

THE USE OF CASE WORK TECHNIQUE IN THE CURE OF SOULS

by

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"We search the world for truth; we cull
The good, the pure, the beautiful,
From graven stone and written scroll;
From all old flower fields of the soul;
And weary seekers of the best,
We come back laden from our quest,
To find that all the sages said
Is in the B ook our mothers read."

Whittier

TABLE OF CONTENTS

	p.
I. INTRODUCTORY OBSERVATIONS.....	3
Christian Ministry a Difficult Undertaking.....	3
Modern Pastors Must be well-trained Men.....	3
"Spiritual Therapy" Requires Technique.....	4
"Technique" of Honorable Origin.....	4
The Individual's Place in History.....	5
The Cure of Souls is Individual Therapy.....	5
"Cure of Souls" Involves Seeming Paradox.....	6
The Need for Objectivity in Spiritual Case Work.....	6
Symptom and Cause not Identical.....	7
II. DISCUSSION OF CASE WORK TECHNIQUE.....	7
Case Work Technique puts Order into Effort.....	7
A. DIAGNOSTIC TECHNIQUE.....	8
(1) The "Complaint".....	8
(2) The Investigation.....	9
a. The Interview.....	10
b. Relevant and Irrelevant Information.....	11
Hints and Suggestions Regarding Investigation.....	11
1) Physical Level.....	11
2) Psychological Level.....	11
3) Social Level.....	11
4) Spiritual Level.....	12
c. Recording Information.....	12
(3) Diagnosis, or, The Interpretation of Data.....	12
a. Systems of Interpretation.....	13
1) Stimulus-Response Interpretation.....	13
2) Psychoanalytic Interpretation.....	14
3) Gestalt, or, "Field Theory" of Interpretation.....	15
(4) Diagnostic Summary.....	16
(5) Treatment Hypothesis.....	17
B. THE TECHNIQUE OF THERAPY.....	17
(1) The Objective of Treatment.....	17
(2) When does Therapy Begin.....	18
(3) Planned Treatment.....	18
(4) Areas of Treatment.....	18
a. Therapy Involving Physical Improvement.....	19
b. Therapy Involving Social Relationships.....	19
c. Therapy Involving Personality Development.....	20
d. Therapy Involving the Individual's Relation to God.....	20
(5) Prevention and Cure.....	21
III. BIBLIOGRAPHY.....	22

THE USE OF CASE WORK TECHNIQUE IN THE CHRISTIAN MINISTRY

I

INTRODUCTORY OBSERVATIONS

CHRISTIAN MINISTRY A DIFFICULT UNDERTAKING. The office of the Christian ministry is undoubtedly one of the most difficult professional undertakings in the modern world. The reasons for this are plain. On the one hand, the eternal truth of human nature still holds: "The natural man receiveth not the things of the Spirit of God: for they are foolishness unto him." 1 Cor. 2:14. On the other hand, the social and economic upheavals of our age are leaving in their wake a great deal of distress and maladjustment. Nothing like it has occurred since the break-up of the Middle Ages. In the field of government, new philosophies and ideologies are emerging which challenge all that past generations have held sacred. In the field of education, materialism has seeped down from the universities and schools to the masses, and Godlessness is not only the choice of multitudes of individuals, but the passion of powerful institutions and governments. In the field of economics, great depressions have brought ruin and poverty to millions in Europe and America and the feeling of insecurity haunts the young and old alike. Trouble is also widespread in the primary relations of modern man. The family as an institution, and the home as a bulwark of civilization, have come in for their share of change and distress. All of this has affected the Christian church in its congregational life. For, while the church is not of the world, it is nevertheless in the world, and the great social, economic, political, and cultural influences of the world make their impact upon the life of the Christian as well as upon the life of the non-Christian.

Since the church is in the world, she cannot isolate herself behind rock walls, as some have foolishly tried, but she must face the world with courage. This she has always done with some degree of loyalty and success. She has fought many battles, and ugly scars mark her countenance, but her flags are still unfurled. Men and women of courage still walk within her ranks.

As the church faces the confused world today she must remain conscious of the fact that her mission remains unchanged. Her one and only purpose is to disciple the world. The words of the great commission, which fell from the lips of the eternal Christ twenty centuries ago, still ring in her ears, and point her to her task: "Go ye therefore, and disciple all nations, . . . and, lo, I am with you alway, even unto the end of the world." Matt. 28:19-20.

MODERN PASTORS MUST BE WELL TRAINED MEN. At the head of the church stands the pastor, the bishop, the parish overseer, the man of God who proclaims the church's message and feeds the flock of God. His task is to call sinners to repentance, and to edify the saints. This task is a hard one, requiring both knowledge and professional skills. In one respect it is group work, dealing with audiences and organizations; and in another it is highly individualistic, dealing with the problems of individual souls. To meet this challenge the pastor must be a well-trained man. He must study to show himself a workman approved of God, capable for the task to which he has been ordained. He must not only be a student of the doctrinal content of religion, but of human nature as well. He must know the Bible, but he must also know man. And to apply such knowledge, he must have at his command, methods, skills, and techniques which in group work, will enable him to be an effective instructor, preacher, and leader; and in his ministry to the individual, will enable him to diagnose his problems, and plan such treatments as will assist the distressed and disturbed saints of God to grow in grace daily. It is the purpose of this treatise to review a method and technique which we believe can be used to advantage by the pastor in his ministry to the individual.

"SPIRITUAL THERAPY" REQUIRES TECHNIQUE. The charge has been made quite frequently by workers in other professions dealing with human beings in trouble, that the Christian clergy follows no recognized and standardized technique in its work with the individual. This charge is only partly true. The Christian minister has made an approach towards standardized technique in the Catholic confessional, and the Protestant visitation of the sick. However, in the field of personality rehabilitation, be it in parish counselling, or as consultants in cases of social and emotional maladjustments, under the auspices of the court, the school, or the clinic, it becomes apparent that as a professional group dealing with human beings in trouble ministers do lack well defined methods and skills. In ministerial group-work this is not the case. Here the Christian pastor has been trained adequately, and through such training and later experience he is able to adopt and follow a definite pattern of procedure.

Regardless of the charges made by others, pastors, themselves, when they come in contact with the workers of other professions are quick to notice the deficiency in their methods of approach, and in the application of the spiritual resources of their faith, in individual cases. In the hospital the pastor observes the doctor about his work. There appears a regularity and order about his efforts which impresses him. He notices that the physician has a definite way of doing things, and it is this definiteness which helps greatly in winning the patient's confidence. Likewise, in the field of social work, he finds the case workers going about their tasks according to definite methods and procedures highly standardized throughout the profession. Since these professions deal with human beings in trouble, or, with people with problems, there are workers in the church who have come to the conclusion that many of these techniques can be adapted to the ministerial art, and through such adaptation, it will be possible to speak of "Spiritual Case Work," or, "Case Work in the Cure of Souls."

"TECHNIQUE" OF HONORABLE ORIGIN. A little research into the history of the origin of the term "technique" convinces us that there is more in the word than modern usage would suggest. This has been pointed out very clearly by a modern writer as follows: "The word 'technique' has slipped into our everyday language as if it were of good old Anglo-Saxon origin. We have a technique of building houses, bridges and roads; we have a technique of advertising chewing gum, of selling thumb tacks and of breathing correctly; we have a technique of training boxers, of studying the human soul and of preaching sermons. In short, we have a technique of everything; and the power which one attributes to this magic term resembles that of a mysterious goddess. Most people wish to express by it the mechanism which makes a thing go, the well-organized process of reaching results. They believe that it is something one can learn, as one may, after some honest effort, master the Morse alphabet or memorize the catechism. To them, the essence of technique is rigidity, the static element, that which stays firm in the process of crystallization; and that, because of its static nature, it can be acquired and possessed like a well-fitting coat.

"It is to be deplored if the meaning of 'technique' should become fixed in this distorted mask; for, its origin is a noble and beautiful one. In ancient Greece, 'technique' (technae) meant art; not art as the product of a creative effort, but art as the creative effort itself. 'Technique' was the process of making something beautiful, so that it was in harmony with the laws of beauty. To know this original meaning is of extreme importance when one speaks of 'technique' in relation to methods of dealing with human beings!" (cf. 10:165--6.)

By keeping this meaning of "technique" before us it is easy to see that the application of technique in the cure of souls can be made with ease and satisfaction. For the purpose of following definite technique is to become more efficient in the administration of the Means of Grace, in the sanctification of the children of God according to their individual needs. And in cases of

special need, caused by deep-seated personality maladjustments, this application of technique becomes a creative art having as its purpose the upbuilding of Christian personality, and the development of spiritual health.

THE INDIVIDUAL'S PLACE IN HISTORY. Pagan antiquity placed little value on the individual member of the group. Both from the ranks of the young and the aged, the sick, the infirm, and the unfortunate were exposed, and condemned to starvation and death. (cf. 4: 72--83; 6.) The group, the class, society, was of paramount importance, and it was only with respect to one's value to the group that the individual was granted consideration. He had no intrinsic value. The most noted thinkers as well as the ignorant shared this view, and Plato discussed it at length in his writings. (cf. 18: 22--24.) The Epicureans alone of all pagans seemed to have challenged this view, and this on the basis of their philosophy of pleasure. (cf. 18: 61--63.)

In the Hebrew Scriptures we find a different view of man. By virtue of Divine creation, man as an individual was a responsible agent. His relationship to God was a personal one, and every member of the race had equal value in the sight of the Creator. Through the advent of sin and its consequences, the notion of the individual's worth became blurred and obscure. But in Noah's commission, and Abraham's call, God again revealed the individual dignity of man. However, the enslavement of Israel in Egyptian bondage did much to destroy the sense of individual worth, and not until Moses arose as leader did it again stand out. After the great deliverance, and migration to Palestine, it was the nation that was in covenant relationship with God, and it was by virtue of his racial heritage that the individual was recognized. Moses, however, pointed out that the plight of the individual was noticed by God, as for instance in the case of the orphan, the widow, and the needy and oppressed, and Israel as a nation was admonished to respect the individual's rights and needs.

In the ministry of Christ, the individual came to the foreground. Our Savior pointed out the true dignity of the individual personality. The plan of redemption plainly indicated that salvation was an individual affair. The dying thief on the cross was told, "this day, thou shalt be with me in Paradise." The great commission charged the church to preach the gospel to every creature, and the promise was given that "he that believeth and baptised shall be saved." This consciousness of the dignity of the individual soul or person has come down through twenty centuries of Christian history, and our duty is to preserve it in our ministerial practice.

THE CURE OF SOULS IS INDIVIDUAL THERAPY. The cure of souls is work with the individual. (cf. 3: 49--73; 8: 184--229.) The pastor is a shepherd, who knows his sheep by name. As shepherd he must know the needs of the individual members of the flock, and be able to restore their souls according to individual needs. When a church becomes so large that the pastor can no longer call his sheep by name, the ministry is undoubtedly no longer functioning on an efficient and satisfactory level. This naturally brings up the question of "ministerial case-load" and the optimum size of a congregation. Obviously, that question cannot be adequately discussed in this essay. Briefly stated, two alternatives seem to present themselves. Either we must strive to build large congregations, served by a staff of workers, on the principle of division of labor, or we must have small congregations whose needs do not exceed the ability and capacity of a single shepherd. Under no circumstances dare we ignore the importance of the needs of the individual child of God in our congregations. Where there can be no division of labor, the pastor must assume the responsibility of acquiring the skills and techniques necessary for every branch of ministerial service.

"CURE OF SOULS" INVOLVES SEEMING PARADOX. As we approach the problem of the cure of souls, we come upon a seeming paradox, which deserves careful thought. This paradox has been noticed by other workers with human beings in trouble, and it has been aired in professional literature. A noted psychologist states the problem thus: "In order to understand the child, we must know his reactions; but in order to understand his reactions, we must also know the child," (cf. 16:7.) Translated into the language of spiritual therapy, we would state the proposition thus: "In order to understand a troubled parishoner, we must know his reactions in a given situation; but in order to understand such reactions, we must know the troubled parishoner." At first glance this might appear as a vicious circle, but we believe that with proper informational background, and the application of case work technique, we can assemble facts and data, which will permit us to understand both the parishoner and his reactions. Without such knowledge, however, and working without such method, the problem presents grave difficulties. And it is the opinion of some that many blunders are made in ministerial counselling, and spiritual therapy, largely because the one charged with the responsibility of direction of conduct, and the reconstruction of personality, is not professionally qualified to render the assistance required in the case. If even those, who have received the most advanced training, and have acquired a working knowledge of the most highly prized skills, meet with difficulties in "the art of helping people out of trouble" it goes without further argument that those, who have little knowledge and training cannot be expected to do this work with a very high degree of efficiency. If we pastors were merely dealing with rats and guinea pigs, in a basement laboratory, we might brush the matter aside. But when human personalities are at stake, and the destiny of immortal souls hang in the balance, it behooves us to put forth our best efforts to meet this challenge.

THE NEED FOR OBJECTIVITY IN SPIRITUAL CASE WORK. One of the outstanding characteristics of the skilled professional man is that he is trained to approach his problem in the attitude of objectivity. His first and foremost question is: "what are the facts in this case, and how are they to be interpreted?" (cf. 7:21-40.) Even though he may have subjective interests in the case, he keeps them in the background so as not to blind him in the search for facts, nor to prejudice him in their interpretation. He knows that his professional proficiency will depend in a large measure upon this attitude. Many pastors, we believe, are not very objective in their work. Perhaps it is very difficult for a pastor to be objective, because of his great zeal for the cause of right and truth, but we contend that it is just for this reason that he should seek this professional frame of mind. Let us take up a case in point. In his epistle to Timothy, Paul admonishes the young pastor to "reprove, rebuke, exhort, with all longsuffering and doctrine." These three words, REPROVE, REBUKE, EXHORT, stand out boldly for the pastor. "Here," says he, "are my clear instructions." "And if God urges me to engage in these duties, I have no choice in the matter." Such statements may be mere rationalization. It is well known that some pastors are much more successful in their efforts to "reprove, rebuke, exhort," than are others. This difference is not due alone to zeal. The explanation is to be sought in what has been said above. The successful pastor is objective in his efforts. He does not begin to reprove, rebuke, exhort, until he has made a careful investigation of the facts in the case, and upon the basis of these facts has made a sensible interpretation. Then upon the facts and their interpretation, the objective minded pastor, carries out a plan of treatment befitting the case, and in this treatment he finds it possible to include wise reproof, sympathetic rebuke, and sensible exhortation. The pastor who has not learned the value of such objectivity will start to scold and mutter before he has any clear idea of the true facts in the case. The incident of Jesus as the well in Samaria, dealing with a sinful woman, is a most excellent example of objectivity in the Christian ministry to the individual. Let us be wise pastors and follow this thrice-blessed method, a method which brings forth

God's blessings, the parishoner's cooperation and confidence, and the inner satisfaction of a work well done.

SYMPTOM AND CAUSE NOT IDENTICAL. Medical men have long observed that a symptom is not a cause but an indication of a sickness or disease. Fever, for example, is not the cause of pneumonia, but merely one of its symptoms. These symptoms are danger signals hoisted by nature's processes to call attention to maladjustments and disfunctioning on the part of the organism. (cf. 19:26--28.) In recognition of this fact, doctors examine their patients on the basis of their symptoms, but in planning and executing their treatments, they seek to come to grips with underlying causes. Social workers, psychologists, and others working with people in trouble, also have learned that in their work, symptoms and causes are not the same. In family welfare work, well known symptoms of maladjustment are such things as anger, rage, irritability, carelessness, poor management, lack of judgment, inability to hold a job, family discord, quarreling, nagging, scolding, irresponsibility, and the like. Beneath these symptoms are deep-seated causes, such as disappointments, unsatisfied desires, prejudices, hatreds, mental and emotional conflicts, sexual frustrations, and other tensions and tension systems. In child welfare, familiar symptoms are: lying, stealing, truancy, disobedience, boastfulness, timidity, temper tantrums, emotional instability, fears, excessive daydreams, and other well known patterns of behavior. But back of these outward symptoms are tensions, such as dissatisfactions, disappointments, longings, desires, aversions, complexes, repressions, and the like. If this is true in these areas of human conduct, the question naturally arises, does this principle also hold good with respect to spiritual maladjustments? We believe that it does, and we are convinced that Scriptural authority supports this view. For example, Jesus says: "Out of the heart proceed evil thoughts, murders, adulteries, fornications, thefts, false witness, blasphemies." (Matt. 15: 19.) We understand this text to mean that evil thoughts, murders, adulteries, etc., are but symptoms of a deeper cause, or causes, --- carnal desires, selfishness, social and spiritual tensions, a dis-equilibrated soul, a heart that is not right with God, all of which is sin. The wise curate of souls, therefore, will not try to bring about spiritual health by merely doctoring symptoms. He must get back to the causes, and plan his treatment so as to cure the maladjustments at their source. It is in this connection that we clearly notice the difference between "reform" and "regeneration." Reform busies itself with the symptoms of maladjustment; regeneration affects the causes. This explains the disappointments of reform, and the wonderful change in behavior that is noticed in true converts to the Christian faith. The difference between reform and regeneration is also apparent when we consider the means used in bringing them about. Reform is sought through the agency of human means, education, persuasion, suggestion, and the like. Regeneration is effected through the instrumentality of Divine agency, the power of the Holy Spirit, working in and through the Means of Grace. The soul curate, therefore, both in regeneration and sanctification, must wisely administer the Means of Grace according to the particular needs of the individual concerned. The use of case work technique in the Christian ministry is advocated not as a substitute for the Means of Grace, but merely as a method of applying them more efficiently in individual cases.

-II-

DISCUSSION OF CASE WORK TECHNIQUE

CASE WORK TECHNIQUE PUTS ORDER INTO EFFORT. We advocate the adoption of case work technique in spiritual therapy because it puts order into effort and thereby overcomes one of the greatest weaknesses in pastoral labors in the realm of individual soul cure. Case work technique is the outgrowth of much effort and discussion. It brings together into definite categories and processes those

procedures which have proved practical and beneficial to multitudes of workers engaged in the "art of helping people out of trouble." (cf. 7; 21.) It rests upon a huge body of knowledge, and incorporates a definite approach to a problem which takes much of the guess work out of assistance. Today case work has become a highly standardized method of professional labor, and it can be transmitted from one individual to another by way of instruction and practice.

Two fundamental principles lie at the bottom of all case work procedure. They are the processes usually referred to as DIAGNOSIS and TREATMENT. (cf. 25: 87--125; 31: 261--280.) This two-fold division of case work method is so clear and logical that it requires few words to point it out. It is perceived readily by all students of human conduct. The best illustration of this double technique is to be found in the medical profession. While laymen know little about the medical technique, they are all aware of the fact, however, that a doctor before he begins his treatment, must make some sort of diagnosis of the ailment. He usually begins his diagnosis by asking questions. This is followed with certain examinations, tests, measurements and analysis, of temperature, respiration, pulse beat, blood count, urine analysis, X-rays, and the like. All of this is done according to highly standardized procedure in order to obtain data necessary to indicate what treatment is necessary to the case. When data has been assembled, it is evaluated and interpreted, and a hypothesis is formulated as the basis of the treatment.

In some cases where an emergency exists, treatment begins at once, by the administration of first aid. In such cases surface facts are sufficient to give direction to the immediate treatment necessary to meet the emergency. This, however, is followed up by more extensive diagnosis, and treatment planned to touch all aspects of the case, --- treatments such as hospitalization, surgery, medication, diet, rest, etc.

All of this applies in a relative degree to spiritual therapy. In our work of counselling people with problems, some application of case work can be made in each case. It will remain for the individual pastor to discover to what degree and in what way he can adopt these principles.

A. DIAGNOSTIC TECHNIQUE

There are several definite steps in the diagnostic technique which we wish to present in a very brief way, pointing out their importance and characteristics. The first of these has to do with the statement of the problem and is customarily referred to as the "complaint." (cf. 26:443.)

(1) THE "COMPLAINT." The first thing that comes to our attention in the discussion of diagnostic technique is the "complaint." In the medical profession the complaint opens the case. The patient comes to the doctor's office with statements such as these, "Doctor, my throat is sore," or, "Doctor, I have a pain in my stomach," or, "Doctor, I feel very dizzy and weak," etc. In words such as these he expresses his complaint. In some cases the complaint is expressed by a third party, a parent, a spouse, an employer, a friend, the court, or others. But regardless of who makes the complaint, the role it plays in the case remains the same. It furnishes the physician with a clue as to outstanding symptoms. In conduct problems, or problems of personality maladjustments, the situation is practically the same. The complaint is sometimes made by the person himself, and sometimes by others. But the complaint gives the clue to the case. It calls attention to certain symptoms which have been observed either by the one in need of assistance, or those about him. The physician of souls takes this complaint in good faith and uses it to guide him in his investigation. Under no circumstances should he consider the complaint as sufficient in itself for guidance in treatment, without further investigation into the causes underlying the symptoms mentioned in the complaint. According to Lowery and Smith,

the following "complaints" were the ones most frequently encountered in five years work by the Institute for Child Guidance. (cf. 26:443.) We submit them merely to show how complaints are listed in such work.

Disobedience, negativism, stubbornness, and rebelliousness	Fears
"Nervousness"	Excessive phantasy
Temper	Restlessness
Stealing	"Cries easily"
Truancy, home and school	Masturbation
Lying	Unhappiness
Feeding Difficulties	Fighting
"Does not get along with others"	Sibling jealousy
Retardation in school	Sensitiveness
Enuresis	Reading difficulties
School failure	Obscene language
Speech difficulties	Quarrelsomeness
Disturbing behavior in school	Lack of concentration
Finger sucking and nail biting	Destructiveness
Placement, adoption	Mental retardation
Overactivity	Staying out late
Shyness, withdrawal	Laziness
Sleep disturbances	Physical defects

We present these merely as a sample of "complaints" met with in the realm of personality maladjustments in children. In many cases symptoms such as these continue to develop into more serious processes as the child plunges into adolescence and adulthood. We are thoroughly convinced that case work in the cure of souls will encounter some of these problems in many modern parishes, and a well-trained pastor should understand the implications of such symptoms for later personality maladjustments.

It would be interesting to compile a list of "complaints" most commonly met with in ministerial practice. In such a list, no doubt, among others we should find the following:

Poor church attendance	Uncooperativeness
Poor communion attendance	Stubbornness
Lack of sense of stewardship	Selfishness
Worldly mindedness	Hypersensitiveness
Growing indifference	Excessive criticism
Jealousy	Anger and ill-temper
Hysterical traits	Emotional instability
Anxiety and fear	Marital maladjustments
Alcoholism	Sex aberrations

This list could be lengthened considerably. We mention these patterns merely to indicate that such complaints are but clues to areas of maladjustment which have deeper underlying causes, and it is the purpose of an efficient pastor to search out the causes. This of course requires investigation, and it is to that technique we now wish to direct our attention.

(2) THE INVESTIGATION. We come now to a very important part of case work technique, a part which we believe does not receive enough consideration by some engaged in religious counselling. It is that careful seeking for evidence by the therapist, or case worker, known as the investigation. (cf. 24.)

Ministering to people with problems can be done only on the basis of an understanding of the problems involved. Each case must be investigated for no two cases are alike in all circumstances. When problems are largely of a social

nature, their investigations offer less difficulties. But when they appear to be predominantly personal, or personality problems, the investigation presents certain difficulties which have long been recognized. The aim of careful investigation is to bring data and facts to light which will make an interpretation of the case possible. The complaint calls attention to the manifest symptoms; the investigation must discover the facts by means of which a reliable diagnosis and plan of treatment can be made.

a. The Interview. There are two sources of information which can and must be used in case work routine. The one is the person in the case, and the other is his associates. Evidence or data gathered from the person in the case we call direct evidence, and its importance cannot be overestimated. Evidence gained from associates is called indirect evidence, and it is usually needed to complete the picture. The most practical and effective tool for gaining either direct or indirect evidence is the interview, that process of rapport or directed conversation between therapist and patient, or his associates, which has as its purpose the gathering of facts needed to throw light upon the problem in question. (cf. 26:456--460; 24:103--133.)

There is no doubt that the art of interviewing is one of the most prized skills which any counsellor can have mastered. It has received tremendous consideration among social workers, and in child guidance clinics. In the field of general medicine it does not play such a conspicuous role, because of the physical aspect of disease, but in the field of psychiatry, particularly in that branch which deals with the psychoneurotic group of maladjustments, it stands as the very foundation upon which the practice is built. In the cure of souls, the importance of competent interviewing cannot be overemphasized.

Successful interviewing presupposes a good understanding of the laws of human nature, and human experience. The interviewer must have a practical bent of mind, a wide experience in dealing with people, a deep love for the unfortunate members of the human family, and above all, a firm faith in the love of God as revealed through the life and work of Jesus Christ, the Savior. The skill of the interviewer is revealed by the amount of information he brings to light, and the degree of confidence he implants in the patient. Some are far more skillful than others in the art of interviewing, and some never reach a high degree of excellence in its use. The personality of the therapist has much to do with successful interviewing. People with pleasing personalities succeed better than others. A pleasing personality inspires confidence, and when there is a combination of pleasing personality and extensive skill and knowledge, the therapist has assets of tremendous power and value.

The reaction of the person being interviewed is of weighty significance. It must be remembered that something is going on in his mind as well as in the mind of the counsellor. Perhaps he experiences a great resistance, and becomes very reluctant to give out facts. Or again, he may color the information, or give only that which he thinks will be to his advantage. On the other hand he may not realize the real purpose of the interview, and as a result be moved to cunningly withhold just those things which are so badly needed to make an understanding of the case possible. Each of these difficulties must be faced by the counsellor, and his skill will be determined largely upon his ability to surmount them.

It is highly important that the therapist retain poise and calm during the interview. It is disastrous to register surprise, or deep feeling, or to explode in emotional outbursts and sarcastic invectives. This not only "freezes" the patient, and makes information hard to get, but it also betrays a low level of professional efficiency. Jesus is the great Master in the art of interviewing, and every Christian pastor will do well to read the Gospels now and then just for the purpose of observing the Savior's technique in this endeavor.

b. Relevant and Irrelevant Information. Not all information obtained in an investigation is of equal importance, and sometimes it is extremely difficult to bring the most significant information to the surface. Even after much information is obtained, a careful sifting must be made of that which seems relevant to the case, from the material which has less bearing. This sifting requires much knowledge and keen insight into the dynamics of human behavior on the part of the physician of souls.

All trained counsellors and case workers today follow a definite plan in making their investigations. (cf. 12: 114--126; 13: 316--455; 24.) Those plans or systems vary somewhat according to the type of institution or service involved, but there is a certain similarity to them all. We have found the following suggestions very helpful in guiding us in our fact-finding excursions.

HINTS AND SUGGESTIONS REGARDING INVESTIGATIONS IN CASE WORK. In gathering facts for a case study, one should seek to trace the problem back to its beginning. This usually means that data from earliest childhood is significant, that is, when the problem is one of personality maladjustment. No fact is too insignificant to be considered. They are all part of the life story, and may have played a significant role in the development of the present difficulty. Facts can be gathered from the four levels of human experience.

A. PHYSICAL LEVEL. This includes data regarding sensory functioning, general organic development, metabolism, glandular disfunctioning, diseases and their affects, accidents and their consequences, general appearance such as undersize, family traits and hereditary factors, congenital defects, etc. Physical inadequacies have much influence on behavior.

B. PSYCHOLOGICAL LEVEL. Things of importance on this level of experience are general intelligence, mental age and I.Q., pre-school training, nursery school and kindergarten experience, progress in school work, (was it average, retarded or superior), after-affects of disease which injures neural tissue, vocational preference, attitudes, egocentrism, loyalty consciousness, kindness, imagination, day-dreaming, an adventurous spirit, lethargy, excitement, anger, fear, worry, hate, love, given to moods, brooding, insomnia, outbursts of temper, dominant, submissive, neurotic, impulsive, etc.

C. SOCIAL LEVEL. In this group we have constellations of data which we shall arrange under headings such as the following:

- a) Economic Status of Family: work records, income, credit rating, thrift traits, financial reverses, economic insecurity, housing conditions;
- b) Neighborhood Conditions: geographical location with respect to social and economic factors, (do they live across the tracks, or down by the river, etc.), neighborhood feuds and quarrels, race and class prejudices, gossip, recreational facilities, law enforcement, morale, political corruption;
- c) Marital Status: legally married, family life, discord in home, separation, desertion, divorce, etc.;
- d) Familial Relationships: mutual trust and confidence, companionship in the home, sexual compatibility, suspicion, common interests, meals together, evenings spent together, social activities, parties;
- e) Status of Children: number of children, only child, half brothers and sisters, step children, age differentials, unwanted child, pampering, discrimination among siblings, ugly duckling, servant influence, neglect, adoption;
- f) Cultural Activities: nature of reading matter in home, interest in music, art, science, hobbies, participation in community affairs;
- g) Order and Decency: lying, stealing, truancy, rebellion, stubbornness, cursing, liquor and drunkenness, sexual discrepancies, police records;
- h) Personal Ambitions and Aspirations: desire to achieve success, social climbing, social frustration, lack of social initiativeness, greed, miscegenation.

D. SPIRITUAL LEVEL. On this level we are brought into the realm of the influence of religion. Things of importance are, status in church, attitude towards church, towards pastor, towards other parishoners, towards religion in general and towards own denomination in particular; religion in home, family devotion, religious conflicts in the home due to opposing religious views and faiths; prayer life, religious instruction and insight, fanaticism on the part of any member of the family, religious peculiarities, activity in church life; philosophy of life, prejudices, doubts, illusions, delusions, extreme emotionalism, extreme sense of guilt, religious anxiety, inconsistency between creed and life, morbidness, etc.

From this plan it is apparent that all four areas of human experience are involved in the problems of life. In other words, the whole person is involved, and spiritual therapy cannot ignore the physical, intellectual and social levels of experience in its ministry to the soul. It must always be remembered that it is not merely man's body that gets sick, but the man himself. It is not merely man's mind that thinks and reasons, but the whole man. The same holds true with respect to social life. The whole man, or, the man-as-a-whole, the entire body-soul organism, is involved in the study of behavior problems and personal-maladjustments. And in the realm of the spiritual not only an abstract soul needs reconciliation, forgiveness, and God, but the whole person has this need, and it is this whole person for whom Christ died, who through conversion is "created unto good works." This larger "totality" view is now finding, and must find general acceptance by physicians, educators, social workers, psychologists, clergymen and others.

c. Recording Information. The important question now arises, should the results of the investigation be recorded? In social work all data is recorded and such records constitute the case history of the individual. (cf. 27.) In the field of psychiatry, case histories are also kept, but psychiatrists are not uniform in this practice. Child Guidance Clinics make case histories, and they prove indispensable. Whether or not case histories should be kept in the cure of souls is a question which cannot be answered in a dogmatic way. There are certain confidences involved in the intimate relation between pastor and parishoner which may forbid the recording of some facts. However, we believe that confidences, other than those of the confessional, can be safeguarded even when records are kept. The medical profession is very successful in this respect. It should be quite easy to see the advantage of records, when we take note of the fact that no memory is perfect. Difficult cases which require considerable thought and skill, and perhaps consultation, should be given the advantage of records in so far as this is possible. In small congregations where the pastor is intimately acquainted with all his parishoners, records may not be as necessary as in larger ones, where the pastor is not intimately acquainted with his people. But regardless of the size of the congregation, facts that have been recorded are always more accessible for study and consideration than those which have been entrusted alone to memory.

A word of caution is in place here regarding the taking of notes in the investigation. The best practice seems to be not to take notes in the presence of the person being interviewed, especially if he is the person with the problem. Recording indirect evidence offers less difficulty. Certain facts such as name, age, address, etc., of course may be recorded even in the presence of the counsellee, but it is usually embarrassing to the parishoner to see the pastor make notes of his conversation and confidence. The recording can best be done after the investigation and interview have been concluded.

(4) DIAGNOSIS, OR, THE INTERPRETATION OF DATA. When the facts of the case are in, the therapist can begin to interpret them. In fact he has already been interpreting them tentatively as they were being assembled, but such interpre-

tation is subject to revision as long as additional data is forthcoming. The interpretation of data is a very difficult task, and requires the utmost skill, knowledge, and experience. A good spiritual therapist is an excellent student of the truths of the Christian religion, in addition he must be a good student of human nature; he must know how to theorize, and how to construct an adequate plan of treatment; he must know also how to carry it out.

It is not possible to enter into a discussion of how to conduct such an interpretation of data in a short lecture such as this. It must suffice to say that the entire scope of one's professional training must furnish the background for this. In such training there must be systematic instruction in the truths of the Christian faith, and courses dealing with human nature and human behavior. The processes underlying human behavior are of a two-fold nature, in respect they are predominantly personal, and in another they are predominantly social. The study of the personal aspects of human behavior is the problem of psychology, while sociology grapples with the problems of social relationships. Both of these fields, psychology and sociology are again divided into smaller areas of investigation. For example, psychology embraces such divisions as general psychology, abnormal psychology, child psychology, the psychology of adolescence, mental testing, clinical psychology, educational psychology, mental hygiene, etc. Sociology is in a similar situation, and it has divided its investigations under such headings as general sociology, social pathology, criminology, social psychology, family relationships, urban sociology, social trends, and the like. Social work, as such, which includes the study of the technique of case work, and case work administration, also falls within the province of social science.

The pastor who has been well trained in his theological courses, and in addition has had the opportunity of taking good courses in both the field of psychology and sociology, is theoretically in position to interpret human behavior in individual cases better than one who has received only theological training. This opinion, we believe, is now quite generally accepted and to meet the challenge, changes are being made in the curricula in the education which leads to the bachelor's degree in the field of theology. Still greater advantages are made available where post graduate courses in these fields are offered to theological students working towards a Master's or a Doctor's degree in theology.

For centuries the challenge of group work in the Christian parish has received the most attention in theological training and church administration. This in itself is praiseworthy, but it does not satisfy all the demands of the Christian ministry. This is slowly being recognized, and there are indications that a new trend is setting in. Due to modern social and economic conditions, and the advancement of social and mental science, the work of ministering to the individual parishoner is on the verge of receiving its fair share of consideration. If a sensible balance can be effected and maintained with respect to both group work and individual therapy, the interests of both groups and individuals can be successfully served.

a. Systems of Interpretation of Behavior. Before we leave the discussion of interpretation of data, we should like to briefly call attention to several systems of interpretation of behavior which have been verbalized and have received widespread attention by psychiatrists, psychologists, educators, and clergymen. A large body of literature has sprung up with respect to several of them, and the third is just now in the process of development.

1) Stimulus-Response Interpretation. This theory was made famous through the efforts of the Behavioristic psychologists. It swept its way into the schools and clinics of America, and into the literature of Liberal Protestantism. The theory was radical and appealing, but has been proved very inadequate. It was a purely-mechanical system of explaining human behavior, and when carried to

its logical conclusion reduced man to the status of a biological machine with not even so much as consciousness. (cf. 11.) Remnants of behaviorism still exist in professional circles today, but it has lost its vigor, and has been pushed far into the background by more critical analysis of human behavior. Not only critical scholars in the church, but men of science have repeatedly pointed out the errors and deficiencies of this system. It has little to offer the Christian clergy in their ministry to the people with problems, in the parish.

2) Psychoanalytic Interpretation. The far-famed system of psychology set forth by the noted psychiatrist, Sigmund Freud, and known as psychoanalysis, has received wide acceptance during the past three decades. The theory has met with much criticism, resistance, and apology. As a result three trends or divisions have developed, the original system of Freud, best represented today by Orthopsychiatry; the system developed by C. G. Jung, known as Analytical Psychology, and the system developed by Alfred Adler, known as Individual Psychology. Although these systems differ in many respects they also have much in common, all of them being basically so-called "depth psychologies." (cf. 1;9;15.)

Freud's system of psychoanalysis is known as the libido theory of human behavior. It regards all human motivation as being libidinal, or sexual in nature. It accounts for the entire development of personality on a sexual basis, having its beginning in infancy. Three stages of sexual development take place in normal life, respectively termed: oral, anal, and genital. When normal development is interfered with, frustration causes fixation of the libido at one of the three stages of development, and the personality does not develop into a full maturity. When frustration in adult life becomes too severe, regression takes place, and behavior reverts back to a lower level. The order of regression is from intellectual behavior back to instinctive behavior, back to reflex action, back to tropism. In certain kinds of insanity, life has regressed to its lowest level, mere tropic existence. (cf. 9.)

Frustration, then is the great issue in Freudian psychology, and life's adjustment to reality in the face of frustration produces each individual personality. If the person is courageous and intelligent he will face reality and be successful and well adjusted. If he evades reality he will adopt evasive ways of deceiving, outwitting, or avoiding reality through symptomatic behavior, or through the use of mental mechanisms. Freud was the first to categorize mental mechanisms, and chief on his list are the mechanisms of identification, projection, substitution, displacement, sublimation, rationalization. To this list Adler has added the well known mechanism of compensation. Other therapists have augmented this list still further. Today practically all schools of psychology employ these terms but not all with Freudian connotations.

Freud's system is made complete by the postulation of three mental areas, the Conscious, the Pre-conscious, and the Unconscious. Unpleasant and forbidden experiences are repressed to the Unconscious area, and the Censor who stands guard at its portals refuses the repressed psychological spirits to gain an exit. However, during unguarded moments and in sleep some of these repressions escape for a brief moment, by means of slips of the tongue, and dreams.

Several attempts have been made to employ a modified form of psychoanalysis in the cure of souls. Some success has been achieved in certain cases, particularly in cases of neurotic personalities. (cf. 12; 22; 32.)

Brief, but well written reviews of psychoanalysis may be found in the modern text books of psychology. (cf. 5; 26.) Several lengthy criticisms of Freud's system of psychoanalysis have considerable merit and can be read with interest and profit. (cf. 14.)

We close this discussion of psychoanalysis with a quotation from a well known source. "The most significant contribution which Freud has made to general psychology is to demonstrate the sense in which the affective or emotional life of the individual may control the entire psychical life. The keyword to the theory is repression." Ency. Brit. 14th Ed.)

3) The Gestalt, or, "Field Theory" of Interpretation. In our opinion the method that offers the best working basis for Christian clergymen is the so-called "Field Theory" of behavior, set forth by psychologists following the Gestalt view. (cf. 5; 17.) It is still a very recent theory, and in the process of development, but it seems to be building on a solid foundation. It takes into account the worthwhile principles of psychoanalysis, such as the purposiveness of human behavior, the role of frustration in blocked-goal situations, the existence of tensions, the necessity of tension resolution, and the adoption of substitute goal-attainment. But it does not make the mistakes of Behaviorism in making behavior mechanical, nor of psychoanalysis in trying to explain all behavior on the basis of sex energy and its repression. It recognizes the fact that psychobiological disequilibrium, or tensions, can take place on all levels of human experience, including the religious level of life. It is claimed by its exponents that all human behavior can be explained by the principles of this theory, and that both science and religion can adopt it to its needs with success. Its main objective is to explain behavior from the dynamic or functional viewpoint.

The distinguishing principles of the "Field Theory" may be briefly stated somewhat as follows:

All human behavior takes place in a psychological field, and is purposive, having an end in view.

In such a psychological field are certain field forces which work together to produce the behavior. Among them are: person, vector, barrier, goal, valence, and tension.

The springs of human action producing a given behavior are psychobiological tensions which disequilibrate the human organism, (the body-soul person) causing a difference of potentials in the field, that is, between the conscious person and some point in the field which is perceived as a goal which must be attained in order to resolve the tension and restore the equilibrium. A tension corresponds to a need, either real or imagined, arising in consciousness as desire or aversion.

Goal attainment is not always easy. Sometimes barriers stand between the person and his goals, and these must be overcome before the goal can be attained. Barriers may be of several kinds: quasi-physical, quasi-mental, quasi-social, quasi-spiritual, or a combination of them.

In blocked-goal situations, i.e., where barriers block goal attainment, it frequently happens that the person will try to outwit the barrier through the adoption of deceptive behavior, of which there are many well known patterns. Such behavior, however, is usually not understood by the person employing it. Some frustrated persons, in blocked-goal situations, seek to evade the challenge of the barriers, and obtain substitute goals in the realm of phantasy and daydreams. This is spoken of as seeking satisfaction in planes of lesser reality. This sometimes, in extreme cases, leads to certain forms of insanity.

In many cases where goals are not attainable either because of limitations of the person, or because of environmental circumstances, substitute goals will be sought by the person by means of compensation, or sublimation. This is a good thing, but can be carried to extremes, and become pathological.

Unwholesome personality patterns develop when persons fail to take the long view of things, and fret and fuss and wear themselves out, or deceive themselves in their effort to gain difficult or impossible goals through the means of behavior mechanisms.

Wholesome personality develops when persons meet their barriers courageously with faith and insight, sensibly taking a long view of things, a view which reaches into the next world, with its promise of eternal life through faith in Jesus Christ.

The long view of life is the Christian view, the view in which a person perceives goals according to a hierarchical scheme of values. At the head stands the ultimate goal of life, reconciliation and eternal life. For the non-

Christian the ultimate goal, can, at best, be but temporal satisfaction and the happiness of the natural man.

When seeking to explain behavior by means of the "Field Theory" one may ask questions such as the following:

- a. What goal is this behavior directed toward?
- b. What needs or motives are satisfied by this behavior?
- c. What wish is the person seeking to fulfill?
- d. What desire is he seeking to have granted?
- e. What urge is he seeking to satisfy?
- f. What act is he seeking to justify?
- g. What guilt is he seeking to expiate or obliterate?
- h. What fear is he hiding, or shrinking from?
- i. What shame is he smarting under?
- j. What fault is he seeking to cover or overcome?
- k. What deficiency is he compensating for?
- l. What ambition is he serving?
- m. What incident is he seeking to forget or repress?
- n. What problem is he seeking to solve?
- o. What phantasy is he enjoying?
- p. What barrier is he seeking to outwit?
- q. What unpleasant reality is he seeking to evade?
- r. What personal inadequacies are hindering wholesome goal-attainment?
- s. What social inadequacies are limiting goal-attainment?

Upon the basis of such questions we may diagnose unwholesome and destructive behavior as belonging to the following categories:

A. Aggressive Behavior.

- a. In the Plane of High Reality: rage, negativism, egocentrism, overcompensation, excessive sublimation, hysteria, psychosis, dissociation.
- b. In the Plane of Lesser Reality: rationalization, excessive daydreaming.
- c. In the Plane of Irreality: hallucinations, and delusions.

B. Evasive Behavior.

- a. In the Plane of High Reality: sulkiness, procrastination, seclusiveness, psychesthenia (phobias, compulsions, obsessions.)
- b. In the plane of Lesser Reality: alcoholism, drug addiction, regression, repression.

These personality traits have grave social implications, and we must interpret them not as abstract phenomena, but always in relation to social and spiritual situations and surroundings. Man does not live independently of his social and religious environment, and no explanation of human behavior is satisfactory which fails to interpret it in relation to the psychological field, or environmental situation.

(5) DIAGNOSTIC SUMMARY. The final step in diagnostic technique as it applies to ministerial practice is a diagnostic summary or as it is sometimes called, the summary formulation. The purpose of such a summary is to state the facts of the case in a short summary. Such a summary in a case of family discord might read something like this:

Mr. and Mrs. B. have been married for 15 years. B. has been working as a laborer most of the time. Has good health, and seems to be willing worker. B. drinks spasmodically, especially when not employed. Has had little schooling. Seven children in the family, all living, ranging in age from 13 to infancy. Mrs. B. has fair health, but tires easily. The B's move frequently, always in the low rent area. Mrs. B. is a very poor housekeeper, and cook. Children are healthy, but dirty most of the

time. B. complains about this, but is also very slovenly. Mrs. B. is a member of Lutheran congregation, where children also attend S. S. B. goes occasionally but not regularly. B. is suspicious of his wife, and accuses her of relations with men. Mrs. B. denies this, and friends confirm her denial. Children in school doing fair work. B. grumbles and curses about the house. Mrs. B. has gone to social welfare Board about her problems. Receives some material relief. Mrs. B. has talked to the Lutheran volunteer social worker about divorce. The home situation seems very unpleasant.

(6) TREATMENT HYPOTHESIS. The discord in the B. home has both personal and social basis. Therapy must be directed to overcome religious indifference of husband. Wife needs direction in housekeeping. Volunteer church worker can handle this. Husband should be assisted in matter of employment through proper contacts. Alcoholism suggests husband's unwillingness to face reality. Perhaps this is partly due to lack of education, and feeling of inferiority. Church and school must give careful attention to personality development of children. Education must play a large part in treatment. Frequent consultations needed for both Mr. and Mrs. B.

With the close of the diagnostic summary and formulation of treatment hypothesis, one is ready to launch out on a plan of treatment. This of course is a complex process, and requires much wisdom, patience, skill, and determination. Let us now turn our attention to further details of treatment.

B. THE TECHNIQUE OF THERAPY

Jesus has often been pictured as the great Physician. This is only natural for the New Testament reveals Him as a true physician of the whole person, body and soul. "They that be whole need not a physician, but they that are sick," is one of his famous sayings. He healed sick bodies, cured diseased minds, forgave sin-stained souls, and through the process of repentance and regeneration made children of God out of children of men. This was His ultimate purpose. "He came unto his own, and his own received him not, but as many as received him, to them gave he power to become the sons of God." In bringing this work to its full fruition Jesus busied himself with work that is now quite generally divided among three professions. He was a preacher of the Gospel of the Kingdom, He was a teacher of the Will of God, and He was a physician of body-soul persons. In addition to all of this, of course, He performed his priestly office. Today we pastors are still confronted with this three-fold task.

As we now take up the technique of therapy in our discussion of case work method, we must prepare ourselves for the fact that we are facing very difficult problems. But they need not be overwhelming if we attack them skillfully, and with Christian courage.

(1) THE OBJECTIVE OF TREATMENT. The objective of spiritual therapy in individual cases is obviously to bring about spiritual growth and health, an ever higher level of sanctification. This involves the use of the Means of Grace, the growth of faith, the changing of certain attitudes, and the reeducation of the person. The person must be given insight into his condition and his inadequacies must be pointed out to him. He must be given such information as will enable him to understand himself, and his patterns of behavior, so that he may cooperate in overcoming them. His good points or assets must also be shown him to give him courage, and to make him feel the battle is not beyond success with God's help. He must be told about the role of frustration in life, and asked to seek to understand his own frustrations with respect to goal-attainment. Proper goals must be pointed out to him, goals which do not bring mere carnal satisfaction, but goals which bring the peace of God, social adjustment, cultural growth, and

social and spiritual progress and usefulness. In addition the problem of motivation must be faced, and efforts made to use such means as suggestion, persuasion, instruction, exhortation, and God's promises, in moving the person to seek proper goals in life. The object of course is to rebuild inadequate personalities in such a way that they become strong and stable, integrated through the Christian faith and hope, and willing to serve God and man in a larger view of life. The "common denominator of all personality maladjustments," says one student of human behavior, "is the unwillingness to face reality." Our business as spiritual therapists is to assist the person to face reality with courage, faith, hope and prayer.

(2) WHEN DOES THERAPY BEGIN? It is quite puzzling at times for social case workers to know just where to begin treatment in an individual case. Dr. Hertzler tells of an interesting experience in his book, "The Horse and Buggy Doctor," which illustrates this point. He says that on one occasion he entered a farm home to attend a sick woman, and when he began to sound her heart with his stethoscope, she exclaimed: "O doctor, I feel so much better already." She regarded the stethoscope as an instrument used in treatment, and through certain mental processes she experienced improvement in her condition. Here is a case in which treatment took place spontaneously, almost before the doctor had begun to make his investigation. Similar experiences take place in social work, and spiritual therapy. But we cannot build up a method on such cases. Very often treatment begins with the first interview, through suggestions and explanations of the dynamics of life situations, but a more carefully planned treatment will be needed in many cases after a thorough investigation has been made on the facts in the case, and a treatment hypothesis formulated.

(3) PLANNED TREATMENT. After facts and information have been gathered, so that the counsellor has a good picture and understanding of the factors involved in the case, a constructive plan of treatment can be worked out. This plan may involve not only the person, but his family, school and business associates, and require considerable work in the field of education and reeducation of the personality. Such a planning of treatment requires a knowledge of the resources of the Christian religion on the one hand, and a knowledge of the community resources available, such as material relief, medical assistance, psychological service, and recreational facilities. For these will have to be used in some cases.

(4) AREAS OF TREATMENT. We have stressed the fact that the whole man is in need of assistance, because of the unique body-soul relationship. In treatment it naturally follows that while we are spiritual therapists, we dare not overlook the implications this has with respect to all levels of human experience. There are times when people are too sick to pray. Again, when people are cold and hungry and worried about their unfortunate straits, a wise pastor will see to it that such people are fed and warmed as well as ministered to spiritually. All this is very necessary in the cure of souls. Even normal people are reluctant to attend church services in the dead of winter if the church is not heated and comfortable. In the summer when the church is hot and unventilated some good Christians fall asleep in spite of the pastor's increased vigor in the pulpit. All this shows that the whole man is involved in human behavior, even when the behavior is in the realm of the spiritual.

In our discussion of investigation, or diagnosis, we grouped facts under four levels of human experience, pointing out that the maladjustments might occur on any of these levels. Now in discussion treatment we shall again make use of such scheme, and list the therapeutic processes under headings, each dealing with a specific area of therapy.

a. Therapy Involving Physical Improvement. Physical ill-health and inadequacies play a big role in human problems. Irritability, fatigue, nervousness, and other personal liabilities may be directly due to some physical disturbance and malfunctioning. It is good practice in many cases to suggest to people seeking guidance to have a thorough physical examination made. This applies also to maladjusted children in school. Listlessness, poor school work, bad temper, may in numerous cases be largely caused by physical defects and distress. Florence Mateer, and others have shown that glandular disfunctioning has a great effect on personality.

It is not necessary for a pastor to specify a certain physician in his counselling, in fact it is well not to do so. He may, however, mention several successful practitioners to his patients, informing them that they seemingly are well qualified and highly respected in the community. In most cases he will find that people have their favorite doctors, or family physicians. Today practically every community in America has highly trained medical men, and hospital services, which are available to almost any one needing them. In large cities municipal hospitals operate for the needy, and in rural sections, the poor are assisted by county funds. So there is little need for people today to allow their physical ailments to continue unattended when professional and institutional services are available. There are countless cases on record showing that when physical ailments have been properly taken care of, there is a great improvement in personality and behavior. Jesus as the great physician recognized this fact which today is again finding emphasis.

b. Therapy Involving Social Relationships. Much maladjustment in the modern parishes is of a social nature, involving social relationships. These may be between husband and wife, between children and parents, between employer and employee, or between friends and associates. Sometimes they have far reaching consequences involving whole relationships, and threatening the harmony of an entire congregation. If after careful investigation a case shows that social relations are involved, the spiritual therapist will have to attempt a solution of these problems. Good counselling is of paramount importance here, and good counselling must in turn depend upon knowledge and experience.

In cases of family discord it is always advisable to hear both sides of the story, even when this requires contacting an unchurched husband or wife or child. Frequently the case is misstated in the heat of battle and it is only after hearing both sides of the story that proper diagnosis can be made and wise treatment carried out. Family discord often involves a problem of sex. Other sources of family strife are, division of income, use of liquor, lack of household skill, jealousy, influence of in-laws, employment, ill-temper and harsh words, and the like. Counselling with regard to sex should be done with caution and sense. The Bible has laid down very safe principles for sex relations and we believe that these are known to well trained pastors. Good books in counselling and mental hygiene will also give valuable suggestions. Sex is a part of life and marriage and the home are its lawful and successful outlets for expression. All sex aberrations entail disappointment and sorrow.

Social case work has grappled with the problem of maladjustments in social relationships, for a long time. A historical survey of social case work is not only interesting but very suggestive to pastors. (cf. 23, 31.) We suggest that some systematic reading be done in this field, to learn from social workers what is today regarded as the best practice in attacking the problem of maladjustments in this area of life. Much of this technique can be used in ministerial therapy. We can get many useful suggestions from the literature dealing with all phases of professional social work and its problems. (cf. 7; 19; 20; 21; 31; etc.)

c. Therapy Involving Personality Development. It is the opinion of many that the core of most maladjustment is in the individual personality. The subject of personality was not mentioned in older textbooks of psychology, but today, it is receiving a tremendous amount of attention from that source. This is a healthy trend, and should eventually do much towards overcoming a great deal of personality maladjustment.

We find writers speaking of "wholesome personalities," and "disintegrated personalities." By these terms they mean that some personalities are very efficient from the view point of adjusting to the challenge of life. Others through frustration and emotional stress and strain have been shocked and stunted into immature types and patterns which make a satisfactory adjustment to the challenge of reality only with difficulty, or not at all. In cases of disintegration or unwholesome personality the spiritual therapist should be on the lookout for such things as fears, anxieties, moodiness, neurosis, fault-finding, hypercriticism, egocentrism, inferiority feelings, sense of guilt, phantasy, rationalization and other mental mechanisms used in the struggle to overcome frustration in blocked goal situations. The main method of meeting these personality inadequacies is reeducation, insight into personality, information offering an analysis of the situation, and encouragement in the perfection of God's ways. Christian therapists must always point to the hierarchical system of goals in life's course, and encourage people to find their satisfactions in doing the larger Will of God, even if it means lack of personal satisfaction. This is making use of the value of substitute behavior, compensation and sublimation, and this is indeed a valuable method of personality building.

Good texts in the field of mental hygiene are of tremendous value to a counselling pastor. It is true that he cannot accept everything set forth in these texts, but they are extremely suggestive, and point to methods which can be adapted to ministerial practice to considerable advantage. (cf. 13; 26; 28; 30.) We regret that religion is not adequately discussed in these texts, but the theological training of modern pastors will supply this deficiency. There is a crying need today for mental hygiene texts written from the viewpoint of Christian ethics and Christian psychology, texts which understand and set forth the meaning of sin and grace, guilt and forgiveness. The liberal clergy has attempted to meet this need, but have not been successful. The conservative, "evangelical" clergy will have to make this contribution.

d. Therapy Involving the Individual's Relation to God. We come now to the cornerstone of Christian counselling. After all has been said in behalf of physical, mental, and social aspects of personality problems, the fact remains that the most important factor in the cure of souls is one's personal relation to God. If there is disequilibrium and unresolved tension here, the person is maladjusted regardless of the existing equilibrium in the rest of his being. In some cases it becomes a very significant part of spiritual therapy to create new tensions in parishoners so that new goals can be perceived. This is obviously true when a spirit of impenitence exists. Such a case requires the creation of tensions of dissatisfaction through the use of moral instruction on the basis of God's Moral Law and Divine Justice. Jesus did this very pointedly in the case of the impenitent Scribes and Pharisees. His caustic denunciation of sin in their lives had but one end in view, the creation of deep tensions of dissatisfaction and guilt in the souls of his listeners so that they would seek membership in the Kingdom of God as the proper goal for tension resolution and spiritual equilibrium. The Gospel of love and grace must always furnish the goals for spiritual therapy. Reconciliation is accomplished through faith in Christ as Messiah, the Redeemer of the world. The case of

Nicodemus is a very enlightening one from the viewpoint of spiritual therapy. Nicodemus was also a Pharisee, but not a hardened sinner. He was seeking light, and we have every reason to believe that he experienced a deep need for a closer and more intimate relation with his God, the night he came to Jesus. Jesus did not use the same language with Nicodemus that he used with the impenitent Pharisees. But He did point out that the natural man cannot inherit the Kingdom of God. Nicodemus was still only a natural man, flesh born of flesh, and to become a child of God he must be born again. In this manner Jesus created the tensions and showed that they could be resolved by reaching the goal of rebirth.

The first great objective then in spiritual therapy is to bring about right relations between the person and his God, and the second is to preserve these relations through continuance in the state of Grace, and the constant development of Christian personality through a never ceasing process of progressive sanctification. There is no greater power in the world, in fact, no other power in the world able to resolve spiritual tensions than the doctrine of God's free Grace through faith in Jesus Christ. No spiritual therapy is sufficient or efficacious which fails to include this.

The process of sanctification is extremely important in the cure of souls. Paul speaks much of this process in his Epistles, dividing his space quite evenly between justification and sanctification. Not only does God desire to have men brought into His Kingdom, but He wants them to grow in Grace, to bring forth fruits meet for repentance, to live Christian lives, to enjoy peace and happiness in this world and to live in hope of the world to come.

The case work method in the cure of souls has no new medicine to offer distressed souls. That is not its purpose. Its usefulness lies altogether in analyzing situations, and understanding problems so that the old pastoral medicine of the Means of Grace can be administered more effectively according to individual needs. If it does not accomplish this, then it would be foolish and useless to advocate its adoption by the clergy. On the other hand if it can assist them to use the Means of Grace more effectively in individual cases which involve maladjustments and personality problems, then the effort necessary to make its use possible should be made without unnecessary criticism and delay. Our desire should be to use the best possible methods in building up the Kingdom of God, and in nourishing the souls of God's distressed children.

(5) PREVENTION AND CURE. Before we conclude this discussion we should like to make one more observation regarding the relation between prevention and cure. The old and well known proverb wisely says: "An ounce of prevention is worth a pound of cure." This applies also in pastoral counselling. (cf. 34: 138--149.) It is a difficult task to reeducate people, and to change them from maladjusted Christians into strong, courageous, integrated Christian personalities, able to meet all the challenges of reality with ease and success. In fact, even when the best methods and techniques are used, success does not always follow our efforts in the sense of bringing about changes which in our estimation are wholly satisfactory. We speak of people as having a weak faith, and make considerable allowance in conduct on this score. Perhaps that is the best we can do because of the limitations of our knowledge and skill on the one hand, and human nature on the other. But even then we cannot be satisfied.

The idea of preventing personality maladjustments and spiritual regression is today receiving much thought. Let us start early in our efforts, especially with the young, and let us discover their peculiarities and weaknesses, and reshape them during the plastic years of life. This attitude, it seems to us, is a very encouraging one, and is in reality the very heart of Christian personality building. The parents must also be instructed with respect to proper

child care. Parents make many mistakes, and frequently personality maladjustments begin early in life in the home. Well-trained pastors, who can learn to know their people well, often discover these early symptoms of personality maladjustment in children, and thus are able to begin their cure of souls in the early years of life. This work brings the greatest results.

The schools also play an important part in the development of personality. Both Sunday school teachers and parish school teachers should be students of humanity, and be on the lookout for symptoms of unwholesome personality development. If this is done, there can be a fine system of cooperative effort worked out, and such cases can be brought to the pastor's attention, and he in turn can plan a constructive program of soul cure or spiritual therapy which will bring about better and more satisfactory personality development in the given case. This is the ideal towards which we should be moving both in our thinking and in our practice. In fact it has always been our ideal in one sense of the word. But we have not always been able to realize it because of lack of planning and coordination of our efforts. Now that we are gradually getting better insights into total situations, and have at our disposal better methods and techniques, enabling us to acquire better skills, we should be able to reach new levels of success in the great work of the cure of souls, through God's guidance and help. But always we must remember that "a priest of the church is not a free-lance mind doctor, living by his wits and a ready tongue; he is a minister of Christ applying the saving gospel as a wise physician to the healing of men's souls." (cf.2:87.)

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Note: Titles marked with an asterisk are of particular value and interest. They may be read with considerable profit by busy pastors. This bibliography is merely representative of the literature. It is a fairly good sample of an ever growing body of literature dealing with human behavior and people with problems.