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Is Pastoral Theology Still Relevant in an Age of Modern Psychology?

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Introduction

This article discusses the relevancy of pastoral theology in an age of modern psychology. Today, people searching for relevancy and meaning in life find themselves in a matrix of developing and increasingly complex worlds of technological and scientific information. In such an information-saturated time, persons are challenged to live healthy holistic lives discerning meaning and purpose within that matrix of ideas and ideals. Human beings and human nature are consistent in their search for the ultimate meaning of life (Utazi, 2012). The article clarifies the inquiry and defines the disciplines of pastoral theology and psychology. While both disciplines help people find meaning in life and with their search for solutions to life’s challenges and questions, pastoral theology and psychology are two distinct disciplines aimed at different outcomes.

Pastoral theology came to be more therapeutic, rather than pastorally grounded in the nature of God for soteriological, eschatological, ecclesiastical purposes which inspire reconciliation to God, self, others, and ultimate healing. By discussing historical developments and insights, identity of social and cultural shifts, the authors show how these factors influence the practice and defining roles and trends of pastoral theology and modern psychology. These are inclusive of pastoral and spiritual care and pastoral counseling and are designed to assist with finding solutions to the existential concerns of individuals, family groups, and communities. Finally, the exploration of competencies and ethical requirements of the disciplines and individual practitioners are discussed and support the integrity of each discipline sustained by the expertise each professional brings to their respective disciplines.

A. Is Pastoral Theology Still Relevant in the Age of Modern Psychology?

Despite the fact that today we live in an age of rapid development of science and high technological achievements, vast communication abilities, and economic growth, people are still searching for the ultimate meaning of life (Utazi, 2012). However, there still exists in our world existential situations as well as developmental and situational crises, all of which create situations of suffering and injustices that neither science, technology, nor reason can provide full solutions (Utazi, 2012). Though there are many diverse strategies that may assist to address those, pastoral theology has been observed to provide meaning and care in the midst of difficulties and crisis situations toward the forming a communal identity.

The distinctive character of pastoral theology as a discipline is its attempt to understand the ministerial role from the lived experience of people. Pastoral theology is not an abstract understanding of God detached from the tapestries and fibers of life's experiences. Pastoral theology is a living and organic theology that shapes and informs everyday experience (Utazi, 2012).

Pastoral theology is that field of theological knowledge and inquiry which brings the shepherding perspective to bear upon all the operations and functions of the church and the minister, and then it draws conclusions of a theological order from reflection on these observations. It is an operation-centered or function-centered theology, which begins with a situation of suffering and need. It attends to theological questions raised by the practice of care in response to that need, and it brings theological and as well as contemporary knowledge into this question in order to deliver "care" in response to a need (Hiltner, 1958). The particulars of caring for suffering congregational bodies are central to this application of Hiltner's understanding of pastoral theology (1958).

Oden (1983, p. xii) reports that pastoral theology as a unifying discipline was flourishing a century ago and remained robust until the beginning of the 20th century, yet it has largely faded into such hazy memory that none of its best representations are still in print. Throughout the 20th century, there have been attempts for revising pastoral theology (Graham, 2006, p. 845). The shift to view pastoral theology through the lens of postmodern thought stems from the

transition from modernity to postmodernity (Graham, 2006, p. 846). It was Oden's hope in 1983 to "hammer out a rudimentary pastoral theology half as well as any of a dozen that were available a century ago" (p. xii).

Today, pastoral theology is now experiencing a shift of paradigms from modernity to postmodernity (Graham, 2006). This is evident in the following statements:

The present state of pastoral theology is a strong and vigorous one. Its range of interests has been widening since it got off to a new start in the years following Vatican II. Its subject took on a new life and meaning and the response became prolific. Its importance is substantial to such demands as sustaining and giving support to the weak, comforting and understating people in crises. Pastoral theology in the person of the minister also guides and helps people to find solutions to various problems and life's questions, healing and aiding them to find wellness; and reconciling people to restore relationships (Utazi, 2012, p. 9).

Thus, the practice of pastoral care has been central to the disciplinary identity of pastoral theology (Graham, 2006).

Psychology is the discipline that guides and helps people to find existential meaning and solutions to various problems and to life's ultimate questions. Historically, psychology has been described as having "a long past but only a short history" (Ebbinghaus, as cited in Pastorino and Doyle-Portillo, 2012). Although psychology did not formally become a science until the 1870s, people have always been interested in explaining behavior (Pastorino and Doyle-Portillo, 2012, p. 7):

The roots of psychology can be traced to philosophy and medicine in ancient Egypt, Greece, India, and Rome. Philosophers debated whether the mind, or the thinking part of a human, could be studied scientifically; they discussed the nature of the mind and where it was located.

Because of the mind's association with the body, much of what we consider psychology today was traditionally a part of the field of medicine (Pastorino and Doyle-Portillo, 2012). Sigmund Freud studied medicine that focused on neurology and disorders of the nervous system as he formulated the psychoanalytic approach to human behavior, and he is probably the most influential and well-known figure in psychology's formation (Pastorino and Doyle-Portillo, 2012; Plante, 2008). Other than a few classical studies, many early psychologists had never shown an interest in religion (Collins, 1977).

Although, pastoral theology and psychology are two distinct disciplines aimed at different outcomes, pastoral theology is equated by historical practice and is overly influenced by psychological theory and practice (Oden, 1983; Murphy, 2012). In the counseling sense (i.e., pastoral/spiritual care and pastoral counseling), the religious truth becomes the framer and interpreter, and not strictly the clinical considerations. The pastor exercises pastoral theology, which can have psychological similarities, but the primary source for the pastor is scripture and not the therapeutic and clinical frameworks (W. H. Curtis, personal communication, October 28, 2016). Within pastoral theology, there are levels of care and counseling that include pastoral/spiritual care and pastoral (or biblical/Christian) counseling.

So, to answer the question of whether pastoral theology is still relevant in the age of modern psychology—the answer is unequivocally, “Yes”!

While a lot more can and has been said about pastoral theology’s relevance in the age of modern psychology, the authors want to provide enough information for the reader to see how wise it is to see that pastoral theology is certainly relevant. Herein, the authors have several goals in mind, including increasing the awareness of the cultural, individual, and role differences within pastoral theology, pastoral and spiritual care, pastoral counseling and psychology, and how to consider these disciplines when working with individuals, families, groups, and the community.²

B. Literature Review

1. Pastoral Theology

It has been said that pastoral theology is not easily *defined*, but rather *described*, which allows for a fluid and open approach to a theology that has roots in the experiences contained within and outside of its distinct boundaries (Utazi, 2012). Despite the diversity of definitions and descriptions of pastoral theology, there is a consensus on the terms themselves and of the knowledge gained by systematic study.

² For the purpose of this article, the term “psychologists” will be used interchangeably with other licensed clinical mental health counseling professionals.

Pastoral theology is designed to assist the Christian minister in applying the truths of the gospel to the heart and lives of individuals (Murphy, 2013). “It is ‘theology’ because it has chiefly to do with the things of God and his word” (Murphy, 2013, p. 1). It is “pastoral” because it treats of these divine things in that aspect of them which pertains to the pastor, and it is practical because it relates to the work of the pastor who is appointed to influence individuals by applying them to the teachings of the Holy Scriptures (Murphy, 2013). “The term of *pastoral* is derived from the Latin word ‘Pastor’ meaning shepherd, and it thus suggests the work of a shepherd in relation to the priestly pastoral ministry and the care giving to his sheep” (Utazi, 2012, p. 2). Pastoral theology is the science of the care of souls (Drum, 1912/2016; Utazi, 2012). Although an extensive historical overview of pastoral theology is beyond the scope of this manuscript, a brief summary will be provided to assist with understanding the science behind the name and concepts of pastoral theology.

Pastoral theology is a branch of theology that cannot be neglected because of its fundamental relevance and importance to both the church and to society. It bridges the relationship between the church and society (Utazi, 2012). Pastoral theology begins where the other theological sciences leaves off, taking the results of them all and making these results effective for the salvation of souls through the pastoral ministry that has been established by Christ (Drum, 1912/2016). One school of thought states that pastoral theology is a branch of practical theology, a practical science or ministry, with particular attention given to the systematic definition of the pastoral office and its function (Drum, 1912/2016; Oden, 1983).

All branches of theology, whether theoretical or practical, are purposed to “let us [who minister] be regarded as servants of Christ and stewards of the mysteries of God [that He chooses to reveal]” (1 Cor 4:1 AMP). This branch of theology, pastoral theology, presupposes other various branches of theology and is distinguishable, yet inseparable, from exegesis, historical and systematic theology, ecclesiastical history, the sacraments, homiletics, apologetic, dogmatic, ethics, ascetical, liturgics, and psychology of religion (Drum, 1912/2016; Murphy, 2013; Oden, 1983). Although pastoral theology integrates insights from all these disciplines, it is and therefore should be viewed as a distinctive discipline designed to

provide care for the individual through personal experiences and make meaningful contributions to the development of human beings without neglecting their salvation (Oden, 1983; Utazi, 2012). Additionally, pastoral theology should be viewed as a preparation that increases knowledge, skills, and the sacred art of bringing souls to Christ and training them for the glory of God (Murphy, 2013).

Like other branches of theology, pastoral theology has its roots in the Holy Scriptures and in the traditions of the church; these are pastoral theology's first sources. In other words, the *science* of pastoral theology is as old as the church itself as reflected in the many diverse instructions and special directions for the guidance given to the disciples by Jesus (Matt 10; Mark 6:1–13; Luke 9:1–6) and given by Paul in the pastoral letters of Timothy (1 Tim 4:12–16; 2 Tim 2:22–25) and Titus for the care of souls (Drum, 1912/2016; Murphy, 2013). The instructions given by Jesus and Paul, as well as tradition and the Holy Scriptures, portray the ideal priest, teacher, and pastor; those instructions provide us with God's ideas and ideal for the

Care of Souls

(Drum, 1912/2016; Utazi, 2012). Additionally, these scriptural passages and instructions support pastoral theology as an important and vital branch of study demanding special preparation and training, including the rules and the art of bringing the gospel to the hearts and lives of individuals, families, and groups (Murphy, 2013).

As we continue to peruse the history of pastoral theology, we find that there was not a separated and systematized science of pastoral theology until the Counter-Reformation (Drum, 1912/2016). The Counter-Reformation, or Catholic Reformation, focused on four major elements including an ecclesiastical reconfiguration, religious orders, and spiritual movements designed to provide proper training for clergy (Cunningham et al., 2016). Prior to the reformation period, there were concerns about pastoral duties, including the care of souls, which were being neglected. The result was the development of the treatment of the care of souls as a science in itself (Drum, 1912/2016).

During the eighteenth and nineteenth centuries, the science of pastoral theology continued to gain momentum. Specific pastoral duties were applied practically to the proper care of souls including that of the teacher, servants of Christ, those entrusted with the

mysteries God has revealed (1 Cor 4:1), and of the shepherd (i.e., pastor) (Drum, 1912/2016). In addition, throughout the past century, there have been other definitions and descriptions of pastoral theology for the practice of the care of souls as follows:

1. Pastoral theology teaches the priest his part in this work of Catholic and Christian tradition of revealed truth.
2. Pastoral theology teaches the practical bearing of the laws of God and the Church, and teaches the means of grace within these laws as well as teaches the hindrances upon the daily life of the priest, alone and in touch with his people.
3. Pastoral theology applies Canon law to the care of souls (Drum, 1912/2016, para. 2).
4. Pastoral theology is attentive to the knowledge of God witnessed to in the Scripture, mediated through tradition, reflected upon by systematic reasoning, and embodied in personal and social experiences.
5. Pastoral theology seeks to give clear definition to the tasks of ministry and to enable its improved practice. Because it is a pastoral discipline, pastoral theology seeks to join the theoretical with the practical. It is theoretical insofar as it seeks to develop a consistent theory of ministry, accountable to Scripture and to tradition, and be experientially sound and internally self-consistent. It is also a practical discipline for it is concerned with implementing concrete pastoral tasks rather than merely defining them. Its proximate goal is an improved theory of ministry. Its longer ranged goal is the improved practice of ministry (Oden, 1983, p. x).
6. Pastoral theology is a systematic process through which people are led to God. People have different needs and reasons by which they are drawn to God. This significantly proves the need for a pastoral guide who can minister to them, making present or mediating to them the world of God in their concrete life situation. This is the specific task of the practitioner of pastoral theology (Utazi, 2012, p. 6).

Through the many descriptions, the bottom line is that pastoral theology has been observed to provide meaning in the midst of difficulties and practical help in crisis situations toward the forming a communal identity; it is a living and organic theology that shapes and informs everyday experience (Utazi, 2012). The everyday experience and the circumstances of the times must be studied effectively in constructing a relevant contemporary system of pastoral theology. The principles of the gospel are the same; these cannot be changed or improved. The word of God must be the chief and authoritative arbiter of the rules that are to guide the Christian minister. But humans change, as well as cultural contexts, and obstacles to truth are ever rising up (Murphy, 2013). Pastoral theology addresses the

difficulties of individuals, families, and the larger societal issues that contribute to the Christian's growth in faith, and it aims to seek out the best way possible to render service to those who need God, whether it is in administration, preaching, teaching, worship, singing, praying, counseling, spiritual life, or sacramental life (Utazi, 2012).

The duties that are directed towards the salvation and caring of souls that have been conveniently divided into those of the teacher, of the minister of sacred mysteries, and of the shepherd (Drum, 1912/2016). Blackburn (1999) states that many pastors divide their work as pastors into three main areas: (a) leadership/administration, (b) preaching/teaching, and (c) pastoral care/pastoral counseling. The three areas of the pastoral minister overlap and are intertwined. The goal is to minister as Jesus did, as the Lord is the chief shepherd of the Christian community and the ultimate model of ministry (Utazi, 2012). Christ is the model for pastoral care and Care of Souls.

The present state of pastoral theology is a strong and vigorous one. Its range of interests expanded following the Second Vatican Ecumenical Council (Graham, 2006; Murphy, 2013; Oden, 1983; Utazi, 2012). In the person of the minister, pastoral theology guides and helps people find solutions to various problems and life's ultimate questions, aids in healing a variety of brokenness, facilitates wholeness and wellness, and reconciles relationships (Graham, 2006; Utazi, 2012).

Additionally germane to pastoral theology today is the emerging thought of the postmodern situation and cultural condition. One of the unique characteristics of pastoral theology and pastoral care's relevancy is that it is now a practice of care *in community* as well as *in the market place*. The new openness to spiritual and human needs within the context of a new paradigm of pastoral theology and care is emerging. The remainder of this literature review will now focus on the roles and responsibilities of those ministers who engage in pastoral/spiritual care and pastoral counseling as well as focus on the roles and responsibilities of psychologists and other licensed clinical mental health counseling professionals.

2. Pastoral/Spiritual Care

As stated earlier, within pastoral theology there are levels of care and counseling that include pastoral/spiritual care that has always been of special importance in the Christian community (Oden, 1987;

Chadwick et al., 2016). Pastoral care has had a long history within Christianity and the early church. Although there is no lengthy reference to the specific duties and role of the pastor within the Bible, it does associate it with teaching (Eph 4:11–12) and involves shepherding the flock (Psalm 23; 78:52 and 53a; 1 Pet 5:1–4), a task of pastoral care:

Shepherding involves protection, tending to needs, strengthening the weak, encouragement, feeding the flock, making provision, shielding, refreshing, restoring, leading by example to move people on their pursuit of holiness, comforting, and guiding (Rowden, 2009, p. 227).

Additionally, in the short letters of 1 and 2 Timothy as well as Titus, Paul wrote specifically instructing pastors on how to care for people in the church (Murphy, 2013; Petersen, 2007).

One of the most important contributions to pastoral care after the N.T. was by an early church father, Pope Gregory I, known as St. Gregory the Great (Chadwick et al., 2016). Gregory was actively concerned with the work of priests and wrote one of his most famous and influential writings, *Liber Regulae Pastoralis*, known commonly as the “Pastoral Care,” or the “Pastoral Rule” following his investiture as pope in 590 (*Christianity Today*, 2008; Gregory I the Great, 590/1994; Halsall, 1998). This instructional book was written to outline the role, duties, and obligations of clergy, and it was presented to new bishops upon their ordination and included the following definition of pastoral care:

Pastoral care is the ministry of care and counseling provided by pastors, chaplains, and other religious leaders to members of their church or congregation, or to persons of all faiths and none within institutional settings. This can range anywhere from home visitation to formal counseling provided by pastors who are licensed to offer counseling services. This is also frequently referred to as “spiritual care” (Gregory I the Great, 590/1994).

Drawing on various classical authors, another theologian, Thomas Oden, equates pastoral care to that of a medical doctor stating: “As the physician cares for the body, so the pastoral leader cares for the soul” (Johnston, 2016; Oden, 1987). He further describes pastoral care as that:

branch of Christian theology that deals with the care of persons by pastors. It is pastoral because it pertains to the offices, tasks and duties of the pastor. It is

care because it has charge of, and is deliberately attentive to, the spiritual growth and destiny of persons. Pastoral care is analogous to a physician's care of the body. Since that particular sphere over which one exercises care is the psyche ... pastoral care is also appropriately called the care of the souls. (Oden, 1987, p. 5)

In classical Christian terms, the soul is defined as the “unitive center of the inner powers” of persons. The pastoral counselor is responsible for the inner life of persons to help them through the crisis of emotional conflict and interpersonal pain toward growth in responsiveness toward God (Oden, 1983).

Pastoral care in the 20th century has been defined as “a person-centered, holistic approach to care that complements the care offered by other helping disciplines while paying particular attention to spiritual care. The focus of pastoral care is upon the healing, guiding, supporting, reconciling, nurturing, liberating, and empowering of people in whatever situation they find themselves” (Rumbold, n.d.). Pastoral care refers to the total range of help offered not only by pastors, but also elders, deacons, spiritual leaders, and other members of the congregation to those they seek to serve (Benner, 2003). Whereas, spiritual care “can be a dimension of any discipline, when a practitioner provides holistic care, that includes the spiritual dimension” (Pastoral Care Council of the ACT, 2016).

Spiritual support is an essential aspect of pastoral care that offers emotional support and spiritual care by helping people connect with their own inner and community resources (Pastoral Care Council of the ACT, 2016). Spiritual support “consists of a range of activities in which people cooperatively interact with God and with the spiritual order deriving from God's personality and action” (Dallas Willard as cited in McMinn, 1996, p. 11). In addition to pastoral care, pastoral leaders and practitioners must understand spirituality and the process of spiritual formation in emotional healing (McMinn, 1996). Spiritual training is experiential and often private. It includes prayer and devotional reflection, in church sanctuaries where Christian communities worship, as well as in quiet intimate disciplines of fasting and solitude (McMinn, 1996).

Blackburn (1997) refers to pastoral care as hospital visits, telephone calls expressing concern or reassurance, and informal brief conversations about the needs in people's lives. Within pastoral care, psychological and theological perspectives are integrated in the

practice of the Christian counselor (Graham, 2006). Although there is an adoption of secular therapies within the pastoral care that creates a tension between sacred and secular sources of pastoral care and is a clear sign of modernity, religious worldviews continue to dominate and persevere, and even revive the pastoral care movement (Graham, 2006).

Pastoral care has always attempted to respond to the totality of human needs in every age in consonance with the words of Jesus Christ, “I was hungry and you gave me food, I was thirsty and you gave me drink, I was a stranger and you welcomed me, I was naked and you clothed me, I was sick and you visited me, I was in prison and you came to me.” (Chadwick et al., 2016; Matt 25:35–36)

The ultimate goal of the modern pastoral care movement has been one of personal wholeness and well-being with the individual viewed as one possessing an innate orientation towards self-actualization (Graham, 2006).

The pastor can profit from the “anthropological” worldviews of social and behavioral sciences (Lester, 1995). The significant contributions that social and behavioral sciences have made to anthropology and the theology of personhood and human personality should not be diminished. Social learning theories, cognitive theories, behavior theories, systems theories, and other psychological theories have done much to speak to the present situations of persons from the offerings of the social and behavioral sciences (Lester, 1995).

3. Psychology

Pastoral and spiritual care as defined and described in this manuscript is rooted in word, sacrament, sacred scriptures, in prayer, in proclamation, and in the care of the soul (Brushwyler, Fancher, Geoly, Matthews, and Stone, 1999). Pastoral and spiritual care does not have its origins in various evidenced-based, scientifically grounded theoretical approaches or schools of psychotherapeutic modalities (Brushwyler et al., 1999). Although there are many similarities between pastors and psychologists, who both guide and help people to find existential meaning and solutions to various problems and life’s questions, psychologists [or other licensed clinical mental health counseling professionals] provide both short-term and longer-term, formal, intimate conversations that may be preventative in nature or interventions within a variety of settings (Gladding and Newsome, 2010; Hiltner, 1949; Johnston, 2016; Oates, 1974). Psychologists and

other professionals may be concerned about pathology, the lifespan of human development, the social development while implementing evidenced-based practices, and the treatment of those seeking productive lives and healthy life-stage transitions (Gladding and Newsome, 2010).

Psychology has been defined as the scientific study of behavior and mental processes that focuses on empirical evidence and critical thinking and consists of four goals:

1. Describes Behavior, tells “what” occurred,
2. Explain Behavior, tells “why” a behavior or mental process occurred,
3. Predicts Behavior, identifies conditions under which a future behavior or mental process is likely to occur, and
4. Change Behavior, applies psychological knowledge to prevent unwanted behavior or to bring about desired goals. Carpenter and Huffman, 2010.

The American Psychological Association (APA) defines psychology as:

a diverse discipline, grounded in science, but with nearly boundless applications in everyday life. Some psychologists do basic research, developing theories and testing them through carefully honed research methods involving observation, experimentation, and analysis. Other psychologists apply the discipline’s scientific knowledge to help people, organizations and communities function better. (2016, para. 4)

Psychologists and others study both normal and abnormal functioning, treat patients with mental and emotional problems, and encourage behaviors that build emotional resilience and wellness (American Psychological Association, 2016).

Approaching behavior, mental processes, and mental health holistically is not new as this considers the mental, physical, emotional, environment, and spiritual factors (i.e., the whole person) (Gladding and Newsome, 2010). Over the course of the 20th century, there have been many psychologists who have focused on the spiritual dimension of human wholeness including Carl Jung, Abraham Maslow, William James, Karl Menninger, and M. Scott Peck (American Association of Pastoral Counselors [AAPC], 2016). Today, in the age of modern psychology, psychologists and others are recognizing the link and correlation between mind, body, and soul—including religion, spirituality, and health—and working together with other health care professionals as well as pastors, clergy, pastoral counselors, and spiritual care givers to provide whole-person care to

individuals, families, groups, and the community (APA, 2016; Carpenter and Huffman, 2010; McMinn, 1996; Pastorino and Doyle-Portillo, 2012). In fact, APA, the American Counseling Association (ACA), and the National Association of Social Workers (NASW) have included codes of ethics that state the importance of understanding the diverse cultural backgrounds including religion and spirituality (ACA, 2014; APA, 2010; NASW, 2008). Thus, as Arthur Caliandro, Senior Minister Emeritus, Marble Collegiate Church in New York City states, “It only makes sense that religion and psychology, each of which is concerned with the fullness of the human experience should be recognized as partners, because they function as partners within the human psyche” (AAPC, 2016).

4. Pastoral Counseling

Pastoral leaders have traditionally sought to provide biblically-based solutions that are oriented toward mission, anchored in scripture, centered on Christ and the Gospel, dependent upon the Holy Spirit and prayer, and directed toward sanctification for those in trouble (AAPC, 2016; Johnston, 2016). Additionally, pastoral leaders “have listened intently to personal problems for centuries and have developed religious counseling responses to those who suffer from mental and emotional illness and relational difficulties” (AAPC, 2016, para. 1). During the past century, a diversity of definitions of this kind of counseling had been set forth by pastors. Hiltner (1949, p. 80) described pastoral counseling as a process and “the attempt by a pastor to help a parishioner help himself, granted that certain conditions are present.” According to Hiltner, the aims of pastoral counseling are the

same as those of the Church itself, bringing people to Christ and the Christian fellowship, aiding them to acknowledge and repent of sin and to accept God’s freely offered salvation, helping them to live with themselves and their fellow men in brotherhood and love, enabling them to act with faith and confidence instead of the previous doubt and anxiety, bring peace where discord reigned before. (Hiltner, 1949, p. 19)

For Hiltner, the role of the pastor is that of a shepherd who assists their sheep with theological understanding, healing arts, sciences, and social work (Ogden, n.d.).

Oates (1974, p. 56) stated that “pastoral counseling may be said to be a systematic effort to apply inductive, clinical, and scientific

method to the accepted function of the minister as he confers with persons about their personal problems and life destiny.” Oates (1982) further defined pastoral counseling as the multiple interviews and counseling conducted by a pastor, teacher, or chaplain: i.e., a generalist. According to Oates (1974, p. 78; 1982), the pastoral counselor is a contemporary theologian at work with “the living human documents” of suffering people who reach out for care or to whom the pastoral counselor can extend care. The pastoral counselor is a person who is on speaking terms with God and has taken the time and the energy to discipline himself or herself in the body of data that describes humankind’s dealings with God throughout history. Pastoral counseling has also been identified as times when an appointment with a church member who asks for help, guidance, or perspective on an issue or problem that they are facing (Blackburn, 1997).

These traditional forms of pastoral counseling continue to help many individuals. However, it has been recognized that many cases require specialized professional counseling for effective treatment and healing (AAPC, 2016). And the above pastoral care scholars would also say that part of the competence of the pastor is to be able to identify when a referral to a trained psychological professional is needed.

The American Association of Pastoral Counselors (2016, para. 2) reported that “the intimate link between spiritual and emotional well-being began to receive serious attention by religious leaders in the early 1900s when they developed innovative educational programs and disciplined training that recognized the historical connection between faith and mental health.” A brief historical sketch of Clinical Pastoral Education (CPE) shows that:

In 1923, William S. Keller, M.D. brought a group of theological students to his home in Cincinnati for the summer. He sent them out in pairs to study and work in hospitals, social agencies, and welfare institutions. In 1925, the Rev. Anton T. Boisen who, after recovering from a severe mental illness, studied all that was then known about clinical pastoral training and became chaplain of the Worcester, Massachusetts, State Hospital, brought a group of theological students to study at the hospital. There were differences between these two movements [approaches], but both men believed that the way to learn to help was to try helping under supervision. (Hiltner, 1956, p. 114)

Furthermore, beginning in the 1930s, the integration of religion and psychology for psychotherapeutic purposes began in several contexts (AAPC, 2016). First, the collaboration of renowned minister Norman Vincent Peale and psychiatrist Smiley Blanton resulted in the American Foundation of Religion and Psychiatry, now known as the Blanton-Peale Institute and Counseling Center located in New York (AAPC, 2016; Blanton-Peale Institute and Counseling Center, 2016; Menz, 2003). Additionally, there was a collaboration between clergy and psychoanalytic psychiatrists including Helen Flanders Dunbar, who was one of the four seminary students who trained at Worcester State Hospital with Anton Boisen (AAPC, 2016; Vande Kemp, 2001). Finally, in the decades that followed, pastoral counseling continued to mature and find a place in the mental health community (Menz, 2003).

More recently, pastoral counseling has experienced a shift of paradigms that evolved during the latter half of the 20th century which is epitomized by the separation of pastoral counseling from the worshiping community and its absorption into a medicinal model of healing and clinical care (Graham, 2006). Pastoral counseling or psychotherapy that reflects modernist commitments refers to a specialized and controlled therapy done by exception rather than the rule of the pastorate (Oates, 1982; Graham, 2006). Menz (2003, p. 7) states, “The term pastoral counselor is not a reference to pastors who counsel, but a reference to a specialized discipline for those who have been trained in theology and credentialed in psychotherapy.”

The American Association of Pastoral Counselors (AAPC) (2016) defines pastoral counseling as

a unique form of counseling which uses spiritual resources as well as psychological understanding for healing and growth. Certified pastoral counselors are licensed mental health professionals who have also had in-depth religious and theological education and training. Clinical services are non-sectarian and respect the spiritual commitments, theological perspectives and religious traditions of those who seek assistance without imposing counselor beliefs onto the client.

From these perspectives, pastoral counselors (i.e., specialists) are thoroughly educated in both religious/theological training and psychotherapy and are licensed mental health professionals, making it a highly disciplined subspecialty of ministry (AAPC, 2016; McMinn, 1996; Menz, 2003; Oates, 1982).

Thus, in 1963, AAPC was founded, and it represents and sets professional standards for over 1,500 pastoral counselors. Its mission is to provide spiritually informed and integrated counseling, collaborative community-based services, training and education in order to enhance the well-being of individuals, families and communities (AAPC, 2016). Today, a pastoral counselor assists individuals in crisis, helping those are looking for personal growth and attending to the person's spirituality, theology, and faith tradition. At the same time, counselors provide guidance, aid skills, facilitate longer-term relationships, and provide the information needed to promote wholeness. They do all this within the context and support a person who needs to make changes to live life more fully. Those affiliated with AAPC account for three million hours of treatment annually (AAPC, 2016; McMinn, 1996).

C. The Marriage of Pastoral Theology, Pastoral Counseling, Spiritual Care, and Psychology in the 21st Century

The following case study illustrates a congregant/client who presents themselves to a pastor, pastoral/spiritual care provider, psychologist, or pastoral counselor seeking assistance in times of a developmental, existential, and situational crisis. The responses from each type of helping professional discussed here will include specific points to consider. This case study is designed to assist with recognizing that pastors do not need to do all of the counseling. As Johnston (2016, p. 4) states,

There may be significant differences in training, gifting, and competence. In cases of real difficulty, it will be wise to refer the counselee to someone who has sufficient expertise in understanding a problem. Of course, the pastors will still remain involved, but they are also ensuring that folk are receiving the level of care that they require. Counseling is certainly a pastoral activity that can be appropriately delegated.

On the subject of pastoral theology, pastoral care, and counseling:

The postmodern perspectives portray the self as a subject-in-relation, whose identity is forged within the complex interplay of economic, cultural and political facts. Contemporary pastoral/practical theology is gradually revising.... The subject of care is shifting from that of a self-actualized individual for whom care functions primarily at times of crisis towards one of a person in need of nurture and support as she or he negotiates a complexity of moral and theological challenge in a rapidly-changing economic and social context (Pattison as cited in Graham, p. 858).

The human being is understood as a complex being that functions on two levels, the soul or mind, to which the body is subject. For the well-being of the person, the soul and body, or flesh and spirit must operate in harmony. Peace entails a harmony of sorts and agreement with self and with God. Disease (dis-ease) results when we are not in agreement or harmony with God, with self, and with others.

Pastoral counseling and modern psychology are not mutually exclusive of each another. There is a synergy to be realized when the difference as well as the importance that each area of expertise brings healing and comfort into lives of persons in need of healing—emotional, spiritual, and psychological. It is important to discern the need and identify which area of expertise is called for. “The pastoral counselor brings a specific historical identity as a counselor which enables the pastor to bring a fresh consciousness and unique contribution to the general field of counseling” (Oates, 1992, p. 293).

Wayne E. Oates uses the term God-in-relation-to-persons to identify the distinctive character of pastoral counseling, and it must be informed by philosophy, ethics, anthropology, psychology, medicine (psychiatry), and social work (Chapman, 1992). This suggests the “need for interprofessional collaboration rather than mere cooperation or amateurish competition” (Chapman, 1992, p. 295). Pastoral and spiritual care and modern psychology and counseling do not exist exclusive of each other. The role of the pastor in pastoral/spiritual counseling is to bring healing or comfort by the skillful use of theological reflection, biblical interpretation, and spiritual discernment that brings the reality of God or “God as reality” into the situation for which the person is seeking help.

D. Case Study

Larry Jones is a 40-year-old African American male. He is single with two daughters, ages 5 and 17, and has custody. Larry finished college with a degree in secondary education. As a student-athlete, he won a Division II scholarship to play basketball for four years at a historically Black university (HBCU). Larry admits that during his second semester at college he began feeling depressed but never sought counseling, due to the stigmas of being an African American male seeking counseling and an athlete seeking counseling. He is the youngest of five children with four sisters and a brother. Larry lives in the city with his 65-year-old mother due to financial problems. Larry is currently employed as a teacher at a Christian charter school with no illegal history and no alcohol or drug use. As a church member, he volunteers with several ministries.

Larry's presenting issues from his perspective are that he needs assistance with making good decisions, managing his anger, and assistance with how to be a better Christian. He admits to making spur-of-the-moment unhealthy decisions and is feeling empty since the death of his father last year. And his girlfriend of two years ended their relationship three months ago. Larry admits to being very angry lately especially at his daughters' mothers (two different mothers of his two daughters) who are seeking full parental custody of their daughters due to Larry's financial situation (Tinsley, 2013).

1. Conceptualization

Larry is struggling with economic, social, and relationship issues that are affecting him emotionally, psychologically, and spiritually. Feelings of emptiness, anger, sadness, grief and loss, and anxiety are concerns that need to be addressed. Larry admits that he has a tendency towards depression. Larry's anger is getting worse as evidenced in the anger directed towards his daughter. Poor decision making is another presenting issue of major concern. Larry is feeling the need to connect with his Christian/spiritual roots as evidence of another broken relationship that needs to be restored. There is a need for reconciliation and healing as these presenting behaviors and concerns are evidence of both spiritual and psychological suffering.

The integration of the following interventions of pastoral theology, pastor/spiritual care, psychological support, and pastoral counseling could be offered to Larry for integrative healing, emotional resilience and wellness, healthy life-stage transitions, and reconciliation and restoration of relationships with self and with others.

For the purpose of this case study, only the most salient treatment plans will be discussed for each professional.

2. Pastoral Theologian

As a pastoral theologian, the response to Larry would be framed through a theologically reflective and interpretive lens. The knowledge of the nature and action of God in the context of the human experience is essential. This provides the pastoral theologian with a foundation for his or her work with Larry. Because the pastor is first a theologian, the method of the pastor to guide, nurture, protect, and care for the individual is grounded in the nature and knowledge of God and the Scriptures. A biblical interpretation and a theological anthropology guides the pastor's work with a

soteriological, eschatological, and ecclesiastical goal. The focus is not simply the healing of the mind and relative behaviors, but to give attention to the spiritual complexities of the person addressing their relationship with God, self, and others, understanding the human-self as God's creation, the Scriptures as the revealed will of God.

The first observation reveals a sadness that may be related to a depressive disorder. The pastoral theologian's knowledge of behaviors connected to depression may inform the necessity of additional integrative intervention of a professional psychologist or another licensed clinical mental health professional. However, other concerns dominate, too, like the grief and loss from the death of Larry's father, the broken relationship with his girlfriend, the anger toward his daughters and their mother. And these seem to be getting progressively worse. These are emotions that need assessment. From the perspective of the pastor, the underlying spiritual issues that could be contributing factors to Larry's situation need to be identified and addressed.

The redeeming factor for the pastoral theologian in Larry's case is that a relationship and knowledge of God is a part of his experience; he is connected to the church community. Larry feels the need to be a better Christian, and that is the entry point for the pastoral theologian's work with him. The theologian understands that Larry's emotional struggles have a spiritual component that influences his behaviors and choices. The pastor brings to bear on Larry's situation a clearly theological reflection.

The Genesis narrative of the fall of Adam and Eve provides a foundation for understanding humanity's journey from innocence toward a responsibility for sin. The Fall reveals the violation of the divine relationship that resulted in destructive consequences for the individual and society. Paul Tillich posits that there are three dimensions of estrangements as a result of sin. "Sin is estrangement from other persons in self-centeredness and lovelessness; from our true selves in pursuing fragmented and inauthentic goals; and it is estrangement from God, the ground of our being" (Barbour, 2002, p. 51). Thus, sin is identified as a self-centeredness and turning away from God, an ultimate state of brokenness and disconnect which is relational. The subsequent disconnect in relatedness to God, self, others represents the emotional and behavioral dilemmas that many

face and to which pastoral counselors are called to minister. This disconnect renders us vulnerable to relational, spiritual, and emotional dysfunction. Subsequently, Larry's situation may stem from the fact that he needs to repair the relationship with God in order for him to relate better to his own self and to be reconciled to others and find healing.

Larry needs to meet with the pastor privately for a few sessions to work through the issues. The pastor will help Larry understand his brokenness and struggles in the light of biblical and theological insights. The pastor helps Larry interpret and reinterpret his behaviors from a self-in-relation with God and then with others.

The Gospel then becomes the message for Larry to understand the atoning sacrifice of Christ, the grace of reconciliation provided in Christ, and the Spirit's presence to empower him to live into the truth of the God's word and ultimately his own truth and purpose. The pastor might help Larry understand the Gospel as a living and viable reality that exists in the person of Christ. Thus, it is to help Larry to understand that the Scriptures point to the living, relational Christ (John 5:38–40). Larry's healing comes through reconciliation and agreement with the written word and with the Living Word in Christ.

This pastor's role with Larry would encompass helping Larry listen and build a relationship with God through prayer, meditation, spiritual practices and disciplines that together build him up in his most holy faith (Jude 1:20–21 NIV). The pastor would also recommend that Larry seek pastoral counseling with someone who the pastor could recommend. This may assist with a smooth transition between the two professionals which may assist to decrease Larry's stigmas of seeking counseling.

3. Pastoral/Spiritual Care

The pastor (or elder, deacon, spiritual leader or other members of the congregation) will reach out and provide Larry with a ministry of compassion that includes encouragement and support that stems from the love of God (Benner, 2003). The pastoral care provided is, as Benner (2003, p. 19) states, "the gift of Christian love and nurture from one who attempts to mediate the gracious presence of God to another who desires, to one degree or another, to live life in the reality of that divine presence."

The ministry of care provided by pastors [or other members of the congregation] will also require an understanding of spiritual

formation (McMinn, 1996). “Those who yearn for God and take the spiritual life most seriously always experience periods of spiritual darkness and loneliness; it is part of the spiritual quest for Christians” (McMinn, 1996, p. 11). During this time, the ministry of care is concerned about the welfare of others and encourages reaching out in fellowship and relationships with one another (Benner, 2003).

Help for Larry as a member of the church provides a role in his care from a contextual, communal perspective. Healing and comfort can be found in the midst of the community. Consider Hebrews 10:24–25 (AMP) which reads,

And let us consider [thoughtfully] how we may encourage one another to love and to do good deeds, not forsaking our meeting together [as believers for worship and instruction], as is the habit of some, but encouraging one another; and all the more [faithfully] as you see the day [of Christ’s return] approaching.

Larry needs to be in a supportive community where he is being encouraged and uplifted by the people of faith within his church. It is also within this context that the embodied love of Christ and the Gospel can deepen his love of God, self and others. This can provide a context to temper his anger as the love of Christ is received and embodied for himself and then others. Larry’s anger may stem from a self-anger, lamenting his lived experience due to bad decisions and choices made. Larry’s relationships with others can be healed and his ability to function in a healthy manner may be discovered within a loving community that provides support in an encouraging and supportive environment. It is the community of the congregation, that itself becomes pastoral in its ministry to Larry.

The Scriptures are God-breathed, “and is useful for teaching, rebuking, correcting and training in righteousness, so that the servant of God may be thoroughly equipped for every good work” (2 Tim 3:16–17 NIV). Thus, it is advisable for Larry to attend Bible study or a Bible study group or cell group. Bible study in the context of the community provides a communal context for developing helping relationships, learning, and interpreting biblical principles for life application. There are specific teachings in scripture that can attend to Larry’s financial habits, anger, and relationship issues.

Larry should be directed to attend prayer sessions. Prayer that fosters community sharing on a more intimate level of spirituality may help Larry to focus attention not only on himself and his

concerns but on the concerns of others. The biblical principle of reciprocity (e.g., Matt 5:7, Matt 6:33, Matt 6:38; 2 Cor 9:6, 8, and 11; Gal 6:7–10), has the potential to effect spiritual edification. Furthermore, pastoral care realized through the worship experience and of the preached Word must not be diminished as a context for pastoral/spiritual care. The pastor/preacher’s homiletic can be a source of teaching where the word of God is encountered for transformation and change. Notwithstanding, pastoral and spiritual care takes place in the context of the congregation, utilizing the various ministries in the church and gifting of people within the congregation. Because much of Larry’s difficulties are identified as relational in nature, this context for care for him is advisable.

4. Psychologist (or other licensed clinical mental health professional)

Prior to developing a culturally appropriate intervention and treatment plan for Larry, a psychologist will conduct a thorough psychosocial assessment, “a systematic procedure for collecting information that is used to make inferences or decisions about the characteristics of a person” while beginning to develop a cross-cultural therapeutic relationship (Drummond and Jones, 2010). The assessment is designed for screening, identification, diagnosis and intervention planning purposes. Additionally, the assessment is designed to assess Larry’s mental and emotional health and to develop an understanding of Larry’s role within his family and his community. Furthermore, the psychologist may integrate the FICA Spiritual Assessment. The acronym FICA can help structure questions in taking a spiritual history (i.e., Faith, belief, meaning; Importance; Community; and Address/Action in Care) (Puchalski and Romer, 2000).

The approach that a psychologist may take with Larry depends on their theoretical orientation to counseling and mental health and their competency level of training with theology and/or spiritual, ethical and religious values in counseling. A psychologist who focuses on pathology and diagnosis, may refer Larry to a psychiatrist for antidepressant medication to be prescribed, and may recommend therapy reflects an approach that might be taken by many psychologists who have no religious training or experiences (McMinn, 1996). A psychologist who integrates spiritual and Christian interventions into the previous description may have some

theological understanding or understanding of the competencies for addressing spiritual and religious issues in counseling (McMinn, 1996).

Based on the conceptualization of Larry and the assessments, the psychologist will continue strengthening a therapeutic alliance with Larry due to his stigmas of seeking counseling. Additionally, the psychologist will develop a culturally appropriate intervention and treatment plan that would include goals for decreasing Larry's level of depression/depressive symptoms utilizing evidence-based theoretical approaches such as cognitive behavioral therapy. Moreover, the psychologist will assist Larry with progressing through the stages of grief and loss (i.e., shock/denial/isolation, anger, depression, bargaining and acceptance) and tasks of mourning (i.e., accepting the loss, experience the pain and emotions of grief, adjusting to the new environment without the deceased or significant loss and finding an enduring connection with the deceased and significant loss in the midst of embarking on a new life) due to the loss of his father and the ending of his relationship with his girlfriend of two years [and possibly the loss of his athletic identity] (Kübler-Ross, 1969; Tinsley, 2008; Worden, 2009). The grief and loss that Larry is experiencing may be the trigger for his intense anger and poor unhealthy decision making. Furthermore, the psychologist will also assist Larry with developing effective coping strategies and skills that may assist him with managing his emotions, stressors, and relationships with his mother, his daughters, and his daughters' mothers.

While working with Larry, the psychologist, with Larry's consent, may want to include Larry's church community as part of the intervention and treatment plan. Collaboratively, the psychologist and Larry could determine how his church could serve as a support for him during his existential crises and counseling process. Larry's prognosis is excellent as long as he and the psychologist continue their collaborative therapeutic alliance and Larry stays committed and motivated with the counseling process. Future issues that Larry may want to consider addressing in counseling is his athletic identity, racial/cultural identity as well as his identity as a single parent. Increasing Larry's understanding of who he is and who he can be can assist with Larry's awareness of self, increase both his self-esteem

and self-efficacy as well as can assist with strengthening his relationships with others.

5. Pastoral Counselors

The pastoral counselor will integrate the role and responsibilities of the psychologist as previously discussed. However, only those psychologists and licensed clinical mental health professionals who are aware of, and trained in, psychological symptoms, theological principles, and spiritual formation will be able to discern the best treatment for Larry (McMinn, 1996; Menz, 2003). Thus, the pastoral counselor will also integrate biblical-based solutions that are oriented toward mission, anchored in scripture, centered on Christ and the Gospel, and dependent upon the Holy Spirit and prayer (AAPC, 2016; Johnston, 2016). The pastoral counselor will utilize spiritual resources as well psychological understanding for healing and growth (AAPC, 2016).

In addition to the intervention and treatment plan developed previously by the psychologist, the pastoral counselor will assist Larry with restoring and reconciling his relationship with God, with himself and with others, including his daughters, his daughters' mothers, and his mother. As a result of Adam and Eve's sin, all mankind was affected as well. Adam and Eve's selfish and sinful attitude ruined God's perfect design and what God created for human beings to enjoy. The problems caused by sin and rooted in the same decisions as Eve's (i.e., selfishness, disobedience and conflict) only worsened throughout history. Mankind, still challenged with living in the structure of God's plan, rejects ultimate freedom within God's structure and laws and chooses instead to live enslaved to their own rules and structures. Sin continues to permeate Creation infecting relationships, culture, politics, work, and play to name a few, resulting in brokenness, destruction and death which for some has become normalized because of the lack of awareness of God's perfect plan (McCown and Gin, 2003).

The pastoral counselor will assist Larry with understanding that through redemption in Jesus Christ, he has become a member of his kingdom where God's perfect structured has been restored and broken relationships with God, self, others and Creation has been made whole again through the transformation of the heart (McCown and Gin, 2003). The pastoral counselor would provide Scripture passages

(e.g., 2 Cor 5:15–17, Rom 6:4, John 13:34–35, Col 2:9–10) that provides support of these restored relationships (Tinsley, 2016). These Scriptures are not offered with the expectation that this would set Larry’s thinking straight about God. Rather, the scripture readings are intended to point him toward God and to help him see how he differed from the God of his experiences (Benner, 2003). In God’s original perfect plan for Creation, he gave human beings, including Larry, the privilege and responsibility of cultivating and developing relationships. With the restoration of Creation to right relationships and the redemption of hearts through Jesus Christ, Larry can now work to restore his relationships to God’s intended purpose (Tinsley, 2016). At this point, much of the work of the pastoral counselor is that of an educative or didactic quality to assist Larry with becoming “a better Christian” (Benner, 2003).

Once Larry begins to understand the salvific role of Jesus Christ, the pastoral counselor will continue encouraging Larry to explore further the spiritual aspects of his presenting issues and engage in an exploration of his spiritual and religious functioning across his lifespan as well as an exploration of his family of origin and his relationships (Benner, 2003). The goal is to begin making connections between Larry’s relationships with himself as well as with others and God while developing a good working alliance. Additionally, the pastoral counselor wants to provide a safe space for Larry to explore and express his feelings while modeling unconditional positive regard and acceptance that is a reflection of God’s acceptance. This modeling behavior may hopefully assist Larry with learning to accept himself which in turn will strengthen his communication and decision making skills as well as assist with managing his emotions (Benner, 2003).

E. Ethical Issues and Considerations

Ethical and legal issues as well as professional challenges surround pastors, professionals who engage in pastoral/spiritual care, pastoral counselors and psychologists every day. Psychologists and other licensed clinical mental health counseling professionals must be attentive to the ethical behavior, standards and responsibility to which they aspire (AAPC, ACA, 2014; APA, 2010, NASW, 2008). Those who are members of a professional counseling organization such as AAPC, APA, ACA, NASW are already accountable to the ethical

codes of that organization. “However, all pastors who counsel whether they have such memberships or not, need to be familiar with the ethical framework of counseling” (Benner, 2003, p. 147).

Although pastors have codes of conduct to guide their activities, they are religious in origin based on religious beliefs and canonical or ecclesiastical law (Benner, 2003; Brushwyler et al, 1999). Pastoral codes may be more generalized in nature than professional counseling organizations’ codes of ethics with the exceptions of rules and laws regarding sexual misconduct (Brushwyler et. al., 1999). Because the potential for the abuse of power in the therapeutic relationship has become a matter of concern in recent years, and is emerging into pastoral theology as well, a discussion of ethics is warranted and central (Blackburn, 1999; Graham, 2006).

While training in counseling can assist pastors to work more effectively with their congregations, their calling is a very distinct discipline of pastoral theology (Brushwyler et al, 1999; Murphy, 2013). Pastoral theology is primarily concerned with the things of God and his word and is designed to assist the Christian minister in applying the truths of the gospel to the heart and lives of individuals (Murphy, 2013). As Eugene Peterson (1989) states, “the definition that pastors start out with, given to us in our ordination, is that pastoral work is a ministry of word and sacrament” (p. 22).

Although Blackburn (1999), and Brushwyler (et al.) suggest that pastors may need to return to their distinct ancient calling and embrace their unique, set-apart ministry, it is the authors’ belief that some pastors are already returning to their distinct ancient/classical calling within a new cultural situation that is calling forth pastoral ministry to be relevant to a contemporary ethos. It is a new and emerging paradigm of pastoral ministry as reflected:

In 1993, Patton coined the phrase “Paradigm shift” to describe a dramatic turning in the practice of pastoral care [calling it a “healing art”]. Patton pointed out that pastoral care was focusing more and more on social and cultural concerns, moving from a “clinical pastoral paradigm” to one that Patton named “communal-contextual.” (Hunter, 2001, para. 1)

For those pastors who already engage, or are planning to engage, in the practice of pastoral/spiritual care or pastoral counseling, there are some guidelines that are important to consider. Benner (2003, p. 148) provides five guidelines that serve as a framework for ethical practice

for pastors and those ministers who engage in pastoral care and counseling:

1. **Protect the rights of those you counsel.** As part of your informed consent, be clear about the work undertaken together and your level of expertise, the right and freedom from any form of manipulation, coercion, harassment or discrimination, and the right to protection of confidentiality and privacy.
2. **Avoid dual role relationships.** “Dual-role relationships are those relationships in which a pastor provides formal counseling to someone while also maintaining a different relationship with that same person” (Cappa, 1999, p. 833). Avoid counseling someone with whom you have a close friendship, business or work relationships, or any other type of ongoing interaction. Such people should be referred to someone else in your network of psychologists or other licensed clinical mental health counselors, especially persons with chronic or more serious mental and emotional health issues (Blackburn, 1999; Brushwyler et al, 1999). As Johnston (2016) states, referring is not a failure of pastoral leadership but an expression of loving and wise leadership.
3. **Avoid romantic or sexual intimacies.** While this is assumed, it is an immensely important and pervasive issue. Additionally, “in the area of sexuality, the pastor must be careful not to seek, directly or indirectly, information that is not germane to the issue at hand. Seeking information for sexual titillation is inappropriate, unfair, and counterproductive” (Blackburn, 1999, p. 7).
4. **Be aware of your limitations.** Practice within the boundaries of professional and personal competence of pastoral theology, pastoral/spiritual care, pastoral counseling or psychology [clinical mental health counseling]. As a pastor in a counseling session, you are seeking to be faithful to the Lord and to your calling as you listen and address a person who is seeking help (Blackburn, 1999). If you practice as a licensed professional or psychologist, the law will treat you as one (Brushwyler et al., 1999).

5. Remain in relationships of personal accountability. The ethical practice of pastoral/spiritual care and pastoral counseling is best achieved and maintained within a context of close accountability, rather than just familiarity with standards and guidelines, beginning with the church and faith community. Accountability can also be achieved through ongoing consultation and supervision with other experienced pastors, counselors and psychologists.

Because many congregants come to pastors for counseling with certain expectations that may be unrealistic, and many pastors have neither sufficient training nor gifting to shepherd someone through complex situations of suffering, injustices and mental/emotional struggles, it may behoove a pastor to lead well and navigate wisely through these difficulties (Johnston, 2016). Furthermore, another important consideration:

is that of the pastor being clear when counseling is occurring and when it is not. That is, counseling is best performed in a formal setting, within an office and at specific times, and this must be communicated to the counselees prior to initiating the service. Additionally, it is important for pastors to know their own limitations in helping people. Well-meaning pastors often overextend themselves with people's issues that are far in excess of their expertise, leading to more harm than good. These limitations can best be addressed through such things as peer supervision or professional supervision within the helping community. It is also important that pastors have the foresight to predict possible role conflicts to their counselees, discussing such things as future contact in non-counseling settings and how that might be handled. (Cappa, 1999, p. 834).

To practice ethically, it is important that pastors focus on their calling and embrace their unique, set-apart ministry of pastoral theology and shepherding and to acknowledge their limitations as it relates to their role and responsibilities of pastoral/spiritual care and pastoral counseling. Additionally, to practice ethically, it will be beneficial for pastors to explore some of the ethical dimensions of counseling. Finally, being able to foresee possible ethical challenges and dilemmas can enhance the effectiveness and well-being of both the pastor and those who come for help (Cappa, 1999).

F. Recommendations for Training and Professional Practice

The authors recommend that pastors, clergy and pastoral counselors begin to include the value of professional counseling in the pedagogy of the congregation. Believing there to be a natural suspicion on the part of most congregants to professional counseling, one of the challenges is aiding members to see the spiritual connection between spiritual crisis counseling and professional counseling (Richardson and June, 2006). Pastors, in large measure, are including therapy in sermonic presentation on a regular basis. Strong support for the marriage of spiritual counseling and professional counseling would be created with strong pastoral support included in sermonic presentation. Most congregants value what is shared from the pulpit and fear what is silent from the pulpit or not strongly supported (Tinsley and Curtis, 2009).

Theology, divinity and ministerial training programs may also benefit from learning the intervention techniques and language necessary to maintain both the integrity of the counseling process and the counselors' sincere desire to see a congregant live whole and healthy. In addition, theology, divinity and ministerial programs may benefit from letting the language of faith and the languages of psychology and counseling converse until a commonality of languages is created (Tinsley and Curtis, 2009). It may behoove psychologists to develop relationships with pastors and ministers as a way of understanding church members' issues and concerns and communicating more effectively with religious and spiritual clients (Spriggs and Slotter, 2003).

Finally, the authors recommend that professional counselors collaborate with local universities, community agencies, and professional private practices to bring a variety of mental health services into one community facility such as a church (Tinsley and Curtis, 2009). Establishing ties with pastors of churches, [psychologists and other licensed mental health professionals] would create a referral network and complementary resources for clients (Richardson and June, 2006). Additionally, psychologists with specific training in religion and spiritual counseling can offer a valuable service to the mental health and religious communities by providing specific spiritual counseling competencies and mental health outreach programs that may better meet the needs of culturally

diverse populations (Constantine, Lewis, Conner, Sanchez, 2000; Getz, Kirk, and Driscoll, 1999; Spriggs and Slotter, 2003).

Conclusion

In conclusion, the question of whether pastoral theology is still relevant in the age of modern psychology, the answer is unequivocally yes. The discussion has been presented by providing insights and research that define, describe, and inform the understanding and practice of pastoral theology and psychology in our contemporary context of lived experiences. Thus, “What happens in the church is related to political and social trends in the world at large” (Heitink, 1999, p. 62.). Our parishioners and those who come to us seeking help and healing often find themselves trying to maneuver through life caught in a maze of challenges and experiences of pain, suffering, joys and sorrows, emotional and spiritual quandaries. They live in the context of a world reality that influences the lived experience of being human in the world as they seek healing, finding purpose and meaning in life. People enter through the doors of our churches from a world that has not been kind and, in some cases, hostile seeking understanding, help and healing. These are among the existential issues that we as helpers and “healers” are called to address and the people we are called to serve.

Today, pastoral theology and modern psychology exist in what is described as a spiritual openness towards holistic ways of knowing that embraces the affective, intuitive, and the cognitive (Grenz, 1996). The ethos of our contemporary context embraces an understanding of persons as embedded in a wider realm of reality. Thus, this is the context in which the pastor and professional counselor and psychologist must provide care and counsel. The strength of what is brought to bear on lives from the pastoral and psychological perspectives and practices must not be diminished or devalued in what each brings to a world and culture of brokenness, pain and suffering where individual lives are challenged to live well, whole and healed. The complexity of design of the human being as existing as body, soul, and spirit, necessitates disciplines that are equipped with the competency to perform effectively in each area of such human complexity. The pastoral counselor, pastoral/spiritual counselor, and the licensed clinical mental health professional must be

knowledgeable of the psychological and spiritual reality of the human being, working within their particular area and level of expertise.

This article concludes that pastoral theology is still relevant in an age of modern psychology. While there are general competencies relative to each discipline, such as human, cultural, philosophical, and technological understanding, the synergy and strength is found in maintaining the integrity of each discipline. In other words, they remain distinctly what they are in definition and practice yet able to integrate the diversities of each discipline for more complete and sustained outcomes in the lives of people in need.

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