

## Editorial

It is my great pleasure to welcome you to the first issue of the Scottish Journal of Healthcare Chaplaincy. The past few months have been a little like the process of conceiving, carrying and birthing a child! The idea for the journal was originally put forward early in 1998 when James Falconer, the president of the Scottish Association of Chaplains in Healthcare approached me with the idea of developing a journal which would support the needs of the organisation, whilst at the same time reaching more widely to provide a resource for a number of different disciplines, religions and denominations involved in various areas of healthcare. Easy for him to say! Thus the idea was conceived, the editorial board formed and the process of thinking through and putting the journal together initiated. Six months later, after much morning, afternoon and evening sickness, the various component parts were brought together in the 'womb' of my imagination and finally the finished product was born with much screaming and grunting, but equal amounts of joy, fulfilment and hopefulness. Now that the 'baby' has been born, named and appears reasonably healthy, it is my task and my pleasure to ensure that it is properly nurtured and enabled to grow healthily in order that it can fulfil its proper function within the area of healthcare education and practice.

So what is the journal all about? In answering that question we could not do any better than to reflect on Alistair Campbell's simple but powerful definition of pastoral care:

*The overall aim of pastoral care is the aim of ministry as a whole, i. e. to increase love between people and between people and God. Pastoral care is, in essence, surprisingly simple. It has one fundamental aim: To help people to know love both as something to be received and as something to give. (1)*

As a mission statement for a new pastoral journal it would be difficult to find a more fitting statement of intent than Campbell's definition of the pastoral task. Contemporary healthcare is a highly complex and often technologically specialised enterprise which brings together numerous disciplines in the quest for health and healing. Nevertheless, diverse as it may be, there is a common bond which holds the fragmented pieces of the healthcare system together, and that is the shared desire to care, to love, care and enable others to live lives that are marked by those same qualities. The Scottish Journal of Healthcare chaplaincy aims to assist

healthcare chaplains and other care workers in their efforts to love and to care as they strive to provide effective spiritual, religious and pastoral care within the contemporary healthcare setting. The journal will provide a multi-disciplinary forum for the discussion of a wide range of issues relating to healthcare and healthcare chaplaincy in all of its diverse forms. Whilst seeking to embrace and enter into dialogue with other disciplines, its primary focus will be on the practice of healthcare chaplaincy in Scotland and beyond. It will bring together practitioners and academics, ordained and lay people, in a way which will enable chaplains and carers to have invaluable access to new and innovative thinking and practice. As well as being multi-disciplinary, the journal is committed to developing forms of care and professional relationships which are inter-denominational, intercultural and inter-religious.

Whilst acknowledging the importance of all faith traditions, the journal is not bound by any particular one. The journal is intended to provide an open forum within which a variety of different topics pertaining to contemporary healthcare can be discussed openly and sensitively. The success or otherwise of the journal will depend wholly on whether or not people make it their own. The editorial team are very keen to hear from those who feel that they may have a contribution to make to the continuing discussion within healthcare. I would urge people not to be inhibited by the fact that they may not have written for a journal before. Academic excellence is not our primary criteria! The journal desires to strive towards a creative balance between theory and practice and in that way produce a product which will be intellectually stimulating as well as influential on the practice of those reading it. This is illustrated by the content of this first issue which is designed to offer you a taster of what is to come and to show the wide variety of content and style which we hope to include. Derek Murray's paper on grief presents a model of grief that is wrought out at the coalface of the experience of grief. Murray moulds the theoretical with the practical in a way which is both sensitive and informative. Coming from a different perspective, Fred Coutts offers us a glimpse into his diary and reveals a complex and sacrificial process of caring and giving which lies at the heart of chaplaincy and all healthcare practice. Yet whilst Coutts' piece appears simply to tell a story, as we reflect on what is going on within that story, it very soon becomes clear that in fact he is offering us some deep theological and spiritual understandings. As we become immersed in Fred's story we find ourselves wrestling with the deep theological and spiritual questions and mysteries which

lie at the heart of all religious traditions. Narrative theology at its best?

In wrestling with the question of how we might communicate love, value and spirituality to persons who appear to have lost their cognitive faculties, Eric Stoddart offers a fascinating paper on dementia and personhood and develops a model of understanding and care which we would all be wise to think through, irrespective of the particular areas we are currently involved in. In wrestling with the question of how best to care for people with dementia, Stoddart offers some deep insights into the nature of human beings and what it really means to care.

John Swinton and John Murning present two very brief articles which explore the area of learning disability. Both of these pieces, in different ways, illustrate the importance of rethinking what learning disability actually means from the perspective of the experience of families and individuals. Is disability simply a neurological or biological deficit, or, is the real disabling force our distorted value system which places such an emphasis on cognitive functions and intellect, that people lacking in such attributes are needlessly and unjustly forced onto the margins of society?

In exploring the experience of acute psychiatric care, Philippa Baker-Short presents a poetic insight into the myriad of emotions, fears and frus-

trations that mark many people's encounters with the acute psychiatric services. With great sensitivity and awareness, Philippa offers us a glance into the lived experience of psychiatric care and opens our eyes to some hidden dimensions which are fundamental for authentic and appropriate mental healthcare.

Finally Noel Brown who is a chaplain at the University Hospital in Chicago, presents a series of journal abstracts, designed to assist busy chaplains to find their way through the huge mass of pastoral literature which is available within the area of healthcare.

On behalf of the editorial team, I would like to thank you for taking the time to read this journal and we look forward to a long and mutually enlightening time together. In future issues there will be a 'letters to the editor' page, so if you have any thoughts or comments on the journal or any of the articles presented within this issue, please feel free to write to the editor. We would also welcome any books which you feel it might be useful to review for the journal.

*John Swinton*

#### **Endnotes**

Alasdair V Campbell. *Paid to care*. SPCK, London. 1985. page 1