kind of the history lesson of where my nerdiness began with. This is when I graduated.

Dr. Don Payne: 04:25

I'm not sure we have time for that.

Dr. Adam Wilson: 04:27

It's a large, large story of nerdiness now. Really when I graduated with my counseling degree and I went out, I really just had a desire to work with a child adolescent population predominantly that was my main group. So as I worked with more and more kids, what I found was I had a high number of kiddos who had symptoms of ADHD or learning disabilities. And those would often go hand in hand and I had learned what these things were. I understood what the symptoms were. I understood what, you know, the way different treatments worked for those. And I understood my role as a counselor early. So I was learning what my role was as a counselor with them, as far as helping them learn how to control their impulses

or learn how to stay focused or helping them get organized with their homework, all sorts of things like that. But the difficulty was, and this is my problem is if I don't understand why something is, I have a real hard time with it. And that is why I didn't like algebra solve for X what's X, why do I need to solve for it?

05:26

You know, no one could give me that answer. And so I was not a fan. But when we look at these issues are facing me, it's like, okay, I understand what I'm supposed to do, but I don't like just doing it without understanding why, like, why are these their struggles? Why are these things they face? So I started to kind of dig in myself looking at journal articles, reading up on what is ADHD and what are these symptoms? Where are these things coming from? Why is it that one kid has difficulty controlling impulses and another doesn't, why is one kid struggling to read and another one doesn't. And what I started to understand what some of the neurological kind of basis for, for these different symptoms that we would see. Right. And that was really beneficial to me because all of a sudden it's like, oh, okay, I understand why this kiddo can't read the same way as another kiddo has nothing to do with intelligence. Absolutely nothing to do with intelligence. It's all about how their brain is processing symbols, how it's processing certain kinds of information.

06:23

So I thought that was useful. It was beneficial. And then I was meeting, I have one kind of story. In my mind, I was meeting with one kid and he had his whole kind of career in school. Had always thought he was stupid. Cause he just couldn't read. He'd been told he wasn't doing it right. No matter how hard he tried, he just recognized, I cannot do this the same way that my peers do this. So he concluded that he was stupid, and this is not an uncommon story for kiddos that struggle in this way. And so what I was able to do is kind of explain, has anybody ever told you what dyslexia is? And he's like, no. So I explain kind of some of, you know, translated, but explain some of what I had come across. And it was one of those things doesn't happen all the time or very often, but you literally saw like a switch flip and he shifted his identity in that moment

Dr. Don Payne: 07:13

Kind of a heuristic moment. And I had to use that word because I said, this is a nerdy podcast.

Dr. Adam Wilson: 07:16

Absolutely. Yeah. We got to drop a \$20 words whenever we can. So, what was amazing was like his life didn't change in that moment in the sense that like all of his problems went away and he could instantly read everything you wanted to now, but it was the beginning of a process. It was the beginning where

his, his mindset about himself and about his ability to grow and change and succeed. He now had the possibility that he had capacity. He had ability, he had potential and it was just a groundbreaking moment for me. And it was the basis for why I became really passionate about why our counseling students here, they need this. They need to understand and be able to read through those kinds of content so that they can provide this kind of information. So when we look at counseling, it's not necessarily, I mean, we aren't prescribers of medication. We aren't people who are doing the brain scans. We aren't skilled in those levels or we aren't trained at those levels.

08:15

But what we can do is take this complex information that's out there, read it, grab what's useful and beneficial at the level we're working at as counselors or as helpers. And then at times translate that for clients that might be useful for them also to have that information, because again, they may or may not have access to some of the content that we might, or they may not have gone through all of the new training that we have to really care enough, to dig into these things. And so in doing that, we enable our clients to have areas and aspects of truth that they might otherwise not have that helps them to make decisions, helps them to identify themselves more accurately to place their struggles in the right context and move forward.

Dr. Don Payne: 08:59

Okay. One of the words that I hear a lot in neuroscience discussions is neuroplasticity. And what little I think I know about that, it, it really points toward how neuroscience help, not only can help us understand how our brains are working, but how, in fact we change and how our brains can change that the, that the brain, the human brain has certain inherent capacities to I'll use lay terms here re kind of retool rewire itself in newer directions. So what you've described so far, it seems like it has a really important role in helping people understand, validate, accept, and kind of live into the way their brains already work. And what about the change part? The plasticity part?

Dr. Adam Wilson: 09:54

Yeah. Well, it's kind of funny cause to understand the change part, I think this is, it's not that it's incorrect, but this would be example of one of those places where our understanding of one concept can get limited. And if we don't understand larger, we miss out on some of the benefit or, or placing it in as correct context. So we look at neuroplasticity, it's the brain's ability to change, to adapt. And often we hear that in the context of a recovery, you know, or like changing something. So if somebody has a brain injury that, you know, a car crash, a brain injury, their brain can kind of recover to some degree or if you know,

somebody has a stroke then there's some ability to recover, but the reality is what's happening there is in many ways the same thing as seeing my daughter, my 16 month old daughter, as she learns how to climb up a little kid slide and slide down. She's not good at it at first. And then all of a sudden, the more she tries, the more she does it, all of a sudden she's getting smoother and smoother and more confident and she's better able to get her foot over.

10:57

So she doesn't topple off the top of the thing. She gets better at it. That's plasticity. So, the ability to learn the human capacity to, to learn and grow in any way is the exact same process as that recovery process, because what it is it's the brain's ability and not just the brain. When we say the brain often, we're skipping out on lots of the nervous system that's kind of out throughout the body. But you know, shorthand, we say the brain. So when we talk about the brain, its ability to grow its ability to make new connections, that's how we do everything. That's how we learned how to tie our shoes. That's how we learned, you know, theology. That's how we learned our vocations, how we learn how to drive. And if we lose a capability because of something, or we're stuck in a pattern that we dislike, the ability to change those patterns is the exact same process learning. But what it is on a physical level is neurons making connections and talking to other neurons or adjusting the ways that they function to kind of modulator what is needed.

12:07

So what we have to look at is the brain and the nervous system, it designs itself around what is needed. Okay. And this is key because if you look at first three years of life, this is just massive potential for brain growth, like is just exponential. I mean, anybody who's had a kiddo or watched a kiddo in that age range, they're just little scientists, right? They're trying everything dropping their cup off the thing, just seeing how many times you'll pick it up for them, you know, that is break stuff and be like, well, huh, that made an interesting noise. Like they're just exploring, but what's happening is their brain is absorbing information neurologically, it's making connections to other neurons in these systems, kind of pathways of communication get more and more efficient. The more we use them, the more efficient they get more efficient, they get the more it becomes automatic. So think about parallel parking when you first started driving.

Dr. Don Payne:

12:56

Right. That's right where my mind was going.

Dr. Adam Wilson: 12:58

Oh sure, sure. Sheer terror. The first time I had to parallel park is a 15, 16 year old, just, just terror. Right? I can't do this. Like everything feels awkward. I don't know how to do this. I can't say I'm the best parallel Parker in the world, but now there's more confidence and it's a lot smoother of a process or just driving in general where it's dangerously automatic now where I can be changed the radio, eating my breakfast, you know, talking on my phone, holding the wheel with my knees. I don't do that. But just saying I theoretically could and doing that, it's become so efficient that I don't even have to think about it anymore.

Dr. Don Payne: 13:35

Yeah. Okay. So, far I can't see anything that you've said that most people wouldn't even in including committed Christians would find odd or unusual. Informative, important. One of the areas where it seems like the surface level assumptions or assertions of neuroscience can start to get a little unnerving for many Christians is when we move it into the arena of personhood. And here we'll have to dip into our theological anthropology a bit. What does it mean to be a person in God's image? What does it mean to be fallen, to be a sinner, to be captive, to something that is beyond merely my biological structures? And then what does it mean to change with respect to those areas where I may feel in bondage, I may feel to be myself to be a captive. I may in fact have a bent in ways that I can't unbend, but desperately want to. So as we move this into the, the arena of some theological implications, where from where you sit and your experience, where does this become unnerving I'd like for you to unpack that a little bit? Where does it tend to collide with maybe some deeply held assumptions that a lot of believers may have about what it means to grow and transform?

Dr. Adam Wilson: 15:15

If I look at this from a perspective of the larger conversation around science and faith, and I think we can't really have this conversation specifically about neuroscience without taking a step back and asking what's the relationship between science and faith. And if we look historically you know, go far back, science began through communities of faith. So it's, you know, genetics beginning with monks studying beans in how to create better strands of beans or different strands of beans, and looking at the nature of, you know, our exploration of the cosmos. And that was initially an exploration of God's heavens and, and understand. But then when conflict presented itself between church traditions or church theology, and some of the findings, for example, like the earth being round versus flat, and things of that sort, you started to find this tension where there

was a fear. I believe that it was inserted that science could override what we think we know or what we believe about God.

16:24

And that's a scary idea because this idea that there's a source of information that's outside of scripture, outside of tradition, and yet might prove wrong what we hold. I think that introduced a lot of fear for at least some Christians or for organized Christianity. So I think as time goes on, you know, you get into conversations around creation versus evolution. And in some of, I think in modern Christian circles, that may be one of the bigger kind of impetus for fear of that relationship. For myself, when I look at neuroscience and I say, okay, when we find out something about how the brain and the body works, there's a level of wonder at just the sheer complexity of what God's created. For me there's not a fear, but instead, just a thing it's kind of, I look up at this, I go camping and go look at the stars and you can see part of the Milky way, my mind, just not quite being able to handle that. I love that. I love that. But I think for some that mystery maybe a little bit scary in that, how I've come to understand God and how God changes me is through the narratives I've heard through.

17:49

Maybe what's been preached, what's been taught or how I've understood scripture and the way it's read. And that seems like it contradicts this idea that I could change myself in some way, or that, you know, a counselor or a doctor or taking medications or something could alter who I am. But I think in that there there's something that when you talk about the anthropology we hold, right? Our understanding of what does it mean to be human, right? It's not a conversation about science versus faith as a question of what is true. It's a piston ecology, right? What is it that is actually true about me being human? What makes me human am I simply this collection of, you know, chromosomes and is my DNA really what defines me? Is this really who I am? And then there's like a line over here. The other option B would be, I am God's creation. And I live in this broken thing that is physical reality, that doesn't function like I want it to, my knees hurt and I wake up sore from sleeping, from sleeping Don, I didn't do anything else just sleep.

19:02

Right? So this idea of the tension of my existence, I feel myself as something different than just this physical thing and, and scripture talks about me. Like, I'm something more than just this physical thing and that God is all powerful and God is what changes me and God is what changes me. I'm sorry, this is a God is what saves me. And then I hear, so maybe the scientific thing that says, you can change the way you think, and we can give you medication to make that thing that you experience as a

person go away or be less. And that feels a little bit like somebody saying, it's unsettling to some folks because it feels like somebody playing God or somebody saying like, oh, you don't need it.

Dr. Don Payne: 19:40

Of course, there are a significant numbers of people in the neuroscience community who we would label, I guess, as reductionists neurological reductionists, who will argue some of them you know, leading intellectuals who will argue that we are nothing more than the collection of neurons. That we're nothing more than our biology. One way of phrasing this, I know you've heard is that, you know, our biology is our destiny that, that whatever we experience biologically, including our neurology, defines our identity and that we are nothing more than that. That rightly becomes unsettling to us because we know from scripture that just is not the case. There is more to us than what we can diagnose, what we can map in terms of any scientific process. But where the disturbance begins to come. I'm just kind of repeating you're saying is, is when we start to feel that creep, that bleed over between what the neurological community will suggest we can do to our personhood. And what we deeply believe about our need for God.

21:06

Our need for God, not merely to fix stuff in our lives, but our need for God, to make us and define us as persons, not, you know, not merely biological entities, but as persons. And that's part of what I wanted to explore with you today. Adam is how some of these findings of neuroscience actually can come into alignment with what we know about our, our God and our need for God. How, and, and in other words, how, how does God use what we know about things like neuro-plasticity to inform how we understand ourselves, how we understand what it means to grow and to be transformed when neuroscience tells us that bluntly stated, there are lots of things about yourself that you can in fact change, if you know how your brain works.

Dr. Adam Wilson: 22:02

I think a piece I want to, I want to focus on here is the risk that you mentioned there, the reductionism, I think, is a risk across the board. I think Christians can be just as prone to reductionism as an atheist might be to reductions. I mean, it's just in a different direction. So if I do not believe that God exists, I have no need to for God and finding things out that show me that I don't need some supernatural being to fix me is going to be very affirming and that's going to be good. So I'm going to want to reduce them

Dr. Don Payne: 22:37 Confirmation Bias. I'll find the evidence that confirms what I already want to believe.

Dr. Adam Wilson:

Speaker 3:

Dr. Don Payne:

Dr. Adam Wilson:

22:40

23:29

24:31

24:45

I want to reduce it down to that level. Yeah, no, no. You know, I can't do it yet. We don't know yet, but eventually we will, like, we just need to keep chipping away at this, this, you know, body of literature until we know enough to get the technology up to the speed where we can do this. So there's a reductionism there where I reduce it down to a lack of need for God, because the material is all that's necessary to achieve the result, the resolution to this disquiet. I feel to this distress, I feel this, this tension that every human on some level experiences, I'm not okay. It's not to say we're all completely lost in depression or anxiety or whatever it is. But we all know on some level that we need to move towards healing or towards health, because that's not our default.

Now the reductionism on the Christian side, I think is the other direction where we say the physical side of things is something that I can't easily understand can't easily modify. And it's how I understand the basic DNA of the, of existence. The basic DNA of existence is wrapped up in this understanding that God is all powerful. God is the creator. God is the savior. And so I reduce things down to the spiritual side of who I am to my faith. And I say that therefore, the only solutions, the only possibilities have to come from that part of who I am, that aspect of what I understand. And so we reduce it down to what we know. I know God's all powerful. I know that God is trustworthy and this is hopefully not everybody believes this, of course, but that I'm in this place where I that's where I can find this healing and this hope and everything else is suspect. Right.

Unless God renders God's power in a particular kind of direct palpable manner. Right. That's I mean, that's what I hear you saying. Yeah. That, that, that anything else outside of God working in that particular way is suspect.

Yes. So what I want to put out there, and for me, this has been the case. This is true for me is that is as I've engaged more in the study of, and teaching this and applying this kind of content in my life and in my profession, I am increasingly humbled. Anybody who says, they're an expert in something which I do not claim. If they claim they're an expert in them, you should suspect them immediately because anybody who truly is an expert in something, and I'm not making a statement about myself right now, they should immediately say that I know a very small fraction.

Dr. Don Payne: 25:21 Yeah they are aware of what they don't know.

Dr. Adam Wilson: 25:21 Exactly. And so the reality here would be, we are all prone to

reductionism, cause it it's easier. It feels much simpler to have a very black and white view of things. What I would put out there is that God's design are, it could be his anthropology, his created order, the, every aspect of what God has done in his doing is infinitely more complex than we can comprehend. I think many people could get on board with that idea, but when we apply it to ourselves, I think he gets a little uncomfortable in the sense that who I am. I might not really understand the complexity of who I am to say that my physical self is something that God created. He loves, he values extraordinarily, highly, so much so that he plans on keeping this physical reality, perfecting it, renewing it, but keeping it. That he values this. And he values the spiritual aspects of who he made me to be. He values the emotional sense of who I am in the relational sense of who I am. who I am on the whole is valued by God. I

He values the emotional sense of who I am in the relational sense of who I am, who I am on the whole is valued by God. I am a masterpiece, but that is an infinitely complex thing.

Dr. Don Payne: 26:38 Yeah. So when it comes down to the question of how does God change us? What is God's role in changing and growing us,

particularly in ways where maybe we thought we could not change, we felt helpless to change. But then in those areas where we all of a sudden find out, oh, there is help for this that somebody who may or may not know the Lord can get an offer to me, where this comes to the surface is that it pushes us to realize that God is actually working in all kinds of ways, more complex, more mysterious ways than we perhaps gave God credit for. And in the interest of continue our nerd cast motif here. One of the theological phrases that we often use is God's conclusive operations that God is not working entirely apart from or discreetly from those things we can explain and manipulate, but God is in fact, working through those as part of God's common grace God's gifts to us that we may or may not attribute to God. We may or may not give thanks to God. We may or may not give glory to God for those things. And yet all the same God, as our creator designer is working through those things to change us, which works against. I think that the kind of

Christian reductionism that you described, right?

Dr. Adam Wilson:

28:03

Right. I think that when you look at, for example, prayer, as something I'll talk about in our class, that we talked about this topic. When I look at prayer and I sit down, I close my eyes, I focus my mind on scripture. I focus my mind on God's presence, and I engage in some form of dialogue with God, whether it's listening, prayer, I'm actively petitioning him, or just engaging with him. I experienced that emotionally. I experienced that

intellectually. I experienced that on a level of relational connection with God, a attachment to God. If you put me in a brain scan, while I'm doing that, you will see different activity in my brain. Then when I'm not doing that, and this has been, this has been done. It's not that, oh, there's God in your brain. It's not that. I am using this physical reality to engage with God. And if my brain wasn't working properly, that would be more difficult to do. The actual act of prayer would be difficult to do in this reality.

29:14

God enabled me to connect with him through this physical body right now. It's not to say that's all it is. And that's what you know, reductionist on the materialist side would say like, well, yeah, you're just, you know, it's just meditation. You're just focusing your brain. And we would say, no, there's far more to it than that, but that is also true that I am utilizing this material because it is a part of who I am. And it's a part of who God created me. And he created it to do that. He created in me the capability and the desire to engage with him. And it is physical when Jesus healed, he healed a physical body. He healed physical tendons and muscles and neurons and blood vessels.

Speaker 3: 29:56

The vision that was brought back to people, the, you know, the withered hand that was made strong again in the legs, that didn't work, that was a physical healing. And it wasn't simply to make a point. He cared about that. Person's physical reality because that's a part of who they are. And I think that's a part that as Christians, I want to challenge us to, to take back that, that expansive view of who we are to understand that when somebody is struggling with mental illness, I think we often will see that as something that somebody has, that somebody else doesn't have in the reality is that wellness, mental wellness, like any of us can become mentally ill and on a daily basis are more or less mentally well or ill.

Dr. Don Payne: 30:37

Yeah. And this may or may not be one of those days, you know, for somebody in this room.

Dr. Adam Wilson: 30:42

Right. Yeah. So the idea that it is something non-physical that drives illness or it's something that's, non-physical that drives wellness. We can say like, well, yes, there are aspects of ourselves that we can be separated and broken from our relationship with God in a non-physical sense. And then we could stop there. But the reality is our physical self is engaged in that is integrated with who that self is as well. We are a holistic being and to look at the idea of how does God heal us? How does God grow us? Well, I can, let's say I'm highly impatient with my kids. Never happens Don, never happens.

Dr. Don Payne: 31:25 You're speaking for a friend.

Dr. Adam Wilson: 31:26 Sure. Yeah. I have a, I have a friend. No, if I'm highly impatient

> with my kids, can I change that? I hope so. I really hope so. And if not, I need a different job because that's a part of what I do is help people learn those things is something changing physically in that parent and myself is I learned to emotionally regulate myself more effectively. As I learned strategies of how to speak to my kids, how to manage behavior, how to stop myself from a certain thing and do something else instead is something changing my neurological physical self. Yes. I mean, you could put me in a brain scanner and you could see it, you could see it happen. Right. And then we say, okay, let's say I become the perfect parent. Right. And yet I am disconnected from God. My whole self is not healed. I am not healing myself, but I can alter

the manner in which I engage this created world through what

God has given me.

Dr. Don Payne: 32:17 Yeah. And what is so intriguing about this, Adam and I, and I

> hope listeners grab onto this and, and we'll, we'll run with this is that there is no there's no intrinsic conflict between those, what we love to call the parts or the domains of our self. We can, we can kind of parcel out these different aspects, our self for discussion purposes. But the, the biblical profile of the human person is far more integrated than these discrete compartments, or are parts that we love to talk about that they, they work together and that we do relate to God by means of these biological structures. And then the other part is that we need not be threatened or unnerved when we see people apart who have no overt faith in God, no relationship with Jesus who become maybe far better parents than we are as people who know the Lord. I know that that is often unsettling when people will see non-Christians, who are far more developed, far more mature, far more accomplished in various human skills, even relational skills than some believing people are. And we're thinking, well, gee, if God is present in our lives, how could they do that? And so, you know, we may be tempted to kind of dismiss it as pseudo maturity or bogus. But, you know, can we say, based on all that you've said about neuroscience, can we say that no, it's possible for any human being to develop these skills. And to become a really, really good and mature at some aspect of their humanity, even if they are not reconciled in the

core of themselves to the one true living, God?

34:12 I think this is really key because the, I don't know, you could say two sides of the coin, but I think when you look at the fact of a non believing individual can be extraordinarily healthy in an

Dr. Adam Wilson:

emotional sense, in a relational sense, in a vocational sense,

they can be highly successful as a parent, as a worker, and be disconnected from that everlasting father. Right? And then you can look at somebody who has a deep, passionate love for God and is connected at their deepest, deepest parts of themselves to the Lord and has severe depression or anxiety has a history of trauma. And they struggle with PTSD. Maybe, you know, the military vet who comes back from combat and is just, just racked and struggling to relate to their family and to society. And you say, well, those are two sides of the same thing, because the fact of the matter is where does the intensity of brokenness and that's maybe a poor phrase, but where is the crux of the brokenness in that person's life at that moment, it can be in the physical realm.

Speaker 3: 35:17

If you have somebody who's a believer, but has a genetic predisposition towards schizophrenia, and they're in the middle of a psychotic break, their understanding of God and their ability to relate to God is going to be disrupted. That doesn't change anything about their relationship deeply with God, their connection to God, but their physical self is not balanced. It's not functioning in that moment. And those are the safe ones we can say, oh yeah, people have Alzheimer's who, you know, they start to lose their cognitive capacity. Unfortunately, most of us are going to experience that with some loved one where we watch that happen, where we see their personality change, we see their, their impulse control change, and it can be in really where they're like, man, this is like the godliest person I've ever known. And now they're, you know, cursing and they're embarrassing me and you stop. And you look at that and say, what changed? Did their eternal self change? While their physical self is changing?

36:11

And that we have to understand that the Christian who struggles with some level of mental illness, again, is not somebody who's deficient in a way that some other person who isn't struggling with mental illness is. The idea is that we all have to maintain physical health. And if we judge somebody who, you know, has diabetes or cancer as deficient in who they are as a believer, because they got sick, we are, are, I think many of us could look at that and say, that's just not, there's something really wrong. There's something often that thinking in that theology. But I think we have a different calculus when it comes to mental health, because we view that as more integrated with our non-physical self. But the reality is it is all intertwined. And if we want to grow, we have to grow spiritually. We have to grow emotionally. We have to grow relationally. We have to grow physically. And that plasticity we talked about before, if I

learn to engage with God and trust in a moment where I feel fearful.

37:15

And I have to kind of flex that willpower to rely on God instead of my own control or given to my anxiety or my fear, again, that is a spiritual act. And it is an emotional act. And it's a physical act. I am neurologically firing off in order to do that. And that's something I can train and learn, but I can also train to learn those without that deeper ultimate connection and meaning, which leaves me deficient as a self, just the same as if I only focus on my faith and I don't focus on my emotional and my physical healing, I will in this existence be deficient in my connection.

Dr. Don Payne: 37:55

Well, gosh, we have triggered about maybe five more podcasts that over time we need to have, because the, the questions and the things I'd love to probe even further about are just, they go on and on. But as we wrap this up for this episode I think it'd be important to highlight the fact that even with all the variables and the vicissitudes within our biological makeup, our cellular makeup, including our neurology, that ultimately God is the one who upholds us, holds onto us. In other words, they heavy lifting in us to God has done from God's end, which is what gives us a, you know, a sense of peace and confidence that our relatedness to God does not rise and fall or come and go with the relative health or unhealthy that we may be experiencing in any domain of our lives. God upholds that, which is pretty important particularly in those dark, vulnerable times. And then, you know, at the I guess, in an even more practical manner what you've described to us about neuroscience and neuroplasticity validates all of the intentional efforts we can make to rehabilitate ourselves through what we would often call spiritual disciplines or practices.

39:30

We don't have to take the passive approach, assuming that if anything meaningful is going to happen, it, God will sort of magically do it and directly do it, but that God works through the rehab situation and intentionality that we bring to life to do the things that we know lead us in directions of health and that openness toward more God responsiveness in our lives. And that excites me when we think about transformation to discipleship and some of the practical works of ministry and coming alongside people that just excites me no end. So we'll have to pick this up and have another conversation or three or four about this. Dr. Adam Wilson, Adam, thanks again, for taking time out of your busy schedule to be with us. We're really grateful for that. And for all the work you do here at Denver Seminary. Friends, close up shop for this week, let me

remind you that you can contact us if you have comments or questions. Our email address is podcast@denverseminary.edu. Also, if you would like and need to throw in a reminder here that all of our interviews are available in full written transcript form on our website.

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So whatever platform you might be listening on, you can go to the Seminary website, which is simply denverseminary.edu/podcast. And you should be able to find their full transcripts of all of our episodes, if you're interested in revisiting any one of these interviews that we have with any of our guests. So thank you friends for spending a little more time with us, and we hope to see you again soon for everybody here at Denver Seminary. We're grateful for you. Take care.