

Review

Christopher Cook, ed., *Spirituality, Theology, and Mental Health: Multi-disciplinary Perspectives*. London: SCM Press, 2013, 222 pp. (Pbk). ISBN: 9-780-03404-626-4, £45.00.

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Drawing on a conference of the same title at Durham University, UK, in September 2010, *Spirituality, Theology and Mental Health* comprises reflections from international scholars and practitioners on the nature of spirituality and its relationship to mental disorder and mental healthcare. Chris Cook, who is both Professor in Spirituality, Theology and Health and an NHS consultant psychiatrist, sets out the boundary-breaking interdisciplinarity of the project: academic and professional, healthcare-based, philosophical and anthropological dialogues are facilitated with theology, hitherto “neglected as a conversation partner” (Preface: viii). Chapter 1 locates spirituality and religion in contemporary psychiatry based on the renewed interest in the former within service user movements and the Royal College of Psychiatrists (RCP). Cook usefully frames the influential RCP Recommendations for Psychiatrists and Religion, which he himself was crucial in steering through, and includes the interface of professional and personal (untaught) dimensions, such as empathy and compassion, which are essential and not necessarily the preserve of the clinician or the religious (pp. 15, 17).

Although she does not reference the important work of Linda Woodhead in this area, in Chapter 2 Patricia Casey, Professor of Psychiatry, University College, Dublin, explores the implications for research in being “spiritual rather than religious”. She focuses on measures and interesting tables which increasingly demonstrate this perceived dichotomy to be facile using recent studies by Koenig and others: one of these found 17.7% of a group identified as neither religious nor spiritual, 13.1% as spiritual but not religious, and 69.2% as religious and spiritual; Casey notes that nobody described themselves as religious but not spiritual (King *et al.* 2006: 28).

In a profound Chapter 3, practitioner-chaplain, Colin Jay, presents a counselling-based definition of spiritual care against critiques of its portmanteau valence: it militates against the real differences in religious expression which are inherent in the Equalities Act 2010 and which only give the progressive concept meaning: “spiritual care is best viewed as a quality of relationship or a way of being” (p. 47), a professional, person-centred, mutual, discerning and non-fixing relationship which is open to mystery (pp. 47–54). There was one humbling observation which I warmed to and shared: Jay “had never been prayed for so much as I have since working as a mental health chaplain” (p. 50).

In Chapter 4, Alexandra Parvan, a philosopher and psychologist, takes an ontological Augustinian understanding of evil as a lack, “non-substantial, relational... secondary to and dependent on good” (p. 57), and applies it to the psychotherapeutic process which needs, in her view and because of its traditional shyness around evil, to be more about “loving the sinner (human being) while hating the vice, and loving, furthermore, more than one hated the error” (p. 66). Critiquing a therapeutic view of there being an evil side to ourselves, it is more liberational to consider that naming it as such gives away the power to resist the negativity of non-being: thus free action, controversially, over one’s and others’ behaviours, brings with it responsibility and is a useful “tool for therapists working with trauma victims or clients suffering regular (domestic) abuse” (p. 70). The next two chapters treat the phenomenology of evil very differently.

As a former diocesan adviser in deliverance ministry and the paranormal, Chris MacKenna primarily sees the practice as based ecclesiastically on the reality of spiritual routines of baptism, repentance and faith, resurrection and Holy Communion (p. 76). From here the rationalization of “structural or psychological” evil substitutes ownership or responsibility for the need to see the devil as a “personal being” (p. 77) and this leads to further elaboration on the deficit of purely classificatory psychiatric diagnostics which can be countered by a psychodynamic approach. MacKenna posits an explanation of the story of the Gadarene Demoniac in terms of Jungian sub-personalities of the ego. Speaking of what he sees going on today, he differentiates pastorally between magic as the “manipulation of power” and religion as “love” and the “deepening relationship with God” (p. 82). In the next nine pages, MacKenna helpfully distinguishes requests for exorcism which needed medical help, from those where psychological and spiritual factors predominate, including where a highly educated West African woman self-referred because she “felt possessed by a spirit of a dog”. This was dealt with culturally and spiritually appropriately and analysed in Jungian terms. Both the reality of the paranormal for some, and the impact on children of so-called

exorcistic practices (beating, burning, cutting) due to a cultural belief in witchcraft, are respectively not wholly demystified, and importantly designated as safeguarding matters which must prevent another death similar to that of Victoria Climbié (p. 90). Overall MacKenna recommends a multi-disciplinary approach. In his learned essay, Loren Stuckenbruck, Chair of New Testament and Ancient Judaism, Evangelisch-Theologische Fakultät (aumlaut), Ludwig-Maximilians-Universität (aumlaut please), Munich skillfully and given the duality of Christian and Jewish faiths, presents a clear and detailed systematic portrait of the tradition of Jesus as an exorcist in the context of earlier Jewish, Enochic and Dead Sea Scrolls narratives: in these, demonic powers could be seen principally as out of place and alien to the world as “God has set it up to be” (p. 118). Stuckenbruck sees Jesus’ activity in combatting demonic forces as both “miracle” and reassuringly “realistic” based on those earlier apocalyptic expectations.

The remaining chapters are more philosophical and anthropological in content: In Chapter Seven, “Religion and Mental Health”, Mark Wynn, Professor of Philosophy and Religion, School of Philosophy, Religion and History of Science, University of Leeds, discusses William James’ book, *The Varieties of Religious Experience: A Study in Human Nature*. He introduces kinaesthesia, and another, but this time “fast-approaching dog” as salient in existential experience, to suggest, as I grasped it, that the human and tangible is important in religious meaning-making. This can be formalized in visits to sacred sites but I am not sure that Wynn relates this sufficiently to the theme of community, belonging or the corporate as a protective factor in mental health. In Chapter 8 Christopher Cook usefully considers concepts, models and practices of immanence and transcendence drawing on various sources including Charles Taylor, to aim at a multi-faith perspective (the lack of which he identifies as a weakness earlier). It is important to fight “closed world structures” CWS (pp. 153) which are restrictedly immanent, and to search for the transcendent inside ourselves. “Self-transcendence, interpretative transcendence and transcendence therapy” could be means to achieve this because they do not presuppose religious exclusiveness: Muslims, Hindus and Christians can have meaningful theological conversations around mental health using this vocabulary.

In Chapter 9, “Thriving Through Myth”, Douglas Davies discusses the ambiguity of myth in relation to challenges to faith, children’s views of Father Christmas, Geertz and, again, William James’ work. He draws attention to spirituality as a contested concept in NHS chaplaincy and the new discourse in palliative care around religion and, post-Liverpool Care Pathway, ranges across the place of various faiths, especially Buddhism in this. Davies interestingly concludes that the word “thrive” derives from the Old

Norse, “to grasp for oneself”; he relates this to the self-humbling of Christ in Philippians 2 (Bible). He infuses the “ethics of sacrificial relations” with an element of hope in the sense of well-being generated from an awareness of one’s proximate realization of ultimate truth (pp. 175–76).

In “Spirituality, Self-Discovery and Moral Change”, John Cottingham, Professorial Research Fellow from the former Heythrop College, is richly systematic (Augustine, Descartes, Freud and Jung) and draws together the disciplines of psychological and spiritual praxis to offer ways to a more abundant and integrated life; Simon Podmore from Liverpool Hope University provides a deep and learned christological and existentialist meditation in “My God, my God, why have you forsaken me?” (Chapter 10).

In the final section the editor integrates the multifarious strands of this fascinating collection, summarizes themes and comments on both the inappropriate crossing of professional boundaries in relation to spirituality and clinical practice and the need thus creatively to cross disciplinary boundaries to think more positively about mental health. He references Rowan Williams rightly to position the collection in the mainstream of theology, rather than belonging to a contextual theology sub-set, and concludes with an apt quotation from Matthew 25: an encouragement to “follow Christ” in working across uncomfortable borders and with the vulnerable in one’s praxis.

This deeply impressive and unmissable set of studies stimulates thinking on many levels. The slim volume should be on every chaplain’s, and certainly mental health chaplain’s bookshelf and will be of interest to the multidisciplinary group of practitioners to whose thinking and experience the subject-matter relates.