

AN EXPLORATORY STUDY OF COUNSELING RESPONSIBILITIES
OF NAZARENE PASTORS
WITH IMPLICATIONS FOR PROFESSIONAL TRAINING

Thesis for the Degree of Ph. D.
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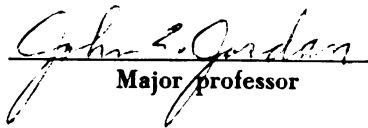
AN EXPLORATORY STUDY OF COUNSELING
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WITH IMPLICATIONS FOR PROFESSIONAL TRAINING
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ABSTRACT

AN EXPLORATORY STUDY OF COUNSELING RESPONSIBILITIES OF NAZARENE PASTORS WITH IMPLICATIONS FOR PROFESSIONAL TRAINING

by Galal Alfred Gough

The study was designed to determine the (1) nature and scope of counseling, (2) adequacy of professional counseling training as conceived by pastors, and (3) to derive implications concerning the training of Nazarene pastors. Churches were stratified according to size of membership and then a stratified random sample of 250 pastors--5% of the Nazarene pastors in the United States--was taken. One hundred sixty-eight (168) pastors were used in the final tabulation of data.

The chi-square coefficient was used to study the existence of the relationships between variables under study and the contingency coefficient was used to study the strength of the relationship. The .05 level of significance was used as the level for accepting or rejecting the hypotheses.

Twenty null hypotheses were studied and the four rejected are as follows: (1) there is no relationship between the amount of time spent in counseling and the size of the community; (2) there is no

relationship between the amount of time spent in counseling and the size of the church membership; (3) there is no relationship between the adequacy of professional counseling training as conceived by Nazarene pastors and the regional distribution of pastors; (4) there is no relationship between the adequacy of professional counseling training as conceived by Nazarene pastors and the ages of the pastors. In every case the value of $C_{corrected}$ differed from one by a rather large amount, indicating the relationship was not too strong.

Eighty-nine per cent (89%) of the pastors felt that counseling was an important aspect of their ministry. Eighty-five per cent (85%) felt inadequate for their counseling responsibilities. Only 31% of their counseling responsibilities were in the religio-philosophical area, where they felt most qualified.

The four courses in the three respective areas--general psychology, general counseling, and pastoral counseling and psychology--most recommended for counseling training are the following: general psychology--adolescent, child, abnormal, and social psychology; general counseling--marriage and the family, psychology of personality, personal counseling, and interview techniques; and pastoral counseling and psychology--pastoral counseling, pastoral psychology, ministry to the sick, and pastoral care.

The results of the writer's study are consistent with current literature in the field of pastoral counseling which indicates that most pastors feel their training was not adequate for their counseling responsibilities.

AN EXPLORATORY STUDY OF COUNSELING RESPONSIBILITIES
OF NAZARENE PASTORS
WITH IMPLICATIONS FOR PROFESSIONAL TRAINING

by

G. A. Gough

A THESIS

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CHAPTER I

THE PROBLEM

INTRODUCTION

Every clergyman engages in pastoral counseling to some degree unless he is completely isolated from human need. Whether he is properly trained or not, he must deal with emotional problems continuously, and what he does, for better or worse, may be the only thing that is accomplished apart from the help or hindrance offered by friends and family. The minister does not have the choice of electing to counsel or not to counsel. He may willingly accept this dimension to his ministry, or unwillingly be forced into the counselor role by persons who inevitably look to the clergy for help or by the absence of other resources in the community. In either case, his degree of effectiveness will depend upon his ability to relate effectively to people, his sensitivity and insight in recognizing the nature of the problem, his non-judgmental acceptance of the person with the problem, and his knowledge of when and where to refer to other helping resources.

In recent years the minister has become increasingly aware of the relation of religion to mental health and seems to be more concerned

in discharging adequately his responsibility for helping individuals achieve maturity and maintain mental and emotional equilibrium. At the same time, professional workers in the field of mental health are looking increasingly to the church as an ally in their efforts to help people (Maves, 1953, vii). Research concerning the role of religion in the prevention and cure of mental illness emphasizes the importance of the minister as a prophylactic and therapeutic agent in the lives of his people. Modern society is characterized by the multiplicity of resources that share this therapeutic function and by their growing professionalization. However, the minister, if properly trained, holds a unique position in the counseling field. He is the only professional person who has entry to a home without being summoned (Weatherhead, 1951, p. 474). He can do much to remove the prejudices which often prevent mental illness from being diagnosed and treated as early as possible (Roberts, 1950, p. 3). He is in a strategic position to detect maladjustment and neuroses in the early stages and be available for counseling or to pave the way for referral to other community resources in mental health (Robinson, et al., 1960, p. 244). He has an opportunity to observe the daily life of many of his parishioners and is in close contact with families at times of birth, marriage, sickness, and death. It is this personal relationship which prompts the majority of individuals to come to the minister for help (Gurin, et al., 1960, p. 339).

There are no doubt those who still question the importance of the minister's role as counselor. Findings in a recent report to Congress by the government's Joint Commission on Mental Illness and Health should eliminate these doubts and underscore the crucial role that clergymen play as one of the major therapeutic agents in the treatment process. The research revealed that nearly one in four adult Americans at some time in life has felt sufficiently troubled to need help. One out of seven interviewed had actually sought help of some kind in solving these problems. Among those seeking help, 42% consulted clergymen, 29% went to physicians for help and only 18% mentioned having gone to a psychiatrist or psychologist (Gurin, et al., 1960, p. 307). The general content of the problems centered predominately around marriage, family, and personal adjustment problems. The study also indicated that not only do more people go to ministers for help but a greater percentage were satisfied with the help received from them than were those who went to a psychiatrist (Gurin, et al., 1960, p. 323). Thus it would seem that insofar as the clergy is perhaps better able to deal with issues of basic belief, values, and orientation toward life, he has an inescapable role to play in the conservation and advancement of mental health.

PURPOSE OF THE STUDY

The basic purpose of this study is to ascertain the nature and scope of the counseling responsibilities of Nazarene pastors, the extent to which their academic training was adequate for their professional practice in counseling, and to derive significant implications for their professional training.

This study will attempt: (1) to determine by means of a questionnaire the amount of time the Nazarene pastor spends in counseling, (2) to determine the type and frequency of problems that are dealt with in a pastoral counseling situation, (3) to determine from Nazarene pastors whether the current professional training for Nazarene pastors equips them for the subsequent counseling aspects of their ministry, (4) to derive from Nazarene pastors recommendations for professional training, (5) to determine the significant implications for the professional training of Nazarene pastors as derived from this study.

THE NEED FOR THE STUDY

The complexity of modern life places heavy demands upon the minister as a counselor. In spite of increased knowledge and insight into the motivations of the individual's behavior the last half century has brought an ever increasing stream of human dislocation and misery. Social disorganization in guise of war, divorce and delinquency show upward trends (Allport, 1950). Alcohol and suicide are taking an ever

growing toll. Conflicts have been created by racial attitudes and conformity to the cultural demand for material success and prestige (Powdermaker, 1953). Our culture is marked by depersonalization of human beings and universal confusion about moral values (Carrier, 1951). Mechanization has changed the pattern of life, and automation has created economic pressures for some by eliminating the only job for which they have been trained. As a result of these and other pressures in modern life, mental illness has become a problem of massive proportions (Plunkett & Gordon, 1960). The mental hospital represents the end result of society's failure to cope with the mental and emotional problems of its members. Experiments with out-patient clinics and psychiatric wards in general hospitals have shown that one-third of those now entering mental institutions could be kept out altogether by intensive treatment during the early stages of the disease (Shaffer, 1954, p. 311). This has important implications for the minister since he holds such a strategic position in detecting and treating potential neurosis and mental illness.

The writer's investigation was prompted by the noticeable lack of studies concerning the theologically conservative pastor's counseling responsibilities, the type and frequency of problems dealt with in a counseling situation, and the extent to which his academic training is adequate for his professional practice in counseling. In the past,

orthodox theologians have criticized the pragmatism of modern mind healing which emphasized health of the body and emotional adjustment but left no room for the necessity of a moral life. For this reason many conservative ministers have counseled entirely within a theological framework in a conviction that a thorough religious commitment solves all problems. Through lack of psychological knowledge and insight many of these pastors have preached, prayed or passed moral judgment when the individual actually needed therapeutic counseling. Conservative ministers have often shrunk from the counseling that necessitates an intrusive intimacy with the inner psychological motives, considering it a degrading experience. As a result many persons have looked on these ministers in general as rigid, authoritarian, and unrealistic. If this has been a pattern in the past of the conservative minister, it should be useful to evaluate the strengths, weaknesses and therapeutic value of the counseling program of the contemporary conservative minister. Because of denominational affiliation the writer was particularly interested in the Nazarene minister.

The need for examining and analyzing the present and future role of the Nazarene minister as counselor and his adequacy in meeting the increasing demands of the individuals within and without the church resulted in the following hypotheses:

1. There is no significant relationship between the amount of time pastors spend in counseling and:

- a) a regional distribution of the pastors
- b) the size of the community
- c) the size church served by the pastors
- d) the dominant age groups of the church membership
- e) the age of the pastors

2. There is no significant relationship between the type of problems the pastor deals with in counseling and:

- a) a regional distribution of the pastors
- b) the size of the community
- c) the size church served by the pastors
- d) the dominant age groups of the church membership
- e) the age of the pastors

3. There is no significant relationship in the analysis of the adequacy of professional training of Nazarene pastors for counseling and:

- a) a regional distribution of the pastors
- b) the size of the community
- c) the size church served by the pastors
- d) the dominant age groups of the church membership
- e) the age of the pastors

4. There is no significant relationship in recommendations for counseling training derived from Nazarene pastors and:

- a) a regional distribution of the pastors
- b) the size of the community
- c) the size church served by the pastors
- d) the dominant age groups of the church membership
- e) the age of the pastors

DEFINITION OF TERMS

A Nazarene Pastor is a minister who holds credentials in the Church of the Nazarene and is serving in the capacity of a pastor of said denomination.

Pastoral Counseling is a voluntary person-to-person relationship in which the pastor and the client focus attention for the purpose of clarifying, understanding, and gaining a new perspective of the feelings and problems for which the counselee is seeking aid for a meaningful solution from the minister.

Problem Categories for the purpose of this study will be considered in four groups: (1) Emotional-Interactional deals with those experiences and dispositions which reflect inter-personal and intra-personal maladjustments in personal and social interaction (such as: inter-personal relationships, mental health, alcoholism, illness,

death, grief, physical disabilities, guilt). (2) Religio-Philosophical deals with those conceptual and ideological relationships of the individual to his beliefs about ultimate values (such as: religion, philosophy of life). (3) Marriage-Family deals with those experiences and relationships which are related to the various intra-familiar problems (such as: marriage, family crisis, parent-child relationships, divorce, sex, pre-marital). (4) Educational-Vocational deals with those relationships involved in the guidance or evaluation of education or vocational adjustment.

The Geographical Zones are as follows: East and Northeast-- Maine, New Hampshire, Vermont, New York, Massachusetts, Connecticut, Rhode Island, New Jersey, Pennsylvania, Maryland, Delaware; Southeast Zone-- West Virginia, Virginia, Kentucky, Tennessee, North Carolina, South Carolina, Georgia, Florida, Alabama, Mississippi; Central Zone-- Ohio, Indiana, Michigan, Illinois, Wisconsin, Iowa, Missouri, Minnesota; West Central Zone-- Texas, Louisiana, Arkansas, Kansas, Nebraska, South Dakota, North Dakota; Southwest Zone-- New Mexico, Colorado, Arizona, Utah, Nevada, California; Northwest Zone-- Wyoming, Montana, Idaho, Oregon, Washington.

Course Recommendations by Nazarene pastors have been divided into three categories: General Psychology-- social psychology,

abnormal psychology, adolescent psychology, child psychology, psychological testing; General Counseling-- psychology of personality, interview techniques, personal counseling, supervise practice in counseling, marriage and the family, personality and culture, the process of psychotherapy; and Pastoral Counseling and Psychology-- psychology of religion, pastoral psychology, pastoral counseling, clinical pastoral training, ministry to the sick, pastoral psychiatry, pastoral care, sociology of religion.

Approaches to Pastoral Counseling for the use of this study are classified in item 11 of the questionnaire which asks the following questions: "In your experience do you feel that counselees seeking pastoral counseling: (1) want the pastor to give them an answer to their problems? (directive) (2) want the pastor to help them work out a solution to their problems? (eclectic) (3) want an understanding atmosphere in which they can eventually work out a solution to their problem when the emotional block has been removed through the counseling interview?" (non-directive)

Clinical Training is an opportunity for theological students or ministers to learn pastoral counseling through interpersonal relations within the context of an appropriate institutional setting, where qualified persons individually supervise a program of relating

theory to practice, resulting in an integration of theological perspective with psychological insights.

DELIMITATIONS

1. This study will be limited to one aspect of the pastoral ministry, pastoral counseling as previously defined.

2. The study will be further limited to that of Nazarene pastors of the United States (excluding Alaska and Hawaii).

3. This study will be limited to the statistical church year of 1961.

ORGANIZATION OF THE THESIS

The following is an outline of the thesis:

Chapter I presents an introduction to the study, purpose of the study, need of the study, research hypotheses, definition of terms, delimitations of the study, and organization of the investigation.

Chapter II is concerned with a review of selected literature related to the problem.

Chapter III presents the methodology of the study, selection of the sample, instrument used, method in securing respondents, and analysis procedures.

Chapter IV contains the results and discussion of the investigation, and implications for professional counseling training.

Chapter V is a summary of the study with recommendations for further research.

CHAPTER II

REVIEW OF RELATED LITERATURE

THE HISTORY AND EVOLUTION OF PASTORAL COUNSELING

Because of the "mysteries of life and death" and the problems he encounters, man has always looked to someone for personal help and counsel. The rise of the religious specialist came as a result of man's multifarious attempts over the centuries to rid himself of the anguish of mental pain. These specialists have been identified in various societies by many names. Whether mental healing is applied through magic, prayer, medicine or analysis, the essential mechanics involved are those of penetration of the patient's feelings, thoughts and attitudes by an external influence and the patient's absorption of this influence.

According to Kemp, "There apparently has never been a time or place where men did not seek out their religious leaders for personal help--advice, guidance, counsel, assurance, forgiveness, comfort" (Kemp, 1947, p. 3).

The earliest specialists have been identified by anthropologists as medicine men or shamans. Frazier (1922) points out that modern ministers evolved from these religious specialists. Hoebel identifies the first religious specialist as the shaman and states:

...long before there were chieftains, kings, judges, lawyers, artists, teachers, or prostitutes, there were shamans and possibly priests.... We have seen societies in which there were no clearly defined political leaders or any other non-religious functionaries. But no anthropologist has yet penetrated to a tribe so primitive that it does not have shamans. (Hoebel, 1949, p. 414).

The functions of the shaman appear to be many. He apparently held the same position in history as the present medical doctor and minister. He was both priest and physician and as such was the repository of all that a tribe knew, feared, and believed (Morey, 1915). Haggard relates the function and methodology of the early medicine man as a counselor-healer.

It was the business of the medicine man to drive away the demon, outwit the sorcery of the enemy, and placate the dead. To accomplish these ends, he distracted the patient's attentions from his sufferings; he inspired him with confidence in his recovery; and finally left him with a token to remind him of the efficacy of the cure (Haggard, 1929, pp 282-283).

Johnson also described the multiple role of the shaman as counselor-healer.

He was the tribal authority on the mysteries of life and health, of magic and religion. In times of danger he was consulted to ward off the evils of sickness, draught, and threatening enemies. From his traditional lore he would bring words of counsel, the arts of healing, and religious ceremonials of worship. He was the ancestor of the priest, the physician, and the pastor... performing the function of all three (Johnson, 1953, p. 19).

In his function as priest, rainmaker, healer, sorcerer or psychiatrist, the shaman assumed an authoritarian role in solving

problems and calming fears. Thus the element of authority became an integral part of early pastoral counseling.

The progression of methods and theories of healing by religious counselors follows an irregular, interdigitating pattern. Each method developed proved effective in its time, yet each was superseded by another. The methods of healing have developed throughout history from experience of what worked in previous cases.

There were many others beside the shaman who emerged in the primitive world as religious advisors and healers. For example, a powerful caste of priests called haruspices existed who were mediators and advisors. These counselors appeared in the early Etruscan societies. The Etruscans were dominated by a tremendous fear of the gods and an obsessive need to discern the will of the gods (Epic of Man, 1961).

The priests, pontiffs and augurs emerged as the early religious leaders of Rome and were the guides, consultants and interpreters of the divine will. The augurs in particular were considered to be "specially versed in interpreting the divine will" and were patterned after the haruspices (Morey, 1915, p. 323). They foretold the future and explained the will of the gods to the people. Nothing of importance could be done without asking advice of the augurs.

Among the Celtic tribes, the druids and priests performed a similar function. Officials also existed in ancient Babylon who

conducted both public and private penance, using manuals similar to those later used as Christian manuals of confession (Kemp, 1947, p. 3). Among ancient civilizations, that of India seems to have given the greatest prominence to the spiritual counselor. These counselors were called the guru and they gave instruction to the people and were the directors of their conscience (McNeill, 1951).

The early Irish also had a guide of souls called an anmchara, often translated "soul-friend." The anmchara heard confessions and gave authoritative counsel. McNeill quotes a saying attributed to saints of the sixth century, "Anyone without an anmchara is like a body without a head." He concludes that "it would appear that everybody was supposed to have his spiritual guide" (McNeill, 1951, p. 117).

The elder or startsy existed in ancient times in the East and still exists today in Russia. Western interest has been created in this particular religious healer by the popularity of Dostoevsky's book, The Brothers Karamazov. The startsy here is represented by the elder "Zossima." In Book I, Chapter 5, Dostoevsky discusses the role of the elders and Zossima in particular: "What was an elder? An elder was one who took your soul, your will, into his soul and his will. When you choose an elder you renounce your will and yield it to him in complete submission, complete self-abnegation" (Dostoevsky, 1880, Ch. 5).

Faith in persons is undoubtedly one of the most effective resources for healing at the point where emotional attitudes affect health.

Johnson describes some of the early methods of faith healing:

The Ebers papyrus dated before 1552 B.C. describes the Egyptian treatment of healing by the laying on of hands with ceremonial formulas. The Greeks, deriving their medical knowledge from Egypt, practiced similar treatment with prayer. The Greeks practiced healing by reference to the god Asclepius before 500 B.C. Excavations at Epidaurus produced inscriptions giving the rites used. Patients brought sacrifices, cleansed themselves with holy water, submitted themselves to ceremonial acts performed by priests and fell into a deep sleep (hypnotism?) (Johnson, 1959, p. 247).

Identified with the Greek god of healing, Asclepius, was the Roman god Aesculapius. Leff speaks of the healers in the Roman Temples of Aesculapius who encouraged the purging of the soul in "mental cartharthis" (Leff, 1957, p. 2).

The progress of philosophy and religion was greater than the advance of medicine; this eventually resulted in the emergence of the philosopher as the healer of souls. The rise of Rome brought many Greek philosophers into Roman households either as slaves who received their freedom or as free men who were impoverished. Such Greeks might come either as tutors, who would stay in the household, or as companions useful for various purposes in view of their versatility. According to Nock, these men were the "equivalent of domestic chaplains" (Nock, 1933, p. 178). We find them throughout the philosophical literature, lecturing, consoling, and counseling. For instance, in the writings of Tacitus, the philosopher-counselor is found in the

person of Demetrius the Cynic at the deathbed of Thrasea (Tacitus, par. 34).

Socrates was a great forerunner of the many who have since searched out and sifted the thoughts of men for the healing and well-being of their souls. McNeill states, "Socrates was like many a Christian in that having keenly felt his own soul endangered, he spent his life admonishing others to attend to the welfare of theirs" (McNeill, 1951, p. 25). Although the philosophers would have to be considered as pastoral counselors in a liberal sense, they were included in the study because the rationalism of the Greek philosophers was one of the first regulating factors in healing.

There were many Biblical prototypes of the present day pastoral counselor. Among the early Israelites, disputes were settled and problems were solved by the head of the family or tribe. During the Exodus and the wanderings in the wilderness, Moses was the outstanding figure. On at least one occasion and no doubt more, the people stood about Moses "from morning till evening" bringing their disputes, inquiries, and seeking advice. At the advice of his father-in-law, Jethro, Moses delegated some of his more minute counseling responsibilities, and he continued counseling only in the "hard cases" (Exodus 18:13-24). In the time of the Judges, Samuel was the outstanding counselor. He traveled on a circuit, giving judgments, teaching, hearing controversies and counseling whenever the need arose.

Samuel's effectiveness as a counselor is seen in Saul's desire to have him raised from the dead for consultation (I Samuel 28:8-25). Solomon gained worldwide reputation for his wisdom in handling the many problems and practical matters of the day. Jeremiah was a pioneer of personal religion and was interested in the inner life of his people. Johnson (1959, p. 15) describes him as a psychologist by nature.

Modern historians recognize in the wise men of Israel a common phenomenon of ancient Semetic Cultures. They were similar to the class of dispensers of guidance in Egypt and Babylon. The Psalmist used the typical expression and ideas of the wise men and sages. The writings in the Psalms are rich in their insight into human personality. Here is found confession, guilt, frustration, remorse, forgiveness, elation and all of the other emotions experienced by the individual. The book of Proverbs is written in a sententious style and is a practical expression of the accumulated wisdom of the wise men. Kemp states, "It is safe to assume that such writing was once given as advice to many different individuals in a manner and in situations that would today be described as counseling" (Kemp, 1947, p. 6).

The pastor's ideal as a counselor may be seen in the ministry of Jesus. Kunkel refers to Jesus as the "greatest psychologist of all time" (Kunkel, 1943, p. 12). Stolz considers Him to be the greatest personal worker who ever lived (Stolz, 1943, p. 60). Many of the recorded interpersonal relationships of Jesus could be considered

preaching but could also be described as counseling. Rutledge states that "...while engaged in one activity, He was also teaching, preaching, and counseling" (Rutledge, 1959, p. 270). The genius of Christ's ministry lay in His personal contact with man. Jesus had unique insight into the needs and problems of people and numerous incidents appear in the New Testament in which He deals with individual needs. In His personal conversations with Mary Magdalene, the woman at the well in Samaria, and Zacchaeus, we see Jesus in His treatment of the unintegrated individual, and He always saw the potential in men that others could not see.

A new appreciation of the insights and methods of Jesus has come with the modern emphasis on psychology. Kemp discusses Jesus' method of dealing with distraught cases:

He began His approach by requesting the person to "be quiet," on occasion He definitely associated the healing of disease...with the forgiveness of sins, and again and again He said "your faith has made you well." The tremendous effect of guilt on personality and the amazing power of faith are now common knowledge, not only in religious circles, but in scientific circles as well. Such instances are highly suggestive in the light of modern knowledge of psychotherapeutics (Kemp, 1947, p. 12).

As the world moved into the middle ages, the church like everything else was effected. When everything else went into decline the religious leaders were not exempt. The primary motive of religion at this time was one of escape and witchcraft, and magic was the outstanding abnormality of the day. Beginning in the fourth century, the

church took full responsibility for excoriations and in doing so became the psychotherapists of the middle ages.

It was Augustine who formulated and systematized the medieval principles of psychology that determined the content and scope of both theology and psychology for centuries. Augustine's "Confessions" have been referred to as "one of the most remarkable psychological disclosures in all literature" (Kemp, 1947, p. 33). In his writings, he lists the duties of the pastoral guide as he sees them.

Disturbers are to be rebuked, the low-spirited to be encouraged, the infirm to be supported, objectors confuted, the treacherous guarded against, the unskilled restrained, the haughty repressed, litigants pacified, the poor relieved, the oppressed liberated, the good approved, the evil one borne with; and all are to be loved (McNeill, 1951, p. 100).

The practice of confession and penance was a basic influence in this period. The sacrament of penance involved contrition, confession, and satisfaction. In the confessional, the priest came into direct encounter with each individual and subjected him to a thorough spiritual examination. The clergy were instructed in probing the most secret places of men's lives in order that confession be made full and that nothing be withheld (Blainton, 1956). Instruction during this period came from manuals called the "Penetentials." These Handbooks of Penance appeared about the sixth century and served as a guide for the clergy in their care of souls. They were an important factor in the transformation of the confession from a public to a private one.

Many of the manuals, like later pastoral counseling, used the thought forms and analogies of medicine (Kemp, 1947, p. 28). The "Penetentials" had many weaknesses and have been criticized as promoting casuistry, but despite this they had as their main objective the reconstruction of personality (McNeill, 1951, p. 135).

A survey of the evolution of psychological healing discloses several forces at work in the ancient world up to the early Christian era. The first were the forces of primitive supernaturalism in which magic was interspersed with incantations. Magic is characteristic of primitive thinking and was an essential aspect of healing in antiquity and among non-literate groups. The second force was the enlightenment of the Greeks, wherein mental phenomenon tended to be regarded by Hippocratic physicians as a natural occurrence. The third force, growing out of the primitive practice of fetishes and amulets, extended into faith-healing through organized theology. This healing force, discovered, exploited and organized by the church of Rome contributed significantly to mental healing.

Throughout history the doctor and minister were most of the time the same person. In fact an overlapping between religion and medicine continued throughout the middle ages, and in England as late as 1858 the Archbishop of Canterbury was still granting medical diplomas (Maddox, 1923, p. 193).

The Protestant Reformation brought about many changes. Probably the two most important ones were the emergence of the Protestant pastor and the abandonment of the confessional. Protestantism began to develop a different approach and philosophy toward the problems of individuals. Luther, although weary of the superstition that had accumulated around the Confessional, did not want to abolish it entirely. He suggested rather that it be utilized as an optional and confidential interview between the pastor and the individual (Kemp, 1947, p. 39).

The pastoral concern of Luther is prominent in his sermons and letters of spiritual counsel. He felt that the visits of the pastor were as important as the physician's visits, and he was convinced that many bodily diseases were the result of a "morbid spiritual condition" (Kemp, 1947, p. 40). Luther's counseling was largely directive but was the first step away from priestly authority (Bachman, 1952, p. 35-42). He emphasized the scriptural approach to the individual's problems, and the Bible is thought by many to have been the most important tool in his counseling.

A favorite Reformation doctrine was the idea that every Christian is a priest to his neighbor. This greatly encouraged mutual or group procedures in guidance. Both Luther and Calvin felt the importance of mutual communication in dealing with the problems of the individual. Luther saw value in the confessional, as has been mentioned previously, in terms of a confidential interview between the parishioner and the

pastor. This mutual communication is important in terms of the present day concept of rapport in counseling.

The pattern of society changed radically during the Puritan Age in England. Meiburg discusses this change:

Many new situations were created, and people felt acutely the need of guidance in making moral decisions. It is not surprising that in the atmosphere of moral earnestness characteristic of this time, pastoral counseling came to be regarded as one of the most important as well as one of the most difficult of all pastoral duties (Meiburg, 1959, p. 10).

During this period an impetus to counseling was the attention which the ministry gave to catechizing. There were public teaching periods and these were quite often followed by a systematic visitation in the home. At times the minister, who served as the catechist, extended the hospitality of his own home for this purpose.

We have record of several pastors during this time doing extensive pastoral counseling. The Puritan ministers not only made use of groups for pre-counseling, but such men as Henry Scougal stressed preaching as an important tool in arousing the desire for personal counseling. Another pastor, John Dod, did his pastoral counseling in the church building itself in order to be readily accessible. When those who came were unable to state their questions and problems, he would gently help them to "find the sore" and then demonstrate such compassion as to encourage them to return (Hudson, 1956, p. 199).

Baxter was another well-known pastor-counselor during the Puritan Age. Baxter was an advocate of personal work by the pastor and felt very strongly about it. In fact his book, The Reformed Pastor, was written primarily to urge upon other ministers a method of private instruction of families (Hudson, 1956, p. 193). To any minister who objected that he had no time to counsel, Baxter recommended hiring an assistant out of his own salary, because he felt it was better to live on part of his salary than to have any of his members neglected (Kemp, 1947, p. 42). He arranged to spend at least an hour with each of the families in his parish every year. In a series of meetings at his own home, Baxter developed a kind of group therapy approach. Here people discussed and shared their problems with one another. If their needs weren't met in group therapy, he then led many of them to seek private counseling (Meiburg, 1959). Baxter employed the use of catharsis and prayer and also advised the counselor to give the counselee several scriptural "promises" for the person to "roll over and over in his mind" (Hudson, 1956, p. 198). Particularly significant was Baxter's observation that it is important to have the help of a physician in dealing with a depressed person because "till the body be cured the mind will hardly ever be cured" (Hudson, 1956, p. 197).

These illustrations give evidence that the Puritan Age was also a time of significant development in the pastor's heritage as a counselor.

The pastor of today employs many of the same procedures as were used then; such as, keeping confidences, nonjudgmental acceptance, listening, and empathy.

America in the nineteenth century was the birthplace of many new trends in the cure of souls. Bushnell and Gladden were outstanding pastoral counselors during this period. The entirety of Bushnell's ministry was spent in one parish. His book, Christian Nurture, which was first published in 1847, was controversial. He received much criticism from orthodox evangelicals on his thesis that the child should grow up a Christian and never know himself as being anything else. Bushnell had a tremendous understanding of personality formation. This is seen in his comments on the importance of infancy in the personality (Bushnell, 1923, pp. 205, 211-212). He stresses over and over the significance of the attitudes of parents that determine the atmosphere of the home which the child takes over unconsciously. He said:

If the child is handled fretfully, scolded, jerked, or simply laid aside unaffectionately, in no warmth of motherly gentleness, it feels the sting of just that which is felt towards it; and so it is angered by anger, irritated by irritation, fretted by fretfulness; having thus impressed just that kind of impatience or ill-nature which is felt towards it, and growing faithfully into the bad mold offered, as by a fixed law. There is great importance, in this manner, even in the handling of infancy. If it is unchristian, it will beget unchristian states, or impressions. If it is gentle, even patient and loving, it prepared a mood and temper like its own. There is scarcely room to doubt, that all crabbed, hateful, resentful, passionate, ill-natured characters; all

most even, lovely, firm and true, are prepared, in a great degree, by the handling of the nursery (Bushnell, 1923, p. 203).

This quotation reveals the practical insight which Bushnell had into the meaning of human nature and the development of human personality. Many of his ideas were far ahead of their day and are now being emphasized, due to the influence of modern psychology.

Gladden, usually associated with the social gospel movement, in his book, The Christian Pastor (1899), describes the pastor as a "friend" above everything else. Gladden felt that the minister should be the one person in the community to whom anyone should instinctively turn when having problems. He seemed to be cognizant of the close relationship between mental and physical health and recommended cooperation with the medical profession. He observed that there are many things that the doctor cannot cure with drugs "that would be quickly put to flight if the load of shame and remorse that are resting upon the heart could be removed" (Gladden, 1899, p. 186).

Although pastoral counseling is a relatively new field, it is clear that the religious practitioners throughout history have played a significant role in healing and guidance. Their psychology in the main grew out of their own experience and much of their counseling produced outstanding results. It has been impossible in a paper such as this to name and evaluate every derivative of the present pastoral

counselor, but perhaps the representative group presented will add to the perspective in the study of the pastoral counselor. It is apparent that no matter what his label was--shaman, augur, priest, or pastor--the religious counselor throughout history had one supreme aim--that of restoring emotional health.

THE DEVELOPMENT AND FORMULATION OF A SCIENTIFIC APPROACH TO PASTORAL COUNSELING

The role of the minister changed considerably during the late nineteenth and early twentieth century. Prior to this time psychology had been considered a branch of philosophy but now it emerged as an empirical science. Kemp feels that this had a more profound influence on the clergy than any factor or development since the Reformation (Kemp, 1947, p. 69). Elliott affirms this when he states: "...the fact is that the development of psychology has more bearing upon religion than any other scientific advance" (Elliott, 1927, p. 7). The authoritative role of the minister began breaking down during this period, and the healing function which he had always performed was gradually absorbed and assumed by the medical practitioner. This changing emphasis of the minister's counseling responsibility is referred to by several writers. Hulme notes that the pastor's role moved from the center of community life to the periphery (Hulme, 1955, p. 10). Dicks also refers to this change when he states:

Gradually the physician's consultation has been substituted for the ancient rite of confession and from that have come other substitutions until now the medical profession has largely taken over the care of the total person. Today the clergy is facing expulsion from the very task that brought it into existence--the care of souls. It gains little to sit back and point out the failure of the doctor with his limited conception of life, in his spiritual care of individuals. He is at work at his task; the same cannot always be said of the clergy (Dicks, 1944, p. 133).

Landis feels that ministers have been too preoccupied with "morals, philosophy, and shortcuts to heaven" and as a result "have allowed themselves to be diverted from their proper place in our present culture" (Landis, 1947, p. 24). He further charges that "they are not adequately meeting a very real human problem which society legitimately expects them to handle" (Landis, 1947, p. 25).

The past half century has witnessed an increasing interest in the pastoral role of the clergy. The arrival of psychology has necessitated a re-thinking and a re-evaluation by the minister of his historic function as a healer of souls. The contemporary pastor is becoming more and more cognizant of the fact that the same psychology which displaced him from his healing role also has significant contributions to make in the area of pastoral counseling. Psychology has provided new insights for understanding human nature and has made available new techniques and methodology which can make the pastor's counseling more effective if utilized.

The development and formulation of a more scientific pastoral approach is indebted to many persons in the psychoanalytic field. Although many of them were not religious themselves, many of their basic ideas are used by pastors today in their counseling role. The pastor's interest in depth psychology and counseling itself is perhaps to a large degree indebted to the pioneer work of Freud, who set forth many principles that are still used in modern psychotherapy. To Freud, psychoanalysis was a theory of human conflict and therapy to heal the conflict. He perceived a powerful and unrecognized unconscious life within the human personality which affected the conscious life but had its own almost independent existence (Freud, 1924a). To Freud (1952) the personality structure was composed of unconscious instinctual drives (the id), and of a censoring function belonging partly to the unconscious and partly to the conscious (the superego). He believed that emotional turbulence was the result of inner conflict occasioned by the inevitable clash between the deep desires of the individual and the opposing wishes and restraints of society. In his writings, certain psychic mechanisms are described such as, repression, projection, and sublimation by which an individual seeks to deal with unacceptable impulses. These mechanisms at times enable the individual to hold his disintegrating person together, but they also contribute to inward stress and often, ultimately, to neurosis or psychosis.

From these studies, Freud worked out the concept of psychodynamic development which is so essential in modern therapeutic work. He developed many other theories and concepts but possibly the fundamentals of his psychology could be summarized as the importance of repression, the importance of the sex drive, and the importance of the infantile period (Woodworth, 1931). Unacceptable as Freud has been, in some areas, to many ministers, he was very realistic about the seemingly insatiable human drives and impulses which correspond to Christianity's description of man's sinfulness and perversity.

Freud had many followers and also much opposition. Two of his most famous disciples were Adler and Jung. Kemp (1947) feels that these men had perhaps an even greater influence on the work of the clergy. Adler's school, called "Individual Psychology," developed an emphasis on the centrality of man's drive for superiority and power. He promoted the theory that a feeling of inferiority was the basic factor in all neurosis and that everyone had a will for power, a desire to excel and to achieve dominance and superiority. He went so far as to ascribe almost all greatness to effort educed as compensation for some physical or mental defect which has produced inferiority (Adler, 1917). With these ideas, Adler is said to be the "father of the inferiority complex" (Kemp, 1947, p. 86). Van Deusen states that the need, as seen by Adler, is to "see ourselves

realistically in the context of other persons; to accept what we are so far as it cannot be changed; and to surpass what we are by fulfilling what we potentially are" (Van Deusen, 1960, p. 27). Adler considered the self-assertive impulse the dominant force in life rather than the sexual impulse. Although he recognized the importance of the sex drive, he contended that Freud greatly overemphasized the part it had to play. This school made much of the child's position in the family and also stressed the importance of the infancy and childhood period but from a different viewpoint from Freud's. Adler's system is much simpler than Freud's and is much more acceptable to the minds of many of the clergy.

Jung (1916) developed a rival school called "Analytical Psychology," in which he presented some distinctive concepts of his own. Jung took exception to the strong naturalist orientation of Freud and introduced spiritual concepts and aspirations. He strongly emphasized the individual's bond with past and present mankind, as epitomized in the collective unconscious and the archetypes. His concept of the unconscious includes not only experiences that have been repressed but other matters that have been forgotten or acquired unconsciously. One of his most noted concepts is his development of the idea of psychological types (Jung, 1923). His claim was that men could be divided into one of two groups, extraverts or introverts and that their physical make up determines which predominates, the individuals in

each group being divided according to whether they are more swayed by sensation, feeling, thinking, or intuition. Jung's repudiation of a materialistic view of the psyche, assertion of the collective conscious re-emerging with every individual, and reconstruction of the patient's faith as a resource in mental healing have made him an ally of the pastoral counselor. Whereas Freud was thorough when he had successfully completed an analysis, Jung seeks to lift the patient to a higher plain of living after analysis. What he refers to as "individuation" is an integrating experience similar to spiritual conversion (Jung, 1923).

There is a variety of other approaches which have been studied by the clergy and either modified, accepted, or rejected by them. Watson's "Behaviorism" (1925) attracted a lot of attention from theologians because of its seemingly direct opposition to the beliefs of the church. Watson discarded and rejected the notion of mind and consciousness or mental processes completely on the presumption that it was superstition and unfit for scientific investigation. Although his theory aroused much opposition, it also stimulated much new investigation by the clergy into the meaning of human nature. Rank's (1945) contribution is spoken of as "relationship therapy" and "will therapy." He felt that insight into the cause and nature of the individual's problems is not of itself sufficient to achieve therapy, and promoted the idea that it is the relationship in the therapeutic situation which is the

causal factor in healing. James (1952) was one of the first to recognize the value of studying the abnormal to gain an understanding of the normal. Kemp refers to James' Principles of Psychology as the most interesting book on psychology ever written (Kemp, 1947, p. 70). James' motivations and general attitudes coincided much of the time with that of the clergy. Horney (1937; 1945) sees the dynamic troubles of people as coming in a very large part from cultural influences. She feels that much of what Freud attributed to instinct is actually a result of social interaction. According to this theory the neurosis develops not principally from the repressing of instinctual drives in response to society's pressures, but from conflicting wishes and conflicting attempts at solving one's problems by the way one relates to society. Her therapy emphasized synthesis as well as analysis. "Client-centered counseling" as advocated by Carl Rogers (1942; 1951) has also received considerable attention from the clergy. The purpose of this type of therapy is in close harmony with that of the pastoral counselor, which, as stated by Rogers (1951), is to assist the individual to grow so that he can handle not only the present problem but any future problems as well. Client-centered therapy is predicated on the belief that the patient possesses inherent potentialities for growth which need only to be released by the therapist. The patient is responsible for his own destiny and has the right of choice in the solution of his problems, and instead of imposing values

on the patient the therapist must promote the free expression of feeling in the counseling relationship.

It is apparent from the many different points of view of the various psychotherapists that psychology is full of contradictions. Each approach presents some areas of truth and each represents some factor which was neglected by other approaches. It is also clear that no one point of view seems to be adequate in itself to explain the processes of psychotherapy or the human aspects of mental and emotional health. The implications of the findings of such writers and such psychologists have been profound and far reaching, and have stimulated varied reactions from the clergy. Some opposed all psychological developments and discounted all of its values many times without proper study or evaluation. Others opposed certain aspects, such as the extreme "Behaviorism" of Watson or the complete sexuality of Freud. Such conceptions could not be reconciled with religion. In turn, some psychologists such as Freud were outspoken in their opposition to religion.

Freud emphatically voiced his antagonism toward religion in many of his writings. To him, supernatural religion was an illusion, and religious concepts were only images of the mind or psychological projections of inner needs. As early as 1904, he spoke of the mythological and religious view as nothing other than psychological process "projected into the outer world" (Freud, 1928a, p. 309). In 1907, he

noted the compulsive character of ritual acts and concluded that religion might well be called a "universal obsessional neurosis" (Freud, 1924b, 25-35). In 1910, he further described religion as rooted in the parental complex: "Psycho-analysis has made us aware of the intimate connection between the father-complex and the belief in God, and has taught us that the personal God is psychologically nothing other than a magnified father" (Jones, 1957, p. 354).

In his Civilization and Its Discontents, he is emphatic in saying that popular religion is "patently infantile" and "incongruous with reality" (Freud, 1930, p. 771). In a later book, The Future of an Illusion, he finally concedes that religion has performed great services for human culture by restraining a social instinct and that it may protect the true believer against certain neurotic afflictions (Freud, 1928b). Although he admits that religion may save many people from individual neuroses by unconditional submission to God's inscrutable decree, yet he concludes that man could arrive at the same place by a shorter route. Psychologists who referred to religion in this manner were of course unacceptable to the clergy and as a result religion and psychology have in the past been incompatible on the whole. Today the relationship between religion and psychology is one of the more important topics of discussion by the workers in both fields (Elkin, 1960; Foster, 1954; Gayle, 1956; Guntrip, 1956; Landis, 1947; Leslie, 1961; Group for the Advancement

of Psychiatry). Conferences between pastoral counselors and medical psychotherapists are becoming increasingly common. Gradually psychotherapists who have been strongly influenced by psychoanalytic concepts are becoming dissatisfied with the presuppositions upon which the theory of therapy is built. The possibility is being studied as to whether the Freudian concept of the nature of man is adequate for an understanding of the individual in the atomic age. Guntrip in his recent book, Psychotherapy and Religion, emphasized the inadequacies of science without religion:

Four centuries of the gospel of science find us in an even worse plight than the seventeenth century, in a world racked by hatred after the two worst wars of all time and labouring under the shadow of a third possible war on an atomic scale. It is clear that science has done no more than give us tools. We still have to settle the question "In the service of what values shall we use them." We can only settle that by returning once more to the spiritual approach to man, though retaining possession of the achievements of technology and science at the same time. We may not now be unscientific, but neither may we be nothing but scientific (Guntrip, 1956, p. 165).

Many have discovered that the rate of recovery through psychoanalytic methods has not lived up to its early promise. The result has been a gradual modification of psychoanalytic practice in directions that make cooperation with religious workers far more possible. There is a growing interest in considering the place that value-concerns hold for therapy. Two different symposiums, one in 1958 (Durnall, Moynihan, & Wrenn) and the other in 1959 (Meehl, Mann,

Kagan, Curran, & Segal), explored the question of religious factors and values in counseling. Most of the eight participants would concur with Wrenn's views on counseling ethics: "If this profession is in want of anything, it is in a neglect of the proposition that man is spiritual as well as intellectual in nature; it is in a failure to recognize that man has a relationship to the Infinite as well as to other men" (Wrenn, 1952, p. 326). A number of other contemporary writers have considered the contribution of the pastor as counselor and the importance of religion as an integrating force. Clark's recent book (1958) places major emphasis upon the place of religion in personality. Outler (1954) believes that the psychological modes of healing could be greatly improved if their practitioners moved toward Christian presuppositions. William's (1961) major affirmation is that Christ is the integrating meaning of man's existence. Strunk also stresses the importance of religious beliefs when he states:

Man as a problem-solving creature has as his major problem the achievement of self-adequacy. In order to serve this problem he makes use of many factors, some of which may be religious in nature. If religious factors are successful he will internalize them and continue to find them useful in his dealing with the world. It is this sense that religion is always an integrating force, though it may not appear so to the external observer who does not share the same psychological field with the religious person (Strunk, 1962, p. 113).

While Freud did not recognize the value of religion in psychotherapy, there are many other psychiatrists and psychoanalysts who recognize that counseling therapy is not complete until the counselee achieves a new religious orientation. Karen Horney's works, especially Our Inner Conflicts (1945), indicate clearly that ethical and moral questions are not peripheral. The revisions of Freudanism made by Rank were radical and for their bearing on religion revolutionary. Rank affirmed the operation of spiritual forces not acknowledged by Freud. In his book, Beyond Psychology (1941), he emphasizes the need for a religious dimension to fulfill the meaning of life. "Man is born beyond psychology and he dies beyond it, but he can live beyond it only through a vital experience of his own-- in religious terms, through revelation, conversion, or rebirth" (Rank, 1941, p. 16). Rank sought to make psychoanalysis instrumental toward a comprehensive spiritual transformation of personality.

Adler recognized any form of real religion as of great value to the individual and commented that the idea of God was the most enlightened thought that had occurred to mankind. He frequently spoke to groups of ministers and said he felt they might be the best to spread his psychology, because their profession was already one of good will (Kemp, 1947, p. 88). Adler felt that the clergy had a distinct advantage over psychiatrists for no question of a fee was involved with the person they were helping.

Perhaps the most distinguished among those who from the scientific side have made contact with religion is Jung. Jung strongly supports the rapprochement between religion and psychology, especially in his book Modern Man in Search of a Soul (1934). This book, as well as other significant volumes he has written, attracted much attention from the clergy because of his explorations of religious subjects. According to his theories, the God image is to be the reconciling symbol for drawing together the divisive fragments of conflicting life. Such integration of personality is the achievement of maturity and the goal of psychotherapy. He noted that the neuroses grow noticeably more frequent with the decline of religious life and further asserts his belief that religion is essential to healing when he states:

Among all my patients in the second half of life--that is to say, over thirty-five--there has not been one whose problem in the last resort was not that of finding a religious outlook on life. It is safe to say that every one of them fell ill because he had lost that which the living religions of every age have given to their followers and none of them has been really healed who did not regain his religious outlook (Jung, 1934, p. 264).

Dr. Ira Progoff in The Death and Rebirth of Psychology (1956) presents an interpretative evaluation of the works of Freud, Adler, Rank, and Jung and concludes that although modern psychology began as part of the protest against religion, the paradoxical outcome has been a reaffirmation of man's experience of himself as a spiritual being (Progoff, 1956, p. 3).

At the close of the nineteenth century psychologists became interested in studying religious experience, and the psychology of religion emerged as a new influential field of investigation. In the main, this new field of investigation applied the findings of general psychology to the field of religion. An American, Jonathan Edwards pioneered in this psychological approach to theology and wrote the first outstanding modern work on the subject, A Treatise Concerning the Religious Affections. As early as 1881, G. Stanley Hall (1904) was studying the place of religious conversion in the awakening of adolescence and was instrumental in inspiring many others to take a similar interest. Hall is generally credited with being the one who developed the questionnaire. He became the first president of the American Psychological Association and showed an intense interest in the psychology of religion. Hall founded The American Journal of Religious Psychology and Education, the first publication specifically devoted to the psychology of religion. While president of Clark University, several students also examined the field and published articles and books on the subject. One of these men, E. D. Starbuck, wrote one of the first important volumes (1899) at the turn of the century. Starbuck had not only studied under Hall but under William James at Harvard as well. He was trained in both philosophy and empirical psychology and was vitally interested in religious problems.

His book contains the summaries and evaluations of his research on conversion and on religious growth. Another practical book, The Spiritual Life, was published by Coe in 1900 while he was a professor at Northwestern University. Coe also gave much attention to conversion and adolescent difficulties as well as to a study of divine healing and the meaning of spirituality. Two years later, William James gave the Gifford lectures at Edinburgh University on the subject, The Varieties of Religious Experience, which was an exhaustive study of religious experience. His work was published in 1902 and proved to be a popular one, having gone through thirty-six printings by 1928. Strunk refers to James as "the father of the psychology of religion" on the basis of this book alone (Strunk, 1962, p. 12).

About 1910, the Psychology of Religion began to appear as a separate course in colleges and universities. An attempt was also made to systematize the findings that had been made in certain areas. One of the first of these generalizations, and one of the first to be used as a text was The Psychology of Religious Experience (1910) by Edward Ames, of the University of Chicago. Ames' psychology of religion became objective and social rather than subjective and inward. This was followed in 1912 by James Leuba's Psychological Study of Religion (1912), which was completely humanistic in its conclusions. Four years later Coe published another book,

Psychology of Religion (1916), which indicated the broadening of the field that had been taking place.

It was during the thirties that the literature of the psychology of religion began to give special attention to counseling as such. The psychology of religion up to this time had been largely an academic discipline. Its contact with the problems of people was through such methods as the questionnaire and the biographical study. The later books in this field still included the traditional investigations of conversion and adolescence but they also began to devote more attention to the cure of souls and contained more material directly bearing on pastoral counseling. In 1931, Walter Marshall Horton wrote a volume entitled A Psychological Approach to Theology. Horton felt that there should be a rapprochement between theology and psychology so that the efforts of both might be combined in promoting the development of human personality. He criticized theology because it had failed to supply the minister with any adequate general theory of spiritual diagnosis. He felt that such a theory should be based upon a body of exact knowledge concerning the varieties, symptoms, and causes of human ills and perversities, and should enable the minister to fit his gospel to human needs with precision, in the same way the skilled physician fits his remedy to the disease.

Other writers during this period also gave special attention to counseling. Dr. Henry Wieman and his wife, Regina, collaborated to write a comprehensive volume (1935) in which they included such chapters as "Psychotherapy and Religion," "Personal Problems of Religious Significance," and "Counseling Procedures." In 1937, K. R. Stolz published The Psychology of Religious Living and included a chapter on "Religion and Mental Health," which included a special reference to the religious counselor. A more recent volume dealing with the psychology of religion in Johnson's Psychology of Religion (1959). Johnson was influenced by contemporary personality psychology and has been active in the counseling and clinical movement.

The subjects investigated by these writers have been numerous and varied. Many of them have had a bearing on the counseling function of the ministry, both directly and indirectly. Some would consider all counseling as only a branch of the psychology of religion; others feel that it is an outgrowth; still others would say that they are two parallel movements that meet at certain points. Certainly it is apparent that they are closely related, and later counseling knowledge and procedures were advanced and improved because of the efforts of such men as these.

RECENT LITERATURE RELATING SPECIFICALLY TO THE FIELD OF PASTORAL COUNSELING

As the pastor became more interested in counseling, a new field of religious literature dealing with the value, the philosophy and the techniques of pastoral counseling came into being. This function had been taken care of previously in books of pastoral theology and in books of the psychology of religion. In some cases the personal work of the pastor had received a section or a chapter but very seldom were scientific findings consulted or utilized. After World War I, due to the new interest in an application of psychological and case-work methods and insights to the practical work of the pastor, a flood of books appeared dealing with this work specifically.

Mackenzie's book, Souls in the Making (1929), was one of the first of this series of books which dealt strictly with counseling. Mackenzie felt very definitely that the minister was handicapped by his lack of psychological insight, and discussed such problems as instincts, sentiments, unconscious conflicts, their origin, development and resolution, and concluded with a chapter on pastoral method and technique and the therapeutic and integrative value of religion. It was his thesis that although a knowledge of psychology offers much to the minister yet "religion alone can unify the once divided life; the adjustment to God is imperative in the fully developed and unified

personality" (Mackenzie, 1929, p. 6). The following year Halliday published his Psychology and Religious Experience (1930), a somewhat general book attempting, like Mackenzie, to show the relationship of psychology to modern pastoral work.

Weatherhead's work has been one of the real pioneer efforts in counseling. After studying psychology for five years in India and England, he began to test it in a practical way and developed a technique suitable for the minister which would not trespass on the fields of either the psychotherapist or the doctor. He has been one of the most prolific writers on the subject and has published books steadily. Although they do not all deal with this subject specifically, most of them do have references to his experiences in the field of therapeutic work. One of his first books dealing with the minister's work and his use of psychology was Psychology in Service of the Soul (1929). A similar volume appeared in 1935 and his later book, Psychology, Religion and Healing, was published in 1951. In this work he makes a critical study of all the non-physical methods of healing, examines the principles underlying them and the techniques employed to express them. It is in the last chapter "Conclusions and Signposts" that he emphasizes the need for religion in psychotherapy:

Where the psychotherapist has no religious experience of his own he will, in my opinion, be found to succeed only in-differently, compared, say, with the therapist with a spiritual

insight and faith which help in synthesis as well as investigation. A religious interpretation of life on broad lines seems to me essential to a complete integration of personality, and thus to complete health (Weatherhead, 1951, p. 485).

Weatherhead goes much further than the average pastoral counselor in using such psychiatrist's methods as hypnosis, word association, dream analysis and suggestion.

Among several books published in 1931 and 1932 were Lichliter's The Healing of Souls (1931), Cameron's The Clinic of a Cleric (1931), and Oliver's Pastoral Psychiatry and Mental Health (1932). Lichliter, who was associated with the First Congregational Church in Columbus, Ohio, was an active pastor and discusses from the pastor's viewpoint the problems of the sick, the question of sex, the mentally ill, the problems of tension, of fear and anxiety, of youth and old age, and concludes with a chapter on facing death. In his work he tries to lift the conception of pastoral work above the level of house-to-house visits. Cameron states the thesis that the church seldom meets the vital personal needs of individuals and discusses needs occurring because of fear, failure, worry, passion, temptation, etc. His book is based on his experience in his own church and his experience in conducting a newspaper "confessional page," which had a large following. Oliver's book was originally presented as the Hale Lectures at Western Theological Seminary. It is a unique book in that the author has an unusual background of training in the fields of theology,

medicine and psychology. Such varied experience gave him unusual sources from which to draw. His chief purpose is to give insights of psychiatry and medicine to ministers, social workers and anyone whose work brings him in touch with mental illness and personality maladjustments. He presents a discussion of the major psychoses and the psychoneuroses and the various ways of recognizing them as well as their probable prognosis. This writer also discusses certain other problems, such as, mental deficiency, sexual perversions, etc., which the average pastor may eventually face. Oliver believes that the minister works primarily with the tools of his profession and points out the therapeutic values of prayer and faith in God for the mentally disturbed (Oliver, 1932, pp. 286-289). The methods he suggests are usually on the directive side. It is evident that he does not endorse some analytic techniques when he indicates his dislike for the "sticky transferences" which may result (Oliver, 1932, p. 164).

Another writer who has played a significant part in relating the resources of religion to the matter of healing and guidance is Charles Holman. One of his first books published was The Cure of Souls. This book appeared in 1932 and deals exclusively with the minister's work with individuals. The writer who calls his approach a "socio-psychological" one was one of the earliest religious teachers to see the applicability of the environmental approach to soul cure.

To him the sick soul was "the maladjusted, disintegrated, ineffective, non-cooperative personality" (Holman, 1932, p. 73). Soul sickness was due to conflicting systems of basic needs and wishes. Thus, the work of the pastor was to develop an integrated personality in the individual which was built around self chosen moral purposes. His book was one of the first volumes to introduce the findings of the social case worker, along with those of the psychologist. Three years later, Holman, along with a group of other University of Chicago Divinity School professors, helped to publish The Church at Work in the Modern World (1935). In the chapter written by him, the pastoral role of the minister is briefly reviewed and he then shows the various ways in which pastors were meeting their problems, by means of life adjustment clinics, co-operative ventures with psychologists, psychiatrists and social workers and by individual counseling. A few years later Holman published a full length book (1942) on pastoral counseling. It contained verbatim reports on conversations between various troubled individuals and the minister. Six cases were presented in detail and these were divided into two groups: (1) the self-condemned, or those troubled by inner conflicts, and (2) the socially condemned, or those troubled by external authority. The first are condemned by their own consciences and the latter, by society. The book also presented discussion on the actual techniques of pastoral counseling

and has proven a valuable one both from the standpoint of case materials and Holman's handling of such cases.

Stolz was another writer who contributed many volumes to the field of pastoral counseling. His first book, Pastoral Psychology (1932), became a standard work and was often used as a textbook. He deals exclusively with the minister's function as a counselor and bases his conviction on the fact that here the minister has one of his greatest responsibilities. Stolz believed that pastoral counseling is a creative interaction between the advisor and the advised in which the pastor serves as instructor, confessor, and guide. Stolz considered the pastor's work both preventative and remedial and stresses the fact that the minister is not competent to deal with the abnormal. Although acquainted to a degree with dynamic psychology and its techniques, Stolz believed that the minister must stick to the tools of his own profession including prayer, worship, confession, forgiveness, instruction, comfort, conversion, suggestion, preaching, etc. It was his belief that a combination of these procedures was necessary for the adjustment of the individual to a Christian philosophy of life.

Stolz, who is now deceased, was a professor of religious education for many years at Hartford Theological Seminary. His comprehensive volume, The Church and Psychotherapy, appeared in 1943, the same year of his death. In this book he discussed at length the

ministry of Jesus, the anticipation of psychiatry by the church, the relationship of medical psychology and pastoral psychology, and the historical representative therapies of the church. Although he never constructed a comprehensive theory of personality, he did attempt a modified picture of personality which borrowed elements from various schools of psychology. It was his belief that religion must be the controlling interest of the individual. Personality was dependent upon heredity, environment and a philosophy of life. There are various types of personalities according to the interests of the individual. Personality could be recentered by gradual growth, spiritual illumination or conversion (Stolz, 1937). He believed that by recentering the attention of the individual on Christian principles the maladjusted individual will find a new center for his integration. According to Stolz, the religious therapist has an advantage over the medical psychologist in the realm of initiative for the instigation of therapeutic procedures. The role of the minister is one which permits and may even require that he go to the people, but the medical therapist must wait for the individual to come to him (Stolz, 1943, Ch. 6 & 7).

Cabot has perhaps done more than any other medical man to advance the field of religious work (Kemp, 1947, p. 218). He and Dicks collaborated in producing The Art of Ministering to the Sick (1936), a book which basically presented a philosophy of faith which

could be shared by both clergymen and physicians. They stressed the value of listening, quietness, prayer, Scripture, and emphasized the importance of keeping adequate records of the relationship with the patient. This book was read widely and was followed by a series of other works by Dicks. In 1939 a volume was published, entitled And Ye Visited Me. Dicks describes this as a "source book" and it contains the actual records of the efforts of his pastoral students with hospital patients. One of his most lasting contributions was in the relation of guilt and strain to sickness. He pointed out that confession was closely associated with a sense of guilt and was accompanied by an attitude of contrition. He felt that confession usually took place under stress because of doubt, fear, or loneliness. These were not indications of guilt, but merely various forms of stress conditions under whose pressure guilt most easily rose to the surface. Dicks also points out that ill health and sin are closely allied in the minds of many people and that the guilt feeling of having sinned can only be thoroughly removed by the reassurance of one who is well but who has also suffered and been healed. In most of his books Dicks stresses the creative role which suffering may play if it is rightly used.

In a later book (1946) Dicks deals more specifically with pastoral work and counseling and defines the function of the pastor: "It is the pastor's task to work to relieve suffering and fear and loneliness, but it is also his task to assist people to gain faith and hope

and that fellowship with God which encompasses eternity itself. This may be accomplished even though suffering is not relieved" (Dicks, 1946, p. 6).

Boisen has contributed much to religious psychotherapy and been one of the foremost pioneers in this field. Because of his own experience as a patient in a mental hospital he has been able to bring certain outstanding insights to the attention of the clergy and medical psychotherapists. Boisen (1936) studied the relation of some forms of religious experience to some forms of mental disorder, driving the obligation of pastoral care into new dimensions of depth. His central conviction is that certain types of mental disorders are very closely related to certain types of religious experiences. The nature of these problems is moral and therefore directly related to the religious orientation of the individual. When the individual's moral problems are solved successfully he is converted, but when an individual is unsuccessful in solving his problems he is hurled into the inner world of the lost. His recovery usually depends on his facing and working through his moral problems. Thus, religion has a great contribution to make to those individuals who experience character disturbances. Boisen also wrote another book (1946) dealing specifically with problems which the minister faced, and presented methods of solving them. He discussed the methods of working with various types of maladjustments

such as the mentally ill, delinquents, sexually maladjusted, alcoholics and the physically ill. Toward the end of the book Boisen presents a review of the principles of personal counseling.

A very helpful manual on counseling was published in 1937 by the Elliotts, of Union Theological Seminary in New York. The writers discuss at length the counseling situation, the various methods of counseling and the need for cooperation with experts. This work contains many worth-while insights and techniques and deals with personality problems of the nature that the average minister could handle without specialized training.

Bonnell, one of the outstanding ministers of New York City, has contributed several books for the counseling ministry. Since his father was a superintendent of a mental hospital, Bonnell grew up in close contact with the mentally ill. Out of this intimate knowledge emerges a unique insight for healing. In 1938, he presented a volume, Pastoral Psychiatry, dealing mainly with his own methods and including many lengthy discussions of cases with which he had dealt personally. Following in the tradition of early Reformation pastors, Bonnell believes that the minister must exercise his authority. He states, "...there are times when all of us must be told what we must do," and states further that "...the ability to enforce discipline is an indispensable quality of leadership" (Bonnell, 1938, pp. 43-46). In his more recent book (Bonnell, 1948), he puts more emphasis on

listening but even here the counselor is to listen only until the counselee has finished his story and then the minister is to direct the interview by skillfully phrased questions.

Bonnell's therapy is religious in techniques and goals but it possesses certain insights of adjustment psychology. He feels that the goal of the psychiatrist differs generally from that of the pastoral counselor. One important point of contrast is in the emphasis by the latter on the place of synthesis in dealing with problems of the individual while the psychoanalyst is specifically interested in analysis (Bonnell, 1948, p. 27). He feels that many times psychotherapists achieve their goal in relieving emotional conflicts by lowering the patient's moral standards to a point at which he can maintain them without strain. "Thus, psychotherapists have sometimes advised their patients to abandon the ideal of continence for a modified form of promiscuity" (Bonnell, 1948, p. 26). On the other hand the pastoral counselor has a distinct advantage over all other therapists because he employs spiritual forces which are uniquely effective in the task of healing. Like Oliver, Bonnell feels that it is unwise for the pastoral counselor to practice the Freudian technique of transference, whereby the counselor receives the affection of a consultant, retaining it until the appropriate state of the counseling process has been reached and then directing it to its natural objective. He suggests instead, that the counselor should help the

counselee direct this transference to God and thus avoid emotional involvement (Bonnell, 1948, pp. 178 & 185). His later book contains an interesting chapter on "Some Principles of Counseling," which is a compilation and summary of important factors in spiritual counseling (Bonnell, 1948, Ch. X). In an interesting chapter entitled "The Need for Spiritual Counseling" Bonnell quotes a passage by Archbishop Fenelon which expresses succinctly the various elements involved in an effective ministry to individuals:

Speak little; listen much; think far more of understanding hearts and of adapting yourself to their needs than of saying clever things to them. Show that you have an open mind, and let everyone see by experience that there is safety and consolation in opening his mind to you. Avoid extreme severity, and reprove, where it is necessary, with caution and gentleness. Never say more than is needed, but let whatever you do say be said with entire frankness. Let no one fear to be deceived by trusting you. . . . Keep track of all who come to you, and follow them up, if they seem disposed to escape. You should become all things to all the children of God, for the sake of gaining every one of them. And correct yourself, for the sake of correcting others (Bonnell, 1948, p. 12).

The year 1939 marked the arrival of a new author in the field, Rollo May. May studied under Adler in Vienna for a year before receiving his Ph.D. in psychology at New York University. He was thoroughly conversant with the writings of Freud, but has been influenced more by the writings of Adler, Jung, Kunkel, and Rank. In his books he draws from his own experience as well as from the works of depth psychologists in discussing personality

problems and gives many practical suggestions to those who would attempt to solve them. May feels that the functions of the counselor are to listen to the counselee, to help him understand the deeper personality levels from which his problem arises, and to give the counselee a new understanding of himself so that he can solve his own problems (May, 1939, p. 147). He considers empathy the key to the counseling situation. This is a feeling of rapport on the deeper levels of personality. By this means the structure of the personality may be altered. May frequently points out that the counselor deals not only with problems but with helping the individual toward a more sound relationship to himself, to his fellow man and to God. He further states that religious values underlie all counseling even though specifically religious words are not used (May, 1943). His book The Art of Counseling consisted of lectures originally given to Methodist student workers. This book is considered to be the first systematic study of counseling.

Eric Waterhouse published a book in 1940 which presents a practical approach to the problems of the minister. Waterhouse was trained in England in the traditions of the psychology of his day, but for the most part he rejects this approach. He leans more toward Adler than any but takes an approach which depends mostly on suggestion with moral instruction making up a good deal of his therapy. He feels that the minister with some training in psychotherapy can do

much more for many people than the strict adherent of the scientific methods of psychotherapy, "...whose attitude to the patient is wholly impersonal and limited to care of a case, not cure of a soul" (Waterhouse, 1940, p. 32). An earlier book by this writer (1931) contains a series of radio talks which mix religion with simplified psychology.

Another New York minister, Peale, collaborated with a psychiatrist, Blanton, in writing a book (1940) which described the way in which adjustment problems may be met by means of psychiatry and religion. For a number of years these men have maintained a consultation service in the Marble Collegiate Church of Fifth Avenue. This clinic is staffed by ministers, psychiatrists, physicians, and social workers. Out of the experiences of this work has come the knowledge to write this book. Each of the two writers has presented a separate discussion, from the point of view of his own profession, of such basic problems as fear, guilt, self-criticism and failure, love and marriage, loneliness and sorrow--problems to which each profession can make a contribution.

The book stresses the centrality of faith in the healing process. Faith operates in terms of surrender to God and then the working out of certain suggestions given by the therapist. If this is to be accomplished, one does not try harder but one must believe more intensely. There is a directive approach and is an attempt on the part of the

counselor to adjust the counselee to the counselor's particular conception of Christian personality and behavior (Blanton & Peale, 1940, Ch. 1-3).

Carl Schindler published a worth-while volume (1942) entitled The Pastor as a Personal Counselor, in which he presents a brief historical review of the various contributors to psychiatric thought and then discusses the symptoms of the various major and minor mental disorders. In counseling he stresses the necessity for the acceptance of responsibility on the part of the counselee and feels that it is the counselee himself who must make the decisions.

In 1945, Simpson published an interesting book, Pastoral Care of Nervous People. For many years he conducted a clinic on Personal Adjustment in his church. Simpson based his findings almost wholly on the psychobiological approach of Adolph Meyer. It is his feeling that the minister has a definite place in dealing with the "minor psychoses," or psychoneuroses. He classifies these under the headings: general nervousness, tension and irritable weakness states, anxiety states and disorders of anticipation, dissociative-dysmnestic substitutive phenomena, hypochondriasis, obsessive-compulsive-ruminative tension states, and special psychoneurotic conditions. As a cure for these nervous states he recommends a distributive analysis much the same as suggested by Meyer.

Simpson's distributive analysis involves eight steps: (1) eliciting the complaints; (2) the history of the complaints; (3) the personal history; (4) the personality traits of the patient; (5) the family history; (6) the formulation of the problem; (7) the plan of treatment; and (8) the bringing of religion to the patient (Simpson, 1945, Ch. 2). He includes a valuable chapter on the distinguishing characteristics of major psychoses and the psychoneuroses (Simpson, 1945, Ch. 3). Simpson continually stresses the necessity of the minister working in conjunction with a physician so that any organic involvements may be treated by a competently trained person.

In 1942, Wise, then chaplain of Worcester State Mental Hospital, published a volume entitled Religion in Illness and Health. Wise feels that the problems of illness and health can only be understood by considering the organism as a whole which includes the biological, psychological, and social factors in all their relationships which cannot be completely understood if the religion of the counselee is neglected. This book contains some helpful suggestions for the pastoral counselor as to the meaning of religious symbols and their use in illness and in health. In a more recent book, Wise cites the pastor's religious views as one of three major factors that determine the pastoral responses in the interview: "In a counseling situation the basic religious attitudes of the counselor, rather than his intellectual formulations, will determine his responses" (Wise,

1951, p. 10). The remaining two factors he considers are the counselor's attitudes toward persons and their problems and the pastor's conception of himself and his role as a minister. He feels that the essence of counseling is communication and that this is a two directional process.

Wise also discusses three aspects of the personality which are of great significance to the counselor. These are: (1) the basic emotional needs for love, security, a sense of personal worth, belonging, achievement and autonomy; (2) the capacity for growth; and (3) integration. He states further, "...to the extent that people discover more effective satisfaction of needs, more growth toward emotional and spiritual maturity, and a greater degree of integration, healing results" (Wise, 1951, pp. 24-33).

In an interesting chapter entitled "Counseling and the Christian Faith," Wise discusses religious resources in counseling (Wise, 1951, Ch. 6). He divides these into two categories. The first is external and tangible and consists of such things as Scripture and prayer. These resources serve primarily an educational or supportive need. The other type of religious resource is intangible and refers to the vital resources of religious attitudes and feeling in the life of the minister and the quality of the relationship which he is able to offer to another person because of the inner quality of his own life. Wise feels that these are more significant in the

counseling situation than are the external forms. He approaches these latter resources from the point of view of their formulation in the teachings of Jesus. They are: (1) Jesus' conception of the personality which emphasizes the supremacy of the individual; (2) His insistence on the necessity of correcting inner attitudes; (3) His emphasis on the preventative and curative power of love; (4) His teaching on the forgiveness of God as a continual need and process in human life; (5) His insight into faith as a dynamic process.

Seward Hiltner, professor of theology and personality at Princeton Theological Seminary, and pastoral consultant of the magazine Pastoral Psychology, has written many books and articles concerning pastoral counseling. In 1943, he published Religion and Health, which grew out of his experiences as executive secretary of the Department of Religion and Health for the Federal Council of Churches. It was written primarily as a survey book to provide an introduction to the various phases of the relationship of religion and health. It is the latter half of the book which deals with the methods of counseling and ministry to the sick and to the emotionally disturbed. His second book, Pastoral Counseling, presents pastoral counseling as a "leading-out" or "educative" process (Hiltner, 1949, pp. 253-255). To him counseling was a process of relationship between one who seeks help and one who gives help. Its generic aim is new insight with the proof of its acquisition being found in

action. Counseling is not the giving of advice or the manipulating of another personality, although information may be given where the counselee does not possess it and where it is necessary for his development (Hiltner, 1949, Ch. 5).

Hiltner places special emphasis on the necessity for an understanding of the dynamic processes involved in the counseling situation. He shows how his theory and approach grow out of actual concrete situations and considers five general conclusions underlying the interview: (1) the counseling process centers its attention on the parishioner's situation and his feelings about it; (2) the interview develops through the real understanding of the parishioner's needs and the pastor's communication of his understanding; (3) the pastor recognizes and clarifies the conflicting feelings of the parishioner; (4) the counseling relationship contains a freedom of expression and a necessity for responsibility for the parishioner; (5) there will be times in the counseling process when clarification and consolidation of insights must take place for the parishioner (Hiltner, 1949, Ch. 2).

One of the most helpful parts of the book concerns the pre-counseling work which may lead to counseling. Hiltner points out that the counselee must always take the psychological initiative, but that there are times when the minister takes the factual and geographical initiative. When this occurs as well as in other

pre-counseling situations the following principles serve to govern the occasion: (1) help is offered in such a way that it can be refused; (2) the counselor makes clear that he can understand an attitude which the counselee may exhibit; (3) the counseling situation is defined both positively and negatively; (4) the counselor awaits the decision of the counselee; (5) the counselor is alert to the counselee's desires for help, but he does not exploit them; (6) playing well a supportive role may serve as a method of pre-counseling; (7) counseling one member of a family or group may prepare the way for pastoral service to the group or family; (8) pre-counseling is educative in that it puts the responsibility on the parishioner (Hiltner, 1949, Ch. 6).

Hiltner's latest book (1961) is written jointly with Colston, professor of pastoral care, Christian Theological Seminary, Indianapolis. These men have done considerable research and have included data taken entirely from electronically recorded pastoral interviews. Even greater accuracy resulted by checking the findings by psychological personality tests. The hypothesis on which the study was based is that people seeking counseling help from a pastor, other conditions being approximately equal, will tend to progress slightly further and faster in the same amount of time when the counseling is done in a church setting than they will in any other, such as a university counseling center (Hiltner & Colston, 1961, p. 21). Hiltner considers

four factors differentiating the context of pastoral counseling: (1) setting, (2) expectation, (3) shift in relationship, (4) aims and limitations: in the counseling and in other dimensions of relationship (Hiltner & Colston, 1961, Ch. 2). This is an instructive book for the pastoral counselor and affirms his pastoral and counselor role. Hiltner states that the findings of his research reveal that:

The pastor is at least not at a disadvantage as a counselor with people who consult him. Our general interpretation of this phenomenon is that when the pastor is counselor he already carried generally the aura of believing in something, and when this is added to basic understanding and acceptance as well as skill in counseling, he has double-barreled resources for those who have been willing to consult him at all (Hiltner & Colston, 1961, p. 214).

Another new book appeared in 1960 by Van Deusen relating psychotherapy to the personal meanings in redemption. The writer urges the pastor and the church to utilize the insights and methods of psychotherapy in its redemptive work. Relating redemption to the experience of guilt, he shows how effective Christian solutions can be in facing guilt problems. Van Deusen discusses the various phases of the counseling process. He designates each phase by two terms: the first pictures the participation of the counselee, and the second term is indicative of the counselor's role in this aspect of the relationship. Although the phases blend and interact throughout the process they may be distinguishable in this order: (1) testing and rapport, (2) verbalization and hearing, (3) struggle and

acceptance, (4) catharsis and clarification, (5) insight and interpretation, (6) reconstruction and encouragement, (7) responsibility and culmination (Van Deusen, 1960, pp. 158-165). According to the writer, the purposes of a personal ministry such as pastoral counseling include "...helping a man to the inner acceptance of the highest truths; enabling him to lay hold of the transcendent forces that are effective in life; and mediating to him an abundant life which approaches as far as possible the level suggested by his religious teachings" (Van Deusen, 1960, pp. 154-155). He considers pastoral counseling redemptive in that it is "mediating, releasing, reconciling and transforming" (Van Deusen, 1960, p. 175).

According to Doniger (1961), the book literature in the counseling field has nearly doubled in the past decade and much of it has appeared in the last five years. Some volumes like Cryer's and Vayhinger's Casebook in Pastoral Counseling (1962) are useful as reference material. Others are still discussing the role of the pastor and the techniques he should use. Linn and Schwarz (1958) give considerable attention to the symbolic role of the pastor and declare that the permissive technique has no place in the counseling role of the minister. They feel that the minister should not encourage or stimulate the client in his emotional revelations, but should guide him in the direction of limiting them. A recent book

edited by Oates (1959) presents a comprehensive and definitive survey of the pastor's counseling responsibility and function, and these writers stress the interrelatedness of the various aspects of the ministry. A book by Narramore appeared in 1960 stressing the necessity of using Scripture in counseling and stating that no technique is complete without it (Narramore, 1960, p. 239). Narramore places the counselor in the role of a catalytic agent, "encouraging and regulating therapeutic process but not causing or strongly directing it" (Narramore, 1960, p. 90). Laycock, who is a leading figure in the field of psychology in Canada, published a concise manual in 1961 emphasizing the integrating value of religion in the personality and dealing with many special areas of counseling, such as counseling with older people, alcoholics, etc. Other books and articles have appeared recently which have dealt entirely with the more specialized areas. In a recent article Kemp (1963) emphasizes the need for this type of literature. Several writers (Stewart, 1961; Oates, 1958; Mudd, 1958) have covered the field of marriage counseling well and have made extensive use of case materials. Clinebell's Understanding and Counseling the Alcoholic (1956) describes various religious approaches in counseling the alcoholic and his family. The April issue of Pastoral Psychology (Clinebell, Jackson, Verdery, Gardner, & Tiebout, 1962) was devoted entirely to this particular aspect of counseling. A recent article by Bonnell (1958) deals with counseling

the divorced person. Other writers have worked in the area of vocational counseling. In 1961, Kemp published a book dealing with this aspect and offered many practical suggestions to ministers seeking to help individuals make vocational decisions. In 1961, the September issue of Pastoral Psychology (Strunk, Mueider, Whitlock, Dickerson, Clark & Davis) was devoted entirely to this area of counseling. Another interesting and helpful book for the pastoral counselor is Hulme's book, The Pastoral Care of Families (1962), which deals with pastoral counseling in the various states of the life cycle of the family. At the turn of the century the minister who was concerned about his counseling role had little literature to guide him. As a survey is made of the literature available to the contemporary pastor, it is apparent that a great area has been covered in a short time. However, when one considers the needs, it would seem that much still should be done in exploring new fields for the benefit of the countless persons who can be helped if pastors have sufficient knowledge, training, and concern.

Only by admitting that we are often helpless to relieve human suffering because we are too ignorant about it, only by refusing to make religion a convenient dumping ground of unsolved problems, and only by believing that God calls us to fearless and patient investigation, can we slowly but surely bring any real help and guidance to the suffering and the perplexed (Guntrip, 1957, p. 19).

PROFESSIONAL TRAINING FOR THE PASTORAL COUNSELING MINISTRY

The rapid progress in the development of the psychological field and its increasing application to the practical work of the ministry was accompanied by an increasing awareness of the inadequacy of the traditional ministerial training and preparation. In the mid-nineteenth century, Klaus Harms of Kiel, the aggressive reviver of Lutheranism, desired to be a "psychic physician" and to have ministers qualified in "psychiatry." He proposed that courses of training for this ministry be given in the universities (McNeill, 1951, p. 186). It was during this same era that Beecher criticized the theological seminaries of his day because they "did not teach enough about men" (Crocker, 1937, p. 94). In 1873 Drummond, in reading his paper "Spiritual Diagnosis" before the Theological Society, New College, in Edinburgh, stated that "The study of the soul in health and disease ought to be as much an object of scientific study and training as the health and diseases of the body" (Drummond, 1894, p. 251). Other men in the early twentieth century, such as Jefferson, wrote books criticizing the curriculum of the average theological seminary. In his book, Minister as Shepherd, published in 1912, he stated: "Spiritual therapeutics, casuistry or cases of conscience, the cure of souls....the application of Christian principles to specific ailments of the individual heart, surely these are

studies which have received less than their deserts" (Jefferson, 1912, p. 29).

The same year, Cutten wrote: "What does the ordinary seminary graduate know of the histology, anatomy, physiology, or surgery of the soul? Absolutely nothing. He must stumble along through years of trying experience and look back over countless mistakes before he understands these things even in a general way" (Cutten, 1912, p. 7).

The last twenty-five years of the religious scene in America have seen some rather profound changes taking place in the professional preparation of the clergy. During this period, there emerged an emphasis on the practical aspects of the minister's task which led to the establishment of departments of Christian education, pastoral care, and church and community and others to complement the traditional fields of historical, Biblical and systematic approaches to theology.

To meet the deficiency in the training of ministers for counseling there have been many who attempted to study and train themselves and who began to think in terms of definite procedures and methods. Some writers, such as Weatherhead, began to specialize in the study and observed their own work very carefully. Others returned to school to do graduate work in the psychological and related fields. Professors of practical theology began to include more and more psychological material in their courses. Following the lead of the Chicago

Theological Seminary, which was the first to include counseling courses in its curriculum, such men as Elliott, Stolz, Holman, and Baker offered full courses in counseling at Union, Hartford, Chicago, and Colgate-Rochester (Kemp, 1947, p. 245). These men had had practical experience in the pastorate and had had thorough psychological training.

In the recent literature covering the area of pastoral counseling one can observe that the most criticism concerns the lack of adequate preparation for ministers as counselors and the lack of appropriate courses for this training in the seminaries. In 1941, Wise wrote:

Students emerging from the average theological school today may be experts in Biblical criticism, in philosophical and theological arguments, in certain literary devices for sermonizing, in text book knowledge of psychology and sociology, and in other matters of more or less value. But they are not trained to deal with the fundamental material of the ministry--the human personality. Their thinking and work becomes book centered, idea-centered, or program centered, whereas it should be centered in personality (Wise, 1941, p. 263).

The following year Holman referred to additions that had been made in the curriculum, but he felt that they were mainly "patch-work" when what was needed was a "new garment" (Holman, 1942, p. 194). He advocated a complete rethinking concerning the curriculum of the theological schools in the light of the best knowledge available regarding the actual development and functioning of

personality and in terms of the actual task of the working minister.

Dicks, in his book, Pastoral Work and Personal Counseling (1946), notes that the theological seminaries are belatedly beginning to awaken to the task of training their students adequately to meet this vital ministry. He stresses the need for better preparation to meet the problems of pastoral counseling when he states that "Our clergy are poorly prepared for the task of pastor and personal counselor" (Dicks, 1946, p. vii). He further states that "It is a recognized fact among clinically trained ministers who have received their training in hospitals and prisons after graduating from theological seminary that there is not a single theological seminary which is today training its graduates adequately for the pastoral task of work with individuals" (Kemp, 1947, p. 248).

Another writer to voice this inadequacy was Bonnell. In his book, Psychology for Pastor and People, he asserts:

...the instruction of theological students, in the main has been confined to systematic theology, moral philosophy, church history, apologetics, and the Hebrew and Greek languages, all of which, of course, have their legitimate place. No sooner has he graduated from seminary, however, and taken charge of a parish than he is confronted with a multitude of human problems with which he is helpless to deal because he lacks an understanding of their nature and of the remedies that should be applied to specific situations. He is inadequately trained to deal with the basic inner needs of his parishioners (Bonnell, 1948, p. 15).

Hiltner realized that in order for the minister to properly carry out his role and function in pastoral counseling it was necessary for him to have sufficient training for this task (Hiltner, 1948). He feels that all of the courses dealing with the pastor's activities can be useful in his counseling ministry provided they are taught with the dynamic approach and that they contain the element of supervised experience. He emphasizes both the knowledge received in seminary training and the linkage of it to practical affairs and feels that seminaries should come to a recognition of this important connection. According to Hiltner, adequate preparation for counseling should include both practical and theoretical study and the inter-relationship between them. He emphasizes the need for this integrated training when he states:

The pastors . . . need integrated training in the whole practical field involving both supervised experience and sound theory. . . . When talented and farsighted theological students and pastors must resort to a dozen kinds of expedients in order to secure academically advanced work, then the theological seminaries need to look more seriously at their obligation or face the risk of permitting all advanced training of a practical theological character to be carried out in effect by secular institutions with a non-pastoral focus of function (Hiltner, 1949, p. 247).

Howe, who has worked with many ministers in their preparation for pastoral counseling feels that any inadequacy of the clergy, whether it is in relation to the ministry in general or to mental health, is due in a large part to the kind of preparation they have

received for their work. According to Howe, the minister's principal criticism of his training is that "there is an over-emphasis on subject matter and under-emphasis on people, their relationships and their needs" (Howe, 1953, p. 240). The pastors with whom he worked made comment again and again that they were not really prepared for work with people.

Man after man has said that what he knew about Bible, church history, theology, and other departments of theological learning had no relevance for the flood of human problems that overwhelmed him from the beginning of his ministry. Time after time men said that the real training for the work they had to do was on the job and by trial and error. Repeatedly they referred to themselves as the "blind leading the blind." One comment occurs again and again, namely, that they were not really prepared to work with people (Howe, 1953, pp. 239-240).

Burkhart, who also has done extensive work with ministers, discusses in a recent article the personal reports of many ministers with whom he worked. Most felt that their training was inadequate and one commented that he felt as if his seminary trained him for a "church that does not exist" (Burkhart, 1961, p. 6). Burkhart indicated that the student perhaps would find his seminary training more valuable if faculty members would prove their ability in a parish situation before trying to train ministers: "Even for the highly-specialized scholar, a parish background could ensure a greater degree of relevancy" (Burkhart, 1961, p. 7).

There is an abundance of recent studies related to the preparation of ministers for the pastoral counseling ministry. In an unpublished doctoral dissertation, Clippinger (1950) studied the role of the minister in three areas: (1) the development of the pastoral; (2) present practices of ministers; and (3) background, experience and training necessary for present day pastoral work. His study of sixty-one outstanding ministers covered eleven states in the north-east United States, with the median size of their churches being 1,260 in membership. The results showed that approximately one-third of the ministers were satisfied as to the adequacy of their seminary training in pastoral counseling. Two-thirds felt their training in this area was deficient. The latter felt that their training in pastoral psychology was very limited and favored more emphasis being placed on course in marriage counseling, counseling of alcoholics, abnormal psychology, and mental hygiene. This group suggested four specific types of needed revisions in the curriculum: (1) a course on practical problems of the minister; (2) a course in the application of the insights of psychology, psychiatry and sociology to the problems of personality; (3) supervised training in the discharge of the pastoral role; (4) a good course in church administration (Clippinger, 1950, p. 497).

In 1956, Drickey (1956) made an interview study of the counseling responsibilities of seventy Protestant ministers. The group

studied considered their training for social-psychological counseling inadequate. On the basis of the results of the study recommendations were made for re-examining the training for pre-theological students in view of a basic psychological orientation as a preparation for the more specialized counseling courses that should be included in seminary training. Specific courses in the recognition of abnormal behavior, referral techniques, and marriage counseling were also highly recommended in view of the frequency and responsibility the minister has in this area.

A questionnaire study was completed in 1950 by Best which considered the life adjustment problems brought to the minister and the consideration and extent to which the minister can bring the discoveries of dynamic psychology and modern pastoral work to bear upon these problems. Questionnaires from 250 ministers representing a variety of churches and communities provided the information for the study. The results of the study showed that problems most frequently brought to the ministers concerned marriage, religious beliefs, alcoholism and personal adjustments. The results also showed that people turn naturally to the minister for help with adjustment problems; that the church is in a strategic position to prevent and solve some adjustment problems; that church programs should have as one of their primary aims the prevention and solution of maladjustments; that the minister is in a unique position to counsel, is a natural

referral agent, is a logical community leader to help organize educational and guidance programs in the community; and that the minister should prepare himself to deal with marriage, religious, alcoholic, sex and personal problems as those most frequently brought to the pastor for help (Best, 1950, p. 286).

In another study, Blizzard (1955) investigated and analyzed eighty seminaries' training programs in five broad areas: (1) historical, (2) theological, (3) communicative, (4) Biblical, and (5) behavioral. His respondents indicated that more and better training was needed in each of the areas. The study revealed that the needs expressed by the seminarians were in the area most closely related to inter-personal relationships. In this survey every respondent expressed a need for more adequate training in counseling.

Hamilton recently completed a study (1959) to determine the effectiveness of professional preparation for pastoral counseling as judged by recent seminary graduates engaged in the pastoral ministry. There were 181 respondents and of these 91.5% indicated that they needed more training in the area of counseling, while only 8.5% felt that they were sufficiently equipped to meet the demands made upon them as counselors. The fact that 40.1% of the ministers interviewed had attended workshops or clinics in counseling since graduation (three years previously) indicates the inadequacy they felt with their training. The ministers felt their formal training

best equipped them to counsel with the following types of problems:

(1) religious, (2) death and grief, (3) pre-marital, and (4) illness. A large per cent (84.5) expressed a desire to take courses in psychology, and sociology. The respondents felt that a pre-theological student who was to prepare himself adequately for a suitable counseling ministry should major in psychology and that a major in behavioral studies would enhance the minister's possibility for an acceptable ministry in counseling.

Many other studies affirm the need for a more effective counseling program in training ministers. Smith's investigation (1945) indicated that the overwhelming majority of seminary graduates feel that their seminary education did not provide adequate training for the counseling responsibilities they face as clergymen. Ninety-one per cent (91%) of the graduates indicated that their seminary education needs supplementation if they are to be adequately trained as counselors. Results of Kemp's study (1951) showed that theological schools are well prepared to provide training in basic theological education but are limited in their programs to provide training of a more practical nature. A study by Donaldson (1962) was designed to investigate and appraise graduate training in pastoral counseling. Findings indicated that some seminaries regard their B.D. program as too crowded with traditional courses to allow sufficient space for training in pastoral counseling. Many of these same schools do not offer a graduate degree, i. e., work beyond the B.D. level.

One of the most significant attempts to meet these apparent needs has been the development of clinical training. Other professions have been successful in utilizing this method also. Medicine pioneered with its internship; educational colleges have used practice teaching; law resorts to the case study; and social work employs supervised field work. Hiltner has stated that "By and large clinical pastoral training is by far the quickest, simplest, most comprehensive and least expensive way to get a toehold in learning counseling" (Hiltner, 1959, p. 246). Meiburg concurs with this when he states: "There is little question but that clinical pastoral training has been the most valuable single influence in enabling the present-day pastor to function effectively as a counselor" (Meiburg, 1959, p. 17). In view of findings in recent research by the government's Joint Commission on Mental Illness some writers have concluded that only clergymen with intensive training in clinical practice under expert supervision should ever attempt to counsel persons with mental and emotional problems (Robinson, DeMarche, & Wagle, 1960).

It is now possible in most of the well-established seminaries to have significant contact with patients in general and psychiatric hospitals and inmates in prisons either in clinical training programs or in briefer clinical contacts which supplement classroom lectures and library study. In a recent article, Leslie lists the essential features

of these programs under five major headings:

1. Clinical contacts with individuals in crisis under the supervision of trained chaplains.
2. Practice integrated with theory.
3. Inter-disciplinary approach, drawing on the full resources of institutional staff.
4. Group living and learning in a sustained relationship (usually 12 weeks).
5. Theological perspective integrated with psychological insights (Leslie, 1961, p. 24).

Clinical pastoral training has been defined by Hiltner as:

...a procedure whereby theological students or ministers are brought face to face with individual people in a situation which is susceptible to supervision from the pastoral point of view and in which, through the use of various participant devices--such as interview material and compilation of case histories--both the dynamics of human conduct and the pastoral ways of dealing with it are learned, and learned together (Hiltner, 1949, p. 244).

Drummond (1894) advocated some form of clinical training for theological students in 1893. His conviction came from his own "clinical" experience while in charge of the inquiry rooms during the Moody revival campaigns. Meiburg attributes the accuracy of Drummond's insights into human nature and his popularity as a counselor to his experiences with Moody (Meiburg, 1959, p. 15).

Twenty years later, W. P. Ladd made the statement before the General Convention of the Protestant Episcopal Church that the theological courses in the seminaries needed to be supplemented by some kind of practical training (Hiltner, 1945, p. 137). Cabot, in the early twenties, advocated a year of clinical training in theology (Kemp, 1947,

p. 249). Kemp notes that even earlier than this R. H. Edwards, who was then with the YMCA, placed theological students in a settlement house in New York during the summer months and further indicates that some form of clinical training was carried on by Graham Taylor in Chicago (Kemp, 1947, p. 249).

The first specific attempts, however, to do what Drummond and others advocated took place in the 1920's. Keller, a prominent physician of Cincinnati and layman of the Protestant Episcopal Church, offered to provide some clinical experience for a limited group of seminary students during summer months. In 1923, this program was launched and later became known as the Graduate School for Applied Religion. It has since become absorbed into the curriculum of the Episcopal Theological Seminary in Cambridge, Massachusetts (Fairbanks, 1953). When Keller initiated his plan, the students met in his own home having their seminars in the evening with him serving as the only instructor. During the day time the students spent their time studying and helping in some institution or agency. The bulletin of the school for 1940 described its function as "Social Training for the Pastoral Ministry, an Internship in the Practice of Religion" (Kemp, 1947, p. 250). The curriculum during this period contained three main headings: (1) social adjustments, (2) pastoral care, and (3) parish administration (Kemp, 1947, p. 251).

Another physician, Cabot of Cambridge, along with Boisen, a Congregational minister, also played an important part in the genesis of clinical training. With the encouragement and financial assistance of Cabot and others, Boisen embarked on a chaplaincy program at the State Hospital at Worcester. His development of the idea of practical training or internship for theological students came as an outgrowth of Boisen's experience as a patient in a mental hospital. He began his experiment in 1925 with four theological students. Each year Boisen brought more students, representing more theological schools and institutions. In 1930, The Council for the Clinical Training of Theological Students was formed with Cabot as chairman of the board. In 1928, there was but one training center, and by 1940 twenty training centers had been established (Kemp, 1947, p. 252). Cabot also supported Dicks in starting a similar work at the Massachusetts General Hospital in Boston in 1933. Later he endowed the work there, which is now carried on through the Institute of Pastoral Care, founded by Rollin Fairbanks. Cabot and Dicks (1936) made a significant contribution to the movement by providing its first real literature. In many ways Dicks perhaps gave the same impetus to clinical training in the general hospital that Boisen did to a similar work in the mental hospital with his work, Exploration of the Inner World (1936).

Clinical training has consistently involved investigating and describing the pastoral task since its inception. The first school to make

such training obligatory was the Philadelphia Divinity School (Kemp, 1947, p. 256-257). The clinical training movement has grown tremendously in the past four decades and a number of seminaries have placed courses in clinical training in their theological curricula. The training is usually taken in an institutional setting where the student lives from six to twelve weeks. One can get an idea of the possibilities of this type of training by examining the goals agreed upon by the Institute of Pastoral Care and the Council for Clinical Training:

1. To enable the student to gain fuller understanding of people, their deeper motivations and difficulties, their emotional and spiritual strengths and weaknesses.
2. To help the student discover more effective methods of ministering to individuals and groups and to intensify his awareness of the unique resources, responsibilities, and limitations of the clergy.
3. To help the student to learn to work more cooperatively with representatives of other professions and to utilize community resources which may lead toward more effective living.
4. To further the knowledge of problems met in pastoral care by providing opportunities for relevant and promising research (Opportunities for Study, 1958, p. 28).

Some writers, such as Hiltner, have indicated that they can see clinical training spreading beyond the institutional setting. Hiltner, however, sees in a hospital setting a number of advantages. These are that: (1) people can be seen more frequently than in the parish, so there can be more contacts in the same amount of time; (2) people in a hospital are confronting difficulties; if the student wants to learn

how to help, he can learn much by understanding people at such points as tend to make them open to new sources; (3) the supervision of training in a hospital is easier; (4) the student sees plainly that the pastor is not the only professional worker who can help people, that he needs to cooperate and work with the physician, the nurse, and all others who come with various skills to the person in need (Hiltner, 1949).

Bruder, who is director of Protestant Chaplain Activities at Saint Elizabeth's Hospital in Washington, D. C., feels that the amount of full time clinical experience which most students get (usually not more than three months) is not sufficient. He recommends that the seminarian should begin his clinical preparation in the more controlled environment of an institution under the competent guidance of a clinically trained chaplain supervisor. Before ordination, however, he feels that the student should spend at least six months in a supervised parish-centered program, working with parishioners. "Such training must be under the careful guidance of a clinically trained pastor capable of utilizing to the utmost the experiences of the parish" (Bruder, 1962, p. 22). Niebuhr, Williams, and Gustafson concur with the opinion that a longer period of training is needed. Their report gives strong encouragement to the development of a fourth and clinical internship year in theological education (Niebuhr, et. al., 1957, p. 219).

The emphasis upon the clinical training program for ministers in recent years has provided impetus for investigation and extensive study of this facet of the pastor's training. An investigation by Brick (1947), at Columbia, attempted to discover through intensive interviews the basic approach of ministers toward their task in the church and in the community and also attempted to ascertain the contributions clinical pastoral training made in this basic approach. Brick concluded that the clinical training program was not an integral part of the training for the ministry and further recommended that it should be.

In 1960, Thornton did a critique of clinical pastoral training in which he advocates an internship in clinical pastoral training. This internship would consist of a full year of post B.D. education and should be interpreted as an extension of the B.D. course of study and not just as specialty training for the chaplaincy. He also suggests some next steps which he feels should be taken in relation to theological and clinical pastoral education. They are:

1. Analysis of educational philosophy and methodology.
2. Correlation of theology and behavioral science.
3. Integration of the practical and classical fields.
4. More attention to the education of clinical supervisors as theological educators.
5. Increased seminary involvement on a regional, interdenominational basis.
6. Revisions of standards (Thornton, 1960, p. 321).

Smith's study (1945) deals with the contribution which clinical training has made to the counseling resources of the clergyman. His data showed that clinical training contributed significantly to the pastor's understanding of his counseling function. Results of the study indicated that "an average of seven months clinical training with little or no pastoral experience seems to do more than an average of twenty years pastoral experience with no clinical training in helping the pastor develop an understanding of the qualifications he needs for this function" (Smith, 1945, p. 51).

In a recent dissertation, Crofoot (1959) conducted a survey of programs of clinical pastoral education in Protestant denominations. His investigation was based upon a survey of ten well-known clinical training centers. He concludes that the result of the clinical pastoral education programs as conducted at the present time shows that the pastor trainee has a greater accelerated understanding of human relations, a greater ability to help individuals in stress situations, and a more rapidly developed self understanding by the clinical training methods than by the traditional classroom instruction.

A study by Bachmann (1949) concerning the development of Lutheran pastoral care also indicated the need for clinical training. Eighty-five per cent (85%) of the 213 respondents favored clinical pastoral training in the seminary curriculum under a clinically trained supervisor. As a result of the study, Bachmann advocated

a clinical year which could be taken in a parish or a clinical center, preferably before the student's last year in the seminary.

The study by the President's Joint Commission also points toward the necessity of clinical training for the minister. These findings show that one-third of all problems coming to the attention of clergymen today are believed to be of "serious psychiatric dimensions" (Joint Commission, 1961, p. 136). However, the Commission notes only between 8,000 and 9,000 members of the clergy have taken formal courses in clinical pastoral training. An equal number is estimated to have had some training in workshops and refresher courses (Joint Commission, 1961, p. 135).

It is apparent from a study of the literature that much criticism has been made of the minister's preparation for his counseling role, but it is also apparent that many are attempting to correct this deficiency. The January issue of the 1963 Pastoral Psychology magazine lists extensive opportunities for study, training and experience. There are seventy-eight short term programs listed offering conferences, institutes, lecture series, and seminars on pastoral care and pastoral counseling. These are offered by hospitals, seminaries, universities, Councils of Churches, mental hospitals and various other organizations. The organizations and institutions which are promoted by the Council for Clinical Training listed fifty-seven

centers which offer carefully supervised resident and full time training. Twenty-seven member seminaries cooperated in this training. The Institute of Pastoral Care lists twenty-three general hospitals, twenty-seven mental hospitals, two correctional institutions, and three state schools for training pastors. All utilize the clinical approach of actual pastoral work with people who are ill. Besides these opportunities for training, the National Lutheran Council and the Southern Baptist Association for Clinical Pastoral Education also list extensive programs for training pastors in clinical pastoral education (Shedron, 1963, pp. 9-28).

It is clear that the field of theological education has undergone some significant changes both in content and method and the indications would seem to be that more will come in the future. Kemp, in his final chapter, indicates the need for additional research and study in the area of pastoral counseling:

Every minister must prepare himself for this task. He must study and inform himself of what others have done and what others have to say regarding the most effective methods and procedures. Even more important, he must study, analyze, and evaluate his own methods, his successes and failures. He must cooperate with all other agencies and professions. . . . Every effort must be made to keep abreast of what other fields have to offer. The best scientific study of human nature must be utilized. To do less would be unfair to our people (Kemp, 1947, p. 286).

CHAPTER III

METHOD AND PROCEDURE

Since the review of the literature substantially indicates that counseling is an integral part of the pastoral ministry, the writer was interested in analyzing the responsibilities and training of pastors in the Church of the Nazarene for this aspect of their ministry. This analysis was based upon the judgment of a selected group of Nazarene ministers. The assumption was that men now active in the pastorate could best determine their counseling responsibilities and could evaluate the adequacy of their training for this aspect of their ministry.

SELECTION OF THE SAMPLE

The active pastors of the Church of the Nazarene in the United States comprised the population from which the sample was taken. The sample consisted of 250 pastors, approximately five per cent of the total number of Nazarene pastors, selected by a stratified random sampling.

Since the Church of the Nazarene classifies the churches in five statistical categories, the pastors were stratified accordingly.

The categories are as follows:

Table 1

1961 Statistical Distribution of Nazarene Churches
and Pastors Sampled in this Study

Size of Church <u>Membership</u>	Number of Churches in <u>Each Category</u>	Per Cent of Churches in <u>Each Category</u>	Number of Pastors Sampled in <u>Each Category</u>
1 - 24	1, 158	24. 3	61
25 - 49	1, 411	29. 5	74
50 - 99	1, 274	26. 6	66
100 - 199	680	14. 3	36
200 - Up	<u>252</u>	<u>5. 3</u>	<u>13</u>
Total	<u><u>4, 775</u></u>	<u><u>100. 0</u></u>	<u><u>250</u></u>

The above sampling procedure was found to provide the necessary representativeness. The first pastor in each category was selected by the use of a table of random numbers. The following selection in each category was made as follows: every eighteenth pastor was chosen, except in category number four, and then every nineteenth pastor. The variation of selection in this category became necessary to give the desired representativeness.

INSTRUMENT USED

After considering the type of information required, the type of respondent, and the accessibility of the respondents, a questionnaire was devised to satisfy this requirement (Goode & Hatt, 1922, p. 170).

A rough draft of the proposed questionnaire was submitted to five pastors. Their criticisms and suggestions resulted in several changes. The revised questionnaire was then submitted to three men involved in the training of Nazarene pastors. One was head of the practics department at the Nazarene Theological Seminary. The other two men were employed at one of the colleges of the denomination. One was head of the practics department and the other head of the department of psychology. Valuable suggestions were received from these men in the further refinement of the instrument. Slight revisions were made following submitting of the questionnaire to personnel of the research bureau of the department of education at Michigan State University. Forty-four ministers attending a yearly meeting of the Kansas District Church of the Nazarene participated in a pilot study. The pilot study indicated the questionnaire to be an adequate instrument for the purpose of the study, hence no further revisions were necessitated.

The final questionnaire form is shown (Appendix II). The questionnaire was designed to give data concerning the following

three basic factors involved in the study: (1) to determine the counseling responsibilities of Nazarene pastors; (2) to determine the effectiveness of the training of Nazarene pastors for the counseling aspects of their ministry; (3) to determine from Nazarene pastors their recommendations for professional training.

METHOD USED IN SECURING RESPONDENTS

When the sample had been determined, a letter (Appendix I) was sent to each of the pastors by Dr. S. T. Ludwig, general secretary of the Church of the Nazarene, who is also chairman of the department of education, urging full cooperation with the writer's study. Following this letter three days later, a letter (Appendix I) was sent to each of the pastors explaining the purpose of the study. A few days later the questionnaire and a cover letter (Appendix I) was sent. Self-addressed stamped envelopes were included for convenience and encouragement in replying. Anonymity was assured to enhance frankness. Abstracts were offered of the study to those who were interested. Within six weeks 125 of the questionnaires had been returned. In an effort to get a maximum response a second questionnaire with cover letter (Appendix I) was sent. This mailing resulted in a return of sixty-three additional questionnaires. This brought the total response to 188, 75 per cent return of the 250 pastors sampled.

ANALYSIS PROCEDURES

The pastor's name was checked on the original mailing list, according to the code on the questionnaire, as each questionnaire was received. The data were put on I. B. M. cards and computed to facilitate handling of responses in testing of the hypotheses. Of the 188 respondents, nine sent letters indicating their interest in the study but expressed limitations in the area of pastoral counseling to the degree that they felt reluctant to fill out the questionnaire; eleven questionnaires were not completed sufficiently to be used. The final study included 168 questionnaires, 67 per cent of the original sample.

The contingency coefficient was used to study the strength of the relationship between the variables under study. When it is desired to measure the relationship between two variables and it is possible to classify the variables into broad categories but not possible or practical to obtain quantitative measurements, one uses the coefficient of contingency, (C) (Freund, 1960). C may be defined symbolically as $C = \sqrt{\frac{\chi^2}{N + \chi^2}}$ where N is the grand total of frequencies of the r by k contingency table and χ^2 is the value obtained for the observed and expected cell frequencies of the table.

$C_{corrected}$ may be given the same type of interpretation as Pearson's r, being close to zero when no relationship exists and approaching

the maximum value which does not exceed one when the relationship is strong. The number of rows and columns determine to maximum value of C for that table. If the table has r -rows and k -columns, the maximum value of C is $C_{\max} = \sqrt{4 \frac{(r-1)(k-1)}{r k}}$. Hence to interpret the coefficient properly, it is necessary to find corrected C , $C_{\text{corr}} = \frac{C}{C_{\max}}$ so that the maximum of C_{corr} is one (Read, 1940, p. 146).

The .05 level of significance was agreed upon as the appropriate level for accepting or rejecting the hypotheses. If one sets up a null hypothesis, the hypothesis of no relationship, at the .05 level and calculates χ^2 and C_{corr} the hypotheses cannot be rejected if the calculated $\chi^2 < \chi^2_{.05}$ where $\chi^2_{.05}$ is the value of χ^2 such that if the null hypothesis is true, a larger χ^2 has a probability of only .05 of occurring. Hence, if calculated $\chi^2 \leq \chi^2_{.05}$, the null hypothesis, H_0 , cannot be rejected at the .05 level and the discrepancies between the observed and rejected frequencies may be attributed to chance and one can reserve judgment or conclude the data are not related. If $\chi^2 > \chi^2_{.05}$, the H_0 is rejected at the .05 level which would indicate that the discrepancies between the observed and expected frequencies are too large to be attributed to chance and therefore may conclude there is a relationship between the two variables (Freund, 1960, p. 284).

CHAPTER IV

RESULTS AND DISCUSSION

RESULTS

The information received on the questionnaires indicated the type and scope of counseling responsibilities carried on by Nazarene pastors in relation to: (a) regional distribution of pastors; (b) size of community; (c) size of church membership; (d) dominant age groups of church membership; (e) age of pastors.

Table 2 illustrates one of the twenty contingency tables formed to determine whether or not any relationship exists between (a), (b), (c), (d), and (e) above and: (1) amount of time Nazarene pastors spend in counseling; (2) type of problems Nazarene pastors deal with in counseling; (3) professional counseling training of Nazarene pastors; (4) training recommendations by Nazarene pastors.

Table 2

Sample of Contingency Tables

Types of Problems in Relation to Size of Church Membership

Types of Problems	Size of Church Membership					Totals
	1-24	25-49	50-99	100-199	200 & Up	
Emotional- Interactional	12	19	33	23	10	97
Religio- Philosophical	15	26	40	22	10	113
Marriage-Family	14	23	32	24	9	102
Educational- Vocational	<u>5</u>	<u>9</u>	<u>14</u>	<u>12</u>	<u>4</u>	<u>44</u>
Totals	<u>46</u>	<u>77</u>	<u>119</u>	<u>81</u>	<u>33</u>	<u>356</u>

The twenty calculated corrected contingency coefficients, C , and the corresponding chi-square values with their corresponding degrees of freedom, χ^2_{df} , are summarized in Table 3.

Table 3

Summary of Calculated Chi-Squares and Corrected Contingency Coefficients

	Regional Dis- tribution of Pastors	Size of Community	Size of Church		Dominant Age Groups of Church	Age of Pastors
			Membership	Membership	Membership	
Amount of Time Nazarene Pastors Spent in Counseling	$\chi^2_{25} = 19.91$ C = .398	$\chi^2_{35} = 52.79^*$ C = .585	$\chi^2_{20} = 32.36^*$ C = .494	$\chi^2_{10} = 4.72$ C = .216	$\chi^2_{20} = 14.41$ C = .350	
Types of Problems Pastors Deal with in Counseling	$\chi^2_{15} = 4.61$ C = .127	$\chi^2_{21} = 3.55$ C = .111	$\chi^2_{12} = 1.98$ C = .084	$\chi^2_6 = 2.15$ C = .099	$\chi^2_{12} = 1.99$ C = .073	
Adequacy of their Pro- fessional Counseling Training as Conceived by Nazarene Pastors	$\chi^2_5 = 108.3^*$ C = .794	$\chi^2_7 = 4.34$ C = .201	$\chi^2_4 = 2.56$ C = .157	$\chi^2_2 = .019$ C = .014	$\chi^2_4 = 10.96^*$ C = .319	
Training Recommen- dations by Nazarene Pastors	$\chi^2_{40} = 17.95$ C = .168	$\chi^2_{56} = 30.17$ C = .213	$\chi^2_{32} = 14.16$ C = .152	$\chi^2_{16} = 4.10$ C = .087	$\chi^2_{32} = 16.34$ C = .162	

* Statistically significant at the .05 level.

It may be noted that four of the twenty chi-square values were larger than the tabular .05 chi-square value. This indicated that the null hypothesis, the hypothesis of no relationship on each of these four, was rejected on the .05 level since less than .05 of χ^2 would be larger than the tabular value if the null hypothesis were true.

The following hypotheses were rejected at the .05 level: (1) There is no relationship between the amount of time spent in counseling and the size of the community. (2) There is no relationship between the amount of time spent in counseling and the size of the church membership. (3) There is no relationship between the adequacy of professional counseling training as conceived by Nazarene pastors and the regional distribution of churches. (4) There is no relationship between the adequacy of professional counseling training as conceived by Nazarene pastors and the age of the pastors.

The other null hypotheses could not be rejected at the .05 level, which indicated that the discrepancies between the observed and expected frequencies in the compartments or cells of the contingency tables were not too large to be attributed to chance and hence one cannot conclude, at the .05 level, that these data are related.

Hypothesis Number 2, which stated "There is no significant relationship between the amount of time pastors spend in counseling and the size of the community," was rejected at the .05 level since

$\chi^2_{35} > \chi^2_{.05, 35} = 49.8$. In order to give a condensed clear

picture of information contained in this contingency table, Table 4 was formed.

Table 4
Time Nazarene Pastors Spent in Counseling Per Week
by Size of Community

Weekly Counseling Hours					
<u>Size of Community</u>	<u>Under 3</u>	<u>3 to 6</u>	<u>6 to 12</u>	<u>12 and Up</u>	<u>Totals</u>
0-2,499	12	6	4	4	26
2,500-9,999	13	6	5	4	28
10,000-49,999	18	14	6	11	49
50,000-99,999	1	4	0	4	9
100,000-249,999	4	1	1	0	6
250,000 and Up	<u>1</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>13</u>
Totals	<u>49</u>	<u>34</u>	<u>20</u>	<u>28</u>	<u>131</u>

It is apparent that less time is spent per week in counseling in small communities than in the larger communities. Since the null hypothesis was rejected at the .05 level, it may be concluded with .95 confidence that the larger the community the more time was spent per week in counseling. $C = .585$, which states the strength of the existing relationship. The fact that the corrected C is not one and is less than

one by a rather large amount indicates there is some, but not perfect, relationship between these two variables.

Hypothesis Number 3, which stated "There is no significant relationship between the amount of time pastors spend in counseling and the size church served by the pastors," was rejected at the .05 level since $\chi^2_{20} > \chi^2_{.05, 20} = 31.4$, and we may conclude that a relationship exists. A summary of the information contained in this contingency table is found in Table 5.

Table 5

Time Nazarene Pastors Spent in Counseling Per Week
by Size of Church Membership

Size of Church Membership	Weekly Counseling Hours				Totals
	Under 3	3 to 6	6 to 12	12 and Up	
1-24	11	4	2	0	17
25-49	16	8	7	4	35
50-99	12	14	3	13	42
100-199	7	3	6	10	26
200 and Up	<u>3</u>	<u>5</u>	<u>2</u>	<u>1</u>	<u>11</u>
Totals	<u>49</u>	<u>34</u>	<u>20</u>	<u>28</u>	<u>131</u>

It is observed from the table that the relationship indicated by the rejection of the null hypothesis is direct. This survey indicated that the larger the size of church the more hours were spent per week in counseling up to a membership of 200.

The contingency coefficient C was .494, which is less than one by a rather large amount, which indicates the relationship is not perfect.

It is the hypothesis of the writer that the last category does not follow the pattern of the rest of the table since a church of such size would likely leave less time available to the pastor for counseling. The study revealed, however, the fact that when multiple staffs were available to the large churches the pastor spent more time in the field of counseling.

Hypothesis Number 11, which stated "There is no significant relationship in the analysis of the adequacy of professional training of Nazarene pastors for counseling and a regional distribution of the pastors," was rejected at the .05 level since $\chi^2_5 > \chi^2_{.05, 5} = 11.1$ and we may conclude that a relationship exists. The information of the contingency table may be put into the following abbreviated table, Table 6:

Table 6

Adequacy of Professional Counseling Training as Conceived by
Nazarene Pastors by Regional Distribution of Pastors

<u>Regional Distribution</u>	<u>Adequacy of Professional Training</u>	
	<u>Inadequate</u>	<u>Adequate</u>
East and Northeast Zone	9	0
Southeast Zone	35	1
Central Zone	38	5
Southwest Zone	16	3
West Central Zone	33	6
Northwest Zone	<u>12</u>	<u>2</u>
Totals	<u>143</u>	<u>17</u>

The table indicates the relative number of people who feel inadequate in their professional training is greater in the regions categorized as East and Northeast than those not eastern. At least the feeling of inadequate training seems to be related to the regions in question since the hypothesis of no relationship was rejected.

The value of C is .794, which indicates that the strength of this relationship is stronger than the others under study but still indicates that the relationship is quite far from being perfect.

Hypothesis Number 15, which stated "There is no significant relationship in the analysis of the adequacy of professional training of Nazarene pastors for counseling and the age of the pastors," was rejected at the .05 level since $\chi^2_4 > \chi^2_{.05, 4} = 9.49$. Hence, as before, it could not be concluded that the two variables are independent of each other and consequently the hypothesis that there is no relationship between the professional training of Nazarene pastors and the age of the pastors was rejected at the .05 level.

Table 7 gives a brief summary of the information of Hypothesis Number 15.

Table 7

Adequacy of Professional Counseling Training
of Nazarene Pastors by Ages of Pastors

	Adequacy of Professional Training	
<u>Ages of Pastors</u>	<u>Inadequate</u>	<u>Adequate</u>
20-29	5	11
30-39	5	50
40-49	3	52
50-59	4	24
60 and Up	<u>0</u>	<u>10</u>
Totals	<u>17</u>	<u>143</u>

The table indicates that the relationship is inverse or indirect. The younger pastors feel they are more adequately prepared than the older pastors.

The value of the corrected contingency coefficient is only .319 so the relationship is not, by any means, perfect.

Since the purpose of the study was to study the (1) nature and scope of counseling; (2) adequacy of professional counseling training as conceived by Nazarene pastors; and (3) to derive significant implications relative to their training, graphs and corresponding tables of data are included in the remaining part of this chapter to indicate in a summarizing form additional pertinent information received from the questionnaires.

Table 8

Importance of Counseling in Pastoral Ministry

<u>Concept of Relevance</u>	<u>Number</u>	<u>%</u>
Important	149	88.7
Undecided	11	6.5
No Indication	<u>8</u>	<u>4.8</u>
Total	<u>168</u>	<u>100.0</u>

Graph 1

Importance of Counseling in Pastoral Ministry

It is evident that pastors feel counseling is an important part of their ministry. Thus a need exists for training in counseling as part of the preparation for the pastoral ministry.

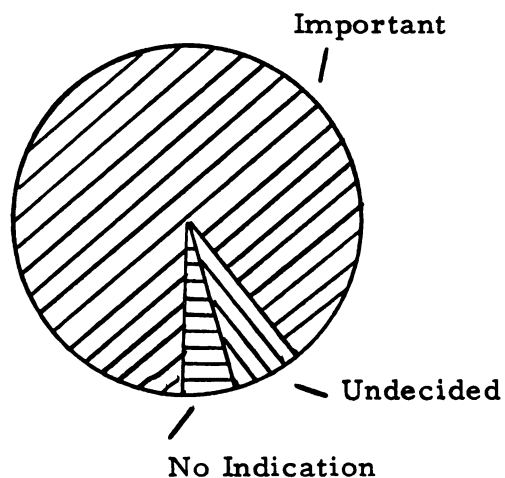


Table 9

Relative Number of Pastors' Preferences of Counseling
Methods and Relative Number of Counseling Methods Used
(according to definition given by pastors)

<u>Counseling Method</u>	<u>Frequency Method Preferred</u>	<u>Frequency Method Used</u>	<u>Per Cent Method Preferred</u>	<u>Per Cent Method Used</u>
Non-Directive	117	11	69.6	6.5
Directive	1	25	0.6	14.9
Eclectic	41	79	24.4	47.1
No Indication	<u>9</u>	<u>53</u>	<u>5.4</u>	<u>31.5</u>
Totals	<u>168</u>	<u>168</u>	<u>100.0</u>	<u>100.0</u>

Graph 2

Relative Number of Pastors' Preferences of Counseling
Methods and Relative Number of Counseling Methods Used
(according to definition given by pastors)

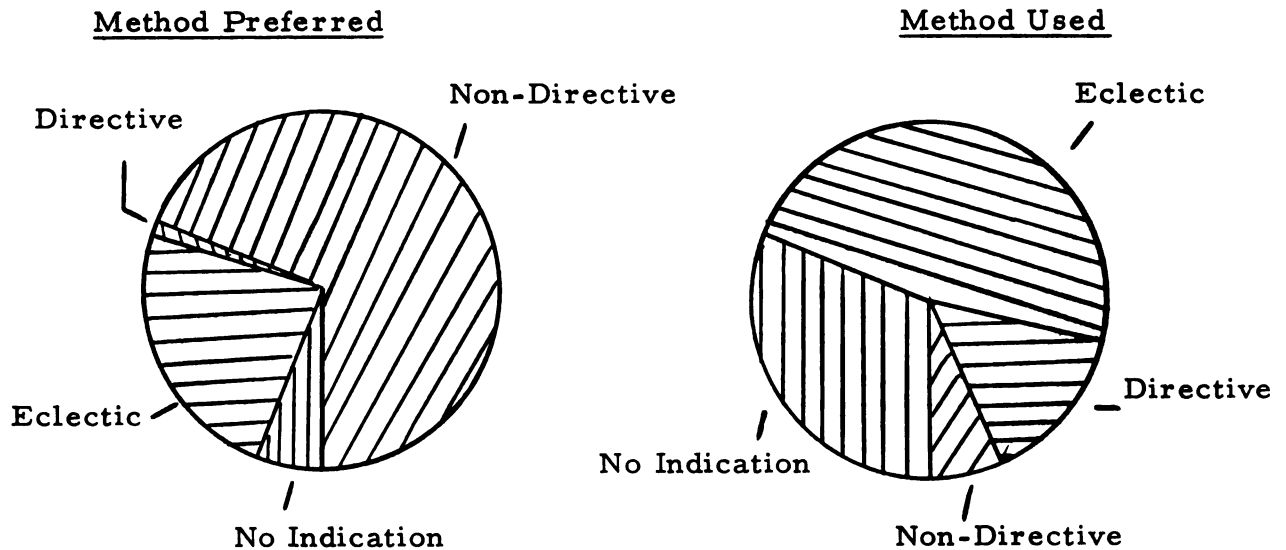


Table 9 and Graph 2 indicate that pastors prefer the non-directive method of counseling but usually use eclectic. A discrepancy was noted in the fact that the method preferred and the method used were not consistent. This may indicate a lack of understanding of counseling methods. Apart from this inconsistency, the findings were in harmony with Mannoia's study that ministers of conservative theological persuasion are oriented toward a directive approach to counseling (Mannoia, 1962).

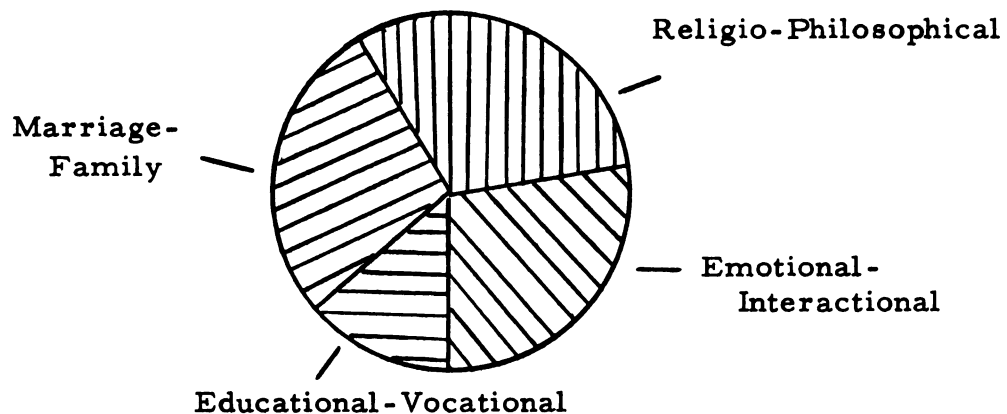
Table 10

Relative Number of Problems Dealt with by Nazarene Pastors

<u>Problems</u>	<u>Number</u>	<u>%</u>
Emotional-Interactional	97	26.9
Religio-Philosophical	113	31.4
Marriage-Family	101	28.1
Educational-Vocational	<u>49</u>	<u>13.6</u>
Totals	<u>360</u>	<u>100.0</u>

Graph 3

Relative Number of Problems Dealt with by Nazarene Pastors



The preceding table (Table 10) and graph (Graph 3) reveal that there are more religio-philosophical problems than those indicated in the other categories. However, since nearly 70% of the counseling

problems are in the other three categories, one may assume that courses in the ministers' training should include each of these three areas.

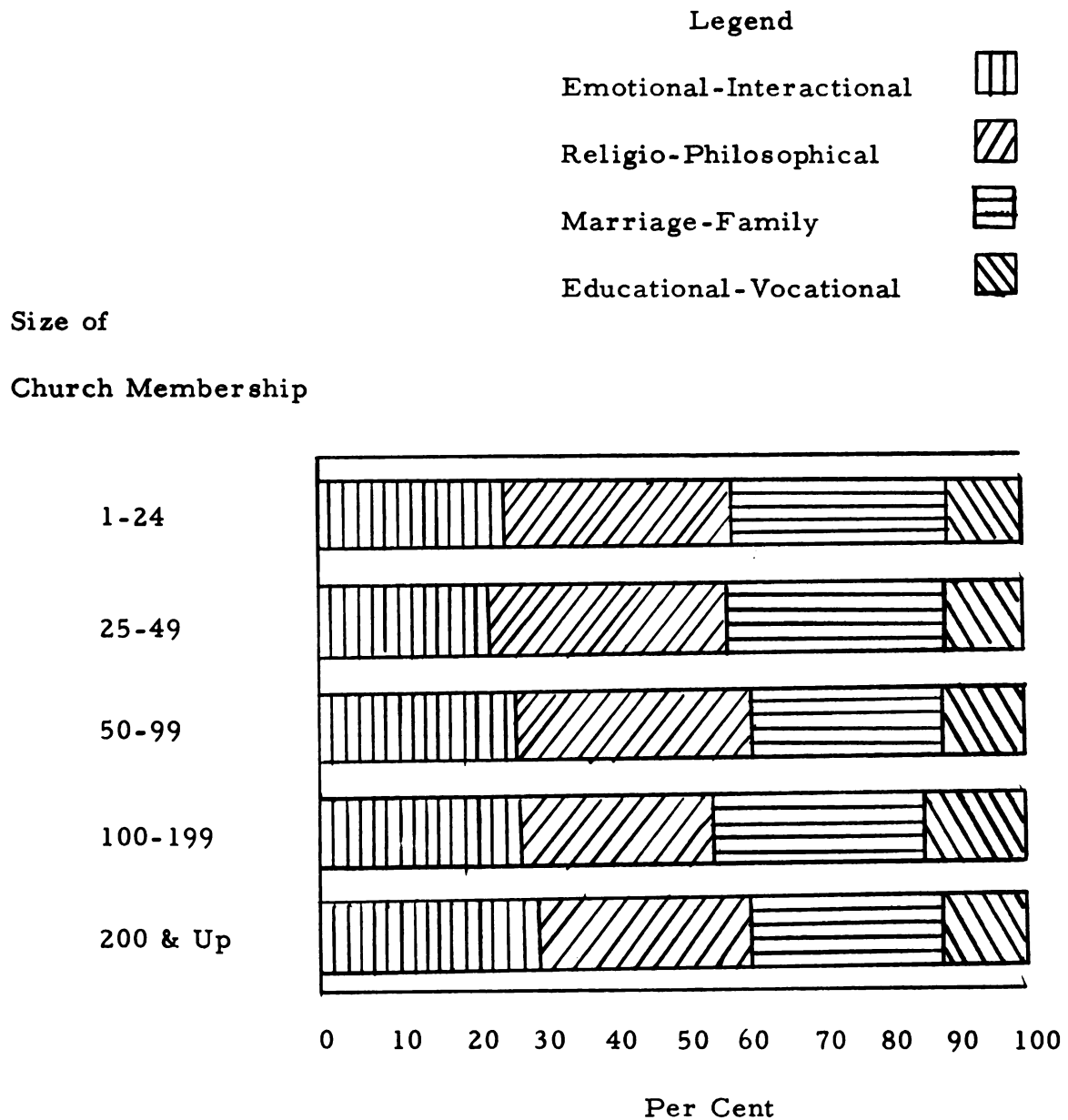
Table 11
Counseling Problems
Number of Categorized Problems in Relation
to Size of Church Membership
(percentages listed in parenthesis)

<u>Problem Categories</u>	<u>Church Membership</u>					<u>Totals</u>
	<u>1-24</u>	<u>25-49</u>	<u>50-99</u>	<u>100-199</u>	<u>200 & Up</u>	
Emotional- Interac- tional	12 (26.1)	19 (24.6)	33 (27.7)	23 (28.4)	10 (30.3)	97
Religio-Phil- osophical	15 (32.6)	26 (33.8)	40 (33.6)	22 (27.2)	10 (30.3)	113
Marriage- Family	14 (30.4)	23 (29.9)	32 (26.9)	24 (29.6)	9 (27.3)	102
Educational- Vocational	5 (10.9)	9 (11.7)	14 (11.8)	12 (14.8)	4 (12.1)	44
Totals	<u>46</u>	<u>77</u>	<u>119</u>	<u>81</u>	<u>33</u>	<u>356</u>

Graph 4

Counseling Problems

Number of Categorized Problems in Relation
to Size of Church Membership



It is apparent from Table 11 and Graph 4 that regardless of the size of the church the relative number of each type of problem the pastor deals with is approximately the same.

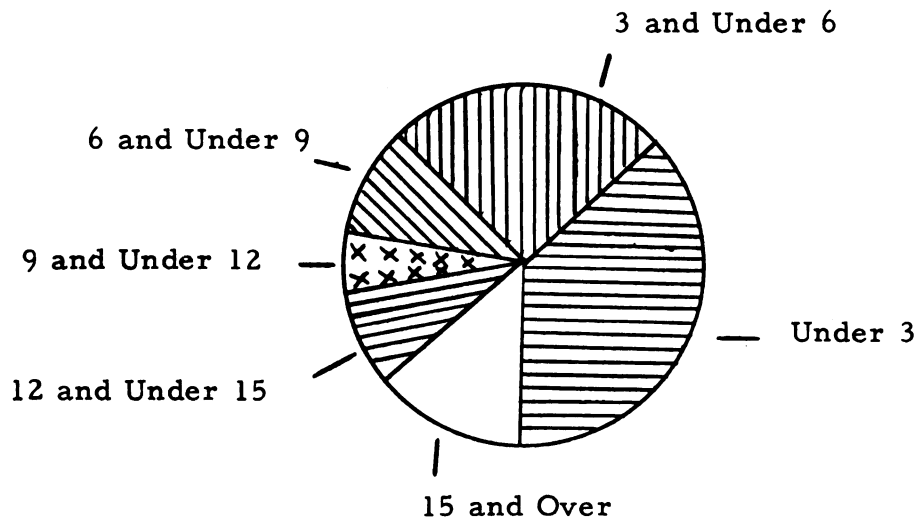
Table 12

Weekly Number of Hours Spent in Counseling

<u>Number of Hours</u>	<u>Number of Pastors</u>	<u>%</u>
Under 3	49	37.4
3 and Under 6	33	25.2
6 and Under 9	13	9.9
9 and Under 12	7	5.3
12 and Under 15	11	8.4
15 and Over	<u>18</u>	<u>13.8</u>
Total	<u>131</u>	<u>100.0</u>

Graph 5

Weekly Number of Hours Spent in Counseling



The majority of pastors spend under six hours in counseling per week according to Table 12 and Graph 5. The study further indicated a mean of five counseling hours weekly.

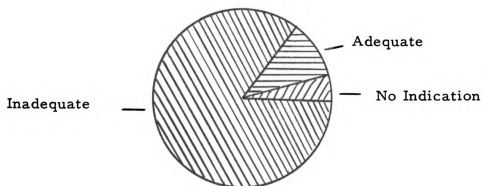
Table 13

Adequacy of Professional Training in Counseling
as Conceived by Nazarene Pastors

	<u>Number</u>	<u>%</u>
Adequate	17	10.1
Inadequate	143	85.1
No Indication	<u>8</u>	<u>4.8</u>
Total	<u>168</u>	<u>100.0</u>

Graph 6

Adequacy of Professional Training in Counseling
as Conceived by Nazarene Pastors



One may conclude from Table 13 and Graph 6 that a majority of the Nazarene pastors feel that their professional training for counseling was inadequate.

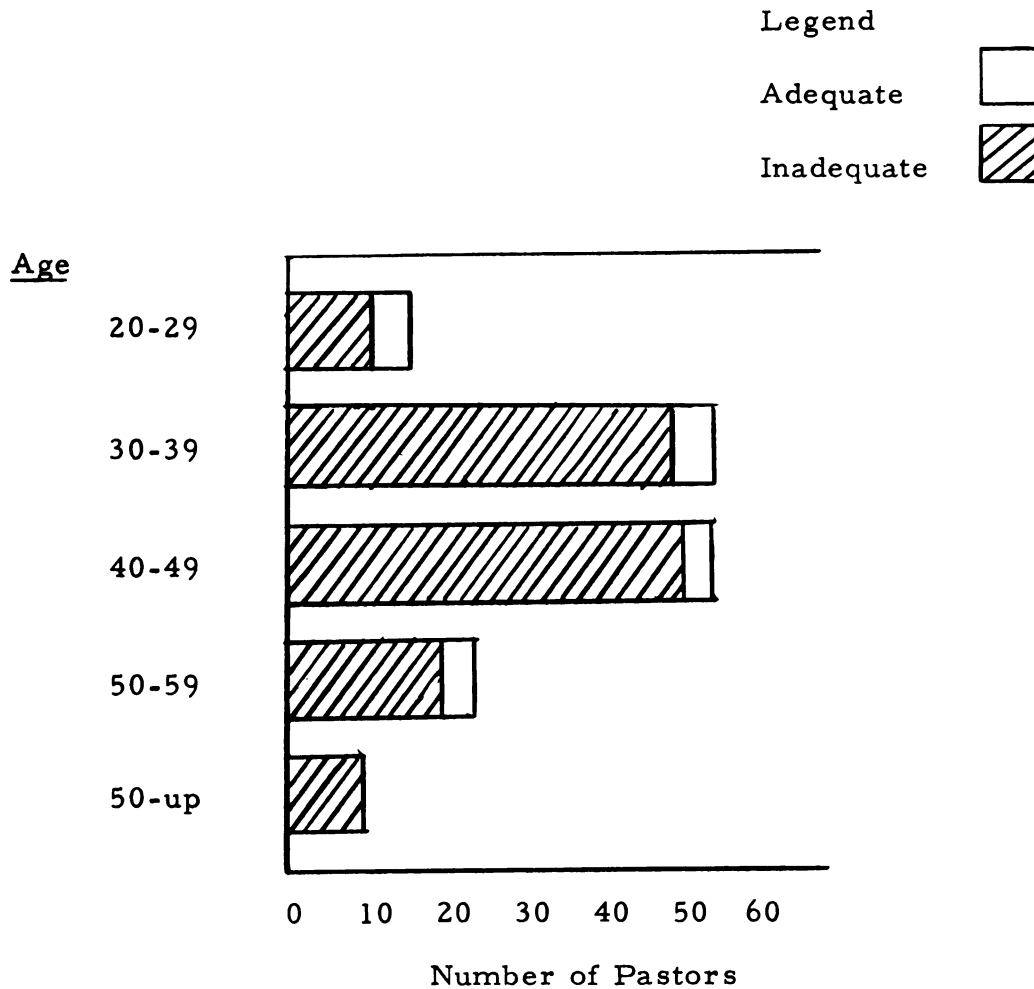
Table 14

Adequacy of Professional Training in Counseling as Conceived
by Pastors in Relation to Age of Pastors

<u>Age of Pastor</u>	(Adequacy)	<u>Yes</u>	<u>No</u>
20-29		5	11
30-39		5	50
40-49		3	52
50-59		4	20
60-Up		<u>0</u>	<u>10</u>
Totals		<u>17</u>	<u>143</u>

Graph 7

Adequacy of Professional Training in Counseling as Conceived
by Pastors in Relation to Age of Pastors

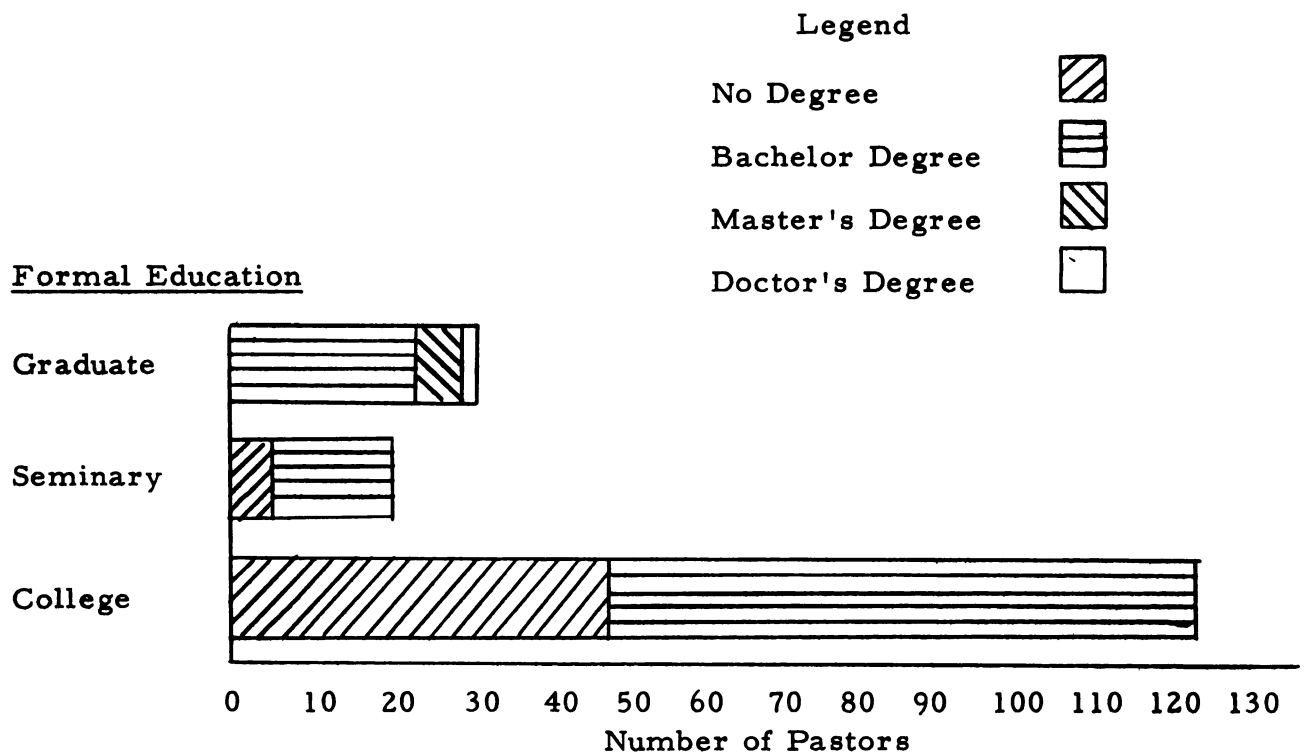


This study (Table 14 and Graph 7) reveals that all ages of pastors feel inadequately trained for the counseling aspects of their ministry. It may be noted further that the pastors from 20-29 felt that their training in this area was more adequate than did the other pastors.

Table 15
Education of Nazarene Pastors

	Some Work (No Degree)	Bachelor's Degree B.A., Th.B., B.D.	Master's Degree M.A., M.Th.	Doctor's Degree Th.D., Ph.D., Ed.D.
College	48	77		
Seminary	6	16		
Graduate	24	32	6	2

Graph 8
Education of Nazarene Pastors



It is evident from the above (Table 15 and Graph 8) that the majority of Nazarene pastors are trained at the Bachelor's level. Since 89% (Table 8) of the Nazarene pastors feel that counseling is an important aspect of their ministry, one may assume that a strong emphasis in counseling would be desirable at the college level.

Table 16

Point in Time to take Counseling Courses
as Recommended by Nazarene Pastors

<u>Time</u>	<u>Number</u>
In College	20
In Post College Seminary	19
While Pastoring	27
At All Levels	87
No Indication	<u>15</u>
Total	<u>168</u>

Graph 9
 Point in Time to take Counseling Courses
 as Recommended by Nazarene Pastors

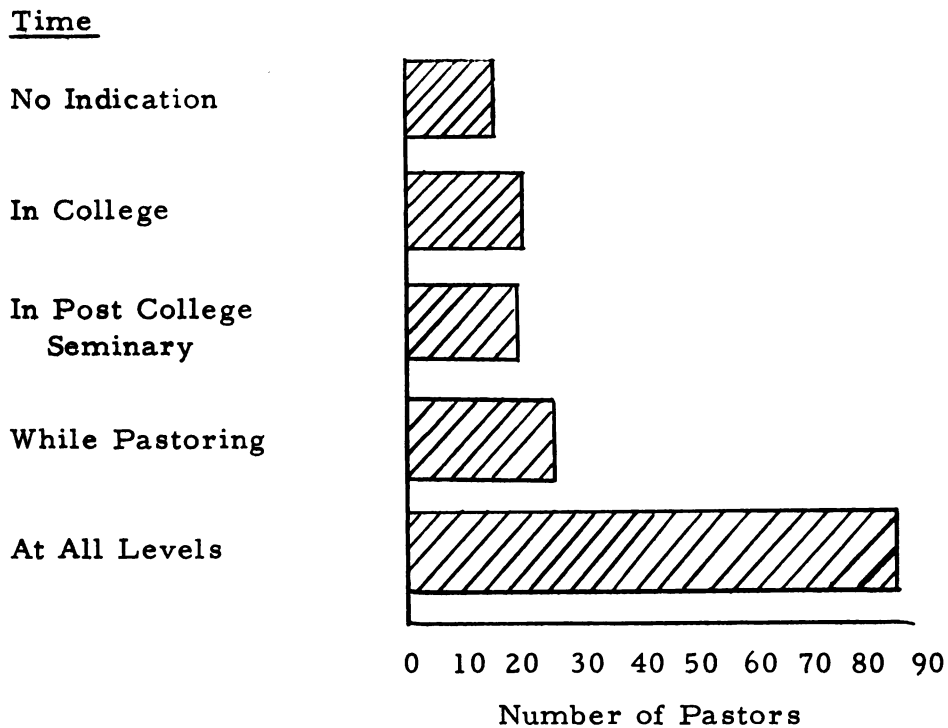


Table 16 and Graph 9 reveal that most Nazarene pastors feel that Counseling courses are needed at all levels of training.

The study also shows that 137 of the 168 pastors included in the study recommend counseling courses to be included in the pastor's course of study for ordination.

Table 17

**Areas in Counseling for which Ministers Felt
Most Qualified and Least Qualified**

Number of Pastors Who Felt They Were:		
<u>Area</u>	<u>Most Qualified</u>	<u>Least Qualified</u>
Religion	136	0
Marriage	32	2
Family Crisis	27	16
Illness	26	3
Pre-Marital	13	8
Death	13	8
Mental Health	9	72
Vocational	9	19
Interpersonal	9	17
Alcoholism	8	48
Divorce	8	18
Philosophy of Life	8	10
Parent-Child Relation	7	13
Educational	7	9
Guilt	5	5
Grief	4	3
Physical	1	25
Sex	0	43

Graph 10

Areas in Counseling for which Ministers Felt

Most Qualified and Least Qualified

Areas

Religion

Marriage

Family Crisis

Illness

Pre-Marital

Death

Mental Health

Vocational

Interpersonal

Alcoholism

Divorce

Philosophy of Life

Parent-Child Relation

Educational

Guilt

Grief

Physical

Sex

Legend

Most Qualified

Least Qualified



Number of Pastors

0 8 16 24 32 40 48 56 64 72 128 136

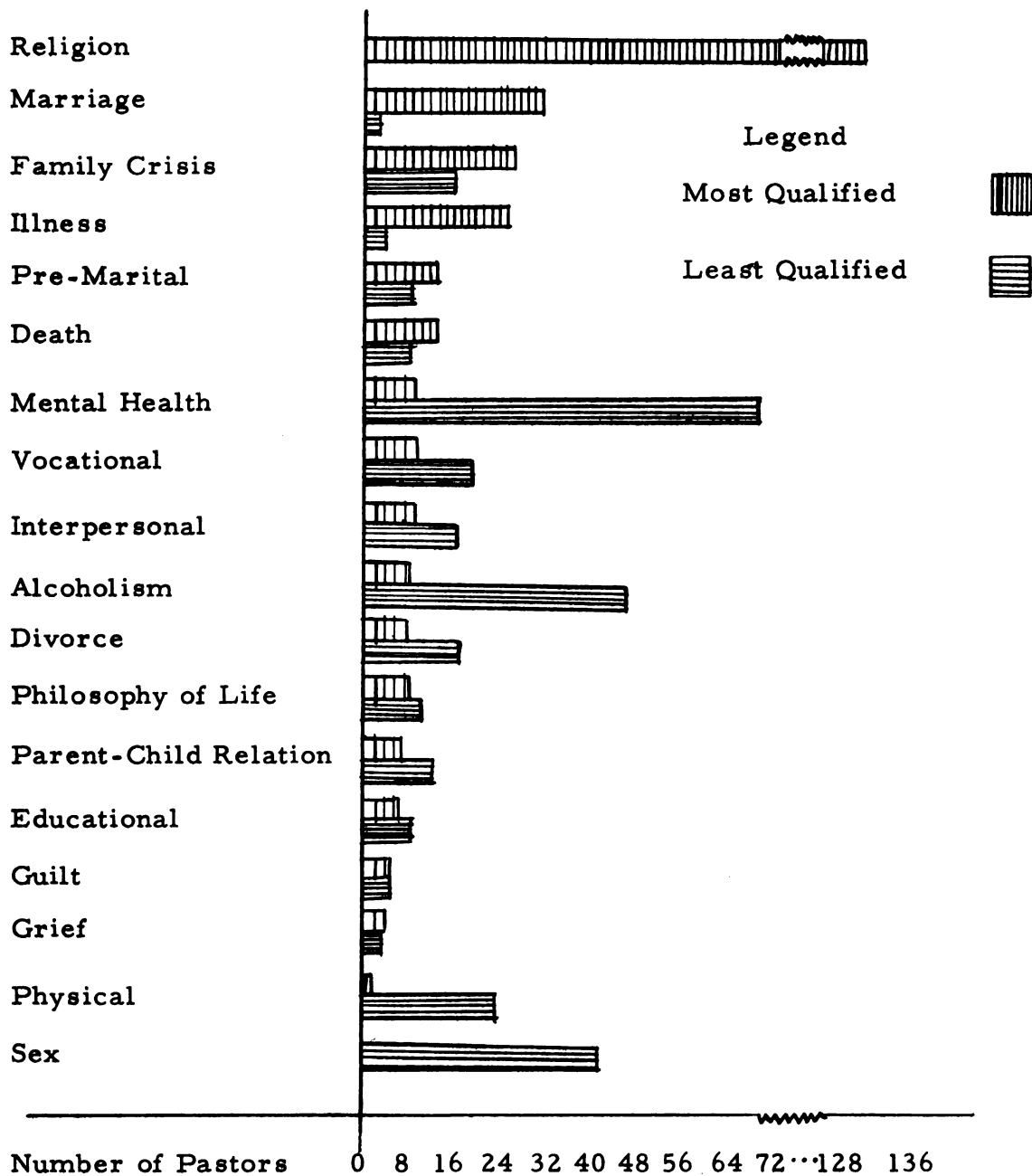


Table 17 and Graph 10 show that Nazarene pastors felt most qualified for counseling in the area of religion. They felt least qualified to deal with the problems of mental health, alcoholism, sex and physical problems. The study also revealed that institutions training Nazarene ministers require from one to six hours in psychology, depending upon the institution, with four of the six Nazarene colleges requiring only one three hour course. The course of study for ordination of Nazarene ministers requires no course in psychology.

It appears that the feeling of qualification, or lack of it, may be related to the training of pastors. The present course curriculum for pastoral training is weighted heavily with courses in religion and is apparently weak in the area of psychology.

Table 18

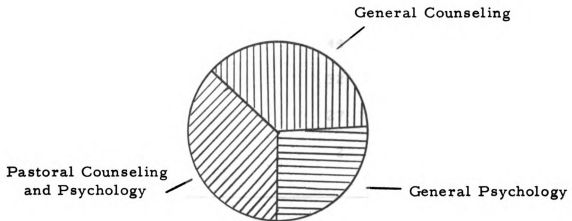
Type of Courses Recommended for Counseling Training
by Nazarene Ministers

<u>Courses</u>	<u>Number</u>	<u>%</u>
General Psychology	80	25.8
General Counseling	116	37.5
Pastoral Counseling and Psychology	114	36.8

Graph 11

Type of Courses Recommended for Counseling Training

by Nazarene Ministers



The three recommended areas for counseling training by Nazarene pastors are shown in the above graph (11) and the preceding table (18). Specific courses recommended in each area will be subsequently indicated.

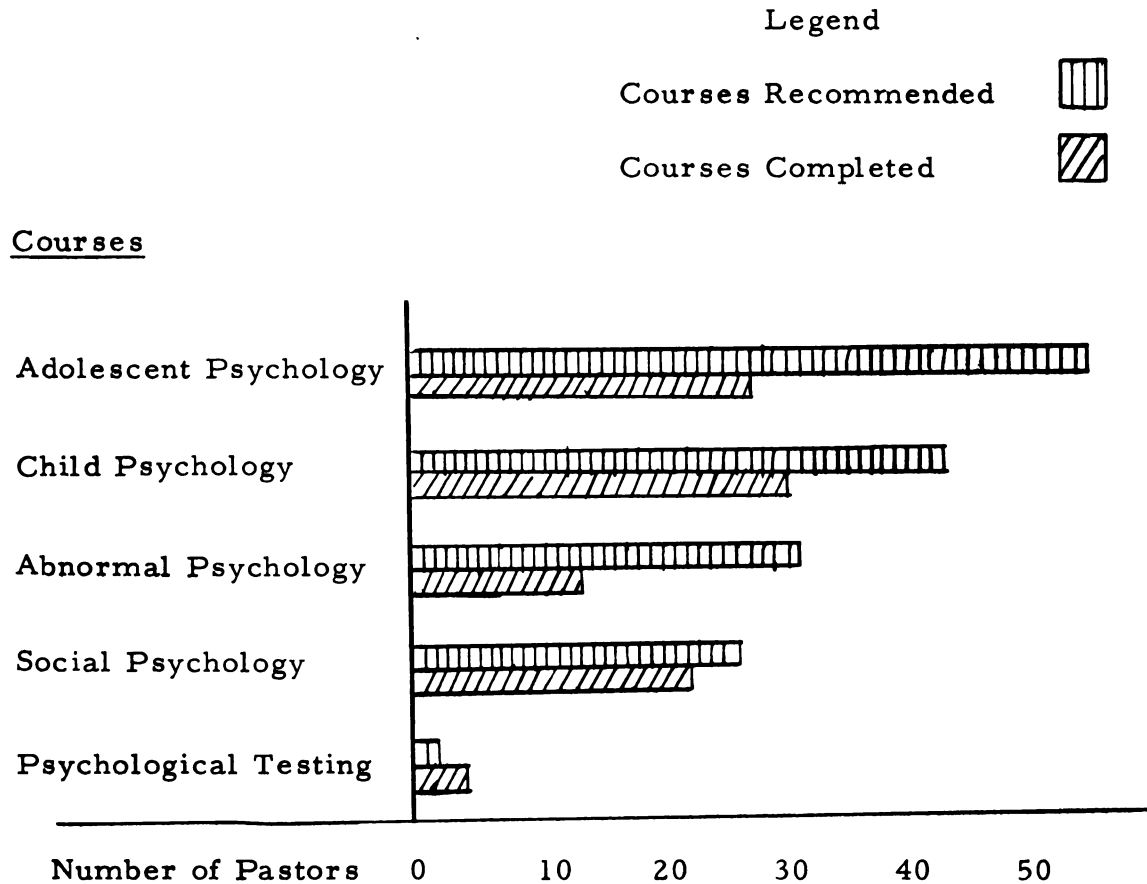
Table 19

Courses in General Psychology Recommended for
Counseling Training and Courses Completed

<u>Courses</u>	<u>Number of Pastors Recommending Course</u>	<u>Number of Pastors Having Completed Course</u>
Adolescent Psychology	56	28
Child Psychology	44	31
Abnormal Psychology	32	14
Social Psychology	27	23
Psychological Testing	2	4

Graph 12

**Courses in General Psychology Recommended for
Counseling Training and Courses Completed**



The recommendations of psychology courses in order of their importance as determined by the pastors and the courses they have taken are shown in Table 19 and Graph 12. It is apparent that more pastors took psychological testing than recommended it. The courses in adolescent, child, abnormal, and social psychology are more strongly recommended than the other course in psychology.

Table 20
Courses in General Counseling Recommended for
Counseling Training and Courses Completed

<u>Courses</u>	<u>Number of Pastors Recommending Course</u>	<u>Number of Pastors Having Completed Course</u>
Marriage and the Family	90	11
Psychology of Personality	75	23
Personal Counseling	46	9
Interview Technique	45	7
Supervised Practice in Counseling	20	4
Social, Educational, Vo- cational Information	15	12
The Process of Psycho- therapy	12	1
Personality and Culture	8	3

Graph 13

Courses in General Counseling Recommended for
Counseling Training and Courses Completed

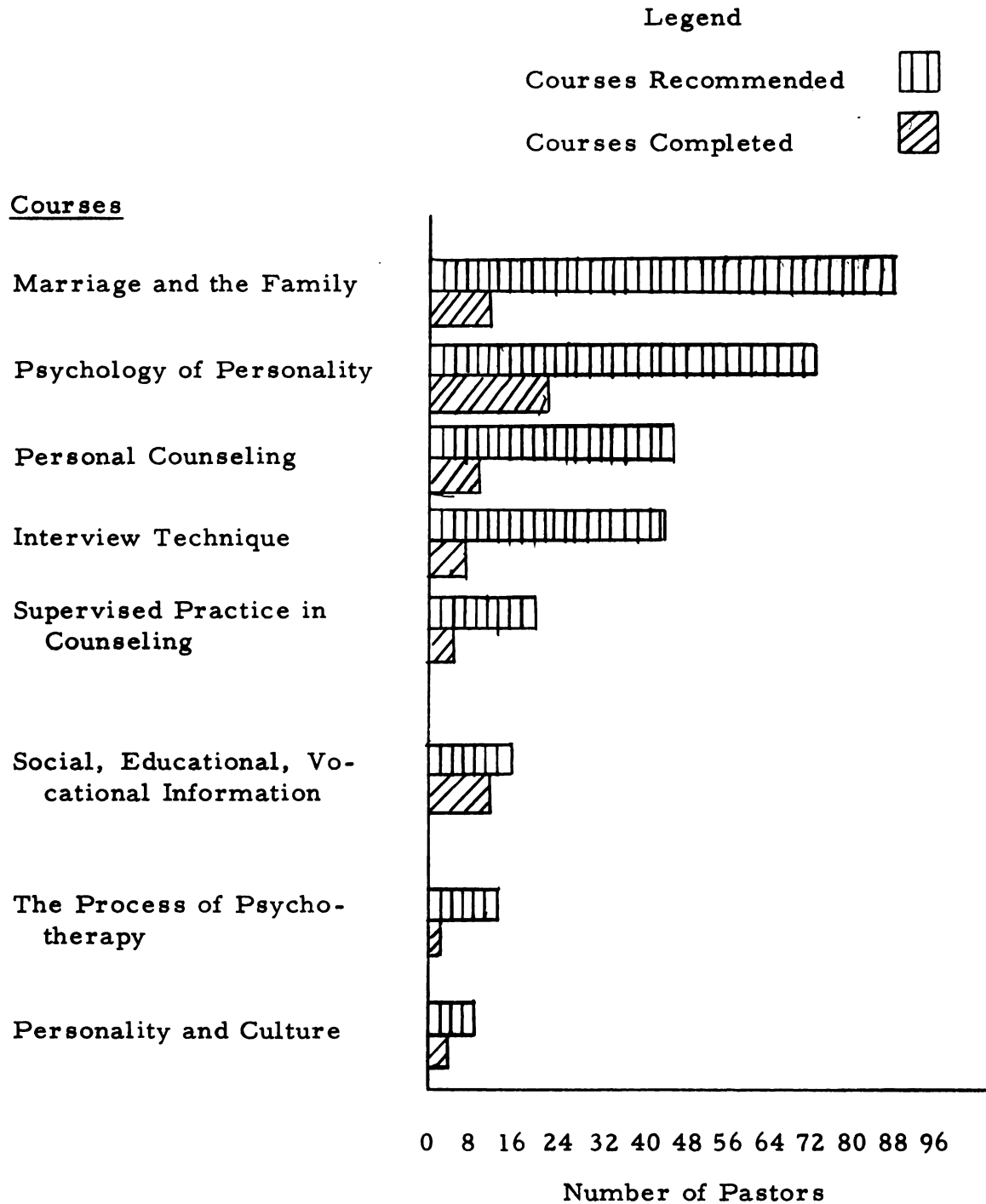


Table 20 and Graph 13 reveal that the training of Nazarene pastors in the area of general counseling is limited. The four courses--marriage and the family, psychology of personality, personal counseling, and interview techniques--are more frequently recommended than the other courses in general counseling.

Table 21

Courses in Pastoral Counseling and Psychology

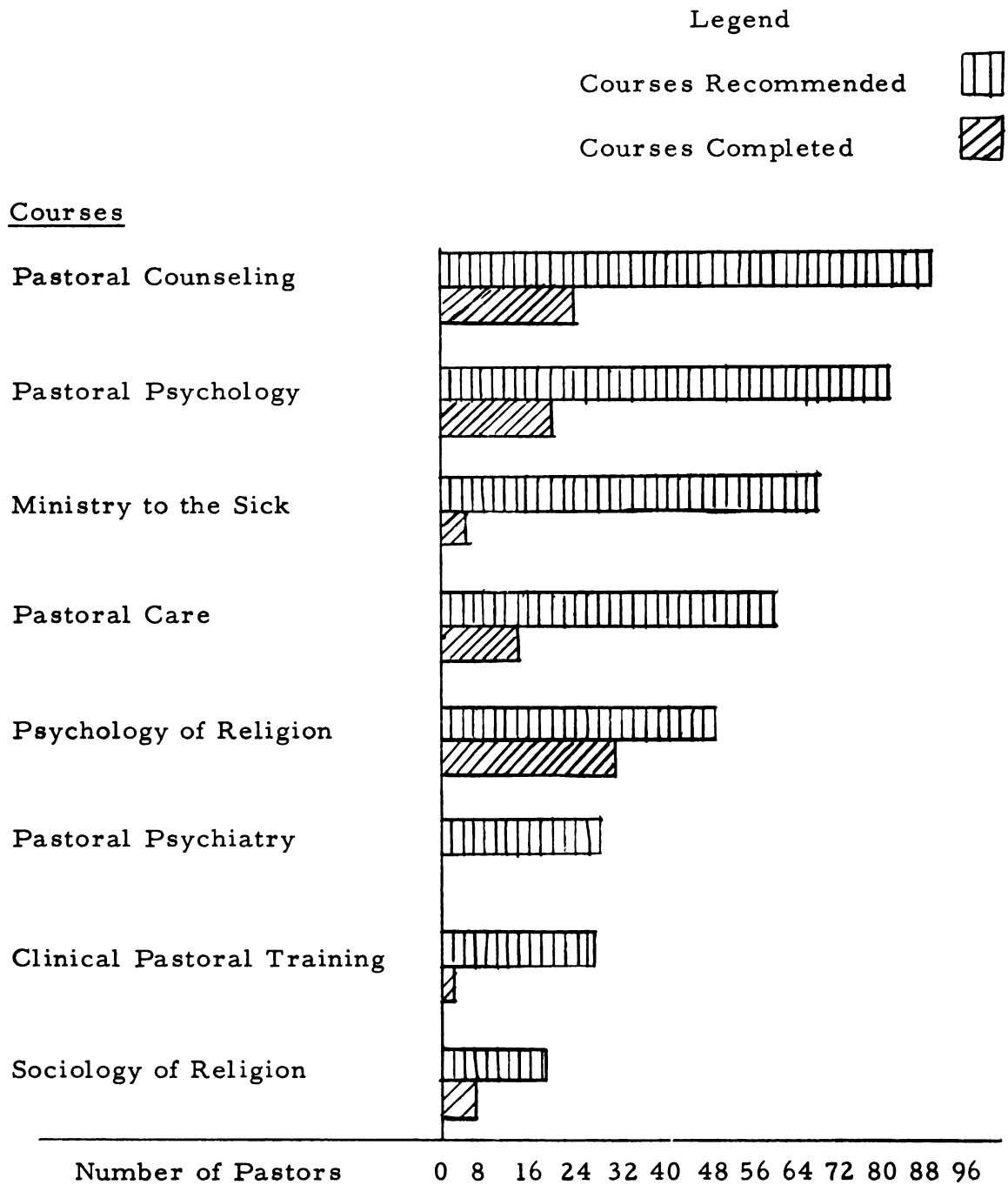
Recommended for Counseling Training and Courses Completed

<u>Courses</u>	<u>Number of Pastors Recommending Course</u>	<u>Number of Pastors Having Completed Course</u>
Pastoral Counseling	93	25
Pastoral Psychology	86	21
Ministry to the Sick	71	5
Pastoral Care	63	15
Psychology of Religion	52	33
Pastoral Psychiatry	30	0
Clinical Pastoral Training	29	2
Sociology of Religion	19	6

Graph 14

Courses in Pastoral Counseling and Psychology

Recommended for Counseling Training and Courses Completed



The four courses most recommended in the area of pastoral counseling and pastoral psychology according to Table 21 and Graph 14 are: pastoral counseling, pastoral psychology, ministry to the sick, and pastoral care. This seems to indicate a lack of training in this area, as more pastors recommended these courses than had taken them. It also indicates that these courses would prove valuable in the pastoral ministry.

IMPLICATIONS FOR PROFESSIONAL TRAINING

In this investigation the writer has attempted to ascertain the (1) nature and scope of counseling, (2) adequacy of professional counseling training, and (3) significant implications for professional training of Nazarene pastors.

The nature and scope of counseling, as well as the adequacy of professional counseling training as conceived by Nazarene pastors, has been presented by tables and graphs. The implications for professional training are to be subsequently discussed.

The fact that nearly 89% of the pastors indicated that counseling is important in the pastoral ministry seems significant. It is apparent that a need exists for the training of Nazarene pastors to equip them for this aspect of their ministry. Eighty-seven out of 168 pastors recommended that consideration be given to counseling training at all levels in the training of ministers. This recommendation

includes the pastor's course of study for ordination. This seems to have significance in the fact that 30% of the Nazarene pastors, according to this study, have not completed college; hence, the only counseling training received would be in their study for ordination. Since 74% of the Nazarene pastors are trained at the college level, it is apparent that a strong emphasis in counseling training in the colleges that train Nazarene ministers would be desirable. In the light of the fact that only 10% of the Nazarene pastors feel adequate for the counseling responsibilities of their ministry, some type of denominational program to meet this need of pastors presently serving churches may have value.

A commonality of problems pastors encounter in pastoral counseling regardless of the size of church membership they serve (Graph 4) is apparent. This would indicate a need for a similar counseling training program for all Nazarene pastors.

The problems pastors deal with are categorized in four categories: (1) emotional-interactional, (2) religio-philosophical, (3) marriage-family, and (4) educational-vocational. Thirty-one per cent (31%) of the problems pastors deal with are in the religio-philosophical area. The fact that pastors felt most qualified in this area was in harmony with their training which places a strong emphasis on religion and philosophy.

In this study the pastors identified 69% of their counseling responsibilities in the three categories other than religion and philosophy of life. This suggests that a need exists in their professional preparation for courses in counseling of a social-psychological nature.

The recommendations for courses by the pastors were grouped in three areas: general psychology, general counseling, and pastoral counseling and psychology. The four courses most recommended in each of these areas, according to preference, are as follows:

General Psychology

1. adolescent psychology
2. child psychology
3. abnormal psychology
4. social psychology

General Counseling

1. marriage and the family
2. psychology of personality
3. personal counseling
4. interview techniques

Pastoral Counseling and Psychology

1. pastoral counseling
2. pastoral psychology
3. ministry to the sick
4. pastoral care

Since the above courses are recommended by pastors now in the active ministry and these course recommendations are the result of felt needs, schools training Nazarene pastors should consider these recommendations for curriculum changes.

The writer feels that since 85% of the pastors felt inadequately prepared for pastoral counseling, that institutions training Nazarene pastors should analyze carefully their total training programs in counseling to determine what changes should be made.

SUMMARY

In this investigation an attempt was made to analyze the counseling responsibilities and professional counseling training of Nazarene pastors, and to derive significant implications for professional training. The population used was the active pastors of the Church of the Nazarene in the United States. A sample of 250 pastors, 5% of the population was drawn. The churches were classified in five strata according to the size of church membership. A proportionate random sample was then taken from each strata. After considering the type of information desired, the type of respondents, and their accessibility, a questionnaire was devised. The questionnaire was designed to give data concerning these three areas: (1) the pastors' counseling responsibilities, (2) the pastors' counseling training, and (3) the pastors' recommendations for pastoral counseling training. One hundred and eighty-eight (188) of the 250 pastors responded to the questionnaire and the data given by 168 pastors, 67% of the original sample, were used in the final study. The data were put on I. B. M. cards (approximately 10,000) to facilitate handling and computation of response in testing of hypotheses.

The contingency coefficient was used to study the strength of the relationship between the variables under study. The .05 level

of significance was agreed upon as the appropriate level for accepting or rejecting the hypotheses.

Twenty null hypotheses (the hypotheses of no relationship) were tested to determine whether or not any relationship exists between:

- (a) regional distribution of pastors, (b) size of community, (c) size of church membership,
- (d) dominant age groups of church membership,
- (e) age of pastors; AND (1) amount of time Nazarene pastors spend in counseling, (2) type of problems Nazarene pastors deal with in counseling, (3) professional counseling training of Nazarene pastors, (4) training recommendations by Nazarene pastors.

In four of the twenty hypotheses the null hypotheses were rejected at the .05 level which indicated that there was more than chance operating in the problems and that the expected and observed values differed by an amount too large to be attributed to chance alone. Hence, the null hypotheses were rejected in favor of the alternate hypotheses, which stated that a relationship existed. Therefore, it can be stated, at the 95% confidence level, that the following four null hypotheses were rejected: (1) there is no relationship between the amount of time spent in counseling and the size of the

community; (2) there is no relationship between the amount of time spent in counseling and the size of the church membership; (3) there is no relationship between the adequacy of professional counseling training as conceived by Nazarene pastors and the regional distribution of pastors; (4) there is no relationship between the adequacy of professional counseling training as conceived by Nazarene pastors and the ages of the pastors. It was also found that in every case the value of $C_{\text{corrected}}$ differed from one by a rather large amount, indicating the relationship was not too strong.

Since the purpose of the study was to study the: (1) nature and scope of counseling, (2) adequacy of counseling training as conceived by pastors, and (3) to derive significant implications regarding the training of Nazarene pastors, tables and graphs of data were used to summarize additional information received from the questionnaires. The study showed that 89% of the pastors consider counseling to be an important aspect of the pastoral ministry. Sixty-nine per cent (69%) prefer the non-directive method of counseling; however, 62% actually use the directive or an eclectic approach. The problems pastors deal with were classified into categories and it was found that 31% of their counseling responsibilities were in the religio-philosophical and the remaining 69% were in emotional-interactional, marriage-family, and education-vocational. It was revealed that regardless of the size of the church membership the relative number of each type of problem the pastor deals with is approximately the same.

The majority of pastors spend under six hours in counseling per week, the mean being five hours weekly. Regarding the adequacy of professional training, 85% of the pastors conceived of their training in counseling as being inadequate. Most Nazarene ministers are trained at the college level; however, they recommend counseling training at all levels of their professional preparation, including the pastor's course of study for ordination.

The area of counseling in which pastors felt most qualified was religion. They felt least qualified to deal with problems of mental health, alcoholism, sex and physical problems. The four courses in the three respective areas--general psychology, general counseling, and pastoral counseling and psychology--most recommended for counseling training are the following:

General Psychology

1. adolescent psychology
2. child psychology
3. abnormal psychology
4. social psychology

General Counseling

1. marriage and the family
2. psychology of personality
3. personal counseling
4. interview techniques

Pastoral Counseling and Psychology

1. pastoral counseling
2. pastoral psychology
3. ministry to the sick
4. pastoral care

The following implications as conceived by the writer for pastoral counseling training were derived:

1. Nazarene pastors need to be trained for counseling, since 89% of the pastors indicated that counseling was an important aspect of their pastoral ministry.

2. There is a need for a similar counseling training program for all Nazarene pastors in the fact that there exists a commonality of problems encountered.

3. It seems imperative that there be a strong counseling training program in college as most Nazarene pastors are trained at this level.

4. Consideration should be given to counseling training as part of the course of study for ordination to the Nazarene ministry as there are no courses at present offered in psychology or counseling and since 137 of the 168 pastors indicate a need for counseling to be included.

5. A need exists for some program to equip the men now in the pastorate for counseling in that 85% of the pastors felt they were inadequately prepared for their counseling responsibilities.

6. A need exists for courses of a social-psychological nature as 69% of the Nazarene pastors' counseling problems are in this area.

Courses pastors felt would be helpful in equipping them for counseling were classified in three categories: general psychology, general counseling, and pastoral counseling and psychology. The courses most recommended in each of the three areas according to preference are as follows:

General Psychology

1. adolescent psychology
2. child psychology
3. abnormal psychology
4. social psychology

General Counseling

1. marriage and the family
2. psychology of personality
3. personal counseling
4. interview techniques

Pastoral Counseling and Psychology

1. pastoral counseling
2. pastoral psychology
3. ministry to the sick
4. pastoral care

Since the courses recommended are the expressions of felt needs of men in the pastorate, schools training Nazarene pastors should consider these recommendations for curriculum changes.

It is the opinion of the writer that since only 10% of the active pastors felt adequately prepared for pastoral counseling that all institutions training Nazarene pastors, as well as the committee responsible for the curriculum of the pastors' course of study for ordination, should analyze their total counseling training program to determine what changes should be made.

RECOMMENDATIONS FOR FURTHER RESEARCH

Investigations of the following might prove to be rewarding research problems:

1. Do Nazarene pastors feel as inadequately prepared in other areas of their ministry as they do in counseling?
2. How effective is the pastoral counseling of Nazarene pastors?
3. How does preaching effect the counseling role of the pastor?
4. Why do people go to their pastor for counseling and why do they not go to him?
5. How effective is the pastoral counseling of pastors who are identified as theologically conservative as compared with pastors classified as theologically liberal?

6. How feasible would be a plan for churches of the same theological persuasion as the Church of the Nazarene to cooperate in providing a program of pastoral counseling?

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APPENDIX I

LETTERS USED IN SECURING RESPONSE
TO QUESTIONNAIRE

Church of the Nazarene

INTERNATIONAL HEADQUARTERS, 6401 THE PASEO, KANSAS CITY 31, MISSOURI, PHONE DElmar 3-7000
DEPARTMENT OF EDUCATION

November 20, 1962

Dear Pastor:

Within a few days you will be receiving a questionnaire from Rev. G. A. Gough, pastor of Wichita First Church. He is doing a study of the counseling responsibilities of Nazarene ministers, under the direction of Dr. John Jordan, of Michigan State University.

I have looked over his research proposal as well as the questionnaire and feel that the study may prove to have significance for our denomination.

Since the questionnaire is only being sent to a very limited number of our pastors, I urge your cooperation in this project. It does not require a signature.

Sincerely,

S. T. LUDWIG, Executive Secretary
Department of Education

PASTOR
G. A. GOUGH

ASSOCIATE MINISTERS
DAVID P. BENSON
W. I. GOUGH

First Church of the Nazarene

1400 EAST KELLOGG • WICHITA, KANSAS • HOBERT 4-6737

(INTRODUCTORY LETTER)

November 23, 1962

Dear Fellow Pastor:

You have been chosen as one of a select group from the pastors of our denomination to participate in a study relative to the Ministry.

Under the direction of Dr. John Jordan, faculty advisor at Michigan State University, I am doing a dissertation on the counseling responsibilities of Nazarene pastors. Dr. S. T. Ludwig, general secretary of our church, and other church leaders feel that the study will have significance in the training of Nazarene ministers, so I am encouraged to attempt this specific study.

Your cooperation is needed to make the study valid, so I am anxious that when you receive the questionnaire that will be sent to you within a week, that you will conscientiously fill it out and return it immediately.

I trust that your effort in cooperating with this study will prove to be of benefit to our church.

Sincerely,

G. A. Gough

GAG:lh

PASTOR
G. A. GOUGH

ASSOCIATE MINISTERS
DAVID P. BENSON
W. I. GOUGH

First Church of the Nazarene

400 EAST KEELOGG • WICHITA, KANSAS • HOBERT 4-6737

(QUESTIONNAIRE COVER LETTER NO. 2)

January 24, 1963

Dear Fellow Pastor:

Greetings! Several weeks ago you received a questionnaire regarding a study in Pastoral Counseling. I'm sure by now you have filled in the questionnaire, but in event it has been misplaced I'm enclosing another. Since counseling is part of the pastor's responsibility and all pastors are involved in counseling in some measure, I am anxious to complete my study of this aspect of our ministry in hopes that it may make a contribution to our church in the training of future pastors.

I'm at the point in my dissertation where I must compile the information from the questionnaires to meet the deadline set by the school, but find myself in an embarrassing position, that of having not quite enough questionnaires returned to make the study valid. I'm sure you are familiar with studies such as this and know that unless a certain percent of the questionnaires are returned, the study will not have credence.

If you have felt somewhat limited in filling out the questionnaire (I share your feelings for I did also), please do what you can, filling in the portion of the questionnaire that applies to you. Also, I trust that you will rest assured that no personal information or name will be used in the study. I am only trying to ascertain the amount of counseling responsibilities that our men feel they have and to what degree they feel adequate to meet them.

I will be greatly indebted to you if you drop the questionnaire in the mail today, as my study depends upon your cooperation.

I shall count it a privilege if at any time I can serve you.

Sincerely,

GAG:lh

G. A. Gough

APPENDIX II

QUESTIONNAIRE

PASTORAL COUNSELING QUESTIONNAIRE

I. CHURCH AND PASTOR INFORMATION

1. Church:

- A. Location (city) _____
- B. Approximate size of city _____
- C. Number of church members _____
- D. Approximate number of church members in the following age groups:
 - 1) Under 30 years of age _____
 - 2) 31-49 years of age _____
 - 3) 50 years of age and up _____
- E. Approximate age of church _____
- F. Approximate percent of your membership in the following income levels:
 - 1) Under \$2,000 _____
 - 2) \$2,000 to \$3,000 _____
 - 3) \$3,000 to \$5,000 _____
 - 4) \$5,000 to \$7,500 _____
 - 5) \$7,500 to \$10,000 _____
 - 6) \$10,000 up _____

2. Pastor:

- A. Age at closest birthday _____
- B. Years of service at this church _____
- C. Total years in active ministry _____

D. Education: (check proper category)

- 1) College:
 _____ 1 yr. _____ 2 yrs. _____ 3 yrs.
 _____ Bachelor's Degree
- 2) Seminary:
 _____ 1 yr. _____ 2 yrs. _____ Seminary Degree
- 3) Graduate Study:
 _____ 1 yr. _____ 2 yrs. _____ 3 yrs.
 _____ Graduate Degree
- 4) Degrees Held:

<u>Type of Degree</u>	<u>Institution</u>	<u>Date Obtained</u>	<u>Major</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

II. COUNSELING PRACTICE

1. Average weekly hours spent in counseling? _____
2. Where do you hold the majority of your counseling sessions? (check proper category)
- A. Church office _____
- B. Your home _____
- C. Home of counselee _____
- D. Other _____
 (Explain)

3. Of the total number of counseling hours per week (remember question #1 in this section) how would you distribute them according to the following available categories (use only those categories in which you actually spend some time)?

<u>Problem Categories</u>	<u>Number of Hours Per Week</u>
A. Religion	_____
B. Vocational	_____
C. Marriage	_____
D. Pre-Marital	_____
E. Sex	_____
F. Inter-personal relationships	_____
G. Family crisis situations	_____
H. Mental health	_____
I. Alcoholism	_____
J. Philosophy of life	_____
K. Divorce	_____
L. Educational	_____
M. Illness	_____
N. Death	_____
O. Grief	_____
P. Physical problems	_____
Q. Guilt	_____
R. Parent-child relationships	_____
S. Other (Explain)	_____

4. Select from the above list of problem categories the four you feel most qualified to deal with as a counselor. Rank your choice in order by placing the corresponding letter in the blank:
- 1 _____ 2 _____ 3 _____ 4 _____
5. Select from the above list of problem categories the four you feel least qualified to deal with as a counselor. Rank in order by placing the corresponding letter in the blank:
- 1 _____ 2 _____ 3 _____ 4 _____
6. Approximately what per cent of your counseling time is spent with the following age groups?
- A. Under 30 years of age _____%
- B. 31-49 years of age _____%
- C. 50 years of age and up _____%
7. Average amount of time spent in each counseling session, in hours _____
8. Average number of counseling sessions each week per counselee: (check number)
- 1 _____ 2 _____ 3 _____ 4 _____ 5 or more _____
9. Do you keep counseling records? (check one)
- Yes _____ No _____
10. If you were asked to define pastoral counseling, how would you do it?

11. In your experience do you feel that counselees seeking pastoral counseling (check one of the following)
- A. _____ Want the pastor to give them an answer to their problems?
- B. _____ Want the pastor to help them work out a solution to their problems?
- C. _____ Want an understanding atmosphere in which they can eventually work out a solution to their problem when the emotional block has been removed through the counseling interview?
12. Which of the three approaches to pastoral counseling (found in question #11) do you find best suits you? (check one)
- A _____ B _____ C _____
13. What barriers, if any, in your opinion would prevent a pastor from being an effective counselor? (Explain)

III. PRE-MARITAL COUNSELING

The present investigator has a definite interest in the area of pre-marital counseling and feels that due to the great emphasis being placed upon it in the literature and among counselors, it should be included in the present survey.

1. Do you do pre-marital counseling with the couples you marry? (check one)
- Regularly _____ Sometimes _____ Never _____
2. If the answer to the previous question is regularly or sometimes, check the following categories you discuss:
- Religion _____ Other _____
(Explain)
- Finances _____

Inter-personal relation-
ships _____

Other _____
(Explain)

Sex _____

Philosophy of life _____

Other _____
(Explain)

3. Average number of counseling sessions per couple before marriage? _____
4. Do you have a program of post-marital counseling after marriage with the couples you marry? (check one)

Yes _____ No _____
5. If the answer to the previous question is yes, please state number of post-marital counseling sessions. _____
How are these spaced according to time? (For example: Once a month for three months, etc.) _____
(Please briefly explain)
6. What kinds of pre-marital counseling problems do you refer to someone else? _____
(Please explain)
7. What tests or inventories used, if any?

A. _____

B. _____
8. If you recommend any suggested reading to these couples, please state:

A. The general areas:

B. The titles:

IV. REFERRALS

1. What types of counseling problems do you feel you should refer to someone else? (check any of the following)

Religion _____ Vocational _____ Marriage _____
Pre-marital _____ Sex _____ Inter-personal relation-
ships _____ Family crisis situations _____ Mental
health _____ Alcoholism _____ Philosophy of life _____
Divorce _____ Educational _____ Illness _____ Death _____
Grief _____ Physical _____ Guilt _____ Parent-child
relationships _____ Other _____ (Explain)

2. To what organizations, agencies, or professional personnel have you referred counselees within the past year? (Specify)
3. Do you continue a counseling relationship after referral? (check one)
- Yes _____ No _____
4. If the answer to question #3 is yes, under what conditions is this relationship continued?

V. PASTORAL COUNSELING TRAINING

1. What books have you found most helpful in the counseling area? (If none, ignore this question)

	<u>Author</u>	<u>Title</u>
A.	_____	_____
B.	_____	_____
C.	_____	_____
D.	_____	_____

2. What periodicals?

A.	_____
B.	_____
C.	_____
D.	_____

3. What clinics, workshops, pastoral schools, seminars, etc., meetings on counseling have you attended during the last year? (If any, please list them)

4. What courses have you taken which are related to counseling? (If none, ignore this question) (Check the course or its equivalent)

<u>Course</u>	<u>Length of Course in Weeks</u>	<u>Number Hours Per Week Met</u>	<u>Years Taken</u>
A. Psychology of personality	_____	_____	_____
B. Social Psychology	_____	_____	_____

C.	Abnormal Psychology	_____	_____	_____
D.	Adolescent Psychology	_____	_____	_____
E.	Psychology of Religion	_____	_____	_____
F.	Child Psychology	_____	_____	_____
G.	Pastoral Psychology	_____	_____	_____
H.	Social, Educational- Vocational Information	_____	_____	_____
I.	Interview Techniques	_____	_____	_____
J.	Personal Counseling	_____	_____	_____
K.	Pastoral Counseling	_____	_____	_____
L.	Supervised Practice in Counseling	_____	_____	_____
M.	Clinical Pastoral Training	_____	_____	_____
N.	Psychological Testing	_____	_____	_____
O.	Marriage and the Family	_____	_____	_____
P.	Ministry to the Sick	_____	_____	_____
Q.	Pastoral Psychiatry	_____	_____	_____
R.	Personality and Culture	_____	_____	_____
S.	The Process of Psycho- therapy	_____	_____	_____
T.	Pastoral Care	_____	_____	_____
U.	Sociology of Religion	_____	_____	_____
V.	_____ (Other, title)	_____	_____	_____

W. _____
 (Other, title)

X. _____
 (Other, title)

Y. _____
 (Other, title)

Z. _____
 (Other, title)

VI. RECOMMENDATIONS FOR PASTORAL COUNSELING TRAINING

1. In the light of your experience in pastoral counseling, which of the areas or courses listed in the previous question would you recommend for a pastor who plans to meet the counseling needs of his parish? (circle the following letters which refer to the courses listed in question V-4) (For example: If you would recommend "Psychology of Personality," you would circle A.) (circle the courses you would recommend)

A B C D E F G H I J K L M

N O P Q R S T U V W X Y Z

2. At what point in an individual's preparation for the ministry do you feel courses related to counseling would be most helpful? (check one)

A. College _____

B. Seminary _____

C. Post Graduate _____

D. Taking Courses while Pastoring _____

E. At all Levels _____

3. Do you feel that some type of clinical training, such as supervised training in a hospital, counseling center, mental institution, etc., is important to the minister in preparing for counseling as a part of his parish ministry? (check one)

Yes _____ No _____

4. If the answer to question #3 was "yes" rank the types of clinical experiences listed below according to your preference. (number your preferences (most preferred, etc.) from one through six)

Hospital _____ Mental hospital _____ Penitentiary _____

Reformatory _____ Counseling clinic _____ Other _____

(Explain other)

5. Do you feel that the type and amount of training you have received in your schooling has equipped you to be an adequate pastoral counselor? (check one)

Yes _____ No _____

6. Do you feel that you need more training in counseling to do an adequate job (according to your own standards) in your counseling ministry? (check one)

Yes _____ No _____

7. Do you feel that counseling courses should be included in the pastor's (home) course of study? (check one)

Yes _____ No _____ Not Sure _____

8. What other suggestions do you have for the minister in his training in the area of counseling?

9. Do you feel that an emphasis should be placed on training in counseling skills at the seminary level? (check one)

Yes _____ No _____

10. How important do you feel counseling is in the pastoral ministry? (check one)

Important _____ Unimportant _____ Undecided _____

Your name is not necessary for this study. However, if you would like an abstract of this study upon completion, please fill in the following information:

Name _____

Address _____

I have appreciated your conscientious help in filling out this questionnaire. I sincerely hope this study will prove to be a benefit to our denomination.

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