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Some Applications of Selected Mental Health Projects and Counseling Research to the Training of a Pastoral Clergy

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SOME APPLICATIONS OF SELECTED MENTAL HEALTH PROJECTS
AND COUNSELING RESEARCH TO THE TRAINING
OF A PASTORAL CLERGY

by

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A Thesis Submitted to the Faculty of the Graduate School
of Loyola University in Partial Fulfillment of
the Requirements for the Degree of
Master of Arts

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VITA

The author was born at Wallasey, England, in 1916, educated at St. Francis Xavier's College, Liverpool until he was 18, and joined the noviceship of the Society of Jesus in 1934. After the normal course of novitiate, humanities and philosophy, he read History at Oxford, graduating with a First Class in Honours in 1944 and was awarded his M.A. in 1949. After studying theology at Heythrop College and ordination, he spent a year in Germany and then nine years as assistant master at Beaumont College, teaching History and Religion and developing certain ideas of the use of photography for religious illustration. The years 1960 to 1962 were spent experimenting with the development of a photo journalist unit, which took him through much of southern, Central and Eastern Africa and flowered in a series of catechetical and mission productions. Late in 1962 he returned to Beaumont College as Headmaster. When it was amalgamated with Stonyhurst College in a Province reorganization some five years later, he came to Loyola University to investigate counseling in September, 1967, and this thesis is one result.

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CHAPTER I

INTRODUCTION

The Priest of Vatican II

This study really springs from the reflections of the Council Fathers of the Second Vatican Council on the priesthood and its role in the modern world. When they came to consider the meaning of the priesthood in the light of the Church as the People of God, they by-passed numerous possible controversial issues and, instead, seem to have caught, crystallized, refined and developed the only partly conscious insights and yearnings of our day. They went straight to the heart of the matter and sought to give an answer to the question: what does ordination do to a man? What is the nature and function of the priesthood in the Church? They set down their convictions in the Decree on the Ministry and Life of Priests (Abbott, 1966, 532-576), the heart of which Bishop Guildford Young (Abbott, 527) summed up as follows:

The pivotal principle on which the Council's teaching turns is that the priest is a man drawn from the ranks of the People of God to be made, in the very depths of his being, like to Christ, the Priest of mankind. He is consecrated by a special seal of the Holy Spirit. In virtue of this consecration, he acts in the person of Christ, and, as a minister of Christ, the Head, he is deputed to serve the People of God. Through him Christ continues and fulfills that mission which He received from the Father.

What the Council makes clear is that ordination does not just give the priest a role to play at times, when he is "on duty", like a doctor or a lawyer, but changes him through and through into a priestly person. It

stresses the sealing of the Holy Spirit in ordination that identifies the priest with Christ the Mediator and Pastor and enables and obliges him to act in His place in the world. It is from what he is--his identification with Christ--that his priestly functions flow. It is not surprising, then, that it is this personal aspect of his task that is stressed, especially in Chapter II where his functions are spelled out in some detail. His main task is to bring Christ to others, through the Sacraments, through the word, in all its ramifications--teaching, preaching, instructing, advising, directing, counseling etc.--and through letting men meet Christ in the priest himself. The picture that emerges is of the priest not as an administrator or a bureaucrat or a businessman but as a Pastor--a Teacher, Sanctifier, Shepherd who has developed not so much institutional efficiency, but

those virtues which are deservedly esteemed in human affairs, such as goodness of heart, sincerity, strength and constancy of character, zealous pursuit of justice, civility. . . .(Abbott, 538).

Even when he acts as a leader or "ruler" he will "treat all with outstanding humanity, in imitation of our Lord....educating men in the attainment of Christian maturity". (ibid, 544) That richly expressive phrase: he should be filled with "pastoral love", really summarizes the portrait that emerges of the priest as a man warmly personal, interested, open, another Christ dealing with people in a human way, an instrument in God's hands, serving those he rules and building them up into a community. On a supernatural level, the Decree sees him as a man sensitive to the presence of God in individuals and in communities in the world, and able to form such a relationship with them that this dimension of their lives will be nourished and grow.

Exactly the same stress is placed on this pastoral aspect of his personality and his development as a priestly person, in the Decree on Priestly Formation (Abbott, 437-457). All his training should have one end: to help him to become a "true shepherd of souls after the model of our Lord, Jesus Christ";

Therefore every program of instruction, whether spiritual, intellectual or disciplinary, should be joined with practical implementation and directed toward the aforementioned pastoral goal. (ibid., 432)

Much the same picture emerges from the various studies that have appeared in recent years on the nature and training of priests and religious. A great deal in these writings is inspired by reaction from the model of the institutional or administrative type of priest many have known and that has been demanded by the exigencies of the Church as we have known it in its contemporary historical development and setting. The very criticisms indicate that that era is passing and the desire is widely felt for a different, more person-oriented priest. There is the same preoccupation in these studies as there was among the Council Fathers with the idea of a priest as a warmly-human, accepting, man, pastoral in his attitudes, open to interpersonal relationships, leading others to Christ, not so much by organizing them on a business model or catering for their needs with efficient but cold impersonality, as through individual contact and service to them as a community to whose needs he is deeply sensitive. The focus has shifted from the Institution to the persons within it; from the security of conformity and order to the risk of growing to fullness of being--becoming persons with all that that involves; from the priest as a factotum, doing things for his flock, to

the priest as a person, giving them himself.

There has been a subtle change in the realization of what is implied in the very word Pastor. A Pastor is one who feeds. There are different ways of fulfilling this responsibility. There was a time when it was taken for granted that the Pastor was an authoritarian figure, spending himself providing the food and administering its distribution. Today we see him rather as a person, individually giving what each one needs, even when what is being asked is in most cases, simply himself. The picture of the modern Pastor is of one who personally feeds his flock. The "food" he is being asked for is not so much neatly-packaged "solutions" to "problems", as understanding, acceptance, reassurance, love that will bring him into the sharing of the anxieties, the pains, the joys of others. This is why the Decree on the Priestly Formation put so much stress on his training in personal, human relationships.

There should be developed in the seminarians the abilities most appropriate for the promotion of dialogue with men, such as the capacity to listen to other people and to open their hearts in a spirit of charity to the various circumstances of human need. (Abbott, 455)

Even in the liturgy, something more personal is desired. The splendid, the ceremonious, the remote, the magnificent, the impersonality of pageantry is no longer acceptable: he is being asked to provide a more intimate experience. So, too, in sermons, retreats, advice, direction: asprin solutions appealing only to the intellect are no longer seen as adequate. Instead, there is an assumed demand for sensitivity to the genuine problems of existence. When the Pastor gives food, he is expected to give himself; and, in himself, he will bring Christ.

It is this conviction of the need not merely to add practical courses in pastoral theology but to concentrate on producing "a genuinely priestly person" that lies at the root of Karl Rahner's penetrating essay on "The Student of Theology: The Problems of His Training Today". (Rahner, 1964). The reality of what is involved is summed up vividly by two priest-psychologists:

Human relationships are the warp and woof of priestly existence. The priest is challenged through them in a way no other group of professionals can understand. . . . The priest, along with the minister and the rabbi, is a man exposed to an incredible spectrum of human suffering. Unlike the psychiatrist or the psychologist, the priest cannot be selective about the kinds of people he will see. Unlike many other helping professions, the priesthood does not allow for neatly scheduled appointments. The priest must answer every knock on his door, every ring on his telephone; he is committed to a loving response to all these confused and confounded people. He may not be able to solve all their problems, or heal all their spiritual and psychological wounds, but he must be a priest to them in some way. He must try to understand, to share, even for a few brief moments, the world of the casual passerby. His vocation does not permit him to turn anyone away. The person staring at him in his doorway has a right to the priest's time and person. The seeker of his help can never be perceived as just another drunk, or just another marriage case; there is never "just another" of anything for the priest. He empties himself, when he has a pastoral vision of his work, in a genuine effort to understand everyone as an individual human person. There is no challenge like it in any other life. It is in this urgent invitation to comprehend the scarred and suffering procession of human beings that come into his life that the priest finds the meaning of his own life. It is in this incarnation in relationship to men that the priest is himself redeemed. When there is no healthy pastoral relationship there is no growth for priest or people. (P. F. D'Arcy & E. C. Kennedy, 1965, 207-208)

Clearly, this pastoral dimension is not some extra skill or interest or technique put on from the outside. It is a matter of John Smith being himself, acting pastorally because he has become a genuinely pastoral person. The problem of training boils down to asking how one can help a priest already formed to become a more pastoral person; and how one can help

those in training to develop this sort of personality.

The whole question turns around the forming of relationships. In the case of the priest the pastoral relationship is of a peculiar kind. He has been identified with Christ through the sealing of the Holy Spirit. The pastoral relationships he forms are between other people and one acting in the name of Christ. There is a definite spiritual and supernatural aspect to the relationship. But this does not in any way diminish the importance of the very human qualities that lie at the root of his development. Grace builds on nature and unless a priest develops the fundamental qualities and outlook that enable him to enter fully into human relationships, no amount of supernatural means are really going to give him pastoral competence. He has no right to trade on miracles. He has to fit himself to be an instrument through whom grace can work. Unless he is capable of forming sound personal relationships on a human level and, in them, giving himself to others with sincerity, genuineness, warmth and understanding he will remain isolated, without pastoral influence. Can he be helped to develop the capacity to form such relationships?

The Formation of Priestly Personalities

We find ourselves ending with the same line of thought if we try to examine what it is in the training of a priest that produces a personality that finds the making of human relationships difficult.

There have been a number of studies, mainly masters' theses and doctoral dissertations, many of them done at Loyola University, Chicago, that throw light on the personality characteristics of seminarians and priests.

There would seem to be a recognizable pattern behind the priestly personality, that was either there in the candidate offering himself for the priesthood or was developed in training. Whatever the deficiencies found in those in training, there would seem to be a sound substratum of excellent qualities in many of them. Wauck (1956), after testing 207 diocesan major seminarians, found that the typical well-adjusted seminarian "may be described as being superior in intelligence, strongly interested in people and ideas, tending toward normal anxiety, but with good emotional control." Later studies have confirmed this picture of a basically sound set of young men. Gorman, for instance, (1961) studied the interests and adjustment of 188 high school seniors at the seminary and found that the profile of the entire group studied showed a better general adjustment than the male college group, and he drew a picture of the seminarian as "more quiet, serious, orderly, ritualistic and conforming, more reserved and less emotionally committed."

Not all are as well-integrated as this, and it is possible that the seminary training brings out some of the latent weaknesses in such young men. Dunn (1965), for instance, found that some of those attracted to seminary life tended to be "perfectionistic, worrisome, introverted, socially inept, and, in some cases, perhaps isolated and withdrawn," and Murtaugh (1964) concluded from his follow-up study of the students Wauck had tested as seminarians that "the confinement and the demand for excellence in the seminary promoted meticulousness, conscientiousness and sensitivity to emotional involvement." On the whole, tests show that many seminarians, compared with their contemporaries, are low in social qualities, anxious and unsure of themselves, lacking in self-trust and self-acceptance and too dependent on

the expectations of others.

This emotional immaturity, that seems to be a real danger in seminary training, is almost inevitable if students are brought up in a state of dependency, over-protected, over-secure, with few opportunities for making free, mature choices and smothered by a blanket uniformity encouraging conformism. The spirituality inculcated in the past, often bred a fear of friendships, emotions and feelings and induced a soulless impersonality and aloofness and an inability to relate openly, unselfconsciously and whole-somely to others. These are the defects common to the inmates in the "total institution" that Goffman (1961) speaks of in *ASYLUMS*, where he spells out the crippling effects that such an atmosphere inevitably has on the growth of the human personality. In the seminarian there tend to be dangers coming, too, from a certain insensitivity to the complexity of human life, from a tendency to approach things in an academic "bookish" way, to "solve" human questionings or fears by giving information and neatly packaged intellectual solutions, and to think that those asking for help want to be talked at rather than listened to. As D'Arcy and Kennedy remark (1965, 129): "the chief occupational hazard for the seminarian is to live by his mind alone, to use only a portion of his personality in his encounter with life."

What studies there are of the personality of priests seem to suggest that the personality traits that marked a man as a seminarian will not be much altered by his ordination or priestly surroundings. Certainly Murtaugh (1964) found that there was little change in the personality traits of the priests he tested, compared with the profiles they had given of themselves some eight years before. A recent study by Velilla (1967) shows priests as

possessing the same mixture of good qualities and defects as the seminarian of the other studies. Their MMPI profiles revealed priests as:

interested in people and ideas, though with a distaste for research. They are socially perceptive, sensitive, emotional, prone to worry, with aesthetic interests, aggressive and somewhat antagonistic toward authority. It seems that repression and denial are their major mechanisms in handling psychological stresses.... It is hypothesized that the high scores of the priestly population on the MMPI are due to the investment of a great deal of emotion in their work, together with a lack of self-confidence and a sense of dissatisfaction and failure. The correlations show the priest as sensitive, verbal, prone to worry, easily upset, concerned over bodily functions in their passive method of handling anxiety.

They reflect a number of "work needs" in being dominant, manipulative, and inclined to take an ascendant role with others as a compensation, perhaps, for their shyness.

For the priest there is an added complication. He is no longer just a private person, relating to others as an individual. He is a public figure as well as is conscious that in him the Church is seen to speak and act; few of his actions are judged simply as his private deeds or opinions or idiosyncrasies. A certain role expectancy often makes it difficult for him to be simply himself.

Certainly, these personality traits have their strengths and weaknesses. But, on the whole, they do not make it easy for him to form genuine, sincere, uncomplicated human relationships, and it is understandable that a priest should be tempted to take refuge from the agony of personal involvement in the more impersonal service of organization, administration and institutionalism. It is wasting time to blame the environment in which the priestly personality has been shaped in the past. It is more constructive to ask if those already trained can re-adjust the pattern of their

personalities, become more accepting of themselves, more secure, more outgoing, more richly human, more warm. Can they be re-educated to lose their fears of their own emotions and reactions and to see the pastoral relationship as at the heart of their priestly work? And can anything be done to build into the training of the future priest an environment and an outlook that will see the development of the pastoral person as the end of the whole training, and will not consider that adequate steps have been taken when extra lectures have dealt with pastoral "problems" and odd schemes have been elaborated for occasional field trips for apostolic work in schools or the inner city.

The Aim of this Enquiry

This study springs from the conviction that the solution to this problem is a very human one. The education of a priest is defective, no matter how much theology he is taught, unless it flowers in human understanding and human qualities. If the end product is not a more genuinely human being, his course will have been a failure. This is a problem of which he has no monopoly: it is faced by everyone who seeks to form helping relationships. Here, clearly, psychology has much to offer. It is not without significance that many of the most perceptive and convincing studies on religious life and training have come from priest-psychologists in recent years. Indeed, psychotherapists face much the same problem in their training. Here, too, the human relationship lies at the core of their effectiveness. Has counseling and psychotherapy anything to offer that would help to produce priests who are person-oriented rather than thing-oriented and who are

capable of forming effective helping relationships? It makes nonsense to think in terms of replacing the priest by the counselor; it makes very good sense to try to find how the person-centered approach to others is developed in a counselor and if there is any reason why the same attitudes could not be developed in a priest if he were to have some counseling training as part of his priestly education. Since both counseling and psychotherapy have been developed on such a large scale in America and as so much thought and enquiry have centered on the end and means of training in recent years, especially in the client-centered school, this study seeks to draw on American insights and experience in the field of counseling to help in the fostering of pastoral attitudes among priests.

The interest of the writer is largely in the training of clergy in England. There, counseling as known in the U.S.A. hardly exists, and training, except in the social services, is rare. But the need is beginning to be widely appreciated. In 1965, courses in Counseling were begun in the Education Departments of Keele and Reading Universities. In 1966, Exeter University followed suit. Swansea is beginning a course in 1969; and that is about all that is available. There is a dearth of trained staff to teach the subject, and these courses have relied heavily on American professors so far. But a beginning has been made. Similarly, the Churches, especially the Church of England, have become increasingly aware of the possibilities opened up by pastoral counseling and mental health training and are setting up a fairly wide programme to train clergy in these fields. Among Catholics, courses have started in a modest way both at St. Edmund's, Ware and at Heythrop College, but they are in their infancy and it is too

soon to make a realistic assessment. But the field has hardly been touched and so little is known about counseling that this study was attempted in the conviction that the American experience and debate on counseling, drawn from a wide range of practice and study, could shed light on the problem of training the sort of pastorally-oriented clergy envisaged by the Second Vatican Council.

Two areas of modern developments and research are particularly relevant and stimulating and are treated separately:

1. Schemes for Mental Health Training of the clergy, in both America and Great Britain. These are sampled and some possibilities and implications discussed.

2. The debate on the effectiveness of psychotherapy and what makes it work. Here, in recent years, a considerable volume of writing and a solid body of empirical studies of sound design have opened up new prospects and stimulated a reexamination both of what takes place in the counseling relationship and of the way counselors should be trained.

This thesis seeks to examine some of the more relevant parts of this research, suggests some implications for the training of priests and outlines some practical propositions for their adaptation to the training of a pastoral clergy.

CHAPTER II

MENTAL HEALTH TRAINING PROJECTS FOR THE CLERGY

The frightening incidence of mental disturbance among all classes of modern society had led to both concern and action. The State has come to the realization that there are other resource persons available, both for prevention and alleviation of mental distress, in addition to professional mental health experts. A growing awareness of the significant role the clergy can play in this area has led to State sponsorship of a number of mental health training projects for clergy, to increase and improve Society's resources for preserving mental health.

Responsible clergy, interested in the pastoral training of seminarians, have been quick to appreciate the value of such mental health training. They see it as affording a practical approach to the development of a pastoral outlook and competence in priests. Various projects have been undertaken on these lines, centering pastoral training on mental health programs. This is one very practical approach to the problem of developing pastoral competence. Three such programs are sampled here.

The Loyola National Institute of Mental Health

Seminary Project

This Project was launched with a grant from the NIMH in 1956 with the specific aim of reviewing, in the light of the behavioral sciences, the

special role of the minister in the preservation of mental health and the prevention of mental illness and of assessing the effectiveness of seminary programs in training the clergy, as clergy, in this field. It was recognized that the sick and disturbed tend to turn to the clergy for help and advice, particularly during the early stages of stress, and that if they were competent in this field they (the clergy) could make a distinctive contribution to the mental health of the nation.

As this project was something of a trail-blazer, a great deal of thought and research was devoted to basic clarifications. Much work was done pinpointing the role of the priest as priest in the mental health field, so as to counteract any tendency to produce amateur psychiatrists concentrating on emotional disturbances rather than spiritual guides handling the spiritual and moral aspects of the problem. Similarly, concentration on the problem of how to train mentally healthy priests led to a number of fruitful subsidiary projects: a program of research into the use of psychological tests for the screening and selection of candidates for the priesthood and religious life; an assessment of the attitudes of seminarians and clergy to psychiatry, psychoanalysis etc.; the investigation of the peculiarities of the priestly personality; the sort of personal problems seminarians encounter in the course of their training; the effect of counseling training on priests.

All these research studies, listed in a most revealing article by the Director of the Project (Herr, 1962), helped towards a clarification of the priest's role in mental health (this was spelled out in Herr, Devlin

and Kobler, 1960), of the type of training that would best fit him for this role, and of a program of training for seminarians.

The program that was eventually hammered out (Herr, 1962) aimed at using the resources of the behavioral sciences first and foremost for a constructive purpose: to help develop the seminarian himself into an emotionally mature priest whose understanding of himself and of human nature would enable him to feel for others in distress, understand their difficulties and use his religious resources to help them to sound mental health. The essential need for familiarity with the phenomena of abnormal behavior, both religious and "natural", was to be met by courses in both these areas later in the seminarian's education. This knowledge would fit him to recognize the signs of mental disturbance in those who would come to him, realize his inability to handle such cases, know how to make an appropriate referral and to give adequate support while such a person is in treatment and to play his part in a mental health team of helping persons: priest, psychiatrist and physician.

It was expected that, as a result of such training, a priest would emerge, himself balanced, mature, self-accepting, interested in fostering the mental health of his parishioners, sensitive to interpersonal relations with them, skilled in the art of counseling and acceptant of the limitations of his role. In their brochure Religion and Mental Health (1960) the Project workers outlined the way they thought such a "pastor of souls" would be helped to function more fully by this training: he would develop a deeper understanding of human behavior and improve his techniques in communicating; he would know how to prepare people better for the more

fruitful reception of the sacraments; he would be better informed socio-logically in his sponsorship of community projects; he would have a richer background to add more depth to his counseling; he would be a better resource person for helping those in need of special advice or treatment to be referred to a suitable source; he would have his own suspicions of the other helping agents like psychiatrists broken down, and be led into closer cooperation for the common good.

In brief, the Project workers were convinced that the priest has something unique to offer those who are mentally sick or disturbed, and with this training would be able to fulfill his pastoral responsibilities with greater competence, not only to the growing body of his flock who are ill, but in the prevention of mental illness and the building up of sound personalities.

The program of training was devised on interdisciplinary lines, with a solid core of psychology at its base. There was to be a distinct flavour about the preoccupations of the course in the two stages of the seminarian's training.

In the early years in the seminary (ages 17-20) concentration was to be on his own healthy growth in self-understanding, self-awareness and social relationships. The main means to achieve this would be a course of study and directed readings in the dynamics of personality development, and much effort was expended in the production of a suitable text.

In the later seminary years, three courses were envisaged, this time, concentrating more on abnormal psychology: a course on abnormal religious phenomena (but emphasizing the efficacy of merely natural psychological

laws and principles in the elaboration of a sound asceticism); a second course on the dynamics of abnormal behavior deviations (taught mainly by the case-history method); and a practicum experience, such as weekly visits to a mental hospital, followed by seminar discussions. Again, text-books for each of these courses have been produced. It was hoped, too, to incorporate the resources of the Pastoral Counseling course that had been offered at Loyola University to priests and others interested, under the leadership of Fr. Charles A. Curran -- but this element of the training would not be possible for seminaries outside the range of such a center.

Clearly, this program can do nothing but good. The clarification of the priest's role in mental health is most salutary. The course is well-adapted to give him the knowledge, psychological background and actual case-contact necessary for fulfilling his role. This will increase not only his competence but his self-confidence as well. His own training will have been more surely grounded on sound psychological principles, so that his own mental health should be sounder and the advice he passes on to others will be more formative. At a time when the number of people suffering from mental illness is reaching alarming proportions, the priest must expect to have to deal with at least his share of such cases. To know what to do in cases of crisis intervention; to have the experience to be able to realize when a case involves pathology he cannot handle; to know how to make a referral and then how to give support -- all this is almost essential for a priest today, and will help him to be a better pastor. As a byproduct, he should be helped to growth in personal maturity through the

solid course in personality development, with the light this will throw on himself and on the vagaries of human nature, and through the actual experience of dealing with others in a pastoral relationship where he will be under safe supervision until he finds his feet.

In this scheme, however, these personal advantages are, really, only byproducts. It would be unfair to criticize the project for not achieving what it never set out to do. Its aim is not to train therapists or counselors but to contribute to the mental health of priests and to enable them to make a real contribution to the mental health of their flocks. From the point of view of the intent of this thesis--the development of a pastoral personality in priests--such a project would have certain weaknesses.

First, although it can help the priest to the development of pastoral competence with one segment of the population in need of help, this training will not necessarily have a deep effect on the core of his personality and his pastoral attitudes. There is a real danger that he will remain basically unchanged in his orientation, but will be provided with a variety of techniques and resources that can be exercised without any real caring or personal self-giving. It is even possible that another role will be added to that of the priest, extrinsic to it--one, indeed, in which, because of the attraction of its practical nature and social involvement and of the self-confidence he acquires through training, he might find himself taking refuge from the difficulty of more general pastoral relations with whoever knocks on his door.

Then, too, especially for the seminarian, there are dangers and limitations in this type of training. For some time now, it has been appreciated by men like Karl Rahner (1964) and Curran (1968) that priestly training has been too abstract, too academic, too information-centered, not experiential enough. Endless lectures have provided the student with information about God and man; they have not taught him how to relate to them as realities. He is provided with the information that will enable him to give capsule answers to "difficulties"; he is not taught to empathize with this person in pain or anxiety or help him in his need. The mental health course, for all its virtues, would seem to run the same danger and to risk compounding the seminarian's problem. It might well teach him more answers in a new field: it will not necessarily help him in the depths of his personality, change his orientation towards the sort of pastoral attitudes outlined in the Introduction. The project envisages his being trained largely from the experience of others: might he not acquire pastoral attitudes more securely if there were a more experiential emphasis in the course? Even the case-history approach still remains information-centered, and the proposed clinical practicum is envisaged as occupying only a small part of the total training. For many, the Pastoral Counseling action of this course is a luxury that will never be available. It is not without significance that the 1966 Progress Report (Herr, 1966) notes that seminarians have found the practical experience in mental hospitals and hygiene units and the group discussions following them "the most beneficial results of the on-going seminary studies." Perhaps their pastoral desires find a satisfaction in such relationships and direct contact with people that is denied to more

cognitive approaches.

The Saint Louis Project

A tentative experimental program, with a similar mental health orientation, has been developed at St. Louis University for Jesuit Theologians by Fr. Gerald Daily, S.J. The professed aim of the course is to help priests to meet the need for communications between priest and people in all apostolic functions. The emphasis of the course comes from Fr. Daily's own psychological background, and in many ways is remarkably similar to the program of the Loyola Project. At the end of the course, the priest should be more aware of himself and have a more penetrating knowledge of those among whom he will work, healthy and ill. Throughout his description of his scheme (Daily, 1966), the author shows himself vividly aware of the dangers inherent in teaching psychological techniques, of developing a mechanistic attitude toward human problems and "the practice of treating people and their problems as abstractions rather than as concrete and individually different." Hence he is careful to emphasize not techniques but persons--"the humanity of the priest and the person coming to him, whether he be penitent, student, client or fellow teacher. Insight and a feeling for relationships have to be fostered," and an understanding of the part played by unconscious motivations in human affairs.

Like the Loyola Project, this course borrows unashamedly from the behavioral sciences. Like it, too, it concentrated on mental health in the first year, rather than on pathology. Two elements make up the course: a series of lectures on personality theory and a seminar on Group Dynamics.

Both of these courses should help produce a healthy personality with a sound knowledge of the workings of the human animal. The second should also help not only to self-insight, but to easier interpersonal relating and experience in the use and peculiarities of groups for communicating later in pastoral situations. A four week reading period is set aside to round off the course for the year.

In the second year, the pathological aspects of personality are dealt with and their implications for pastoral contact. On a practical level, a course is also given in the philosophy of counseling and the basic principles of interviewing techniques. Here, the teaching is made as experiential as possible through role-playing by the students of crisis situations such as suicide, delinquency, grief-reaction, alcoholism, etc. It is hoped that this and the Group Dynamics seminar will help to underline in practice the basic attitudes in interrelating and help to produce a more person-oriented priest. It seems a pity that there cannot be more time, even at the expense of some of the theoretical foundations, for a more extended counseling training: but what there is does seem to be a move in the right direction and should help to bring the learning down from the academic and theoretical to live situations and people.

In the third year, when the theologian is preoccupied with the imminence of his own ordination, the theme taken is the family and the psychodynamics of marriage and family life. This is mainly a lecture course, treating of female psychology, the dynamics of healthy marriage and crisis intervention in family breakdown. The aim of this year's course is not to prepare marriage counselors but to help the priest fulfill his pastoral role

in this one aspect of the mental health sphere.

In the fourth year, workshops at the Menninger Foundation take the place of formal courses, much on the model of the practicum of the Loyola Project. These, apparently, have been found of immense value and keen interest seems to be aroused by the direct contact with the sick and by this very practical training in mental health.

Despite its individuality, this course shares many of the common factors behind the Loyola Mental Health Project and should be highly effective in the development of pastoral skill and attitudes. The most notable refinement would seem to be the real effort made through Group Dynamics training and counseling instruction, to increase the experiential aspect of the training and keep the academic more in its place as providing a sound intellectual background for practice. Whatever the difficulties, the author is very clear that he is most interested in trying to change attitudes in the students and help cultivate greater sensitivity to the needs of individuals and of groups. The course will go a long way to achieve this aim: its success will, obviously, depend largely on the personality and inspiration of the author and the attitudes the students will pick up from live contact with him.

On the negative side, the main criticism one has is of the need of so much psychology. When the time available is so short and the professed aim is to change the student's attitudes and sensitivity so as to make him a better pastoral priest, it seems fair to ask if this could not be effected even better by forgoing some of the luxury of the psychological training and stressing even more the experiential aspect of the training. The mental

health aspect of the course would then be somewhat impaired; but this might be more than compensated for by a deeper development of the pastoral personality.

Recommendations of the British Council of Churches

If, in America, there has been, among the clergy, a certain suspicion of modern psychology and an inadequate appreciation of what it has to offer of real value for the development of the personality and the training of the clergy, in England, even less use has been made of it. Yet, there too, the changing patterns in recent years and the bewilderment caused by new sociological factors and the patent failure of familiar approaches have led those concerned with the training of the clergy to turn to the behavioral sciences for help. For two years, from December, 1965 to December, 1967, a multi-denominational Working Party of the British Council of Churches considered this problem of training and has produced a report (Working Party of the British Council of Churches, 1968) so rich in insights and fertile in ideas that any summary is a distortion and an impoverishment.

What is striking is the remarkable similarity of the preoccupations and recommendations of the Report with those of the two projects outlined above. There is the same concern with the need for mental health training for the modern clergyman; the same preoccupation with the need to clarify the role of the clergy in this field, and define the specific contribution he has to make as a clergyman; the same realization of the wealth the behavioral sciences can offer for the personality development of the priest in training, and especially of the contribution that can be made by the

latest developments in Group Dynamics and small group techniques, both as learning and teaching tools and for the deepening of inter and intra-personal growth; above all, the need, stressed so heavily in the St. Louis scheme to make the attitudes and personality of the student the focus of the training, rather than the inculcation of knowledge, and, even in mental health training, to learn through contact with the healthy before turning to the sick.

What is distinctive is the effort to solve the difficulty caused by the dichotomy between academic clerical education (that has produced the bookish clergyman) and the need for pastoral training, by taking as model not the classroom and the lecture, but the medical and social professions where a marriage of the theoretical and the experiential has been effected and a helping person is the result. As they say in the Report:

There is no doubt whatever that the whole shape of the ministry needs rethinking, and training for the ministry needs to undergo similar and consequential changes.... Further, it has long been understood by those concerned with the education of doctors, teachers, social workers, industrial managers, that professional education without involvement in the practice of the profession is an anachronism. It was from this conviction that the pastoral training of the minister is neither professional enough nor deep enough that our enquiry began.

The Report makes it clear that two main areas of concern have led to the urgency of the need to rethink clerical training. The first is the demand for mental health training for the clergy, to fit them to minister to a considerable proportion of their flock. Stress and breakdown are so much a part of our society that the clergyman must play his part in the mental health program. It is reckoned that a quarter of the family doctor's patients are as much emotionally upset as physically ill; that 45 percent

of hospital beds in England are in psychiatric hospitals; and that one in fifteen of the population can expect a breakdown serious enough to merit hospital treatment. The need for a certain educated expertize in this area among the clergy is pressing.

A second vital consideration is the identity crisis that is effecting many of the younger clergy. History has caught up with the cleric. Until recently he was a busy man. He was a factotum. The whole life of the community revolved round him--education, social welfare and benefits, even civic administration, every ministry of advising, instructing, counseling. He served his people in a very real way. Almost overnight, he has awakened to find these functions taken over one by one by a complex of state welfare agencies. Having been so involved in his helping role, he is now left puzzled and frustrated, feeling that he has something specific and of value to offer, but finding the familiar channels no longer available. So, many ask, what does a priest do, stripped of all these activities? Furthermore, he is only too conscious that the workers who have supplanted him are professionals--social workers, doctors, probation officers, teachers, psychiatrists--who seem confident, competent, expert. By contrast, he sees himself as an amateur, uncertain, insecure, untrained, ill-equipped to deal confidently with people in a world teeming with professionals and experts. The result is often a tendency to self-disparagement and a poor self-image and a sneaking feeling that it is only by taking on another role added to his essential one as a clergyman--a social worker, a hospital chaplain, a mental health worker--that he will be able to form any helping relationships. The danger here is clear: he will find his identity and his confidence, not in

being a priest, but in some other role, with his priesthood becoming secondary. As their discussions proceeded, the Working Party came to much the same conclusion as the Directors of the Loyola Project: since the Church is a "caring community", the priest must express his concern and love not just in pious exhortation, but through service to society as well. Yet the priest's role must be unique in the field of social service. He must be quite clear about this role and be trained to fulfill it with the same professional competence as the social worker or the doctor.

There is no suggestion whatsoever that ministers should become social workers or that training for social case-work should constitute the training of the ministry for the future. But while the two roles of minister and case-worker are not, and never can be the same, we have been, and are, anxious to see that all the insights and lessons which can be gained from the psychological and social sciences, both as representing a body of knowledge and also providing patterns of training, should be available and used in our training of the Christian minister.

Again, while the report shows a keen awareness of the need for clergy trained in mental health, it sees very clearly the dangers inherent in such training. It is speaking from a background of awareness of what is already happening. The list of courses available to clergy was presented to the Working Party in the Appendix to the Report on Practical Training in Ministry of the Institute of Religion and Medicine. Practically all the options available appear to concentrate on the ministry to the mentally sick and the best of the courses seem to be centered on mental homes and to be heavily slanted to psychiatric or psychological preoccupations. The Report sees a real danger of turning clergymen into amateur psychiatrists, on the one hand, and on the other, is alive to the disadvantages involved in building a training in human relations round contact mainly with the mental-

ly sick or abnormal, in an environment of abnormality. Like the Loyola Project, therefore, this scheme stresses mental health rather than mental illness and concentrates on what psychology teaches about the normal personality in all the early formative part of the training, and only later turns to the abnormal. As a further precaution, the Report refuses to take the psychiatrist or the doctor as the model, and instead extends the priest's understanding of his social involvement by stressing other fields of social concern, as well as mental health: industrial counseling, social welfare, hospital chaplaincies and a wide variety of fields that might provide a point of contact with the community and might be of interest to individual clergymen. Being conscious, too, of the very real danger of the subsidiary role becoming central, the Report puts the main focus of training not on techniques or skills, but on the training of the clergyman as a person. Throughout, the emphasis is on using the behavioral sciences constructively to produce a priest who is an integrated, mature person, able to relate healthily to others, pastoral in his approach, anxious to serve his flock as persons, yet with a certain competence in helping them in their social concerns and in the tragedy of mental breakdown or emotional stress. "If the end-product is not a more human, a more genuinely human being, the course will have failed in its object."

This last point lies behind both the choice of matter and the use of Group Dynamics in the early stages of the training--just as in the other two projects described above. It presupposes the giving of a sound theological foundation at the same time, and concentrates on the development of

a personality geared to concern for others.

The details and shape of the course recommended are, naturally, geared to the structure of the education of clergymen in England. This is seen as embracing four stages: University education; seminary training, followed by ordination; a period of two or three years "internship" working in a parish under supervision; "in-service" training some few years later after considerable experience as a pastor. It is to this last stage that the Mental Health Training period is reserved: up to then, the stress is on self-development as a healthy person, and experience in working with "normals" or the physically ill. The mental health training comes when the personality is already developed, the need for such training is felt, and a time for re-evaluation of one's role as a clergyman in the light of one's interests and capacities can be most effective. It is hoped, in this way, to lessen the risk of losing priestly identity in over-identification with the role of psychiatrist or social worker and produce instead a caring priest. Here the proposals are not very different from those of the other two schemes, save that mental health training is seen as only one alternative. If there is a difference it is rather in teaching methodology: there is less stress on the academic and the lecture, and far more on experiential training on the model of the doctor or the social worker.

There is an overall similarity between the proposals of the Loyola and Saint Louis schemes and the Report's recommendations for the Seminary and "internship" stages, that would make these recommendations easily adaptable to the training program of a Catholic priest. On the intellectual

level, both are centered on a course of lectures on Human Growth and Development, with the aim of giving a sound intellectual background for self-understanding and a knowledge of the idiosyncrasies of human nature, and both see some course on abnormal psychology as essential to help the clergyman to avoid confusing the problem of religious difficulties with the symptoms of early mental illness and to know how to differentiate normal stress behaviour and mental breakdown.

What is distinctive about this report is its appreciation of the constructive role of seminary living in the training experience. The St. Louis scheme had stressed the development of the person: this Report takes up the same emphasis and envisages the seminary itself as a laboratory for the growth of self-understanding and the ability to relate to others in society. The seminary experience is seen not so much as a time for teaching subjects as an opportunity for training persons.

The Christian community is necessarily concerned with learning how to exercise "wide loving", how to make and sustain "accepting" and positive personal relationships, and how to deal with the characteristics and traits in ourselves and others that stand in the way of this--how to cope with hate, exploitation, withdrawal, fear.

Three elements are seen as essential ingredients for such an educative experience: a sound theological teaching to offset any danger of the course becoming one productive of "technicians in personal relationships" instead of clergymen; "good, rigorous and imaginative teaching of the development and growth of personality"; and "participation in the life of a community or group such that real growth can take place in making or sustaining good personal relationships".

There is a remarkable similarity between the picture of the clergyman presented here and that of the Vatican II priest:

Clarifying this first area further, we may say that it includes learning to listen and not to be authoritarian; learning to observe with an alert and critical judgment, and with increasing awareness of what may be or what may prove to be significant; learning to be aware of oneself, of one's half-concealed bias, interest, emotional involvement, and to take account of it; learning to interpret a person's present behaviour in terms of a wide variety of factors, psychological type, environmental pressures, family upbringing, childhood experience etc., learning to accept and love in a positive and wise way.

The chosen method is in the skilled use of group work. Extensive use of small group techniques is suggested, not as a therapeutic but as a learning experience. The basic fruit hoped for is the development of a rich, mature person, full of self-insight and accepting of himself, and open and comfortable in interpersonal relations. Secondly, it hoped to produce a person skilled in the use of group techniques which he can use for his future work with others, as a means of entering into contact with them and of exercising his responsibility as a "caring person", with the strength to bear up under the strain this involves as he finds that "the client works out his problem with the helper, and if the help is adequate, on the helper."

The post-ordination "internship" stage is envisaged rather as a practicum under supervision where the young clergyman can safely try out what he has learned and exercise, the qualities he has been trying to foster in himself. It is roughly the same as the fourth year experience in the St. Louis scheme.

In general, there is an overall similarity in all three schemes,

though the last two, being the product of a later age, reflect more the preoccupations and the needs of the modern priest, and put the stress on the development of personal attitudes and the priestly personality with its person-orientation and its caring relationship. All draw quite heavily on psychology and stress mental health; but it is significant how with each scheme, this becomes increasingly subordinate to the main purpose of training the priest as priest and how the danger of confusion of roles is appreciated and guarded against. The British Council of Churches' Report is particularly rich in its understanding of the educational use of the seminary life as a growth experience in interpersonal living that can be used constructively, and in its appreciation of the immense possibilities opened up by the use of small groups as a learning process.

All this is a considerable advance on past practice and will help greatly to the emergence of the pastoral priest. But in an already overcrowded syllabus there is a difficulty about adding further courses, and the academic nature of some of the suggestions carries with it the danger of reinforcing the weakness of the present form of priestly education: its impersonality, its stress on "problems" and "solutions" and intellectualization of what are needs of a whole person and not capable of being satisfied by mere intellectual clarification. Here the stress of the British Report on training the "caring person" is most salutary, and the acceptance of the model of the training of the social worker as the teaching method could lead to a complete rethinking of seminary methodology.

An examination of some of the implications of a number of research

projects that have been carried on in the past ten years in the field of counseling and psychotherapy, leads to some suggestions for an alternative approach to the problem of educating the seminarian into a person-centered priest with a pastoral orientation at the very roots of his priestly personality. This is explored in the next chapter.

CHAPTER III

STUDIES IN THE COUNSELING RELATIONSHIP

"Father Rank clapped the cover of the diary to and said, furiously, 'For Goodness' sake, Mrs. Scobie, don't imagine you--or I--know a thing about God's mercy.... The Church knows all the rules. But it doesn't know what goes on in a single human heart.'"

Scobie had come to him in a spiritual crisis, looking for understanding, and had found what seemed like hackneyed phrases instead. He had gone out and killed himself.

It might be thought that Graham Greene's (1948, 306) accusation through the mouth of his priest who has failed in a pastoral situation is a little unfair or a caricature. But Fr. Rank's situation is by no means unfamiliar. He had been trained in the old bookish way and, no doubt, could theorize about the pastoral, describe it, conceptualize it, lecture on it: but he was the product of a training that could enable him to see the moral bind Scobie was in rather than how to relate to him as a human being in confusion and in pain. Had he been not just a good man but a priest, deeply sensitive to the other, able to form a genuine relationship with him, he would not have had to project onto "the Church" his own insensitivity and failure to be human. Perhaps a more experiential training, concentrating more on attitudes than on procedures and information, might still enable a priest to be firmly grounded but less bookish, less academic, less problem-solving, more warmly human, more sensitive to the individual and the community, more convinced that to be really pastoral demands the giving of

oneself to others in a genuine and effective relationship.

A priest trained in counseling would no doubt have dealt with Scobie quite differently but still in accordance with the Gospel. The attitudes and qualities that lie at the heart of a genuine pastoral relationship are very much those required by a successful counselor. Both are helping relationships. In both, it is a person who is helped in his or her inmost being. It is not a problem that is solved, nor a material gift that is given, nor a service that is recommended or organized: it is a relationship that is built. It must be either person-oriented or doomed to remain unproductive.

In recent years not only has there been a wealth of theorizing, speculation and reflection on experience about the source of effectiveness of the psychotherapeutic relationship, but there has grown up a considerable volume of research studies giving a scientific insight into the core of counseling and how to train practitioners. Many of these have ideas to offer that are entirely relevant to the training of a pastor. For this purpose, two lines of enquiry and research have proved provocative and stimulating, each triggered off by a key article that led to much heart searching in the counseling world.

How Effective is Psychotherapy?

In 1952 the academic waters were somewhat muddied by the appearance of Eysenck's article, "The effects of psychotherapy: an evaluation." Its pointed questioning came as a crude shock and was responded to with denial, debate and hostility until it was quietly dropped a few years later. It

was never really rebutted. Thirteen years later, after reviewing the studies that had been done in the intervening years, the author could still regard his original position as undisputed (Eysenck, 1965). By that date a new and interesting, if somewhat alarming turn, had been given to the debate with the release of the findings of the Wisconsin Research Project with schizophrenics.

Eysenck had contended that no evidence, other than testimonials, existed to demonstrate that formal psychotherapy was producing therapeutic results, and that the evidence seemed to show that control groups, receiving no professional treatment showed as high a degree of improvement as therapy groups.

The Research team's findings from the Wisconsin experiment, revealed (Truax, 1963) that there was a distinction to be made. Their experience agreed with Eysenck's conclusion that there was little difference in the amount of change occurring in the experimental and control groups when taken as units. But when the individuals making up the therapy groups were examined more carefully, very real changes were found to have taken place as a result of therapy. The patients either got better or got worse; statistically, those classes more or less cancelled each other out. In other words, Truax was driven to conclude that the therapeutic relationship does produce change in the patient--for better or for worse; and he was further able to show that the change in either direction seems to depend, in large measure, on the qualities of the therapist rather than on the patient.

Writing later, Bergin (1966) was able to show that a considerable body of evidence had been available for years to substantiate Truax's

experimentally established conclusion on the deterioration effect. It had been tucked away in the reports of various research projects but its significance had escaped notice. Now it was seen as added confirmation.

Two conclusions suggest themselves, relevant to our enquiry. First, the therapist can produce change--be helpful or harmful--and the way the change goes seems to depend on what he brings to the relationship. Secondly, and in its own way rather reassuring for the priest: the priest need not feel that he alone is insecure, not certain how to handle people in need, while the other helping professionals are confident, successful, capable. The report of the British Council of Churches, dealt with in Chapter II, had noted that so often these helping professions were equally insecure and dogged with failure, but put up a better front than the clergy, who might gain some confidence from an understanding that others felt the same as they did without losing heart or self-esteem. Here is some confirmation that the priest is not an amateur among professionals, but faces the same challenge and risk.

The Wisconsin Project, then, helped to throw further light on one section of the population Eysenck had written about--the effect of therapy on those receiving individual psychotherapy. Bergin (1963, 1966, 1967) has thrown a good deal of light on the other section: the control group that was receiving no therapy but showed improvement. Whether they are given psychotherapeutic treatment or not, roughly two-thirds of any group of neurotic patients will recover over a period of two years. Eysenck had attributed this to "spontaneous remission". Bergin, on the other hand, has made out a

good case for suggesting that many of these people are not strictly "controls" after all. They recover because they do receive a great deal of "informal therapy" in their "natural habitat", from various sources such as friends, clergymen, physicians, teachers etc., and he argues that the level of recovery speaks highly for the effectiveness of such psychologically untrained helpers. Frank (1961) found that over a period of years, approximately 50 percent of a group who had sought psychotherapy had also sought help from a variety of other non-mental health sources, and he attributed their continued positive change, when not in therapy, to the effects of this "non-professional" treatment. Even better evidence comes from the nationwide interview survey conducted for the Joint Commission on Mental Health and Illness by Gurin, Veroff and Feld (1960). They found that of those persons who sought help for personal problems, the vast majority chose non-mental health professionals, and generally they felt more satisfied with the help they received than did those who chose psychiatrists or psychologists. In this bracket, the clergymen ranks second only to the physician; and of the 20 percent who turned to the clergy for help, 78 percent judged that they had really been helped, as against 59 percent of those who had gone to a psychiatrist.

These findings are rich in significance. As Gurin et al. comment: "These findings underscore the crucial role that non-psychiatric resources --particularly clergymen and physicians--play in the treatment process. They are the major therapeutic agents....." (!)

To conclude this section, it would seem, then, that psychotherapists

can be successful--or can do harm. The criterion is the relationship the therapist forms with the patient. Many, besides psychiatrists and psychologists, can also help with human problems. High on this list, second only to doctors, are the clergy. A high percentage of those coming to them reckon that they have been helped -- even though the clergy have had little training in this field. Would they be even more effective helping persons if they had some of the skills of the psychotherapist? Is it possible to identify the qualities that make a therapist successful? If so, can these be developed by training? How far is professional, psychological training a prerequisite of therapeutic effectiveness? Some light is thrown on these queries in the next section. But first Arbuckle (1967) has some comments on Bergin's article that are both relevant and thought-provoking:

Bergin also raises serious questions regarding the effectiveness of the education of the therapist, whether in medical schools, departments of psychology, or schools of education. If he is correct in suggesting that the selection of therapists is more important than their training, and the evidence tends to back him up, we might assume that the professional training of a therapist is the frosting on the cake which is already quite appetizing! If lay therapists, who turn out to be quite effective, are selected because of their ability to form a therapeutic relationship with the person who selected them, it would seem that this should be the central core of any program of training and education. It would obviously have to be geared in a very personal way for each individual student therapist. "What can be done to help you to be effective in forming a therapeutic relationship" would be the basic question asked of each student, and for some, the answer probably would be, "Not very much," or "possibly quite a bit, but it would take so long that it would not be worth it, either for you or for us." Another obvious implication of the success of the lay therapist who has been chosen by someone to function as his therapist is that the person I feel is good for me apparently is good for me The personality of a medical doctor who is repairing a shattered leg may be of little importance, but we sometimes seem to almost operate on the assumption that a shattered leg is no different than a despairing feeling of loneliness. Treatment by a rather nasty, but effective, practitioner may be satisfactory for a leg but surely not for the psyche! (209-210)

What Makes Psychotherapy Work?

Some five years after Eysenck's first article had ruffled the academic calm, another study, this time by Carl Rogers (1957), gave a new stimulus to enquiry and research in another corner of the field. The article summed up in a manageable and concrete way many of the insights on the dynamics of the counseling relationship that had been in the air for some years, and it focused attention on certain core elements. The study was highly productive, partly because it asked the right questions, ventured to state a series of clearly spelled-out hypotheses, and suggested how they could be verified or disproved by research.

The general question of what makes counseling work had been debated for years. Various approaches had been popular at one time or another. There had been the phase when it was believed that techniques contained some mystical quality and furnished a key to unlock the secrets of the psyche. Then the searchlight had turned onto the counselor himself, in an effort to analyze out the successful practitioner and discover what made him tick. Some idea of the range of qualities this paragon was expected to have, can be gained from Cottle's review of the literature on the subject up to 1953 (Cottle, 1953). As he pointed out, the reports are not really very helpful as they are based largely on subjective judgments of a questionable nature. But at least they had the merit of trying to explain the success of counseling by turning to the counselor as the influential agent of success, rather than to sophisticated techniques.

A more fruitful line of thought opened up when the concentration

turned from a dissection of the counselor to an examination of the actual relationship with the client. In 1950 Fielder (1950) had drawn attention to the fact that it was the relationship that was crucial in the production of positive client personality change, and that this was a widely held conviction, not only among client-centered counselors, but among workers of all different schools from the psychoanalytic to the eclectic. Further, in a research study based on the use of Q-sorts, he had shown that therapists of widely different allegiances have basically the same idea of the qualities of this ideal relationship. In much the same vein, Jouard (1959) lauded the I-Thou relationship as crucial, and Farson (1954) introduced his provocative thesis that "the Counselor is a Woman." This was an interesting thesis, not only because it was written with delicacy and perception, but because it turned attention onto the human qualities of the counselor. Farson suggested that if the counselor is to make an approach that will do good, he must be "understanding and warm, accepting and deeply personal" -- "so personal that he could be receptive to feelings of dependency and love"; and that it is precisely feminine qualities that he needs -- the ability to be "tender, gentle, loving, dependent, receptive, passive, more concerned with family and interpersonal relations than with things." In contrast, the manly ideal in our culture presented the male as "clever, tough, strong, courageous, independent, more concerned with things than with people" -- the very qualities that would militate against success as a counselor. He wound up his essay with the paradoxical reminder that real manliness would be required to experience these "feminine" qualities in all their depth, for such a man would find that he would need courage, intelligence, resource-

fulness and strength such as he could hardly imagine.

It was this undercurrent of ideas (and how widespread they were Rogers brings out in the list he gives of some of the studies that had been influencing his thought (Rogers, 1958)) that Rogers sifted and formulated with lucidity, accuracy and sharpness into a series of hypotheses in "The Necessary and Sufficient Conditions of Therapeutic Personality Change" (Rogers, 1957). It was a provocative thesis, partly because it was so univocal. It took elements that were commonly held to be contributory to the success of therapy and asserted that they "seem to me to be necessary to initiate constructive personality change, and. . . if taken together, appear to be sufficient to inaugurate that process." (Rogers, 1957). As he put it later (Rogers, 1962):

It is the quality of the interpersonal encounter with the client which is the most significant element in determining effectiveness.... I believe the quality of my encounter is more important in the long run, than my scholarly knowledge, my professional training, my counseling orientation, the techniques I use in the interview.

He had come to believe that the quality came from the client's perception of three characteristics in the counselor: an empathic understanding of the client and his world, unconditional positive regard, or non-possessive warmth, and congruence or genuineness in the relationship--the ability to be, within the relationship, freely and deeply himself, a congruent, genuine, integrated person.

It was Rogers' contention that if these three conditions were provided and preserved by the counselor, a process of therapy would occur in which the client would explore himself deeply and come to know and experi-

ence the full range of his being. As a result of engagement in the process of psychotherapy, personality growth and constructive personality change were theoretically predicted to occur. "Whether we are dealing with psychotics or normals, delinquents or neurotics, the most essential ingredients for change will be found in the attitudinal qualities of the person-to-person relationship." (Rogers, 1967).

Not unnaturally, this provocative statement drew a good deal of fire. If it was criticized for generalization and because it seemed an oversimplification to categorize any one group of conditions as the only ones that were either "necessary" or "sufficient" (Ellis, 1959) there was a scientific detachment about its insistence on the need to test, validate or reject the hypotheses by carefully devised research, and the practical suggestions as to how it could be done.

The study certainly stimulated research! It became a springboard for a number of significant studies. Already, by 1958 (Rogers, 1958), Rogers was able to point to the bold project that Halkides (1958) had completed with clients coming to a counseling center. She had aimed at testing his hypothesis, using randomized samples of short extracts from tape recordings of interviews with clients, and assessing them for the qualities under investigation. She had shown that the quality of the counselor's interaction with the client could be satisfactorily judged on the basis of a very small sampling of behavior, and that, for the sort of client she had dealt with, Rogers' general hypothesis had proved sound and a significant relationship had been demonstrated between the three hypothesized conditions and success

or non-success in therapy.

In the next year, Barrett-Lennard (Barrett-Lennard, 1962) refined the method by devising a Relationship Inventory to measure the three conditions and showed that they were linked significantly with the success of therapy in the examples he used, with the same kind of client population as Halkides had tested.

The Wisconsin Project

More important, by 1962 Rogers was able to quote the reports that were beginning to come through from a massive research project, aimed at testing his hypotheses (Rogers, 1962). In the Wisconsin Project, his thesis was being put to the test as scientifically as possible, with a population with whom communication was agonizing or almost impossible--hospitalized schizophrenics at the Mendota State Hospital. This five year research project was described by Bergin (Bergin, 1963) as "at least in design, a paradigm for all research addressed to the basic, simple question of whether psychotherapy has any effect at all." It now appears as something of a turning point in the debate on therapist characteristics. A fuller insight into what was involved in the effort is now available since the publication of the detailed report on the whole thing (Rogers (ed.), 1967).

Halkides and Barrett-Lennard had already found some general confirmation for Rogers' thesis among college students and the sort of person who comes to a clinic for help--on the whole, fairly intelligent "normals" in distress. This undertaking aimed at testing the thesis among schizophrenics, on the assumption that if the thesis were valid, it should apply

to any type of client, even those with whom verbal communication was difficult. As the report on the findings put it (Rogers (ed.), 1967):

This research program, in short, was built on the assumption that the therapeutic relationship is the important vehicle for personality change, and that within this relationship certain specifiable yet general attitudes, held and communicated by the therapist, are the necessary and sufficient conditions for therapeutic progress.

The main focus was on the three therapist conditions, accurate empathy (a refinement of Rogers' earlier conception of empathy, taking into account not only the therapist's sensitivity to the client's current feelings, but "his verbal facility to communicate this understanding in a language attuned to the patient's current being" (Truax and Carkhuff, 1964)), non-possessive positive warmth and therapist congruence or genuineness in the relationship.

A number of patients in intensive individual psychotherapy, lasting from six months to more than three and a half years, were compared with a carefully matched control group who were given no individual therapy during the period. All interviews were tape recorded. This provided a wealth of "raw material". Rogers, for instance, had 166 interviews with a patient. Rating scales were constructed for assessing the degree in which the therapist manifested empathy or warmth or congruence, and workers were trained to rate these therapist qualities from short extracts--generally 4 minute samples--taken in a randomized way from the recorded interviews. As these raters worked "blind", having no knowledge of whether the segments came from early or late interviews, whether the cases were successful or not, the identity of the therapist, or, indeed, any knowledge of psychology since most of them were English majors, bias was guarded against. It was found that a high degree of reliability was reached in their ratings. Once this method had

been devised, tested, refined and standardized, the possibilities were almost unlimited.

Personality growth in the patients was measured by a battery of psychological tests administered before and after the course of treatment.

Truax's article in 1963 (Truax, 1963) conveyed something of the excitement and flavour of the research to a wider public. It gave some idea of the research design, of how these qualities were rated, of different experiments that had been done and of the conclusions that were emerging. It described, for instance, how a number of experiments showed that the correlation between therapist empathy and patient constructive personality change was good. That raised the next question: who caused the level of empathy, the therapist or the patient? Experiments were devised to try to test this, and the conclusion reached that the principal determinant of the level of accurate empathy offered was the therapist. This then led on to questioning about which elements in the conveying of empathy are most significant--tone of voice, use of the patient's own words, concrete or abstract expression etc. And so on. Similarly with warmth and congruence. And so on to further questioning.... The fruitfulness of such investigations was underlined in Truax's discussion of the implications of the findings:

What might these consistent research findings mean for us as therapists? (1) As therapists, we might aim toward a more clear and sensitive awareness of the patient's inner being; toward a greater ability to deeply understand the patient's moment-to-moment feelings and experiences and to thus make more accurate meaning out of the shifts of posture, the slight inflections of tone, or the empty silences. It would mean that as therapists we would concentrate less upon developing skills at highly intellectualized diagnosis of the patient's "being". (2) As therapists, we could allow ourselves to express more openly our deep caring for the person who comes to us for

help: to do this unconditionally would be to set no conditions in the prizing of the person. (3) As therapists, we can afford risking confrontation with the patient as a person rather than as an institution. Our open, non-defensive intactness, our human genuineness encourages the patient to also deeply "be" himself within the relationship.

The publication of the much more detailed account of the project (Rogers (ed.), 1967) makes an evaluation of the findings possible. In general, the main lines of Rogers' thesis were confirmed, but many modifications would have to be made in a restatement in the light of this research. For instance, dissatisfaction was experienced with the scale for measuring unconditional positive regard, so, in the end, not too much was made of the findings on this quality. Again, it was discovered that neurotic clients appear to perceive primarily the empathic understanding and the genuineness of the therapist, rather than his warmth, and thus it is natural that their central focus appears to be on self-exploration. The schizophrenic patients, on the other hand, sometimes baffled the therapists by their lack of self-exploration and hours of silence, and perceived primarily the levels of warm acceptance and genuineness, and their focus seemed to be on relationship-formation. There was, therefore, a variation in balance of the relation of the different qualities to different types of clients. All sorts of interesting side lights began to emerge from the findings. For instance, the therapist's own assessment of the degree of conditions he offered the patient was often far more optimistic than that of the patient (using the same Relationship Inventory for assessment) or of the coldly objective raters. It was perhaps significant that in successful cases, patient and therapist tended to see the relationship in the same

fashion. Again, it became clear that the quality of the relationship was influenced by the characteristics of the client: he played his part in eliciting them in the therapist.

There is a charming modesty about Rogers' own summary of the success of the project (Rogers (ed.), 1967):

The value of the research program did not lie in the fact that our initial views and predictions were brilliantly or strikingly confirmed. Actually, many of the most impressive of our findings either went contrary to our expectations, or forced us to modify the theories from which we started, or turned up new facets of knowledge of therapy--elements which we had not in any way foreseen. In these respects it was definitely a fruitful program of investigation.

What emerges is that even if one would dispute whether these hypothesized conditions could be called "necessary" or "sufficient", or whether they are the sole relevant conditions or only three among other possible ones, there is a definite and significant relationship between the level of these conditions offered and the degree of positive personality change shown in the patient. An unexpected finding was that low conditions often brought about a worsening of the patient's condition. The research did not establish that this relationship was causative of the change. It did show that these qualities were supplied by the therapist, but that the patient's characteristics had an influence on the degree to which the therapist manifested them; they are a product of the interaction between the two. In brief:

An important chain of events in the process of change emerges from our work. When a relationship possesses the dually determined qualities we have described, then indices of change are evident, or become evident in the client, and an improved inner integration, a reduction in pathological behavior, and an improvement in social adjustment follow. There are gaps and uncertainties in this evidence. Yet the above statement appears justified by the facts. (p. 93)

Finally:

A significant theme of our findings is that much the same qualities of relationship are facilitative for the schizophrenic individual as for the neurotic. What differences there are do not appear major. This would seem to justify an intensive focus on the interpersonal relationship as the most important element in bringing about personality change in any group. It suggests that whether we are dealing with psychotics or normals, delinquents or neurotics, the most essential ingredients for change will be found in the attitudinal qualities of the person-to-person relationship. (p. 92)

Perhaps, for the sake of accuracy, a summary of the findings by Kiesler, Mathieu and Klein who were responsible throughout for the analysis and interpretation of the data might be appropriate to bind up the conclusions of the team.

Most generally, the results of this study suggested that the two therapist conditions variables accurate empathy and patient-perceived congruence (themselves highly interrelated) were associated with the over-all level of experiential involvement that the patient maintained both in therapy and sampling interviews; and that both conditions and experiencing factors were related to various indices of positive personality change and favourable therapeutic outcome. More specifically, these two conditions variables were associated, not only with the average level of patient experiencing in the total therapy interaction, but also with the experiencing at discrete moments in the therapy course.... The specific pattern emerging was that the deeper the level of the therapist's empathic understanding and genuineness with his patient, the more his patient would exhibit a deeper level of self-experiencing and self-exploration at every point of both the therapy and the sampling interviews. This was an intriguing finding. While the correlations for patient-perceived congruence were not quite so pervasive as those for rated accurate empathy, they were sufficiently consistent to indicate that the association of both conditions variables with patient experiencing level was stable and general.

These same therapeutic factors, moreover, were associated consistently with therapeutic outcome.... Most generally, patients receiving high conditions levels showed positive personality change and outcome, while patients with lower conditions showed no change or, in some cases, negative change eventuating in an outcome worse than that observed for no-therapy control patients.

Finally,....patients more involved in the process of self-experiencing

and self-exploration showed not only a marked decrease in schizophrenic behavior as measured by the MMPI, but also a greater likelihood of remaining out of hospital and of showing improvement on various other criteria of constructive change.... Patients described as more successful by various outcome indices tended to move towards deeper levels of self-involvement and self-exploration over the course of therapy. (Rogers (ed.), 1967, 301-302)

Further Research

The completion of the Wisconsin research did not herald the end of enquiry in this area, and both the range of investigation has been extended and the implications for the conduct of therapy and the training of therapists have been more fully investigated. Some idea of the range of studies that have been carried on can be gained from the summaries of Truax and Carkhuff (1964) or of Bergin (1966, 1967) or, better still in Truax and Carkhuff's latest book (1967) that does for their research projects and findings what Rogers' volume did for the Wisconsin Project. Some of the flavour of the sort of projects that have been carried on can be gained in the Research Abstracts listed in Appendix C of Carkhuff and Berenson's Beyond Counseling and Therapy. (1967)

In general, the research has aimed at checking, refining and broadening the enquiry into the original thesis of Rogers. In general, one can say that it has been verified for clients other than schizophrenics: Halkides and Barrett-Lennard had already verified it for counseling-center clients in a University; its validity has been checked for neurotics (Bergin & Solomon, 1963; Truax, Wargo et al., 1966a, 1966b), institutionalized female delinquents (Truax, Wargo & Silber, 1966), secondary school children (Demos, 1964) and college underachievers (Lichter, 1966; Dickenson & Truax,

1966; Martin, Carkhuff & Berenson, 1966).

Originally, Rogers had hoped that therapists of various schools would cooperate in the Wisconsin Project, but in the end, most of the therapists engaged were client-centered, since they alone seemed ready to have their sessions tape-recorded and dissected. Since then, the effectiveness of the core conditions had been shown to underlie the success of psychoanalysts (Truax, Wargo et al, 1966a, 1966b) at the Phipps Psychiatric Clinic at the Johns Hopkins, and of eclectic therapists. They have been shown to have their role to play, too, not only in individual therapy but in group treatment. (Truax, 1961; Truax, Carkhuff & Kodman, 1965).

It is tempting to dwell on the intriguing refinements that have emerged--the relative influence, for instance, of the different facilitating qualities with different types of patient population; or the finding that with neurotic outpatients, the level of empathy and therapist congruence in the first interview depended on the therapist, while the patient influences the degree of nonpossessive warmth manifested, whereas, as the treatment interviews proceeded, the level of warmth became increasingly dependent on the therapist (Truax, Wargo et al., 1966a, 1966b); or Carkhuff and Berenson's manipulation of the level of conditions offered to the patient by the therapist and of the level of cooperation in self-exploration offered by the patient. Suffice it to say that low-functioning therapists found themselves unable to adjust adequately to patients who stopped self-exploration during the interview, and low-level functioning clients deteriorated with any drop in therapist conditions even from a high-functioning therapist, while both high and low-level functioning clients deteriorated

under a low-level functioning therapist.

This brings us back to the original disturbing finding that therapy is for better or for worse; that the relation between the outcome and the degree to which these core conditions are offered would seem to be causal (Truax & Carkhuff, 1965); and that at the heart of the change lies the personality of the therapist and his ability to give himself in an interpersonal relationship with empathy, warmth and genuineness. This has created something of a moral issue on the selection and training of therapists and has introduced a note of urgency into research-training programs and some degree of outspoken criticism of current training methods (e.g., Carkhuff, 1966, 1966a, 1968; Truax & Carkhuff, 1967). If, as the studies suggest, these facilitating conditions are so crucial, it must be asked: can they be taught, or are they a "given" rooted in the personality of certain persons; and, if they can be taught, how?

Can these Conditions be Taught?

Thought, discussion, writing and experimentation have followed, naturally, especially among those who have been most deeply convinced of the reality of the issue. At Kentucky, Arkansas and Massachusetts, Truax and Carkhuff have been seeking to elaborate a training program that would be a logical extension and application of the facts that have emerged from their previous studies.

Two general convictions lie behind their programs:

1. Techniques and academic knowledge are useful but are secondary in therapy. Stress on them, indeed, would seem to be really harmful to some

trainees. Bergin & Solomon (1963) discovered a sobering fact among students they examined: the clients of trainees who had received the highest grades in the academic courses and the practicum tended to deteriorate in functioning; and Carkhuff, Kratochvil & Friel (1968) confirmed these findings. It follows, that if these things are secondary in therapy, they should also be secondary in training programs.

2. If the primary conditions of therapeutic change are provided in (a) an interpersonal relationship, (b) that takes its tone from the empathy, warmth and genuineness of the therapist, then skill in the development of such relationships and in the therapist's ability to manifest such qualities in it must be the main aim of training. Bergin (1967) summed up his reaction to the research that had gone on up to date:

It would seem highly desirable for every therapist and supervisor to pay explicit attention to empathy, warmth, adjustment, experience, and patient-therapist similarity or compatibility. It is not enough simply to believe in these factors; one must study, learn and improve his concrete skills with them as essential elements of a positive therapeutic relationship.

Rogers and other client-centered therapists regard these qualities as attitudinal and behavioral characteristics embedded in the personality. They are human qualities that can be developed in those who have a basic endowment of them already and a flexible personality. They must be developed as human qualities are developed: they are not to be communicated by set exercises or techniques. They are an expression of an attitude to others, an outlook, a way of living and relating, an expression of the self in its active relationship to others, not something extra to be put on like a jacket. Nor are they a stable possession, once acquired to be possessed for

life; they can wane or fade, and need constant, generous effort if they are to be maintained. It is perhaps this difference in attitude to clients as persons to whom self must be given, that helps to explain why non-professional therapists frequently maintain a high level of operation, whereas clinicians not infrequently are less capable of offering this relationship. Perhaps the stress on the academic, on tests and techniques runs the risk of getting them interested in "things" and the system rather than the person and provides a built-in escape route from the cost of encounter and the agony of self-giving. It is much easier to administer and interpret a test than to give oneself. Training is not an automatic panacea: it can help to the development of the requisite attitudes; but that is only the beginning and it is always possible to take refuge in cold impersonality and techniques and cease to be an effective helping person, while remaining an adequate clinician.

Therapy, then, is essentially a personal thing: it is an encounter with this person, endowed with these facilitating qualities, who forms a relationship which makes self-exploration and change possible. It would seem that training is necessary if the capacity to offer these qualities consistently is to be developed. Friends, for instance, can offer them sometimes: but an interesting study (Martin, Carkhuff and Berenson, 1966) indicated that friendship without training is not enough; as Rogers noted (1957):

Usually this (fulfilling of the conditions in friendship) is only momentarily, however, and then empathy falters, the positive regard becomes conditional, or the congruence of the "therapist" friend becomes overlaid by some degree of facade and defensiveness. Thus the therapeutic relationship is seen as a heightening of the constructive

qualities which often exist in part in other relationships, and an extension through time of qualities which in other relationships tend at best to be momentary.

These are natural qualities, then, to be developed in training. It is unlikely that every prospective trainee will have this type of personality or that it will be necessarily bound up with his grade-point average. Hence the vital need to screen candidates for such training in terms of their ability to provide these conditions, and the urgency of a training program built round the stimulation of these facilitating conditions in the trainee.

Truax and Carkhuff's Training Program

For some time now, Carkhuff and Truax have been trying to apply to training the findings of their research, and to turn their research tools into training tools, convinced that they can be of use in the development of these essential conditions.

To date, there have tended to be two approaches to the training of counselors: the didactic-intellectual, with its emphasis on direct teaching, structuring or shaping the thinking and responding of the trainee on the pattern of the teacher's own concept of what makes counseling work; and the experientially-based, in which the teacher provides a free atmosphere in which the trainee can come to know himself more fully, experiment with different approaches and so evolve into a practitioner. For some time, Truax and Carkhuff have been writing about and experimenting with a program integrating both these approaches. The teacher seeks to teach the trainee didactically from his own accumulated research and clinical learnings about

the therapeutic relationship and the conditions that empirical studies have shown to be essential to it. In the conviction that these conditions can be developed in suitable candidates, the trainees would be selected with this in mind and given practice in judging and exercising them. All this is in the context of a learning relationship between teacher and trainees, aimed at providing the trainees with a living model of teachers offering these qualities in a high degree, for the trainees not only to see but to experience. The learning experience, therefore, becomes a quasi-therapeutic one, and in some cases, this has been intensified by adding a small-group experience to the teaching program to enable the trainees to explore themselves in a non-threatening atmosphere and to be open to the personality change that lies at the heart of this concept of training. "The program attempts to use the little time available to effect as great trainee changes as they can on indexes related to counselee and trainee change....Simply stated....(such) programs simply try to prepare people to help people." (Carkhuff, 1968)

In this program, therefore, in so far as teaching of theory is insisted on, it is mainly to help the trainee understand the vital role of these facilitating conditions and gain a real grasp of them, and to give a theoretical background adapted to the type of practitioner aimed at by the course. In a program, for instance, for clinical and counseling graduate students, there was a heavy stress put on intensive reading program and tape-listening experience for the first six weeks. The aim of this was largely to enable the trainees to draw on the experiences of others and to build up a storehouse of therapeutic responses, tactics, and approaches for

imitation. Tape listening, especially, was expected to increase the response repertoire of the beginning counselor. In other programs, for the training of nonprofessional helpers, for instance, the role and nature of the conditions was taught, but very little formal psychology was insisted upon.

Most of the training aimed not at teaching the trainees about counseling, so much as to involve them in an experience that would make them into counselors. To help them to appreciate, assess, and develop these qualities in themselves, the trainees were exposed to tape recorded samples of interviews rated at various levels of these conditions; they were given practice in the use of the empathy, warmth and genuineness scales to enable them to rate recorded excerpts from interviews; they received practice in these qualities -- in empathy, for instance, by listening to recordings of clients' statements and then attempting to formulate responses in terms of the feelings and content of the communication; they role-played; they had their own efforts tape recorded so that they could score them and get an immediate feedback on the development of their own ability to provide the conditions. In all this, the group nature of the learning experience and the high degree of these conditions that they experienced in the actual learning setting from the teachers intensified the experiential nature of the learning method and helped them to grow, above all, in genuineness in such relationships.

The Results

The results of such programs have been highly encouraging. Carkhuff

and Truax (1965) described one of their first efforts on these lines. They mounted two training programs for one semester of 16 weeks, comprising two classes each week of two hours each, plus two hours per week spent by the trainees listening to recorded therapy samples. One group consisted of 12 advanced graduate students in Individual Psychotherapy; the other of 5 volunteer hospital personnel, only one of whom had had a college education and none of whom had a theoretical knowledge of psychology. At the end of the semester, all were tested for the level of the conditions they managed to provide, and these ratings were compared with those of some of the most distinguished professionals in the country--Carl Rogers, Rollo May, etc. The results were certainly stimulating! In the area of patient depth of self-exploration the mean scores of all three groups were approximately equal; while in the three core conditions, though the groups performed consistently in the following order: (a) experienced therapists, (b) graduate students, (c) lay personnel, the first group did not effect significantly better process levels than the second, or the second than the third. The only significant difference was the level of self-congruence of the experienced therapists over the lay therapists.

In other words, in a relatively short time, about 100 hours crushed into four months of training, both graduate students and lay personnel can be brought to function at levels of therapy nearly commensurate with those of experienced therapists.

Since then, there has been impressive confirmation of the effectiveness of experiential training of lay therapists that underlines the

power of courses centered on the core conditions. Carkhuff and Truax, for instance, (1965a) reported the surprising success of psychologically untrained mental-hospital aides as group therapists after only a brief period of instruction. Already Rioch (Rioch et al., 1963) had published an interim report on the extraordinary progress made by the 8 specially selected, bright, educated housewives that she and her team were attempting to train on a rather intensive psychoanalytic model; and Harvey (1964), writing from Australia, described the success they were having there in marriage counseling with nonprofessional workers trained two evenings a week for some 15 months on an experientially-based model. They had been carefully selected for the possession of the basic qualities Rogers had postulated as vital for positive effectiveness, and for the ability to form satisfactory relationships. Their resulting counseling efforts were proving outstanding when compared with those of professionals in the field.

Equally encouraging reports have been appearing on the effectiveness of NDEA Institutes and other short, intensive courses, many of them built round these core conditions and experiential in methodology (e.g. Demos, 1964; Demos & Zawaylif, 1963; Hansen & Barker, 1964; Munger & Johnson, 1960; Webb & Harris, 1963).

More systematic studies (Martin & Carkhuff, 1968; Berenson, Carkhuff & Myrus, 1966) have demonstrated the greater effectiveness of groups trained in this way compared with those trained in the more old-fashioned model; and in the latter study, aimed at training prospective undergraduate dormitory counselors, the fact that the training was focused on the person of the trainee and not his intellect, and sought to bring about personality

change rather than theoretical knowledge about counseling was underlined by incorporation of a Group Therapy experience for the trainees in the total program.

In conclusion, then, it has been shown that by a concentration on the development of these core conditions and the ability to make helpful interpersonal relationships, and that by stressing the experiential rather than the theoretical and seeking to bring about certain personality changes in the trainee, persons with certain basic qualities can be trained in a relatively short time, even without any background in psychology, to produce results in counseling equal to those of the professional.

Summary

The ideas and findings of this section can be summarized in a series of statements:

1. Counseling and psychotherapy are basically interpersonal processes, wherein the effect is produced through an interaction between counselor and client.
2. Counseling, as currently practiced, can be both helpful and harmful.
3. It is possible to identify certain dimensions of the process which if present to a high degree lead to constructive personality change, and if present to a low degree lead to the deterioration of the person seeking help.
4. Three of these conditions that seem essential and to be shared by all effective interpersonal processes, are accurate empathy, nonpossessive warmth and genuineness.

5. The presence and effectiveness of such conditions depends mainly on the counselor.
6. Constructive personality change in the client seems to follow on his degree of self-exploration; and this is a function of the level of the core conditions of empathy, warmth and genuineness offered by the counselor. The personality of the counselor, therefore, especially his ability to form helping relationships in which he can communicate these qualities, is crucial to the counseling relationship.
7. Techniques are valuable, not in themselves, but largely as a means of communicating these qualities in the relationship.
8. These qualities can be developed by training in some people but not in all. This should be taken into account in the selection of counselor trainees.
9. Training programs of an integrated didactic-experiential nature exist and have proved their effectiveness in the training of counselors rich in these qualities.
10. Such training aims more at the shaping of the trainee's personality and personal characteristics than at the inculcation of theoretical knowledge or psychological background. The success of lay counseling programs built on this model suggests that little knowledge of theory or of psychology is really necessary in one who can be trained to function almost as well, if not as well, as a professional counselor.
11. This personality enrichment of the trainee is stimulated by the provision of a learning experience that is quasi-therapeutic and provides him with

a living model of the conditions he is seeking to develop, in the person of the teacher who will be successful only if he communicates a high level of these conditions in his relationship with the trainees.

12. In the context of such a non-threatening learning atmosphere, it has proved possible to train counselors to identify in others and develop in themselves, high degrees of these qualities and to supply them in interpersonal encounters with clients.

Implications for Pastoral Training of Priests

"Such programs simply try to prepare people to help people." (Carkhuff, 1968). The capacity to give effective help is not the monopoly of the psychotherapist or the counselor. Shortly after proposing his thesis, Rogers (1958) went to considerable lengths to explain that these same conditions were crucial to all helping relationships--parent-child, teacher-pupil, physician-patient, administrator-staff, etc. He defined his concept of a helping relationship as one

in which at least one of the parties has the intent of promoting the growth, development, maturity, improved functioning, improved coping with life of the other. The other, in this sense, may be one individual or a group. To put it in another way, a helping relationship might be defined as one in which one of the participants intends that there should come about, in one or both parties, more appreciation of, more expression of, more fundamental use of the latent inner resources of the individual.

This could almost be a footnote commenting on the statement of the Decree on the Ministry and Life of Priests that a priest's work will be fruitless unless he can educate men in the attainment of Christian maturity. (Abbott, 1966, 544). The same point was underlined by Gendlin in his assessment of the social significance of the Wisconsin research:

The essential variables apply to all interpersonal situations of any sort, for example to normal work settings, family life, classroom situations, etc.....

We are beginning to show, as Rogers (1957, 1959) hypothesized, that genuineness, empathy, and unconditional regard are high in successful roommates, teachers and mothers, as well as in group (Truax, 1961) and ward therapists. If you consider what these "conditions" are, you can see why they are applicable to all interpersonal situations: the "conditions" are fundamental attitudes of one person to another. They define a quality possible in any personal interaction.... Given the different behaviors appropriate to different situations, the same fundamental attitudes determine whether there is a therapeutic quality in the interaction. (Rogers, (ed.), 1967, 523)

All this applies specifically to the priest. His role is different from that of the teacher, the mental health aide, the social worker and other helping persons. His contribution is something unique and is fundamentally spiritual. But it is as a human being that he is approached, and whether he can establish communication that will enable an interchange to be effected on either the natural or the supernatural level will be dependent on these human qualities of relating. His is essentially a helping relationship; and as such, if there is validity in the studies and conclusions we have been considering, it must come under the conditions that make all such relationships helpful or harmful.

Helpful or harmful.... This fact must be faced, if these research findings are valid: like the therapist, if he offers only low levels of empathy, warmth and genuineness to those who come to him, not only will the priest not help them, but he will probably leave them worse off than if they had not approached him at all.

There is an urgency, therefore, about trying to help him to cultivate these qualities. This urgency is intensified if we think that the type of priest demanded by today's world is that sketched in Chapter I above.

As a pastor he will make little impact if he is authoritarian or remote, or impersonal or so busy with organization or administration that he has no time for the individual, no capacity to relate to his people in such a way that he does not just hand out packaged solutions but helps them to a more mature and responsible resolution of their problems in the light of the Gospel and the teaching of the Church. This he will have more hope of doing if he can enter into their anxieties, puzzlements and suffering in a relationship of real understanding, caring and warmth, if he can be open, genuine, non-defensive, utterly without facades or masks to shelter behind, strong enough not to be destroyed by the pain of such helping self-giving. The main thing that will be demanded of him will be that he give himself as a person and be capable of genuine interpersonal relationships as the main channel of his pastoral effectiveness. He will not be able to function thus, if there is any validity in these studies, unless he can produce high levels of these basic qualities in his relationships and a high degree of them in his personality.

The experience of training both graduate students and lay therapists has shown that these qualities can be developed in a high degree, even if no effort is made to give a wide psychological background. It should be perfectly possible to use the insights of this research and the training schemes devised from it, to develop in priests-in-training these qualities, even without attempting to train them as counselors. It would be difficult to imagine any training more adapted to the development of the natural, human qualities that lie at the root of all pastoral effectiveness. This could be done by "borrowing", from these training schemes for therapists,

insight, content and method and by concentrating on all the techniques used to build up these qualities in the trainees in an atmosphere in which they could experience them for themselves in their contact with their teacher.

This has serious implications both for the concept of the learning experience in the seminary, and for the criteria for the selection of seminary professors. Seminary education is of a peculiar type. Its aim is not to teach something so much as to train someone. It seeks not just the enlargement of the content of knowledge (as in the teaching of algebra, for instance) but rather the development of a helping person who needs to grow into a warm, understanding, unselfish, outgoing, genuine human being. These attitudes and characteristics must be taught not just by lip service or lectures but by non-verbal communication, by being lived and communicated by those who teach them. They can be caught rather than taught. Most seminary training has been built around secondary factors--the deepening of knowledge and information--rather than the primary ones needed for the flowering of a helping personality: interpersonal relations, empathy, warmth and genuineness. These might not be essential for hermits: for pastors they are so essential that if he has them he will be able to do great good, and if lacks them he will do real harm. The implication is obvious. No seminary can afford too many professors who are experts in their own field of philosophy or theology but shy, inhibited men, uncomfortable with their own feelings and insecure in their interpersonal relations. Such men could only be carried if they were to be counterbalanced by enough who could supply high levels of these qualities in the teaching situation to bring about positive personality change on these lines among the seminarians. There would

would always be the risk that men lacking in these qualities would be really hindering the emergence of the pastoral personality in those they taught, and making it more difficult for their students to develop the ability to form effective helping relationships.

It would seem possible, then, to mount a pastoral course that would seek directly to stimulate the growth of these essential pastoral qualities. Such a course might well involve:

1. A certain understanding of what was being attempted. This would mean:
 - (a) A clear concept of the end-product -- of the personality change aimed at and of the behavioral and attitudinal qualities needed in a "helping person".
 - (b) An understanding of the role of communication and of interpersonal relations in pastoral work.
 - (c) A clear notion of what is meant by accurate empathy, nonpossessive warmth and genuineness.
2. Intensive practice in the development of these qualities. This would include:
 - (a) The actual experience of these qualities in the relationship of the seminarians with the teaching staff, or, at least, with whoever were to teach this pastoral course. This would not only give them a model, but should give them the feel of their effectiveness.
 - (b) Practice in empathy. For this the seminarian would have to learn to listen, to understand content, to pick up the feelings involved, to communicate those feelings and their meaning accurately and sensitively so that the other would know that he was understood.

This would mean the fostering of the capacity to tune in to the other's shifting emotions, to step into his shoes and see things in his way; to be able to get "inside" the other and sense the meaning of what he was feeling--without being overwhelmed by it. As Rogers and Truax put it (Rogers (ed.), 104)

Accurate empathy means that the therapist is completely at home in the universe of the patient. It is a moment-to-moment sensitivity that is in the "here and now", the immediate present. It is the sensing of the client's inner world of private personal meanings "as if" it were the therapist's own, but without ever losing the "as if" quality.... It is of limited use to the individual if the therapist only arrives at this insightful and empathic understanding of the patient's experience as the therapist drives home at night....

The ability and sensitivity required to communicate these inner meanings back to the client in a way that allows these experiences to be "his" is the major part of accurate empathic understanding. To sense the patient's confusion, his fear, his anger or his rage as if it were a feeling you might have (but which you are not currently having) is the essence of the perceptive aspect of accurate empathy. To communicate this perception in language attuned to the patient that allows him more clearly to sense and formulate his confusion, his fear, his rage or anger is the essence of the communicative aspect of accurate empathy. At a high level of accurate empathy the message "I am with you" is unmistakably clear.

- (c) The development of nonpossessive warmth or unconditional positive regard. This can certainly be greatly enhanced by training, and has a considerable effect in human relations. It is rare for a person not to answer warmth with warmth or hostility with hostility. The warmth must be genuinely felt by the giver, or it will seem phony. It must be an expression of genuine caring about the other, a readiness to accept and value him as he is, without judging or condemning him for his weakness or his need. Again to quote Rogers and Truax (ibid., p. 103:

It means not making judgments. It means as much feeling of acceptance of the client's expression of painful, hostile, defensive or abnormal feelings as for his expression of good, positive, mature feelings..... It is a non-possessive caring for the client as a separate person. The client is thus allowed to have his own feelings and his own experiencing....

Thus when the therapist prizes the client, and is searching for the meaning or value of his client's thoughts or behaviors within the client, he does not tend to feel a response of approval or disapproval. He feels an acceptance of what is.....

The therapist is not paternalistic, or sentimental, or superficially social and agreeable. But his deep caring is a necessary ingredient in providing a "safe" context in which the client can come to explore himself and share deeply with another human being.

- (d) The development of the capacity to form relationships in which he will manifest spontaneity, non-defensiveness, openness, genuineness, lack of anxiety. Without such genuineness a trusting relationship can scarcely exist. Rogers (1962) regards it as the most crucial of all the conditions. It demands considerable strength and maturity -- to be on good terms with one's own emotional experience and so to be able to be oneself in the relationship. It means giving oneself, not merely playing a role or doing one's job. It is the opposite of presenting a facade, knowingly or unknowingly. To quote the same authors (ibid., p. 100):

We readily sense this quality of congruence in everyday life. Each of us could name persons who always seem to be operating from behind a front, who are playing a role, who tend to say things that they do not feel. They are exhibiting incongruence. We tend not to reveal ourselves too deeply to such people. On the other hand, each of us knows individuals whom we somehow trust because we sense that they are being what they are in an open and transparent way and that we are dealing with the person himself, not with a polite or professional facade. This is the quality of congruence....

Since this concept is liable to misunderstanding, it may be

well to state some of the things that it does not imply. It does not mean that the therapist burdens his client with the overt expression of all of his feelings. It does not mean that he blurts out impulsively anything which comes to mind. It does not mean that the therapist discloses his total self to his client. It does mean, however, that he does not deny to himself the feelings that he is experiencing, and that he is willing transparently to be any persistent feelings which exist in the relationship and to let these be known to his client if appropriate. It means avoiding the temptation to present a facade or hide behind a mask of professionalism or to adopt a confessional-professional relationship....

I have let myself be a person -- real, imperfect -- in my relationship with him.

- (e) Research studies show that these qualities can be developed by practice. The same program that Truax and Carkhuff (1967) have described in fair detail could be used almost without adaptation for the training of priests in these qualities.
3. In our society, a man with these qualities is regarded as emotionally mature, and such maturity is essential for the type of pastoral competence we have been describing. The experience of small group interaction could help greatly toward this growth in maturity and could well be incorporated into the training. This experience could also be an introduction to a learning technique that offers much scope in pastoral dealings with others.
 4. Some training in counseling techniques -- what Curran (1968) would call "The Skilled Response" as distinct from "The Understanding Heart" on which we have been concentrating so far -- while not absolutely essential, would be invaluable as a means of helping the pastor to communicate more competently, act with greater self-confidence and assurance, and manifest the helping qualities that underlie his pastoral effectiveness. The

primary aim of this training would be not to turn out professional counselors but person-oriented priests.

How many qualities are common to both! In the quotations above, if the word "therapist" were to be changed to "priest" or "pastor", what an excellent description they would afford of the qualities that seem to be envisaged in the image presented by the Documents of Vatican II. What could be more true of the priest than this commentary of Rogers (Rogers (ed.), 1967, 520) on the therapist:

All are, I believe, in agreement that it is when (he) is spontaneous, real, genuine, drawing upon the experience of the moment, that he is most effective. It is when (he) is reacting in a stereotyped, wooden, constrained way, that he is likely to be ineffective. The difficulty in being himself in the moment is amply demonstrated by what are perceived as frequent failures in this respect. Yet all would agree that this spontaneous realness is the goal.

As Carkhuff has pointed out, the aim of training is to give the trainees "a chance to be their most open and flexible facilitative selves" (1966); and one can be truly optimistic, for "the overwhelming preponderance of systematic evidence available today indicates that the primary conditions of effective treatment are conditions which minimally trained non-professional persons can provide." (ibid.)

If such training were provided, the seminarist would find that he was learning most about himself--not acquiring a vocabulary or a technique, but becoming an integrated, mature personality, secure enough to give himself to others. He would be able to profit more by the rest of his training as he would have learned to be comfortable with his own feelings and to accept some degree of friction and confrontation (such as he can hardly hope to avoid completely, but so often would seek to evade) not as a threat

so much as a condition for growth.

Such training would help him to grow in maturity. Maturity can only come through deep and healthy relationships with others; and this training would tend to make the seminary itself into a form of human relations laboratory conducive to growth, and provide a constructive experience in interpersonal relating. As it is, it would not be unduly critical to suggest that the built-in danger of seminary life is the development of emotional immaturity and the protraction of adolescence, so that later, the exposure to the harsh realities of living is often found to be disturbing and unbalancing. This sort of program could supply a useful antidote.

To some degree, too, such a program would encourage the good qualities Wauck (1956) and others have found common in the well-adjusted seminarian: "superior in intelligence, strongly interested in people and ideas, tending to normal anxiety, but with good emotional control", and offer an antidote for his weaknesses; and the seminarian would find that in developing his capacity for openness with others, he was becoming more capable of openness to God. As a distinguished priest-counselor has written (Kennedy, 1963):

It is the frequent comment of priests and seminarians who participate in counseling training that the experience enables them to grasp more fully the meaning of Christian love. They deepen their appreciation of what persons are like and begin to understand the concrete, existential demands of the great commandment of God

--the love, not only of the neighbour, but of God.

Finally, such a program could lead to a new concept of a priest's activities and of the rich possibilities opened up for him as a pastoral priest. In an inspiring article Curran (1968a) has reflected on what this

sort of attitude could mean in terms of the sacrament of Penance. A similar approach from a priest endowed with these gifts of empathy, warmth and genuineness could lead to the communication of the rich meaningfulness available in all the sacraments and simply waiting to be unfolded.

CHAPTER IV

SUMMARY

This thesis springs from the conviction, touched on in the Introduction, that the type of priest envisaged in the insights of the Fathers of the Vatican Council and in such modern writing and existential seeking is essentially one who is person-oriented rather than "thing" oriented, who, even inside the structures of the Institution, will be able to give himself in a more personal way through human relationships that will form the vehicle for the supernatural and a channel for his effectiveness. His service must be primarily personal, the giving of what Curran would call "an understanding heart", rather than impersonal - the providing of schools, services, efficiency -- things. Inside that, he must be warmly human and a helping person.

The body of the study consists of an effort to draw some insights into the training of such a pastoral personality from the experience of modern psychology, which faces a similar problem of training the therapist, the mental health worker, etc.

Two models were sampled: first, three pastoral programs that turn round the development of mental health competence and make considerable use of psychology. The Loyola Project concentrates mainly on mental health training; the other two, notably the recommendations recently made to the Consultative Committee of the British Council of Churches on Theological

Training, go far beyond mere mental health training and are rich in ideas. They are certainly capable of developing a pastoral spirit and pastoral attitudes and competence. On the negative side, there would seem to be certain dangers inherent in such schemes: of adding another rather academic course to an already-overcrowded syllabus, of an over-concentration on psychology, of risking turning the priest into an amateur psychiatrist or social worker rather than a pastor, and, above all, of the priest finding his identity not so much in his essential role as a priest as in a peripheral role as a social worker or a mental health worker.

A second model was sought in the conclusions emerging from various speculative and empirical studies into the nature of the therapeutic relationship and the source of its effectiveness, and the implications of such conclusions for the training of therapists. It was shown that there is good ground for holding that at the heart of the success of therapy lies the interpersonal relationship between therapist and patient, and that the effectiveness of this is dependent largely on the provision by the therapist of an adequate level of accurate empathy, nonpossessive warmth and genuineness. As these same qualities would seem to lie at the heart of other helping relationships, and make them either effective or even damaging if these conditions are not there in a sufficient degree, the ability to provide such conditions would seem to be essential to the pastoral efficacy of the priest.

Can they be taught? An examination of the ideas and practical schemes for training therapists in these qualities that have emerged from

the research on the facilitating conditions first at Wisconsin and then in Kentucky, Arkansas, and elsewhere, and owing much of their effectiveness to Truax and Carkhuff, suggests that they could be adapted easily to the training of priests. There could be an almost direct concentration on the development of these "pastoral" personality characteristics even without the need to teach much extra psychology, or, for that matter, even without attempting to train counselors; and actual training in counseling could add even more to competence by developing added skills in communicating these conditions. A summary of the training scheme was spelled out and some application to priestly training was touched on. It is hoped that a priest given the advantage of such programs during his later seminary years would be more pastoral in his approaches, more personal in his dealings, more understanding, warm, empathic, genuine in his relationships, and more adequately prepared for his role as pastor.

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APPROVAL SHEET

The thesis submitted by Reverend John Gillick, S.J. has been read and approved by the director of the thesis. Furthermore, the final copies have been examined by the director and the signature which appears below verifies the fact that any necessary changes have been incorporated, and that the thesis is now given final approval with reference to content and form.

The thesis is therefore accepted in partial fulfillment of the requirements for the degree of Master of Arts.

Jan. 20, 1969
Date

John M. Wignall
Signature of Adviser