



# Pastoral care and counselling in Scotland since 1950

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I begin with three preliminary comments. First, to attempt to paint a picture of pastoral care and counselling in Scotland since 1950 is to begin with a canvas which is simultaneously too small and too big. Too small because over the past sixty years or so, pastoral care and counselling in Scotland has always been part of a larger scene, both British and international. And too big because the story I will tell is largely an Edinburgh- (and indeed New College-) based story and does not include church-based developments such as Number 21 in Edinburgh and the Tom Allan Centre in Glasgow (both Church of Scotland) and the Roman Catholic Garnethill Centre in Glasgow, important as these are. Further, in selecting 1950 as a starting point for this paper, we must not be so arrogant as to assume that pastoral care only began in 1950. What began then was a particular way of conceptualising what was happening, stimulated largely by current developments in psychotherapy.

Second, in the ongoing dialogue between theology and therapy, there is a certain curiosity in that the conversation is never simply between theology and counselling. The dialogue partner is nearly always 'pastoral care and counselling'. There are good reasons why this has happened. National and international organisations have usually had both 'pastoral care' and 'counselling' in their official titles. And during that period (the 1960s and 1970s) when English dioceses were becoming aware of the importance of the subject they appointed Advisors on Pastoral Care and Counselling. And the first International Congress held in Edinburgh in 1979 was on Pastoral Care and Counselling. Yet in the ongoing dialogue between therapy and theology, it is arguable that the balance between theology and psychology has been very different in relation to the two parts of that title, that pastoral

care, at least practised by ministers has been underpinned by strong theological assumptions (sometimes implicit rather than explicit) but generally speaking has not been psychologically informed, while counselling, largely a lay phenomenon, has been psychologically rich but has been theologically impoverished. (Though of course if we were to explore the nature of *Christian* counselling as opposed to *pastoral* counselling we would find a very different relationship between theology and therapy.)

Third, I wrote the first draft of this paper thinking it might need substantial revision later. I thought at first that it was probably a tad too personal. However I then read *Hannah's Child*, Stanley Hauerwas' very personal theological memoir. Now I am no Stanley Hauerwas, but reading his book encouraged me to think that in this context, when we are still close to events, an open subjectivity might have its own legitimacy.

It was in October 1960 that I first entered New College as a student. What did exist in Edinburgh at that time was the Davidson Clinic, pioneered by the indomitable Dr Winifred Rushforth. Her exposition and practice of analytical psychology found a receptive audience among many ministers who sought to integrate psychological insights into their own pastoral practice. While this appears to have made little impact on New College, its legacy lives on in Wellspring. In New College itself not much was happening. Practical Theology was not then part of the BD degree. In our final year, ministry candidates were free to attend a Wednesday afternoon clinic at the Royal Infirmary at which we observed a psychiatrist interviewing patients. It was not clear what we were to do with this experience. The relationship, if any, between this psychotherapeutic voyeurism and Professor Torrance's lectures on the hypostatic union was never explored – though a study of the human and divine in Jesus Christ might have been relevant to the dialogue between therapy and theology, two disciplines which are neither to be confused nor separated.

Other things were happening outside the college, however, which were to have a subsequent influence upon the development of pastoral studies in Scotland. In 1958 there appeared in *The Scotsman's Log* an article giving an account of the work of The Samaritans in London, suggesting that something similar was needed in Edinburgh. The

upshot was that the first branch of The Samaritans outside London was formed in Edinburgh. What soon became clear was that the success of The Samaritans depended upon co-operation between the caring professions. What was equally clear was that the different professions had no experience of talking to one another and so there came into being in 1959 the Scottish Pastoral Association and its journal *Contact* (Lyll, 2010). Among the key figures in this development were Campbell Maclean, Minister at Cramond, Keith Arnold, Rector of St John's, Princes Street, and James Blackie who was then University Chaplain and subsequently became Professor of Christian Ethics and Practical Theology in New College.

It was to James Blackie and the SPA that as students we turned for practical training. During my first year, as a group of students we went on retreat to East Lothian. We actually called it an 'Advance' – and it was a totally depressing experience. We saw little relevance between our academic studies (excellent as they were) and the realities of pastoral ministry which lay ahead (of course divinity students have always thought that). But out of that sense of despair arose an approach to the SPA to 'do something'. In 1962 there began a series of annual Easter vacation conferences which were open to students from all the theological colleges in Scotland. The underlying philosophy was one of engagement with the human sciences. There was input from medicine and sociology. We were introduced to *The Art of the Interview*. At the time this was heady stuff! There wasn't much engagement with theology. It was the therapy which was of interest. Of course at that time theology was in ferment as well. Within days of the second of these annual conferences Bishop John Robinson's *Honest to God* was published, introducing into the public domain the thought of Bultmann, Tillich and Bonhoeffer, and unleashing unprecedented theological turmoil among the general public, if not among theologians. If at this point fifty years on, BOTH the recognition of the need for interdisciplinary dialogue AND the theological ferment generated by *Honest to God* seem somewhat passé, it did not seem so at the time. These were exciting times with perhaps both the new therapies and a new theology seeking to establish their own identities before they could enter into meaningful relationship.

Sometime during my second year at New College, I had a personal

moment of revelation. Down in the library stacks I came across a book covered in dust, still with uncut pages. Its title was *Pastoral Counseling* (Hiltner, 1949) and it was by an American called Seward Hiltner who taught at Princeton. I began reading ... and kept on reading. Here was another way of doing ministry and of reflecting upon it. So I just had to go to America to learn more. I did not in fact go to Princeton but to Yale. They also appeared to offer courses in Pastoral Counselling and, more important, they offered me a full scholarship. On arrival I introduced myself to James Dittes, the Professor, and told him I had come to learn all about pastoral counselling. He said ‘You have come to the wrong place. We don’t teach that here.’ I was somewhat deflated – because courses on Personality and Religion were listed in the Divinity School Calendar. Later I came to understand and appreciate what he was saying. In one of his earlier publications, Dittes wrote about ‘the seduction of relevance’. In so doing he drew attention to a phenomenon in the North America of the 1950s in which many ministers left their parishes to work in counselling centres – some with a church base, some not. He argued that for ministers counselling should not become a separate distinctive profession but a tool to be used in the context of pastoral work. He argued that psychotherapeutic understanding could enable ministers not to do psychotherapy but to gain greater understanding for their pastoral relationships and their ministry. For example, in two subsequent books he demonstrated how an understanding of the psychotherapeutic concept of resistance could help ministers to interpret and understand resistance to change in congregations. The titles of these two books were *The Church in the Way* and *When the People Say No*. I wish I had read them before I became a parish minister.

As I entered parish ministry, I realised how unprepared I was for the task:

- unprepared to cope with all the demands of a busy parish
- unprepared for the constant toll of funerals – at least one a week
- unprepared to understand the dynamics of congregations and to cope with the feeling that if something was going wrong it was my fault
- unprepared to cope with the elder who came to Kirk Session

meetings carrying his own copy of Cox's *Practice and Procedure in the Church of Scotland*. He really did believe that if anything was going wrong it was my fault!

But salvation was at hand. In 1968 I met Frank Lake at a conference in London. He was already planning to start a seminar in Glasgow which indeed came to pass. Lake was an Edinburgh-educated doctor who reputedly, as a student, walked the Braid Hills with Tom Torrance. After a spell as a missionary, Lake returned to Britain, took up psychiatry and at the request of the English bishops began a series of seminars for clergy. These seminars soon blossomed into what Lake called Clinical Theology. Tens of thousands of people, both clergy and lay, have participated in these seminars and continue to do so today in what is now called the Bridge Pastoral Foundation (which continues to have a lively annual Scottish conference). Lake's work was based upon a peculiarly potent brew of theology and therapy. For theological inspiration Lake looked to St John, St Paul, St John of the Cross, Kierkegaard, Simone Weil, and Martin Buber; his psychological mentors were Freud and the neo-Freudians, Klein, Fairbairn, and Guntrip. Writing in 1970, Hugh Melinsky argued,

Since there are great divergences amongst theologians and psychiatrists in their own fields, it is hardly to be expected that any one mortal could lead these two contentious disciplines to a happy marriage. The period of courtship looks like being a long one. (Melinsky, 1970:119)

Forty years on few would argue that the marriage has actually taken place. Perhaps reflecting the spirit of the times, theology and therapy are content simply to live together as partners, co-operating as they wish while leaving each other space to be themselves. What is unarguable is that over the years Clinical Theology has provided for many people a vocabulary and a framework for understanding both conceptual relationships and themselves, and a safe place for unburdening a pastoral load which had become almost too heavy to carry alone. For the last three years of my parish ministry I would count myself among such people.

The late 1960s was a time when much was happening on the interface between theology and therapy. New organisations were being founded reflecting both denominational and ecumenical interests (Lyall, 1995). Bill Kyle founded the Westminster Pastoral Foundation originally to enhance the work of the Methodist Church; Father Louis Marteau set up the Roman Catholic Dymrna Centre; Harry Dean became Director of the Salvation Army Counselling Centre; a Jewish Counselling Centre was set up in which Irene Bloomfield, a Jewish psychotherapist, played a leading role. Anglican dioceses were appointing Advisors in Pastoral Care and Counselling; universities and theological colleges were introducing certificates and diplomas in pastoral studies. It was a time of ferment and experimentation and many of the key figures in these developments were instrumental in setting up the Association for Pastoral Care and Counselling which was one of the significant sections of the nascent British Association for Counselling (as it then was). While these were British developments, the Scottish contribution was far from negligible with papers from both James Blackie and Alastair Campbell finding a place within the Constitutional Papers of the APCC.

Perhaps this is the appropriate time to introduce the contribution of Alastair Campbell to the development of pastoral care and counselling in Scotland. While the principle focus of Alastair's later work has been in the field of medical ethics, he was instrumental in many Edinburgh-based initiatives in the pastoral field. With First Class Honours in Philosophy and a Distinction in Systematic Theology, Alastair went to San Francisco to undertake doctoral studies in pastoral counselling. On returning to Scotland, he was soon appointed to a Lectureship in an expanding New College in which James Blackie was now Professor. Alastair produced significant publications in the area of pastoral theology (Campbell, 1986) and saw the introduction of pastoral studies into the BD programme. Integral to his teaching was the introduction of supervised placements, mainly in hospital settings.

Within the space of 18 months in 1970 and 1971, the three full-time hospital chaplaincy posts in Edinburgh became vacant. With the agreement of the Health Boards and the Church of Scotland, three appointments were made – each with a part-time appointment in the Faculty of Divinity with responsibilities for developing supervised

placements. That this pioneering approach was possible is I think testimony to James Blackie's previous work as University Chaplain and to the respect which he had earned not least within the Faculty of Medicine. So Murray Leishman was appointed to the Royal Edinburgh Hospital, Stewart M'Gregor to the Royal Infirmary and I was appointed to the Northern Group of Hospitals which included the Western General. I think we did create a model of chaplaincy which was more integrated into the realities of the modern teaching hospital. We initiated supervision of students on placement, though I must confess that as far as I was concerned, it was a case of learning on the job.

There was talk of developing a summer programme of Clinical Pastoral Education along American lines and there were discussions with about the possibility of a leading CPE supervisor coming to work with us for the summer. In fact this came to nothing. The reasons for this are probably quite complex but there may be a clue in the way in which our separate interests developed. It is also possible that we find here some understanding of the way that pastoral care and counselling has developed in Scotland. Stewart M'Gregor did a magnificent 29 years as chaplain at RIE but for part of that time he was the first Chairman of the newly-formed Community Health Council, the voice of the public in the health service. Stewart's witness was that while the pastoral care of patients, their families and hospital staff was important, and no-one was more committed to that kind of care than he was, individual pastoral care could not be separated from its social and political context.

Murray Leishman's contribution was different but equally important. I want to mention two initiatives which were part of the ongoing development of the dialogue between theology and therapy. Murray, as well as developing his own gifts and skills in psychotherapy, instituted a series of lunchtime Mental Health Forums attended by local ministers who met with the psychiatric staff responsible for patients from each of the four sectors of the city. Ministers came and talked about their own cases and issues arising from their own pastoral work. I know that many ministers appreciated this dialogue with the medical staff. Not only did they get help with their own difficult cases, they learned from the cases presented by colleagues in ministry.

Those familiar with the work of the psychotherapist Michael Balint with GPs will find obvious parallels in Murray's work with groups of ministers, which are not merely coincidental.

Another important initiative on Murray's part was the formation of the Ministry and Psychotherapy Group, a group of people in ministry who met regularly to explore the relationship between the two disciplines, important in itself. Out of this sprang another development which was to become even more important for some ministers. The Guntrip Trust was set up to enable ministers and priests of all denominations to use the facilities of the Scottish Institute of Human Relations both for therapeutic and educational work. None of us who were Guntrip Trustees knew who benefited unless they told us themselves but I know people now making significant contributions to ministry in Scotland have availed themselves of the resources of the Institute.

I want to mention three further contributions from Alastair Campbell which enriched the development of pastoral care and counselling in Scotland. First of all, Alastair was instrumental, along with Peter Bowes (then Minister of Morningside Baptist Church) and myself in setting up the Pastoral Foundation at Holy Corner. This is a story in itself but its development was shaped by the appointment of the first Director, Jean Morrison, a Deaconess of the Church of Scotland. Jean brought many gifts to this work. Significantly, growing out of her work with Dr Archie Mills, her theoretical perspective was that of Transactional Analysis (a model which was also central to the work of the Group Relations Unit of the Church of Scotland). The work of Archie Mills, particularly in his ministry to ministers, deserves a much fuller account than is possible here – if indeed such an account is possible. The Pastoral Foundation began to offer both counselling and training in counselling. It is important to note that, in common with most of the training in pastoral counselling in Britain, the main constituency for this training was among lay people and not among clergy.

Secondly, because of his involvement with the development of pastoral care and counselling both in the UK and Europe, Alastair was instrumental in bringing the First International Congress on Pastoral Care and Counselling to Edinburgh. During a very wet August in



1979, 400 people, all specialists in the field, gathered in the Pollock Halls. Again much more could be written about this event. There were people from every continent; there were about 60 people from the United States, drawn both from pastoral counselling and CPE; many of the representatives from other countries had studied in the US and developed approaches heavily influenced by their American experience. Yet there were also many people present who brought with them more traditional understandings of pastoral care and that tension between traditional approaches rooted in the pastoral ministry of the church and more ‘professional’ approaches was evident in subsequent congresses held every four years since then. It is worth noting that besides these quadrennial international congresses, Edinburgh 1979 saw the beginning of continental networks in Europe, Asia, Africa and Latin America.

Thirdly, Alastair was editor of *Contact* from 1970–74. This journal has always been one of the main platforms for conversation in pastoral care and counselling. In 1971 he published a paper by Robert Lambourne which I believe shaped the development of pastoral care and counselling in Britain. Lambourne was a medical doctor who pioneered pastoral studies in Birmingham just at the time when the discipline was taking off in Britain. I mentioned earlier the excitement of the late 1960s when new British pastoral organisations were being formed. As the Association for Pastoral Care and Counselling found its feet there was an expectation that it would move from being a forum for the sharing of experience into a national organisation which would accredit individuals and organisations. At this point Lambourne intervened with his paper in *Contact* which he entitled “Objections to a National Pastoral Organisation” (Lambourne, 1971).

Lambourne argued that to copy the American model in Britain would be a disaster. He argued that what was needed in Britain was an approach which was ‘lay, corporate, adventurous, variegated, diffuse’. To understand where Lambourne was coming from, we must look at earlier paper he had written. In “With Love to the USA” (Lambourne, 1970), while admiring much in the American scene, he reacted negatively to some aspects of it. In particular, he noted an approach to pastoral counselling totally divorced from its social and political context, for example in depressed urban areas; he noted a highly

professional hospital chaplaincy, built largely on psychotherapeutic models but with nothing to say about emerging issues in medical ethics and with no prophetic voice about the structure of health care delivery; he deplored ‘the separation of the theory and art of loving from the theory and art of justice’. In many ways this echoed the critique of James Dittes regarding ‘the seduction of relevance’, for this was psychotherapeutic relevance bought at the cost of prophetic relevance.

I have always been fascinated by this paper. My question is whether Lambourne really did shape the development of pastoral care and counselling in Britain or whether he merely reflected a peculiarly British approach to professional life in general and ministry in particular: understated, gradualist, with a natural distrust of professionalism – or at least a certain kind of professionalism. Certainly, as I indicated, the development of pastoral counselling in Britain has been largely a lay movement. As far as training in pastoral care for clergy is concerned, I think our achievements have been real but limited. Arguably the development in Britain and Scotland has been variegated and diffuse and it may well be that my paper reflects these qualities. How far it has been corporate and adventurous depends upon how you understand these terms.

As I come to the end of this paper I realise that I have not said anything about one of the central themes in my own teaching and writing (Lyll, 2001), and that is the actual relationship between theology and pastoral care. That may be because in the endeavour to develop the practice of pastoral care, counselling and the necessary training, theological issues have not been central. Perhaps we need to look to the most recent developments for this to emerge. Last year saw the formation of an organisation which is addressing the issue of accreditation in the field of pastoral supervision, namely the Association of Pastoral Supervisors and Educators. Increasingly, people in ministry have been realising the need for competent supervision for their ministry, and in certain areas of publicly-funded ministry such as hospital chaplaincy it is becoming a requirement. Accordingly, this organisation has been set up to train and accredit competent supervisors. There are two phrases in the constitutional papers which are I think central. It is argued that pastoral supervision

must be ‘psychologically informed’ and ‘theologically and spiritually rich’. Perhaps pastoral care and counselling, and pastoral supervision are moving on to a newer and deeper maturity in which the voices of both psychology and theology may be heard. It may well be the task of the Theology and Therapy project to nurture us on the next stage of the journey.

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