Review


Reviewed by: Chris Swift, Director of Chaplaincy and Spirituality at MHA
Email: chris.swift@mha.org.uk

This important book addresses the context of chaplaincy in the critical context of a dynamic and evolving professional identity. It does this by drawing together 23 chapters authored by an international collection of leading figures in health and social care chaplaincy. With notable practical theology credentials in the editorial team, the approach taken is a correlation between practice and theory. Written before the COVID-19 pandemic, the urgency of the questions asked in this volume have only become more pressing.

The introduction sets out a challenge for chaplaincy, not only to be a source of pastoral care for the sick, but to be a location and advocate of a different way of thinking about health. There is little to disagree with this analysis, but there is a major “how?” implication for a professional group which is small, amazingly diverse and spread very thinly within health and social care settings.

The chapters are divided into eight sections, designed to lead the reader through the various areas of concern which are the focus of the volume. The first section foregrounds the role of the chaplain in facilitating people’s stories. This fidelity to the experience of illness is conveyed across three chapters in the first part of the book. The authors draw on research and case studies to articulate what it is that people accessing chaplaincy care are seeking.

The second section addresses the identity of chaplaincy as a science or an art. It begins to elucidate the epistemological foundations of its practice and relate this to the powerful medical paradigms in which it is set. One of the strengths of the book is the freedom allowed for chapter authors to reflect in their style of writing the nature of the content under discussion. For Daniel
H. Grossoehme this includes an element of spiritual autobiography, and for George F. Handzo and Steve Nolan the chapter is in the form of a dialogue.

The third part of the book interrogates the question of what it means for chaplaincy to be a healthcare profession. Here, Anne Vandenhoeck’s chapter not only describes the problems of professionalization, but also sets out a plan of action based on learning from the Flemish context. This approach deserves careful attention, as chaplains are often weak in their political awareness and slow to either define or organize a campaign of action. John Swinton’s chapter locates the challenges with clarity, especially the realignment of chaplaincy from faith-group identification to being an integral part of health services. He goes on to explore the implications of this shift.

Following the exploration of chaplaincy’s professional identity, the fourth section follows naturally with the consideration of research and evidence. Here, George Fitchett describes a number of important drivers for developments in spiritual care. As electronic patient records have proliferated, they have been accompanied by fresh questions of purpose, impact and taxonomy. Fitchett recognizes that the development of an evidence base for chaplaincy is at a very early stage.

Having directed its attention at the chaplain, the fifth part of the book marks a shift to an exploration of chaplaincy as a broader influence in the healthcare community. In many ways, this topic cannot be disconnected from the foregoing chapters, as the credibility of the chaplain’s role, distinctiveness and expertise play a part in the extent to which their voice can be heard. The authors in this section focus on values and the sense of community in an organization. Kenneth J. Donaldson and Ewan Kelly discuss “Values Based Reflective Practice” in this context and its potential to be transformative. Carlo Leget concludes the section with a discussion of one tool, reframed from medieval times, which has proved transformative in end of life care in the Netherlands.

The sixth part addresses the practice of spiritual care. Two of the chapters illustrate what Swinton refers to in his introduction as “a tartan thread” running throughout the book. It is to the credit of how this edited work has been constructed that it balances a set of international authors alongside a strand of writing from the context of Scotland. Here, there is a taste of innovation and the kind of re-engineering of chaplaincy practice that aims to address the nuts and bolts of spirituality in contemporary care. It is an encouraging and informative set of chapters.

With respect to this point, one of the themes in the book is the need for a clear, effective and agreed framework for chaplaincy training. In the seventh part, this is addressed to some extent in an approach to the “use of self” and to chaplaincy education. The UK situation in this regard is
unusual, as clinical pastoral education (CPE) is almost entirely absent. In other contexts, it is the fundamental gateway to all forms of recognized chaplaincy. For the United Kingdom at least, the absence of agreed training and authorization is a serious weakness and the chapter here makes that case crystal clear.

The final section understandably looks to the future. The primary need identified in these two chapters is strategic leadership. Building on the scholarship which precedes them, the authors imply a risk that failure to coordinate and collaborate – especially internationally – will deny chaplaincy the opportunity to play a bigger part in shaping health and social care.

In reaching this conclusion, Cheryl Holmes and the editors are in a familiar place. Identifying the issues and possibilities is one thing – reaching the kind of future they describe is another. Yet chaplaincy will never have a hope of getting there without the kind of analysis and thought contained in this book. It would be interesting to see how the experience of chaplains during the pandemic has altered the balance or content of any of these conclusions.

In *Chaplaincy and the Soul of Health and Social Care* readers will find an erudite and engaging set of chapters. They are all worth reading, and the collective effect is structured to lead the reader through a progression that enables the ambition of the editors to relate practice and theory. Stephen Pattison’s foreword recognizes the considerable skill in achieving this result. Given that the book illustrates the diversity and eclecticism of chaplaincy, the work of the editors to organize every contribution into a coherent framework is impressive. It is an important book, which will reward chaplains (and others) to read.