

Review

Pia Matthews, *Ethical Questions in Healthcare Chaplaincy: Learning to Make Informed Decisions*. London: Jessica Kingsley Publishers, 2018, 190 pp (Pbk). ISBN 978-1-78592-421-7, £19.99.

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Dr Pia Matthews is a Senior Lecturer of Bioethics, Medical Law, Theology and Healthcare Ethics at St Mary's University, Twickenham. Over ten closely argued chapters she – as the subtitle to the book suggests – helps us learn to make informed decisions in the area of Health Care Chaplaincy. It continues the excellent series of books from Jessica Kingsley Publishers that relate to this subject.

Her approach is a very helpful case study led one. She takes a situation, explores it, draws out the possible ethical issues and looks at ways that a chaplain might respond. This is a useful approach; as well as showing the value of the chaplain, it invites the reader to pause and reflect about how they might respond in a similar situation. The issues are so well thought through that they have a direct relation to everyday practice; consequently she eschews simplistic answers in this easy to read book and shows us the plurality of ethical approaches within healthcare. She also draws out the helpful insight that it is also “perhaps more significantly, about the kind of person the chaplain is” (p. 12).

Some books on healthcare ethics can be impenetrable to the newcomer; especially one without training in ethics, so the author sets out a possible way of approaching an ethical issue by “See”, “Judge” and “Act” which is helpfully explained within the introduction. She also uses the acronym “POETRY” (Prayer, Observation, Engage, Time, Remember) to help the chaplain think of the sacred space between the chaplain and the client. Whilst a surface reading may see these as simplistic, they are a very helpful way to begin to navigate the sea of ethical challenges and she uses them within each chapter.

After an opening chapter on “The Basics”, there are a further ten chapters on ethical issues in relation to the dignity of the human person, autonomy and consent, non-autonomy, confidentiality, the beginning of life, children and young people, end-of-life, burn-out and conscientious objection. All examine complex issues but are both written with clarity and thought provoking. Complex language is avoided without over simplifying the issues which makes reading and reflection easier.

I found the book to be so rich, that to offer an in depth review of each chapter would be difficult within such a short space. I want to offer some brief reflection on two chapters that are illustrative of the general approach.

Chapter 2 explores the dignity of the human person using a moving case study of where an elderly person with multiple needs had been treated “correctly”. However, within a very busy hospital environment their basic dignity and worth are seemingly overlooked. The insights of Professor Tom Kitwood on being person-centred, rather than delivering “person-centred care”, are used to show how the chaplain has a primary role within a hospital environment in delivering this kind of care, and a uniquely prophetic one, within today’s NHS. Most experienced chaplains will have seen this kind of case study within even the most well run hospital and will have noted that it is an ever present danger when time and resource pressures are increased.

Chapter 10 on “Loss, Grief and Bereavement, Burn-out and the wounded healer” is a chapter that is timely in the context of the current situation in the NHS. Whilst caring professions carry within them the potential for burn-out, the current pressure to treat more people with fewer resources may well exacerbate this trend. There is wise advice here for chaplains to be aware that they are also there for staff. Chaplains are also alerted to the need for self-care which is something that can often be neglected. The paramount role of supportive team meetings and clinical supervision is helpfully stressed. One quote in this chapter is illustrative of the general approach of the chaplain:

‘When a person shares their story of loss and grief, the response of the chaplain can only be a respectful listening. No “fixing” by the professional, because these are stories of brokenness and sorrow, of how loss has changed and unravelled the pattern of daily life’ (p. 155).

This is a very rich resource and is the kind of book that would be valuable both for those contemplating chaplaincy and those who have recently started as chaplains (paid and voluntary). It could also be useful for a chaplain at any stage of their career to read in order to aid their reflective practice

and continuing development. One quibble would be that the “religion” of the chaplain often seems to mean Christianity, although there is an awareness of other religious (and non-religious perspectives) within chaplaincy. Consequently, I would feel that this book would be more helpful to chaplains who are within the Christian tradition. Another would be that the book refers to “healthcare chaplaincy”, yet there is no discussion of mental health chaplaincy. Nonetheless, many of the issues behind the ethical challenges discussed in the book are transferable with a little translation across the whole field of health care chaplaincy. These are minor points in an otherwise excellent book.