Guest Editor’s Introduction

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This issue on “Best Practices” identifies the breadth and depth of members of the American Association of Pastoral Counselors. We asked seven authors to reflect on concerns and maladies, exploring the etiologies and theoretical frameworks that surround these, and to highlight aspects pastoral caregivers need to be aware of. In addition, we asked them to point to relevant and current literature. With creativity and wisdom, the authors knew that the theme needs deeper reflection and is not meant to be another buzzword or catchphrase. Rather, they address significant aspects of our personal and communal living. As counselors we know that each person we see is unique and requires a personal approach to caregiving. So too did our authors address a wide range of topics and interests based on personal interests, research and experience.

Bruce Rogers-Vaughn provides a foundational essay exploring the impact neoliberalism has on pastoral counseling. Indicating that “Best Practices” fits neatly into a neoliberal paradigm, he asks whether we as pastoral counselors should use such language. When care becomes routinized and methodical, central to the neoliberal agenda, where is “soul care,” Rogers-Vaughn asks.

Michael Koppel’s essay addresses “Best practices” through the lens of the person of the caregiver. He explores the benefits of play as an experiential process to enhance knowledge and awareness for care and counseling professionals. Play, Koppel argues

persuasively, is an undervalued transformational experience that can lead to significant self-discovery in a caregiver.

Two authors address the concerns of diagnosis within a pastoral counseling practice. Tracing the historical roots of pastoral diagnosis within a medicalized world and drawing on his empirical research, Loren Townsend, argues persuasively that we need to “retire the notion of pastoral diagnosis and replace it with a critical pastoral relationship with interdisciplinary diagnosis.” He shows how fraught a conversation on pastoral diagnosis can be, from defining “pastoral diagnosis” to engaging postmodern thought and criticisms raised by philosophers such as Michel Foucault. Pastoral diagnosis, Townsend shows, raises more questions than answers. He offers us a possible way forward.

The second author to address diagnosis is James I. Higginbotham. He argues that diagnosing a person with a personality disorder according to Axis II of the Diagnostic and Statistical Manual of Mental Disorders is neither a compassionate nor a useful way of understanding a person. Higginbotham offers a liberative and critical pastoral theology of personality that, with a competence-based assessment of personality that takes situational factors into consideration, can reduce stigmatizing and stereotyping.

Nancy Ramsey provides theological, clinical, and theoretical resources for pastoral and spiritual care providers who wish to be effective in providing care across embodied differences such as sexuality, gender, race, and class. By exposing and resisting the oppressive inequities of power and privilege that accompany and complicate these experiences of difference, and by encouraging care providers to be mindful of their own social location, Ramsey identifies ways to honor the imago Dei in the other.
Larry Kent Graham has been doing significant work with and research on veterans returning from war zones and the families and communities that welcome them back. In the context of collaborative conversations, Graham explores the dynamics of forgiveness, shame and guilt in war veterans that have experienced moral trauma and identifies ways to limit long-term negative effects in a population often overlooked.

Jeff Sandoz contributed two essays to this issue. The first focuses on the mind/spirit connection within the *Twelve Step Program of Alcoholics Anonymous*. Sandoz provides information to help counselors assess the severity of the abuse/dependency, examine the etiology of alcoholism, and explore alcohol addiction’s spiritual dimension. Also, he details the impact of alcoholism upon the brain and how working the Twelve Steps and engaging daily sponsorship combine to evoke a spiritual experience associated with recovery.

Sandoz’s second essay addresses the insights we learn from neuroscience with regard to addictions and the spiritual experience in recovery. He describes his essay as an “amalgamation of working hypotheses,” acknowledging that science and technology, especially around brain imaging, will teach us much in the years ahead. Sandoz encourages us as caregivers to learn more about brain function and how both addiction, recovery, and spiritual experiences are ultimately brain based.

Following the authors of this issue, “Best Practices,” pastoral counselors must be mindful of wider systemic forces such as neoliberalism that promotes a disease model of care, places spirituality above religious and theological discourse, and suppresses prophetic resistance and social justice. “Best Practices” demands mindfulness and self-discovery in the person of the counselor. Play can assist us greatly in such a task. Also,
“Best Practices” ask that we engage the frameworks we use (such as the *Diagnostic and Statistical Manual of Mental Disorders*) and the iniquities of power and privilege we find ourselves in with prophetic compassion, honoring the *imago Dei* in all persons. Lastly, being pastoral counselors, who embody “Best Practices,” implies seeing the connections between addiction, spirituality, and Twelve Step programs as well as learning from neuroscience how we can increase the effectiveness of our care.

This is a rich issue of *Sacred Spaces*. My deepest gratitude is to the authors who wrote stimulating and informative pieces. I am indebted to Ryan LaMothe, Editor of Sacred Spaces, who gave me this opportunity to be a Guest Editor.