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A table of contents for *The Churchman* can be found here:

https://biblicalstudies.org.uk/articles_churchman_os.php

reality of God. He gives a review of psychological methods of healing, but points out that medical psychotherapy has as many failures as successes. This raises the question as to how many of these failures "split on the sunken rock of religion". It is here, he maintains, that Christian psychotherapy has its opportunity, "a therapy which starts from the fact that behind it is the healing power of Christ . . . which never loses sight of its purpose of leading a man's soul nearer God . . . to touch his maladjusted life to the finer issues of loving his neighbour and loving his God . . .".

Altogether it is a fine book and should not only find a place in the library of every Theological College but should find a prominent place in the course of Pastoralia. The ordained man with some experience of 'lives disordered and souls inhibited' will readily perceive its value, and those who pursue the course of reading outlined in this review will find that Murray will help them to sort out their varied impressions and mass of information into a well-planned and orderly system.

BOOKS MENTIONED ABOVE :

- About People*, by Dr. Herbert Gray (S.C.M. Press, 3/6).
Psychiatry and Mental Health, by Dr. J. R. Oliver (Scribner, 12/6).
William James, edited by Margaret Knight (Penguin Books, 1/6).
Psychology of Insanity, by Bernard Hart (Cambridge U.P., 6/-).
Psychiatry To-day, by David Stafford Clark (Penguin Books, 2/6).
Pastoral Psychology, by Wm. Goulouze (Baker).
Pastoral Psychology, by Göte Bergsten (Allen & Unwin, 15/-).
The Individual and His Religion, by Gordon W. Allport (Constable, 12/6).
Nervous Disorders and Religion, by J. G. McKenzie (Allen & Unwin, 9/6).
Psychology, Religion and Healing, by L. D. Weatherhead (Hodder & Stoughton, 25/-).
The Psychology of Sex, by Oswald Schwarz (Penguin Books, 1/6).
The Mastery of Sex Through Psychology and Religion, by L. D. Weatherhead (S.C.M. Press, 7/6).
Men, Women and God, by A. Herbert Gray (S.C.M. Press, 4/6).
An Introduction to a Christian Psychotherapy, by J. A. C. Murray (T. & T. Clark, 12/6).

Pastor-Psychologist

The Value of Psychology in the Pastoral Office

BY THE REV. R. H. VOKES

THERE is a growing and welcome acceptance to-day of the idea of the parson-psychologist. Yet it is only a few years ago that the medical world cold-shouldered the clergyman without medical qualification who tried to enter the psychological field; nor was he more sympathetically received by many of his own colleagues in the ministry. The former looked upon him as a quack and a charlatan, whilst the latter would often accuse him of being side-tracked from the real work of the ministry, and even of preaching "another gospel".

Let it be admitted that neither criticism was always and altogether without justification. Medical psychologists had every reason to

dismiss with contempt the "psychologically-minded parson", who, with no other qualification than having read a few popular books about psychology, dabbled with the therapy of mental conditions far beyond his ability. Spiritually enlightened laymen and clergymen alike rightly viewed with horror the spectacle of the pulpit becoming a platform for the dissemination of psychological theories and opinions in place of the exposition of the Word. Moreover, all too often the parson-psychologist was a theological modernist who denied many of the doctrines of orthodox Christianity, and cast doubts upon the objective reality of much Christian experience. In addition, he often appeared to take a light view of sin, and an exalted view of human nature. Such a presentation of psychology became indeed "another gospel".

To-day the medical psychologist is becoming increasingly aware of the fact that in dealing with the whole personality of man he is not concerned merely with a body-mind relationship, but with the three-fold relationship of spirit, mind and body. With this awareness has come the realization that the clergyman with psychological insight and knowledge can at least be a valuable ally in the therapeutic field, and may indeed in some cases be far better equipped to deal with the situation than the medical psychologist without theological training, and perhaps without spiritual insight or religious faith.

On the other hand, the acceptance of psychology as a science, and its espousal by more conservative Christians, who have demonstrated its usefulness for the furtherance of the Gospel, have done much to win for it a friendly attitude from all but the most prejudiced and ill-informed amongst Christians.

The present writer is one who has had a complete *volte-face* in this matter within the past decade, and has been led, at first quite unwillingly, but later with growing appreciation, to see what a vast field of opportunity is opened up for the pastor of Christ's flock who can apply a real knowledge of psychology to the needs of his people. During the early years of my ministry I had scoffed at many of the findings of psychology, and looked upon it almost as an enemy of the Christian faith, not realizing how much of my opposition was based on prejudice and ignorance. The transition period began when I came up against a case of severe psycho-neurosis. This woman had been unable to lead a normal life for some years, and the only treatment she had received was from Christian Science practitioners. I became interested in her case, and began to apply some of the scanty psychological knowledge I then possessed, and, somewhat to my surprise, found that I was helping her. I read more psychology in an effort to understand her condition, but the case was, of course, utterly beyond my ability. Eventually I was able to persuade her to see a medical psychologist. Alas, he too was unable to do much for her, and she was little improved when I left that part of the country. Looking back to it now, I can see that we both failed because, whilst I lacked the psychological knowledge that would have enabled me to treat her condition, the medical psychologist was a materialist who was quite unable to help her on the spiritual plane. We might have been able to do something for her if co-operation had been possible, but whilst he warmly commended my analysis, he answered my questions by

saying, " I cannot discuss the practice of medicine with a non-medical person ". I had not wanted him to, but only that he should have given me guidance as to how I could best help her from my own angle. How different is the attitude to-day, when I find willing co-operation the rule rather than the exception.

Obviously the ideal would be that workers in this field should be fully qualified to deal with the spirit-soul-body relationship. But the Pastor-Psychologist-Doctor is of necessity a rarity, for few can afford the time or the cost of qualification in all three spheres. The remedy would therefore appear to be co-operation ; the medical psychologist, even if he has (as he should have) spiritual insight and robust faith, realizing that in many cases he will need the help of a trained pastor to deal with spiritual aspects of his patients' needs ; and the pastor-psychologist realizing that it is essential to work in very close co-operation with the doctor. Nor must the pastor-psychologist ever forget the narrow limits within which he must work in this field ; his sphere is properly in dealing with anxiety states and conflicts (the neuroses), whilst psychotic conditions (i.e. insanity) are strictly the concern of the medical psychotherapist. With this in mind we will proceed to examine some of the ways in which the pastor will find the knowledge and practice of psychology of value to him in his work.

I

Understanding One's Flock

Possibly the least sensational, but by no means the least valuable, contribution which an adequate knowledge of psychology will bring to the pastoral office is an increased understanding of one's flock. It will save the sensitive parish clergyman much irritation, and not a little heart-break, if he can discover the underlying causes for Mr. Brown's consistent and aggressive opposition, for Mrs. Jones's acid tongue, and indeed for Miss Smith's adoring adulations. Moreover, given the right circumstances, he may well be able to help Mr. Brown and Mrs. Jones, and even Miss Smith, with surprising and gratifying results.

The psychologically trained parson will make allowances for the differences in emotional and mental make-up in the members of his flock. Often he will be able to help them by providing the means of sublimating instincts, feelings and emotions which would otherwise, because of the circumstances of the individual, have to be denied expression, with consequent strain. We hear so frequently in these days of the need of sublimation of sex desire in the unmarried, that this will probably come immediately to the mind of the reader in this connection. But it is not only sex which needs sublimating. The pastor-psychologist who has tried his powers of analysis first of all upon himself will have found, no doubt to his great discomfort, the evidence of the existence of all manner of instincts and desires which, although suppressed, show themselves in a very real manner from time to time. He will realize that this is the common experience of mankind, and he will be quick to notice when, in some member of his flock, such suppressions are causing strain, or are finding expression in undesirable ways. His advice may not be welcome (although where it

is it will be of value), but quite unknown to the person concerned he can often devise ways and means of turning such activities and traits into good and useful channels. The simple, well-known, and often dramatically successful case of the troublesome boy in an organization or class being given a position of leadership and responsibility in order to turn his instinct for aggressiveness or self-display to good effect, is an elementary example of this. But such methods if used wisely and with knowledge will not only save some from real agony of mind, but in other cases will prevent more serious symptoms, and perhaps the so-called "nervous breakdown".

In the pulpit the pastor will find psychology of value not by filling his sermons with psychological jargon or illustrations (of which he should beware), but in analysing his own motives and reactions, and in understanding the different psychological atmosphere of a crowded congregation and a small group. He will be well aware of the increased suggestibility and emotion which is manifest in a crowd. He will be able to use it, but he will also be aware of its dangers and limitations. It may be well to point out here that the focussing of attention upon the preacher in his pulpit is in itself a powerful aid to suggestibility, and that when this is increased by the dimming of all or most of the lights in the church with the exception of one focussed upon the pulpit, the effect may be so powerful as to induce a state of mild hypnosis.

An ability to distinguish different psychological types, and the understanding of character-patterns, will obviously be of tremendous help to the pastor in selecting leaders for different kinds of organizations. To make the above-mentioned Miss Smith into a parish visitor might be courting disaster, whilst to give her a class of small boys to "mother" might, especially if the boys came from loveless homes, prove to be the making of her and of them. The tragic appointment of a boys' leader who is later found to have led his lads astray by homosexual practices, is less likely to be made by the pastor-psychologist, who will more easily spot the danger signals before the damage is done.

II

Preparing the Way for Conversion

One of the criticisms often levelled against the parson who practises psychology is that his real job is to preach the gospel, and that the evangelical experience of conversion will do more than any psychological treatment for troubled, anxious, and even neurotic people. Let it be said at once that there is a great deal of truth in this assertion. The preaching of the gospel, both from the pulpit and in everyday intercourse with his people, is the primary duty of the pastor. And conversion will undoubtedly do more than anything else to relieve anxious and burdened souls, and will clear up many neurotic states and resolve many complexes. The clergyman who substitutes psychological theories and practices for the preaching of the gospel will make a bad psychologist and a worse parson. But every shepherd of Christ's flock knows that souls are not easily won, and that often much painstaking work has to be done before the person concerned is in the right condition of mind, as well as of heart, to receive the gospel

message. This is markedly true in many psychological conditions. The aim of the pastor-psychologist must always be to bring his patients to Christ. He will never be content with just clearing up some psychological condition, without seeking that "wholeness" which is only to be found in a saving knowledge of Christ.

That is where the materialistic psychologist (which should be a contradiction in terms) fails so badly and tragically. All too often his patients are left cured in mind, but without any improvement in their spiritual condition, and frequently they are robbed of whatever spiritual faith they once had. This alone should be sufficient to prove the need for those who can and will combine the offices of pastor and psychologist.

I have known cases where the acceptance of the Christian message of free forgiveness in Christ has liberated people from "nervous" disorders and anxiety states without any psychological knowledge having been applied. Yet equally I have known people who for years have been "under the sound of the gospel" and have not been able to respond until the complexes and inhibitions which bound them had been resolved.

A case in point would be that common to the experience of most clergymen, of the person who supposes that he has been guilty of the "unforgivable sin". Anyone who has tried to deal with a chronic case of this nature knows how impossible it seems to get the sufferer (for he is a sufferer) to grasp even the plainest and most straightforward declarations of the willingness of God to forgive him. This is because such an approach does not get down at all to the real cause of his trouble. Text after text may be expounded to show him that the sin to which he confesses is not the one to which Christ referred as unforgivable; but still his mind will tell him that his condition is hopeless. It is only by getting right down to the experiences, probably now buried in the unconscious, that gave this "twist" in his mental attitude towards his sin, that he can be truly helped. And that is the sphere of the psychologist. When his real trouble has been dealt with, then he will be free to respond to the gospel message, which probably he has desired to do for a long time.

In the same way I have found people with anxiety states and conflicts which seemed to inhibit any spiritual decision, or yielding to the claims of Christ, until they were cleared up, and then the moment of the acceptance of the grace of God has come, and conversion has completed the work begun, and transformed that person's life and character.

III

"Liberty to the Captives"

It is undoubtedly in the realm of individual case work that the chief interest of the pastor will be found. Despite disappointments and failures, and cases beyond his ability, if he has any aptitude for this work at all, he will find much to encourage him, and amply to repay all the labour and study involved. Many popular books have been written (as, for example, the smaller works of Dr. Leslie Weatherhead) which give interesting accounts of people helped to health and faith by

psychological methods. Such books are not intended to give a working knowledge of psychology, but they serve a useful purpose in arousing interest in the subject, and by showing the good results which can be obtained by the skilled pastor-psychologist. Within the confines of an article such as this, and from my own more limited experience, it would be impossible to do more than suggest a few of the ways in which the pastor can use psychology to help him to bring "liberty to the captives".

In his own parish or congregation every clergyman will have those who are suffering from more or less severe anxiety states. If he is able to help them and to relieve their distress, he will find that it will not be long before others are coming to him from further afield. He will be asked to help those who are depressed and frightened by feelings that they cannot understand, and from which they have been unable to obtain relief. They will quite likely have gone to their doctor who has told them that they have nothing at all the matter with them, and been given a bottle of tonic and told to "pull themselves together". Fortunately this type of doctor is becoming rarer, but there are still far too many who will give this advice in cases where specific psychological treatment is necessary.

A year or two ago a young man from another part of England was referred to me who had been suddenly overcome by a deep sense of depression and fear. Because of the distance I had to deal with him almost wholly by correspondence. He wrote that the worst thing about his condition was that he was afraid without knowing of what he was afraid. Yet the fear was so great that he could not bear the thought of going to work, or even to let his wife go out of his sight. He had recently had a difference with his employer, and had resigned from his job in the confident belief that another and better one was open to him with another company. To his amazement and dismay he was turned down by this other company. He returned to his old employer who kindly took him back again, but in a different and less congenial position. He had hardly started work again before the depression and fear became too much for him, and he was unable to go on working. He went to his doctor, who gave him the advice which I have deprecated above. After some lengthy correspondence I suggested to him that he should get his wife (a trained nurse) to help him to try to recapture by the method of free association any occasion in his childhood when he had felt that same sense of fear. The result was almost startling. He very quickly recalled an incident when as a child he had awakened in the late evening and called for his mother, but had obtained no answer. He got up and went downstairs and found the house empty. Actually his mother had only gone out on a brief errand and returned almost at once, but in the interval he had been filled with this same sense of fear, which he now recognized as a feeling of insecurity. He was now able to see that when his confident hopes of another job were unfulfilled and he realized that he was out of work and had a wife and family to support, that this same feeling of insecurity had swept over him, and had been unconsciously associated with his childhood experience, and he had felt again his childish fears. He now knew of what he was afraid, and the fear promptly left him,

and he was able to return to work. More than that, during his illness he had found his wife's Christian faith a great help to him, and she had been able to persuade him to commence to attend church. When I last heard from them he was still attending regularly.

Frequently physical symptoms and mental distress alike arise from specifically spiritual conflicts. A young civil servant who had been away from work for some months with continuous prostrating headaches was advised by her doctor to get away for a change of air. She had tried this previously without any improvement, but this time she came to stay with her aunt who lived in my parish. The aunt knew of my interest in such cases, and asked if I could help. She was only here for a fortnight, and it meant my seeing her almost daily during that time. It soon became apparent that the headaches (which a doctor who examined her for me assured me did not arise from any organic cause) were symptomatic of a deep-seated spiritual conflict. She had been brought up in an extremely rigorous Calvinistic denomination, and although she had left home, she had continued to attend a chapel of the same denomination and teaching, whilst indulging during the week in such forbidden pleasures as philharmonic concerts and oratorios! She admitted that whilst she felt that the restrictive views she had been taught were wrong, she nevertheless was conscious of a sense of guilt whenever she attended anything of this nature. But this was not the full extent of the conflict. She was deeply troubled as to her spiritual standing, but felt that there was nothing that she could do about it, as she had no reason to suppose that she was one of the "elect". By the grace of God I was able to lead her during that fortnight into both the assurance and the liberty which is in Christ Jesus. The headaches ceased, she returned to work, was helped further by an evangelical vicar to whom I was able to commend her, was eventually confirmed, and did not lose another day from her work on account of headaches. She resigned a little while ago to enter into training for the Mission Field. This was a case where little specifically psychological treatment was necessary, but where the gospel message itself was the key to the situation. But it must be remembered that it was only by the psychological analysis of her condition that the underlying spiritual conflict was disclosed.

Without necessarily becoming a Freudian, the pastor who takes up psychological studies and work will quickly discover that sexual disharmony is a very big factor in many if not most of his cases. It may come as something of a shock to him to discover how much sexual frustration, incompatibility, disorder and ignorance there is, and that this disharmony is to be found as much among Christians as in the outside world. It is not likely that he will have much to do with sexual deviations bordering on the pathological, although an occasional case of this nature may well come his way. But he will be able to give sound advice to parents regarding the sex education of their children, and to married people and those about to enter into matrimony concerning the achievement of harmony in their physical relationships.

Untold harm has been done in the past, and is still being done, by clergymen who take it upon themselves to warn boys in their confirmation classes and church organizations of the supposed dire results of

masturbation. It is inexcusable in these days, when accurate information on this subject is easily available, for clergymen to tell boys that this childish habit will lead to blindness, disease or insanity. For every boy who is prevented by these methods from commencing the habit, many more will be put into a needless agony of mind which will only protract the period during which masturbation is a problem. The pastor-psychologist will be able to give real help in such cases as may need advice, and the information he imparts will have the added virtue of being true.

Anxiety states and mental conflicts often give rise to compulsive acts which may vary from harmless habits such as touching every lamp-post when walking down the street, to a neurosis in which the sufferer will feel compelled to inflict physical pain or disfigurement upon himself or others, or even to perform anti-social acts or morally to misconduct himself. This obviously raises major problems of a theological and ethical nature into which I cannot enter here. Suffice it to say that I am convinced that many a man or woman convicted in the courts, or condemned by public opinion, is mentally ill and in need of treatment rather than punishment, and of sympathy rather than ostracism.

The case which in my own experience best illustrates this compulsive power is too complicated, and the causes and cure too lengthy to describe here. Let it be sufficient to say that she came to me a broken woman, "sick in mind and body", to quote her own words, with her marriage wrecked, and without hope for the future. To-day she is doing wonderfully well nursing in one of our great hospitals, and bearing a grand Christian testimony among nurses and patients. The Matron wrote to me, "It is wonderful to see her 'shining' face, and quite unconsciously she helps me at times by her example and simple faith". Yet for over a year this same woman had been so tortured in mind, and was so much at the mercy of compulsive powers within her, that her best friends despaired of a return to normality. Only by painstaking analysis and by patient pastoral and psychological care was her mind set free, and her willing heart opened to the Saviour. For such results all the effort of study, and the physical and mental weariness involved in wrestling with the problems of troubled minds, are abundantly worth while.