

**PATHS TO WHOLENESS**  
**AN INVESTIGATION IN TERMS OF DISCOURSE ANALYSIS**  
**OF 'DIVINE HEALING' IN THE IONA COMMUNITY**  
**AND ASSOCIATED ACTIVITIES ON IONA.**

BY

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## DECLARATION

I declare that this thesis is all my own composition and constitutes the results of my own research.

W Graham Monteith  
19 September, 1997

## DEDICATION

*This thesis was inspired by all the people of Hoy and Flotta and is dedicated to my son, Peter.*

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The text of the Very Rev'd Lord MacLeod of Fuinary's notes on healing are reproduced in Appendix II by permission of the Trustees of the National Library of Scotland.

## Abstract

### **Paths to Wholeness - An Investigation in Terms of Discourse Analysis of 'Divine Healing' in the Iona Community and Associated Activities on Iona.**

Wholeness and healing tend to be found at the margin of theological and Christian debate which means that the discourse surrounding the topics may be fragmented and various in different groups. The Iona Community has been involved in Divine Healing since 1938 and has developed an ethos of openness which has absorbed other forms of discourse. These have included what are generally thought of as 'New Age' ideas, medical practice and those associated with Rudolf Steiner.

The Iona Community was founded by the Very Rev'd Lord MacLeod of Fuinary in 1938 to rebuild "the ancient monastic buildings of Iona Abbey, the Community has sought ever since the 'rebuilding of common life', bringing together work and worship, prayers and politics, the sacred and the secular." MacLeod based all his activities on the implications of incarnational theology which asserted the sovereignty of God over all of life. Its interest in wholeness and healing is examined in a case study which occupies five chapters. It is then submitted to various forms of discourse and narrative analysis which are outlined in a separate chapter on methodology. The case study of the Iona Community depends upon a review of all the printed material which members have produced on 'Healing and Wholeness'. Much of the material is archival and is unpublished or come from member's responses to an open-ended questionnaire.

The components of the case study comprise 1) a review of the work of George MacLeod in this field; 2) the contribution which the Iona Community has made to the liturgy of healing; 3) the wider scene on the island as others became in alternative forms of healing; 4) an examination of three members work and the way in which their discourse has intermingled with that represented in 3 and in the illustrative schema which is developed to the chapter on methodology; 5) a discourse and narrative analysis of nine members' stories which were responses to an open-ended letter/questionnaire. In the Introduction, it is argued that Incarnational Theology is the inspiration of all the work of the Community, and that the Community's approach to healing is characterised by openness.

The methods of analysis have four components. First, six genres of writing in theology and medicine to illustrate how writers may traverse discourses in an eclectic and open way. The six modes are propositional theology, faith and theology in the community; humanistic practice, traditional (folk) medicine and complementary therapies. Second, the concepts of cohesion and coherence are introduced, with a view to suggesting that it is the inability of different groups to acknowledge each others coherence which leads to major polemical differences which are not always justified. Coherence theory depends upon the early work of Bradley, Joachim and Quine who developed a philosophical approach to the subject. Third, Burke illustrates how different emphases may alter our understanding of the motives behind the rhetoric of healing. Dependence is placed upon A Grammar of Motives which asserts that motives can be illustrated by a method of dramatism. Foucault is used to argue that his method of archaeology may be a useful tool in the analysis of the life-work of Churchpeople.

Fourth, Chapter VII examines in close detail the stories and discourse of nine respondents from the Community. The narrative analysis depends upon Labov and Waletzky and the discourse analysis on Parker and others. The chapter concludes by using a Belgian technique developed by Dasetto, which uses the concept of transformational grammar to show how small units of discourse may be transformed by the way people choose to define their concepts, in this case that of wholeness.

The thesis has a theological conclusion which examines the connection between the narrative theology of Hauerwas and the qualitative analysis of stories which are designed to illustrate the meaning of wholeness. It is concluded that the only way in which wholeness, and to a lesser extent healing, can be defined is through experience and praxis. In an atmosphere of openness and a lack of demand for the miraculous, a cogent body of material has been developed by the Iona Community and sustained for fifty years whereas other healing movements have failed because of their single element component. The Church may learn from the openness of the Iona Community and begin to seek to avoid condemnations based on too narrow a discourse.

## Acknowledgements

I should like to thank the Board of Ministry of the Church of Scotland for making it possible for me to undertake this project. The prospect of retiral at such an early age was frightening without some aim which I have had for the last three years.

I am indebted to my supervisors and advisers who have offered encouragement at all times. Dr David Lyall and Professor Duncan Forrester have helped to formulate ideas and have offered advice on structure. They have also been aware of the physical difficulties of access which New College poses to the disabled student. The advice of Dr Steve Tilley of the Department of Nursing Studies has been invaluable in expanding my knowledge of discourse and narrative analysis. I was also allowed to sit in on an honours course in sociology of language run by Dr Stanley Raffel of the Department of Sociology. I have found it stimulating to combine theology with sociology after so many years away from both disciplines. I must also thank Steven Sutcliffe of the Open University for his stimulating advice on the 'New Age' phenomenon in Scotland.

My greatest debt of gratitude must go to those who have made the whole exercise possible by their physical help, stimulation and companionship. First, the Rev'd Deryck Collingwood came to my rescue when I needed help with typing but he also suffered with me as we both grappled with new computer technology in my first term. His inside knowledge of the Iona Community was a valuable added bonus.

When I was given the opportunity to employ another assistant, I took on Alex Carter who has exceeded all expectations. His interest in the thesis has far exceeded the call of duty of someone with no links with theology but with the precise mind of a mathematician. Any compliments about the layout and graphics of this thesis must be addressed entirely to him, mainly in translating my diagrammatic ideas into graphics. Most of all, I value his friendship and the insights into drama which he has shared with me. I am indebted to Peter Gossip for proof-reading the final draft with a typically school-masterly eye.

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Shelagh Earl took over in June and has proved a worthy successor. I am fortunate in having Croft Home Care Ltd to provide interesting and caring assistants when Norrie and Shelagh have not been available.

To any others I have omitted by name, my heartfelt thanks.

W Graham Monteith

## Overview

This thesis is a case study of Divine Healing within the Iona Community and other groups that are associated with Iona. The tiny island has become famous as the settlement of St Columba who died in 597 AD and the subsequent re-building of the Medieval monastery by the Iona Community under the leadership of the Rev'd George MacLeod. As a result of publicity, Iona has also attracted many who can loosely be said 'New Age' in outlook. These people variously believe in ley lines, the renaissance of an interest in Celts and Druids and personal transformation through alternative healing techniques. It is this latter characteristic which links with the Iona Community as a common, yet qualitatively different, concern. The Iona Community is essentially concerned with peace and justice, but has held healing services since 1938.

There is also a theoretical framework to the case study which will be pursued in an effort to support the thesis that healing and wholeness provides an opportunity to examine the structure of the theology surrounding this subject in order to eliminate many of the misunderstandings between groups, and about the ministry of healing and the search for wholeness. The method chosen as a tool for discussing the findings of the case study is going to be discourse and narrative analysis allied with a theory of coherence. All three are going to be discussed in Chapter II and then will be refined in the respective chapters, most importantly in Chapter VIII, *Analytical Illustrations*. The major advantage of discourse analysis is that it provides qualitative analysis rather than forcing the researcher to seek quantitative data. The only original empirical data appears in Chapter VII, *Wholeness - Members' Stories*, in which members' accounts were solicited as a way of discovering their understanding of wholeness. The other chapters depend upon the written material of the members being studied.

The case study spans five chapters and follows a certain logic. It would be impossible to envisage a study of the Iona Community without great emphasis being placed on the influence of George MacLeod and his overall effect on its development.

A snapshot study of the community today could exclude him, but it is doubtful whether a true theological picture of the community could be produced. The case study undertaken here begins with George MacLeod by looking in Chapter I at his understanding of incarnational theology and then a complete Chapter is devoted to his contribution to Divine Healing. Since we are dealing with pamphlets, notes and addresses, it is always necessary to look at the material upon which he and others may have drawn. This emphasis on background material takes up a lot of space in the case study.

The thesis proceeds by describing the effect of the liturgy as the main evidence of an ambience on Iona which continues to make members and visitors amenable to exposure and discussion of healing and wholeness. This fourth chapter together with the next describes what happens on the island and logically leads on to the main empirical work of firstly describing the work of three selected members and then the analysis of members' stories which were written exclusively for this thesis.

The concluding chapter is more theological in content than some of the preceding chapters. At no point do we attempt to offer a theology of healing or of wholeness; that is not our intention. However, the conclusion does suggest that the understanding of healing and wholeness on the part of seekers and healers alike stems from their narratives that reflect their life situations. At the outset of my research, I was exercised by the lack of precise definitions of wholeness but as a result of research, I now believe that narrative is the only sure method of describing feelings of wholeness such as many have experienced either on Iona or through its inspiration.

This overview has been designed to show the structure of the thesis and to offer an indication of the conclusion. If the thesis is to have any value other than documentation, it must show that people have the ability to draw their own symbols on the ground of experience and then to live them in the marketplace of modern religious pluralism.

## Academic Literature

Iona's Celtic religious settlement has spawned many academic works in disciplines as diverse as archaeology to ethnography, but in the context of this thesis the Iona Community is only mentioned at length in two PhD projects. The other major reference is in the biography of George MacLeod by Ferguson. Ferguson's biography of MacLeod is perhaps the most authoritative description of the central figure, yet it mentions healing only in passing. E. Mairi MacArthur has published her PhD thesis<sup>1</sup> as *Columba's Island - Iona from Past to Present*, in which she devotes a chapter to the Iona Community<sup>2</sup>. This chapter deals almost exclusively with the Community's relationship with the islanders, particularly in the early years. Finally, Gollither completed a PhD thesis in 1989, which studied nine "pilgrims" who were in the Abbey during his visit to the island. His thesis is the only one extant on the Iona Community, and it is written from an ethnographical point of view as a social anthropologist. From the perspective of this thesis, it is flawed in two respects. Most of his other work deals openly with 'New Age' phenomena (see page 136), and he appears to accord almost 'New Age' status to the 'pilgrims' whom he interviews. Second there is very little theological content and his assertion that the Iona Community is chiefly inspired by Bonhoeffer and Gutierrez is both romantic, in the sense that it suits his thesis to use the political comment of liberation theology, and unsupported. His research seeks to establish "how do pilgrims explain their experience?"<sup>3</sup> His conclusions are largely consistent with the 'conventional wisdom' of members', deducing that there are three types of pilgrims: 1) those with a lifestyle oriented motivation; 2) those with a "state of consciousness orientation"; and 3) those with a "personality orientation"<sup>4</sup>. These three types usually come up in discussion of volunteers and it is recognised amongst experienced members that the Abbey occasionally attracts the third type as volunteers who actually need

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<sup>1</sup> MacArthur, E. M., *The Island of Iona: Aspects of its social and economic history from 1750 to 1915*, unpublished PhD thesis, Edinburgh University, 1989.

<sup>2</sup> MacArthur, [E.] M., *Columba's Island - Iona from Past to Present*, EUP, Edinburgh, 1995, ch. 14.

<sup>3</sup> Gollither, J. M., *Pilgrimage as Quest and Protest on the Isle of Iona, Scotland*, unpublished PhD. Thesis, SUNY at Buffalo, 1989, p79.

<sup>4</sup> *ibid*, p170.

considerable counselling during their stay at the Abbey. He devotes one page to the healing service, but does not discuss the nature of healing, or the liturgy of the service. This is undertaken in a review of the entire week's programme at the Abbey.

### **A note about terminology**

George MacLeod chose to use the term 'Divine Healing'. There is little evidence of it being used now, but it is easier to use the term which he chose. It is perhaps fair to suggest that he should have been aware that Divine Healing was not actually favoured by some official bodies such as the Archbishops' Commission of the Church of England which commenced work in 1953<sup>5</sup>. Their point was, and is, that all healing is divinely ordained and that there should be no implication of a special ecclesiastical activity. Such activity as the Church undertakes is part of its commission from Jesus and does not require the epithet 'divine'.

### **A note about Gender**

It is historical fact that the Iona Community was dominated by George MacLeod and his vision to train men, mainly for the ministry, until his retirement in 1967. As a result it is impossible to use inclusive language meaningfully when dealing with this period. Thereafter, any shortcomings are my own.

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<sup>5</sup> Archbishops' Commission, The Church's Ministry of Healing, Church Information Board, London, 1958, p13.

## Laying the Foundations

### A Theology of Openness in the Iona Community

In a society which is marked throughout by pluralism, the church must begin to recognise and tolerate individuals' approaches to a common problem. As one of the authors, who will be used in later analysis, pleads at the start of one of his books:-

...the more strident our journalists, politicians, and alas! even our churchmen become, the more convinced we are that books should be written for tolerance and contemplation.<sup>1</sup>

It is doubtful whether the latter quality will be present in this work, but it is a sincere contention that the established churches will fail if they cannot begin to understand wider discourses and to offer dialogue with them. The scene can only be set by means of a generalisation which will be justified later. Many ministers or laypeople within the Church who have an interest in both healing and alternative medicine have at some time found the latter condemned as 'pagan', 'anti-Christian', or worst of all, 'satanic'.

A personal anecdote will suffice:-

On a very stormy January week in 1992, the Board of Education of the Church of Scotland held an in-service training course for the Presbytery of Orkney. In the course of discussion after one session an evangelical colleague said, "You [referring to me] have a problem on Hoy. There is anti-Christian healing taking place". This was totally foreign to me, but after some inquiry discovered that he was referring to a woman who was practising Shiatsu, and running courses on the subject. I had in fact attended twenty five hours worth of teaching, and was receiving personal treatment at least once a fortnight at a cost of ten pounds a session. Once I realised what we were discussing I tried to defend this Japanese treatment by arguing that it was governed by different categories and that these posed no threat to Christianity. To return the debate to our own culture, I pointed out that medicine had moved from the category of humors in Medieval times, to the excesses of biomedicine in the present day, and that no-one would condemn blood-letting in that period although it is considered inappropriate now.

Why are Christian groups so prone to argue about matters which are not of the substance of the faith? Of course there are arguments of more substantial natures, but where beliefs involve praxis there appears to be much more latitude for arguments and divisions to form irreconcilably. This thesis examines how these divisions may be avoided and suggests how groups may begin to understand their respective

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<sup>1</sup> Burke, K, A Rhetoric of Motives, Prentice-Hall, New York, 1950, p.xv.

discourses, be it about wholeness and healing, politics or social welfare. Our concern is primarily about the discourse of wholeness and healing, rather than healing as such, and the consequent narratives and how one group, the Iona Community, has sustained a debate and praxis over almost a fifty year period.

In essence what happens is that different sectors of the Christian community have different controlling priorities and aims which are a reflection of their more fundamental beliefs.

The case study of Divine Healing in the Iona Community and on the Island itself spans over five chapters. This chapter is an attempt to establish the case for studying Iona and to deal with Incarnational Theology, which was the hall-mark of the theology of the Very Revd Lord MacLeod of Fuinary DD., to give him his full title for the first and only time in our text. It will be hard for anyone to deny that he was the major influence on the formation of the Community's ethos and that his thinking has dominated that ethos over fifty years. It is therefore reasonable to say that his understanding of Incarnational Theology provides a meta-narrative for the whole activity of Divine Healing within the Iona Community. It is thus that two chapters are almost entirely devoted to him.

This thesis proposes to show that certain Christian beliefs are best formulated by experience and narrative based upon biographical factors in the lives of those who formulate such doctrine. Healing and wholeness have been chosen because they tend to appear at the margins of Christian practice and are seldom expressed in a traditional doctrinal way which would meet with, if not universal approval, at least with sufficient meaning to motivate some. *The closer one travels to the margins of Christianity, the more one encounters activities which belong to small epistemic communities which exhibit behaviour which is not shared by the whole Church but by small groups who often misunderstand each other.* Issues like politics, justice and gay rights might also be issues at the margins of congregational beliefs and involvement, but these differ from healing and wholeness in that they do not have the warrant of the gospel miracles which are such a prominent feature of the life of Jesus. Any popular reaction to these miracles is likely to demand some view on healing but

the variety of answers which are available may well divide believers as it will be shown that it divides theologians.

At the margins of belief, there is potentially a greater opportunity for experimentation and adventure in investigating the symbols which are likely to carry Christianity into the new millennium. At these same margins, there is also the potential to choose strategies that will stultify growth and lead to fundamentalism which will not entertain progress in the nature of belief. It will be shown that the Iona Community has developed a belief in wholeness and healing over nearly fifty years and that their understanding of the issues has grown and evolved over that time.

Further, it will be shown that the progressive movement within the Iona Community has been sustained by the theological foundations of its leader, George MacLeod, which will be characterised as Incarnational Theology which has led to an openness to all issues surrounding mankind; and by the encouragement of reflective theology on the part of members who have often found solutions in their work or lives which have become narratives of wholeness and healing. These disclosures will assume great importance in the latter half of this thesis.

Biographical factors manifest their influence in three distinct ways throughout this thesis. The object in revealing such influence is to show how various members of the Iona Community have come to be involved in building narratives around healing and wholeness. First, historical circumstances may impinge upon people's intentions such as the outbreak of war in 1939 (see Chapter VI). Second, biographical happenings in one's experience may influence how someone writes; Ian Cowie provides a good example of someone who speaks of 'New Age' from personal involvement. Last, people may use biographical experiences to construct their understanding of wholeness in eloquent narratives which explain the concept better than any hermeneutic understanding. Their resultant narratives become the equivalent of theological explanations couched in narrative.

There are three issues that occur at various points which are tangential to the central thesis but yet are important for a number of different reasons. The issues concern the

lay treatment of physics, the narratives which surround wholeness and disability, and aspects of post-modernism. First, there is evidence that healers have been concerned with physics for a long number of years. Their main interest has been in energy fields and, at a later stage with the implications of quantum mechanics as outlined by populists such as Capra and these views cannot be ignored. More importantly, George MacLeod based his campaign against nuclear armaments on a few alleged phrases of Einstein which appear to accord with certain sayings of Jesus and these certainly disposed him to look at energies in the context of healing. Perhaps Zohar and Marshall are slightly more modest in claiming that quantum mechanics only imposes a metaphoric way of looking at society in an otherwise extravagant book<sup>2</sup>.

Second, I have a personal interest in disability and have long been appalled by the temptation on the part of Christians to sentimentalise the "heroism" of the disabled. Since this piece of research has uncovered narratives which deal with disabled people and their brokenness and subsequent triumph, it seems appropriate that some space should be given to looking at the stereotypical narrative which is often quite offensive to disabled people. We have little desire to be instruments of the illustrative needs of superficial Christian thought.

Third, post-modernism has crept into this thesis in two ways which compel analysis. Firstly, the Conclusion will deal with a paper on post-modernism by Peter Millar which was neither solicited nor was considered in early planning. Secondly, there is ample evidence to show that discourse and narrative analysis has been influenced by many of the thinkers of post-modernism. It therefore became inevitable that the subject would have to be discussed at some point.

### **Why the Iona Community?**

The Iona Community has been chosen for this thesis because it exhibits characteristics of 'openness' which are not present in many institutions as a prime attribute; and shows how Incarnational Theology encourages a spirit of inquiry into all aspects of human life, and a receptiveness to innovative understandings of the human condition.

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<sup>2</sup> Zohar & Marshall, D. & I., The Quantum Society, Flamingo, London, 1993, ch.4.

This applies to healing and wholeness as much as to poverty or the arms race. Pattison suggests that, with few exceptions, healing ministries have “evolved in the present century ..... as anti-theological or even as an anti-theology.”<sup>3</sup> He has in mind the healing revivals of the 1950s in America<sup>4</sup> and the power ministry of Wimber. This speculation may not all be true, but the Divine Healing of the Iona Community grew out of theological reflection at about the same time. This makes the case study of the Iona Community interesting.

The Iona Community is not a Church or an institution which demands rigid conformity. It has a Rule which is under review but healing and wholeness are not directly referred to in its text. It calls for a degree of spirituality, openness to a communal lifestyle and a political commitment which has usually been to the left. Over the years, the membership of around 200 has lost its clerical majority. Each member is expected to work out his or her commitment normally in a project involving change.

Into this climate of support and stimulus, many have now entered with a medical background. ‘Wholeness’ currently appears as a topic for morning prayer on the twentieth day of the month, and the Iona Community’s activities are alluded to on the fifth day thus, “*The Church’s ministry of Healing; the Iona Prayer Circle and Prayer Groups*”. Part of this milieu involves a weekly exposure to a service which offers healing and ‘wholeness’ to all and, in particular, to those who go forward for the laying on of hands. The Community thus offers an open-ended milieu in which individuals may develop an attitude to ‘wholeness’.

It is superfluous to describe the history of the Iona Community or the life of George MacLeod (Lord MacLeod of Fuinary) who founded the Iona Community in 1938 demitting his Church of Scotland charge in the slums of Govan in Glasgow. Both have been adequately dealt with by the Rev’d Ron Ferguson in *George MacLeod*, and

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<sup>3</sup> Pattison, S., *Alive and Kicking: Towards a Practical Theology of Illness and Healing*, SCM, London, 1989, p62.

<sup>4</sup> For a study of these revivals see Harrell, D. E., *All Things Are Possible*, Indiana U. P., Bloomington, 1975

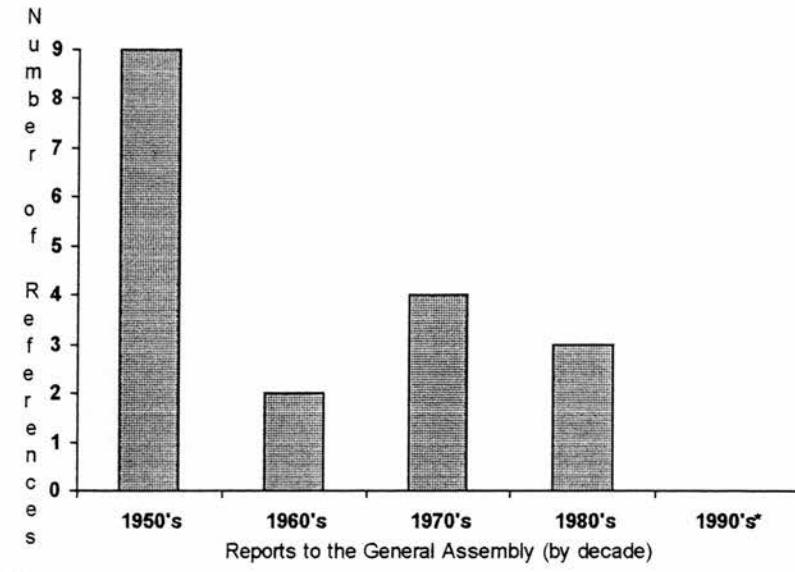
the former in *Chasing the Wild Goose*. The Rev'd Dr Ralph A. Morton has also written personal reflections on the early history of the Community. It has been impossible to write about George MacLeod without borrowing heavily from Ferguson, but in actual fact his biography has very few references to Divine Healing and few more about George MacLeod's pastoral skills. The Iona Community became associated with the Church of Scotland in 1951 after a case in the General Assembly which questioned whether MacLeod could hold ministerial status whilst working for the Community. The resolution of the case came when the Iona Community Board was established in 1951, and it has reported every year since to the General Assembly. George MacLeod explained the case and its outcome thus:-

At the General Assembly of the Church of Scotland in 1951, The Iona Community was integrated with the National Church. It was the result of the unanimous report of an Assembly Committee which had deliberated for two years since 1949, when the Church, in its wisdom - and a little to its own confusion - had decided that The Iona Community was a private Society owing no allegiance to any ecclesiastical system. Confusion: because all missions since its inception had been conducted by members of the Community who were members of the Church of Scotland in Church of Scotland Churches, and always by permission of the Parish Minister. .... And The Iona Community is now responsible to the General Assembly through a Board, of which the Leader of The Iona Community is Convenor. The Board further consists of 14 persons chosen by the Community (all ministers or members of the Church of Scotland, as the earlier Sponsors had been) and 10 persons chosen by the Assembly.<sup>5</sup>

After this case the Community seems to have become self-consciously part of the Church of Scotland, concentrating on Parish mission and other such ecclesiastical matters. Other studies have shown the Community's influence on Church Extension and African policy, notably in Malawi. The Board's reports are the most reliable way of measuring the public commitment to Divine Healing. Figure 1 shows how often the matter was reported to the Assembly, which can be compared with figure 2 which shows the degree of internal interest as measured by references in *The Coracle*, the official organ of the Iona Community.

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<sup>5</sup> George MacLeod, Editorial, *The Coracle*, nos. 20 & 21(combined issue), 1951, p1.

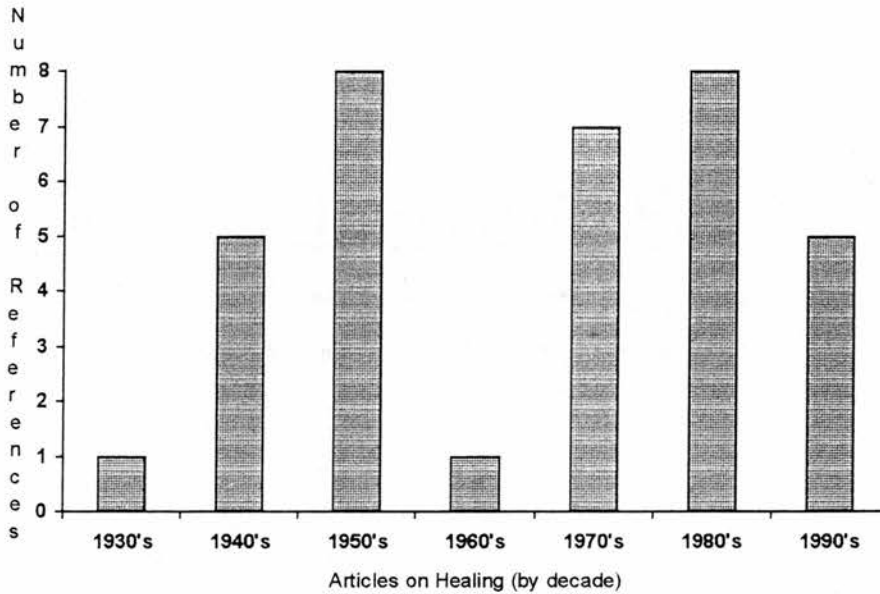


\*To date no references appear in the current decade

Source<sup>6</sup>

**Figure 1 - References to Healing in Reports to the General Assembly**

**Figure 2 - References To Healing in The Coracle**



These figures exclude dairy intimations, events and conferences.

It is apparent from these charts that there has been a consistent commitment to Divine Healing throughout the period in question. This finding contradicts the impressions of people like Ian Cowie, who believes that the interest in healing has declined

<sup>6</sup> Most of the eighties and nineties are given over to peace issues, poverty and inner-city issues.

dramatically. The Board set the scene for the work of Divine Healing in its Report to the General Assembly (the Blue Book) in 1958. It is probable that the report quoted below exaggerates slightly but it does reflect the desired public perception of the Iona Community's concern for healing and wholeness:-

Divine Healing has now come to be an accepted concern of the Community. There is scarcely a parish whose minister is a Community member where there has not been some recovered emphasis on divine healing. Whether through prayers for the healing of the sick, mentioned by name in public worship or by special services in smaller groups. In Iona it has for some years been the custom to have a service of the Laying on of Hands each Wednesday after the service of prayer for the sick. Last summer a significant change was made in the conduct of this service. Instead of the officiating minister alone laying his hands on those who came forward, the congregation now gathers round him and two or three of those who stand nearest lay their hands with his on those who have come forward. This full sharing of the praying group in the healing office is of vital importance, both for those who are sick and those who pray.<sup>7</sup>

When the Church of Scotland established its own Committee on health and healing in the late 1970's, it had four members of the Iona Community on it,<sup>8</sup> and the Community showed an anxiety to make the link between the 'lead' of the Community and the decisions of the Church of Scotland in 1980:-

So great has been the demand upon the resources of the Abbey for this ministry that it was decided to ask those who sought healing for their friends to consider setting up groups at the local level to undertake this ministry. To date fourteen groups have emerged in different parts of the country, who pray for and visit the sick and thus share with the ministry and in the pastoral care of the people. *It is of interest to note that these groups have emerged in the year in which the Church has remitted to a special committee on healing the task of advising the Church on action relating to the healing ministry.* [Italics added]<sup>9</sup>

What begins to emerge is the extent of the influence the 'Divine Healing' practices of the Iona Community have had upon the Church of Scotland, which will be further explored when hymnology and liturgy are discussed in Chapter IV. It must be borne in mind throughout that the Iona Community was conceived as an 'experiment in Christian living', and much has therefore been unsystematic and erratic. The Iona Community is not famous for its Divine Healing and nor should it be. Many of its

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<sup>7</sup> Iona Community Board, Reports to the General Assembly of the Church of Scotland, Edinburgh, 1958, p847.

<sup>8</sup> The Reverends Graeme Brown, Ian Cowie, Stewart McGregor and Graham Monteith.

<sup>9</sup> Iona Community Board, Reports to the General Assembly of the Church of Scotland, Edinburgh, 1980, p216.

members would regard its healing activities as peripheral to the central political issues of the Community. Yet, it is worth studying because those activities are undertaken in a spirit of openness which embraces many expressions of holistic thinking. The mainstream healing services appear, particularly in Scotland, to fall between the Iona Community's approach and the closed system of 'power' healing which could prove so alienating to many. By seeking a middle way, the Church might advance to a fresh understanding of many other positions, both religious and secular.

Nearly all of the material on George MacLeod can be found in his Papers in the National Library of Scotland which include Iona Community documents. They consist of not only letters and manuscripts but also press cuttings of assorted articles and Iona Community pamphlets which seem to have been mislaid elsewhere. In the case of Ralph Morton, his contribution will simply be extracted from his books which, in this field, are of dubious value, although he helped to build the foundations on Incarnational Theology.

In the case of other members, some have publications (e.g., I. Cowie, C. Finlayson and I. Reid), whilst others have been interviewed by letter or personally. Back numbers of *The Coracle* are often the major source as the official, yet editorially independent, organ of the Iona Community. When members have produced or collaborated on material independent of the Community, reference will be made to these texts.

### **Theological Openness**

The Iona Community attracts and fosters individualism and inquiry set within a collective life-style. This is not to suggest that 'openness' can only exist within a 'broad church', but it is unusual to find an entire institution characterised by such a quality. This chapter will examine four aspects of 'openness', some will relate specifically to healing, others lay the foundation for what will follow. First, there must be a spirit of inquiry. Second, there must be a general theology which drives enquiry in several fields at one time, and in the case of the Iona Community, that foundation stone is Incarnational Theology. Third, those concerned with healing and

wholeness must be *au fait* with various types of medical discourse in a theological setting. Last, there must be an understanding of wholeness and the variety of its meaning.

It would be destructive and counter-productive to start trading labels to describe the Iona Community: be it evangelical or liberal theologically, left or right politically. Probably a majority would describe themselves as left-wing, and very few would wish to be called other than liberal. It is more advisable to seek a flexible characterisation which allows views to speak for themselves whilst advancing the argument. The term which has been chosen to describe the subjects of this study is 'openness', which it is intended to show is the ability to combine several genres of writing into a distinctive approach to a subject which tends towards eclecticism. Thus matters may be discussed in ways which combine different elements of discourse in a constructive manner; closed discourse tends to be guided by a single principle. Take, for example, the theology of *apartheid*: one guiding principle; one disastrous outcome. Contrast with an eclectic theology of race, and the outcome is multi-faceted. Horton points out the problem of 'single alternative dilemma' which allows one to consider certain primitive behaviour rational provided there is no other alternative, but he would argue that the rationality subsides when there is an alternative which could and ought to be weighed against the other. The ability to balance alternatives is a sign of openness.<sup>10</sup> So it is with healing and wholeness: based on one principle, a very narrow view of health results; open it to many fields as in the Iona Community and creative opportunities follow. A specific example from a popular religious book on 'New Age' medicine might indicate a closed system more specifically. Reisser, Reisser & Weldon in a book which condemns most holistic therapies in California and singles out Chinese medicine for especial condemnation as anti-Christian:-

In essence, Chinese medicine is providing a way for people (*including many Christians who accept Scripture as authoritative* [italics added]) to act like mystics without realising it and perhaps to become mystics.

As with so many other Eastern imports (such as meditation or the martial arts), the transformation of thinking comes along with a simple technique for achieving some other purpose, such as relaxation or feeling more energetic. Overall there is

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<sup>10</sup> Horton, R., *African Traditional Thought and Western Science - From Tradition to Science*, in Wilson, B. R., *Rationality*, *op cit*.

a woeful lack of discernment in this area, both in the secular and the Christian world.<sup>11</sup>

The italicised parenthesis illustrates how one guiding principle can alter a perception of therapies which, as we shall see are often quite acceptable to members of the Iona Community. English enumerates four categories of antagonists towards 'New Age' thinking and therapy, the second of which are "those of Evangelical, often Millennialist, point of view who are severely denigrating towards the New Age movement." He goes on to suggest that such writers develop theories of the anti-Christ, or even demonic inspiration, about 'New Age' thinking<sup>12</sup>.

Openness thrives on inquiry which is a birthmark of the Iona Community. George MacLeod used one of two similes in most accounts of its purpose. First, he likened it to an experiment, a "Laboratory for Living" as he explained in *The Christian Century* in January, 1947.<sup>13</sup> Second, he often compared the Community to 'an advanced scout patrol' in the Boer War sending back information to the main army - in this case, the Church.

George MacLeod could also boast the backing and sponsorship of some very inquiring minds:-

**Table 1 - Original Sponsors of the Iona Community**

Very Rev. John White, D.D.	Glasgow
Principal David Cairns, D.D.	Edinburgh
Very Rev. Harry Millar, D.D.	St. Andrews
Very Rev. Charles Warr, D.D.	Edinburgh
Professor John Baillie, D.D.	Edinburgh
Professor A. Main, D.D.	Glasgow
Professor A. C. Kennedy,	Aberdeen
Professor Donald Baillie, D.D.	St Andrews
Rev. A. C. Craig, D.D.	Glasgow
Rev J. S. Stewart	Edinburgh
Sir D. Y. Cameron, RA.	Kippen
Dr. David Russell	Fife
Sir Iain Colquhoun, Bt. of Luss	
Rev. Adam Fyfe Findlay, D.D.	Aberdeen
Rev. J Arnot Hamilton	Dalkeith

<sup>11</sup> Reisser, Reisser & Weldon, P.C., T.K., J.W, *New Age Medicine*, IVP, Chattanooga, 1987, p52.

<sup>12</sup> English, B. D., *The Challenge of the New Age to Christian Theology and Life*, EU PhD., unpublished, 1994, p27.

<sup>13</sup> MacLeod, G. F., *The Idea of Iona*, in *The Christian Century*, USA, January 22<sup>nd</sup> 1947, pp.108-110, subheading "A 'Laboratory of Living'".

After the Govan Case in 1948, the General Assembly of the Church of Scotland began working towards the formation of the Iona Community Board in 1951 with equal numbers of nominees from the Assembly and from the Iona Community replacing the Sponsors. It is arguable that one result was a drop in the calibre of intellectual input. What in fact happened was that the Community lost control of half of the nominees and the Assembly chose not to nominate such an illustrious body of intellectuals. There was another reason which is revealed in reports in *The Coracle* for the following five years: the Iona Community became much more consciously a wing of the Church of Scotland. It became interested mainly in mission, and in particular placing members in Church Extension charges throughout Scotland. The Sponsors were a brilliant assemblage by George MacLeod and many had been associated through the Iona Fellowship since 1928 and some of their names will recur in the chapter on George MacLeod. Some also took part in Student Retreats.

Further exploration of 'openness' must now trace two separate lines of enquiry. First, what characteristics were found in the general theology of the leadership which lead to a broad interest in healing? Second, how did attitudes to health, healing and wholeness take such a broad concern? By leadership is meant George MacLeod, Ralph Morton and other leaders in more modern times. At present, the Iona Community is deeply concerned about its structure and the Rule, and there is justification in regarding the work of the aforementioned as representing a 'Golden Age' of theology.

### **Theological Foundations**

There are two components to George MacLeod's theology, not directly referring to healing, which render it open to a healing ministry. The Sovereignty of God: God is at 'the Hub of all life'.<sup>14</sup> Throughout his preaching, he would use phrases like recitatives to heighten the drama. A few pages later:-

..... there is no way through but the long one of recreating consciously in every soul a desire for the Recrowning of our Sovereign God, *over all aspects of life.* [italics added]<sup>15</sup>

<sup>14</sup> MacLeod, G. F., *Only One Way Left*, Iona Community, Glasgow, 1954, p5f.

<sup>15</sup> *ibid*, p8.

When it comes to prayer the definitive anthology is called *The Whole Earth Shall Cry GLORY*. It does George MacLeod little justice to try and separate indications of Incarnational Theology from the sovereignty of God. The two are intermingled in such a way that most of the prayers are Christocentric and a great many in this book are drawn from the seasons of Advent and Christmas. Christ is constantly reforming us and equipping us for the continued process of incarnation.<sup>16</sup>

Next and vitally more important, Incarnational Theology was most forcibly expressed in 1942 in *We Shall Re-Build*. To introduce Incarnational Theology he invariably quoted the now famous bit of vandalism which had removed the 'E' from a stained glass window which now proclaimed:-

#### GLORY TO GOD IN THE HIGH ST

MacLeod appears to have enjoyed preaching during Advent and Christmas and, of course, enjoyed the centrality of a child born in Bethlehem amidst poverty and political upheaval, yet, born the Messiah.<sup>17</sup>

..... by taking on our flesh in Bethlehem of Judæa, in the reign of Tiberias Cæsar, from that moment challenges the rightness of any child being born in untoward surroundings. The physical becomes the only arena for the display of holiness  
.....<sup>18</sup>

Any theology must arise out of Christ's involvement in the market-place mingling with Pharisees, prostitutes and tax-collectors in the course of his ministry. George MacLeod's programme for renewal tended to be minister-centred; but members of the Community would seek revival through a sacramental church and involvement in parish community affairs, politics and, even, Divine Healing. It anticipated no easy revival and sought no restoration of the *status quo*. Christ's work was to be incarnated in every sphere of life. Captions on the frontispiece read:

To work is to pray; to pray is to work

<sup>16</sup> MacLeod, G. F., *The Whole Earth Shall Cry GLORY*, Wild Goose, Glasgow, 1985.

<sup>17</sup> MacLeod, G. F., 1. *What is the Real Meaning behind Christmas?*, *Can You Get on Without It?*, Iona Youth Trust, Glasgow, 1943.

<sup>18</sup> MacLeod, G. F., *We Shall Re-Build*, Iona Community, Glasgow, 1942, p13.

George MacLeod's concern with Incarnational Theology owes much to two 'great mystics' whom he acknowledges at the beginning of *Only One Way Left*. The first was Edward Irving (1792-1834) who was tried by libel for heresy by the Presbytery of Annandale on the 13<sup>th</sup> March 1833. The second was Alan W. Watts who wrote in America about various subjects including Zen, psychotherapy, Jung and St. Dionysius. Watts' book *Behold the Spirit* was published in 1947 with the sub-title "A Study in the Necessity of Mystical Religion". Although writing in Illinois he sometimes betrays a Scottish accent. Behind these acknowledgements, there are 'wheels within wheels'. H. A. Whitley wrote and published a biography of Irving just after George MacLeod's second book. It was based on an earlier dissertation held in the University of Edinburgh Library. Whitley also acknowledges the help of another of George's friends, Ronald Selby Wright, who possessed one of the few copies of the original prayer book of the Catholic Apostolic Church left in Scotland at that time. Thus George MacLeod boldly paid tribute to Irving the outcast and his friend Whitley went even further by worshipping in the Edinburgh congregation of the Catholic Apostolic Church from time to time, even as a minister of the Church of Scotland.<sup>19</sup> This is not in fact a sensational confession because Irving encouraged his worshippers to maintain contact with their main denominations.

Irving argued that in the Incarnation Christ not only took upon himself the Divine Nature but also sinful human nature. This implies that Jesus had a sinful nature yet Irving would maintain that it was the working of the Holy Spirit both before his birth and during his life which made it possible for him to overcome the pitfalls of the flesh. His trial concerned the imputation of sinfulness to Christ, and Whitley wrote derisively that he was found guilty "despite the fact that the terms in which both the old Scottish and the Westminster Confessions state the doctrine of our Lord's humanity agree with Irving's, the little men won".<sup>20</sup> George MacLeod's own contribution to this debate is quoted by Whitley from an article in the *British Weekly*, Christmas 1952:-

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<sup>19</sup> Whitley, H. A., *Blinded Eagle*, SCM, London, 1955, p83f.

<sup>20</sup> *ibid*, p93.

Dr. George MacLeod has recently asked: "When will all of us in the Church recover again the faith that God came in a body and rose in a body to give body to holiness? When we do multitudes who today are careless will want to crucify us, and other multitudes will want to join us, just because at last both multitudes will know we really care, as a man cares."<sup>21</sup>

Alan W. Watts did not share Irving's notoriety. In many ways his book is much more profound in its plea for Incarnational Theology. Like so many churchmen of the 1940s he complained bitterly of the crisis within the Church and the aridness of its doctrine. He believed that the Church preached more about dogma rather than the nature of God and conjectured that this was the main reason for the Church's decline. The Incarnation was treated as an historical fact in dogma to be confined to celebrations in its proper season, whereas the very nature of Incarnation lies in its total embodiment of the Spirit of God.

Watts recognises that there are many negative aspects to mysticism, sometimes they become self-indulgent movements, tend towards Gnosticism or become involved in sectarian activity. He maintains that mysticism is basically about the nature of God and his reality in the world. It is the absence of such proclamation in the Church which is causing its decline. He proposes Incarnational Theology as the vehicle by which the Church might restore a proper understanding of the nature of God.

He argues that there are two ways to visit your neighbour's house - you can either pop next door or you can go round the globe. So it is with religion. There are two types: that which hungers after spirituality and wanders far to find it satisfying the "Eros" more than meeting real needs in the world; or religion can be found in reality in the moment of revelation or insight. He is very insistent that Zen Buddhism holds the key in the way it teaches the recognition of 'moments of insight' and also uses the ordinary and mundane to teach meditation and spiritual exercises.

The argument continues that religions such as Primitive Buddhism, certain types of Hinduism and Pietistic Christianity seek to gain spirituality by the circuitous route. Of immediate concern is modern Christianity which has become too dogmatic and

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<sup>21</sup> *ibid*, p105.

adheres to a worship which does not allow enlightenment, nor an immediate insight into the nature of God. Watts uses a Zen technique called *satori* which is a form of meditation leading to immediate insight. The use of this term is both radical and exciting, it is very advanced for 1947 and would do credit to any so-called 'New Age' writers.

The soul striving to attain the divine state by its own efforts falls into total despair, and suddenly there dawns upon it with a great illuminative shock the realisation that the divine state simply IS, here and now, and does not have to be attained. For example, the Zen Buddhism of China and Japan has produced an entire technique of meditation involving these two phases, and terms the sudden shock wherewith the first turns into the second *satori*, or sudden awakening. *The Incarnation, the coming of Christ, is satori on the plane of human history, the sudden change from the old order of striving for redemption through obedience to the law, to the new order of redemption through the gift of divine grace.*<sup>22</sup>

Watts goes on to describe the nature of the Incarnation in very similar language to that of George MacLeod

The meaning of the Incarnation, therefore, is simply that we do not have to *attain* union with God. Man does not have to climb to the infinite and become God, because, out of love, the infinite God descends to the finite and becomes man. Despite man's refusal of God, despite his pride, his fear, his helpless and hopeless involvement in the vicious circle of sin, God's nature remains unalterably love - the *agape* which consists in giving oneself wholly and without reservation to the beloved.<sup>23</sup>

In part two of his book Watts tackles a problem which is common to many theologians: How does Christ intrude into the world? At what point can there be an interface between his economy and the economy of mankind? Watts himself answers this in similar terms to Irving, and for that matter George MacLeod.

The Christ, the gift of union, was made concrete flesh for a still deeper reason: not only that it might be grasped by our concrete minds, but also to demonstrate that union with God is given to us as material as well as spiritual beings, to the body as well as to the soul.<sup>24</sup>

A modern example of the creation of an interface would be found in the writing of Don Cupitt<sup>25</sup> who unites language, or the *Logos*, with the operation of God's

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<sup>22</sup> Watts, A. W., Behold the Spirit - A Study in the Necessity of Mystical Religion. John Murray, London, 1947, p78f.

<sup>23</sup> *ibid.*, p79.

<sup>24</sup> *ibid.*, p83.

<sup>25</sup> Cupitt, D., Creation out of Nothing, SCM, London, 1990.

language revealed in the Bible. George MacLeod subsequently created his interface in the discoveries of Einstein that “all matter is light energy”, and the proof text of Jesus, “I am the light of the world”. (Einstein did in fact advocate religious belief, particularly after the Manhattan Project.) This was used rather uncritically and increasingly repetitively with age by George MacLeod. Many writers have shown a concern that relativity may be interpreted by some as a licence to supplant common sense. They guard against this by various means which can be possibly summed up in Philip Frank’s statement “Relativism means the introduction of a richer language which allows us to adequately meet the requirements of the enriched experience. We are now able to cover these new facts by plain and direct words and to come one step nearer to what one may call ‘the plain truth about the universe’.”<sup>26</sup> Horton however does point out that it is possible to see rational connections between culture and modern science.<sup>27</sup>

In Chapter V, we cite the writing of Capra in relation to physics. He looked mainly at neo-classical physics of the quantum era and was unknown to George MacLeod, who might have found more connection between physics and healing had he been able to absorb and use the escape from classical physics. As Morrison points out it is the transition from analysis of cause to analysis of meaning which distinguishes the two and makes the new creativity possible.<sup>28</sup> One suspects that science and religion do not make good spouses, but sometimes good bedfellows.

When George MacLeod became Moderator of the General Assembly in 1957, the Rev’d Dr. T. Ralph Morton came into his own as Deputy Leader. Previously when MacLeod had toured America in 1951 Ralph Morton had shown his skills since that office. Morton had been a missionary in Manchuria, then went to Cambridge as Chaplain and thence to the wardenship of Community House in Glasgow, which he held from 1943 to 1950. Whereas George MacLeod was a brilliant publicist; Morton

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<sup>26</sup> P. Frank was Einstein’s first biographer and is quoted in : Clark, R. W., Einstein the life and times, Sceptre, London, 1973, p111. (1996 edition).

<sup>27</sup> Horton, R., *African Traditional Thought and Western Science - From Tradition to Science*, in Wilson, B. R., Rationality, Basil Blackwell, Oxford, 1970.

was a prolific writer and even lectured for two years at New College in Sociology of Religion.

Morton wrote several books on the role of the laity and how the church might discipline itself to incorporate their talents.<sup>29 30</sup> He often collaborated with Mark Gibbs<sup>31</sup> who founded, and edited the Audenshaw Project and Papers. Morton was largely responsible for beginning to integrate the lay members fully into the Community.

Morton asserts that the entire thrust of modern (at that time) theology was towards the unity between God and his world. He cites in an American book for the informed layman the concept of 'unity' as a central theme of modern theology. What he means is that he suggests that the old duality 'of this world' and 'not of this world' had broken down, and been replaced by a uniting concern for humanity both in Christology and in resultant social action.<sup>32</sup> Morton then proceeds to quote theologians who stress the humanity Jesus and his complete identity with the plight of humankind. Dorothee Sölle and Simone de Weil are quoted to point up the renewed humanity and the suffering of Jesus. He goes on to explain trends in understanding and stressing both the Incarnation of Christ in the work of Teilhard de Chardin and in sermons of Paul Tillich. In each there is a unity expressed, in the former between scientific knowledge at our disposal and choices we make with or without Christ; and in the latter case all our personal experiences with those of the Divine.<sup>33</sup>

Charles Raven wrote a book about Teilhard de Chardin in the late 1950s entitled *Teilhard de Chardin, Scientist and Seer*. Raven was, of course, a friend of MacLeod and also of the Iona Community. He shared their pacifist concerns and shared many forums both on radio and in print. His book on Chardin elucidates the nature of unity

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<sup>28</sup> Morrison, R. D., Science, Theology and the Transcendental Horizon - Einstein, Kant and Tillich, Scholar's Press, Atlantata, 1994, p25ff.

<sup>29</sup> *ibid*,

<sup>30</sup> Morton, T. R., God's Moving Spirit, Mowbrays, London, 1973.

<sup>31</sup> Gibbs & Morton, God's Lively People, Fontana, London, 1971.

<sup>32</sup> Morton, T. R., Jesus: Man for Today, Abingdon, Nashville, 1970, p49f.

<sup>33</sup> *ibid*, p50ff.

which was of concern to Morton (in a later chapter he deals with the effect of the two world wars on his theories, optimism and ethical issues surrounding mankind which would be of more interest to MacLeod). He maintains that the French education and background which Teilhard de Chardin had produced a different approach to evolution than one would expect in Britain. In Anglo-Saxon culture the rise of Darwinism had set the battle lines between science and religion. France, however, was unaffected by this. In French thought the two most important words were 'complexification' et 'convergence'.<sup>34</sup> Progress was not to be confused with the evolutionary process and convergence could easily be equated with Teilhard's 'Omega Point'. The world even with war and the atom bomb was working towards this point when the world would experience 'amorisation' and 'Christification'. In other words, unity would come when man was in a state to love one another and to be ruled by Christ.<sup>35</sup> It is in the Incarnation that Christ's work is united with the 'phenomenon of man' in a constant process of convergence towards the Omega Point. It should be noted at this point that Smuts wrote a foreword to one of his books, *Beyond the Bounds of History*,<sup>36</sup> and that in future discussions of other thinkers Chardin's name will often occur in the context of Anthroposophy. Thus it has been important to expand on Morton's understanding of Teilhard de Chardin as indicated by the writings of a mutual friend, Charles Raven.

It is also desirable to concentrate on Gregor Smith as he was a friend of the Iona Community and lectured there in 1966 on secular Christianity. It could be said that he contributed to an understanding of the Incarnation, yet on closer scrutiny the main concern of Gregor Smith was for history, or *Heilgeschichte*, which Oscar Cullmann had made popular in that decade. Gregor Smith believed that history was our past in the present and that faith grew out of an understanding of that past as we look to the future.<sup>37</sup> "His [God's] being is not separable from his action. If this possibility were to arise seriously, and dominate our action, then it would mean that truth was an

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<sup>34</sup> de Chardin, T., *Teilhard de Chardin, Scientist and Seer*, Collins, London, 1962, p34.

<sup>35</sup> *ibid*, p35ff.

<sup>36</sup> *ibid*, p51.

<sup>37</sup> Smith, G. R., *The Free Man*, Collins, London, 1969, Chap X.

illusion.”<sup>38</sup> In some way Gregor Smith is claiming something similar to Watts, in so far as he was suggesting that the acts of God such as the Incarnation, Resurrection and Ascension should not be regarded as the defining historical landmarks as Cullmann would have them, but as the means by which we understand the Being of God in our present reality.<sup>39</sup> Gregor Smith poses four poignant questions in the book of lectures which was published posthumously:-

Do we recover the reality of God by recovering the old idea of God? Or by furnishing a new idea of God? Or by re-entering the state of passionate conviction about God? How does one re-establish a love affair which has grown cold?<sup>40</sup>

The contribution of these two men to a theology of openness led the Iona Community onto a path from which it has never deviated. There have been more radical voices who have failed to prevail, but very few reactionary moves.

The second aim of this chapter is to describe in a general way healing and wholeness, with particular reference to the latter. In order to do this, it is now necessary to enter upon an excursus into the subject which deals in generalities with only minor illustrative reference to the Iona Community.

### **Healing and Wholeness**

The rest of this chapter is taken up with a long excursus into healing and wholeness, in order to define the type of theological debate which surrounds these terms. It will only be at the end of this excursus that we return very briefly to the Iona Community. As the chapters of the case study progress it will be shown how the literature discussed has impinged upon the thinking of the Community.

When wholeness is illustrated by the sub-divisions of genres of writing in the next chapter, some more literature will be reviewed. Healing and wholeness are yoked together by both tradition and subject matter as both are either linked by Biblical usage or by some medical or ecological understanding, deriving from, in the former,

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<sup>38</sup> Smith, G. R., Secular Christianity, Collins, London, 1966, p.118.

<sup>39</sup> Watts devoted most of his latter years working in association with Al Chung-liang Huang, and moved further away from Christianity. Watts, A., Tao - The Watercourse Way, Arkana, London, 1992.

<sup>40</sup> Smith, G. R., The Doctrine of God, Collins, London, 1970, p.53

hermeneutics; and in the latter, from an unintentional or deliberate adaptation of Smuts' definition of 'holism'. (See page 31)

Holism .... comprises all wholes in the universe. It is thus both a concept and a factor: a concept as standing for all wholes, a factor because the wholes it denotes are the real factors in the universe.<sup>41</sup>

Respect for the 'whole' has generated a host of literature in the three fields of Biblical hermeneutics, medicine and ecology. From each, some guidelines must be drawn.

The principal area of theological discussion has lain in an understanding of the Gospel miracles, although Lambourne also delves into social structures.

So basic to the Hebrew thought form is 'total thinking', 'holism', 'corporate model concepts' or whatever we choose to call it, that it permeates the whole grammar and literary style of the Hebrew Old Testament.

The Hebrew concept of a totality, which is neither just a summation of discrete particles nor a mass arbitrarily divisible into parts, but a living organism in which the parts co-inhere, both giving and receiving strength and purpose is nowhere better demonstrated than in the use of the word *mishpaha* (family) as a collective term not only for the human but all species.<sup>42</sup>

James Barr issues a cautionary note about the use of the word 'holy'. He argues that the OT did not in fact offer any insight or understanding of wholeness, but rather the idea of holiness is strictly a religious term implying "to be kept whole, not to be touched, inviolable"<sup>43</sup>. He goes on to talk about the 'English example' which equates 'holy' with health or wholeness. Even if there are certain etymological similarities in the English words holy, health and wholeness, the equation of holiness with health bears no relation to the contextual occurrence of holy within the Bible<sup>44</sup>. This is a particularly important point as the thrust of the thesis is that the definitions of wholeness which have been offered, and which are mainly based upon this English fallacy, are weak and without foundation compared to conceptions of wholeness which are derived from experience or biographical factors (see comments on Murray, p82).

<sup>41</sup> Smuts, J.C., Holism and Evolution, MacMillan, London 1927, p.120.

<sup>42</sup> Lambourne, R. A., Community, Church and Healing, Darton, Longman & Todd, London, 1963, p26.

<sup>43</sup> Barr, J., The Semantics of Biblical Language, OUP, London, 1961, p112.

<sup>44</sup> *ibid*, p113ff.

Allen acknowledges the influence of Lambourne but avoids the criticisms which Barr makes concerning the “English fallacy” of health and wholeness. Allen has a very simple yet far-reaching thesis: “Semantics is praxis”<sup>45</sup> He continues to argue that if there is a Christian obligation to treat the whole person as a committed practitioner, the semantics of body, mind and spirit structures the nature of one’s practice by compelling attention on each facet of the individual. Allen has developed a holistic practice in America much as Patrick Pietroni has in London. His initial emphasis on praxis avoids the trap of making holism into a biblical obligation rather than a norm of choice. Praxis is his response to the need to witness as a Christian health-care worker with a commitment to whole-person treatment.

However, the main area of concern lies in the meaning behind the miracles of Jesus which are regarded as restoring wholeness and seeking wholeness in the individual. For instance, Sayword examines the healing of the woman with a haemorrhage and concentrates on the freedom she is granted from the constraining taboos surrounding menstruation. The author wishes to establish the wholeness of a woman from a feminist perspective.<sup>46</sup> Similarly, Alan Lewis developed the idea of liberation from the disastrous effects of disability from the man lowered through the roof by his friends to meet Jesus. By offering to forgive his ‘sins’, Jesus not only took from him the stigma of brokenness but became “the elephant man” himself.<sup>47</sup> There are many other types of hermeneutic but these two point to the flexibility of the concept of wholeness in Biblical interpretation - a feature which will recur often.

Next, in the chapter on liturgy a shift from individual healing to collective healing of nations and the environment will be noted. Matthew Fox offers a way of understanding Incarnational Theology and the celebration of creation without resorting to Greek mythology but rather to Christian mystics such as Hildegard of

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<sup>45</sup> Allen, E. A., *Wholeness, salvation and the Christian health professional*, Ch. 1 of:- Ram (Ed), E., Transforming Health: Christian Approaches to Healing and Wholeness, MARC World Vision, [Monrovia], 1995.

<sup>46</sup> Sayword, L. L., Body and Psyche - Myth, Messages and Meaning, Doctoral Thesis, Department of Psychology and Clinical Studies, Newton Centre, Massachusetts, 1993.

<sup>47</sup> Lewis, A., *God as Cripple: Disability, Personhood and the Reign of God*, Pacific Theological Review, San Francisco, Vol XVI, No 1, 1982.

Bingen (1098-1179) on whom he has also written<sup>48</sup>. Hildegard recorded her religious experiences in a book entitled *Scivias*, which contained many references to cosmology and creation. She was also known as a healer and writers such as Ulrich have exploited this in meditations<sup>49</sup>. What is important is that she was probably a herbalist of some repute and developed medical theories of humours, which she tied in with the cosmos. Her two books on medicine were *Physica* and *Causae et Curae*<sup>50</sup>, which combined theology and medicine in a singular fashion that Fox regards as one of the pre-cursors to creationist theology. His argument is that the created world is a blessing of God to be celebrated and affirmed. This cannot be achieved by placing guilt before joy that lies in the Incarnation, Jesus becomes the “..... ‘son of Adam, son of God’ (Luke 3:38) [and] fully incarnates the Dahbar, the ever-flowing, cosmos-filling, creative energy of the Creator. Yet he becomes fully flesh as we are, pitching a tent in our midst.”<sup>51</sup> Jesus thus shares every aspect of nature both within our humanity and in our environment. This celebratory and salvific knowledge can lead us to understand both healing and wholeness. Fox explains thus:-

Salvation is about healing, and just as the cosmos itself can be ruptured and torn apart by injustice, so too it can be healed by all human efforts to bring justice, which is balance, back to human relationships to earth, air, fire, water, and one another. Just as dualism and subject/object living is sinful according to the Via Positiva, so too harmonious living and lifestyles of simplicity represent salvific action on humanity’s part. The healing process of making whole and integrating also includes a return to one’s origins, and the Via Positiva offers deep invitations to examine anew our pre-existence, both in the historical unfolding of the cosmos and in the Creator’s heart. With this examination comes a greater reverence for our uniqueness, and therefore a greater reverence for that of God’s other creatures. This reverence is itself salvific<sup>52</sup>.

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<sup>48</sup> Fox, M., *Illuminations of Hildegard of Bingen Text by Hildegard of Bingen with commentary by Matthew Fox*, N. M. Bear & Co., Santa Fe, 1985.

<sup>49</sup> Ulrich, I., *Hildegard of Bingen - Mystic, Healer, Companion of the Angels*, Liturgical Press, Collegeville Minnesota, 1990.

<sup>50</sup> Flanagan, S., *Hildegard of Bingen - A Visionary Life*, Routledge, London, 1989, p80-91. Her role as a healer excites feminist thinkers who often believe that healing was wrested from them by men shortly after the middle ages.

<sup>51</sup> Fox, M., *Original Blessing*, Bear & Co., Santa Fe, 1993, p123. For a critique of Fox’s theology in the context of New Age thinking, see: Greer, P., *The Aquarian Connection: Conflicting Theologies of the New Age*, Journal of Contemporary Religion, No. 2, Vol. 10, 1995, pp151-166.

<sup>52</sup> *ibid*, p123.

Such an approach compels us to take geopolitical and green matters seriously and shows how Incarnational Theology has advanced with modern debate beyond that of George MacLeod. The wider concern in liturgy for healing and wholeness into all social and political situations may be simply a reflection of the time.

Similarly our last observation suggests a more precise and modern definition of wholeness than is encountered in the healing literature which is going to be examined throughout. It probably still is so but must be expressed in more modern terms such as those suggested by Matthew Fox. Some of the changes in the Community have been so radical that we must depart from the old and move to the new modes of expression which still have a link with Incarnational Theology. In the case of Fox, he has accommodated green issues and we believe that there must be a similarly modern interpretation of the actual festival of the Incarnation which connects Incarnational Theology with the health of God's people. Adrian Thatcher does so, in a way which is offered as an introduction with no evidence that he has influenced any member of the Community. His concern is with a 'postmythical Christ' and he seeks to allegorise in modern terms. He chooses to defend the Virgin birth on the grounds that the early church fathers used the Chalcedonian doctrine of Theotokos to emphasise the uniqueness of the person of Christ. As an organic whole the man Jesus shared our DNA structure and all other life-forces which constitute our being. If there was a virgin birth, it is now obvious to science that the Y chromosome would be missing. Yet in his perfection he taught from his humanity the gift of unconditional love, forgiveness and reconciliation. These qualities were part of a unique whole with which mankind is invited to unite in the whole of the Body of Christ, the church. According to this analogy, our wholeness is diminished as we fail to meet our human potentiality, as we waste the human matter which in Jesus was perfected.<sup>53</sup> This means that our sin breaks a perfection which could be achieved if we struggled zealously to be children of God. Such a definition of wholeness will not be found in Chapter VII, but does emphasise the creativeness which will be found in the individual case studies.

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<sup>53</sup> Thatcher, A., Truly a Person, Truly God, SPCK, London, 1990, chap.9

Apart from the imprecise nature of 'wholeness' there are obvious dangers in its use, particularly when the debate drifts into the discussion of holism or holistic theories. Ash argues that it is inconsistent to conceive of the universe, or for that matter the personality, as a whole, then set another whole, God, outwith the system.<sup>54</sup> He argues for the suspension of belief in a being which cannot be subsumed into the whole. Incarnational Theology on the other hand counters his argument by creating an interface between God and the world in the person of Christ. Thatcher writes, "In the case of Jesus, God is the whole or centre. The Father does not replace the personal centre of Jesus; rather the integration of Jesus with himself ..... and his integration with other persons ..... presents a whole or unity which is also a unity between God himself and an open, perfect, human life."<sup>55</sup>

This digression into Fox, Ash and Thatcher is in fact quite important because it links the Incarnational Theology, which has been a major theological foundation of the Iona Community, with wholeness which can at times be separated from healing and will be shown to be so in some of the definitions offered by members in Chapter VII. It also attempts to show that these matters are central to the 'creationist movement' which is so obviously central to the modern member of the Community, if not in relation to healing then certainly in relation to the political involvement which binds so much and so many Members together. Some of the definitions of wholeness which will be offered are poignantly personal and it is also important to establish at this stage that the personal has a sacred place in all debates about Christ's involvement with the world.

Last in this present discussion of wholeness, it is extremely simple to find authors who eschew discussion of holistic medicine or anything connected with 'New Age' concepts of personal transformation. This thesis will not seek to make any judgement upon such objections, nor will it seek to advocate the total acceptance of holistic medicine and related subjects as the only way forward for the Church. That having been stated, it must be recognised that there are valid moral objections to the

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<sup>54</sup> Ash, M., *New Renaissance*, Green Books, Bideford, 1987, p79ff.

<sup>55</sup> op cit, p113.

worst abuses of holistic medicine, the lack of accreditation, incompetence and so on; and it is also undoubtedly true that many people have been misled to their cost by 'New Age' practices upon which there are no moral checks. This kind of dilemma has led even 'moderate' writers to reject the whole debate in order not to risk the contamination of some spurious characteristics, such as the case of McGilvray who will figure in Chapter VII (see page 198f) when Dr. Rev'd Margaret Stewart's involvement with the WCC will be examined. He would not entertain, in 1981, the idea of holistic medicine except for some little known research by an American physician.<sup>56</sup>

### **Wholeness**

Throughout this research it will be assumed that those whose are coming under scrutiny have some conception of the expansive debate about the meaning of wholeness, holism or holistic. Some, perhaps, have been forced to find some conception whilst others have very firm and critical ideas. Certainly, none may offer a view couched in one of these genres of writing without some knowledge of the debate.

The words, wholeness and holistic, are used by academic and non-academic theologians alike and is of interest because their implied definitions are very often so imprecise; more often appearing to be implicit rather than explicit. Many of the writers who will be examined wrote between 1930 and 1960 and were probably unaware that to use the term was to invite entry into a much broader debate which was triggered by Smuts in 1926 and, independently, by Gestalt theorists writing at about the same time.

It is surely a quirk of cultural history that Field-marshal Jan Christian Smuts, Prime Minister of South Africa in 1939,<sup>57</sup> should bequeath to the English language the word 'holism' which has occupied so many minds in so many fields, not least in health care. Certainly, the majority of interested churchpeople have been prepared to enter the

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<sup>56</sup> McGilvray, J. C., The Quest for Health and Wholeness, German Institute for Medical Missions, Tübingen, 1981.

debate during the past two decades. 'Holism' has been appropriated by many professionals, particularly those in health care; by practitioners of complimentary therapies; by philosophers; and by proponents of a 'New Age'. Because there has been so much expounded on 'holistic' medicine which is drawn from other cultures and categories, there has been an inevitable clash with Christian values - a clash which has had many manifestations. Yet, other christians, including the writer, have found nothing but good and challenge in the entire debate. There are many approaches to 'wholeness' which are separated, almost to the point of antagonism, by language, categories and tradition. Religious discourse only serves to heighten the debate. In order to begin to establish common ground between religious groups which disagree, it will be necessary to show that many of the disagreements are based on a misunderstanding of language and of categories.

At the outset, it is best to quote one of Smuts' nine definitions of holism:-

Holism .... comprises all wholes in the universe. It is thus both a concept and a factor: a concept as standing for all wholes, a factor because the wholes it denotes are the real factors in the universe.<sup>58</sup>

There is a place for a mechanistic analysis of a component in a 'field', for instance in the examination of the constituent parts of a chemical suspension or the anatomical or physiological functions of parts of the body. However, the true nature of a whole cannot be encapsulated by such an analysis.

What has been discussed are wholes as factors or parts of universe. Holism, however, is also a concept which allows thinkers to form their own holistic theories around their chosen area of analysis<sup>59</sup>.

Because Smuts offers an opportunity to admit creativity into any analysis, his theories open doors to more complex analyses by theorists adopting some or all of his position. It is at this point that a degree of ambiguity enters which may or may not be of his making. One of his South African mentors attempts to be critical of his theory

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<sup>57</sup> Hancock, W. K., Smuts: The Fields of Force 1919 -1950, Cambridge, CUP, 1968, p176ff.

<sup>58</sup> Smuts J.C., Holism and Evolution, MacMillan, London 1927, p.120.

<sup>59</sup> Smuts J.C., Holism and Evolution, MacMillan, London 1927, p.120.

from a Catholic viewpoint<sup>60</sup>. Monsignor Kolbe criticises Smuts on three grounds and then proceeds to adopt the theory for his own purposes. First, Kolbe argues that classical Catholic philosophy already deals with the evolution of forms in the Aristotelian sense. Second, he laments the passing of the Cartesian process of induction in scientific methodology which will prove to be a recurring theme throughout this discussion.

Kolbe's third point illustrates, however, the difficulty of holism in general and that of Smuts in particular. Because he argues that the future of an evolving whole is charged with creativity, it becomes possible to build in one's own teleology; thereby slipping from description of some 'field' to one's construction. Such a path is taken, almost unnoticed by Kolbe. "The Holist would explain: 'I do not need now to say whence matter got its creativeness. I see a continuous chain from Chaos to Spirituality.'"<sup>61</sup> Kolbe has turned a potentially hostile theory to his theological advantage by viewing the evolutionary path as one which is charged with spiritual speculation.

It is of interest to note that this creative aspect of holism has become its attractiveness to many green theorists. Lovelock, for instance, has written many influential books on the environmental crisis facing the world. Most of his analyses can probably stand up to some scientific scrutiny, and yet, what makes his analysis almost cultic is his description of the world as a living whole named by him after the goddess of the Earth, Gaia<sup>62</sup>. Lovelock can quote many academic antecedents to support the view that the Earth is a living whole, but is it logically justifiable? Furthermore, Lovelock became embroiled in theological controversy at an early stage and he later noted in response to his own questions that "Belief in God is an act of faith and will remain so. In the same way, it is otiose to try to prove that Gaia is alive. Instead, Gaia should be a way to view the Earth, ourselves, and our relationships with living things."<sup>63</sup>

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<sup>60</sup> Kolbe F.C., A Catholic View of Holism, MacMillan, London, 1928.

<sup>61</sup> *ibid.* p.38f

<sup>62</sup> Lovelock J., The Ages of Gaia, OUP, Oxford, 1988.

<sup>63</sup> *ibid.* p.207.

In several passages Gestalt theory will be discussed, which ought to raise at this stage the question of the difference between 'holistic' and 'wholism'. 'Holistic' generally referred to the soma; whilst 'wholistic' refers to the psyche. Poynton offers an explanation<sup>64</sup>: Smuts wrote his book in great haste according to his official biographer and without much reference to other debates<sup>65</sup>. Around the 1920's, Gestalt theory was taking shape, and in the literature the word 'whole' was the preferred term when outlining the theory which could, in part, be popularly summed up as "the whole is more than the sum of its parts". 'Holism' was a neologism which suffered from the imprecision discussed above. Smuts offered nine definitions, all of which were different from Gestalt theory. Incidentally, Koestler offered the term holon as a kind of half-way-house between holism and atomism<sup>66</sup>.

Two central questions now arise which are germane to the aim of this thesis as it develops creationist theology. First, does holism allow analysts to admit new categories such as 'life' or 'spirituality'? Second, are such categories logically admissible or coherent? These questions are important because many Christians would wish to argue that such holistic theories as "Gaia" are inadmissible because they admit concepts which have no place in their understanding of God's created wholes. To the former question; the answer must be that holism does allow it and Christians and others must accept it, aware that as others develop holistic theories, so, indeed, do Christians. The latter question, however, is much more complex and moves the argument to another type of analysis of wholes.

A word of speculation must be inserted about Jan Christian Smuts' position in the social circles in which MacLeod moved. George MacLeod was of course a serving officer in South Africa and may well have encountered Smuts. Much more relevant is his connection with Sir David Russell, who associated with him while Smuts was Rector of St Andrews University in 1934. Lastly, Smuts took a great interest in the

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<sup>64</sup> Poynton, J. C., *Smuts's Holism and Evolution Sixty Years On*, Transactions of the Royal Society of South Africa, 1987, Vol. 46, No. P3, p183.

<sup>65</sup> Hancock, W. K., *Smuts: The Fields of Force 1919 -1950*, Cambridge, CUP, 1968.

<sup>66</sup> Koestler, A., & Smythies, J. R. (eds), *Beyond atomism and holism - the concept of the holon, Beyond Reductionism: New Perspectives in Life Sciences*, Hutchison, London, 1969.

work of Teilhard de Chardin and wrote a foreword for at least one of his books (see page 23).

Holism is about three systems of thought and the ways in which they converge, part or by-pass each other, both in time and space, thus challenging us to accept fully the freedom of 'fields' to develop as they will.

Health and wholeness do have to go together : they are permanently yoked in the same way as say, health and fitness. Wholeness is qualitative, describing a desired state of well-being; or when used in another derivative, holistic, can describe the quality of the health-care which is offered.

The standard definition of health offered by the World Health Organisation is:-

“a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.”<sup>67</sup>

It is idealistic in many ways and full of unfulfilled optimism reflective of 1948 when it was written. It too is essentially qualitative and implies the WHO was looking beyond the eradication of disease and to societies free of the social injustices which have, in fact, increased and enveloped many more millions since 1948. The point to underline is that health is often linked to a qualitative qualifier and the subject matter here is that of wholeness. In as much as healing is inextricably linked to wholeness it will be discussed, often at some length, but the object of the thesis is not to examine the basics of healing *per se*. See pages 200 and 285.

Michael Wilson, who, along with Bob Lambourne, lectured on Iona, draws a distinction between 'cure', 'heal', and 'wholeness'. Both were trained in medicine and joined the staff of the Department of Theology at Birmingham University, where they concentrated on a theological model of counselling and healing, rather than a medical one. In their work 'cure' and 'heal' are not accorded the religious significance of 'wholeness'.

Any conception of 'curing' is...embraced within the word 'heal', and given purpose. On the other hand, because physical health subserves the purpose of life - loving God, loving neighbour, loving self - it is legitimate to use the word

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<sup>67</sup> World Health Organisation, Basic Documents, WHO, Geneva, 1948, p1.

'healed' of someone who has been enabled to take up a life of self-giving, without having been cured physically.<sup>68</sup>

In the context of Christian or Divine Healing, healing and wholeness nearly always go together. Wholeness represents a state of healthy being which may not be the result of cure. Another example might be *Health and Healing: A Ministry to Wholeness* which was written by a minister distinguished by his ministry of healing and by his ability to communicate, Denis Duncan<sup>69</sup>. His book outlines a ministry to the 'whole-person' but either fails to define 'wholeness', or, in the context of the author's aims, chooses not to. He describes a cerebral palsied woman, Lin, who is also blind and outlines her adversities, counselling, but most of all her success in life and her ability to help others through her writing and her own counselling skills.<sup>70</sup> Her success, seen as an outcome of her triumph over disability, becomes an illustrative story narrative about wholeness. Wilson reserves a strictly religious definition for wholeness which may ultimately be found in worship and the anticipation of the Kingdom of God.

I deliberately use the verb 'wholing' rather than the noun 'wholeness' because wholeness is an ideal towards which we struggle and grow, a pointer towards the kingdom yet to be completed, now partly visible. Worship is an activity which helps us individually and corporately to grow towards wholeness.<sup>71</sup>

To attempt to define wholeness would either involve a lengthy catalogue of recorded definitions, or would involve imposing one's own interpretation on the likes of the above. Given, however, that wholeness (or its derivatives) is usually part of the debate about healing, an attempt will be made to identify the ways by which theologians and others seek to present it, achieve it or advocate it.

Such an epistemological approach is justified when definitions are hard to come by, for instance, in the fields of medical discourse or that of prayer. Hufford<sup>72</sup> seeks to

<sup>68</sup> Wilson, M., *The Church is Healing*, SCM - Religious Book Club, London, 1966, p18.

<sup>69</sup> Denis Duncan was editor of the *British Weekly* for many years.

<sup>70</sup> Duncan, D., *Health and Healing: A Ministry to Wholeness*, St. Andrew Press, Edinburgh, 1988, p81f.

<sup>71</sup> Wilson, M., *A Coat of Many Colours*, Epworth, London, 1988, p217.

<sup>72</sup> Hufford, D. J., *Epistemologies in Religious Healing*, *Journal of Medicine and Philosophy*, Vol 18, No 2, 1993.

offer an explanation for the persistent belief in prayers for the sick by offering two epistemological models of prayer rather than definitions. His paper presents two case studies, one of a Christian Scientist suffering terminally from breast cancer and another of a man of a mainstream denomination with an acute hiatus hernia who attended a healing service and claimed to be healed. The first model used words and phrases like “will” cure, “medical care is superfluous”; the second model words like “may” cure, “medical care is among God’s ways of healing”. In the first model failure is associated with the patient’s own sin or lack of faith; in the second, God simply has other intentions (see page 245). This thesis assumes that definitions are less important than what people think and do. Thus, only a definition offering the common components of wholeness will be offered. There may indeed be ontological models which seek to clarify theories but these depend on a dogmatic theological approach or some other such. Take, for instance, Frank Lake’s *Dynamic Cycle of Development* which overtly seeks to witness to Christian values and uses an understanding of Jesus Christ drawn from St John’s Gospel.<sup>73</sup> A secular example might be Transactional Analysis with its emphasis on ‘parent’, ‘adult’ and ‘child’. It is interesting that Transactional Analysis has been adopted by many religious groups, and Ian Davidson the present director of *The Christian Fellowship of Healing (Scotland)*<sup>74</sup> who has Jesus intrude into the ‘adult’ where the devil or Satan often resides. This plus his knowledge of TA constitutes the bedrock of his Christian Gestalt.

The most notable common factor in any definition of wholeness as it relates to individuals is the universal desire to avoid reductionism which may not always be feasible.<sup>75</sup> The individual must be treated and approached as a complete entity. Descartes placed all his emphasis on the mind and its ability to think. *Cogito, ergo sum*, diminished the body and matter to dualistic objects of investigation and instigated the long-held belief that the body was little else than an intricately designed

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<sup>73</sup> Lake, F., Abridged by M. H. Yeomans, *Clinical Theology*, DLT, London, 1986, p33ff.

<sup>74</sup> Davidson, I, *Here and Now An Approach to Christian Healing through Gestalt*, DLT, London, 1991, p3.

<sup>75</sup> Foster, J., *The Immaterial Self*, Routledge, London 1991.

machine which had to be maintained and repaired. Such a view was enhanced by the 'design' theory of Newtonian physics.<sup>76</sup> A machine may be dismantled and small parts given undue importance. The significance of the holistic debate lies in the fact that dualism is no longer admissible nor may the individual be reduced to various components.

Next, most would entertain the 'trinity' of body, mind (or soul) and spirit as being the three most important aspects of a 'whole person'. This formula may either constitute the basis of treatment, or serve as a bulwark against reductionism. More secular theorists tend to remain content with body and mind, *psyche* and *soma*. This is particularly so in discussions of psychosomatic illness. Griffiths makes a plea for a more 'fluid' approach to what he has dubbed the 'trinity' of the *BHMA* consisting of 'body', 'soul' and 'spirit'.<sup>77</sup> 'Concrete' thinkers tend to want to identify and compartmentalise the different concepts, sometimes identifying that, such as 'soul' which cannot really be identified. He cites as more 'fluid' Jungian analysis, Eastern thought and certain more radical theologians.<sup>78</sup> Most Christian theories which are holistic seem to reject dualism in so far as they recognise all the needs of men and women. The body is not simply irrelevant as in a pure Cartesian system, and yet with very few exceptions their theories are dualistic because none are possible without a belief either in God<sup>79</sup> or about his actions towards all men.

The keyword is *shalom* from the OT which means peace, peace in and through doing the will of God. The OT traces the fortunes of a 'chosen people' whose collective well-being was closely linked with their obedience and loyalty to Yahweh. In the NT, many words centre on the healing acts of Jesus. R. A. Lambourne chooses words which translated from Greek mean 'heal', 'cure', 'cleanse', 'make whole' and

<sup>76</sup> Capra, F., *The Turning Point*, Wildwood House, London, 1982, Chapter 10.

<sup>77</sup> Griffiths, T. N., *Healthy Spirituality and the Trinity-Unity Model of Man*, *Holistic Medicine*, Vol 3, 1988, p73ff.

<sup>78</sup> *ibid*, p75.

<sup>79</sup> Kenny, A., (trans.), *Descartes: Philosophical Letters*, OUP, Oxford, 1970.

'save'.<sup>80</sup> If he introduces a word to be emphasised, it would be *sozein* in which he finds that "the corporate aspect is strong and teaches us that 'to be saved' or 'to be made whole' is to enjoy a deliverance from defeat and destruction together with others."<sup>81</sup> Other NT words may be chosen depending on an author's preference for the Gospels or the Epistles.

Reviewing the elements of holistic thought outlined in the last two pages, we have firstly wholistic therapies being pursued by Gestalt counsellors. Second, there is the movement against reductionism. Third, we have witnessed the general consensus that a holistic approach to the person implies a 'trinity' variously described as 'body, soul and spirit' or 'body, mind and spirit'. Finally, there is the theological tendency of some to provide an holistic exegesis of Biblical terms. Next we must examine how these four elements come together in the Iona Community.

At this stage two examples will suffice to show how there is a willingness among members of the Iona Community to transcend genres of writing in an attempt to understand the complexities of healing. It may be pointed to ask whether these members are very open or simply highly articulate, but we will take Ron Ferguson who displays both these qualities. In *Chasing the Wild Goose*, Ferguson objectively chronicles the history of the Iona Community but in the concluding chapters becomes more personal. In particular he allies the healing service with the reaction against the worst excesses of biomedicine. He writes:-

The dominant model has also been devastating for health. Along with science generally, it has had spectacular successes, but it has led inexorably to "magic bullet" medicine, where the doctor prescribes a drug to deal with symptoms. The whole person is missing. Everything is cast into the problem/solution mould....

The Cartesian split between mind and body is being seen for the disaster it is. The Indian yogis have known for centuries that the "involuntary" systems of the body, such as heartbeat and blood pressure, can be influenced and even controlled by the mind: now, through the discipline of biofeedback,....<sup>82</sup>

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<sup>80</sup> Lambourne R. A., *Community, Church and Healing*, Darton, Longman & Todd, London, 1963, ch.8.

<sup>81</sup> *ibid.*, p103.

<sup>82</sup> Ferguson, R., *Chasing the Wild Goose*, Fount, Glasgow, 1988, p186f.

In this quotation, Ferguson flirts with at least three concepts which are central to holistic medicine. He manages to place in a single paragraph a reference to the crisis in biomedicine, puts it critically all in the context of the Cartesian split between body and mind which has caused so much of the crisis and refers to biofeedback, not in the modern sense but referring to yoga.

We can contrast such openness with a particular example from the Church of Scotland of a closed system of thought. The Church of Scotland condemned aromatherapy as being a treatment of the New Age in its Reports to the General Assembly in 1993.<sup>83</sup> The structure of that report was one of very broad condemnation of all aspects of the New Age and was highly dependant on an appendix written by John Drane which was based on his book, *What is the New Age saying to the Church?*<sup>84</sup> There is a danger which the Church of Scotland, and particularly its Board of Social Responsibility, often falls into the trap of extracting an opinion from one author, being seduced by it and then being unwilling balance it with some eclecticism.

It is perhaps apposite to end by contrasting Ron Ferguson's openness with the closed attitude of the Church of Scotland. The Iona Community has been noted for its contribution to debates within the General Assembly of the Church of Scotland. It has to be asked why it failed to join the debate in 1993. The answer is elusive, but may well be a reflection of a general hesitancy in this whole area by Christians who are still trying to read the maps which reflect difficult terrain.

The foundation of this thesis has three main building blocks which have been laid in this chapter. Most importantly, the claim of the Iona Community to have been concerned with healing for nearly fifty years is beyond doubt. Secondly, we must accept that the Iona Community's ethos over most of that fifty years was established and moulded by George MacLeod, who attracted members, if not because of his belief in Incarnational Theology, then certainly because he embraced the secular world

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<sup>83</sup> Church of Scotland, *Board of Social Responsibility, Reports to the General Assembly*, Edinburgh, 1993, p490ff.

<sup>84</sup> Drane, J., *What is the New Age saying to the Church?*, Marshall Pickering, London, 1991.

of Scotland where most of them were going to work. Last, without a literature on healing and wholeness the developments within the Community might not have been sustained, and those of the previous decade which was free of the influence of George MacLeod would have been poorer.

## Methodology

The purpose of this chapter is to outline the methodologies which will be used in the analysis of the case studies of the Iona Community. Each one will be refined at the appropriate point in the thesis, but at this point an overview will be established. The chapters containing case studies could stand on their own but the intention is to take them further in order to explore the nature of religious discourse at the margins of healing and wholeness. Three methods will be explained: first discourse analysis in broad principle; second, what is meant by openness in an analytical way without reference to the theology of the Iona Community. Third, the theory of coherence will be introduced. On pages 253ff. the dramatic theories of Burke will be used to analyse certain statements by George MacLeod and others. His work is very briefly mentioned in this explanatory context on page 48.

### Meaning of 'Discourse'

Two examinations of discourse analysis are required to explain how the method will relate to the analysis of the case-study which occupies Chapters III to VII and particularly the empirical reports of members' responses. The aim is first to define discourse and second to show the rationale for its development as a tool of social science.

Discourse is the use of language in either verbal or textual form to express material which has some social origin. Discourse in a technical sense implies social constructs and in the description of discourse social change may be identified. Fairclough puts it thus:

In using the term 'discourse', I am proposing to regard language use as a form of social practice, rather than a purely individual activity or a reflex of situational variables<sup>1</sup>.

Much of what is considered to be discourse analysis is an extension of linguistics and involves the analysis of sentences or smaller units of utterance. Such techniques are often found in biblical studies and will be referred to in passing later. Fairclough

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<sup>1</sup> Fairclough, N., *Discourse and Social Change*, Polity Press, Cambridge, 1992, p63.

argues earlier that some forms of discourse analysis are purely descriptive, whilst others reflect the social conditions which produce them<sup>2</sup>. He describes discourse as revealing evidence for the development of social theory, for instance structuralism. The result is that he views social change in the ways in which discourse practices intermingle and change. Finally, he suggests that discourse may be used to describe the appropriate sets of linguistic tools in a certain area of interest, such as medicine or theology. In sociology there was a movement from a healing theory of action to a discursive approach which considered that discourse revealed behaviour within the constraints of systems. Bilmes sought to document this development of discursive sociology and to defend the new emphasis of the late Sixties.<sup>3</sup> Hidden within this new connection between systems and discourse is of course the implication that discourse inevitably reveals and reflects power struggles. This is not an emphasis we wish to follow in this thesis (see page 12).

So, discourse may be defined as text or speech which is addressed to an epistemic community whether that be the entire readership of a newspaper or the specialised talk of a theological seminar. It must be intentional and structured in some way which can be interpreted. Appleby *et al* defined discourse thus:-

The use of language in speech or text in which the meaning of the words are specific to the community of users<sup>4</sup>.

Another commentator on post-modernity adapts work of the Seventies to classify discourse as a creation of space, identity in other words within the post-modern world. Discourse becomes a private possession of those who share it ; discourse indicates how we represent ourselves within our environment<sup>5</sup>. Kathy Galloway, to take one example from the case studies, in every quotation offered in this thesis refers to the identity which Iona gives to her, and potentially to others (see page 117).

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<sup>2</sup> *ibid*, chapters 1 and 2.

<sup>3</sup> Bilmes, J., Discourse and Behaviour, Plenum Press, New York, 1986, p180ff.

<sup>4</sup> Appleby et al., J., Knowledge and Postmodernism in Historical Perspective, Routledge, London, 1996, p558.

<sup>5</sup> Harvey, D., The Condition of Postmodernity, Blackwell, Oxford, 1990, p220f.

The underlying assumptions stretch far into philosophy and equally into linguistics and hermeneutics. Each of these components illustrates how meaning is structured and done so in ways which have escaped logical positivism. Logical positivism assumes that meaning was a matter of nomenclature and that once established would provide a constant in terms of analysis. Philosophy has increasingly shown that language is structured by meaning rather than nomenclature and that meaning is conveyed by our use of language in a social context. Austin developed the idea of performatives to show how certain statements only make sense when seen as an act within the social context, i.e., a marriage<sup>6</sup>. Searle took matters further by suggesting that “speech acts” were governed by rules which were socially determined or at least involved two or more parties<sup>7</sup>. He was influenced by Wittgenstein’s concept of “language games”. The purpose is not to rehearse a history of the philosophy of language but to point out the philosophical antecedents to the development of discourse analysis.<sup>8</sup>

The seminal thinker in linguistics was undoubtedly Ferdinand de Saussure, the Swiss linguist who influenced French linguistics at the turn of this century. He not only informed linguistics but invented the science of semiotics. He understood language to be a system of signifiers and signified which were built into a coherent structure. This emphasis on structure helped spawn the French structuralists. Signifiers are developed in an arbitrary way but develop their value in language through their relationship to other signs. In particular, they allow us to develop complex linguistic structures by offering us the opportunity of creating our own signifiers consisting of relations between the two basic units of value - the syntagma and associatives<sup>9</sup>. The relevance of Saussure’s increasingly complex structural analysis to discourse analysts is that as sentences grow, so they signify more complex ideas which give messages to epistemic communities as to their social meaning. In Chapter VII we shall show how these signs are analysed in the tradition of Saussure by Dassetto who, in the work

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<sup>6</sup> Austin, J. L., How to do things with words, Clarendon, Cambridge, 1962, pp1-24.

<sup>7</sup> Searle, J., Speech Acts, CUP, Cambridge, 1969, pp54-71.

<sup>8</sup> Schiffren has developed a system of Discourse Analysis based on speech act theory. Schiffren, D., Approaches to Discourse, Blackwell, Oxford, 1994

<sup>9</sup> Saussure, F., Course in General Linguistics, Duckworth, London, 1983, p122f.

which will concern us, refines and illustrates the development of concepts by using diagrammatic figures similar to those of Chomsky but which fail to show a rigorous structuralist approach. The *Centre de Recherches Sociolo-Religieuses à Louvain* has from time to time undertaken various projects concentrating on an aspect of investigative technique. One such project was reported in *Social Compass* and *Concillium* in 1973. The project headed by François Houtart employed linguistic techniques to investigate the structure of church documents (Roman Catholic). The major work was produced by Dassetto and is used and discussed on pages 224ff. The participants in the project also considered the work of Saussure on the basis that the utterances of a priest, for instance, become complex signifiers when uttered from the pulpit or in prayer. As Houtart reports:-

Socio-linguistics is a rapidly expanding discipline. Various schools are developing on different continents. Orientations are varied: *semiology*, *generative linguistics*, *distributional linguistics*, *semantics*, etc. [Italics added]<sup>10</sup>

Felice Dassetto had the title of a researcher on this project, therefore it is probably more accurate to attribute the overall conception to Houtart. Dassetto is now Professor of Sociology at the University of Louvain, specialising in teaching sociology of knowledge, but with a major research interest in Islam. Unfortunately he does not have much to say about the relationship of his work in 1972 to present-day discourse analysis<sup>11</sup>.

Semiology owes its existence to Saussure, and those such as Barthes who pick up his challenge to establish a science of semiology. Generative linguistics refers mainly to Chomsky, and to the work of one of the project team, Dassetto, who will be discussed in Chapter VII.

The third component which laid the foundation for discourse analysis was the secular development of hermeneutics. Much of the thrust towards discourse analysis particularly of text concerned the nature of text and our ability to interpret it in an objective manner. The basic question must be, "What meaning may legitimately be extracted from the text?" The answer to this affects the type of validation which can

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<sup>10</sup> Houtart, F., *Editorial*, *Social Compass*, No. 3, Vol. 20, 1973, p357.

be expected from either an analysis or more straightforward textural criticism. The latter is a continuing problem in biblical hermeneutics and secular thinkers acknowledge the effect of Schleiermacher as a major exponent of their discipline. Derrida pointed out that written text is addressed to an absentee unlike speech and must therefore assume a life of its own in terms of its meaning as found by any reader<sup>12</sup>. We read without knowledge of the author's intention although we can know the context and history of a work, nevertheless it is the interpreter's interpretation which depends upon integrity as a sign of validation<sup>13</sup>. Loy has edited a book on the Christian/Buddhist debate, which has mainly taken place in a post-modern context. He illustrates with his co-contributors how a radical understanding, a deconstruction of texts from the respective religions, can lead to words and language which is healing both to the rift between the two religions and also to the reader and devotee of the texts which provide solace<sup>14</sup>.

Text has its own life and is subject to hermeneutic interpretation. This raises several issues of validation, which are as well dealt with at this juncture. First, meaning has a history which includes people's experience and input. Very few narratives can exist without this input which has to be inferred by the interpreter, it cannot be deduced. This means that almost any narrative may have different meanings to different people, one of the points of deconstruction is that you assume that you can go behind the meaning to find the material about the author<sup>15</sup>. Second is the assumption made by many writers that people invest their own experiences in text, which makes the interpretation legitimate. On page 278, MacIntyre is employed to underscore this point, but see also Crites<sup>16</sup>. Given these options in understanding text, it is necessary

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<sup>11</sup> Information supplied by Dasetto in an E-Mail dated 16/03/93.

<sup>12</sup> Derrida, J., Limited Inc., Northwestern UP, Evanston, Ill., 1988

<sup>13</sup> Ricoeur, P., *The Model of the Text: meaningful action considered as text*, Social Research, No. 38, Autumn, 1971

<sup>14</sup> Loy (Ed), D., Healing Deconstruction, AAR, Scholars Press, Atlanta, 1996. Note the ambiguity in the title.

<sup>15</sup> Norris, C., Derrida, Fontana, London, 1987, ch. 8. See particularly Norris' account of Derrida's deconstruction of Sigmund Freud, p205ff.

<sup>16</sup> Crites, S., "The Narrative Quality of Experience", Journal of the American Academy of Religion, 1971, pp291-311.

to accept a creative subjectivity which is available to all who read it and can be judged by the integrity of the account offered<sup>17</sup>.

In this dissertation emphasis will be placed on the discourses of theology and medicine as they relate to healing, in so far as it will be contended that there are appropriate textual forms in both healing literature and in approaches to theological understandings of healing and wholeness. As fashions in writing have changed, so have our attitudes to healing altered to take account of a more open milieu in which theology can be developed. An example can be offered from the literature on healing by comparing two books by Maurice Maddocks. The first written in 1981 offers a traditional view of christian healing and develops exegetical definitions of wholeness<sup>18</sup>; the second is written several years later and has adopted an interest in Capra and in Pietroni, both of whom have developed holistic theories of medicine and of healing such as will be discussed in detail later. The contrast between the books illustrates the social or intellectual change which had occurred within the thinking of Maddocks within a short space of time. It shows how some healers were absorbing the major debate in secular alternative medicine<sup>19</sup>. The adoption of a distinct mode of discourse which has not previously been part of his discussions marks some kind of change or departure from his original mode.

An attempt to define 'discourse' must depend upon concepts which are amenable to religious analysis. There is a sense in which the numinous in religion may not be isolated in a discourse and must remain in the realm of subjectivity. However the next two authors to be cited suggest solutions to this problem. First, Kenneth Burke will be used to illustrate a subsequent analysis. He offers two insights which will be developed in the final analytical chapter VIII. He identifies three 'orders' of words which describe objects in different modes of discourse: 1) words for the natural realm - tree, sun, .....; 2) words for the socio-political realm - good, justice, American; 3) words about words - "Here is the realm of dictionaries, grammar,

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<sup>17</sup> Ricoeur, P., *op cit.*

<sup>18</sup> Maddocks, M., The Christian Healing Ministry, SPCK, London, 1981.

<sup>19</sup> Maddocks, M., Journey to Wholeness - A Biblical Pilgrimage to Health and Healing, SPCK, London, 1995, Ch.3.

etymology ..... - all that I would like to think of as coming to a head in the discipline I would want to call "Logology".<sup>20</sup> He then argues that there must be a fourth order:-

..... words for the "supernatural." For even a person who does not believe in the supernatural will recognise that, in so far as the purely empirical facts of language are concerned, languages do have *words* for the supernatural.<sup>21</sup>

Talk about God requires words which denote the 'ineffable' and which can be used and understood by believers and non-believers alike. Thus, theology becomes a specialised discourse which in its academic milieu may become broken into smaller areas.

Second, discourse implies knowledge, and it is quite difficult to combine different types. This is particularly so in the case of religion. Faith is neither a matter of objective fact nor an opinion which is susceptible to argument. Scheler was one of the first sociologists of knowledge to attempt to classify types of knowledge, principally in his book *Problems of a Sociology of Knowledge*. Deeken extracts the three main types: 1) control knowledge (*Herrschaftswissen*); 2) essential knowledge (*Wessenswissen*); 3) salvific knowledge (*Erlösungswissen*).<sup>22</sup> The first includes everything we use politically (including medical practice and ethics); the second consists of practical and scientific knowledge and suggests an ability to dominate nature; and the third consists of our religious experience and knowledge. The potential for cognitive and ideological conflict is enormous, and these three types cover the range of this enquiry. Scheler begins his characterisation very briefly before going on to a study salvific of knowledge.<sup>23</sup> What may be of importance to us is the way some religious groups eschew control knowledge (political matters) whilst the Iona Community embraces it. In sum, a mode of discourse as it evolves, always has the potential to be exclusive but may equally be inclusive of other modes; and it is

<sup>20</sup> Burke, K., *The Rhetoric of Religion - Studies in Logology*, UCLA Berkeley, London, 1970, p14.

<sup>21</sup> *ibid.*, p15.

<sup>22</sup> Deeken, A., *Process and Permanence in Ethics: Max Scheler's Moral Philosophy*, Paulist, New York, 1974. p225.

<sup>23</sup> Scheler, M., *Problems of a Sociology of Knowledge*, RKP, London, 1980, p50ff. First published in German in 1960.

always the product of the mind-set of those who 'own' and set the boundaries which may embrace dialogue or eschew it.

### **Burke's Dramatism**

In what appears to have been his seminal book, *The Grammar of Motives*, Burke examines the intentions behind the rhetoric of discourse. Using a metaphor from drama, he suggests five components to the motives behind a pronouncement: act, scene, agent, agency, and purpose.<sup>24</sup> If this 'pentad' is applied to the subject of Divine Healing within the Iona Community, the following scheme may be posited:-

<u>Act</u>	<u>Scene</u>	<u>Agent</u>	<u>Agency</u>	<u>Purpose</u>
Healing	Healing Service	Member	Iona Community	Healing in a certain narrative

It should be noted, for correctness, that 'agent' has no theological connotations, i.e., the member of the Iona Community is not a substitute for God! Such a scheme could be replicated for any alternative medicine or theological persuasions. It is the language used and encouraged which defines the discourse and gives subjective purpose to the member.

There are other ways of defining discourse. Pietroni employs 'key words' to help explain and identify language forms. He also lists key authors in his headings but this is inappropriate at present. He follows with a brief description of each of his eleven language forms. In so doing, Pietroni is not claiming or creating eleven arbitrary boundaries but is suggesting modes of thought which are acquired and may govern others.<sup>25</sup> What he identifies are genres of literature which may be used by health care professionals in their chosen disciplines. Pietroni's methodology finds discourse in these differing genres of literature in the medical world, and his plea is for sufficient reflection amongst them to allow cross-fertilisation of ideas. Bernstein long ago

<sup>24</sup> Burke, K., *Grammar of Motives*, UCLA, London, 1969.

<sup>25</sup> Pietroni, P.C., *Towards reflective practice - the languages of health and social care*, *Journal of Interprofessional Care*, Vol.6, No.1, 1992. The eleven languages are:-  
 Medical/molecular/material; Psychological/psychosomatic/psychoanalytical;  
 Social/cultural/epidemiological; Anthropology/ethnology/ethnology;  
 Symbolic/metaphorical/archetypal; Natural/energetic/spiritual; Prevention/promotion/education;  
 Environmental/ecological/planetary; Legal/moral/ethical; Research/evaluation/audit;  
 Economic/administrative/political.

drew the distinction between different types of linguistic codes in education, distinguishing between 'restricted' (high lexical prediction) and 'elaborated' (low lexical prediction) which allow more personal creativity. Bernstein wrote at the time when C. P. Snow's 'two cultures' of science and arts was in vogue, and he made the following pertinent observation:-

C. P. Snow's<sup>26</sup> two cultures may be related to the experiences differentiated through these to modes of an elaborated code. To be able to switch from one mode to the other may involve a recognition of, and an ability to translate verbally, different orders of experience. It may also involve a recognition of, and an ability to manage the different types of role which the modes of speech promote.<sup>27</sup>

It is one of the main aims of this dissertation to illustrate conditions where people may traverse two modes of discourse, one of which is an elaborated code about God's power to bring men and women to health and wholeness, and others which deal in medical terms. It requires a particular theology and belief to be able, or willing, to accommodate both.

### **Openness**

In choosing to concentrate on openness, it is important to stress that it is a characteristic, and not a conceptual aim, of the way in which the Iona Community conducts its business and healing in particular. The key to understanding any theological/ecclesiological movement is to look for its common characteristic, which it either exploits or is influenced by. Percy has undertaken a study of Wimber and his network of Vineyard Ministries. He analyses the essential characteristic of this movement in terms of power; the power of God and the power of the movement. His theoretical framework is an understanding of a) the sociology of organisations, and b) Weber's understanding of charisma<sup>28</sup>. He argues that fundamentalist theology of the type which Wimber exploits depends upon demonstrating God's power through "signs and wonders". Healing is an obvious example of this and is manifested in

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<sup>26</sup> C. P. Snow first mooted 'the two cultures' in the Rede Lecture in Cambridge in 1959. It was published as The Two Cultures and the Scientific Revolution, CUP, Cambridge, 1959, which went to several reprints. He revisited the subject several times in the 1960's.

<sup>27</sup> Bernstein, B., Class, Codes and Control - Volume 1, RKP, London, 1971, p133.

<sup>28</sup> Percy, M., Words, Wonders and Power - Understanding Contemporary Christian Fundamentalism and Revivalism, SPCK, London, 1996, ch. 3.

personal release from the burdens of serious illness, disability, etc. After a campaign of healing that acted as a vivid demonstration of God's power in a very personal and individualistic way, Wimber proceeded to develop the "Toronto Blessing" which allegedly shows the manifestation of the Spirit in the ecstatic behaviour of those who are smitten by it. It remains however a sociological manifestation of power:-

Sociologically speaking, the 'Toronto Blessing' represents his movement coming of age; it is able to demonstrate new and appropriate forms of power in ways which attract and astonish, without specific reference to its founding 'father'.<sup>29</sup>

The point about Percy's thesis is that it illustrates that a religious movement may be examined in terms of its dominant characteristic and that there is then scope to apply such insights to other movements. In his conclusion, Percy argues that the evangelical backlash against the ordination of women in the Anglican Communion is largely motivated by a fear of the dissipation of God's power by its dilution to "the weaker sex", and to an expansion of the cultural understanding of power<sup>30</sup>. He further argues that power is a negation of faith which is both spontaneous and illustrative of the love of God, shown through Jesus Christ. If his analysis is justified, it suggests that it is possible to hypothesise that any movement has its characteristics. For instance, would it be possible to examine the activities of Sai Baba, the Hindu guru in Hyderabad, taking account of his aims and the cultural setting? This dissertation has chosen openness as the guiding characteristic which leads to particular definitions of wholeness and healing within the Iona Community.

In terms of theoretical analysis 'power' can be understood in two ways. It can be a characteristic of a movement which is exploited for the purposes of that movement as in the case of 'power healing'; or it can be a sociological dynamic within relationships at a personal, social or political level. This dynamic is often characterised as part of the ideology of a certain movement and is often revealed by discourse analysis to such an extent that most discourse analysis attempts to be analysis which reveals this dynamic, for instance in the examination of press coverage and bias. In this dissertation we choose not to dwell on power which is not relevant to Divine Healing

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<sup>29</sup> *ibid.*, p152.

<sup>30</sup> *ibid.*, p160.

within the Iona Community. Of course it must be acknowledged that there are power politics within the Iona Community but these are very seldom relevant to our purpose and almost never capable of documentation. Some informants have actually offered stories about these power games which they have asked to remain confidential.

Openness will be explained in the context of the six chosen modes of discourse in this Chapter, but, for the present, a brief definition in terms of health and in theology will be offered. Healing and wholeness are very personal and therefore must arouse considerable emotion and feeling. Benor cites some fourteen reasons why people fear alternative, particularly spiritual healing, and undergirds most of his projected reasons with the theme of Western materialism. Most people like to see something happen and to be offered explanations of the processes involved and have a projected outcome.<sup>31</sup> The response to illness is seldom the same and people have to rely on the resources which life has given them. Thus, deference to a doctor may be one response, enormous fund-raising and charity work another,<sup>32</sup> or a desire to take complete personal control yet another. Penny Brohn,<sup>33</sup> for instance, who suffered from breast cancer, was prepared to listen to oncologists, dieticians in Germany, healers in Mexico and spiritual directors in monasteries in Wales. However, she had a background in alternative medicine, an understanding family, money, and was extremely articulate. Not so the single female parent in the surgery with two toddlers and unused to discussing anything with a professional. It is of little surprise that study after study highlights the fact that those seeking alternative health, even prayer, tend to be well-educated, middle-class professionals and executives<sup>34 35</sup>.

It is the contention of this dissertation that, as social factors influence health choices, so too does theological background open or restrict social choices which may be

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<sup>31</sup> Benor, D. J., *A Psychiatrist Examines Fears of Healing*, Journal of the Society for Psychological Research, Vol 56, No 821, October 1990, p287ff.

<sup>32</sup> Monteith, W. G., Disability: Faith and Acceptance, Saint Andrew Press, Edinburgh, 1988, p58ff

<sup>33</sup> Brohn, P., op cit.

<sup>34</sup> Buckman & Sabbagh, R. K., Magic or Medicine?, MacMillan, London, 1993. This book offers a good overview of the literature.

<sup>35</sup> See also as an example of research on the efficacy of self-help groups:- James, R., *High tech-high touch: the self-care group and the healing process*, Health Promotion, No. 3, Vol. 3, 1988.



dependent on theological experience or the self-imposed restrictions of one's established code. The broader one's experience is, or is permitted to be, the more ideas may be absorbed.

T. F. Torrance is one who has sought openness between theology and science but has always done so from a systematic theological position which is not the aim of this thesis. It is doubtful whether 'scientific theology' is systematic, but the followers of this method certainly do insist on systematic theology as their basis<sup>36</sup>. He defines 'openness' as a theological system which "... must have an open revisable structure",<sup>37</sup> yet there remain theological thinkers who are divided by their value systems which open doors to other ideas or close them." Torrance's comments about openness do not actually stand up to close examination because he is referring to his very closed system of 'scientific theology'. Nevertheless, note how closely this quote could tie in with Bernstein's comments on C. P. Snow. These two strands help to define 'openness' both socially and theologically. Chapter III will show how the Iona Community depended upon Incarnational theology to open its channels of thought, be it in the realm of Divine Healing or nuclear disarmament.

### **Genres of writing**

It is now incumbent to identify a working method of identifying openness, in a way which will illustrate the characteristic in the writings of three members in particular and others. Bearing in mind that text or writing is one manifestation of discourse, it is important to identify the variations in styles of writing which may be of concern to us. What follows is firstly the delineation of styles and secondly an explanation of how they are employed by writers acknowledged in their fields.

One sign of openness lies in genres of writing used in the discussion of wholeness and healing. Before describing them in some detail, a word of explanation as to their choice is in order. The three theological types grew out of an impression that

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<sup>36</sup> See for instance in the 'Theology and Science at the Frontiers of Knowledge' series, edited by Torrance: - Paul, I., Science and Theology in Einstein's Perspective, Scottish Academic Press, Edinburgh, 1986

<sup>37</sup> Torrance, T. F., *Realism and Openness in Scientific Inquiry*, Zygon, 1989, Vol 23, No 2, p159.

theology motivates in one of three ways: either propositionally, through faith or by an eclectic understanding of the social gospel. The first could equally well be labelled orthodox, or possibly prescriptive, in that it does not offer a range of choices, but rather seeks obedience or disobedience to the proposition made. Barth might be an example of such a theologian, which would contrast nicely with Bultmann, who would be typical of the second type. Faith demands a decision in a variety of forms about Jesus. The social gospel is eclectic in that it seeks to find relevance for the Gospel in social and political affairs.

In the case of the three forms of modern medical discourse, a reading of Fritjof Capra's *The Turning Point* revealed that he has three major concerns which could be summarised in these chosen genres of writing. Many of the examples associated with 'humanistic practice' have been drawn from the recommended reading list of *The British Holistic Medical Association* (BHMA). This is particularly apt in view of Pietroni's involvement with the Marylebone Health Practice which is located within Marylebone Parish Church and has become a place of study for many who are interested in combining disciplines in healing. Were this dissertation not about themes relating to wholeness, holism, and holistic health practices, a seventh discourse would have had to be introduced covering scientific medicine.

Most relevantly, Pietroni has argued that the main barrier to inter-professional or interdisciplinary dialogue is the fragmentary nature of academic, in his case medical, discourse. He urges that medical workers should show more understanding and respect for the positions evinced by so many fields of discourse which are often held in highly charged ways and which may simply be due to lack of knowledge of another field. He also believes that adherence to a language form, biomedicine for instance, diminishes the professionals capability to reflect-in action, thus serving the holistic needs of patients. Pietroni hopes that by "..... exploring the nature of these languages and the mode of thought made possible by them, it may be possible to bypass the often highly charged discussions that occur ....."<sup>38</sup>

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<sup>38</sup> Pietroni, P.C., *Towards reflective practice - the languages of health and social care*, Journal of Interprofessional Care, Vol.6, No.1, 1992, p7.

Pietroni's paper is essentially a review article which leads to a conclusion, which is quoted in the previous paragraph. This paper is not propounding a theory, but illustrating the cause and effect of the fragmentation of medical discourse. The model which this thesis puts forward should similarly not be regarded as a theory, but rather as an illustration of a conviction that openness is inseparably associated with eclecticism. The model is really only intended to come into its own in Chapter VI, during the analysis of the respective styles of three members of the Iona Community.

Education or a lifetime of specialising may make medical practitioners very jealous of their own specialisms, the traditions of their medical school or aware of a lack of eclecticism which professional commitments have eroded over time. Such should be the aim of the Pietroni's model.

It is wrong to imply that every writer who uses more than one is consciously doing so, but their eclecticism is there to be examined. Figure 3 illustrates six genres of writing and indicates the area of eclecticism. One could read 'liberal' for 'eclectic', but that would mean falling into the trap of using the traditional labels which we wish to avoid. It would also imply that more conservative writers were incapable of using different genres of writing which would be a false assumption. The following section describes the different modes by using authors not connected directly with the Iona Community, although in fact a number have been. Much of the discussions concerned with secular matters as modes four and five are chiefly the preserve of medical practitioners or those laymen with inquiring minds. It is these central modes which will be crucial throughout this dissertation.

Some of these modes were used by Schlitz in a PhD thesis. She makes reference to "American style bio-medicine, traditional 'bush' medicines, and complementary medicines, such as chiropractic medicine, faith healing, and the 'stress free recovery Carnival'."<sup>39</sup> It is debatable whether biomedicine should be employed as a seventh

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<sup>39</sup> Schlitz, M. J., Health Care Discourse and Practice: Power Relations And Social Space on St. John, United States Virgin Islands, 1917-1992, unpublished PhD. Thesis at Univ. of Texas at Austen, 1992.

See also: Perelini, O. J., A comparison of Jesus' healing with healing in traditional and Christian Samoa, unpublished PhD., University of Edinburgh, 1992.

Figure 3 - Genres of writing

1	<b>Theological Discourse</b>	2
	<p>Propositional Theology</p> <ul style="list-style-type: none"> <li>Atonement</li> <li>Reconciliation</li> <li>Obedience</li> <li>Salvation</li> <li>Morality</li> <li><i>shalōm</i></li> </ul>	<ul style="list-style-type: none"> <li>Faith</li> <li>Miracles</li> <li>Faith</li> <li>Decision</li> <li>Placebo Effect</li> <li><i>Sozein</i></li> <li><i>Apokathistemi</i></li> <li><i>Katherizein</i></li> <li><i>Therapeuein</i></li> </ul>
3	<b>Eclectic Discourse</b>	5
	<p>Theology in the Community</p> <ul style="list-style-type: none"> <li>Healing</li> <li>Blessing</li> <li>Forgotten</li> <li>Ministry</li> <li>Laying on of Hands</li> <li>Liberating</li> </ul>	<p>Humanistic Practice</p> <ul style="list-style-type: none"> <li>Biopsychosocial</li> <li>Biomedicine</li> <li>Humanistic Practice</li> <li>Systems</li> <li>Interprofessional</li> </ul>
4	<b>Medical Discourse</b>	6
	<p>Traditional Medicine (Cosmological)</p> <ul style="list-style-type: none"> <li>Traditional</li> <li>Interrelatedness</li> <li>Folk</li> <li>Shamanism</li> <li>Chinese Medicine</li> <li>Cosmos</li> </ul>	<p>Complementary Medicine</p> <ul style="list-style-type: none"> <li>Alternative</li> <li>Acupuncture</li> <li>Complementary</li> <li>Homeopathy</li> <li>New Age</li> <li>Chiropractics</li> <li>Herbalism</li> <li>[Countless Other Therapies]</li> </ul>

mode of discourse, and it must be conceded that it will always be present in the background, but it is interesting that this author does identify the two bottom modes from the diagram.

The models are not so much rigid constructs into which every theorist must be forced regardless of their intentions, belief systems or general relationships with the wider discourse concerning 'wholeness', but to encourage reflection on one's viewpoint relative to others. By discourse is really meant language and there are several antecedents for regarding language as a distinguishing feature of all divisions within social structure.

Theologians and churchmen, secular healers and spiritual healers, doctors and complementary therapists have so much invested in their own understanding of 'wholeness' or holism that they may fail to understand or acknowledge one another. In some instances it is considered better not to yield power to another group, even if this involves condemning a language which is assumed to be saying one thing but is often saying something different. The aim of any model would be to make such inconsistencies more obvious and more easily corrected. It is simple to identify propositional theologies of wholeness but it is the case, as Coward points out, that many alternative therapies related to cancer and stress can be equally prescriptive and moralistic<sup>40</sup>. In other words, differing theories slip in and out of modes very easily. She is very critical of the demands made on people to alter their consciousness and find little reason not to dare parallels with Christianity, God or the devil. To put it differently, the Bible calls for *metanoia*, secular groups seeking a change in consciousness, metamorphosis. It will only be after exploring the six genres of writing in Figure 3 on page 55 that real conclusions may be reached. Each will now be outlined in broad terms using secondary sources.

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<sup>40</sup> Coward, R., The Whole Truth: The Myth of Alternative Health

**1. Propositional theology. Key words** *Atonement, reconciliation, salvation, obedience, morality, shalōm.*

This type of writing comes nearest to a Kantian categorical imperative. With obedience to God's will come health and wholeness and writers in this mode do not hesitate to prescribe the correct relationship to God. Falling away from that relationship can become a source of dis-ease. This mode has historical antecedents when illness or the plague were considered to be visitations of God's wrath. Repentance warded them away or brought a scourge to an end. For a propositional perspective, *Health and Healing* by John Wilkinson may serve our purposes.<sup>41</sup> "Health is the wholeness of man's being and personality, and the holiness of his character and actions expressed in righteousness and obedience to God's law."<sup>42</sup> (cf. Murray in the discussion of George MacLeod, p 82) He chooses to depict NT views on health in terms of the moral qualities which stem from health. Health in the NT brings life and life abundant. It bestows blessedness and offers maturity to the holy. Wilkinson, who is a doctor and an ordained minister, understands the healing miracles in medical terms which are regarded as manifestations of Jesus' power to act with compassion towards those in need and pain. Jesus, in the traditional sense is the 'good physician'. The healing miracles are signs of the Kingdom and manifestations of God's glory. Wilkinson would not argue for a single or even several motives for the healings but always returns to Jesus' love being made manifest in the Incarnation and Atonement. The whole person is the one who gains health through the saving grace of Christ which offers spiritual health to the believer. Coward points out that many alternative therapies for cancer induce similar guilt trips if one deviates from their prescriptions.<sup>43</sup> Diet, exercise, coffee enemas (which, if abused, have been

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<sup>41</sup> Wilkinson J., *Health and Healing*, Handsel Press, Edinburgh, 1980.

<sup>42</sup> *ibid*, p7.

<sup>43</sup> Coward, R., *op cit*.

thought to cause death<sup>44</sup>), and meditation might be construed as a latter day form of self-mortification when their use becomes obsessive.

## 2. Faith.

**Key words:** *faith, miracles, placebo effect, decision, sozein, therapeuin, katherizein, apokathistemi.*

Faith and prescription are not mutually exclusive but faith is more dynamic and may be reached in a variety of ways. People sought out Jesus in a variety of ways and the consequences depend very much on one's hermeneutic. Faith can also imply motivation which raises many issues of why do people seek alternative therapy. The literature on this is immense. A good overview of this can be found in *Magic or Medicine?*<sup>45</sup>. Some theologians, Lambourne in particular, regard the miracles as illustrative of faith for the sake of catechumens, whilst others would point to the restorative power of faith itself. The BMA and others who write of 'faith-healing' tend to lump such practices in with other alternative therapies much to the annoyance of such writers<sup>46</sup>. The power of physicians and therapists to engender faith in their patients is the link with secular issues of faith and wholeness and with model five which is outlined below. This is classed as the 'placebo effect' and is an element of faith which is well known to chaplains and physicians alike. Goldman uses this phenomenon as an apologia for faith<sup>47</sup>, whilst Davis argues that the hospital chaplain plays a major role in boosting faith by their approach to presenting reassurance to patients<sup>48</sup>.

The third genre, *Theology in the Community*, begins on the next page.

<sup>44</sup> Congress of the United States, Office of Technology Assessment, Unconventional Cancer Treatments, Washington, DC., 1990, p45ff.

<sup>45</sup> Buckman, R. & Sabbagh, K., Magic or Medicine?, MacMillan, London, 1993.

<sup>46</sup> BMA Board of Science and Education, Complementary Medicine, OUP, Oxford, 1993, p5.

<sup>47</sup> Goldman, N. S., The Placebo and Therapeutic Uses of Faith, Journal of Religion and Health, Summer, Vol. 24, 1985.

<sup>48</sup> Davis, K., Medicine and Theology: Partners in Holistic Health, Journal of Interdenominational Theological Centre, No. 1, Vol. 13, 1985.

### 3. Theology in the Community.

**Key words** *ministry, blessing, healing, laying on of hands, forgotten, liberating.*

There are many in all wings of the Church who believe that not only Christ but the prophets command and oblige the Church to “heal the sick”. The healing ministry is a sign of the kingdom and it is given to the Church as a gift to be held individually and collectively. Those engaged in such ministries tend to be critical of those who are not, and are also likely to have an ambiguous relationship to secular healers. It is when these ministries become so formalised that concerns for ethical standards and institutionalisation begin to play a part in planning. As we will see when examining the work of Stewart MacGregor, politics, religion and a working environment are often combined in this type of approach.

### 4. Traditional Medicines (cosmological).

**Key words** *traditional, folk, Chinese medicine, shaman, cosmos, interrelatedness.*

An analysis of traditional medicines show holistic views of health in relation to particular views of the cosmos and social relationships. Kaptchuk sums up Chinese medicine thus:-

The Chinese world-view is circular and self-contained. It imagines that the universe is a whole, a macrocosm, made up of the constant unfolding and flux of Yin and Yang. Chinese medicine, like Chinese thought in general, begins and ends with this notion of a whole, within which all parts are related to each other and also to the whole. The Chinese physician begins with a knowledge of the whole, made up of countless details codified in traditional medical texts.<sup>49</sup>

This genre flows over into the sixth; but interestingly also extends to any of the religious literature types. For instance, Appiah-Kubi argues that the Church in Africa must take account of traditional medicine and find ways of accommodating it within

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<sup>49</sup> Kaptchuk, T. J., *Chinese Medicine: the Web that has no Weaver*, Rider, London, 1983, p256.

their orthodox medical establishments.<sup>50</sup> J. V. Taylor makes the point plausibly that Christian missionaries in Africa must regard the Bible as being interpreted with cosmological implications for healing of relationships and illness within the local society. The Westerner cannot shy away from the everyday interpretation of the Bible which so many want<sup>51</sup>. The other genre has been alluded to already in the mention of *kampō* which thrives in a marriage of East and West in Japan.

### 5. Humanistic practice.

**Key words** *biomedicine, biopsychosocial, systems, humanistic practice, interprofessional.*

This genre simply deals with all who practice medicine in ways which eschew reductionism and look at the 'whole' person in the context of the multi-disciplinary medical care which is available. Papers are produced which claim that through Christ, Christians also treat the 'whole' person.<sup>52</sup> The difficulty is that there is no unequivocal definition of 'wholeness' to unite the last two sentences. This is a distinct mode; yet it may also be the point of unity.

### 6. Complementary Medicine.

**Key words** *alternative, complementary, New Age, acupuncture, homeopathy, herbalism, chiropractics, (countless other therapies).*

For some, complementary medicine is holistic medicine. The evidence to support such a statement is spurious being based on the amount of activity by both patient and therapist. Complementary therapists give the impression of sparing more time for the 'whole person' and this is reinforced by the extent to which patients are willing to take responsibility for their own recovery. Penny Brohn spent years travelling the world, subjecting herself to horrendous 'cures' and offering, and gaining, support

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<sup>50</sup> Appiah-Kubi, K., *The Church's Healing Ministry in Africa*, Ecumenical Review, Vol 27, July, 1975.

<sup>51</sup> Taylor, J. V., The primal vision Christian presence amid African religion, SCM Press, London, 1963, see conclusion. See also: Taylor, J. V., The go-between God the Holy Spirit and the Christian mission, SCM Press, London, 1972.

<sup>52</sup> Davis, K., *Medicine and Theology: Partners in Holistic Health*, Journal of Interdenominational Theological Centre, Vol 13, No. 1, 1985.

from fellow sufferers at the Bristol Cancer Care Centre.<sup>53</sup> This area in its entirety is an area of activity and very little passivity. The BMA has made tentative moves in the direction of recognising and using certain complementary therapies, and accreditation processes are likely to continue for some time<sup>54</sup>. Much of the popular literature on complementary medicine emanates from impressions of California, where therapies have a unique and apparently dominant popularity<sup>55</sup>.

### **Cohesion and Coherence**

In order to defend openness against charges of being too willing to accommodate the pluralism which is represented above, a theory of coherence will be developed in Chapter VIII in order to show where legitimate links can be made between theology and alternative healing methods. This preliminary discussion sets some of the philosophical parameters. Wholeness is the subject of a search by many groups who start from a common root but are divided by their differing epistemological approaches. So be it - that is the nature of every debate. However, this dissertation pleads for tolerance and a calm acceptance and understanding of the structure of a group's position. The conclusion will attempt to develop the advantages of such an attitude, but first an introduction to the concepts of cohesion and coherence is necessary. The former will actually receive scant attention because it is concerned with internal structures. Frawley argues that cohesion describes how a theory is constructed within itself. An analysis might examine the use of conjunctives in its construction<sup>56</sup>. The more ideas which are added to a theory by conjunctions, the more the theory appears to be a shopping list and thus likely to lack coherence. To attack or criticise a theory for its lack of cohesion is difficult because there is an implied illogicality in it. If a group admits an error, it must revise its entire position

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<sup>53</sup> Brohn, P., Gentle Giants, Century Publishing, London, 1986.

<sup>54</sup> BMA, *op cit*.

<sup>55</sup> Shaef, A. W., Beyond therapy, beyond science: a new model for healing the whole person, Harper, San Francisco, 1992.

<sup>56</sup> Frawley, W., Text and Epistemology : Vol XXIV in series 'Advances in Discourse Processes', Ablex Publishing, Norwood, N. J., 1987, p96ff.

which, in the case of Christians with deep seated convictions, may be extremely painful.

Turning to coherence, the object is to describe how a theory presents itself to the world. Here, we shall argue that groups within the Church should learn differing structures, realise that we live in a pluralistic culture and cease to allow a lack of understanding to develop into fearful threats to each other's integrity.

If a scheme asserts that "all cats are black", and then the writer is confronted by a grey cat, does it follow that the scheme falls? The theorist has three choices. He can a) reject his original theory; b) modify the theory; or c) refuse to take account of the new observation. One of the problems, is that practitioners of complementary medicine often employ tactics *b* and *c* when faced with difficult cases.

Logically, every holistic theory does not have to be empirically scrutinised. Quinton argues that in a simple theory of coherence statements must have their own internal logic in order to meet the criteria of coherence but may not have to be empirically verifiable or justified.<sup>57</sup> In a stricter theory of coherence, any statement about 'grey cats' would not only have to cohere with the theory's internal logic but also be justified by independent rules outwith the theory. Such a position has been advocated by Quine, who is quoted by Quinton, and makes many positions seemingly untenable including perhaps theology.<sup>58</sup> It is unreasonable to take the stricter position but by considering the first position, a guide to accepting holistic theories may emerge.

By taking the first position it may be possible to construct a theory of relativism in which different holistic systems may validly coexist. Such a project is important because Christians tend to be critical of 'New Age' therapies and are often unable to accept each other's holistic theologies. It cannot be argued that there are no grounds for criticism. Instead, the criticisms which must be made should be offered

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<sup>57</sup> Quinton A., The Nature of Things, RKP, London, 1973, p.217.

<sup>58</sup> *ibid.* p.216.

as resting on more stable ground. In like manner, practitioners and patients must not be allowed to feel that the truth of their therapy is unassailable.

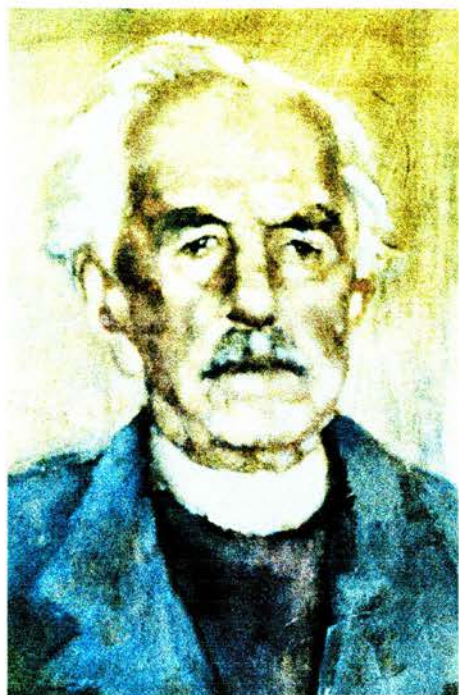
Individuals seldom conform to philosophers' strictures, nor in fact to religious ideals and dictates. In the conclusion, the philosophy of holism will be developed further, particularly in relation to social science. The purpose will be to show how people do actually juggle several approaches at the one time. In other words, in the field of healing and wholeness, 'grey cats' are not only welcomed but are petted by their devotees!

One further chapter will look at groups working outwith the Iona Community, but on Iona, in areas often associated with healing and wholeness. It is intended to use throughout a case study of 'Divine Healing' in the Iona Community and related activities to illustrate the theoretical issues raised in this introduction. Comparisons will be made with other theological and secular outlooks but no empirical control observations have been made.

This chapter has introduced three methods of dealing with or illustrating discourse. In the case studies which follow only one of the methods will actually appear in the chapter. The chapter on the writings of three members of the Community will utilise Figure 3 as a foundation, whilst the use of Burke's dramatism and coherence theory will appear in a theoretical foundation (Chapter VIII). The foray into the meaning of discourse is intended to act as a rationale and explanation of the discourse analysis which is used and explained in Chapter VIII, (*cf.* p193f and p208f). Thus, it can be seen that this thesis is basically concerned with discourse rather than healing. It is hoped that by considering narratives and definitions it will be possible to understand better how people approach wholeness in a church which either has inadequate definitions of the term, or ones which are inaccessible.

## George MacLeod's Contribution to 'Divine Healing'

Figure 1 - George MacLeod



From a pastel by Joyce Cairns, 1991.

Any study of the Iona Community will inevitably show a bias towards George MacLeod, his ideas and influence. In this particular case study, a Chapter devoted to his contribution is particularly important, because it involves so many contacts and influences which can probably be said not to be expected. It is these signs of eclecticism which makes this section of the case study so interesting. I believe that the healing service was initially the result of an accident of history and of those with George MacLeod associated.

The custom of holding regular intercessory services for named individuals or causes appears to have evolved rather than being a deliberate policy. No doubt it was spurred on by the outbreak of war in 1939, yet people sought more *quasi* historical reasons. The Founder, the Very Rev'd Lord MacLeod of Fuinary, adopted the need for healing by intercession and by the laying on of hands for a number of reasons which may be traced to his biographical circumstances and acquaintances or to the implications of his total theological outlook. He wrote at an early stage of his commitment within the context of the Iona Community:-

With the coming of the Community to Iona in 1938 there came requests for prayers for healing. These requests were always met. Prayers were made for the sick and a list put up in the Abbey of those for whom prayers were asked. Why did these requests come to Iona? They are often from people quite unknown. The memory of Iona as a place of healing was not dead. Men of old had come to Iona because it was a centre of Christian life. And it was when again there was an active life in the Abbey that requests for prayer came in again. It was not the place but the life that made prayer possible.<sup>1</sup>

<sup>1</sup> Morton, T. R., *Divine Healing, The Coracle*, July, 1952, No 22, p21.

MacLeod is an acknowledged giant amongst all the thinkers who are associated with the Community. His thought could not be suppressed nor his place in history denied, thus a chapter must be devoted to him. It is mainly a narrative of the influences upon him and his own formulation of the problems which surround 'Divine Healing', his chosen term. This account is the only one which could not be removed from the overall case study, yet it also the most difficult one in which to be critical in face of such eminence, but as we shall see in Chapter VIII, pages 261ff., the implied criticism of his lack of academic status is in many ways unjustified. There are five sections to this chapter.

George MacLeod often referred to Iona as the 'Lourdes of Scotland', occasionally negatively; usually positively, and used Celtic and Medieval history in a rather romantic way to back his arguments. As news about the Community's activities spread throughout England, he collected in 1949, for instance, the Coventry Diocesan newsletter that spoke of Iona as being akin to Glastonbury<sup>2</sup> and other such places.<sup>3</sup> Add to this the interest and writings of the MacLeod dynasty and also the publicity surrounding the island, and you have significant initial evidence that his wish might come true eventually. His use of S<sup>t</sup> Martin will be dealt with later, but the evidence of Columban involvement in healing owes more to folklore than fact. Scottish saints were supposed to have blessed wells and springs throughout the land endowing them with curative properties.<sup>4</sup> St Columba was no exception with wells in many sites on the west coast and islands. Last, Bishop Pococke reported in 1760 that the marble from the altar in the ruins of the Abbey during that century was often chipped away by visitors and hoarded for its healing properties.<sup>5</sup> There have always been anecdotes told of healings on Iona since the inception of the Healing Service. For example, in a private letter from the Rev'd. George Wilkie about a healing that took place in his

<sup>2</sup> Bowman, M., *Drawn to Glastonbury*, in: Reader & Walter (eds), I. & T., Pilgrimage in Popular Culture, MacMillan, London, 1993. Throughout the thesis Bowman is used as the authority on Glastonbury.

<sup>3</sup> *The Coventry Diocesan Leaflet*, Vol 2, No 1, January, 1948. George MacLeod and Iona Community Papers, National Library of Scotland, Acc9084/337.

<sup>4</sup> Hamilton, D., The Healers - A History of Medicine in Scotland, Canongate, Edinburgh, 1981, p84ff.

<sup>5</sup> MacArthur, E. M., IONA Through Travellers' Eyes, New Iona Press, 1991, p15.

parish after seemingly insignificant prayers on Iona.<sup>6</sup> In much later years the Iona Community Board saw fit to report the following healing:-

Iona continues to attract a wide range of people from different parts of the world. Many are attracted because of the worship, others because of the peace witness, and others again because of the healing ministry.

It was particularly satisfying to have a "thank you" recital given by Jurgen Hess, the internationally known violinist. Dr Hess had been ill for some eighteen months, afflicted by a polio-type disease, and he had been on the Iona prayer list. He felt strongly supported, and as his illness lifted he wished to begin his "come back" with a recital in the Abbey.<sup>7</sup>

Another example is recorded in a diary by a blind person, J. M. Hull, who found solace in the marble of the altar when one night he discovered it whilst exploring the Abbey in peace under the cover of darkness.<sup>8</sup> The difficulty remains that the Columban monastery was not a place of healing; the legends which abound were tied up with Celtic superstition; and Ralph Morton's assessment that the formation of the Iona Community probably triggered a dormant interest in healing and wholeness is probably incorrect. George MacLeod connected Divine Healing with the dominant theme of re-building in a report in 1952 which integrates healing with the Community's whole purpose:-

Many letters are received of thanks for answered prayer. Thus what might be called the sacramental activity of rebuilding the fabric [of the Abbey], and the rebuilding of the bodies of men, serve to inform with additional meaning the Celebration of Holy Communion itself.<sup>9</sup>

There is a general resistance to the idea of Iona as shrine throughout the membership of the Iona Community which may be due to a resistance of New Age ideas about ley lines, Druids and other healing activities, or because members feel that being on Iona is not an end in itself. (cf. Patrick MacManaway 136) John Harvey who was Warden of the Abbey in '70's relates how he was given the answer to the question, "Why is Iona so special?" by an Anglican Bishop in a discussion group on the Iona Prayer Circle. He said:-

<sup>6</sup> Letter from George Wilkie to Jack Bentley, August 1954, (typewritten copy), George MacLeod and Iona Community Papers [hereafter referred to as GM&ICP], NLS, Acc9084/337[M].

<sup>7</sup> Iona Community Board, Reports to the General Assembly of the Church of Scotland, Edinburgh, 1984, p.335.

<sup>8</sup> Hull, J. M., Touching the Rock, Arrow Books, London, 1990, p.163f.

<sup>9</sup> Editor (GFM), We Summarise Our Purpose, The Coracle, 1952, Nos 20 & 21(combined), p21.

I send names here not because Iona itself is special but because I know that over the years, week in week out, there are people living here who are committed to the work of healing and wholeness, in their life-style as well as in their prayer.<sup>10</sup>

All the evidence would suggest that the Iona Community became involved in healing in part due to theology, but mainly because requests for prayer from over the whole country and beyond swamped George MacLeod and his early members. However, such a statement should not be allowed to detract from his real convictions and faith.

To devote a chapter to George MacLeod's views on Divine Healing is fraught with methodological dangers; yet it is essential because by any standard he was the Iona Community from 1938 until about 1951 when the 'Govan Case' was resolved by the General Assembly of the Church of Scotland. Common sense dictates that he was the Community's voice during these years in letters, lectures and literature. This period saw the publication of his major book and in 1951 Ralph Morton, by then Deputy Leader, wrote in an edition of *The Coracle*<sup>11</sup>, "The Coracle has always been by Dr. MacLeod." George MacLeod had gone abroad and let go of the reins for the first time and the issue was rather self-consciously devoted to the absent MacLeod.

The problem of methodology is four-fold. First, apart from the above reference there is no evidence that our assumption of authorship is correct for some *Coracle* articles. Second, he, and he alone, seems to have invited others to contribute, such as Karl König, and logically they should be included in this chapter. Third, George MacLeod was like an intellectual magpie hoarding ideas from many scavenge hunts which means that his approach to Divine Healing seems to be quite unsystematic save in the context of the broader theology dealt with in the previous chapter. George MacLeod was neither a systematic theologian nor a particularly deep reader. " 'I don't know how it is with George,' said Archie Craig, 'he reads little - he hasn't the time to - but he seems to breathe important ideas out of the air'."<sup>12</sup> This comment, and warning, is no more apposite here than in an assessment of his theology of

<sup>10</sup> Finlayson, J. C., *Foreword by John Harvey, Launching Out: Christian Healing in Scotland*, Rev. J. Clarence Finlayson, 1994, p3.

<sup>11</sup> Morton, T. R., *The Coracle*, January, 1951, No 19.

<sup>12</sup> Ferguson, R., *George MacLeod*, William Collins, Glasgow, 1990, pbk ednt, p211.

healing. The fourth problem concerns chronology. Apart from obvious dates on which developments occurred or memorable events took place, his ideas evolved or virtually repeated themselves with some further elaboration or insight.

An explanation about sources is necessary at this point. An indebtedness to Ron Ferguson must be acknowledged first and foremost, as without his biography much more research would be required. Ferguson was responsible for cataloguing most of the GM&ICP but some still remain uncatalogued, significantly quite a number on healing. These files consist of miscellaneous correspondence, collections of leaflets and the like. There are collections of draft prayers and orders of service which are undated, often unpublished and of limited use. Also, significantly there are many scripts of broadcasts made on the BBC Home Service, Scottish or National, and also Overseas particularly during the war. Those sermons that relate to healing have been reprinted in various sources and there is only one specific reference to wholeness, broadcast in April 1957, as part of a symposium on *Making Modern Man Whole*. *The Coracle* may be treated in two ways. The issues during wartime were erratic due to the pressures of war, particularly the Community's involvement in Clydebank, and to paper rationing which either restricted the size or determined the timing of an issue. These issues are undoubtedly George MacLeod's and second, as noted, it was only in 1951 that the editorial input began to broaden. There are also numerous pamphlets by George MacLeod himself and records of the contribution of Godfrey Mowatt. These then are the sources upon which this chapter depends.

Oral evidence appears to be unreliable. It usually depends on memories which have a degree of truth, but lack a specific historic reference. Most such evidence is unattributable in part due to reticence, but also due to an awareness of its vagueness on the part of the informant.

A word of explanation is also required about language. There is absolutely no point in using gender-inclusive language at this point. According to a great many women, some of whom were spouse of members who were even banned from their husband's living quarters in the Abbey, George MacLeod had little time for women. Second,

he had no ecclesiology which offered them a significant place - the ordination of women was not yet an issue, and one of the Iona Community's main tasks was to train male ministers. There is a debate about whether Divine Healing was to become part of the Rule of the Iona Community. The evidence is purely oral but George MacLeod did record his desire that it might become part of the Rule of Women Associates of the Iona Community, which seems to be a very dubious departure from his allegedly inclusive theology.

In examining George MacLeod's views on healing and wholeness, it is wise to consider it under five headings: first and most briefly, his pastoral concern within his own parish and beyond; second, the social influences which affected him and the healers whom he respected; third, the effect of other thinkers; fourth, his own reflections; and fifth, his contribution to the debate about confession and absolution which is arguably his best. We have seen already that the Iona Community was swamped with requests for prayer on behalf of the sick. It would have taken a hard man not to respond to such a deluge, particularly at a time of war, but it seems that his interest started much earlier in Govan. This not only helped him further his interest, but also gave him innumerable contacts which were to be used in the coming years.

### **1. Pastoral Concerns**

Ferguson recounts many examples of George MacLeod's pastoral concern and kindness in poverty-stricken Govan, yet he makes very little reference to healing in his biography. Ferguson's concern is to portray his reaction to poverty and the Churches' inability to draw close and easily to those so alienated by their social conditions. The slums in which he worked in the thirties played host to many diseases.

Yet the war in which so many of his friends had died was supposed to safeguard a land fit for heroes, and here he was ministering in rotten slums amid people who were poor, hungry and affected by tuberculosis and rickets without the economic means to ensure adequate medical attention. He had seen poverty and hardship in Edinburgh, but Govan was on a scale which was difficult to comprehend. And where was the Church in all this? It was "no' for the likes o' us" said the Govan poor, echoing their Edinburgh counterparts. Except, that is, as a place of charity. After every daily service, there was a bench full of men and women seeking

handouts. George gave lots of his own money away, and kept an account open at the local chemist for those who required medicine but could not pay.<sup>13</sup>

Ferguson's account makes scant reference to Divine Healing during this period. Health, or rather, ill-health within the parish plagued MacLeod who was searching in many directions. His pastoral visits to the sick and dying were full of humorous compassion and practical solutions. Further research shows that he subscribed to, or received, copies of a weekly magazine published in London with the appearance of a wide circulation in the UK and America. There are only two copies of *The Healing Church* extant in the George MacLeod and Iona Community Papers, but they do point to an interest in what might be achieved. An issue for 1937 takes up the work at Milton Abbey which will be referred to again. There are two points in quoting from them: first, the description of Milton Abbey's aims eloquently describe some of his own; and second, a subsequent issue illustrates what a church might bring to fruition. Does not the following accord with many of George MacLeod's aspirations?

Part of the glory of Milton Abbey is the love and care with which it is being built. Nothing just happens, least of all the works of Christ. No social reform, no advance in the world's peace, ever takes place unless someone pays the price.

Sometimes we say, love cannot be bought and that is true. It is the free gift of God. But other things can be bought. Peace can be bought, and fellowship can be bought, and healing can be bought but only love can buy them.<sup>14</sup>

The other earlier edition of *The Healing Church* contains a large feature on the establishment of a church in Brighton devoted entirely to the healing ministry. George must have found this exciting to be able to read of huge services of healing, blessed by the Bishop of Chichester, George Bell, and presided over by John Maillard<sup>15</sup>, whose gifts were recognised as a significant ministry. To add to his excitement the magazine reprints newspaper reports from the *Evening Mail*, *Brighton Evening Argus*, *Daily Mail* and *Daily Express*. A feature of the magazine which would appear authentic today is an article by F. G. H. Salusbury, 'Cripples Gather to

<sup>13</sup> Ferguson, R., *George MacLeod*, William Collins, Glasgow, 1990, pbk ednt, p103.

<sup>14</sup> Maillard, J. (Editor), *The Healing Church*, Vol 8 No 48, Friday 17<sup>th</sup> December, 1937, London, p3.

<sup>15</sup> John Maillard was subsequently warden of Milton Abbey, Dorset. His main publication was: *Healing in the Name of Christ*, Hodder & Stoughton, London, 1936. His earlier book was: *The Sacrament of Healing*, Scott & Morgan, London, 1925.

be Healed by Faith', (sub-titled '400 Pray in the Church of Healing, "The Agent is God"'). Such spectacular reportage may have inspired George MacLeod and as we shall see later he annotated this edition agreeing with a comment on the theology of healing which seems to be the earliest that can be found.<sup>16</sup>

In order to build a bridge between this exacting parish scene and the more intellectual matters of wholeness and healing, it will be necessary to use Ferguson to show the connection between George MacLeod's ideas and other intellects within the Church of Scotland at the time.

Back home, his door at the Pearce Institute was ever open. The destitute poor of Govan made tracks for him, and the list of visitors from different parts of Scotland, seeking advice and inspiration, reads like extracts from a "Who's Who" of later Scottish church life.<sup>17</sup>

His hospitality attracted a list of future Moderators and men renowned for their intellect. "Men of the calibre of Duncan MacGillivray, Hugh Douglas, John Symington, Harry Whitley and David Cairns ensured that what happened in Govan would be the talk of the Church."<sup>18</sup> He persuaded David Cairns to become a volunteer worker and no doubt benefited from his learning from his time at Oxford. The point of quoting all these names is to suggest that this is where George MacLeod 'breathed' good ideas. He was not good at acknowledging his sources but there is little doubt that he used Harry Whitley and probably Principal David Cairns, whose son was working as a volunteer, who wrote a book on miracles in 1929 which suggested a new perspective on both the liberal and conservative interpretations.

## 2. The Social influences on Healers of the Time

It is characteristic of most healers to stress their success by recounting narratives and this is underlined by the examples given by people who influenced MacLeod. But first, today evangelical healers are apt to receive a calling and gift for the ministry of healing from very intense personal experiences which have little social content. This may be due in no small way to the apparent but erroneous feeling that the West has

<sup>16</sup> The Healing Church, Vol.6, no.5, Friday 1<sup>st</sup> February, 1935.

<sup>17</sup> Ferguson, R., *op cit*, p112.

<sup>18</sup> Ferguson, R., *op cit*, p114.

suffered little universal trauma, save for the Vietnam fiasco and the rise of international terrorism, in the last fifty years. For instance, Wimber describes how he became convinced of Divine Healing powers, in the Introduction to *Power Healing*, after his own son was cured after being badly stung by a neighbour's bees. Until that moment, he had resisted involvement in healing because of the possible Satanic influences of New Age medicine.<sup>19</sup> Just as such healers look to very private experiences, so also they trivialise and individualise Satanic forces in the absence of being subjected to the diabolical events and squalor which faced MacLeod and his colleagues. The group which influenced and supported George MacLeod were noted for their ordinariness, quiet and often unsystematic beliefs and gifts<sup>20</sup> which have spawned a rich literature on healing, particularly, concerning the English tradition. The group consists of the Rev'd J. A. C. Murray, MacLeod's brother-in-law, Godfrey Mowatt who was commissioned as the Archbishop of Canterbury's Missioner on Healing; several other Anglicans; and returning soldiers such as Ian Cowie whose contribution will be dealt with in the next chapter. All of them were active before World War II and some also in the Great War. Three things seem to have influenced those who were associated with the Iona Community and indeed further afield. First, the wars brought home the enormity of uncontrolled suffering. Godfrey Mowatt counselled shell-shocked and war-blinded soldiers,<sup>21</sup> George MacLeod often used horrific tales in sermons and lectures. One such must be quoted to show his understanding of the agony of the mind.

At an army boxing tournament in France, between two bouts, they led round the ring a soldier from hospital who had lost his memory. The hope was that from the Army Corps of spectators with whom he had served one man at least might recognise him, and so assist his cure. None however did. As the man, frustrated, was led down from the ring he threw out his arms and cried, "Will nobody tell me who I am?"<sup>22</sup>

Others simply came to Iona for solace after the trauma of war. Ian Reid suffered in the searing heat of the Sahara as a Desert Rat in the 73<sup>rd</sup> Anti-tank Regiment then was

<sup>19</sup> Wimber, J., *Power Healing*, Stoughton and Hodder, London, 1986.

<sup>20</sup> Harpur, *op cit*, p73.

<sup>21</sup> *ibid*, p81.

<sup>22</sup> MacLeod, G. F., *Only One Way Left*, Iona Community, 1954, p41.

later lost in France. His experiences are recorded in unpublished memoirs. Ian Cowie often refers with gratitude to the healing of Iona after being invalided-out.

Second, there was a reaction to both the excesses of the 'roaring '20's' and the poverty which inspired the Communist politics of the Depression, particularly in Clydeside. J. A. C. Murray, George MacLeod's brother-in-law, wrote in 1938:-

It is not that the merely economic disorders of the age are producing an aftermath of spiritual wreckage; it is rather the truth that successive forces are being let loose upon humanity with such repetitive strength, that men's minds, habituated for centuries to quieter things, are unable to withstand their shock. These forces have been, and are, so catastrophic, so apparently independent of the will, that the mind has simply no categories in which to place them, no precedent to which to relate them, and thus no knowledge of whither they are driving it, or what their future power of attack will be.<sup>23</sup>

Such a succinct yet devastating critique appears at the beginning of a large book on Christian Psychotherapy which was remarkably written in the Manse of Kerse, Grangemouth.

In 1951 L. D. Weatherhead, minister of City Temple, London, published *Psychology, Religion and Healing*, which in many ways had the same aims as Murray's earlier book, i.e. to extol the virtues of psychological training in equipping pastors for the pastoral ministry. The book is different in that it explores all methods of non-physical healing, including psychic healing which is critically but not negatively assessed<sup>24</sup>. Basically the book is an apologia for spiritual healing based upon faith and a firm conviction that religious conversion to the peace of God and the love of Christ was the correct way to an integrated personality, which term he prefers to wholeness<sup>25</sup>. He has a large section on healing institutions within the UK and devotes a few lines to the burgeoning healing movement on Iona<sup>26</sup>.

Something must be written about Godfrey Mowatt because he was the living link with England. In the absence of the biography written by his secretary, Kathleen

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<sup>23</sup> Murray, J. A. C., *Introduction to a Christian Psychotherapy*, T. & T. Clark, Edinburgh, 1938, p5.

<sup>24</sup> Weatherhead, L. D., *Psychology Religion and Healing*, Hodder & Stoughton, Bungay, Suffolk, 1951, p210ff.

<sup>25</sup> *ibid*, p461ff.

<sup>26</sup> *ibid*, p235.

Lonsdale, which cannot be traced in either the National Library of Scotland or the British Library, all the facts are gathered from the *Uncommon Touch* by T. Harpur. Son of a high-ranking civil servant, Sir Francis Mowatt, Godfrey Mowatt was born in 1874 and died in 1958. His influence on the Iona Community should not be underestimated, yet members' memories are often hazy and inaccurate. He was blinded by a childhood accident, so trivial to be cruel. Later in life his sight was restored by the fluke flick of a riding-crop in time for him to see his wife and first-born child. Godfrey slowly lost his sight again. He was walking in the garden one day when a stray airgun pellet shattered his glass eye embedding many fragments in the socket with consequently so much pain that his heart was affected causing pain which he carried for the rest of his life. In his early twenties, he began to have psychic experiences which at first he chose to ignore. However, when he failed to tell a house-guest to leave, she found that her brother had committed suicide when she arrived home, he vowed never to ignore such experiences of 'divine guidance' again. During a depression he received further 'divine guidance' to offer spiritual and physical healing to others and gradually his ministry developed. He was also decorated in 1935 for his work for blind people at home and abroad. On 26<sup>th</sup> March, 1943 when Mowatt was already sixty-eight the Archbishop of Canterbury commissioned him as his Missioner for Healing at a private service in Lambeth Palace.

A concern about social conditions cannot ignore ecclesiastical politics and the range of George MacLeod's contacts in England. Educated in England, he was quite at ease in Anglican circles. He delivered a series of lectures on preaching to a Cambridge College as the first non-Anglican to do so. They were published under the title of *Speaking the Truth in Love*. He had also accepted an invitation from William Temple when he was Archbishop of York to sit on a commission on social justice,<sup>27</sup> and was well-known in other ways by friends like Dick Sheppard, Vicar of St Martin's-in-the-Field, who was pioneering social work with down-and-outs in a radical way which is still characteristic of that church today. George MacLeod drew heavily on *The Churches' Council on Healing* which was founded by William

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<sup>27</sup> Ferguson, R., *op cit*, p129.

Temple's successor, Dr. Geoffrey Fisher, and was based in London. The backing of the Archbishop was crucial to developments in England. Add to this Fisher's commissioning of Godfrey Mowatt as his Missioner on Healing and we see a move away from individualism to a centrally sponsored ministry of healing which was not present in Scotland.<sup>28</sup> The by now distinguished leadership offered an *imprimatur* and led to the whole Church of England and to the medical establishment which was lacking in Presbyterian amorphism of Scotland. In 1937, the Synod of Dumfries successfully overtook the General Assembly to set up a committee which is clumsily titled *Course in Psychology*. In 1939, they delivered their report under the convenorship of David S. Cairns. The committee had four areas of concern: psychology, psychotherapy, spiritual direction and spiritual healing, of which the latter two are of immediate concern. In the committee's discussion of spiritual direction it recognises that "the new Iona enterprise" might afford a place of retreat for ministers during the summer<sup>29</sup>. This is a significant recognition of MacLeod's work by committee of the Assembly at an early stage. However two more important points can be extracted from their discussion of spiritual healing. Firstly, there is an acknowledgement that the church is divided on spiritual healing, to such an extent that they consider it unwise to proceed further. The committee makes reference to dispensational theology to back their argument (see Conclusion, pages 266ff)<sup>30</sup>. Secondly, they offer a number of illustrations of activities in England and acknowledge the help of *The Churches' Council on Healing*, amongst many other English bodies<sup>31</sup>. This would tend to confirm the fact that England was well in advance of Scotland at this time.

Around 1946, the *Churches' Council on Healing* attempted to integrate Wales and Northern Ireland into its membership but the only approach to Scotland at a meeting on 5<sup>th</sup> November, 1946 was to Dr. George MacLeod as a representative of the Iona

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<sup>28</sup> Harpur, *op cit*, p86f.

<sup>29</sup> Church of Scotland, *Report of committee on Course in Psychology, Reports to the General Assembly of Church of Scotland*, Edinburgh, 1939, p961.

<sup>30</sup> *ibid*, p962.

<sup>31</sup> *ibid*, p962.

Community which was 'doing such valuable work in Scotland'.<sup>32</sup> Two years later, George MacLeod proposed to a Working Group of the *Churches' Council on Healing* that the Church of Scotland and the Episcopal Church of Scotland be invited to join. In the case of the Church of Scotland, he suggested that an approach be made through Mr. David Russell (later knighted) who had long been associated with the Iona Community.<sup>33</sup> In the records which were kept by George MacLeod, there are more apologies tendered than presences registered. This seems a rather informal and circuitous approach and the Church of Scotland does not seem to have been quickly motivated by any association with the Council. In fact, there were to be problems with English bodies for many years to come. For instance, the then *Fellowship of Christian Healing* in Edinburgh received some correspondence from London which appeared to be insensitive to the Scottish situation, with the result that at the Annual Business Meeting in February 1960 they severed their ties with the London trust. The meeting "resolved to ignore them, and to sever the link with London." More importantly they decided to make themselves self-supporting. At an extraordinary General Meeting on the 22<sup>nd</sup> April they had to form a new trust with a new name, eventually choosing *Christian Fellowship of Healing (Scotland)*. As we have seen these difficulties never concerned George MacLeod who had so many contacts south of the border.

### 3. The Influence of Other Thinkers

Notwithstanding the influence of the above people and circumstances there are certain individuals who seem to have influenced George MacLeod's attitude to healing at various times. A number of these people appear to have broadened both his outlook and his approach whilst others taught him the potential of Divine Healing. It is hard to find references in text to their influence and it seems to have been more by association.

In founding the Iona Community, George MacLeod had a great deal to do with David Russell, who was a millionaire mill owner in Fife, but shared with him a love of

<sup>32</sup> Minute of *The Churches' Council on Healing*, (5/11/46). GM&ICP, NLS, Acc9084/337.

<sup>33</sup> Minute of *The Churches' Council on Healing*, (15/10/48). GM&ICP, NLS, Acc9084/337.

Iona. The history of his influence on the founding is outwith our remit but he brought to George's mind an understanding of Anthroposophy.

Anthroposophy will be further discussed in Chapter Six, but basically it is a philosophy which respects most world religions and finds a special place for Christ who is variously known as the 'Christus' or the 'Cosmic Christ'. Christ is within each person and Scriptures offer insights into his working although revelation also takes other forms. Chapter V will mention the influence of Sir George Trevelyan on other groups on Iona. It has been said informally that such was their influence that he actually wanted members to sign up to the movement. Anthroposophy basically was influenced by Rudolph Steiner and took a broader perspective on Christianity and other religions, which arose out of man's need to build religions to meet his spiritual needs. George MacLeod inquired of David Cairns in an attempt to understand the meaning and implications of their philosophy. David Russell, who was knighted later in his life, was greatly influenced by Wellesley Tudor Pole, with whom he corresponded almost every day, who having discovered psychic and healing powers during the Great War developed a mediumship which lead him into many areas of mysticism. He recounts his experiences in a book entitled *The Great War*,<sup>34</sup> including a search for hidden treasures associated with Glastonbury<sup>35</sup> which he undertook along with Professor Talbot Rice in Istanbul in a search for the treasures of Constantinople.<sup>36</sup> George MacLeod in his many negotiations over the rebuilding of Iona Abbey learnt of his beliefs and the healing powers which Tudor Pole had exercised during the First World War. Sir David Russell's main influence on the development of the Iona Community lay in the establishment of the Iona Fellowship which organised retreats for divinity students and was founded in 1929.<sup>37</sup> In other words distinguished churchmen were coming together ten years before the founding of the Community.

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<sup>34</sup> Macintyre, L., *Sir David Russell, A Biography*, Canongate, Edinburgh, 1994, p124.

<sup>35</sup> The story of Tudor Pole's connections with Glastonbury and Iona is recounted in Benham, P., *The Avalonians*, Gothic Image, Glastonbury, 1993.

<sup>36</sup> Macintyre, *op cit*, Chap. 11.

<sup>37</sup> *ibid*, p109f.

In the early days of *The Coracle*, there appeared three articles by Karl König under the overall title of 'Integration'. These articles were the manifestation of Anthroposophy within the Annals of the Iona Community and they were obviously invited by George MacLeod who also liked to use the term integration. König's second article was entitled *Integration in Medicine*. The third article which was also specific, dealt with agriculture. It is best to quote the short resumé of his life which was quoted in the *Coracle* and also roughly coincides with one produced at a later date by the Education Department in Aberdeen University in a report on Camphill School.

Starting his career in medicine in Austria, he was a materialist till he found it led nowhere. Influenced by the work of Rudolph Steiner he found rest at last in a spiritual interpretation of all things with its central Revelation in the Death and Resurrection of Jesus Christ. Previous to his enforced departure from the continent he had inaugurated a large home for backward (*sic*) children in Germany, with most remarkable results. His central theme is that there is unity in life that only Christ can reveal; and only as we submit to its rhythm can we be healed. He has recently set up a similar home at Camphill House, Milltimber, by Culter, Aberdeen.<sup>38</sup>

König had another call on the attention of George MacLeod. Along with various Anthroposophists he believed that there was a healing power in the observation of the cycle of Christian festivals. He explained this in a lecture which was reprinted retrospectively in a book giving Christmas a prominence which may have appealed to George who regarded Camphill as a "Christian community". The first quote explains his approach to mysticism:-

In times like ours where step by step the treasured secrets of human existence are unveiled, when sacred things are laid bare and naked before eyes unable to see or understand, it becomes rather difficult to speak the truth. It is difficult because the Philistines will immediately say that such truth is mere superstition long since disproved by Modern Science, and that to revert to such statements is to regress into pre-scientific mysticism.<sup>39</sup>

He specifically deals with Christmas, drawing attention to the wonder which the pregnancy of Mary and birth of Jesus means to the hearts of men and women. The interpretation is not particularly orthodox from a Christian perspective but it is Anthroposophically sound.

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<sup>38</sup> König, K., *Integration (Editor's introduction)*, *The Coracle*, No 6, June 1941.

<sup>39</sup> König, K., *Eternal Childhood*, Camphill Press, Whitby, 1994, p27.

Yet at Christmas, every year anew, the earth recedes into the silent background and other voices begin to speak. For ears that are willing to listen, the peace of the winter's night can become a wellspring of new messages. Spheres of spirituality may sound again and tell of the origins of the human being and of the way through pregnancy and birth. They will speak of the "other side" of all that today has become cheap knowledge and, in spite of being desecrated, still remains a mystery.<sup>40</sup>

Integration was in 1939 the nearest term to wholeness in the vocabulary of George MacLeod and it is reasonable to assume that it came from König. MacLeod was friendly with König and greatly admired his work with handicapped children in Aberdeenshire. He was not convinced by Anthroposophy but admired its radicalism in the face of the Church's inertia. Ferguson sums up MacLeod's attitude thus:-

Steiner had no place in his system for an external God: or for an internal one, for that matter. Man's spiritual nature was what mattered. It was one thing to see Anthroposophy as a legitimate protest against a lifeless Christian traditionalism which inhabited the ecclesiastical ghetto: quite another to claim that it could provide the scaffolding for a new Christian edifice.<sup>41</sup>

The term 'integration' was principally used politically and probably arose directly from conversations with König. The Community, or George MacLeod, was looking forward to the type of planning which characterised the Attlee Government after the war and particularly the optimism of Bevan in the area of health and housing. In actual fact planning for the new health service had taken a different turn from that in England, and could have developed along lines which would have been more in accord with both König and MacLeod. There appears to have been a move towards a holistic approach in planning for the NHS. The Cathcart Report of 1936 reiterated previous statements of belief in the general practitioner as the key to the treatment of the individual<sup>42</sup>.

...if health is a matter of the reaction of the individual to his environment it follows that the person who is to give him expert advice on health should be one who, to

<sup>40</sup> König, *op cit*, p.29f.

<sup>41</sup> Ferguson, *op cit*, p.191.

<sup>42</sup> The Cathcart Report brought into the public forum a debate about health in the community, with a great concern shown about housing and the workplace as causes of illness. It was the kind of debate that was characteristic of One-Nation Toryism and was probably well known by the subjects of this dissertation.

See: McLachlan (ed.), G., Improving the Common Weal - Aspects of Scottish Health Services 1900-1984, EUP, Edinburgh, 1987, p 75ff.

the greatest possible extent, is familiar with both him and his environment and that such a one is to be found in the person of the family doctor.<sup>43</sup>

The Dawson Report of 1920 had previously suggested the same vision of care in multi-disciplinary health centres. These visions were lost in the emphasis on the “big hospital” by Bevan in 1946. Yet it had a profound meaning in that it brought together different disciplines and demanded that people worked in a more eclectic fashion, be it in politics or medicine. In modern society, men and woman would not become whole until an integrated approach was made to eradicate the problem of multi-deprivation. Communist planning had to be tempered by a new radical socialism in place for the ‘returning soldier’ when peace was re-established.

König was actually much more enigmatic than MacLeod:-

What does Integration mean? To know and to recognise that the curtain is damaged by the pretensions of science in telling us that she is able to guide us to the truth. That the curtain is damaged by all our vain struggles to understand the pictures it presents to us. We could not understand them, but we destroyed them. We have to learn now that this curtain is one of which the word was spoken: “And, behold, the veil of the temple was rent in twain from top to the bottom.”...

One part of Integration is to fill our hearts with courage. The other part is to turn our faces toward the curtain. And the courageous heart will strengthen our hands and these hands will open the curtain. Not mend the old curtain, not mend the old torn pictures.<sup>44</sup>

Projects of modern technology, science and economics had separated man’s potential from the compassion and feeling which built healthy human relationships. His analysis had a Hegelian flavour to it similar to George MacLeod’s analysis which involved thesis, anti-thesis and synthesis which MacLeod used in many lectures. Science which had increasingly suffered from Cartesian dualism now required to be freed of its contradictions which had led to the disintegration of fascism and politics in general. His article on medicine really foreshadowed many of the criticisms of the sixties and, in particular, the work of Schön. Schön writes of the demise of absolute trust in professional knowledge and the inflexibility of traditional medical training and pleads for a training which produces a ‘reflective practitioner’ who can respond to

<sup>43</sup> Report of a Committee on Scottish Health Services 1935-6, Cmnd 5204, quoted in: Hamilton, D., *op cit*, p.254.

<sup>44</sup> König, K., *Integration*, *The Coracle*, No 6, June 1941, p29.

individual needs as a case develops.<sup>45</sup> By learning to 'reflect-in-action' a doctor may attend to problems which would otherwise have gone unnoticed in the mechanistic treatment of a single disease symptom. Such an approach, he believed, would result in an enhanced role for the beleaguered professional. To find similar thoughts appearing in the annals of the Iona Community in 1941 is quite remarkable. However, the sarcasm of König's second article on medicine fails to do him justice.

Basically, he argues the pursuit of scientific excellence has separated the practitioner's knowledge from his or her obligation of compassionate care; and the patient from the control and 'possession' of her own illness. Of medical students König wrote:-

The student has to follow a certain time-table drawn up by a recognised Board or Body and stick to that time-table as well he can. He must stuff his brain with thousands of facts, then sit an exam, afterwards empty his brain and clean it in order to make room for more thousands of facts and so on and so on until the finals come, after which the physician is baked and ready for use. The more science has advanced, the more the number of facts which have to be learnt has increased, and all the more exams have to be sat.<sup>46</sup>

He offers a gem of a put-down of nurses which is unacceptable, except that the conscientious nurse might argue today that they have too little time for inter-personal interaction with their patients.

The nurse is the ally of the doctor: the second in command. She does not know enough to become really humble and know that she knows nothing. She is as half-educated as the doctors are half-baked. And as she has the practical knowledge which is lacking in the doctor himself she is often the one who rules instead of the doctor. Many a time she knows more about the patients than the ward-doctor, as she has more intimate contact with them.

The highest ideal of the nurse - to be a humble servant - is today distorted into the very opposite. Instead of the servant the ruler and boss subconsciously emerge.<sup>47</sup>

König's wish to return to the Nightingale code was and remains inappropriate. His treatment of the patient is relatively brief but sentimentally pious. He quotes 1<sup>st</sup> Corinthians 13 using faith, hope and charity in a metaphorical fashion which is typical of Anthroposophy. However, he writes of the patient:-

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<sup>45</sup> Schön, D. A., *The crisis of professional knowledge and the pursuit of an epistemology of practice*, *Journal of Interprofessional Care*, Vol. 1, 1992, London. reprinted from C. R. Christensen with A. J. Hanson, *Teaching by the Case Method*, Boston, Mass. 1984.

<sup>46</sup> König, K., *Integration in Medicine*, *The Coracle*, No 8, January 1942, p19.

<sup>47</sup> *ibid*, p21.

The patient is never aware of the fact that the disease is not only a destructive process but also a creative act through which he can gain a new understanding of his whole life. He will never realise under the present circumstances - hospitals, doctors and nurses - that the disease opens a gate towards new spheres of experience and insight.<sup>48</sup>

König was making a very strong point about the patient's ownership of his or her illness. In integrated healing, the patient controls the way in which healing is experienced as a heightened spiritual awareness of all in his life. The significance of these articles may be lost in the mists of war, yet the search for 'integration' should not have been lost in the struggle to hold knowledge and experience as one freed of the dualism which had hampered mankind in previous centuries.

There is little evidence of any correspondence or exchange of ideas between George MacLeod and his brother-in-law, the Rev'd J. A. C. Murray. Two sources have said that George was devoted to his sister but tolerated his brother-in-law. The only evidence lies in MacLeod's use of Murray's statistics of mental illness and Murray's use, in his second booklet, of the phrase, "there is no such thing as dead matter..." which was thought to be exclusive to George MacLeod.<sup>49</sup> As is common in these booklets, there are very few acknowledgements and often no dates. Generally, the connection may only have to be surmised.

Murray was minister of the Tolbooth in Edinburgh and demitted his charge to take up work with the *Edinburgh Christian Fellowship of Healing* in 1954. In that same year he wrote another booklet, this time on the theology of healing. He offered very little practical advice and concentrated on 'Resurrection healing' as he called it, which was really a high doctrine of the Atonement. He also attempted to define wholeness. He suggested that the Greek words meaning salvation were more accurately translated by Wycliffe as 'health' but that the translators of the AV preferred the more spiritual words like 'save' and 'salvation'. He continues:-

The word Health in our tongue is the same as the word Wholeness, and both these words have the same root as Holiness. The truly healthy man, therefore, is a man who remains whole in mind and spirit as well as in body; indeed he is a Holy man

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<sup>48</sup> *ibid*, p22.

<sup>49</sup> Murray, J. A. C., *Fundamentals of the Ministry of Healing*, Guild of Healing, London, 1954.

in the true meaning of that word, because he is a man delivered and forgiven ..... who has attained salvation, or, as Wycliffe would say health.<sup>50</sup>

His social analysis referred briefly to economic conditions and to changes in family life. In response to these, Murray developed a judgemental and prescriptive remedy which was not characteristic of George MacLeod or, for that matter, subsequent directors of the *Christian Fellowship of Healing*.

Speakers were invited to Iona and the service of 'Divine Healing' developed out of these lectures. One of the first was, H. A. Madge, an Anglican priest in Dorset with family connections in Musselburgh who had written a booklet of Bible studies.<sup>51</sup> It represents a simple message of faith. Madge, or possibly his brother, spoke during the summer of 1945. Ian Cowie recalls:-

I arrived in Iona in 1945, newly invalided out of the army. I could hardly walk up to the Abbey. It turned out to be the first "Healing Week" led by Mr Madge. Although I'd felt the call to the ministry, I'd no church connection or experience. Healing and peace-making were very relevant to me and I naively assumed that this was what being a minister was about!<sup>52</sup>

Madge had been preceded in previous summers by a psychologist, and a healer.<sup>53</sup>

There is a general consensus among members of that time that the visits of Godfrey Mowatt were the most influential in developing the laying on of hands although it seems that the Community had a sketchy and inaccurate knowledge of his background. His enthusiasm for the work of the Iona Community was marked by his single focus on healing which he believed was going to become the central work of the Community. George MacLeod described the week in 1947 of his second visit:-

The main purpose of the week ..... was to prepare for and undertake a Service of the Laying on of Hands, guided by two principles of action. The first was an absence of any written propaganda; the second, that preparation should be devotional rather than analytical.<sup>54</sup>

<sup>50</sup> Murray, J. A. C., *Fundamentals of the Ministry of Healing*, Guild of Healing, London, 1954, p11f.

<sup>51</sup> Madge, H. A., *A Bible Study of Christ's Healing*, The Fellowship Press, Milton Abbas, undated.

<sup>52</sup> Cowie, I., *Healing at the Centre*, No 10, Vol 2, Feb-Mar 1983, p6.

<sup>53</sup> MacLeod, G. F., *Annual Report, circa, 1947*, GM&ICP, NLS, Acc9084/337[M].

<sup>54</sup> MacLeod, *ibid*.

Mowatt's lectures of, probably, 1946 were published by the Iona Community and are movingly devotional dealing with social issues, causes of stress but concentrating on the sacramental nature of the laying on of hands.<sup>55</sup> Although he stresses the paramountcy of faith, he acknowledges that it is the touch of Christ which heals. Carolyn Headley examines in detail the meaning of touch in the OT and NT. On almost every page she reminds the reader that it is the touch of Christ which is present in this formal setting and offers countless Biblical references. ".....it is the touch of THE LORD, and the stretching forth of *his* hand that is taking place and that brings healing."<sup>56</sup> Godfrey Mowatt makes it clear that to receive the laying on of hands requires courage to testify to faith, and the acceptance of God's forgiveness.<sup>57</sup> However, the sentiment which opened his belief system and broadened his epistemology from one which depended on faith alone came in an earlier lecture:-

.... many people think the word 'healing' means just the curing of some physical complaint, but Christ did not come into the world to heal only the comparatively few people He could meet in His lifetime. He came to free the world and to heal each of us from cruelty, selfishness, fear, and dread.<sup>58</sup>

In the wake of World War II, he awaited a revival which would act as "a great mission in the world now to heal the minds poisoned by Nazism."<sup>59</sup> He offered four lectures which were combined with personal counselling at other time. His first lecture took as a theme the theophany of Christmas and the good news of the Easter triumph to stress the need to celebrate the 'Healing Christ' in our midst.

I am with doctors day in and day out and have seen the lack of response to medical treatment from a patient who fears the future, or has some burden on his mind. But bring to him the realisation of the infinite mercy of God and the love of the Living Christ and an understanding of His real power to heal; and then, indeed, the patient does receive healing.<sup>60</sup>

It is noteworthy how different this is from König's theories which were offered in 1942. The spiritual is to the fore. A faith in the Healing Christ must be shared, nay,

<sup>55</sup> Mowatt, G., Iona Lectures, Iona Community, undated, GM&ICP, NLS, Acc9084/337. This was a published booklet but this is the only copy which has been found.

<sup>56</sup> Headley, C., The Laying on of Hands, Grove Books, Nottingham, 1988.

<sup>57</sup> Mowatt, *op cit*, p13.

<sup>58</sup> *ibid*, p7.

<sup>59</sup> *ibid*, p6.

<sup>60</sup> *ibid*, p8.

shouted from the rooftops. His second lecture dealt mainly with the Church and praised the English scene which has already been described. His third lecture was a preparation for the service of laying on of hands. His lecture is full of illustrations of how God can bring about healing, but concentrates on the need to have courage to throw oneself on the mercy of God. The lecture is entirely devotional and is meant to encourage the listener to retire into contemplation prior to the service. He sent his audience forth with the following words:-

..... let our thoughts rest in the Love of God, and ask that we may be worthy to receive such help and guidance, health and strength, as will enable us to bring others to an understanding of the Living Christ? The disciples were told to give the Laying on of Hands; and as you come to the service, accept it in that spirit, remembering that I am merely used as a channel to bring the Healing Power to you. What is more, the greatest thought of all: pray that you may receive that blessing which will enable you to bring real happiness to others and to lift suffering. God grant that we may be together in our prayers to-night and that His Healing Power will pour through to inspire and heal us.<sup>61</sup>

His last lecture seems to have two purposes, the second of which is slightly ambiguous. First, he talks very movingly about the power of prayer. Prayer can be very near and a sacramental view of healing can bring it even closer in the act of the laying on of hands, or being with someone in a time of need. In Chapter VI we shall see how Ian Reid describes prayer as drawing the person close to Jesus. Mowatt does likewise by recounting the story of the paralytic being lowered through the roof, and also from his own experience. The following example is perhaps the most moving and most telling in that it alludes to prayer and to healing in a most practical way.

If we can realise this power of thought and prayer in our ordinary lives, it becomes far easier to understand it in relation to the Divine and the Unknown, and I want to speak from my experience again. I was in touch with a man who was paralysed and who could only make very indistinct utterances, which it was agony for those who were talking to him to try to make out. He could not bear trying to speak to people because he knew how they felt, but I had the great advantage of not being able to see him with my material eyes, and he knew I was not looking at him. I went to see him often, and the time came when we could sit in quietness exchanging thoughts across the room. This exchange of ideas and thoughts was so real to him that he when he died, he asked in his will that I should give the funeral address, explaining that it was because he wanted to testify to this power of thought.<sup>62</sup>

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<sup>61</sup> *ibid*, p.20.

<sup>62</sup> *ibid*, p.23.

Lastly, did Mowatt teach anything useful about the wording of prayer? It seems that he offered to George MacLeod a lasting example of healing prayer, which MacLeod possibly incorporated into drafts of his own prayers for healing: "When praying for a person, I always say: 'Almighty God, I know of Thy Love; I believe in Thy Power; and I trust in Thy Mercy; let Thy Mercy be with this child of Thine'."<sup>63</sup> George MacLeod was ecstatic about the pull and the power of these services and very soon after 1947 introduced the laying on of hands as part of the Iona Community's service on a weekly basis. George MacLeod expressed his satisfaction with Godfrey Mowatt's 1947 visit thus in a report on *Iona And Healing*:-

On the last evening over 70 people came to an hour of private meditation prior to the service itself and considerably over 200 - more than half the total population of the island came to the Act of the Laying on of Hands. The fact that the only propaganda was by word of mouth removed the service completely from any atmosphere of sensationalism or even curiosity and there was a deep experience of the "physical" inflowing of God's mercy by many who came forward. As so often, the Act itself excited a deepened belief in Divine Healing among many who did not come forward and there is no doubt that had Godfrey Mowatt been able to remain, his time and gifts would have been further occupied.<sup>64</sup>

#### 4. George MacLeod's own Reflections

This chapter must now turn to George MacLeod's own reflections and writings rather than those things he chose from others. Did he believe in miraculous healing? Most certainly he did, but he and many other always stressed the ordinariness of Divine Healing and the fact that it was the natural extension of Incarnational theology - caring for the whole man or woman. Yet when the opportunity arose to demonstrate the power of Divine Healing, he would take it. This attitude was perhaps at odds with an influential book of the time written by his friend D. S. Cairns. In his book, he criticises the liberal tradition of the nineteenth century which dismissed the Gospel miracles as irrelevant, and those conservative theologians who regard miracles as 'evidential' episodes in the life of Jesus, evidence of his divinity and power rather than of the kingdom which he proclaimed. They represent a unity in the life and work of Jesus and should not be separated off as some mysterious adjunct.

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<sup>63</sup> *ibid*, p.25.

<sup>64</sup> Annual Report, *circa* 1947, (unpublished), GM&ICP, NLS, Acc9084/337[M].

..... it seems to me quite clear that we have here a coherent organic unity of thought. It is quite impossible, given the OT and Jewish presuppositions, to regard these signs of Jesus as something accidental and external to the rest of the record, if the teaching of the OT and New is as I have represented it; and if Jesus were what the Gospels suppose Him to be, the ideally pure and representative Man, and as such the Founder of the new order, then it was essential that He should work just such "signs" (to speak broadly and generally) as they represent Him to have wrought. These signs, therefore, are integral parts of the revelation of the ideal purpose of God for mankind, and therefore of His character. They must therefore necessarily influence our idea of God.<sup>65</sup>

Cairns is writing about the unity, the sovereignty and all-encompassing dominion of God through Jesus Christ which proved so important to George MacLeod and those who came under his influence. A 'non-evidential' approach to the healing miracles is so conducive to an open system of Divine Healing (the preferred term of the Iona Community, or, perhaps, George MacLeod) compared to an illustrative evangelical programme of healing. Divine Healing which was not actually favoured by some official bodies such as the Archbishops' Commission of the Church of England which commenced work in late 1953.<sup>66</sup> It made the point that all healing was 'Divine' and was not confined to simply an ecclesiastical setting. This is a point with which MacLeod surely agreed, but failed to address.

George MacLeod's approach to alleged miracles was of necessity anecdotal. There is the obvious example of the magazines which he collected on the subject of healing, but he was no doubt aware of the activities of a group of ministers interested in healing who met regularly in Community House. The House at 214 Clyde Street in the centre of Glasgow was a considerable asset for the Iona Community on the mainland which both facilitated their own work plus that of outside groups. For a number of years, Ralph Morton was Warden and probably presided over many of prayer meetings for the sick each Tuesday. One of the weekly groups was one of ministers interested in healing. It is uncertain when they started meeting and Clarence Finlayson only mentions a few by name. The group was convened by the Rev'd Fred Smith, an Englishman who had many contacts with the more advanced scene south of the border; whilst it was inspired by Cameron Peddie, a parish

<sup>65</sup> Cairns, D. S., *The Faith that Rebels*, SCM, London, 1929, p92.

<sup>66</sup> Archbishops' Commission, *The Church's Ministry of Healing*, *The Church Information Board*, London, 1958, p13.

minister in the east end of Glasgow. This group met with other professionals and interested laypeople and shared retreats on Iona, and at Milton Abbey in Dorset which was known as a house of healing with H. A. Madge as Chaplain.<sup>67</sup> How much influence this had on the Iona Community is hard to judge. Cameron Peddie's influence on the group cannot be overstated and is recorded in his autobiography, *The Forgotten Talent*. MacLeod only published one account of healing which appeared to be miraculous. In August 1954 the Rev'd George Wilkie wrote to a friend, Jack Bentley, describing the case of a twenty-two year old girl who for years had been "suffering from heart failure". Her liver was also in a dreadful state. On the night of the healing service during which she had been prayed for, she went through a crisis which was followed by an improvement. George Wilkie recounts the visit of the doctor, himself a member of the Church with no experience of Divine Healing, who said, "I'm beginning to think of this along your lines". Wilkie concludes his letter with the following comment:-

Even a man of my very hesitant type finds it difficult to disbelieve that here God has been active in our midst. There are many interesting features of the case, but one that immediately struck me when I heard of the case was that on the night on which we prayed for this girl in Iona Abbey we prayed for about 50 non-stop, without any clue being given as to their illnesses. I thought the whole service had been futile - as did others with whom I spoke. Now I wonder.<sup>68</sup>

George Wilkie was, and still is, slightly embarrassed by the fact that this letter was shared with divinity students at New College and several other audiences. It perhaps illustrates how George MacLeod got his material and used it sometimes recklessly. Ron Ferguson also reports an instance where George MacLeod experienced an instantaneous healing of a blind person.

There has been found in the George MacLeod and Iona Community Papers in the National Library of Scotland a long case study of a young man by the name of Paul. The document had written on it "not to be taken away", which suggests that it had been left out for some group to read. There is no indication of where it came from, but it was obviously prized by George MacLeod. The story is one of continual

<sup>67</sup> Finlayson, J. C., *Launching Out: Christian Healing in Scotland*, Rev. J. Clarence Finlayson, 1994, p11ff.

<sup>68</sup> Wilkie, G., *op cit*, GM&ICP, NLS.

mental deterioration over an extended period. Paul's relatives tried taking him abroad with friends and after finding no success he was admitted to a psychiatric hospital where his deterioration became much more acute. The narrator, presumably his mother, became increasingly convinced that he required spiritual healing.

As the weeks wore on and the illness still held him in its grip, we often thought of Godfrey Mowatt who had been licensed to heal by the Archbishop of Canterbury. Had he been alive we would have asked him to help. We felt increasingly that what Paul needed was spiritual healing and we decided to find someone who would be able to reach him on this level.<sup>69</sup>

The nostalgia with which she remembered Godfrey Mowatt must have appealed considerably to George MacLeod. Paul was moved to another nursing home and a physician and spiritual healer was invited to assist. He caused Paul more distress and greatly angered members of staff and was banned from visiting:-

The sister said Dr. [Nicholas] Armstrong was not to come I said, "Why not?", I had brought with him Dr. Williams approval. She told me Dr. Williams had said that Dr. Armstrong should never have been allowed in and was not to return.<sup>70</sup>

After much perseverance, Paul was allowed to continue to see Dr. Armstrong and he actually showed signs of improvement, indeed recovery. Dr. Armstrong found in Paul a deep longing to partake of the Eucharist in a particular Church, and on his discharge he gradually made a recovery free to exercise his spiritual yearnings. This very long story of which little has been abstracted reinforces several important beliefs which George MacLeod held and which appear below. First, he must have rejoiced in the nostalgia for the 'Golden Age' of Divine Healing. Second, this story illustrates the struggles which healers can have with the medical profession. Last, the story had a spiritual outcome which must have been very satisfying to any reader with a leaning towards Divine Healing. It however illustrates several points which might detract from its seeming success. As in almost every case of alternative therapy the patient, or in this case his mother, was in control in a very articulate, presumably middle class way, because the nursing home was private. There is also a feeling generated of sympathy for the 'conventional' members of the medical profession who come across as being harassed and harangued by this woman. All in

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<sup>69</sup> *The Story of Paul*, GM&ICP, NLS, uncatalogued, p11

<sup>70</sup> *ibid*, p15.

all, the story does indeed illustrate a seeming miracle which arises out of a desire for spiritual healing which authors have shown statistically is dominated by the highly educated upper middle class. Hufford in a review of literature before presenting his own case studies, argues that those seeking spiritual healing tend to do so on a rational basis and to come from the social group mentioned above.<sup>71</sup>

It is important to move now to George MacLeod's writing on Divine Healing, which is almost entirely in note form from the George MacLeod and Iona Community Papers or pamphlet form published by various sources which, however, tend to be repetitive in content. George MacLeod's most succinct statement of his faith in Divine Healing comes in note form, and has never in fact been published as far as one can tell. This is unfortunate as his statements are very concise and sum up everything he was going to say or write later. Authorship of these notes must be assumed, but appear to be his from the handwriting and style of nib which was used in correcting the type-written manuscript. Not for the first time such corrections or notes reveal more of his thinking. These notes consist of fifteen statements which are best either quoted or paraphrased. The full document is reproduced in facsimile in Appendix II.

1           The first statement is logically a foundation, and simply states that all healing is divine, and includes the actions of physicians, psychiatrists and even faith healers. He quotes Ambroise Pare:- "I dressed his wounds and God healed him". This statement is important because it lays down the foundations for his future openness to other kinds of healing.

2           This statement must be quoted in full:-

God does not will anybody to be ill; hence He *must* will all to be well, and it is not necessary to add, "if it be Thy will" to any prayer for health.  
[italics added]<sup>72</sup>

The 'must' in the above has been substituted for 'cannot', but nevertheless 'must' emphasises his very valuable point about the textual ending of prayers

<sup>71</sup> Hufford, D. J., *Epistemologies in Religious Healing*, Journal of Medicine and Philosophy, Vol 18, No 2 1993.

<sup>72</sup> George MacLeod, *A few notes on DIVINE HEALING*, August 1948, GM&ICP, NLS, Acc9084/337[M].

for healing. Many people would be astonished by his injunction against committing such prayers to God's will. If God's constant will is for health; it cannot be his will that anyone should suffer sickness.

Interestingly Maillard develops the same theological theme in the prologue to his second book<sup>73</sup>. He argues that health is part of the kingdom of God and therefore is always part of God's will.

The next four statements qualify the boldness of the former which on the surface appears incredibly difficult to accept, without asking difficult questions about God's providence.

3 He maintains that it follows that illness is due to some kind of "interference with or limitation of the purpose of God".

4 It might follow that sickness is a result of sin, but this George MacLeod denies because so much sickness in the world is caused by natural disasters, and climatic conditions which create deprivation.

5 Clause five is important because it introduces for the first time his ideas of the role of guilt, which was developed so fully by himself and echoed by many other members.

On the other hand, there are many illnesses, particularly of a functional nature, in which the disorder of the body is closely linked with the disorder of the mind, such as worry, anxiety, frustration, guilt, self-pity and self-centredness. They in turn are closely associated, either consciously or subconsciously, with sin, which is a disorder of the soul. It is this type of sickness which is most likely to benefit from spiritual as opposed to material treatment.<sup>74</sup>

This point contains the kernel of a central problem facing all Divine Healing: why is it that there is a predominate concern with the mind and with counselling rather than the physical? Again the answer lies in the cerebral nature of healing, and in the Christian emphasis on words to express all our feelings, even our physical sensations.

<sup>73</sup> Maillard, J., *Healing in the name of Christ*, Hodder & Stoughton, London, 1936.

<sup>74</sup> George MacLeod, *A few notes on DIVINE HEALING*, *op cit*.

6 George MacLeod should actually have placed six before five. Nevertheless, six states that human beings are limited and conditioned by their material needs and it therefore follows that health will be affected by their availability, and by our varying needs in different parts of the cycle of our life.

7 This point follows and refers to our responsibility for supplying material needs to all men, which is obviously a matter of political will.

8 The provision of such needs demands the labour not only of medical professionals, but all other workers to build or provide for our spiritual needs

9 Nine concerns wholeness, and places George MacLeod firmly in the field of a holistic person as defined by the trinity. We should note also the 'trinity' of professionals which coincide with and is reductive in an unhelpful way.

On the other hand, since man's nature is a Trinity of body, mind and spirit, there is a clear need for the closest co-operation between doctors, psychiatrists and ministers of religion, if the goal of health or wholeness is to be achieved.<sup>75</sup>

Thus far there have been nine points which have been logically fairly consistent and guided by some concept of God's providence. Many of the statements could almost be secular, or applied to a God which is almost free of Christian prerequisites. In point ten, we find that George MacLeod is almost becoming prescriptive, in that he asserts that without faith spiritual healing will not occur.

10 Reads thus:-

Faith is a necessary condition of spiritual healing. The hall-mark of such faith is not a conviction of physical cure but the conquest of fear, a surrender to God and a complete confidence in the reality of His love and the fulfilment of His purposes.<sup>76</sup>

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<sup>75</sup> *ibid.*

<sup>76</sup> *ibid.*

11           Very logically he proceeds to place faith in the context of the gospels in which Jesus commands that the sick are healed, and that all of God's people share in this ministry.

12           He then places both faith and the gospel commands in the context of the Church and argues that all bear this responsibility for divine healing, and for the use of their gifts, either as pastors or doctors etcetera.

13           In future writing George MacLeod is considerably exercised by the 'popular appeal', or sensationalism, of healing. This point flags up this concern and is completed by the next point, quoted below.

14           Thus:-

The danger of over-emphasis on physical cure is increased by the dangers of sensationalism, superstition and magic.<sup>77</sup>

15           His notes end with an assertion that the Doctrine of Divine Healing should arouse no opposition from any source. However he accepts that doctors, for instance, may suffer from professional jealousy. He goes on to argue that there may also be opposition from vested interests when the Gospel demands require peace and social justice. It has been pointed out that this last point basically serves to undermine the position of those who disagree with him. It will be shown in a later chapter that despite George MacLeod's apparent openness he came over to other people, such as Bruce MacManaway, as being rather monopolistic in his views on spiritual healing, claiming that such activity should be the preserve of ministers of religion. Such allegations are probably untrue but appear so because of his overwhelming presence and personality.

It has been important to devote so much space to this unpublished paper, but it really lays a foundation for all that follows. It also circumvents the need to explain every subsequent assertion, because his mind-set is present in these fifteen points.

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<sup>77</sup> *ibid.*

Just to emphasise that healing could be effected for good by non-Christian methods as outlined in the first point above, George MacLeod entered into correspondence, in the 1950's, with a Mr. L. E. Eeman of Baker Street in London. It started with an approach by the latter to the *Archbishop of Canterbury's Commission on Spiritual Healing* attempting to gain support for scientific research in NHS hospitals into the laying on of hands. Eeman, a healer for 36 years, wanted to confine his research to casualty patients who were bruised in the hope that the 'healing touch would remove the discolouration'.<sup>78</sup> MacLeod subsequently read one of Eeman's books, *Co-operative Healing: The Curative Properties of Human Radiations*, and became so convinced of 'Odic forces' (a term proposed in the mid-19<sup>th</sup> century by Baron von Reichenbach to denote electrical and electromagnetic forces within the body<sup>79</sup>), that he used the term several times in lectures. One prayer secretary admitted to using the term, Odic forces, in a healing service which was both odd and dangerous because she confessed to not knowing what exactly the term meant. It is doubtful whether Eeman's book was comprehended, as it is exceedingly technical and addressed to a scientific readership.

This correspondence coincided with Sir David Russell's decision to set up in 1951 the *Fundamental Research Centre* in London which was to investigate "new energy forms" in the treatment of cancer. Various other kinds of treatment were developed and were no doubt discussed with George MacLeod on many occasions as they were frequently corresponding during these years both about the Iona Community and, in 1954, about the Principalship of St Mary's College in St Andrews to which Sir David used to think MacLeod was suited. Sir David's friend Tudor Pole was working in the field of psychic healing at the time. He wrote of George MacLeod "In my opinion...George MacLeod is on very shaky ground when he says he cannot find any authority in the New Testament for the idea that healers in this world can be helped by those who have passed on, or by others in the Unseen World."<sup>80</sup> Sir David was very

<sup>78</sup> Eeman, L. E., letter to various hospitals re: Commission on Spiritual Healing, George MacLeod and Iona Community Papers in NLS, Acc 9084/337[pt].

<sup>79</sup> Kahili King, S., *Earth Energies*, Quest Books, Illinois, 1992, p38.

<sup>80</sup> Quoted in Macintyre, L., *Sir David Russell, a Biography*, Canongate, Edinburgh, 1994, p246.

interested in faith healing and presumably this was part of on-going correspondence both with George MacLeod and Tudor Pole. At this time a healer by the name of Harry Edwards circulated 50,000 letters to all ministers of religion in the UK, extolling the virtues of faith healing. George MacLeod was indeed always exposed to alternatives and to the reinforcement of conventional faith healers.

George MacLeod lectured on Eeman and his theories to New College students when giving his Presidential Address to the *New College Missionary Society*.<sup>81</sup> The point to be noted is that George MacLeod was willing to admit a variety of healing methods whether Christian or not.

In 1953, George MacLeod was nominated as third choice to be Honorary President of the New College Missionary Society. When he accepted he was asked to speak on *The Place of the Church in Today's Society*; however, on the 3<sup>rd</sup> December, he spoke on *The Place of Healing in the Ministry of the Church* which was subsequently published by the Iona Community. Apart from one other lecture in Geneva, there are only extant notes to build a picture of this aspect of his theology. The effect of Hiroshima and Nagasaki seems to be percolating through even to this subject. He has started talking about matter and energy and quotes from the correspondence with Eeman. He outlined his hope that Divine Healing would become the responsibility of the entire Body of Christ and of parish ministers in particular. He delivered two warnings to the students which are still worth repeating today. Faith in healing must never become individualistic or be regarded in isolation from all other matters of Christian faith. Second, George asserts again that you cannot pray for the healing of 'wee Margaret's T.B.' unless you also tackle the appalling housing which has caused it.<sup>82</sup> It is stories such as this one that emphasises his conviction that healing cannot be divorced from social action, as outlined in clauses six and seven of Appendix II.

In common with many others, MacLeod was always reluctant to define 'wholeness'. He did not copy his brother-in-law nor anyone else, and references in his literature are

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<sup>81</sup> MacLeod, G. F., *The Place of Healing in the Ministry of the Church*, Iona Community, circa 1954, p7.

<sup>82</sup> MacLeod, G. F., *ibid.*

both sexist and reactionary. However in April 1957 he broadcast a talk on the BBC Scottish Home Service entitled *Making Modern Man Whole*, it was one of a series in a symposium and MacLeod was billed as an evangelist. He talked mostly of the social conditions of stress, guilt and isolation. The intensity of living in 'modern Britain' had tended to fragment the human psyche and efforts must be made to reunite it. His method was simple and adopted a theme which he mentions more than once, basically he argues that "Psychologists say 'whenever two people meet - six people meet'". His script is frankly marred by a forced jollification, and yet we had better look at the six people. First there is you and me. There is then the person you think I am, and also the person I want you to think I am. He goes on, "behind these two shadow persons there is the real me. Now what we are dealing with, in being made whole, is the real you; the ultimate you: the you behind all the scaffolding you put up."<sup>83</sup> He offers three steps towards wholeness: honesty; an admission that we are split; and thirdly, that "this experience is quite universal". He then quoted a Pauline theology from Romans. The rest of the talk is anecdotal and not really worth quoting. He ends on a very evangelical note for a symposium of this nature.

That is, it is JESUS you must believe to be Lord. Jesus of the common way. Jesus of the earthly story. Jesus who showed His Majesty by lowliness and His kingship by washing the disciples' feet: this is He who is Lord. And you must believe He is Christ: and Christ means Saviour. How does He save? By forgiving us. And if we are to remain in a state of Salvation, if we are to continue to be wholeness, if we are to be Holy; we must forgive. It is good news but it is frightening and costly. We are to act in the Light of the Lordship of Jesus who forgives. Then are we saved from the Body of this death. Then no one troubles us - for assuredly if we act like this we will very soon carry in our bodies the marks of the Lord Jesus.<sup>84</sup>

There are also to be found many draft prayers and Orders of Service which will be discussed when liturgy is dealt with greater detail. It remains to deal with MacLeod's views on confession which necessitates covering much of the chronology again.

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<sup>83</sup> BBC Scottish Home Service, "Making Modern Man Whole", 18<sup>th</sup> April, 1957.

<sup>84</sup> *ibid*, p11.

## 5. Confession and Absolution

This section on confession and guilt illustrates MacLeod's most consistent contribution to Divine Healing and can be referred back to his *Notes* (page 90ff) where he marks his concern extensively in clause five.

On Sunday, 11<sup>th</sup> August, 1946, George MacLeod preached on 1<sup>st</sup> John 1: 8 & 9 and raised issues about confession which were to surface periodically throughout the rest of his ministry. Many of his ideas on this topic seem to have come from his friends and associates, but on this occasion he was inspired by Iona itself - "I wish you were on the island today.", he broadcast.<sup>85</sup> He took the listeners about three miles away from the Abbey to the Hermit's Cell on the West Machar where the *Anam Chara*, or The Soul Friend lived "...in loneliness, the better to advise the lonely of men". On approaching, the supplicant was reminded by boulders to pray a prayer of confession and another for an understanding of the hermit's counsel. George was to return repeatedly to the need to share one's burden of guilt with another, and found that his developed as his colleagues developed the theme of guilt.

Those who were engaged in 'Christian', or Divine, healing were also united by a reforming zeal. The church had to respond to the new social conditions and to scientific advance by asserting that which was truly Christian. This involved two strategies: 1) the reformed training of men (*sic*) for the new challenges which were presenting themselves; and 2) setting men apart by training and commission for the specialised tasks of psychotherapy and healing. The Rev'd Alan Murray, George MacLeod's brother-in-law, was one such writing in 1938. He regarded psychoanalysis as a tool which could be turned to the advantage of the church by bringing the truth, the Gospel of Jesus Christ into the minds of those who were distressed. His book, *Introduction to a Christian Psychotherapy*, showed a complete distrust of Freud, little more for Adler and some respect for the spiritual dimension of Jung, but trusted that with training in 'Christian psycho-therapy' a gap in the cure of souls would be met.

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<sup>85</sup> MacLeod, G. F., *One Aspect of Personal Religion: The Practice of Confession*, The Coracle, No 13, August 1946. p9.

At present he [the minister] can only direct the very few who have the money or the time to the nearest psychiatrist, and hope that he may not be a Freudian, who will send him back to life with his religious instinct well battened down and his spiritual experiences explained on sexual grounds. Others, who can afford neither time nor money, he [the minister] may help a little, if he knows the principles of Christian psycho-therapy, but he dare not go very far, lest he do irreparable harm.<sup>86</sup>

He found the Faculties of Divinity lacking in staff qualified to teach those who would be 'set apart' to conduct this new therapy. In common with many, he wanted to reform the shape and emphasis of the ministry. Psychotherapy, as later with Christian healing<sup>87</sup>, would provide a medium through which God's love might be brought to the minds of the distressed through the salvation offered by Jesus Christ. Clients would be offered true health by recognising that it has:-

..... other elements in it than the worldly, and there is a strange foreshadowing in the old usage which makes 'Health and 'Salvation' synonymous words.<sup>88</sup>

New schemes of training for skills which would revive the church were being advocated in ways similar to the training which his brother-in-law would seek to offer to candidates for the ministry on Iona. Murray, perhaps curiously by today's standard, studies conditions such as menopausal kleptomania which used to fill the columns of our local newspapers and engendered so much guilt in otherwise respectable women. To relieve such guilt through Christian psychotherapy was indeed a worthy aim of the new counsellors.<sup>89</sup> Prescription is the key to his treatment: as sex was to Freud, so the truth of the Gospel was to Murray. In *Fundamentals of the Ministry of Healing*, he devotes a chapter to "Resurrection Healing" which basically argues that through the resurrection of Jesus Christ, reconciliation with God had brought forgiveness. The booklet is, in fact, more of a theological essay than a guide to healing.

It is George MacLeod's interest in confession which must now be addressed. His interest spans many years but documents cover the period from 1951 to 1964. His

<sup>86</sup> Murray, J. A. C., *Introduction to a Christian Psychotherapy*, T. & T. Clark, Edinburgh, 1938, p263.

<sup>87</sup> Murray, J. A. C., *Fundamentals of the Ministry of Healing*, Guild of Healing, London, 1954.

<sup>88</sup> Murray, J. A. C., *Introduction to a Christian Psychotherapy*, p150.

<sup>89</sup> Murray, J. A. C., *Introduction to a Christian Psychotherapy*, p144f.

lack of acknowledgements make it difficult to trace the origins of his ideas and no direct references are made to his brother-in-law but they obviously shared a slight disdain for secular psychiatrists and George used to talk about 'psych-ee-atrists' in sermons. It is not easy to trace the key influences in his attitude to confession. He has very few references: an early one to the Rev'd Harry Whitley of St Giles Cathedral in his John Knox lecture and later a general recommendation that his readers should refer to Max Thurian to whom we shall return.

It is possible to postulate three general and diverse influences on MacLeod's thinking on his attitude to confession. First, he repeatedly refers to Alcoholics Anonymous whom he probably often met in Community House in Glasgow, devoting at least one broadcast sermon to one of them, Tom, in August, 1953.<sup>90</sup> In this, he alludes to the parable of the lost sheep by telling of how AA members will go searching for a member in trouble until he is found drunk in some pub. Sobriety is akin to sins forgiven; inebriation to sins 'retained' by the fellowship in love. Second, his deep pastoral concern for those in distress, particularly for his boys from borstal.

He [George MacLeod] was delighted when boys came back to see him, and he told the story of one lad who revisited the island. George had sensed that the boy had problems, and suggested to him that he might write down any burdens he had on a piece of paper and seal it in an envelop, before the laying on of hands.<sup>91</sup>

He and many members have commented on the fact that almost a majority of those who go forward for the laying on of hands carry not infirmities but some ailment of the soul, they almost seek a prescriptive remedy of their own making. One ex-member, who must remain nameless, called the act 'a holy cuddle'. George MacLeod pointed to guilt time after time.

Third, George MacLeod may have been aware of a quest in the fifties for a fresh understanding of the Reformers' attitude towards confession. Throughout Scotland, there was a very strong folk feeling that the teaching of the Roman Catholic Church on confession was superstitious, inquisitive and priestly. Such views must surely

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<sup>90</sup> MacLeod, G. F., "*The Man who for Twenty Years has shown he was a Sinner*", *Four Men and Our Faith* (second of five sermons, broadcast from Iona, August 1953). Subsequently Iona Community publication, n.d.

<sup>91</sup> Ferguson, R., *George MacLeod*, William Collins, Glasgow, 1990, pbk ed., p203

have motivated many fair-minded Protestants to explore the truth. It has been noted that he referred readers to Thurian, but he might also have consulted McNeill's *A History of the Cure of Souls*. McNeill prefaces his work by emphasising that the 'cure of souls' is about health of the body as much as of the soul or personality. Like others, he stresses that a healthy personality/soul may be possessed by someone with the most dreadful physical afflictions.<sup>92</sup> Although he traces the worst excesses of the confessional throughout the ages, he concentrates on the positive contributions of those such as Luther. Luther, Calvin and Knox are important to George MacLeod in two ways. First, the mutuality of care offered by the priesthood of all believers; and second, the rediscovery of the true intentions of these men regarding confession. The first will now be addressed.

The priesthood of all believers greatly influences the liturgical expressions of the Iona Community. It is as if McNeill had written an apposite 'mission statement' when he wrote:-

What is potentially the most important phase of the Lutheran personal ministry has been the cultivation ..... of the mutual cure of souls on the part of laymen. Each man was his brother's keeper in a spiritual fellowship, "*Seelsorge aller an allen*" (the care of all for the souls of all), aptly expresses this principle.<sup>93</sup>

From the outset the liturgy of the Iona Community has reflected this mutuality in both confession and now in the laying on of hands. The president, or leader, firstly confesses his/her sins and receives absolution, and then *vice versa*. The latest version will be quoted because it raises issues which will be discussed elsewhere.

Leader:	I confess to God and in the company of all God's people that my life and the life of the world are broken by my sin.
All:	MAY GOD FORGIVE YOU, CHRIST RENEW YOU, AND THE SPIRIT ENABLE YOU TO GROW IN LOVE. Amen
	WE CONFESS TO GOD AND IN THE COMPANY OF ALL GOD'S PEOPLE THAT OUR LIVES AND THE LIFE OF THE WORLD ARE BROKEN BY OR SIN.
	May God forgive you. Christ renew you, and the Spirit enable you to grow in love Amen <sup>94</sup>

<sup>92</sup> McNeill, J. T., *A History of the Cure of Souls*, SCM, London, 1952, p vii.

<sup>93</sup> *ibid*, p190.

<sup>94</sup> *Miles Christi*, Iona Community, Glasgow, 1995.

The same mutuality is found in the fifth Rule of the Community<sup>95</sup> - *Meeting with and Accounting to each other* - which very often involves mutual confession of time wasted and of profligacy. McNeill further argues that Luther's concern was that confession had a pastoral end rather than being for the sake of church discipline.<sup>96</sup> Such a sentiment is reflected in all that has been written about George MacLeod on this subject.

It is well to remember that he often looked back when discussing reforms to the parish ministry and nowhere more so than here. What was considered radical in *We Shall Rebuild* and *Only One Way Left* was often recapturing a supposed 'Golden Age' sometime after the Scottish Reformation, and apart from his struggles with communism, poverty and the brutalising effects of war, could be very romantic and nostalgic. MacLeod put his attitude thus: "..... far from a Reformation *betrayal* - I am directly concerned with a Reformation *recovery*" when he delivered a talk given to the Glasgow branch of the Leighton Club.<sup>97</sup> This talk was reprinted in part in an edition of *The Coracle* in 1959. He delivered the *Fifth Annual John Knox House Lecture* on the 30<sup>th</sup> May, 1959 following Visser Hooft, D. T. Niles and others. The lecture is a combination of pithy presbyterian humour, reflections on Iona and peace; but with a central section on John Knox. This is where George MacLeod is unusually candid, he acknowledges the help of H. C. Whitley in supplying the substantive quotes from Knox.<sup>98</sup> Either men could have read McNeill or Thurian's book, *Confession*, published in English in 1958.

The Reformation, MacLeod argued, had swept away the individualistic excesses of the confessional with its emphasis on the priest and on private penance at his behest.

Over against Rome who had grossly individualised the Confessional, they recovered it in the setting of the organic Church once more. For the Institutes equally declare that none of this "can take place apart from the congregation." "In treating the power of the keys", they declared "we must always be cautious not to imagine given to the Church any power that is divorced from the preaching of

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<sup>95</sup> *ibid*, p21.

<sup>96</sup> McNeill, *op cit*, p169.

<sup>97</sup> MacLeod, G. F., The Church of Scotland and the Confessional. Iona Community, Glasgow, 1955

<sup>98</sup> MacLeod, G. F., John Knox and Today, The John Knox Association, Geneva, 1959, p iv.

the Gospel.” Thus the fellowship, the priesthood of all believers, is restored as in Bible times.<sup>99</sup>

Whereas George MacLeod was perhaps overly romantic in his assessment of the success of the Presbyterian system, McNeill aptly documents the excesses of Kirk Sessions and of punishment meted out for sexual misdemeanours, drunkenness and Sabbath breaking, yet all the elements of mutual care were present in the reformed Church of Scotland,<sup>100</sup> but the reality was repression. MacLeod recognised from the evidence of Calvin in his *Institutes* and as provided by Whitley, three levels of confession: a) congregational confession of collective transgressions, such as continues today;

when the congregation implores pardon by a solemn act acknowledging its transgression.

b) public repentance before the church which was often carried to excess in the eighteenth and nineteenth centuries involving some kind of public humiliation;

when an individual who, by any remarkable crime, has occasioned an offence to the Church, declares his repentance....

c) *in extremis*, direct confession and absolution to and from the minister who was entrusted with ‘the keys’.

..... nor is private absolution less efficacious or beneficial, when it is used by those who need relief of conscience. For it sometimes happens that he who hears the general promises of God, which are addressed to the whole Church, nevertheless remains in some suspense, and is still disquieted with doubts as to the forgiveness of his sins. But if he discloses secretly to his pastor his distress, and hears the pastor applying to him in particular his general doctrine, he will be straightly assured where formerly he was in doubt, and will find repose of conscience.”.....<sup>101</sup>

The first two remained the preserve of the priesthood of all believers whilst the third fell into disuse. It is, perhaps unfair to suggest that George MacLeod only romantically hankered for the past. He in fact reinterpreted the work of the Reformers. It has been the case that his liturgy of confession built a new and stronger mutuality into the worship of the Iona Community and probably increased its

<sup>99</sup> *ibid*, p14.

<sup>100</sup> McNeill. *op cit*, p247ff.

<sup>101</sup> All three quotations appear on p14 of George MacLeod’s printed lecture.

healing power. In a later talk, published as an Iona booklet<sup>102</sup> he has no hesitation in condemning the humiliation of penance by citing from the records of St Cuthbert's Church in Edinburgh the case of a young man who was condemned to guilt because he was unable to go through with the third and final Sunday of humiliation. He did, however, develop mutuality of care in the Accounting Rule of the Iona Community, and offered two routes to absolution within and without the Community. First, members still have to offer an assessment of success or failures as members to the Leader and invariably receive by return words of encouragement. Second, he offered avenues of personal absolution through deeds such as that cited by Ferguson above.

It is not surprising, or maybe coincidental, that George MacLeod should urge people to read Max Thurian, *un frère de Taizé*, who wrote as a member of another Protestant community under discipline. The book is actually not unlike an Iona Community publication for it ends with an epilogue describing the work of the Taizé Community by Roger Schutz. Thurian's understanding of confession is not greatly different from that of George MacLeod except that he concentrates on Luther, and is more pietistic in his assessment of personal sin.<sup>103</sup> Also his advice on 'self-examination is especially suited to a more contemplative community. Thurian understands confession in its ecclesiastical context and regards it as the act of a Christian who may only understand absolution in the context of faith. The father of the Prodigal Son acts, throws a celebratory banquet rather than indulging in many words of forgiveness.<sup>104</sup>

In a sacrament God in a sense compels the faith of the believer, however weak it be, and accomplishes for him the work signified by the sacrament, far beyond all he can ask or think. In the sign of absolution the mercy of God is not only proposed to faith and prayer as a realizable promise, but sins are actually and personally remitted by the Church, acting of the authority of the Apostles and of Jesus Christ.<sup>105</sup>

<sup>102</sup> MacLeod, G. F., The Church of Scotland and the Confessional, Iona Community, Glasgow, n.d.

<sup>103</sup> Thurian, *op cit*, Chap VII, p116ff.

<sup>104</sup> *ibid*, p55.

<sup>105</sup> *ibid*, p53f.

Such language would be beyond the comprehension of the borstal boys with whom George MacLeod worked, and it is probably not totally in tune with Calvinistic Protestantism. George offered a more down to earth definition in his talk to the Leighton Club:-

..... Absolution (the setting at nought of our sins) is a personal need of our time.<sup>106</sup>

In both pieces of writing, he does discuss formulae for absolution suggested by Knox and Calvin but it is not their linguistic content which is now important but the warrant which was lost in the "Reformation betrayal". It is doubtful whether his teaching would have worked in the parish, in the "new communities" of *We Shall Rebuild* or *Only One Way Left*, but in the Iona Community (as in Taizé) the opportunities were much more open, intimate and available. Yet the lack of accessibility to the parish is one small failure in the whole debate about confession and absolution. For health and wholeness to flourish communities must develop in trust and specialised counselling services have had a wider influence as training has become more available in the universities and all the other agencies which now exist. To sum up, within the confines of the Iona Community it has been possible to introduce, or 're-introduce', forms of absolution and confession mirroring the Reformers intentions. First, the priesthood of all believers was emphasised in the mutuality of common confession and absolution. Second, George MacLeod did find ways of allowing private confession to another and absolution which in the case cited above also involved the laying on of hands. Last, within the context of the Iona Community mutuality of accounting does take place in a modern way. Whilst failing in a member's lifestyle is dealt with strictly in the fifth Rule; personal crises tend to be left either to the monthly Family Group or to a 'soul-mate' which is often discussed but difficult to establish in a truly holistic fashion.

The latter sentence suggests the final two topics for this section. In all of his work, he never loses sight of the world dimension, sins stretching from London to Tokyo and all other points. The source for examining his views comes from a surprising

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<sup>106</sup> MacLeod, G. F., The Church of Scotland and the Confessional, Iona Community, Glasgow, n.d., p3.

publication which was written at the late dawn of the 'age of permissiveness'. In January 1964, George MacLeod published four weekly articles on prayer in the *Nursing Mirror*, the second of which was entitled *Confession is Good for the Soul* and offered a remarkably liberal view to a wide readership of young nurses.

There is so much talk these days of the cardinal sins, the scarlet ones, the carnal - Sex and Dope and what have you - that to hear the word "Confession" is almost to bracket it in many minds with that abnormal area of things. It is well to remember that our Lord did not put such at the top of his list of gravity. We like to do so because not so very many of us fall for them. Jesus prescribes the death penalty for only one sin - unforgiveness! It is the spiritual sins which cause more trouble in our world than all the sex and dope ..... it is their presence in our thoughts and acts that, if not eradicated by a spiritual operation, silt up our souls to smother into a mere trickle what should be a stream of love, irrigating not only the land around us but making our own souls green and living and gay.<sup>107</sup>

He seems to be saying that our inner health, wholeness and vitality depend on a healthy spirituality and an inner peace with the world. In 1997, he, or any of us, might blush at the sentiments and the language used.

Last, in his John Knox lecture, George MacLeod skirts Celtic ecclesiology by suggesting the importance of soul-mates. He refers to S<sup>t</sup> Martin who gathered round him a balanced community of co-religionists who included a healer and a "soul-friend who offered help in establishing the mutuality of care which was found in "Martin's muintiers (fellowship houses) [and] was the chrysalis of 'the priesthood of all believers,' emergent in its ancient colours".<sup>108</sup> Again, from the past George's forward ideas grew.

It is hard to assess George MacLeod's motives in devoting so much time to confession. His deliberations certainly brought liturgical reform, yet the fundamental concern was to release people from guilt. He and his brother-in-law, Allan Murray were convinced that a revived church along Reformation principles would release people from guilt to wholeness. Neither seem to fully understand mental illness or to appreciate the growing complexity of modern psychiatry. What MacLeod did do was to offer constructive ways for some to healing in confession in the more intimate relationships which develop in the kind of experiment which was the Iona Community.

<sup>107</sup> MacLeod, G. F., *Confession is Good for the Soul*, *Nursing Mirror*, 24<sup>th</sup> January 1964.

<sup>108</sup> MacLeod, G. F., *John Knox and Today*, The John Knox Association, Geneva, 1959, p9.

Yet, if the experiment on Iona was designed to revive the Church, at the time the Church of Scotland, he perhaps underestimated the extent of secularisation. He only hints at such a realisation in his treatment of sin in the *Nursing Mirror*. Confession and absolution can only work for believers. Such a statement is echoed throughout theology, not least and forcibly by Thurian. Much more recently the idea of morality being shaped by narrative in the community has been developed by Hauerwas who argues that Scriptural authority depends on an understanding of the Biblical narrative of a people forgiven by God. He writes:-

Being a community of the forgiven is directly connected with being a community sustained by the narratives we find in scripture, as those narratives do nothing less than manifest the God whose very nature is to forgive. To be capable of remembering we must be able to forgive, for without forgiveness we can only forget or repress those histories that prove to be destructive or at least unfruitful.<sup>109</sup>

It is interesting that Andrew Fyfe took up the question of guilt in 1956 in *The Coracle*, and again in a series of lectures the following year on 'Healing and Forgiveness'. He argued in his article that the Church was a community of forgiveness, and although he had no notion of narrative theology the following quotation has remarkable similarities to Hauerwas and, of course, to George MacLeod.

Anxiety is so often caused by a sense of guilt. This is probably the heart of the matter. So many people are bound by feelings of guilt and know nothing of forgiveness. So many people trying so hard to be good and failing as they are bound to fail, and not finding forgiveness. The Church is relevant here in that it is a community of forgiveness.<sup>110</sup>

Perhaps what is witnessed is a reformer advocating a revival from a romantic prescription of some of the ills of post-war society. Furthermore, in common with most churchpeople, his thinking is sometimes inconsistent. For instance, in a fairly early article in *The Coracle* George MacLeod outlines factors which have changed modern society and the human condition. He cites as the second factor in the changes man's materialism. He does so in common with most of his colleagues mentioned in this chapter. Actually, 'materialism' was a strange choice of term

<sup>109</sup> Hauerwas, S., *A Community of Character: Toward a Constructive Christian Social Ethic*, Univ. of Notre Dame, Notre Dame, 1981, p69.

<sup>110</sup> Fyfe, A., *Christian Living in an Age of Anxiety*, *The Coracle*, March 1956, No 28, p32.

when what was meant was that modern ideologies such as Darwinism and Marxism had offered people a new confidence.<sup>111</sup> His third factor speaks of faith coming of age. Also in this issue, *The Coracle* published a poem written in prison by Bonhoeffer, *Who am I?* The Church must now deal with self-reliant, enquiring people unwilling to accept authority without understanding.<sup>112</sup> This does not seem to square well with a general revival of confession. Nevertheless, within the confines of the Iona Community, a community with a shared narrative, George MacLeod's ideas worked, but, then, many ideas blossomed in the hothouse of the Abbey which have taken years to germinate in the icy blasts of normal parish life. Yet, all this must be placed in perspective. The Iona Community was not founded as a healing community nor was George MacLeod a noted healer. He came in contact with all types of healers in Iona Abbey, many of whom were on the margins (their choice of expression) of mainstream Christianity.

However George MacLeod was keen to expose new members to the influence of other types of spirituality. The Rev'd Fred Booth, who joined in 1968 with colleagues like Rev'd David Lunan, were exposed to such experiences during their course for "New Men". On one occasion they were taken into MacLeod's study where they met a medium who went into a trance after explaining his theories. The trance was not very successful as he did not like 'performing' in front of sceptics. David Lunan has since become an assistant to Kenneth McAll author of *Healing the Family Tree*<sup>113</sup>. There is no recollection of the medium's name and although the evidence is scant, it is possible that the medium was Robert Finlay, a Church of Scotland elder from Alexandria, who visited the Abbey often in the sixties.

If this chapter is to be part of the overall structure of a case study, echoes of George MacLeod's contribution to Divine Healing must be found in the liturgy which has developed. The next chapter will show that the concerns which MacLeod raised have never lost their influence or reality in the contributions others have made

<sup>111</sup> MacLeod, G. F., *Reasons for the Direction of our Mission, Part I, The Coracle*, No 14, January, 1948, p9.

<sup>112</sup> *ibid*, p15f.

<sup>113</sup> McAll, K., *Healing the Family Tree*, Sheldon, London, 1982.

towards the liturgy of healing. Nevertheless, we must remind ourselves that he never intended to make Divine Healing the central purpose of the Iona Community. Robert Finlay was a member of the *Churches' Fellowship for Psychical and Spiritual Studies (Scotland)*. In 1968, he published *A Lie in My Right Hand* which was essentially an anthology of reading proving the need for the Church to recognise the value of mediumship as a vehicle of healing under the *nomme de plume* of Cornelius.<sup>114</sup> In discussions with George MacLeod in the Refectory, he urged him to devote much more energy to Divine Healing. George replied, "I want to restrict myself to my main hobby-horse, peace, in the time remaining to me."<sup>115</sup>

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<sup>114</sup> Cornelius, *A Lie in My Right Hand*, Regency Press, London, 1968.

<sup>115</sup> Slightly paraphrased from a personal letter from Finlay to the author, dated 1995.

## Behind the Liturgy of Healing

This chapter is first and foremost a descriptive one, describing the liturgical activities of the Iona Community in general and selected members in particular. Although this thesis concerns itself primarily with the role of healing and wholeness within the Iona Community, liturgy is by far the most visible sign of the practices which concerns us. Although this chapter is descriptive in intent, there are several things which should be noted in the narrative. 1) The openness of the Iona Community's liturgy is characterised by its collective and inclusive orientation. 2) There are many examples of the influence of biographical matters on the development of the liturgy, which are important because they introduce us to the idea of stories, in the development of theology. The biographical details of the patient seeking intercessions or the life concerns of Anna Briggs are but two examples. 3) An introduction is offered to the narrative which might surround guilt and absolution as influences in the service and its purposes. There are in fact only two activities going on week by week to do with healing; first the healing service on a Tuesday evening, and second the Iona Prayer Circle which also operates on a Tuesday, although not exclusively.

In examining the liturgy of the service, there will be four components that will be examined and one which will be lacking, but will be justified shortly. First, since 1938 a healing service has taken place on one night of the week. It is important to understand the prevailing liturgy of it and, in particular, the most recent developments. Second, individuals have been inspired to write either hymns or liturgical theories in response to the service. Third, before the service assumed its present form, individual prayers were of greater importance - some by George MacLeod are still available in the archives. Last, the Iona Prayer Circle was founded and based on certain principles which are still worthy of note. The exception is that it is not intended to examine the intercessions of the Prayer Circle at all, because as has already been stated this dissertation is not about the theology of healing *per se*. To pursue the subject of the Prayer Circle would be fraught with very fundamental methodological problems, the most important of which would be overcoming issues of confidentiality. One would also have to decide whether the study would be

synchronic or diachronic. An immense amount of data might be available which would require other methods of analysis than those to be undertaken here and would probably provide the basis for a separate thesis.

### **The Healing Service in Context**

By way of introduction, it has for a long time been assumed that most residential visitors to Iona intend to spend a week in or around the Abbey. This means that the week's pattern of worship is structured on a weekly basis, commencing on Saturday evening with a service of welcome and ending with Holy Communion around the table the following Friday. Since 1981, the night of the service changed to give a more logical structure. Monday evening celebrates peace and justice; Tuesday, the healing service; Wednesday, after the pilgrimage around the island during the day the service is more flexible; and on Thursday is the *Act of Commitment* which is more logically placed on the Thursday, before Communion around the long table on Friday prior to departure on Saturday morning. Most of the services have liturgies laid out in the Service Book which is normally prepared by the Worship Committee although more recently responsibility has tended to rest with the Warden and with contributions from the Wild Goose Worship Group. This change was debated during Members' Week in 1991. The strategic plan, which is still evolving dismantled a number of committees, including the worship committee, and replaced them with seven areas of concern.<sup>1</sup> Members are invited to join one of these areas if they are interested. It is significant that the service of healing has always been referred to in the Abbey worship books by words of explanation rather than a set liturgy, until quite recently when congregational participation became really important.

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<sup>1</sup> The areas of concern in 1995 were: Full Intercommunion by the year 2000; Justice, Peace and the Integrity of Creation; Racism and Interfaith Matters; Rediscovery of Spirituality; The Cause of the Poor and the Exploited; Work with Young People; Constitutional Matters.

**Figure 1 - Iona Abbey**

From the beginning the Prayer List was designed to attract names from all over the world.<sup>2</sup> In notes, George MacLeod is proud of the fact that requests come from all over the world, he mentions in particular Canada and South Africa. Those from the UK were expected to report

progress or needs weekly, whilst people from overseas were required to write every third week. The organisation of the intercessions for the Iona Prayer Circle and the healing service work in two ways. Prayer requests can be made in person, by letter or by telephone until five p.m. on the night of the service. This list is used during the service and then left in St. Columba's Chapel until the following service. The Prayer List which is drawn up for the Prayer Circle is circulated throughout the UK and is used after the main service and by intercessors who receive it at regular intervals.

The most outstanding feature of the healing service is its inclusiveness, both in its rubrics which seek to involve everyone, and in open-endedness of the situations for which prayer may be offered. There is a story about one service when R. D. Laing, the famous psychiatrist, shouted obscenities throughout! More to the point, Ron Ferguson writes making a connection with the form of confession quoted in the chapter on George MacLeod:-

The laying on of hands is not exercised by one person, but by the whole community - and the leader of worship kneels to receive the hands of the community (just as in the Community's morning office the leader of worship confesses his or her sins and hears the absolution pronounced by the whole congregation).<sup>3</sup>

Finally, there is good reason to quote part of a sermon by Archbishop, now Cardinal Thomas Winning. His words were recorded by Ron Ferguson at the healing service during the week of the Ecumenical Conference which drew together all church leaders

<sup>2</sup> MacLeod, G.F., *Practical Suggestions for Intercessions for the Sick*, GM&ICP, National Library of Scotland, Acc9084/337[M].

<sup>3</sup> Ferguson, R., *Chasing the Wild Goose*, Fount, Glasgow, 1988, p192.

in Scotland in 1984. He appropriately chose to make this statement during the healing service and caught at a very early stage the prevailing openness of the service to even the healing of denominational divisions.

The path to further reconciliation to my mind cannot lie in brooding over our wounds, or in mutual recriminations, but in a continual series of creative experiments born of goodwill and with a vision of the future which we are building together. The churches have therefore above all to be open to the unifying power of the Spirit. If we are static, immobile, motionless, there will be no room for the Spirit. If the Church is static, it will not command the response from the Lord to come to its aid. But against a Church on the move, open to the Spirit, the gates of hell will never prevail.<sup>4</sup>

Much will be written about guilt and here we have Winning introducing it at the centre of the healing service as a call to reconciliation between wounded and divided denominations.

### Liturgy

The opening responses of the regular healing service underscore the theme of solidarity of the people with God, and with his world:-

*Leader* We come in this service to God,  
*ALL* IN OUR NEED, AND BRINGING WITH US THE NEEDS OF THE WORLD.  
*Leader* We come to God, who has come to us in Jesus,  
*ALL* AND WHO WALKS WITH US THE ROAD OF OUR WORLD'S  
 SUFFERING.  
*Leader* We come with our faith and with our doubts.  
*ALL* WE COME WITH OUR HOPES AND WITH OUR FEARS.  
*Leader* We come as we are, because it is God who invites us to come,  
*ALL* AND GOD HAS PROMISED NEVER TO TURN US AWAY.<sup>5</sup>

This major part of the liturgy emphasises four elements of the Iona Community's present theology of healing: 1) healing and wholeness concern not only the individual but the world; 2) God through Jesus Christ is with us, and the world, in our suffering; 3) healing is sought through our own volition but granted by the will of God; and 4) God is always in solidarity with us. Not only is there a summary of the

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<sup>4</sup> *ibid.*

<sup>5</sup> The Iona Community, The Iona Community Worship Book, Wild Goose Publications, Glasgow, 1991, p38.

Community's theology of healing but also a summary of Incarnational theology. Compared to the liturgy which was used pre-1975<sup>6</sup> which is quoted in detail in Appendix I, there is a huge difference in style and content for which some explanation must be postulated. There are to hand five service books<sup>7</sup> which show a gradual build up towards the theology just described; and a departure from the hefty litanies of the earlier years. This phenomenon can be traced over the years 1982 to 1991.

There are four likely explanations. First, throughout all major Churches liturgy was being simplified and stream-lined.<sup>8</sup> The older liturgy is couched in 'Thee and Thy', and introducing complicated theological terms like 'Incarnation', out-dated words such as 'quickenings' and archaisms, beautiful though they may be, as in 'medicine of the Sacraments'. Second, the attitude towards health remained very individualistic both in terms of our abuse of our bodies and the reception of treatment as opposed to a more collective view of health as factors such as stress assumed a greater importance in holistic medicine. Third, the resident group in the Abbey during that decade was much more inclusive and communally or collectively minded. Husband and wife teams shared the post of Warden and young children were always around. Fourth, George MacLeod had always been concerned with guilt and absolution (see p97ff), but staff like Kathy Galloway, with her husband Ian (now divorced), found more eloquent ways of expressing this reality and the creative talent of *The Wild Goose Group* began to flourish. As an addendum, it might be speculated that the presence of women at the heart of the new liturgical development was the real driving force. Kathy Galloway and Ruth Burgess, a member of the Iona Community since 1989 and a Family Link Officer from Sunderland, intended to co-edit a book on healing in 1996 which has been delayed.

Burgess was a member of the resident staff from 1986 for three years, and developed an interest in healing, producing several discussion papers which may form some of the subject matter for the intended book. Several interesting points are revealed by a

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6 The Abbey Services of the Iona Community, Iona Community, Glasgow, undated but the price indicates that it was pre-1975 (2/6d), p10ff.

7 The books are dated: 1982; 1984; 1988; 1991, Third Impression 1994.

8 The Abbey Services of the Iona Community, Iona Community, Glasgow, n.d.

reading of some of her papers. One is a starter for discussions which is compiled from participants reactions. What stands out is the hesitancy of some of the reactions: "I'm afraid my prayers won't work"; "I haven't got enough faith"; or "I'd like to take part in it, but I find it a bit scary".<sup>9</sup> Many of the groups who come to the Abbey from congregations often have no knowledge of healing and a discussion starter like this may be their first introduction to healing. A number of her papers deal with peace and justice, and it would probably be fair to hazard a guess that this arose out of the concern for *Justice, Peace and the Integrity of Creation* (JPIC) which was occupying many churches at that time. In a paper entitled *The Healing of the Nations*, Ruth Burgess includes the following introduction:-

When we discuss the healing ministry of the church, often the focus of our discussion is on the healing of individuals who are sick or in need. Issues concerned with hungry people in India, or oppressed people in South America, or with people struggling with multiple deprivation in our inner city communities and housing schemes, are assumed to be the kind of issues that belong to a discussion concerned with peace and justice. They are not normally seen as issues that are part of the church's ministry of healing.<sup>10</sup>

George MacLeod and earlier members shared a similar concern for peace and justice in relation to healing, but it did not reveal itself in liturgy as such. We therefore end the discussion of Ruth Burgess' contribution to liturgy by quoting a collect or call to worship which she says was regularly used:-

Jesus, you wept for the city you loved.  
Jesus, in your words and actions the oppressed found  
justice and the angry found release.<sup>11</sup>

Finally it is characteristic of both Ruth Burgess and Kathy Galloway that they offered personalised case studies as discussion starters rather than theological discussions. Each of these cases always have social issues built into them. Some also exhibited emotional release which resulted in healing.<sup>12</sup>

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<sup>9</sup> Burgess, R./Galloway, C., *Praying for Healing - A Discussion Starter*, (unpublished), circa 1989.

<sup>10</sup> Ruth Burgess, *The Healing of the Nations*, (RB/86), (unpublished), 1986, p1.

<sup>11</sup> *ibid*, p1.

<sup>12</sup> Ruth Burgess, *A Series of Discussion Starters*, *Michael, Michelle, Mary and Alan, Jean, David*. In each case there follows four questions which are really variations on a theme. There is always one about the subject's environment, e.g. "What kind of changes in his environment would be good news for Michael [name inserted by hand] and would contribute to his wholeness and to his hope for the future?"

From the evidence of George MacLeod's prayers and his actions in the early years, the healing service was concerned strictly with healing but within the broader context of incarnational theology. According to Ian Cowie in unpublished correspondence the first order of service was in fact English. The Community did publish a pamphlet by Bill Aitken which contained a liturgy adapted from the *Guild of Health* in Crowhurst. George Bennett was warden of Crowhurst Home of Healing in Sussex from 1958 to 1969. He reflected upon the experience in *Miracle at Crowhurst*.<sup>13</sup> In the very early days of 1938 it was reported in *The Coracle* that they "struggled with the *Book of Common Prayer*" to provide a framework for morning and evening worship, so it is not surprising that they also turned to a healing service from Kent. The service was always conducted by a minister with one assistant and did not offer the congregation much opportunity of participation. Later in the chapter some prayers will reveal George MacLeod's attitude at the time but it is worth noting at this moment that the prayers of intercession for named persons appear to have been much more formalised than they now are. Members reported that they had "cramp in their knees" by the end of the service;<sup>14</sup> also George Wilkie refers in a letter to the seeming insignificance of reading an endless list.<sup>15</sup>

The first reforms to be made in recent years were spatial. The laying-on of hands originally took place on kneeling stools laid out in the chancel. In recent years it has moved to the transept where it can be more inclusive. Candles have also been introduced as a way of marking space around which a circle of supplicants may kneel for the laying on of hands. The effect is that with as many of the congregation linking touch by various means in a circle and the supplicants in a circle also there is a real sense of inclusiveness and of participation. This change has certainly been in existence since the publication of the *Worship Book* of 1988, but was finally refined with fewer rubrics and more confidence in 1991.

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13 A later book by George Bennett was: Bennett, G., *The Heart of Healing*, Arthur James, Evesham, 1971.

14 Interview with Ian Cowie, 20 October, 1995.

15 Type-written copy of letter from George Wilkie. [GM&ICP, NLS, Acc9084/337[M]].

There is no way of proving the scepticism mentioned above, but the liturgy is now characterised by two features which have departed from the original intentions of Divine Healing. First, individuals are invited to come forward with concerns for situations in the world, either international, national or domestic. As a forerunner to this greater emphasis the hymn *For the Healing of the Nations* by Fred Kaan was introduced as a regular feature in the Worship Book of 1982. It should never be underestimated how burdened people may feel by a situation which is not of their making but which they take to themselves. Second, people are openly invited to come forward as proxies for friends or individuals for whom they are concerned.

Next we find in *The Coracle* and elsewhere a greater concern with guilt and with negativities. The invitation to laying on of hands now appears in an appendix. It is difficult to say whether the appendix is an instruction or a suggestion but it is there for all to read and has constituted some trouble on the part of the compilers. The appendix which is located towards the back of the Worship Book reads thus:-

At the end of the next song those who seek prayer, either for personal need or for a need in our world, are invited to come and take it in turn to kneel or take a place at one of the cushions here in the crossing.

{ ..... }

So come, you who are burdened by regrets and anxieties,  
You who are broken in body or in spirit,  
You who are torn by relationships and by doubt,  
You who feel deeply within yourselves the divisions and injustices of our world.<sup>16</sup>

George MacLeod and many others, including John Harvey, have commented on the relationship between the willingness to go forward for the acceptance of touch in the laying on of hands and guilt. These lines of invitation seem to echo such a view. The reasons behind the invitation are all negative - 'regrets', 'anxieties', 'broken', and doubt etc. Two features in *The Coracle* point towards this concern. The first is by Kay Carmichael, a Friend of the Community and a lecturer in social work at Glasgow University, who wrote of a concern that the Church of Scotland had no means of absolution as did the Roman Catholic Church. It is a theme which she has alluded to in a paper in a later publication. However she says in the earlier paper:-

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<sup>16</sup> The Iona Community, *The Iona Community Worship Book*, Wild Goose Publications, Glasgow, 1991, p77.

There is in the Kirk a repeated message that Christ died for our sins and that through that sacrifice we can claim forgiveness but the exposition is often too cerebral to penetrate the powerful self debasement of those who feel guilty and unworthy. 'Not me', is the thought, 'He couldn't have died for me'.<sup>17</sup>

She goes on to discuss the socialisation of children and the adverse effect which blame and guilt has on the developing psyche. The healing service, particularly the laying on of hands, provides an opportunity for absolution which is lacking. Kathy Galloway, who is more of a theologian than Carmichael, has written an interesting meditation on the meaning of ceremony. Ceremonies mark our seasons; they heighten our awareness of the sacraments and give meaning and poignancy to rites of passage. Each ceremony in which we participate offers us a new insight into our innermost feelings and we can find ourselves 'transfigured'. In the Conclusion reference is made to narrative theology, but here it is introduced as a moving concern for the significance of the laying on of hands, which blends together so many threads in the reality of a service that is now alleged to be about the lifting of psychological burdens of many sorts from a great variety of people.

We have a service every Tuesday night in the Abbey on Iona, in which we pray by name for people who are sick, and lay hands on any who wish to receive this ministry. Over many years of participating in this service, I have been forced to ask questions, and to draw some conclusions. By far the largest number who come to receive the laying on of hands are people who fall into a category which might broadly be termed those in search of spiritual healing. But even then, there are many people who come forward who I know are not troubled in their faith, who are not despondent and cast down beyond what is usual, who are not in mourning or addicts or whatever. People go forward to receive the laying on of hands to be healed of anger, of greed, of fear, of selfishness and of all the other things that make us all broken people. People in large numbers, perhaps sixty or seventy at a time, and many of them young people, receive the laying on of hands because they are seeking absolution. And a ceremony in which we invoke the presence of God's spirit, and symbolise our care as a church by our touch, makes that absolution real to people. Touch is such a basic human need, and something that is so often alien to our culture, especially for men, that when it is received in a way that is non-threatening, it comes as a real liberation. It is an experience of grace, a moment of making whole. It is, if you like, a sacrament.<sup>18</sup>

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17 Carmichael, K., *Guilt and Forgiveness*, The Coracle, Spring 1989, p.10.

18 Galloway, K., *Transfigured by Ceremony*, The Coracle, Winter 1991, p6. Reprinted in: Getting Personal - Sermons and Meditations, SPCK, London, 1995.

### Pastoral Concerns and Intercessions

Moving on to the second point, the writing of prayers and hymns by members who in recent years have shown a considerable awareness of healing and wholeness. George MacLeod's contribution to this area is not all that enormous. There is a carbon copy of an order of service for the laying on of hands and anointing in the George MacLeod and the Iona Community Papers (GM&ICP) in the NLS. This reveals a considerable solemnity and a concentration which is not present in the modern service of healing. He insisted that the service be conducted by a minister with possibly one assistant. His prayers did not offer the opportunity for congregational participation nor would it encourage any but the most serious supplicant to come forward. The Rev'd Uist MacDonald has supplied some of his shorter prayers which appear below:-

We thank Thee that as day has succeeded day we have been able to make our prayer unto Thee; and for the many times Thou hast granted the desires of our hearts for someone for whom we have prayed; and for the knowledge that when in our ignorance we asked amiss, Thy merciful providence did choose some better way...

We give thanks for those who touched the corner of thy garment and to whom a new measure of health has been given...

We give thanks for those who have been delivered from danger, sorrow and anxiety... and for those who have been strengthened to resist temptation...

And we thank Thee for all in the fellowship of Christ who have in recent days been released by Thy merciful hand from all earthly pain and tears and who have gone before us to what lies beyond...

These prayers show a degree of mysticism combined with a strong Christocentric belief which is particularly poignant in the second section of prayer which is offered. Actually his theology and conservatism in practice seems to be more in line with certain Anglican traditions than with the modern service of the Iona Community. Carolyn Headley examines in detail the meaning of touch in the OT and NT. On almost every page she reminds the reader that it is the touch of Christ which is present in this formal setting and offers countless Biblical references. "...it is the touch of THE LORD, and the stretching forth of *his* hand that is taking place and that brings healing."<sup>19</sup> She is much more of a sacramentalist, strongly believing in the biblical

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<sup>19</sup> Headley, C., The Laying on of Hands, Grove Books, Nottingham, 1988.

examples of touch, and in the power offered to the individual on whom touch is bestowed.

The laying on of hands was rather associated with the idea of designating a person or object to some specific purpose for God, perhaps reflecting the concept of the hand of the Lord and the hand of God.

The hand of the Lord expresses the power of God (Joshua 4:24; Job 12.9) and the point at which his touch on the world is felt.<sup>20</sup>

Her expectation of healing is more in accord with George MacLeod and offers an insight into the alternative to the informality of the present service. In fact in his latest book, Ian Cowie severely criticises the nature of the service on Iona, but discussion of this will be more appropriately deferred to another chapter.

Intercessions for the sick commenced immediately after a camp was established on Iona in 1938, and arguably had a greater influence on the Iona Community than anything else, insofar as more people have become involved in the intercession circle than in any other aspect of the Community. It is now a major task to maintain the Iona Prayer Circle and now involves the appointment of a prayer secretary as a permanent member of resident staff within the Abbey. The first such to be appointed was towards the end of Ian Reid's spell as leader and the mantle fell to Mrs Mary More, the wife of a retired missionary and member of the Community, Rev'd George More. When she was still alive, her memory had faded and information was unavailable. Margaret Wright came to Iona from England with strong convictions in the power of healing, and was much beloved by all. She wrote of the office at the time of her retirement at the end of 1981 (see page 255):-

The last two years of letters, vision of letters, written and unwritten, ever conscious of the privilege of being allowed to do this work in the Healing Ministry. Always aware of the prayers and support of a vast number of loving people who have carried me along. To have been able to share in the rejoicing of health restored; and the wondering of others through long years of suffering.<sup>21</sup>

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<sup>20</sup> *ibid.*, p3.

<sup>21</sup> Wright, M., *The Coracle, Margaret Wright retires...*, [A series of tributes and her own recollections], Nov-Dec 1981, p6.

Margaret Wright's quote is important because it raises a number of questions about how far the nature of the prayer circle has changed from the way in which George MacLeod conceived it.

The only evidence which is available about MacLeod's aims in intercessions is to be found in a carbon copy of an article in the archives, which illustrates beautifully his pastoral concerns. He stresses that it is important that the person being prayed for knows that this is happening and to be aware of the time of the service. He wishes to encourage the sick to pray for others, whilst recognising that illness prevents the sick person from finding the energy to pray at all. He stresses the need to strengthen their biblical faith, and is very anxious that negative thoughts of divine punishment are discouraged, "but to encourage the thought that they are something God has permitted and desires us to fight with His help; even as he permits temptation and desires us to fight it with His help."<sup>22</sup> His pastoral concern is such that he considers that it is wrong to pray in an anonymous kind of way. There must always be some reference to the progress and nature of the illness: a patient who is not sleeping requires prayers for sleep; a carer who is at his or her wits end requires prayer more than the patient on some occasions.

"Please pray specially for sleep"; "Please pray also for his widowed mother, he is an only son", are very helpful. (It frequently happens that when intercession is commenced and largely concentrated upon some distressing symptom, such as a lack of sleep or difficulty in digesting food, a change for the better is seen speedily with regard to this symptom; and that this change comes as a great encouragement both to the sick and to the intercessors, to pray on and to pray more earnestly. Sometimes, too, a full healing is built up, step by step, as one symptom after another, or one need after another, is made a matter of special prayer in this way.)<sup>23</sup>

George MacLeod intended to ensure that these principles were safeguarded by insisting firstly that the person seeking intercession either asked for it or was sponsored by a friend or relative. Elsewhere, he makes it clear that regular reports should be expected from the person requesting prayer - every three weeks for a person in Britain, every month for those overseas. The problem in the present day is

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<sup>22</sup> *Practical Suggestions for Intercession for the Sick*, GM&ICP, NLS, Acc9084/337[M].

<sup>23</sup> *ibid.*

that the pen has been superseded by the mailshot, and much of the thought that the pen can provoke has been lost in the speed of word processing.

### Hymnology

The Rev'd John L. Bell has been a member of the Iona Community since 1980 during which time his musical output has been prodigious, often in collaboration with Graham A. Maule. They have aimed to write hymns with a distinctive Scottish character and have often adapted famous folk tunes to suit their needs. Bell's talent as a choirmaster led to the establishment of the Wild Goose Worship Group which has been used to experiment with and train local congregations in worship and praise. The group has survived on grants from churches including the Church of Scotland, but some of these have been cut in recent years. It has been argued over many a meal that the Iona Community's greatest contribution to the wider church has been in liturgical reform, and here it is argued that John Bell has carried that forward in significant ways, particularly in hymnology, in relation to healing and wholeness.

When *Songs of God's People* was published in 1988 by the Panel on Worship for the Church of Scotland, it became an overnight success which has run to nine reprints of the Words Edition. John Bell spent much time, as the Supplement's Convenor, touring Scotland demonstrating and lecturing. He repeatedly made the point that the supplement attempted to be inclusive of the Church's concerns which had changed since that publication of the *Church Hymnary Third Edition* in 1973. Issues such as peace and justice had not previously been addressed. Nor had the brokenness of society, woman's concerns or healing been adequately covered. The deliberate inclusion of South African hymns reflected the Churches' long participation in the struggle against *apartheid*. Twenty-three songs out of 120 came from past or present members of the Iona Community, and at least three of these dealt with brokenness or healing. This illustrates the lead which the Iona Community has given to hymnological reform in Scotland and to issues of healing and wholeness in particular. Add to this the fact the John Bell went on to convene the Panel on Worship which saw the publication of the new *Book of Common Order of the Church*

of Scotland in 1994, and the evidence of Community involvement in Divine Healing increases. The introduction states:-

Among the Occasional Services, such as Orders for the Admission of Elders, for Remembrance Day, and for the Dedication of a Church, there are three new Services: a Covenant Service, a Service of Healing, and an Order for the blessing of a New Home.<sup>24</sup>

The Service of Healing is more formal than that of the Iona Community, yet uses much the same format and employs the prayer said over each supplicant which was composed for the Iona service a decade earlier. It is not acknowledged, but then the compilers apologised for their inability to acknowledge every source.

The rubric and prayer reads thus:-

**Laying on of Hands**

*In turn, hands are laid on each one kneeling or sitting, and this or similar prayer is said:*

May the Spirit of the living God,  
present with us now,  
heal you of all that harms you, in body, mind, or spirit.  
In the name of Jesus Christ.  
**Amen.**<sup>25</sup>

Two hymns will now be discussed which indicate the type of theological concern within the Iona Community. They both arise out of the atmosphere which a commitment to wholeness and healing creates on Iona. *We Cannot Measure How You Heal* appears in Volume 3 of *Wild Goose Songs* in a Section entitled "The Call to Care". The implications of 'care' are quite important as the songs range over many topics of service. Bell and Maule introduce it thus:-

Volumes One and Two of *Wild Goose Songs* concentrated on the Life of Christ. In this third volume we have included songs which deal more with the life of Christ's disciples. The songs are still firmly rooted in the scriptures but allow for the celebration of our experience of faith, rather than retelling the events in the gospels....

THE CALL TO CARE reflects the summons of God to ordinary and unusual people throughout the ages and also to us who are asked to live our commitment in imitation of Christ.<sup>26</sup>

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24 Church of Scotland, Book of Common Order of the Church of Scotland, St Andrew Press, Edinburgh, 1994, p xvi.

25 *ibid*, p406.

26 Bell & Maule, J.L. & G., Love from Below - Wild Goose Songs Volume 3, Wild Goose, Glasgow, 1989, p6.

The theology of Jean Vanier, a Canadian theologian and founder in France of the l'Arche Community, is evident in the WCC thinking on health and wholeness, and there are obvious parallels in the liturgy and hymnology of the Iona Community.<sup>27</sup> In the morning office the entire congregation in the Abbey on Iona is asked to "confess to God and in the company of all God's people that my life and the life of the world are broken by my [their] sin." Vanier grounds brokenness in the Fall but identifies mankind's suffering in the rejection by society of so many who are socially disadvantaged or unacceptable.

Our God is a God of life and light.  
When God creates, it is life and light that is given.  
To understand the depth of our brokenness  
we need to look at the wholeness in which we were  
created,  
a wholeness that comes from total communion with  
God.<sup>28</sup>

His meditation is compelling to a number of members of the Iona Community, but in the present context it is the deep embrace of all who suffer, who are battered or buffeted by society, which give this book its appeal. In the case study of Ruth Goodheir she refers directly to Jean Vanier (see p198); and both she and the present warden, Rev'd Peter Millar, have both been greatly involved with the L'Arche Community in Inverness. The best example of a hymn which covers many of the degradations and suffering in society is *The Touching Place* (song 21) in *Songs of God's People*, which addresses many topics from starvation to employment and the isolation of bereavement to the horror of domestic violence and rape. John Bell and Graham Maule first published this in the Wild Goose Publication under discussion.<sup>29</sup> Suffering was never so explicitly or inclusively addressed in a Church of Scotland hymnary before.

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27 Christian Medical Commission of the WCC, Healing and Wholeness - The Churches' Role in Health, WCC, Geneva, 1990. As will appear in a subsequent chapter, Margaret Stewart was in fact a member of the European consultation which was reported in the final draft.

28 Vanier, J., The Broken Body, DLT, London, 1988, p17.

29 Bell and Maule, *op cit*, p66.

However, the hymn which was specially written from a service of healing was *We Cannot Measure How You Heal*.<sup>30</sup> This hymn comprises three eight-line stanzas, and carries a recommendation that it be used as an introduction to the laying on of hands, to be sung as people come forward. As in so many cases, he has set it to a Scottish folk tune, *Ye Banks and Braes*. One half of each stanza will be quoted:-

1. We cannot measure how you heal  
Or answer every sufferer's prayer,  
Yet we believe your grace responds  
Where faith and doubt unite to care...
2. ...But present too is love which tends  
The hurt we never hoped to find,  
The private agonies inside,  
The memories that haunt the mind.
3. ...Lord, let your Spirit meet us here  
To mend the body, mind and soul,  
To disentangle peace from pain  
And make your broken people whole.

Three important affirmations are made in these lines, all of which have or will occur in this dissertation. First, healing and wholeness are offered in faith as a sign or grace. Second, troubled minds may benefit most from the laying on of hands. Third, with echoes of Vanier, all healing of 'brokenness' results in the restoration of wholeness or *shalōm*. One final comment may be made about verse 2. When the theology of Ian Cowie is examined, the 'healing of memories' will be one of the central themes. The lines seem to reflect such an approach with their recognition of 'private agonies'. There is a connection also with the comfort of absolution which so many have found in the service.

Anna Briggs joined the Community in 1982 having had an interesting career in various charities. Her life experience shows how hymn writing can be influenced by experience. "After leaving Age Concern she obtained a research grant from the Equal Opportunities Commission, and eventually produced the report *Who Cares?*,<sup>31</sup> published by the Association of Carers."<sup>32</sup> She joined the resident staff of Iona

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30 Bell and Maule, *op cit*, p68.

31 Briggs, A., *Who Cares? The Report of a Door to Door Survey into the Numbers and Needs of People Caring for Disabled Relatives*, Chatham Press, Chatham, 1983.

32 Briggs & Oliver, A. & J., *Caring - Experiences of Looking After Disabled Relatives*, RKP, London, 1985, *Author Biographies*, p xii.

Abbey in 1981, aware at that time that her husband, Brian Gallon, was suffering from cancer. She has expressed very strong views about the parameters of care within a loving relationship<sup>33</sup> which meant that the rest of the staff became involved in his care.

She has written several hymns, but there is one striking example about brokenness, which appeared originally in her Wild Goose publication, but which was published as 113 in *Songs of God's People*. The hymn has six verses, five of which are about brokenness of our world, devalued life, towns and cities, relationships and then in verse five there is an oblique reference to the type of fatigue which a carer may at times feel. This is followed by an affirmative couplet about healing power. Verse six is full of hope as one finds in any dynamic Psalm after depressing verses earlier.

We bring our broken selves,  
 confused and closed and tired;  
 then through your gift of healing grace  
 new purpose is inspired

Anna Briggs<sup>34</sup>

The hymn reads as a testimony to her experience, be it meeting exhausted carers on doorsteps or finding herself in need of healing through all the strain of caring and after her husband's death.

Finally, in the past ten years much more poetry has appeared in *The Coracle* and in the publication lists of some members, notably Kathy Galloway who encouraged this trend whilst editor. These meditations on Christ indicate the free way in which the imagination is encouraged to roam over central issues of faith. Of course, many have composed prayers but very few of them concern healing and wholeness.

You healed the sick wi' yer love  
 Ah'd like tae dae that  
 But lack the currency  
 Perhaps whit Ah need's a few mer incarnations  
 Aye! Definately

Stuart Barrie<sup>35</sup>

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<sup>33</sup> Personal Interview, September 1994.

<sup>34</sup> Church of Scotland, *Songs of God's People*, OUP, Oxford, 1988, Hymn 113, Verse 5.

<sup>35</sup> Barrie, S., *The Coracle*, Vol 3, No 1, (renumbering began with new format)

Note the freedom of thought which is allowed by the editor in the openness of the author's implied theology and open taking to himself of his inner-most feelings about matters metaphysical and of Christ.

The liturgy of healing in the Iona Community is more than just the compilation, the recitation of a service. It is a vehicle for the expression of many talents. We witness the pastoral concern of George MacLeod; or the creative and innovative thinking of John Bell or the channelling of latent concerns drawn from personal experience by Anna Briggs. The language is always changing and assimilating new ideas and influences. The concept of energy will recur often in future chapters, as it will be shown that many of the thinkers within the Iona Community have absorbed ideas about energies and their healing powers. For example, Dr Rev'd Margaret Stewart summed up the assimilation of several such concepts in the introduction to a healing service on 30th July, 1996:-

For me to understand the significance of healing I do not look at the drama of miraculous stories, Biblical or contemporary. For me all healing is amazing, miraculous if you like. The process by which our bodies and minds can be repaired fills me with awe. The complexity of the process of repair of even a small cut, a minor upset seems to me so much more wonderful because it happens from within, the potential for wholeness and fullness of life is present within individual cells of our bodies.

[*a propos* the laying on of hands] ...we come forward with concern for our lack of wholeness, for family and friends, for broken community and by our action in asking and accepting the hands of the people who travel alongside us tonight we open ourselves to the power of the healing spirit. Such can *energise the healing process present in our bodies* [my emphasis], our minds and our spirits.

Often often often comes Christ in the stranger's guise.<sup>36</sup> [line quoted from a Celtic Rune]

Divine Healing was born on Iona out of a crisis, that of the Second World War. To sustain itself for fifty years is no mean achievement when most healing revivals tend to be short-lived and dependant upon the charisma of one central figure and fed by evidence of healing which is apparent to all. The liturgy which has been examined here deliberately makes no reference to a leader, nor does it offer any evidential results. It has its detractors, yet no-one has been sufficiently disillusioned to topple the overriding confidence in the propriety and logicity of the service within the

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36 Abstracted from Margaret Stewart's notes in preparation for the healing service on 30th July 1996.

context of a concern for ensuring “in all things the purpose of our community, [is] that hidden things may be revealed to us and new ways found to touch the hearts of all.”<sup>37</sup> There is a conviction, and a manifest emotional feeling, that for those attending the service, hearts are being touched and the service still commands a central place in the overall strategy of the Community.

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<sup>37</sup> Iona Community, *Prayer for the Iona Community*, *Miles Christi*, *op cit.*

## Iona - a Cauldron of Ideas

The purpose of this chapter is to consider the effect of Iona on the thinking of the Iona Community on healing and related matters. Iona has an emotional hold over many besides members of the Community, or indeed others with related convictions. The blend of ideas and their influence is as much an activity to be described as the liturgy of the previous Chapter. The liturgy of healing has, it will be shown, been a characteristic of the Iona Community onto which others have managed to attach their own theories of personal transformation and the sacredness of the isle. We have suggested that the more you examine a marginalised activity of the Church, such as healing, the more it can attract a variety of ways of coming to and expressing convictions about the said activity or doctrine (*cf.* p6).

Many people have brought their own stories to Iona and carved out a place for them on the crowded island. This chapter is about the way these stories have blended, albeit sometimes like oil and water. The media likes to paint an image of the island's remoteness from almost all places south but this is a relative myth by today's standards of transport. However, the distances involved do create a heightened sense of pilgrimage and increase the traveller's expectations on arrival. This is undoubtedly increased if one is unused to island life or atmosphere. When St Columba arrived in 563, he was presumably faced with a much greater remoteness and travel problems than can be imagined now, yet the access to the sea created ideal conditions for travel and evangelisation and indeed diplomacy among the warring Picts.

Here three aspects of Iona will be considered: first, the legacy of St Columba which will depend entirely of secondary sources; second, the effect of modern pilgrimages; and third, the activities of other groups on Iona with particular reference to their healing activities. It has previously been noted that Kathy Galloway intends to publish a book which will attempt to recreate the healing service on the mainland of the UK, thus making it easier to conduct such services in inner city parishes. This may not succeed because Iona has unique qualities which may not be easily transferred to the mainland and may be unable to compete with more charismatic healing methods. The

reasons will be dealt with later but what can be stated here is that the service on Iona brings together a strange blend of cerebral and emotional activity in the healing and laying on of hands which is attempting to combine several components unlike other such services. These components include the search for physical healing, for individual peace and community and international healing.

### **The Legacy of St Columba**

The most important question which will be asked in this chapter is whether discourse can be affected by the influence of history and ecology. The history is that of St Columba, his settlement and of the rebuilding of the Abbey, the ecology is the overpopulation of the island by groups making different claims and offering cross-fertilisation of ideas.

The 'history' which surrounds the island and its many ruins gives it its character and ambience. The reconstructed buildings of today are closer to the monastery's medieval architecture than the early Celtic settlement. There is a story which is known to all who have an intimate knowledge of Iona about the training of guides: at the beginning of each season, they gather to decide where MacBeth is buried this year. Fortunately, the history of MacBeth does not concern us, yet this anecdote is symptomatic of certain attitudes towards history. MacArthur is perhaps the most sceptical writer and can claim some qualification as a native of the island; she argues that many of the island's historical sites are artefacts of mythical history. For instance, she suggests that 'the hermit's cell' may in fact not be for the remains of such but a structure which was built for milking cows during the eighteen-nineties<sup>1</sup>. She also suggests that much of the excavation which has been undertaken has offended the islanders in order to prove certain socially divisive and historically controversial theories. The Iona Cathedral Trustees have at various times over the years offended the islanders over their strictures and changes to historical traditions in order to preserve, or create, the history which is Iona. MacArthur's book is a persuasive

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<sup>1</sup> MacArthur, [E.] M., Columba's Island - Iona from Past to Present, EUP, Edinburgh, 1995, p15.

argument that the history of Iona may have become an artefact, a myth, which has fed the hunger for a close association with Celtic civilisation.

Bowman argues that Celtic civilisation has taken on a cult status within 'New Age' circles and that druidic practices have become, if not synonymous, at least associated with Celtic practices. She describes conferences of druids being held in the Columba Hotel when the evidence is scant that there were any druidic practices on Iona<sup>2</sup>. Bradley argues that the Celtic belief in the 'goodness of nature' sprung from three sources: first their argument with St Augustine, who found sin pervading all of creation; second they Christianised the nature worship of the Druids, which was native to many of the areas they were active in; and third they simply lived close to nature, which gave rise to miraculous stories and legends. The correlation between Druidic practices and Celtic Christianity is popularly held but in strict terms of theology may be a spurious correlation<sup>3</sup>.

Márkus and Clancy further suggest that there is no such thing as the 'Celtic Church', that there were rather pockets of disparate Celtic practices sometimes united by travel between Ireland and sites such as Iona<sup>4</sup>. Iona, in their assessment, became a centre of scholarship and art and indeed had connections with Rome, but the theology as expressed in poetry did not depart much from orthodoxy, until the issue of the dating of Easter, other than being accused by Gregory the Great (d. 604) of being excessively theocentric<sup>5</sup>. The other contribution of the Celts during the period of the Iona Abbey was the preservation of Greek scholarship, which was lost in other parts of Europe.

Briefly, Celtic practice was not a parochial, cultic, affair but a highly cultured Europeanised branch of Christianity which has been appropriated by many, sometimes even by the Iona Community. The legacy or myth has had fuel added to it by the romanticism of some historians. For instance, in 1920, Lucy Menzies' book on the

<sup>2</sup> Bowman, M., *Reinventing the Celts*, *Religion*, No. 23, pp147-56.

<sup>3</sup> Bradley, I., *The Celtic Way*, DLT, London, 1993, Ch. 3.

<sup>4</sup> Clancy & Márkus, T. O. & G., *Iona - The Earliest Poetry of a Celtic Monastery*, EUP, Edinburgh, 1995, p8.

<sup>5</sup> *ibid*, p67.

life of St Columba had a conclusion which suggested that he established independence from the Roman Catholic Church, laid the foundation for the Church of Scotland and gave character to the Scottish nation as we know it now by uniting the Picts and the Scots, establishing the centre of the united church in Dunkeld<sup>6</sup>. It was probably a very good book to fuel George MacLeod's enthusiasm! There is another book of the same ilk, which devotes a chapter to St Columba as the archetypal Scot, drawing mainly on Adomnán for background. It is unwise at the best of times to take an uncritical view of Adomnán's account of the saint<sup>7</sup>.

It is worth offering two examples of current 'Celtic' thinking from the Iona Community. The Rev'd Peter Miller was Presbyter at St Andrew's Church in Madras from 1978 and 1983 in other years he held other positions in Madras diocese<sup>8</sup>. He equates the Indian propensity to pray for everything mundane, down to a new car, as equivalent to Celtic Incarnational theology; when probably it should be more properly read as a description of Indian belief and practice. An example of liturgy published by the Iona Community is the *Wee Worship Book* which has orders of service based on Celtic theology. The following excerpt comes from '*A Celtic Morning Liturgy*' and shows the characteristics which are thought to be Celtic but could equally well be described as creationist:-

The peace of God,  
The peace of God's people,  
The peace of Mary mild the loving one  
and of Christ, King of human hearts,  
BE UPON EACH THING OUR EYES TAKE IN  
BE UPON EACH THING OUR EARS TAKE IN,  
BE UPON OUR BODIES WHICH COME FROM EARTH,  
BE UPON OUR SOULS WHICH COME FROM HEAVEN,  
EVERMORE AND EVERMORE,  
AMEN.<sup>9</sup>

<sup>6</sup> Menzies, L., *St Columba of Iona A Study of His Life, His Times & His Influence*, Dent & Sons, New York, 1920, Ch. XVII, (*Columba's Influence on the Scottish Nation and Church*).

<sup>7</sup> Reith, M., *Beyond the Mountains*, SPCK, London, 1979, Ch. 3. This is the only book on spirituality cited in Gollhofer's thesis.

<sup>8</sup> He was preceded by Rev'd Murdoch MacKenzie, who is also a member of the Iona Community.

<sup>9</sup> Wild Goose Worship Group, *A Wee Worship Book*, Iona Community, Glasgow, 1989, p19.

The second legacy of St Columba is surely his concern with healing. Adomnán of Iona wrote the *Life of St Columba* (circa 697). Adomnán's motive is stated towards the end of this book: "To this point we have written about those miracles of power which almighty God worked through this praiseworthy man while he lived in this present life."<sup>10</sup> Book II contains many stylised accounts of miracles which are based either on the format of the gospels or influenced by Celtic traditions. An example of the former would be the changing of water into wine as Columba's first miracle when he was an altar boy, followed by nature miracles, including the healing of a raven which was considered to be a bird of ill-omen by the Celts. One point that is often overlooked is that these healing miracles did not take place on Iona, because he generally discouraged pilgrimages to the island. It is also overlooked that despite the veneration of Columba as dove by Adomnán, Colum Cille, the dove of peace of the church, had a warrior background and many of the miracles which are recounted in Book I are connected with battles and suggest that his exile from Ireland may not have been voluntary.

There are six healing miracles recounted in Book II, all of which took place elsewhere than Iona and often as the result of fervent prayer by the Saint. There is a story told of how St Columba brought a young boy back to life after the fashion of Elijah<sup>11</sup> and yet another of him sending healing water to a friend's daughter who had broken her hip in two places<sup>12</sup>. The blessing of wells has already been noted and was a common practice of saints, normally appropriating an existing Pagan holy well<sup>13</sup>. The work of Adomnán was highly stylised but probably left the impression of Iona as a place of healing.

It must be asked why St Columba took precedence in popular perception over St Ninian who had arrived in Whithorn almost one hundred years before Columba and established a missionary base in Galloway. It may have been that George MacLeod

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<sup>10</sup> Adomnán, *Vitae Columbae*, II 43. All quotations are taken from: Sharpe, R., *Adomnán of Iona - The Life of St Columba*, Penguin Classics, London, 1995.

<sup>11</sup> *ibid.*, II 32.

<sup>12</sup> *ibid.*, II 5.

<sup>13</sup> Chadwick, N. K., *The Age of Saints in the Early Celtic Church*, OUP, London, 1961.

and all the tourists of the nineteenth century glamorised Iona in a way that Whithorn was not. The essence of the inspiration of Columba can be summed up in the *Prayer of the Iona Community* which has been used from the beginning of the Community to portray him as an evangelist and leader as befits a member of the Iona Community. It has even been rewritten in inclusive language but the older version will be quoted because in their haste to correct it, those who undertook the revision failed to realise that ‘people’ upsets the rhythm of the prayer. From this prayer, it may be seen that Columba is remembered by the Community because of his missionary activity and the blessedness of the island. Yet, the prayer is a petition for the continued purpose in the sight of God for Iona.

O God our Father, who gave to your servant Columba the gifts of courage, faith and cheerfulness, and sent men forth from Iona to carry the word of your evangel to every creature, grant, we pray, a like spirit to your Church, even at this present time. Further in all things the purpose of our community, that hidden things may be revealed to us and new ways found to touch the hearts of all. May we preserve with each other sincere charity and peace and, if it be thy holy will, grant that a place of your abiding be continued still to be a sanctuary and a light. Through Jesus Christ our Lord. AMEN<sup>14</sup>.

This prayer summarises not only the aims of the Iona Community but also does credit to the testimony of Adomnán and others to the power of St Columba. It is generally attributed to George MacLeod but is in fact anonymous. The prayer emphasises most of the qualities discussed by Adomnán and concentrates on outreach through evangelism. The moving phrase in it is “to touch the hearts of men”, which is undoubtedly something which Columba is thought to have done.

### **The Cult of Iona & Modern Pilgrimages**

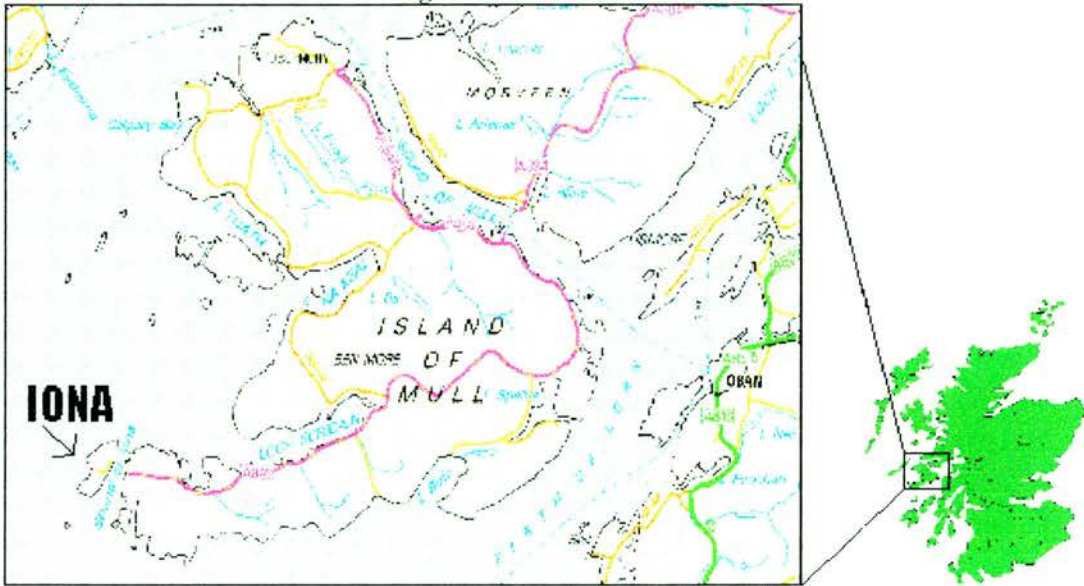
The history of visitors to Iona is long and illustrious which meant that the romance of the island grew in stature and was the subject of much artistic endeavour and the surrounding islands shared in the glory. Mendelssohn wrote *The Hebridean Overture* celebrating the wonder of Fingal’s Cave, whilst in *Kidnapped* Sir Walter Scott brought Erraid alive as the place where Balfour landed to begin his adventure on the mainland. Boswell recorded Dr. Johnson’s aphorism which has become part of the sacred canopy of Iona. After visiting the island he wrote, “...that man is little

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<sup>14</sup> Iona Community, *Prayer for the Iona Community*, *Miles Christi*, *op cit*.

envied whose patriotism would not gain force upon the plain of Marathon, or whose piety would not grow warmer among the ruins of Iona.” It was one of the MacLeod dynasty, Neil MacLeod, who showed the two travellers around the island in 1773<sup>15</sup>. In recent times, the burial of the late John Smith, the Labour Party leader, has heightened public awareness of the mystique of the island. MacArthur documents many of the contributions of travellers to the island in her anthology of writings<sup>16</sup>.

Figure 1 - Location of Iona



Columba influenced many of the islands around the West coast of Scotland by establishing sacred sites. With increased interest in Celtic studies these islands have become better known and awareness of their spiritual value has grown. The Scottish Episcopal Church owns Bishop's House and runs retreats within it, whilst the Roman Catholic Church is currently expanding a very small property to make a retreat centre. The Church of Scotland, on the other hand, has retreated over the years and no longer regards the island as worthy of a resident minister. As will be shown below this is not an insignificant decision. All this activity has meant that pilgrimages have extended to other islands. Father Gerard Hughes publicised one such pilgrimage to a deserted island where he practised a personal retreat which allowed the opportunity to follow the Spiritual Exercises of S<sup>t</sup> Ignatius. Hughes is important because of his

<sup>15</sup> Ferguson, R., *George MacLeod op cit*, p4.

<sup>16</sup> MacArthur, [E] M., *Iona op cit*.

had an important influence on some visitors to Iona. He describes the place of his pilgrimage thus:-

*Eileach an Naoimh* means 'the rocky islet of the saints' and lies to the south of Mull about 24 kilometres from Iona, the island where St Columba settled and from where Scotland was evangelized. According to legend, St Brendan had lived on *Eileach an Naoimh*, St Columba retired to it whenever Iona became too much for him and Princess Eithne, Columba's mother, is said to lie buried on a hillock on the island. Whatever the truth of the legends, there was certainly a small monastic settlement on the island. The walls of a ninth-century Celtic chapel are still standing and also the ruins of two interconnected beehive cells. Near the chapel there is a curious underground cell, known as the dungeon, which provides the only sheltered spot on the island<sup>17</sup>.

The importance of this pilgrimage lies in its difference from the typical programme of the Iona Community. There was a group living on Iona around this time who developed an interest in a different spirituality from that of the Iona Community and wished to develop an alternative. One of the objectives of this chapter is to document various alternatives which developed in the period covered by this dissertation and involved different types of discourse. Hughes possibly inspired one group with alternative ideas which will be discussed below.

When it comes to 'New Age' involvement on Iona there is a great danger of entering a minefield of our own making. Steven Sutcliffe is undertaking as a PhD project, at the Open University, an ethnographic study of the 'New Age' movement in Scotland with special reference to Findhorn<sup>18</sup>. Iona, however, has entered into his studies as so many 'New Age' visitors to Scotland take in Iona during their travels. Much of his research so far has involved investigations of alternative health exhibitions throughout Scotland. There is ample evidence that Iona is regarded as a site situated on a ley-line, indeed one which connects it with Glastonbury and other such 'sacred sites'. My interview with Patrick MacManaway centred mainly on his interest in geomancy and his assertion that religious sites only appear where earth energies are close to the surface<sup>19</sup>. The MacManaway family will be dealt with later as a case study, but it

<sup>17</sup> Hughes, G. W., *In Search of a Way - Two Journeys of Spiritual Discovery*, DLT, London, 1986, p21.

<sup>18</sup> Sutcliffe, S., *Some Notes on a Sociology of New Age and Related Counter-cultural Religiosity in Scotland*, *Journal of Contemporary Religion*, Vol. 10, No. 2, Oxford, 1995.

<sup>19</sup> Research Interview, February 1994.

suffices at the moment to draw attention to Patrick MacManaway's concern with ley-lines. Golligher has also published a paper on ley-lines prior to undertaking his thesis, which is mentioned in the Overview (page 3), which presumably included some reference to Iona<sup>20</sup>.

Northcott argues that healing is where 'New Age' and Christian pastoral theology meet in therapy<sup>21</sup>. He goes on to argue that the rediscovery of natural forces is important in the context of the OT and that the concept of 'personal transformation' resonates with many of the aims of pastoral care. Notwithstanding his sympathy for 'New Age' therapies, it is possible to argue that the problem which he and others address is a social construct. In as much as the more you describe a phenomenon as a problem, the bigger a problem it becomes. This can be more adequately explained by reference to Foucault, who writes of *problematization* as describing a discursive phenomenon, which may or may not exist but has a power "that brings something into the play of truth and falsehood and sets it up as an object for the mind."<sup>22</sup>

Openness and tolerance are hall-marks of the Iona Community which pose their own set of problems insofar as these qualities make it difficult to condemn activities which are seemingly harmless yet often distasteful to some with orthodox Christian faith. The Community is by no means concerned with 'New Age' activities, yet many have befriended and assisted the individuals who appear in the case studies below. They have had to hold the tensions of Christian orthodoxy with an acknowledged sympathy for some of the schemes and therapies which have become associated with other factions on the island.

English argues that there are three categories of people interested in 'New Age' matters. These are very instructive categorisations in an otherwise negative thesis.

<sup>20</sup> Golligher, J. M., *Leylines in Modern Britain: The Sacred Geography of a Pilgrimage site as an Expression of Folk Protest*, New York Folklore, Vol. XIII, No. 3-4, 1987, pp73-86.

<sup>21</sup> Northcott, M. S., The New Age and Pastoral Theology: Towards a Resurgence of the Sacred, Contact Pastoral Monograph No. 2, Edinburgh, 1992, p12ff.

<sup>22</sup> Quoted in: Castel, R., "*Problematization*" as a Mode of Reaching History, Foucault and the Writing of History, Goldstein (ed.), J., Blackwell, Oxford, 1994, p238. One might speculate that the "problem" of 'New Age' thinking in modern history may be compared with the obsession with witchcraft in an earlier century.

The first category consists of those who accept New Age doctrines with a hard core acceptance. These are most likely to be interested in gurus, mystics and other types of delivered spirituality. The second group of people accept a new age (lower case) in the sense that they are looking for a new world order, and tend to have a subjective view of authority and dislike hierarchy. The third category do not consider themselves to be involved in New Age thinking but are loathe to attack doctrines such as Anthroposophy, which preceded it<sup>23</sup>. George MacLeod and possibly Ian Cowie would fit into this category. The conclusion must be that some older members of the Iona Community fall into the third category whilst some younger members may come into the second in so much as they take an interest in alternative therapies and environmental issues, but are almost all hostile to the more extreme of 'New Age' thinking. However to suggest that this is a new phenomenon on Iona is to do an injustice to the likes of Sir David Russell.

This analysis is not supportive of the idea that 'New Age' has actually become a *problematized* issue. A more comprehensive analysis might suggest that the situation is more complicated. Heelas argues that support for 'New Age' activities tends to appear in clusters with groups interested in healing, others in self-expression, and yet more looking at ways of increasing their prosperity. He argues that most people are attracted to 'New Age' activities in an attempt to come to terms with modernity and to find a self-defined role within it. He further insists that most of the ideas that are adopted are not new but have their origins in the radicalism of the late nineteenth and early twentieth century, of which Theosophy and Rudolph Steiner were important manifestations. He concludes that 'New Age' is actually "embedded in, whilst exemplifying, long-standing cultural trajectories"<sup>24</sup>. Heelas argues that 'New Age' activities are as much an adjustment to modernity as Berger (see Conclusion, p273f.) would argue certain evangelical movements are an adjustment to modernity and the quest for certainty which both offer.

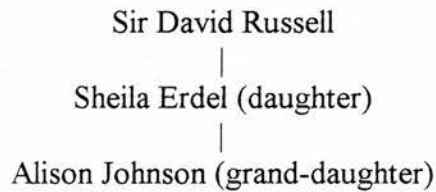
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<sup>23</sup> English, B. D., The Challenge of the New Age to Christian Theology and Life, EU PhD., unpublished, 1994, p27.

<sup>24</sup> Heelas, P., The New Age Movement, Blackwell, Oxford, 1996, p153.

What can now be suggested is that those who can accommodate within their mental framework some 'New Age' activity do so because they accept modernity and have even passed to post-modernity and do not find a need to *problematize* the issues which concern them. If this is so it is yet another manifestation of the openness within members of the Iona Community.

Housing is in very short supply on Iona, resulting in a reluctance to sell, which has meant that families tend to have had a long association with the island. This is evident in the Russell family tree's involvement with Iona:-



Alison Johnson is the current owner of the Columba Hotel on Iona. The Iona Community is affiliated to the Russell Trust which has an active interest in spirituality and alternative developments. This can be evidenced by a reference in the minutes of the *Christian Fellowship of Healing (Scotland)*:-

Mr Murray said that the time has come for co-operation between ministers and the medical profession on a Christian basis. There are about twenty medical men in Edinburgh interested in healing as part of their faith. The attitude of most doctors is a stumbling block - we have to make every effort to undermine this resistance. It is well known that the late Sir David Russell was very interested in Christian Healing. You might approach the Trust formed at his death.<sup>25</sup>

MacIntyre argues that Sir David Russell should be "categorically" credited with conceiving the notion of restoring the ruins of Iona Abbey. There were many plans to develop Iona for various purposes and Sir David was the first to procure plans by a distinguished architect in 1931. He engaged an architect by the name of Fairlie to produce and exhibit plans to the Royal Scottish Academy. It was the culmination of a dream which had begun in the closing years of the last century when he had photographed the ruins on several of his many holidays on Iona. He envisaged Iona as a centre of learning, peace and retreat for ministers in training. There were, other visions afoot at the time but he teamed up with George MacLeod and took great

<sup>25</sup> Minutes, *Christian Fellowship of Healing*, May 11th 1959.

satisfaction in watching developments during the war-time years<sup>26</sup>. One of the other plans was advocated by Clare Vyner who wanted to establish an "Undenominational Social Service" training centre on Iona which would offer a training in "health and hygiene, agriculture, fishing and gardening, weaving etc."<sup>27</sup> There would also be theological training and the students would return to the mainland in a missionary capacity based on Quaker principles. George MacLeod did not think much of the scheme, but in later years developed his interest in young offenders and indeed took over the fishing estate on the Ross of Mull called Camas that was used as an outward bound centre for many, but especially for those boys whom George MacLeod encountered in his work with the Polmont Borstal and young offenders from prison. Evidence of his involvement and belief in the healing power of forgiveness manifested itself in George MacLeod's work which perhaps grew out of the germ of an idea from this period. The Russell Trust, which was set up in memory of a member of the Russell family, invested heavily in the fledgling Iona Community but had some disagreements over the role of industrial chaplains who wished to become involved in labour relations and politics. The Trust has continued to support the Community and St Andrew's University in particular. Nevertheless, the influence of the friendship, and the debate over the future of the ruins, probably had an effect on future developments in the Community. The Trust is still run by the family but mainly in the hands of the Erdel branch, who still run the family paper mill in Fife.

I have met people who say that Divine Healing was inspired by Tudor Pole, but although I can find no evidence to support this it is apparent from the biography of Sir David Russell that he often discussed the affairs of the Iona Community with him.

Turning now to the so-called 'New Age' visitors to Iona, again it is apparent that their presence is not a new phenomenon or even one that is confined to the Sixties. The most obvious activities took place in the Columba Hotel, although the Findhorn Foundation bought Traigh Bhan on the island, some fifteen years ago. To those who are immersed in 'New Age' thought, Iona holds many attractions: it is both a special

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<sup>26</sup> McIntyre, L., *op cit*, p193ff.

<sup>27</sup> Vyner quoted in McIntyre, *ibid*, p195f.

place in terms of ley-lines and psychic experience and also as a remote place of pilgrimage renowned for its peace and harmony. Sjöo quotes several 'New Age' commentators who offer extravagant claims for Iona, although as a feminist she is not entirely sympathetic to the patriarchal approach of some of those she quotes. The following passage is attributed to a writer by the name of Thomson:-

Thomson, who wrote a book about the goddess in the early nineteen eighties, founded the Lindisfarne Association on Long Island in 1973. Together with Sri Aurobindo's Auroville the 'planetary city' in India, Findhorn and *Iona in Scotland* [italics added], it is one of those so-called 'light centres' in a network of light whose 'strands of light like the proto-neuronal pathways in the body, attract physical matter and energies to them so that light could be embodied in a new college for a new culture'. These would replace the dead and decaying centres, like New York or London, of those who cannot let go of the old.<sup>28</sup>

In terms of discourse the Iona Community can separate Iona from the 'Western world' in a similar way whilst not indulging in the language of writers such as Thomson. For example:-

Some years ago Marin Pawley wrote some prophetic words about the condition of our present Western culture. Among other things he said: "Western society is on the brink of collapse - not into crime, madness, violence or redeeming revolution, as many would believe - but into withdrawal. Withdrawal from the whole system of values and obligations that has historically been the basis of public, community and family life.

Western societies are collapsing not from assault on their most cherished values, but from a voluntary, almost enthusiastic abandonment of them by people who are learning to live private lives of unprecedented completeness with the aid of the momentum of technology which is evolving more and more into a pattern of socially atomising appliances."

Perhaps Pawley is too pessimistic, but in terms of our work, as a Community, on the island we are, day by day, offering a living alternative to the belief that the human journey is ultimately only a "private" journey.<sup>29</sup>

The Rev'd Peter Millar, current Warden of the Abbey, wrote this passage which illustrates yet again that even pilgrims to the Iona Community are looking for an alternative life-style or discourse. Undoubtedly, people do visit Iona under the influence of such writing but Bowman points out that they also visit because of the 'Celtic myth' in search of druidic symbols and to perform rituals. It can be inferred

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<sup>28</sup> Sjöo, M., *New Age & Armageddon - The Goddess or the Gurus? Towards a Feminist Vision of the Future*, The Women's Press, London, 1992, p87.

<sup>29</sup> The Iona Community, *Annual Report 1995*, Glasgow, 1996, p3.

that people with a 'New Age' background come to Iona for a variety of different reasons.

It is at this point that Sir George Trevelyan enters the scene on Iona as one who brought alternative thinking to the island. The Columba Hotel was bought by John Walters who undertook to facilitate the Iona Community by gearing their meals etc. to the Abbey's programme. It is rumoured, but totally unsubstantiated, that the Iona Community actually assisted John Walters to set up the Columba Hotel, but what is beyond doubt is that there was, and still is, good-will between the two, which faded slightly when the Wrekin Trust began to run separate conferences in the hotel inspired and led by Sir George Trevelyan. Indeed many families, including the writer's, took advantage of these facilities eschewing the more austere 'comfort' of the Abbey.

Whilst the Iona Community was wooing John Walters there is much more evidence that Peter Caddy of Findhorn was also doing so, in a much more aggressive fashion. The hotel came on the market and was bought by John Walters in spite of opposition by the Duke of Argyll who wanted to own the hotel for his own guests, but only if he could have a liquor licence, which upset the islanders<sup>30</sup>. Caddy knew Walters as one who was sympathetic to Findhorn and he offered to work in the hotel for a summer in order to help establish the Iona link which was so important to his wife Eileen. Eileen's 'directions' were quite aggressive when it came to Iona. She thought that both Peter and herself should run the Columba Hotel, thus ensuring that most of the accommodation on the island was available to sympathisers. This would allow them to develop other strategies such as demonstrating that the island could be self-sufficient in vegetables and such produce<sup>31</sup>.

Why were Peter and Eileen Caddy so interested in establishing this link? Eileen Caddy believed strongly in a sacred triangle of Iona, Findhorn and Glastonbury and her guidance to Peter before his first pilgrimage to Iona to meet John Walters illustrates this belief, which we have seen echoed in other writings in this chapter.

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<sup>30</sup> Caddy (with J. Slocombe & R. Caddy), P., In Perfect Timing: memoirs of a man for the new millennium, Findhorn Press, Forres, 1996, p253.

<sup>31</sup> *ibid*, p247.

It is a linking up with a very strong Centre of Light. This is a triangle, Glastonbury, Iona, Findhorn. You may not see the significance of this now, but you will do in the days to come. Peter is to be open to every contact, and there will be several very important ones. They will be drawn to him. My blessings are on this journey. Many important events will spring from it.<sup>32</sup>

During the incumbency of Rev'd Harry Miller in the 1980's an American couple spent some time at Bishop's house on the island. They concluded that it lacked any quiet retreat centre and they used their wealth to buy the old Free Church Manse, which they renamed Duncraig. Lindley and Gerry Fosbroke established the Cornerstone Foundation to provide retreats mainly for burned-out ministers and others who wished a quiet time - a retreat in the style recommended by Hughes and by those who were interested in renovating the Nunnery. They called the house 'Christian' and the Foundation still stresses this at present. Miller was against the activities of those associated with the Columba Hotel. Because of the possible invasion of privacy, it is difficult to document his opposition which earned him an article in the *Sunday Express*. His preaching was some of the most powerful on the island and a passage is quoted by *Cornerstone News* to underline the distance between them and any group associated with 'New Age' activities:-

If someone gets stuck in a bog, it's no use you jumping in alongside and trying to help. First you must find some firm ground on which to stand, and then you can reach out a hand to the person in the bog.<sup>33</sup>

Stories associated with Miller's pastoral concerns for parishioners affected by psychic and 'New Age' ideas are too sensitive to document adequately enough to be included in an academic work. Cornerstone's relationship with the Iona Community is harmonious, save that they conduct their own devotions and at its inception there was some financial confusion between the US tax-exempt charity in Boston called *ICF Inc.* and the New World Foundation established in America by the Iona Community. There is no suggestion of wrong-doing, simply of confusion. The example of Duncraig illustrates the tensions held even within and between different Christian

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<sup>32</sup> *ibid.*, p238..

<sup>33</sup> Rev'd Harry Miller, quoted in: Cornerstone News, Iona Cornerstone Foundation, Boston, Vol 9, No. 1, June 1996.

groups and should be borne in mind as we return to the activities at the Columba Hotel.

The Wrekin Trust was set up by Sir George as an adult education centre, concerned to teach alternative thinking in education and health. Sir George established the Trust in 1971 with a group of like-minded friends to investigate "the intrinsic spiritual nature of humanity and the universe". Clark categorises the Wrekin Trust as "a catalytic group with no fixed meeting place", it certainly toured various countries, other parts of Britain and very often Iona<sup>34</sup>. The trust folded in 1986 but its most successful series of conferences was on 'Mystics and Scientists' which still continue<sup>35</sup>. Conferences were regularly held featuring such luminaries as Fritjof Capra and experts on Rudolph Steiner. The Iona Conferences were begun by Walters after a psychic experience on Mull precisely when, unbeknown to him, Sir George was having to close down a larger conference centre in the south of England due to financial difficulties<sup>36</sup>. There are two conferences accessible from the Findhorn records, one relates to Rudolph Steiner, the second in 1978 was about 'the Cosmic Christ' and was led by a Rev'd Kenneth Cumings who was a doctor of medicine, an Anglican priest and latterly warden of a centre of healing in S. E. England.

Lastly, the Findhorn Foundation became involved principally through the Columba Hotel conferences, but attracted the interest of the Iona Community which culminated in a conference held in the Abbey whilst John Harvey was warden. John Harvey tells the tale of how he was accompanied on the Wednesday Pilgrimage around Iona by Peter Caddy, one of the co-founders of the Findhorn Foundation. After each stop and meditation, he would turn to John and say, "You know, John, I agree with every word you say." There may be a tape extant of this conference in the NLS, but it is in the wrong format and the facilities are not available to reformat it.

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<sup>34</sup> The Wrekin Trust is referenced in Clark, D., Towards an Alternative Society, SPCK, London, 1977, p148.

<sup>35</sup> MacEwan, A., *Obituary: Sir George Trevelyan*, Independent, Feb 26, 1996.

<sup>36</sup> Papers & Tapes, Findhorn Community, NLS. These are embargoed and permission must be sought from the Findhorn Foundation for access.

The Findhorn Foundation bought Traigh Bhan, “a house near the vibrant life of Iona Abbey”, where it now organises retreats, including healing weeks dwelling on “the incarnation and transformation of the Self, and the healing and transfiguration of our world.”<sup>37</sup> The Foundation has a commitment to a generalised belief in reincarnation which appears to be self-determined and not as fatalistic as the Hindu concept. It is one thing for an oppressed Hindu to strive to escape to *karma* which the gods have dealt him; it is quite another to assume control. It would be fair to say that most of this language belongs to the 'New Age'. Carol Riddell, the most recent chronicler of the Foundation concludes that there were three elements in their spirituality; Theosophy, Anthroposophy and, in the case of Eileen Caddy, Christian mysticism after Julien of Norwich and others<sup>38</sup>. Riddell argues that 'New Age' has become an unwelcome label for the Foundation and that it is not stressed nowadays<sup>39</sup>.

All these people competing for ideas and influence shared one thing in common and did so unequivocally. Each one was opposed to weapons of mass-destruction with the possible exception of Sir David Russell who was critical of George MacLeod and his view of the atom. Hughes wrote about the nuclear age and his despair at the build-up of weapons around the Clyde<sup>40</sup>. The Findhorn Foundation neighbours the RAF base at Kinloss and is well aware of the military build-up in the Highlands of Scotland.

### **Two case studies involving healing**

The background which has preceded this section provides all the important actors for the case studies which both involve healing and a search for wholeness. The first involves the Nunnery which lies as well-tended ruins not far above the pier on Iona on the road leading from the village to the Abbey. These ruins are held in trust by the Iona Cathedral Trust and were the source of controversy in the Seventies when a

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<sup>37</sup> Findhorn Foundation, *Iona Retreats, Programmes and Workshops April- October*, 1996, p23.

<sup>38</sup> Riddell, C., *The Findhorn Foundation*, Findhorn Community, Forres, 1990, conclusion.

<sup>39</sup> *ibid.*, p64. She is echoing views expressed by David Spangler: Spangler, D., *Emergence: the Rebirth of the Sacred*, Dell, New York, 1984, p158f.

<sup>40</sup> Hughes, G. W., *God Of Surprises*, DLT, London, 1985, Ch. 13.

group put up a plan to restore them as an ecumenical retreat centre. The Trust was established by the eighth Duke of Argyll when the ruins were handed over to the nation in 1899 as a place of worship for all Christians. The Cathedral, or Abbey, has never belonged to the Iona Community but has always been vested in the Iona Cathedral Trust who have leased the Abbey to the Iona Community and has renegotiated the lease periodically. The ruins of the Nunnery were no part of the Community's remit except insofar as the Leader and George MacLeod, now Lord MacLeod, were on the Board of the Trust. In 1974, as far as the Trust was concerned there was the more pressing issue of maintaining these Nunnery ruins in a state of safety after extensive repairs were required to the wall adjoining the main road<sup>41</sup>.

The case study has two themes to it which do not run concurrently but do relate to the same people, namely Lady Ursula Burton and, in connection with the Trust, Sheila Erdel, the daughter of Sir David Russell, who became convenor of the Nunnery Appeal which opened after formalisation and consolidation by the Iona Cathedral Trust in 1978<sup>42</sup>. This appeal should be distinguished from the appeal which is about to be discussed in that it only concerned the ruins.

Ursula Burton is recorded as being in and around Iona from 1974 and her recorded involvement ends in 1991. She died two years ago in Wales, but her family home was on the Black Isle near Inverness and after her divorce lived in Tranent. She was both a friend and colleague of Hughes and often attended the retreats which he held on the island, sometimes under the auspices of the Iona Community. In 1974, she met Janice Dolley on Iona who collaborated with her in a book which was published in 1984.

It is a commonplace to hear tourists comment that they wished the Nunnery could be restored as the Abbey has been. In 1976, a group was established who were willing

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<sup>41</sup> Minutes of the Iona Cathedral Trust, December 18th, 1973, p2. These minutes can be viewed by permission of the Clerk at the offices of Anderson Strathern W. S., 48 Castle Street, Edinburgh. EH2 3LX.

<sup>42</sup> *ibid.*, June 26th, 1978, p3.

to translate such a fantasy into reality. They approached the Trust Architect, Mr Crichton Lang, and outlined their plans to restore the Nunnery to make “an ecumenical retreat as a place of prayer and hospitality, accommodating about 20 people”<sup>43</sup>. The Iona Cathedral Trust was sceptical about the ability of such a group to carry forward such a scheme but it was agreed to meet the Rev’d Mary Holliday on 3<sup>rd</sup> March of that year to explore the matter. Thus the group was encouraged to develop their idea further. The proposed meeting was rather vague in its understanding as to who they might meet, but determined to meet Lady Ursula Burton and “a Mrs Erdel who has a house at Iona and was believed to be a relative of David Russell”. The Minutes suggest that the Trust considered that the likely cost of renovation would be around £250,000. Presumably this figure came from Lang. Either the group’s communication was poor; or the Trust already suspected the vagueness of the scheme. Whatsoever, it appeared to be a poor start.

The Minutes of the June meeting seem to have recorded two separate debates: one about the ethics of the project, and the other concerned with practicalities. The Leader, the Rev’d R. Graeme Brown, had met with Sister Mary Holliday and expressed encouragement from the meeting. George MacLeod submitted a paper entitled *Competing Claims of the Overseas Developing World* which was the first salvo in his opposition to the project. How could such expenditure be justified in the light of the world’s needs? The Moderator of the General Assembly of the Church of Scotland, the Rt. Rev’d Dr David Steel, constructively suggested an appeal to the International Benedictine Movement which was a good idea except that this movement promoted youth work which was already going on in the Iona Community youth camp. The practicalities were twofold: first, the architectural costs were going to exceed the original estimate as external factors were also going to be involved. Also, restoring Ancient Monuments always involve both greater expenditure and the requirement to conform to more regulations. The Minutes of the June meeting end:-

The Trustees agreed, without commitment, to look at the Rev’d Holliday’s proposals in further depth and to study the terms of her proposed Trust Deed, but

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<sup>43</sup> *ibid.*

emphasised that any project must be under their authority and the ægis and collaboration of the Iona Community<sup>44</sup>.

In February, 1977, the Trust had before it copies of correspondence between Lord MacLeod and Mary Holliday. MacLeod's opposition was strengthening and in his letters to Holliday, he had stressed the possible "divisive element potentially inherent in the restored Nunnery as in competition with the present devotional centre at the Abbey"<sup>45</sup>. Such an attitude is contrary to a spirit of openness to other attitudes and persuasions, yet one can understand the fear of an elderly man who had founded the Iona Community in the restored ruins of the Abbey settlement being threatened by the development of another type of community guided by different principles. These will be discussed shortly. He also drew on years of experience, pointing out that such a project would require a full-time leader with considerable charisma which Mary Holliday seemed unable or unwilling to offer. There was also little evidence that the community to which she belonged, the Farncombe Community was committed to the project as an extension of its work. In 1980 the Farncombe Community is recorded as having five resident members and 147 others who were committed to prayer for each other in unity; it was ecumenical and meditative in style<sup>46</sup>. The Community was founded in 1964, and was led by a 'visitor' who was appointed for five years and had considerable external authority. It was what Clark would class as a 'voluntary community', facing the challenge of single sex prior to a coherent feminist ideology<sup>47</sup>. Actually Clark was more concerned at that time with finding communities which were inclusive of both sexes, and elsewhere in his book he complemented the Iona Community on meeting the challenge. Graeme Brown recalls that Sister Holliday turned up to the meeting of the Community in a nuns' habit and gave the impression of orthodoxy and celibacy. It is not possible to see from the documentation available why this community wished to set up a youth centre in the Nunnery, and if this was so

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<sup>44</sup> *ibid.*, 12th June, 1976, p4.

<sup>45</sup> *ibid.*, 7th February, 1977, p3.

<sup>46</sup> Community Resources Centre, Selly Oak, A Directory of Christian Communities, Birmingham, 1980. See also Clark, D., Towards An Alternative Society, *op cit.*

<sup>47</sup> Clark, D., *op cit.*, p33.

one can understand the Iona Community's reluctance to encourage the project when it already had the Abbey Youth Camp and Camas operating.

There is a problem inherent in the main issue which was emerging as central to the Iona Community attitude to the scheme, attitudes which impinge upon the case studies which follow. The Leader was still of the opinion that the retreat centre would be within mainstream Christianity but Lord MacLeod had increasingly hardening opinions to the contrary. Brown felt certain that the centre would be in the mainstream with co-operation with all denominations and with the Roman Catholics. Was this a sign that the Iona Community was in fact less open than this thesis has suggested and was this particularly true of its Founder? The fact is that the liturgical reforms which George MacLeod instigated were extremely orthodox and the motivation behind healing was likewise. Of course, outside influences played a major part but faith in Divine Healing was based on a conviction that God was sovereign over all of his creation. What was happening in this period was placing on Iona an alternative which was threatening in ways beyond that which previous polite discourse had been able to absorb.

By 1978, opposition to the scheme reached such a crescendo that it became obvious that neither the Iona Community nor the Iona Cathedral Trust were going to approve it on religious grounds, quite apart from the thorny issues of finance and leadership. This opposition now came from various sources, and they were quite strict in their terms. First, the opposition of Lord MacLeod was fully accepted and endorsed. The Minutes record that his opinion that "...the possibility of another centre clashing with the present foundation" was at last considered valid, but yet more opposition came from members of the Trust. Second, the Principals of St Mary's College, St. Andrews and Trinity College, Glasgow, Black and Williams respectively, went further in opposing the use of the Priest's Room in the Nunnery: "...the Clerk was asked to clarify that this would be used, if at all, and subject to recall at any time, only for meditation, prayer and silence, and not for any Chapel or other services."<sup>48</sup> Others opposed any use. The Trust also tightened the control of the proposed appeal for the

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<sup>48</sup> *ibid.*, 26th June, 1978, p3.

'Nunnery Restoration Scheme', stipulating that the ruins be kept as such, the ruins of a Benedictine Nunnery.

When a separate Trust Deed was submitted for the restoration of the Nunnery the proposed Trustees were to be: Rev'd Sister Holliday, Lady Burton and the Duchess of Argyll. When the representatives of the Iona Cathedral Trust met with representatives of the Restoration Group on 20th April, 1978, the sederunt recorded was: for the Trust, Dr W. J. Morris [Minister of Glasgow Cathedral], Mr D. F. M. MacDonald [Principal Clerk of the General Assembly of the Church of Scotland], The Trust Architect and Clerk; for the Group, "Mrs Erdal, Lady Burton, Mrs Barbour, Fr. O'Donoghue, Mr Ross, & another lady."

Why had the opposition grown? Apart from Lord MacLeod's concerns about a rival institution on the island, the main reason seems to have been theological reservations about the activities which were likely to be staged at the restored Nunnery. Therefore we must examine parallel activities on Iona at this time. Most were happening in the Columba Hotel as has already been described.

The Findhorn Foundation and Sir George Trevelyan, who died aged 86 in February 1996<sup>49</sup>, brought with them to the Columba Hotel a new language which many in the Iona Community found upsetting. Any orthodox Christian would make the point that the flow of language is one-way. It is *from* Christianity *to* syncretism. Eileen Caddy recorded many 'words of wisdom' in books as late as 1981 which use mainly Christian, Buddhist and Jewish terms to describe God's purpose which is always love. God is often referred to as the Indweller; with God within us, we are guided by the Spirit which facilitates discovery. It is righteous to find the Christ-spirit or to be likewise guided by the teachings of Buddha. Thus righteousness becomes synonymous with a good *dharma*, and the two religions become inextricably linked in ways which Don Cupitt may never have imagined! Their omnipresent God remains undefined yet dependant on seductive traditional yet recycled language.

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<sup>49</sup> MacCarthy, F., *Craftsman at work on the New Age*, The Guardian, 16 February, 1996, p19.

In order to establish the justification for the doubts expressed by the Iona Cathedral Trust the views of two players in the alternative scene on Iona will be documented, those of Bruce MacManaway and Ursula Burton. There are papers available by Bruce MacManaway which were either presented to the Wrekin Trust or to conferences on Iona, and there are also two books by Ursula Burton which amplify her theological position. The latter will be dealt with first.

### **Lady Ursula Burton**

In 1984, Ursula Burton published a book with Janice Dolley in which they outlined their difficulties with the Church. Burton wrote from an Anglican perspective, Dolley from a Catholic. Each devoted a personal chapter to outlining their spiritual journey and the chapter by Burton offers an insight into why the Iona Community may have expressed doubts about the orthodoxy of the proposed retreat centre. First, she had discovered the unity in creation and accepted now the need to understand the integrity of the divine within the creation of universe and man. She had come to this conclusion from her study of Teilhard de Chardin and Jung's deep understanding of the soul. By accepting the cosmos "we become truly in tune with the infinite".

The realisation of oneness, of wholeness, was my first conviction. It might be fairer to say that I had a new and deeper awareness of that oneness of Creation which I had experienced as a young girl standing under the night sky and looking up at the stars.<sup>50</sup>

Her understanding of healing energies had now clarified since as a child her family had read and absorbed Agnes Sandford and found healing power in other energies. Her next discovery was the power of ESP. She developed sympathetic communication with friends as far away as New York and became convinced of the validity of such phenomena. She began to associate these powers with healing and channelling:-

I would urge anyone to pause and reflect when hands begin to burn in the vicinity of a person needing healing, or when some 'miraculous' event comes about after prayer..... Alternatively, if your mind is lit up by a profound statement applicable to your present need, stop for a moment and consider from whence it may have originated. The gifts of the Spirit are still being poured out on us to this day, and we must learn to be ever more open to receive them and to use them wisely. More

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<sup>50</sup>Burton & Dolley, U. & J. Christian Evolution - Moving towards a Global Spirituality, Turnstone Press, Wellingborough. 1984, p.

and more are we coming to realise that there are no such words as 'coincidence' or 'extraordinary' and that nothing happens by chance.<sup>51</sup>

Her final personal development was a sense of inner knowing which required healing which she obtained at an Anglican retreat centre, the Dorothy Kerin Centre at Burrswood, Kent. From this and other exercises she gained peace and concluded that the God within us gave us spiritual power to develop greater understanding of our oneness with the Infinite. The book concludes with an indication that she saw Iona as a place where new spiritual awakening which would involve the language discussed above, the language of syncretism, could come to fruition:-

One day, maybe, the realisation of man's destiny - the world's destiny - will be set free; and maybe this sacred isle, made holy by the prayers of St Columba and the Celtic saints, will be the place of this release, where the Uncreated Light will be able to break through and make all things new.<sup>52</sup>

Thus it becomes obvious that a leading light in the Nunnery Restoration Scheme was in fact evolving a theology which was different from orthodoxy but possibly in the tradition of anthroposophy, which the Iona Community had by now forgotten. However, in 1991 Ursula Burton published another book about her daughter Vicky. Vicky had suffered brain damage during a routine gynaecological operation in Edinburgh and lived for some considerable time after it in a very helpless state. Ursula never gave up visiting her and took comfort in her belief in ESP and the many letters of support which constitute a large section of the book. Martin Israel who was also associated with the Iona conferences praised her theme of her book in a preface. Some of these letters are about the comfort she gained from Gerard Hughes who actually wrote the introduction to the book. This introduction leaves the reader in no doubt that in 1982 she had discovered the value of the Spiritual Exercises of S<sup>t</sup> Ignatius Loyola. She herself was suffering from cancer at the time and like so many others who have already been alluded to in this dissertation, she decided to embark on a three month course of the Spiritual Exercises. A few years later the tragedy of her daughter's brain damage occurred<sup>53</sup>. Hughes directed various retreats on Iona

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<sup>51</sup> *ibid.*, p19.

<sup>52</sup> *ibid.*, p142.

<sup>53</sup> Burton, U., Vicky - A Bridge Between Two Worlds, DLT, London, 1991, p.xiff.

whilst Roman Catholic Chaplain at Glasgow University and as has already been established his style was very different from much of the Iona Community. Vicky died whilst Ursula was on one of these retreats and the night before a group met in the Oran Chapel to pray, which appeared to be an important sacred building to the group<sup>54</sup>. She was convinced that Vicky would have wanted her to be on Iona and as she wrote to her friend Janice:-

“When one is on Iona it is easy to have a glimpse of Jacob’s ladder, up and down which the angels travel bringing a higher consciousness into our world and in return taking our dreams and aspirations to be woven into the gossamer pattern of life. One has, indeed, a glimpse of humanity as being a bridge across which the denser vibrations of physical matter and the higher vibrations of spiritual awareness meet and mingle, each level raising and transmitting the one below. Is this not similar to the idea that Vicky may be acting as a bridge between the two worlds?<sup>55</sup>

She died in 1994 having returned to Invernesshire where she established her own retreat centre. She had previously spent some time as a counsellor at the Jesuit Spirituality Centre at St Beuno’s, North Wales, a centre where Hughes found inspiration for much of his later work.

I feel that two questions have to be asked both of the Iona Cathedral Trust and the Iona Community, which come out of this moving book. First, did they discount the peace which an alternative retreat centre might have brought; and second, was the Iona Cathedral Trust really aware of the spiritual possibilities which were inherent in a group such as that to which Burton belonged? Such questions have no answer, but might be amplified by the examination of Bruce MacManaway.

The evidence linking Ursula Burton to the conferences held in the Columba Hotel is purely circumstantial, but there are more concrete connections with the MacManaway family. Patricia MacManaway recalls meeting her at various conferences at Westbank in Fife and on Iona and remembers her as “someone in the scene and active and pleasant”<sup>56</sup>. Bruce MacManaway led a workshop in her home prior to her

<sup>54</sup> The grant for the restoration of the Oran Chapel came from the Russell Trust at a time when Sheila Erdel was active in its administration. Cf. Macintyre, L., *op cit*.

<sup>55</sup> Burton, U., (1991) *op cit*., p70.

<sup>56</sup> E-Mail from Patrick MacManaway <100544.707@compuserve.com>, dated 26/06/96.

separation. It can be confirmed by discussion with various members of the Community, but there is no documentary evidence save that which correlates her ideas with those of others whose ideas were being floated in the Hotel and elsewhere. In the case of Bruce MacManaway, the evidence is more readily available if still a little sketchy. The following table outlines the conferences for which documents are available and where his role is defined or name mentioned<sup>57</sup>.

**Table 2 - Conferences involving Bruce MacManaway in the Columba Hotel**

<b>Date of Conference</b>	<b>Subject of Conference</b>	<b>MacManaway's role</b>
May 1972	The Cosmic View	Director
September 1977	The Spiritual Man	Apologies
September 1978	The Cosmological Christ and the New Age	Apologies
September 1987	Death and Dying	Invited Participant

The following table gives a flavour of the type of conferences which were being organised in the eighties. It is uncertain whether each was on Iona except, of course, number three which is mentioned in the above table<sup>58</sup>.

**Table 3 - Other conferences in the Columba Hotel**

<b>Date</b>	<b>Subject</b>
September 1985	"Prince of Peace" - Launching the UN International Year of Peace
December-January 1986-7	"Queen of Peace" - Honouring Woman, The Christ Child, Peace and the Creative Feminine
September 1987	"Father in Heaven" - Mystery of Death and Dying via the World Religions - Medicine
January 1988	"Magna Mater Gloriana" - The 20th Century Church as The Maternally Divine Mother
September 1988	"The Kingdom" - All God's Children, One Human Family - Inter Faith Young Adults

The interest of the Iona Community is evidenced by a passage in the tapes in which John Walters read messages of goodwill from the Leader of the Iona Community, the

<sup>57</sup> See following two notes.

<sup>58</sup> All these details are taken from unpublished papers in the possession of Dr. Patrick MacManaway, Westbank Natural Health Centre, Strathmilgo, Fife. KY14 7QP.

Rev'd Graeme Brown and the Abbey Warden, the Rev'd Brian Crosby<sup>59</sup>. Also, it should be noted that all of the conferences advertised the Abbey Services with particular reference to the healing service, and that for the September, 1987 conference meditations in St Michael's Chapel were scheduled on a daily basis.

### **The MacManaway Family**

Major Bruce MacManaway, as he chose to style himself, was the grandson of the Bishop of Clogher in Eire, the son of an army officer and had a mother who was interested in spiritualism but kept her concerns to herself for fear of upsetting the family. MacManaway served as an officer in the Second World War and during his service discovered his gift of healing when he treated wounded soldiers when medical supplies ran out. In a lecture delivered on Armistice Day 1972, run by "Universal World Harmony" and the Wrekin Trust, he recounts the following:-

At the age of twenty I found myself with a Company to look after in France, and in the ensuing three week battle, which culminated in Dunkirk, medical supplies ran out, doctors were not available, and inevitably many people got hurt. I then found a tremendous impulse, to get my hands on my own wounded. This I did, with very extraordinary results, and according to doctors to whom we subsequently managed to get our wounded, it had saved their lives both from shock and from their wounds, it had minimised their pain and, in some instances, it had even stopped or prevented arterial bleeding and internal haemorrhage. Of all this I was truly ignorant - I just knew nothing about it. I was a very ordinary young officer<sup>60</sup>.

The war as a formative experience for healers has been a recurrent story in this dissertation and it is no less so here where MacManaway is found often illustrating talks with incidents from his war experience. He never lost his Anglican background and repeatedly either castigates the church for its intransigence or builds his own doctrine to justify his particular understanding of Jesus as a psychic healer.

In his book, he expresses resentment that many clergy fail to acknowledge the healing skills of the laity and believe that any laying on of hands must be undertaken by those

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<sup>59</sup> The Findhorn Foundation has deposited a great deal of material in the NLS relating to conferences, records of Eileen Caddy's, "Revelations" and other documents. The tapes are not always in an accessible format, but can be found in the file marked Iona'. All the material is embargoed and permission must be obtained from the Secretary of the Findhorn Foundation, Cluny Hill College, Forres, Scotland. IV36 ORD

<sup>60</sup> MacManaway, B., *Evidence for Survival*, Delivered at Cheltenham Town Hall, Armistice Day, 1972, p2, unpublished.

ordained by the Church. When his wife was interviewed she suggested that one such was George MacLeod who created a monopolistic atmosphere around the healing service. MacLeod's early writings would seem to bear out such a claim. MacManaway stressed that Jesus bestowed his gifts of healing on ordinary people, the laity, but never offers any understanding of the social context in which Jesus was portrayed in the Gospels. All healing gifts come from God and are interspersed throughout the population and may become available to many more after training in meditation, relaxation and heightened awareness of all the Odic Forces within the world of the living and those who have passed on.

MacManaway develops a theory of wholeness which is based on an understanding of Capra's depiction of science, physics, as the acceptance of the atom as vibrating energy which permeates the whole universe that we may tap into with heightened awareness of our unity with nature. Capra should have had most influence on 'New Age' thinking with *The Tao Of Physics*, but his later books expanded his thesis on the Cartesian dualism which exists in medicine. Like a number of his disciples, MacManaway does not do justice to his thesis which is more about dualism than about energy. Capra is basically arguing that from the Greek atomists to Newton, particles were regarded as solid and irreducible. They were thus objects in a mechanical universe which were observed by a different order (i.e. man). From La Plank onwards the atom became spatial and subsequent scientists developed quantum mechanics to help understand the nucleus and orbits of electrons<sup>61</sup>. The research on the emission of energy by Bohr, Rutherford and Heisenberg all of whom added to our knowledge of the energy contained within the active atom. Heisenberg is most frequently quoted because his Principle of Uncertainty is seen as a breaking down of the barriers between precise science and speculation, when in fact the principle is a rather precise description of the relation between momentum and position, specifically of electrons. The principle's impact on mysticism precisely of the type under

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<sup>61</sup> Capra, F., *The Tao of Physics - an Exploration of the Parallels between Modern Physics and Eastern Mysticism*, Wildwood House, London, 1975. A revised edition was published in 1993. The books on health did not begin to appear until 1982.

discussion has been noted by many<sup>62</sup>. For Capra, it now became possible to regard such observations as being in unity with the nature of human matter and as Capra was able to argue that dualism had disappeared and that humans were at last united with nature. With Capra's emphasis on energy, and mankind's potential to harness and use it as a source of power, the talents of the healer came into their own. The fact that his ideas may have been appropriated is typical but irrelevant. MacManaway begins to define wholeness in terms of being in touch with nature which resonates with Burton's own definition as shown above.

If we define healing not merely as curing symptoms but as making and becoming more whole, of bringing out the full potential, then we can include all life forms, and even the earth itself in the category of things worthy of our attention<sup>63</sup>.

The ability to heal depends upon becoming "tuned in" - becoming aware of the energy which flows throughout nature and can be seen in any energy from electricity, which at its microscopic level can be felt in the tingling of hands during the laying on of hands, to psychic experience in concentrating on those from beyond<sup>64</sup>. This chapter reveals his true interest in the paranormal and in mediumship. In later chapters MacManaway speaks at length of Spiritualism and again tries to legitimise such activity by quoting Church of England reports on the subject<sup>65</sup>. The main reference appears to be from a committee appointed by Archbishops Lang and Temple. His chapter devoted to dowsing is fairly conventional and might even be accepted by Ian Cowie, but then he talks of dowsing by proxy<sup>66</sup> which is certainly beyond Ian Cowie's credulity, who described one of his talks as a recitation of all the heresies of the centuries<sup>67</sup>.

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<sup>62</sup> Microsoft, *Uncertainty Principle*, Encarta 96 Encyclopaedia, Microsoft Corporation, Ireland, 1996.

<sup>63</sup> MacManaway & Turcan, B. & J., Healing: The Energy that Can Restore Health, Thorsons, Wellingborough, 1983, p39.

<sup>64</sup> *ibid*, p41.

<sup>65</sup> for instance, The Church of England and Spiritualism, Psychic Press (no date), quoted in MacManaway & Turcan (1983), p91.

<sup>66</sup> *ibid*, p67.

<sup>67</sup> related during a personal interview.

At first sight Bruce MacManaway appears to be a gifted healer who accepts that healing is of God and gives praise for his gifts, but his book never strays far from Spiritualism or the conviction that there are cosmic energies into which we can all tune and thus become much more complete people. Wallis, a lecturer in Social Anthropology at the University of Edinburgh, recounts how he attended one of MacManaway's courses in Fife and was asked to take part in the laying on of hands for the first time and was impressed by the discovery of his own talents as a healer<sup>68</sup>.

Bruce MacManaway's wife still teaches meditation and yoga at Westbank, Strathmiglo, and his sons are likewise involved in alternative therapy. Patrick trained as an orthodox physician but now works mainly in geomancy, what he styles as 'psychic cleaning', and in the study of sacred sites. He believes that our psyches can be disturbed by earth energies which may cause an imbalance in a particular place, and he tries to restore the balance. When I met him he had recently been working on Falkland Castle in Fife, attempting to restore the imbalance he had found by rubbing herbs on the walls<sup>69</sup>. He maintains that sacred sites, which include Iona, tend to occur on ley-lines which cause a heightened awareness of spirituality. This brings the argument full circle - Iona is a special place for those with alternative outlooks. His brother Neil concentrates on osteopathy and occasionally practices on Iona. The family own *Sligneach* on Iona, which Patricia inherited from Marrion Buckland, previously they had used the house when staying on Iona for holidays or conferences. Their first visit to Iona was in 1962 when they stayed at *Croch Mor*, although Mrs MacManaway had visited in the Forties<sup>70</sup>.

These two studies have gone some way to illustrate the more particular way in which a group generates its own discourse by exploiting or stimulating the atmosphere which an island can present. It has been shown that St Columba left a legacy for future generations to exploit and that because of the interest in this shrine it was possible to develop ideas which were outwith the normal experience of Christianity.

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<sup>68</sup> Wallis, R., Encounter With Healing, I J of Alternative & Complementary Medicine, April, 1992.

<sup>69</sup> personal interview.

<sup>70</sup> see note 56, page 152.

The Iona Community remained open to both the Nunnery and to the conferences being held in the Columba Hotel. In the case of the Nunnery, the members of the Community were confronted by Sister Holliday and received feedback from those who sat on the Iona Cathedral Trust and had a direct influence on the outcome. The conferences were quite outwith the control of the Iona Community but many came to have dealings with alternative ideas.

In 1976 the Church of Scotland published a report in the General Assembly. It can safely be speculated that too many Commissioners at a previous Assembly had been watching Yuri Geller. The special committee under the convenorship of the Very Rev'd James Matheson asked to be relieved of its remit, because it could find nothing of significance either in Geller's performances or the statistically suspect reports from Russia<sup>71</sup>.

DELIVERANCE 4: Welcome the conclusion that such material as parapsychology provides, reinforces the conclusion of other branches of science that a materialist interpretation of life does not do justice to the human experience.

A subsequent deliverance heralded the start of the Church of Scotland's quest for healing:-

DELIVERANCE 6: Do not recognise the need within the Church of Scotland for a rite of Exorcism, but consider that appropriate course of action is embraced by prayer, blessing and the ministry of healing.

The late Rev'd Max Magee was at that time chaplain to Strathclyde University and was appointed honorary secretary to this committee. It is reported that he developed a personal interest in the paranormal whilst a member of the Iona Community and associating with the group in the Hotel. Whether the motivation for the committee came from public enthusiasm for the subject, or from Magee's own experience may only be speculated.

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<sup>71</sup> Church of Scotland, *Report of the Working Party on Parapsychology, Reports to the General Assembly of the Church of Scotland*, 1976, p521-528.

## Conclusion

In terms of discourse analysis the island of Iona has spawned a great many genres which have covered both healing and Christianity in many forms. The history of St Columba is often so vague that writers have been able to draw their own conclusions to suit individual purposes and in terms of Celtic civilisation, many 'New Age' type ideas have been attached to the foundation of what undoubtedly was a Celtic monastic community. As far as the Iona Community and these groups are concerned there has always been some degree of unease which appears at times to be manifested in a closed attitude contrary to the substance of this thesis. However it can be argued that such is not the case. For openness to exist there must be a communality of grammar which unites the mixing of discourses. Where the Iona Community appears to be 'closed' in this section it would appear to be where there is no possible epistemological link between the discourse say of Sir George Trevelyan and orthodox Christianity. Trevelyan tended to borrow angels and archangels to build up his system of "seasons"<sup>72</sup>. Equally, there is no real link between the alternative healing of Bruce MacManaway and that of the Community because whilst many have accepted the concept of 'healing energies', it is impossible to think of any member who seriously entertains spiritualism. The same would apply to Ursula Burton's concern for matters relating to ESP.

We may conclude that openness is not a disorganised acceptance of anything, but is based on a rational assessment of what may be absorbed without compromising on one's key positions. In other words, in each of the case studies the subjects have adopted a mode of Christian thought about healing and have traversed to the alternative modes, but not *vice versa*. In the case of the groups examined in this chapter, their key positions have either lain outside our model or simply refused to be limited by any parameters which have been proposed in this thesis.

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<sup>72</sup> MacCarthy, F., *Craftsman at work on the New Age*, The Guardian, 16 February 1996, p19.

### Three Members in Search of Dialogue

Thus far, the text has shown a considerable bias towards George MacLeod which has been totally and inevitably justified. It goes without saying that the three members of the Iona Community to be examined were inspired and influenced by his thinking, charisma and faults. They might all cite *We Shall Rebuild* as a pivotal influence, but in specifics of this chapter, it is not very important. The chapter seeks to show how each has sought to cross the boundaries of some of the six modes of discourse.

The Rev'd Ian Cowie has pursued a career in search of healing and wholeness and has been a member since 1949. The Rev'd Stewart MacGregor has been chaplain to the Royal Infirmary in Edinburgh for the past twenty-six years, for which service he was honoured with the MBE in 1994. He joined the Iona Community in 1957. The Rev'd Ian Reid joined in 1946, and became Leader of the Community at a service in the crypt of Glasgow Cathedral in September, 1967, and held office for seven years. In his writing which will be considered he collaborated with a consultant obstetrician, Allan Gordon. He was described by Donald N. MacDonald in the introduction to a paper written by himself as "reckoned to be the finest pastor Scotland has produced this century."<sup>1</sup> He died on 20<sup>th</sup> February, 1997.

Each of these three members have written, or been involved in careers which have been concerned with healing and wholeness. Ian Cowie is the only one who would claim to be a healer, and spent twelve years as director of the *Christian Fellowship of Healing (Scotland)* in Edinburgh. Ian Reid is respected by many for his prayer-life and by his willingness to uphold members in any arduous task; whilst Stewart MacGregor has been active in the politics of health care.

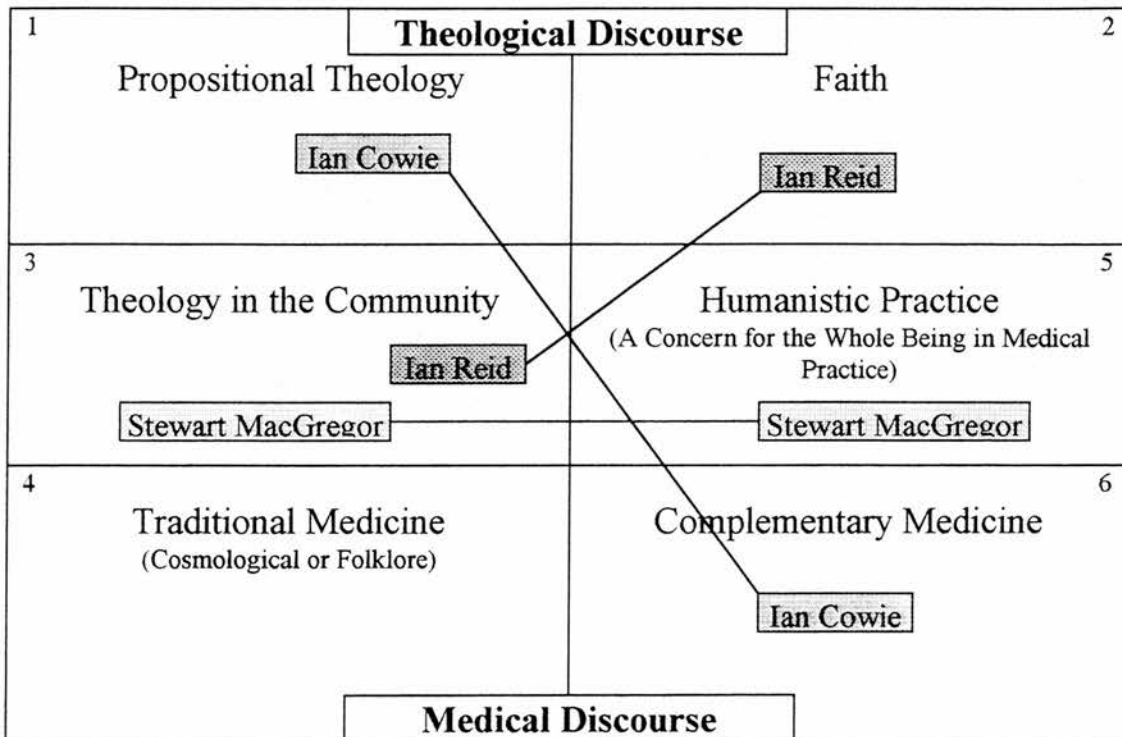
The point of studying all three is two-fold: First, all have written a reasonable amount on healing and wholeness; and, second, their discourse traverses some of the different types which have been previously delineated. They thus illustrate the 'openness' of some of the Iona Community's thinkers. Each was interviewed in

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<sup>1</sup> Macdonald, D. N., *Voices from the Edge*, Mitchell Media, North Uist, 1993, p118.

depth, and was not only asked about their own background and views but also about the seminal influences on them. Ian Cowie exhibits a propositional theology, to use the term in Figure 7 & Figure 8, in his approach to Scriptures which might be better described as prescriptive, yet entertains 'New Age' practices. Stewart MacGregor offers insights into modern medical debate and combines this with a liberal theology. Ian Reid (and Allan Gordon) are concerned about healing and wholeness within the community. Their positions are plotted in figure 7.

**Figure 7 - Literature by Person**



The aim of this chapter is to examine texts which show the crossing of boundaries. The biographical detail is relatively unimportant, except in Ian Cowie's case. Interestingly, Ian Reid's text is the only one which has attracted a pointed review in *The Coracle* which will lead to a discussion of his particular modes of discourse. Of course, the other two are bound to have critics, but the evidence is not so outstanding. The lines in figure 7 which join names indicate the main axis of each individual's discussion. They naturally all stray into an awareness, even acceptance of the other modes, but concentrate on those which are highlighted. It is, therefore, no coincidence nor accident that the axis may traverse more than two discourses.

At this point it is perhaps best to raise, in a little more detail, a problem which could have been dealt with in an earlier chapter. None of the material which will be examined is academic. Ian Cowie writes for a popular audience and exhibits a very colloquial style, the material produced by Stewart MacGregor tends to be lectures aimed at broad conferences and Ian Reid has simply produced pamphlets. Preachers and publicists tend to offer simple texts which are not cross-referenced compared to the specialised discourse and language which characterises academic writing. Many aspects of the type of literature which has been produced by members of the Iona Community lack precisely the academic content on which academic writing thrives. The whole problem is discussed by a discourse analyst by the name of Frawley, who was introduced on page 61, who offered positive attributes to this genre of text.<sup>2</sup> He traces the development of text from an oral culture to a textual culture. In modern society, there is the development of intertextuality, which is characteristic of the fragmented specialisms of science and academic work in general. Oral cultures rely on tradition, as in the origins behind biblical texts. In textual cultures traditions may be codified or individual ideas may be easily attributed to the writer. Specialist cultures are characterised by inter-textuality where knowledge exhibited by the writer becomes more important than personal attribution. In popular Christian texts, the individual writers are attributed with the devotional qualities which s/he may exhibit in their text. Such has been the whole basis of devotional literature.

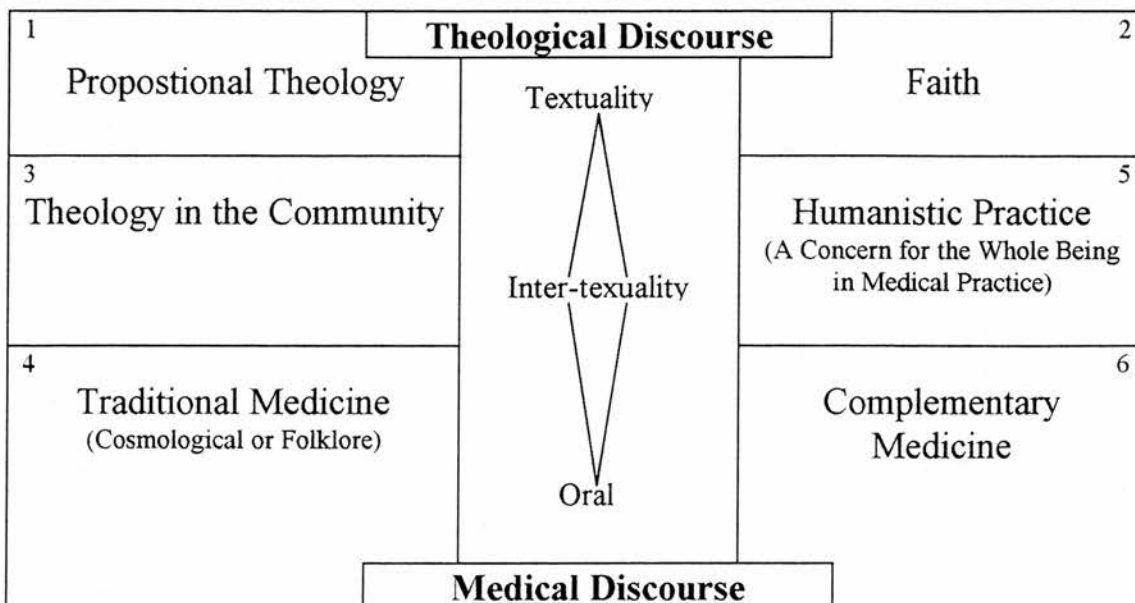
In the diagram below, a central section has been added to the recurring format to illustrate how these three typologies might work in relation to the literature which is being examined in this chapter. Texts which are purely propositional or extol the virtues of faith tend to depend upon the tradition behind the proposition or call to faith, rather than any individualistic contribution of the author. The two middle modes normally require a desire on the part of the writer to refer to many different types of literature and to attribute their sources. Oral may apply to boxes 4 and 6, in so far as traditional medicine invariably depends upon tradition which is passed on

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<sup>2</sup> Frawley, W., Text and Epistemology: Vol XXIV in series 'Advances in Discourse Processes', Ablex Publishing, Norwood, N.J., 1987.

orally from one practitioner to another. In very simplistic complimentary medicines the same can be said, as much practice is learnt from experience handed on from one to another.

**Figure 8 - Typology of Text**



Frawley maintains that Christian literature demonstrates yet another important attribute - it is atemporal. The literature comes from an oral tradition (the Gospels) which records the temporal death of Jesus followed by literature (theology) which assumes that Jesus Christ is alive and at work in our present world.

Christianity provides an interesting example of the attempt to deal with atemporality, while, at the same time, being a religion that counts heavily on texts for knowledge. As a written religion relying on the apotheosis of the book, Christianity forces the past into a reified state; but since Christianity relies also on the recoverability of the past (the unification of the soul and body and the final reunion of the saved after death), it has to postulate the existence of the past as present, but in another form: hence the ideas of purgatory, limbo, and other such intermediate states of the existence of individuals who die, change from present to past.<sup>3</sup>

In other words, Christianity cannot survive without the thousands of simple texts, even tracts on which faith has been built and theology grounded. Figure 4 shows how the six chosen areas of discourse might fit when applied to the type of expression germane to each. In the theoretical chapter reference will be made to George

<sup>3</sup> *ibid*, p64f.

MacLeod in this context, but here it is important as a theory to remind of the importance of these men's texts.

### **Stewart MacGregor**

When it comes to examining the work of Rev'd Stewart MacGregor, we are posed with a different set of problems from those concerning the discourse of Ian Cowie. He was interviewed on 21<sup>st</sup> September 1995, and notes were taken by Alex Carter. The object is to prove that the discourse which concerns Stewart MacGregor can be found on a axis of Theology in the Community/Humanistic Practice. As in the previous case study, this is obviously not entirely the case, but it does represent a predominant characteristic. In some ways also his biography is relevant.

His father was an Edinburgh solicitor who belonged to a not very prosperous practice, which made Stewart aware at an early age of the needs of the poor and the thrift which was part of their lifestyle. His mother died in 1950 when he was twenty after a serious illness and he resented the fact that there was no 'miraculous cure', and that evangelical teaching about miracles had not lived up to its claims. He became involved in the Iona Community when he was sixteen and was greatly affected by the preaching of George MacLeod, not least by his pastoral concern as reflected in *Four Men in our Faith*, a reprint of four sermons which showed more fully than any MacLeod's understanding of suffering. He also became involved with West Pilton, Edinburgh during university. He was ordained in Aberdeen in 1957 and inducted to Cumbernauld: Kildrum, before entering hospital chaplaincy in 1970.

He has served as chaplain of Edinburgh Royal Infirmary for 26 years and such long service is reflected in the high regard in which he is held by both patients and colleagues. He has been involved in training as an honorary member of the Faculty of Divinity at the University of Edinburgh. He was chair of the Working Party of the *College of Health Care Chaplains*, which compiled a report: *Trends in the NHS*, which dealt with justice in terms of the changes occurring in the health service. He has been asked to contribute to the *Dictionary of Pastoral Care*, on 'Hospital

Chaplaincy<sup>4</sup> and also the *Dictionary of Medical Ethics*.<sup>5</sup> For the purpose of this dissertation, he has made available some unpublished talks, sermons and also published annual reports of public bodies.

In a talk which celebrated the twenty-first anniversary of St. Ann's Hospice, he makes reference to Fritjof Capra. The work of Capra figures greatly in our understanding of both humanistic practice and complementary medicine as areas of discourse, so it will now be examined in generalities. Capra rejects reductionist and mechanistic theories of medicine. Descartes placed all his emphasis on the mind and its ability to think. *Cogito, ergo sum*, diminished the body and matter to dualistic objects of investigation and instigated the long-held belief that the body was little else than an intricately designed machine which had to be maintained and repaired. Such a view was enhanced by the 'design' theory of Newtonian physics. For several centuries, the interventionist and mechanistic skills of the surgeon has developed and, latterly, the pharmacist has joined the explosion in reductionist health throughout the West and, particularly, in the USA. Capra maintains that this costly explosion has marginalised the patient and sent many to have their personhood affirmed by sympathetic therapists who 'understand' their 'whole being' and not just the pathology of some organ.<sup>6</sup>

Capra's book introduces three themes into the debate about health, all of which are dealt with by MacGregor although it would be wrong to say that Capra is always his inspiration. Capra was concerned with stress and the effect it had on illness. MacGregor would translate this into the social stress of inequality. Second, Capra was concerned with interrelatedness and inspired others to look at health care as a system. Again, MacGregor has to recognise his work within a system, (the hospital) and has to devote a great deal of time to training others in an understanding of their position as ministers and chaplains. The third part of Capra's book was devoted to 'holistic medicine' and he had a particular concern for the treatment of cancer, dwelling on therapies in California and in particular the Simonson approach to cancer

<sup>4</sup> Campbell, A. V., *Dictionary of Pastoral Care*, SPCK, London, 1987.

<sup>5</sup> Duncan, Dunstan & Welbourn; A. S., G. R. & R. B., *Dictionary of Medical Ethics*, DLT, London, 1977

<sup>6</sup> Capra, F., *The Turning Point*, Wildwood House, London, 1982, chap 10.

therapy. Stewart MacGregor has spent much time debating the hospice movement and several of his papers come out of these encounters. Some of his colleagues have noted that he is in fact hostile to independent hospices in that he believes that the resources should be spent to provide sustained palliative care in mainstream hospitals. They exhibit an awareness of the need for an holistic approach to patients and it was in one such speech that we find evidence of his liking for Capra.

Capra tends to regard illness as symptomatic of larger stresses and disharmonies with the result that the patient can almost be blamed for having an illness. This is the problem with cancer and alternative therapies. Do those who advocate the use of such techniques not risk inducing guilt in the sufferer? There is evidence that lifestyle can influence the incidence of cancer. The only link to be given massive publicity is that between smoking and lung cancer to the extent that blame does attach to sufferers. However, other attempts such as that between cervical cancer and sexual behaviour does not. If we draw together some of the themes of his writing we have an agenda which almost corresponds with that of Stewart MacGregor, Capra is concerned about treating people as whole rather than depending entirely on biomedicine. He is concerned about lifestyles and the effect they have on health, and is also interested in 'systems' which many concerned with humanistic practice develop. These build into his image of the modern NHS, or any health service for that matter.

In his speech to St. Ann's Hospice, which was entitled *The Future of Total Care*, Stewart MacGregor makes interesting reference to the theories of Fritjof Capra just discussed. It is intended to look at MacGregor's concerns in the context of this paper, with its references to Capra. These concerns can be summarised as a search for justice in the health of a nation divided by the injustice of poverty and social divisions. Concerns for wholeness and also the contradictions which are found within the complex system of a hospital such as the Royal Infirmary.

First, let us consider the health of the nation, through the eyes of Stewart MacGregor and his written material. Like many working in health care he has absorbed and agreed with the findings of *The Black Report* and its successor *The Health Divide*

which are published together as *Inequalities in Health*.<sup>7</sup> These highlight the differences in health which occur as a result of social conditions and their concomitant lifestyles, in MacGregor's case he sees such effects daily:-

The variety and diversity of patients is infinite: the teenager with multiple injuries sustained in a motorcycle accident; the young parent with a malignant blood disorder; the newly born with a life-threatening congenital defect; the newly wed with a skin complaint; the newly bereaved with a broken heart; the jilted lover who swallowed a bottle of paracetamol tablets and will die unless a successful emergency liver transplant saves her; the wavering member of Alcoholics Anonymous with a history of swallowing razor blades who requires urgent abdominal surgery; infertile patients who would go to any lengths to be pregnant and pregnant patients who would go to any lengths not to be pregnant; and very many acutely ill patients, most of them elderly, who suffer from the degenerative diseases of advancing years. For some, illness or injury has come inexplicably out-of-the-blue; for others the illness is clearly linked to lifestyle. Yet others are unmistakable casualties of the competitiveness, corruption and injustice of our society.<sup>8</sup>

Touring the hospital on other occasions it is obvious that he is acutely aware of self-abuse which smokers, heavy drinkers and substance abusers inflict upon themselves. He once pointed out the gaggle of pregnant mothers standing outside the Simpson Maternity Pavilion smoking before or after meals, and at every free moment in which they could escape from the 'No Smoking Zone'.

In 1976 Stewart MacGregor presented his first *Annual Report of the Edinburgh and District Local Health Council*, as Chairman. A restructuring of the health service had been undertaken in 1974, which had resulted in an erosion of the position of public representatives on health boards, a trend which has continued unabated into the nineties throughout the health service and public service generally. In his foreword to the report he laid down a marker that the Health Council should not be depoliticised as intended by the Government, thus:-

..it is hoped that they will compensate for this reduction by providing the public with an influential voice and an opportunity of helping to shape health-care policy.<sup>9</sup>

This marker in the opening paragraph is continued throughout the report. He shows a determination to allow the public a voice and states that whilst everyone recognises

<sup>7</sup> Townsend, Davidson & Whitehead, P., N. & M., *Inequalities in Health*, Penguin, London, 1992.

<sup>8</sup> Transcript of Presidential Address to the New College Union, 5/10/95, unpublished, p6.

<sup>9</sup> *Foreword, First Annual Report of the Edinburgh and District Local Health Council*, 1976, p1.

the right of the individual to health, it is equally important to “claim the responsibility for promoting health in our personal and corporate life.” Some of MacGregor’s contemporaries have pointed out that those ‘non-political’ guardians of the health service were surprised that a chaplain should be so determined to politicise the work of his Health Council. Stewart MacGregor quotes the WHO which declared in 1975 that the local population had to be involved in the formulation and nature of health care in their locality. During this year and the years that followed the Health Council tackled issues like: health care for the single homeless; in 1978 the Health Council expressed its opposition to the continuance of pay-beds and the consequent preferential waiting list for private patients.<sup>10</sup> In 1976 the Council made a submission to the *Royal Commission on the NHS* in which prominence was given to the low state of morale of health service workers, including pay and conditions.<sup>11</sup> This is a theme which is always very close to his heart and has been greatly exacerbated since, speaking of conditions in nineteen ninety-five:-

I would like to contend that a serious consequence of the introduction of the market has been that staff feel undervalued. For example, with the introduction of competitive tendering for their service porters, cleaners, caterers and others have been forced to choose between redundancy, sometimes after many years of service, and a substantial reduction in their earnings at a time of rising inflation and increased indirect taxation. The remuneration of those members of staff has decreased from an already low level.<sup>12</sup>

Although some of this analysis may not be entirely correct, notably the comment on inflation, it does show the consistency of his political commitment and his overall concern for the system in which workers find themselves. The ‘system’ will be discussed below, but this observation will suffice as an indication of his concern for the welfare of all the workers within it. His years with the Health Council were creative years at the beginning of a new experiment, which he may not have welcomed, but which he exploited to the full.

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<sup>10</sup> Third Annual Report of the Edinburgh and District Local Health Council, 1978, p18.

<sup>11</sup> Second Annual Report of the Edinburgh and District Local Health Council, 1977, p28, second of seven submissions.

<sup>12</sup> Presidential address, *op cit*, p17.

The next area of concern is that of the chaplain's role within the system. Stewart MacGregor has had 26 years to get used to the position, yet in at least two addresses he makes a reference to the same author:-

Heije Faber compares the chaplain to the circus clown. Faber identifies three tensions in the life of the clown: the first the tension between being a member of a team and being in isolation; secondly, the tension of appearing to be, and feeling like an amateur among acknowledged experts; and finally the tension between the need for study on the one hand and the necessity to be original and creative on the other.<sup>13</sup>

This passage is uneasily trite in relation to Stewart MacGregor and one suspects that the metaphoric clown is the same metaphor which was used extensively in the sixties, either to describe Jesus or his disciples, in both print and cellulose.<sup>14</sup> It reflects the uncertainty of many clergy in any role within a secular society or institution. MacGregor is undoubtedly a member of the team. He is recognised as an expert in his own field and is used in staff training and counselling within the Infirmary and he has never been accused of being a boring stereotype. Yet as a generalisation the clown metaphor is probably correct, particularly in terms of part-time chaplaincies if for no other reason that they never have long enough in post to sort out these tensions. He wrote a very objective account of hospital chaplaincy in the *Dictionary of Pastoral Care* which was, of necessity, very objective and arid, but in his interview four areas of concern were mentioned:-

Pastoral Ministry:	Listening, sharing, and talking.
Liturgical Ministry	Conducting worship; prayers, sacraments, and baptism (unconditionally).
Representative Ministry	The office itself is symbolic, with different meanings to different people. A symbol which is sometimes positive and sometimes negative.
Ministry to the whole institution.	

Stewart MacGregor also made a point of outlining these four areas in his *Presidential Address*, save that he expanded the fourth point to "a prophetic or health promoting

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<sup>13</sup> Presidential Address, *op cit*, p7. MacGregor also refers to Faber, H., *Pastoral Care in the Modern Hospital*, SCM, London, 1971, in his entry on Hospital Chaplaincy, *op cit*.

<sup>14</sup> The Clown of God, a short film adaptation of a book of the same title.

ministry". To some extent, the latter has already been dealt with when discussing his work as chair of the Health Council.

At a personal level, Stewart MacGregor's pastoral care is known to many but is hard to sum up in words. The writer has known him visit patients at two o'clock in the morning sensitive to their insomnia during these long, lonely hours; has seen him called away from leisure pursuit; or make someone feel special during a casual encounter, fifteen years after her daughter had almost fatally glue-sniffed and needed counselling in casualty. This is the 'bread and butter' of hospital chaplaincy and the mark of success or failure.

In his pastoral role, the chaplain may be able to humanise the effects of technology. Peter Speck relates how he asked to visit a woman in the ICU who simply grasped his hand for about an hour-and-a-half trying to overcome her sensory deprivation. The nurses were so busy handling the equipment that they had forgotten to touch and reassure the patient. Speck was able to point this out to them resulting in better practice.<sup>15</sup> Stewart MacGregor would probably recognise the laying on of hands, or simply touch, in the same vein as Speck's story.

Every hospital chaplain has a liturgical role with in the hospital setting, yet services and sacraments are set within the tensions of personal crises which strip away the niceties of ecclesiastical conventions. This can become acute in the case of Baptism. The Church of Scotland has, in a number of recent General Assemblies attempted to tighten the rules governing whose children may be baptised. The ambiguous rules have prevailed over stricter suggestions probably by reason of their very ambiguity. Stewart MacGregor baptises any child, perhaps even stillborn, without question. Another member of the Iona Community, the Rev'd Bob Currie who is part-time chaplain to Yorkhill Maternity Hospital in Glasgow has devoted much time to cot-deaths and bereaved parents. He has conducted ecumenical services for bereaved

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<sup>15</sup> Speck, P., Being There - Pastoral Care in Times of Illness, SPCK, London, 1988, p45f.

parents in Glasgow Cathedral and has supplied a tape of the same.<sup>16</sup> Both find that where biomedicine may fail, liturgical practices may fill the gap.

MacGregor maintains that chaplains have a representative role insofar as they represent the local minister and can call to mind the patient's best or worst experiences of the professional ministry. In his *Presidential Address to the New College Union* in 1995, he reminds his audience that the chaplain may arouse negative feelings in some patients.

Others look on the chaplain as an ecclesiastical rep or salesperson, coming to harangue them when their legs are in plaster and they cannot escape with a view to getting them back on pews again, peddling our brand of religion. How many patients apologise for their non-attendance at church! Why is it that ministers can sometimes be guilt-inducing instead of guilt relieving?<sup>17</sup>

The latter sentence reflects what has been a recurring theme both in the chapter on liturgy and thereafter on George MacLeod.

Much of what has already been said covers his ministry to the whole institution and has previously been dealt with, but there is one area which merits consideration on its own. The hospice movement has always fostered a holistic approach to their patients. Patients are in control of their own pain relief, they have access to other therapies, their relatives are considered at all times and the ward regime is patient centred rather than nurse centred. There has also been a considerable emphasis on spiritual welfare. MacGregor has addressed several meetings celebrating significant events in the hospice movement, and has invariably taken the opportunity to talk of wholeness. He addressed a symposium on 31<sup>st</sup> May, 1991, in the presence of HRH The Princess Royal, which was held to celebrate the tenth anniversary of Strathcarron Hospice and which centred on wholeness. The first contribution was very academic to the symposium and drew heavily on holistic philosophy, but the other papers dwelt much more on the practicalities of holistic treatment. MacGregor's paper dealt with many of the issues we have already addressed but sought to understand suffering in a positive and constructive way, for instance he quoted examples of artists whose

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<sup>16</sup> Response to letter sent to members, see Appendix III, 17/2/95 with enclosures.

<sup>17</sup> Presidential Address, *op cit*, p8.

greatest creativity had been produced in their hour of greatest suffering. He also, and more importantly, defined whole persons in terms of *Shalōm*, which he defined as peace and then neatly tied it in to Capra's definition of wholeness, to which we shall return. He argued that a negative aspect of suffering is its self-perpetuating nature which can be as cruel as the suffering of poverty and oppression. It is noticeable that at each stage of his argument there is a note of hope at the end of his vivid description.

Nor should we forget the self-perpetuating potential of suffering. The abused child, it seems, is liable to become an abuser himself. The instinctive response to hurt is often to retaliate and inflict pain on someone else. When we are angry and bitter, it is not easy to turn the other cheek. It requires a very special grace to break through the escalating spiral of suffering in which we can all become involved.<sup>18</sup>

The hospital chaplain must remind the larger institutions that they are dealing with 'whole people' and bring to the busy ward some of the tranquillity which the hospice can afford. Stewart MacGregor is fond of quoting his colleague Peter Speck and has more than once related the following story:-

One morning my colleague, Peter Speck, chaplain in a London hospital was making a routine visit to a patient who had been admitted about three hours earlier. The junior nurse who had admitted her had put a label on her wrist; the houseman had prodded her abdomen; a medical student had come to take her history; the haematologist had drawn some blood; the anaesthetist had come to examine her chest prior to surgery; the physiotherapist had given her some exercises to do. As Peter entered the room and introduced himself, the woman, without looking up pulled back her bed covers, lifted up her nightdress and said, "Which part of me are you interested in?"<sup>19</sup>

Such a concern for wholeness brings us neatly back to Capra and to another address to an audience within the hospice movement. In the two addresses which have been referred to he explains wholeness in terms which draw on Capra.

Patients also often speak to me about the events in their lives which have deeply upset them, sapped their strength and destroyed their will to live. Because we are whole persons physical illness often has psychic, social or spiritual origins. The Old Testament writers were aware of this. The Hebrew word "*Shalōm*" variously translated peace, health or wholeness conveys these basic truths. Wholeness is integrity. Wholeness is living in harmony - enjoying good relations with other people, with the environment and with God. And wholeness is purposeful living.

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<sup>18</sup> Strathcarron Hospice, Caring and the Whole Person - The report of the Symposium held to mark the tenth anniversary of Strathcarron Hospice, Strathcarron Hospice, Alloa, 1991, p31.

<sup>19</sup> This story is not attributed.

*Shalōm* is a positive quality of well-being rather than an absence of illness. To put it in the words of Fritjof Capra:

Health is really a multi-dimensional phenomenon involving interdependent physical, psychological and social aspects.

That each human being is all-of-a-piece, an entity, is the essence of the concept of whole person care. This was recognised not only by the Hebrews but by the Ancient Greeks as well. The issues are personal and professional. They are also social and political. Any discussion of total care must take account of all of these.<sup>20</sup>

Stewart MacGregor summed up his understanding of wholeness, *shalōm* or peace in a Lenten sermon preached in St Andrew's and St George's, Church of Scotland, in Edinburgh on 12<sup>th</sup> April, 1995. In this sermon he gives a three part account of peace. The first is personal peace, which is exemplified in the triumph of Jesus over his Passion. It can be seen in the individuals resilience to all the negativities of life such as "fear, anxiety, insecurity, uncertainty, anger, guilt, greed, envy, loss, failure, hatred."<sup>21</sup> He is here returning to the wonder of humanity's ability to overcome the burdens which raw life imposes on us. He describes the second as "peace is social and requires right relationships". During his interview he quoted George MacLeod in a way which sums up his sermon better than quoting from the text. George MacLeod said more than once, "Politics is a dirty game, but is it any dirtier than your heart or mine?" Putting the body politic aright and requiring justice in economics and law offers peace in a second way. Thirdly, peace is religious, in the sense that we need meaning and belonging in our lives, a lack of which is so apparent in many cases admitted to casualty wards. Although Stewart MacGregor would commend the Christian faith he concludes his sermon with an excellent secular maxim: "Life is like riding a bicycle - without momentum and direction you fall off!"

The rich tapestry of Stewart MacGregor's theological eclecticism combined a social conscience which had developed at an early age and led to the prophetic ministry which touched so many in a variety of ways. His vision has allowed care for the

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<sup>20</sup> MacGregor, T. S., *The Future of Total Care*. Address to St Ann's Hospice to celebrate its 21<sup>st</sup> anniversary in 1992, p7. Much the same quote appears in Strathcarron Hospice, *op cit*, p30.

<sup>21</sup> Lenten sermon preached in St Andrew's and St George's in Edinburgh on 12<sup>th</sup> April, 1995 (unpublished). All further references are from this text unless otherwise stated.

individual patient in his or her uniqueness whilst placing these individual needs in the context of flawed system of health care and society whose injustices, he would regard as the cause of much of the misery which he encounters.

### **Ian Cowie**

In discussing Ian Cowie several topics will be covered; and it will be shown how he makes advances in one direction only to return to Biblical authority each time. The strategy actually creates a fruitful, if biased, dialogue. First, he makes interesting comments on the Iona Community's healing service which lead to the next two points. Second, counselling and the 'healing of memories' will be discussed; and third, his alternative - a ministry of availability. Fourth, and most importantly, his understanding of complementary therapies and 'New Age' concepts. Throughout it will be necessary to consider discourse lest the exercise becomes simply a rehearsal of his writing.

Ian Cowie has published one pamphlet for the Iona Community, countless for the *Christian Fellowship of Healing (Scotland)* and four books.<sup>22</sup> There are two books on healing and wholeness, one of prayers and one, a series of daily Bible studies. They span from the fifties to 1995. They are all aimed at a general readership and have been published by houses with either that style or having an evangelical outlook. *Across the Spectrum*, which is most useful here was published by the Handsel Press which has a fairly conservative list of publications and occasional papers. *People Praying* is a book of prayers containing only one on healing entitled "His Healing Ministry"; and *Growing Knowing Jesus* is a daily study guide which offers one week on wholeness and miracles. Ian Cowie was interviewed in depth on 20<sup>th</sup> October, 1995.

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<sup>22</sup> Cowie, I., *People Praying*, St. Andrew Press, Edinburgh, 1972.

Cowie, I., *Growing Knowing Jesus*, St Andrew Press, Edinburgh, 1978.

Cowie, I., *Across the Spectrum*, Handsel Press, Musselburgh, 1993.

Cowie, I., *Prayers and Ideas for Healing Services*, Wild Goose Publications, Glasgow, 1995.

<sup>Pamphlet.</sup> Cowie, I., *The Healing Christ*, Iona Community, Glasgow, n.d.

It was reported, and subsequently confirmed, that Cowie said that it was inadvisable to talk about healing to evangelical or liberal Christians. He made this statement during a conference organised by the Church of Scotland on 9<sup>th</sup> September, 1995 at Carberry Towers on "Healing the Family Tree" which was led by Dr Kenneth McAll,<sup>23</sup> author of a book with the same name. Yet, Ian Cowie shows the same zeal for Biblical authority as any evangelical; combined with all the openness of a liberal when social matters are discussed. Such is the paradox which is about to be discussed. The writer would prefer to suggest that Cowie 'correlates' passages of Scripture with material from the 'New Age' and thus reaches points of agreement which he recognises as having veracity.

Such indeed is evident in his treatment of the healing service which is our first point. He is sceptical of the authenticity of the Iona Community's service of laying on of hands which he has only conducted on about two occasions. He believes that every service can be one of healing and may not necessarily be confined to a special service. This, he would regard as one of the most salient remarks in his latest book.<sup>24</sup> The healing service of the Iona Community is regarded as a service of blessing rather than of healing. Cowie is very concerned to distinguish between blessing and healing. The lack of relationship between those coming forward and the president of the service concerns him. He distinguishes different types of people who come forward at a healing service into various categories which the president ought to be aware of in order to take the appropriate action. There is the genuine sufferer, the exhibitionist, someone in need of counselling, and it is better if the president has some knowledge of what is involved before the laying on of hands. Since this is not what happens on Iona, Cowie would argue that the service is one of blessing which is always available to all. It is important to allow Cowie's own words to distinguish between healing and blessing. He discusses healing in these terms:-

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<sup>23</sup> McAll, K, Healing the Family Tree, SPCK, London, 1982.

McAll introduces another type of healing service which is based on the Eucharist and a specialised understanding of the Communion of Saints. He believes that injured or hurt relatives from the past can be present at the said Eucharist and receive healing along with the living.

<sup>24</sup> Cowie, I., Prayers and Ideas for Healing Services, Wild Goose Publications, Glasgow, 1995, p

If the emphasis in a service is to feature the gifts of healing, we will have to take account of the fact that when sufferers come forward, those ministering will need to be free to take action according to need, and if they lay on hands it will probably be on the affected part. Also there may be happenings such as 'resting in the Spirit'. Therefore it is best to arrange for at least some privacy so that there can be no question of the curious guessing what is wrong.<sup>25</sup>

This is in no way a description of the current healing service on Iona, but may have described the service as conducted by Godfrey Mowatt and possibly even in the formality of George MacLeod. It must follow that Cowie regards the service as one of blessing.

In this case hands are usually laid on the head, and therefore it is not necessary to know what symptom has brought the person for healing. This does not raise the same problems with regard to confidentiality. Also, each case will only take a minute or so and there is not the same problem with timing...

...if people come seeking God's Blessing, then we can assuredly give them whatever they are open to receive, and that may be healing, or it may be inner peace. Such a service is much more easily arranged than a healing service.<sup>26</sup>

Not many members are going to argue that the result of the healing service is adequately described in the latter quote, but whether all would accept his stricter understanding of a healing service is doubtful. Although he is not referring to Iona Abbey, he can be very caustic about healing services, describing them as "becoming more like a spectator sport than a 'participatory, contact sport'."<sup>27</sup> Throughout this section on Ian Cowie there is always a reference to Biblical authority. He argues in several places that Jesus did not make appointments or arrange healing services but met the need of the sufferer in the appropriate manner and at the appropriate time. This is the first instance of strict reference to Biblical evidence that has been exhibited in Ian Cowie's work in the present context.

Second, when interviewed he was very critical of pastoral counselling, believing that Departments of Practical Theology spent far too much time teaching it as if it was the only way of providing the help which clients require. He regards healing as a specific ministry and the use of healing gifts as a blessing which is concentrated on one individual at a particular time. He says that his healing work "...concentrates on one

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<sup>25</sup> *ibid*, p28.

<sup>26</sup> *ibid*, p28 & p29.

<sup>27</sup> *ibid*, p17.

person, or one part of a person, what is given to the congregation as a whole every Sunday.”<sup>28</sup> The object of such a blessing, which may well be combined with some counselling, is to ‘bring to the Lord’ an individual so that he or she may receive healing. In evangelical circles such may be referred to as Inner Healing, Inner Light, or the Healing of Memories. An autobiographical comment by Ian Cowie explains his attraction to these methods.

I myself went forward for healing at Godfrey Mowatt’s first healing service in the Abbey, full of hope that I would come out fit and well (I could only creep around in those days, thanks to the war) but I was none the better, even though I tried to kid myself that I was. I can see now that what I was needing was “the healing of the memories” for what I had been through, and that the laying on of hands was “cheap grace”.<sup>29</sup>

In the course of preparing for the interview he was asked for a note of his sources. He basically said that “this was impossible” as he tended to follow “only things which work”. Notwithstanding this he has developed an interest in the “healing of memories” after reading Agnes Sanford. Her book was first published in 1947, and proudly boasts hundreds of reprints, probably mostly in America. She asserts that the “light of God” is constantly with us as unseen as X-rays, but powerful enough to heal. She flirts with scientific explanations of spiritual healing, but makes it clear that she is primarily concerned with spiritual matters:-

And in the course of our experiments we [scientists] have come to the conclusion that a vibration of very, very high intensity and an extremely fine wavelength, with tremendous healing power, caused by spiritual forces operating through the mind of man, is the next thing science expects to discover.<sup>30</sup>

Sanford maintains that by prayer and a growing relationship with the Lord that it is possible to change harmful memories allowing the love of God to enter into them. Cowie also cited Carter-Stapleton, President Jimmy Carter’s sister-in-law, who is much more explicit. In fairness, Ian Cowie admires one of her books but suggests that the other one is “over the top”. A typical case is one of a woman who conceived as a result of a rape who naturally resented the child, but by convincing her that the love of God was present at conception, despite the human hatred, she came to love

<sup>28</sup> Interview on 20/10/95.

<sup>29</sup> Response dated 25<sup>th</sup> January, 1995, to research correspondence.

<sup>30</sup> Sanford, A, The Healing Light, Arthur James, Evesham, 1947, p30f.

the rejected child. She recognises the subconscious yet wishes to hand it over to God who can heal the hurting memories:-

Psychology teaches us how the human mind functions and affects our lives. One assumption of this science is that the mind operates on at least two levels: the conscious and the subconscious. Our conscious mind functions on the rational, cognitive level, recording impressions from the five senses: seeing, hearing, smelling, tasting and touching. Our subconscious mind records all of the events that we experience on the conscious level plus much that we cannot remember. Those hidden from the conscious mind still influence conscious judgement, they unconsciously colour and direct our thinking.<sup>31</sup>

Their use of 'scientists' or 'psychology' does create a seeming dialogue, yet by their tone they set up the supremacy of 'inner healing'. The method is used by Ian Cowie in many instances of healing but not with the same intensity, and with a sympathetic understanding of the medical professions. His very first pamphlet makes it clear that he also accepts that there must be political solutions to much of the world's ill-health.<sup>32</sup> Actually, Peters points out that Frank Lake was 'healing memories' at about the same time as Agnes Sanford using drugs such as LSD to help clients to recapture long-lost and harmful memories. It was in his latter years that Lake was attracted to the charismatic movement.<sup>33</sup>

The third point in this examination of Ian Cowie involves his ministry. In all his works, he disavows the spectacular and has promoted his gifts within the Iona Community outwith publishing. Prior to going to work for the *Christian Fellowship of Healing (Scotland)* where he worked for twelve years, his ministry was based in the parish system of the Church of Scotland in Rosyth, Fife; and then in Craigmillar in Edinburgh where the Presbytery established a team which Ian Cowie shared with the Rev'd Douglas Galbraith, another member of the Iona Community whose main talent lay in music which allowed him to assist the fledgling Craigmillar Festival. In both parishes, Cowie attempted to conduct a 'ministry of availability', the principles of which continued into his running of the *Christian Fellowship of Healing (Scotland)*.

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<sup>31</sup> Carter-Stapleton, R, The Experience of Inner Healing, Hodder & Stoughton, Sevenoaks, 1977, p20.

<sup>32</sup> Cowie, I., The Healing Christ, Iona Community, Glasgow, n.d.

<sup>33</sup> Peters J., Frank Lake - The Man and his Work, DLT, London, 1989, p145ff.

It was a very different world from the affluence and zealous belief of the Southern Baptists of the Carter family.

The 'ministry of availability' really took off in Craigmillar in 1970 when two ministers, Ian Cowie and Douglas Galbraith, of equal status were appointed with a deaconess and a local community worker to a team ministry in the area. Appealing yet again to Scriptural authority, Cowie maintained that since Jesus was always available to meet a need, so must today's Church. They established a Coffee Shop called *The Brew* which was meant as a pun on unemployment benefit on which so many existed in Craigmillar.<sup>34</sup> The Brew could meet many needs as a drop-in centre, a meeting place for groups like *Gingerbread*, and an advice-centre for local councillors and others. Of Ian Cowie's ministry, Galbraith writes:-

The initiatives of IAN COWIE, officially the minister (albeit "without charge"), lie in the areas of pastoral work and of arranging the worship (in which latter most of us share): his particular interest in the healing role of the church leads him into contact with the local Health and Welfare Centre: he is developing worship occasions when the content depends on who happens to come in (from listening to music to anointing with oil!); in his pastoral work, he comes across many people who can be introduced into the Brew, to help there or simply to meet others, and to allow follow-up work to be done.<sup>35</sup>

The team experiment met with difficulties in the Presbytery of Edinburgh, and in 1977 Ian Cowie felt a call towards full-time work with the *Christian Fellowship of Healing (Scotland)* although a final commitment was not made until June, 1978. "In many ways," he wrote, "it was against my principles to do 'healing' separately from 'peace', 'industrial concern', 'social involvement', etc."<sup>36</sup> He attempted to continue his 'ministry of availability', and in an internal paper he attempted to dismantle the surgery-like practice of his predecessor which he felt had too many individualistic consultations.<sup>37</sup> He wanted to develop a shared ministry, allowing inner-city clients the chance to drop-in and to receive the appropriate ministry, exercised with the appropriate gifts. Evidence of this policy is well illustrated in his 'day-books', or

<sup>34</sup> Galbraith, D., *The Craigmillar Team Ministry*, *The Coracle*, October 1974, No. 65

<sup>35</sup> *ibid*, p16.

<sup>36</sup> Cowie, Ian, *The Christian Fellowship of Healing*, *The Coracle*, March 1978, No. 72.

<sup>37</sup> Cowie, I., *Clarifications on Ministry*, Archives of the *Christian Fellowship of Healing (Scotland)*, n.d.

logs, which were kept throughout his period in office. They are very full but sketchy, and were obviously intended for his private use only. They contain entries such as, "Margaret popped in today - was very perturbed".<sup>38</sup> In the interview he was in fact slightly critical of the return to individualistic counselling which has been adopted by the present director. Counselling is the Rev'd Ian Davidson's speciality placing great emphasis on a Christian brand of Gestalt counselling.<sup>39</sup> Ian Cowie is in fact circumspect about the use of healing services, as we have already seen. He insists in his latest book that one must discern gifts in a healer before planning the appropriateness of laying on of hands. In a healing service he would not hesitate to bless a person coming forward for the laying on of hands, when he considers it inappropriate to lay hands on them at that particular time.<sup>40</sup> It all leads to the conclusion that the laying on of hands is really a specialised ministry, although touch is blessing which can be exercised by any sincere person.

The fourth point which is to be discussed concerns Ian Cowie's relationship to complementary medicine and how he has resolved its complexity with Biblical authority. His concern for complementary medicine is totally understandable, once his background is explained. His father was a director of a perfumery in Paris, and he attended his aunt's school during his primary years. Dorethea Huckel was headmistress of St. Hubert's School just outside Cannes, which was run on Steiner lines.<sup>41</sup> He grew up to be bilingual and the Steiner influence continued in this country when another member of the family farmed on Steiner principles in Morayshire. Prior to World War II he worked on this farm. It will be recalled from the last chapter that König wrote an article on agriculture for *The Coracle* during the war years. Ian Cowie's interest has continued at a personal level now that his daughter works in a Steiner school, his son-in-law is similarly involved and his son is a consultant psychiatrist. He says of his daughter, a homeopathic therapist, that she is "very New

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<sup>38</sup> Cowie, I., Day-book, Archives of the *Christian Fellowship of Healing (Scotland)*, 1981.

<sup>39</sup> Davidson, I, *Here and Now : An Approach to Christian Healing through Gestalt*, DLT, London, 1991.

<sup>40</sup> Cowie, I., *Prayers and Ideas for Healing Services*, Wild Goose Publications, Glasgow, 1995.

<sup>41</sup> Correspondence expanding biographical details, dated 21/11/95.

Age".<sup>42</sup> Such is the background which gives him a legitimate interest in "New Age" matters and an awareness that there is more to human consciousness than some Christians would be prepared to entertain.

It is worthwhile considering briefly what he might have learnt from his Steiner background. First, there must be some concern for the occult. In *Across the Spectrum*<sup>43</sup> he attempts to show that something is occult only when special knowledge becomes a matter of power and thence exclusive and exploitative, thus showing an awareness of Steiner's "occult science".<sup>44</sup> Second, he was very aware of Steiner's development of a theory of 'levels of consciousness' and their evolution, and makes it clear in his interview that he always assumes that consciousness and logic are continuously flowing between different levels. Steiner suggests that there are seven levels of consciousness<sup>45</sup> and for our purposes Seddon's edited conclusion is important because it stresses the uniqueness of the individual, which is an undisputed aspect of Cowie's own approach as a Christian. Steiner writes:-

Each Human Individuality will have a certain note, and the whole will sound together in a symphony. [Referring to the seventh state of consciousness]<sup>46</sup>

Granted this background and knowledge combined with an admiration for the healing work of Steiner based communities, which is shared with George MacLeod and many

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<sup>42</sup> Interview, 20/10/95.

<sup>43</sup> Cowie, *op cit*, p41.

<sup>44</sup> Steiner, R, *2<sup>nd</sup> Lecture: Christ at the Time of the Mystery of Golgotha and Christ in the Twentieth Century*. London, 2<sup>nd</sup> May, 1913; Occult Science and Occult Development, Rudolph Steiner Press, London, 1983.

<sup>45</sup> The Seven Levels of Consciousness are:

- 1 'deep trance consciousness'
- 2 'sleep consciousness'
- 3 'picture consciousness'
- 4 'waking day consciousness'
- 5 'object consciousness'
- 6 'psychic consciousness' or Imagination (to be achieved in the near future)
- 7 'spiritual consciousness' or Intuition (final unifying consciousness).

Seddon, R (ed.), Rudolph Steiner - Essential Readings, Crucible, Wellingborough, 1988, p26ff.

<sup>46</sup> Seddon, R (ed.), Rudolph Steiner - Essential Readings, Crucible, Wellingborough, 1988, p30.

others, it is not surprising that he should spend time trying to justify "New Agers". The fact that the following is critical of his method is in no way meant to belie either his knowledge or openness.

When previously we spoke of correlations, it was this case that was uppermost in our mind. The first example of Biblical authority came from Ian Cowie's regard for the life of Jesus whilst in this instance it is a linguistic correlation. Bearing in mind his involvement with Rudolph Steiner and other forms of complementary therapies, it is not surprising that he wishes to show some correlation with the Bible. Cowie is not content, however, simply to express his support for alternative medicines, but must prove the point. He uses two proof texts to undertake a study of *qesem*, which is usually translated as 'divination', 'chance' or 'throwing'.<sup>47</sup> He maintains that the translation of *qesem* in Deut. 18:10-11 is better translated as 'dowsing', the use of a pendulum or other such implement. He has witnessed many dowzers and finds their use of a pendulum astonishingly accurate, and generally accepted as a diagnostic tool in alternative medicine. He was acquainted with Bruce MacManaway in Fife (who figures in chapter V), for whom he had a distinct scepticism, fuelled not least by MacManaway's financial enterprises.<sup>48</sup> What he argues is that the use of *qesem* is acceptable if its use is rational and with an immediate and desirable consequence. To this end he quotes Acts 1:26 which describes how the disciples drew lots to pick a replacement for Judas. The disciples were allowed to use chance because they had set the parameters of their intention which was to result in the choice of Matthias. It is when an activity such as dowsing becomes part of a 'cluster' that it becomes dangerous, that is it becomes non-Biblical. Cowie defines the harmful effect of a 'cluster' thus:-

...in many cases dowsing is only part of a cluster of interests. It is often part of an unhealthy preoccupation with the supernatural, the paranormal. Then one thing leads to another and before long the person is involved with much on the psychic level without having the spiritual awareness that is needed to cope with it. Mistaking these things for 'spiritual' people get 'hooked' on them, and they become unhealthy.<sup>49</sup>

<sup>47</sup> Cowie, I, Across the Spectrum, Handsel Press, Musselburgh, 1993, p37.

<sup>48</sup> Interview, 20/10/95.

<sup>49</sup> *op cit*, p47.

The harm of a cluster lies in its cultic significance. The commands in Deuteronomy were aimed against Caananite religion, and Cowie argues that it is, or was, permissible to use practices from that religion, but not to indulge in their entire cult. He warns in his usual colloquial style that “one thing leads to another”. Thus he has accommodated dowsing, shown that the pendulum is often used by Christian healers, and maintains that it is Biblically sanctioned. Without a detailed knowledge of language, comment cannot be made on the veracity of this argument.

At the outset of his book Ian Cowie expresses some admiration for “New Ager”s. His discussion of dowsing is probably their main defence, but he does go on later to attempt to correlate Biblical language with the New Age. He employs precisely the same technique as has been shown above. He isolates a proof text and then applies it to the word “Age”. At some point he acknowledges the influence of Gordon Strachan, who wrote *Christ and the Cosmos*. Strachan gives substance to the concept of an age and to some extent does so by means of correlation, but not as blatantly as Cowie.<sup>50</sup> Cowie quotes the last verse of Matthew’s Gospel and then proceeds to translate it, much as he did with Deuteronomy:-

“Lo! I am with you always, even to the end of the world.” That phrase “end of the world” is very interesting: “THE END” translates a Greek word made up of two parts, the first syllable is sun which means “together”; the second syllable is a verb, “telos” which still today in Greece means “a goal”. When you score a goal it is not the end of the match! The goal is something that you aim at together.

This word, then, speaks to us of reaching something for which we have all been striving! The other word in the phrase is “THE WORLD”, and that translates from the Greek word for AGES... Well, well! He is with us up to the goal of the Ages.<sup>51</sup>

This type of correlation is disturbingly simplistic and there are many ways in which it could be criticised, other than linguistically. For example it assumes that the Gospel writer had the same concept of ‘Age’ as both Ian Cowie and Gordon Strachan: it simply is not possible to take a fragment from a historic text and apply it to modern day concepts. The ‘Age of Aquarius’ may well be, but it is essentially a stage

<sup>50</sup> Strachan, G, *Christ and the Cosmos*, Labarum Publications, Dunbar, 1985. Strachan devotes considerable space to an analysis of the Piscean imagery in Mark 13:14 and argues, without evidence of correlation, that Christ heralds the end of the ‘Piscean Age’ and the beginning of the ‘Age of Aquarius’.

<sup>51</sup> *op cit*, p148.

promotion of the sixties - when large numbers of the population were singing songs from the musical *Hair*.

This is perhaps an unnecessarily harsh critique of Ian Cowie. It is so because of the peculiar combination of appeal to Biblical authority linked to a liberal attitude to complementary medicine and related topics. The juxtaposition of the two illustrates the openness of a member of the Iona Community yet in this case offers shallow arguments in favour of his stance. In fairness, the interview did reveal a much stricter attitude to 'psychic phenomena' etc. than has been expressed here, but the written word is stronger than that which is uttered in asides and anecdotes.

In an address to the Presbytery of Perth in the autumn of 1995 Ian Cowie summarised the ministry. He identified four elements which have been present throughout this discussion. First, proclamation - which is the prescriptive part of his ministry. He proclaims what the Gospel demands and the nature in which it prescribes repentance. Second, teaching - he maintains that today's ministry does not teach either on matters concerning dogma or issues surrounding health and healing. Third and perhaps most interestingly, he talks of application. It is only after the first two have been implemented that it becomes possible to lay hands on people or offer anointing and absolution. Without knowledge these things become "magic". Fourth he deals with fellowship, *Koinonia*, in which all Christian ministry takes place and where people learn to share. His notes conclude:

The **proclamation** falls flat in a timber-yard of empty pews.

The **learning process** is often best when learners learn form each other,

The **application** should never be a solo performance, but always then: "two or three together", to avoid ego-tripping.<sup>52</sup>

## Ian Reid

The Iona Community has always been engaged in the publication of books and pamphlets. The pamphleteering has mainly been centred on peace and justice and the publishing department has gone through good and bad patches both organisationally

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<sup>52</sup> Cowie, I, Four Elements in The Church's Ministry of Healing, notes of address to Presbytery of Perth.

and politically. When *The Coracle* became a broadsheet in the summer of 1980 under the editorship of the Rev'd Donald MacDonald, investigative journalism which led to political controversy was very quickly stifled. After the 1970s, George MacLeod published most of his political material either independently or under the aegis of the *Fellowship of Reconciliation*. About six pamphlets were written on healing and wholeness.

Ian Reid and Allan Gordon produced one such entitled *Healing Today - What a minister and doctor believe about healing*. They showed an awareness that healing should be holistic and the 'whole man' must be treated for disease which may be the result of world economic injustice, poverty at home or may be self-inflicted through smoking or excessive drinking.

..... man is a unity of different aspects: of mind, body and spirit. If any of these is disordered it will affect the other two. So when a man is ill, it is the whole man who is ill.<sup>53</sup>

They are aware of the wider implications of illness on family and friends and discuss the difficulties in the same manner as any holistically trained doctor. They take as an example of prayer the four companions who lowered a paralysed man through the roof to Jesus.

Prayer for the authors is bringing people nearer to the new humanity, the new wholeness, which was in Jesus. There is no magic, no laws of nature are broken, the sufferer is simply brought into the presence of God's love, so that new life may come to him.<sup>54</sup>

It is wrong to consider their explanation of prayer in a reductionist approach. Much of the pamphlet is devoted to citing examples of miracles which have followed prayer. Curiously, they offer a miracle from *The Cross and the Switchblade*,<sup>55</sup> which was typical of an evangelical genre in 1963 when the book was published, and later became a feature film of the same name. In interview, Ian Reid has said that he found Allan Gordon's theology to be slightly naive and probably influenced by his Baptist

<sup>53</sup> Reid and Gordon, I. & A., Healing Today - What a minister and doctor believe about healing, Iona Community, Glasgow, undated and pages unnumbered.

<sup>54</sup> *ibid.*

<sup>55</sup> Wilkerson, D., The Cross and the Switchblade, Spire Books, Old Tappan, N. J., 1963.

background, hence the reference to David Wilkerson. It is the only reference apart from those to services in the Abbey. As previously stated, Ian Reid was well known for his prayer life and perhaps his concentration on this aspect is a reflection of this. The pamphlet contains a sub-section of six short paragraphs which describe the "New Wholeness", and this now merits analysis to discover the confines of their definition.

This piece of writing was aimed at the laity in the most general manner and in the way that Ruth Burgess was seen to do when preparing Abbey guests for the laying on of hands. (see page 114) The central point of this section is the assertion, as quoted above, that man's (*sic*) nature is somewhat 'trinitarian' - mind, body and spirit. What is unsatisfactory is that the explanation then proceeds by images which only partially expand the definition to include the qualifier 'new'. The second paragraph gives two case histories which, as might be expected from Gordon as a gynaecologist, illustrates the decline in a woman's health due to what is basically stress. The authors then introduce "new wholeness" which is implied, but not stated as belonging to and offered by Jesus Christ. Reid and Gordon develop a much used strategy to give reality to their concept. It is a strategy which shall be called the 'inspirational pointer' which occurs in other literature and also in the next chapter. They briefly introduce in a sentence the image of disabled persons healed but not cured "living far fuller lives than many with no disability."<sup>56</sup>

It is important to note the way popular literature and cinema has dealt with disability and healing in the past. We have already had an example from a popularising book: *Health and Healing: A Ministry to Wholeness* which was written by Denis Duncan (see page 35). To stress the importance another example will be taken from a popular religious novel, *The Robe*, and from the Hollywood epic of the same name. Both tell the story of Marcellus, a centurion who was present at the crucifixion of Jesus and who gained possession of his robe. The novel is really about the spread of Christianity in the Roman Empire, but it contains a beautiful cameo about disability and healing. Miriam is a paraplegic who was present at the wedding at Cana in Gallilee, she was not healed by Jesus which was curious to Marcellus but under Jesus'

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<sup>56</sup> *ibid.*

influence her bitterness was removed. Miriam explains that she has the gift of song with which she now inspires the rest of the village despite her disability.

'I cannot tell you how I came by my gift,' she said, 'but I do not regret my lameness. Perhaps the people of Cana are more helped by the songs I sing - from my cot - than they might be if I were physically well. They all have their worries, agonies, defeats. If I had been whole, perhaps they would say, "Oh, it's easy enough for Miriam to sing and rejoice. Miriam has no trouble. Why shouldn't she sing?"'

'You're a brave girl!' declared Marcellus.<sup>57</sup>

This strategy appears time after time in popular religion and can be analysed in evangelical and inspirational books such *Joni*,<sup>58</sup> which likewise was dramatised as a film, or frequently on television, e.g., *Songs of Praise* on the BBC. A biographical narrative is used to triumph over the adversity of illness, disability or personal tragedy. The difficulty is that the reader is not led forward into a deeper understanding of the debate surrounding healing and wholeness. The fact that Allan Gordon has a rich understanding of holistic treatment is left undeveloped and the reader forced to infer the 'trinity' for his or herself.

Actually, as will be shown in the next Chapter, there is a more generous way of looking at these stories. Wholeness is a strange Christian doctrine in that it concerns mankind much more than God. It is therefore likely that any description of a doctrine will not only find stories attractive, but necessary. It is a finding of this dissertation that it is virtually impossible to define wholeness without a story. Robert Coles describes the value of stories in psychiatric medicine in many ways, but in his first chapter, which is entitled "Stories and Theories",<sup>59</sup> he describes the inadequacy of theories on their own in dealing with neuroses when a patient's story may in fact be the key to the problem. In the case of wholeness the same may apply, that the story illustrates the theory. The problem remains that the stories in this instance tend to be stereotypical. Another problem remains: it has been said above that the authors failed to cross modes of discourse. True, but there may be an explanation for this.

<sup>57</sup> Douglas, L. C., *The Robe*, Peter Davies, London, 1943, p260.

<sup>58</sup> Eareckson, J., *Joni*, Pickering & Inglis, Kent, 1976.

<sup>59</sup> Coles, R., *The Call of Stories*, Houghton Mifflin, Boston, 1989, pp1-30.

Discourses tend to be theoretical whereas stories are not; therefore we are asking for a manoeuvre which is in fact impossible (see next chapter).

This chapter has analysed the texts of three, four if Allan Gordon is included, members of the Iona Community. Ian Cowie and Stewart MacGregor offered concrete evidence of taking account of at least two modes of discourse, yet here Reid shows no such evidence. It is, however, present in the fact that a theologian and doctor have combined on a joint project in the atmosphere of openness which has often brought members together in search of common understandings. Nevertheless, if the search is or is to become a creditable doctrine or tool within the Church, guidelines or definitions must be found to empower its members. Ian Cowie deliberately crossed discourses to publicise links which he sees with complementary medicine; whilst Stewart MacGregor has combined discourses in an attempt to make sense of the system which is the NHS.

Now, this rather severe criticism of the pamphlet has, in fact, an antecedent which is documented in *The Coracle*. Robin Murray was a member at the time of its publication, a junior doctor who went on to become a consultant psychiatrist in London. As leader, Ian Reid asked him to reflect for two years on his role as a doctor and it may be that the production of two papers in *The Coracle* was part of that remit. It is the second paper which is of interest:-

..... it is a trifle sad that the Community's view of Christian Healing has remained relatively static. Those who hoped to find this book [Iona Community pamphlet] a new synthesis of the Biblical view with recent research will be disappointed. There is no mention of relevant research in the psychology of religion, of research into psychosomatic medicine and "bio-feedback", or of intriguing sociological work on society's response to illness and the adoption of the "sick role". Nor is there any invitation to question how and why spiritual cures do occur. This is a challenge which Christians should not continue to duck particularly in view of the enthusiasm with which devotees of Transcendental Meditation have welcomed scientific enquiry into the physiological effects of their religious practices.<sup>60</sup>

This is a rich quotation, which shows how at least one member at the time was waiting to push the debate about healing forward. With his interests and subsequent career, Murray was already well qualified to talk of areas which would open up the

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<sup>60</sup> Murray R. M., *Healing Today by Ian Reid and Allan Gordon*, *The Coracle*, no. 65, October 1974, p18.

discourse of healing. His criticism regarding lack of Biblical research is certainly justified and came at a time when Michael Wilson and Bob Lambourne had both lectured on the island with considerable acclaim. Lambourne's book of 1963, *Community, Church and Healing*, contains a masterful chapter on the holistic nature of Biblical society and the attitude towards health which flowed from this. No doubt other references could be found as well, so Murray makes a valid point in his first sentence. The fact that many of Lambourne's definitions have been discredited by Barr (see page 25) does not detract from the excitement they caused at the time. Murray then extends the argument to alternative therapies, as we have noted other authors from the Community to do; and then he goes on to talk about other cures which the Church shies away from rather than accepts. This whole passage is a plea for the kind of eclectic discourse which our other case studies have shown to some extent. Whether it is wise to accept the review of a professional of a pamphlet for the laity is doubtful but it does evince disquiet within the membership of the Iona Community.

The above is a critique of Ian Reid and Allan Gordon which rather makes the diagram of figure 4 in this chapter suspect. The problem is that the authors have not crossed any boundaries in their discourse. The figure shows a line going from 'Faith' to 'Theology in the Community'. A line might equally be drawn from 'Faith' down to 'Humanistic Practice' to indicate that Allan Gordon was fully aware of the social factors which affect even obstetrics and gynaecology. The criticism which is levelled might be satisfied by withdrawing the lines, as in figure 6, which suggest a flow from one to the other and arguing that the authors find bits in all three discourses but fail to link them, and that further they do not enter the area of 'Complementary Medicine' for reason which are known only to themselves. The lack of progress which Murray refers to may be precisely due to the disjointed nature of the argument and their unwillingness to enter the discourse or narrative surrounding 'Complementary Medicine'.

**Figure 9 - Literature by Person (modified)**

1	<b>Theological Discourse</b> Propositional Theology Ian Cowie	2	Faith Ian Reid
3	Theology in the Community Ian Reid Stewart MacGregor	5	Humanistic Practice (A Concern for the Whole Being in Medical Practice) Stewart MacGregor
4	Traditional Medicine (Cosmological or Folklore)	6	Complementary Medicine Ian Cowie
<b>Medical Discourse</b>			

Having looked at three members of the Iona Community who have written on healing it is time to draw some common threads. The first is that biography tends to influence the thinking, and indeed careers, of those who write on health and wholeness. Second, in two of the cases it has been shown that their narratives have crossed several boundaries of discourse. In the third case, a critic has insisted that this should have been done. Third, with the evidence of George MacLeod's career which was analysed in Chapter III, we shall have evidence that it is fruitful to analyse narrative in terms of different types of discourse, as the four case studies to date illustrate the point (if Ron Ferguson and Robin Murray are included there are six). In the next chapter very small areas of discourse will be analysed, from other members talking about wholeness and then healing.

## Wholeness - Members' Stories

The purpose of this chapter is to undertake an analysis of data that has been generated by correspondence. Two letters were written to selected members asking for their views on the healing service. Stated thus very few actually answered because of the very general nature of the question, subsequently a more specific letter was written and many more replies were forthcoming. That letter, which was dated 3<sup>rd</sup> July, 1995, had eight key questions:-

1. Have you memorable experiences of the healing service on Iona and/or elsewhere?
2. What do you understand by 'wholeness'?
3. Does it imply body, mind and spirit, and how would you apply your understanding to patients or clients?
4. The Iona Community advocates projects as a way of stimulating our commitment as New Members. Have you undertaken any project which might involve healing or wholeness?
5. If you are in medicine, are you aware of holistic approaches and alternative therapies? Do you approve of alternative medicine?
6. Are you aware of how the healing service came about and of George MacLeod's personal interest?
7. Can you describe any current or recent activity connected with the above?
8. All these questions have assumed your interest in healing and wholeness. Do you find that it is a total irrelevance to your life and work?

Some of the replies were returned in a very formal format whilst others interpreted these questions as elucidation and were then able to write as they wished. The majority focused on wholeness but as we shall see some turned their interpretation in to very personal stories. The next thing to establish is the corpus of data which may be analysed. What is described below is the respondents, their occupations and the years they have been members of the Iona Community and the type of analysis which has been deemed appropriate to their response:-

**Table 4 - Respondents and Type of Analysis Used**

<u>Type of Analysis</u>	<u>Name</u>	<u>Occupation</u>	<u>Years of Membership</u>
Discourse	Cummings, Pat	Counsellor	5
Discourse	May, Alison	Work with disabled people	13
Discourse	Reeves-Hull, Karen	Health visitor	5
Discourse	Stewart, Dr Rev'd M.	Doctor, minister & counsellor	18

<u>Type of Analysis</u>	<u>Name</u>	<u>Occupation</u>	<u>Years of Membership</u>
Narrative	D. L.	Nurse	8 (resigned 1996)
Narrative	Goodheir, Ruth	Working with mentally handicapped (art therapy)	6
Narrative	Woodcock, Sheila	Pharmacist	21
Twin analysis	Gordon, Tom	Chaplain to a hospice	23
Twin analysis	Smith, Jan	MacMillan nursing tutor	3

Twin analysis is not a technical term but is simply short-hand for accounts which consist both of discourse and narrative.

#### *Oral Accounts*

<u>Name</u>	<u>Occupation</u>	<u>Years of Membership</u>
Milroy, Miggie	Doctor (retired)	3
Miller, Joan	Doctor (retired)	2

Given the total membership of the Community, combined with the selection of those involved with medical professions or care, it would be unlikely that a large sample would be forthcoming. Only twenty-three letters were sent, and the above table represents these responses. There is very obviously a gender bias that can in part be explained by the nature of the occupations represented, and in part by the failure of male members to respond. If they are not susceptible to statistical analysis, we are left with discourse analysis. At the outset, it was not intended to narrow the field to 'wholeness', but this must be done in order to carry out an analysis. This means that lengthy responses such as that of Tom Gordon have been reduced, from in this case 1500 words to very few, whilst Margaret Stewart was so succinct that practically all of her response may be analysed - she produced a response of only 334 words. It might be desirable to reproduce all the letters in an Appendix. However, almost every letter would have to be edited on the grounds of confidentiality and the point of full disclosure would be lost. Tom Gordon did offer his entire letter for publication, therefore it appears in full in Appendix IV. It must also be added that it is not normally a convention of discourse and narrative analysis to provide full transcripts.

Most of the respondents tell stories, only one of which has been altered to preserve anonymity. It also has to be asked why those who have chosen not to tell stories do not do so. Most of the stories are autobiographical or, if this is not strictly true, deal with an encounter with a friend or a group.

The layout of this chapter is important and reflective of the different nuances of methodology used. The main distinction is between discourse analysis and narrative analysis. Therefore, the two will appear in different sections, both in review and substantive work on the Iona Community. The work of Dassetto is undertaken on a micro scale compared to the latter two, and consequently will be developed in another section. A number of the respondents have offered snippets of discourse amongst personal stories. In these cases it has been decided to concentrate on the discourse, but to recognise the stories behind it. When a passage is submitted to narrative analysis it is done so because a significant story about wholeness is being told.

### ***Discourse Analysis***

The history of discourse analysis in theology is both a long one and a short one because much of theology is represented by Biblical scholarship which itself depends upon the analysis of language. Both Old Testament and New Testament studies depend upon the understanding of the text. Reading text as discourse has the advantage of placing it in its social context and identifying its purpose and motives, such readings with different nuances are the stuff of divisions in Biblical understanding and doctrine<sup>1</sup>. Discourse analysis also allows the scholar to consider intonation, discover the type of story being told and the linguistic characteristics of the narrator. It can also be examinations of the standard form of certain texts. For instance, Doty has analysed the Pauline epistles in the light of Hellenic styles of letter writing and argues cogently that Paul's letters were not only testamentary in style, but were open to entire communities<sup>2</sup>. His approach straddles traditional exegesis and an analysis of form.

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<sup>1</sup> Loww, J.P., *Reading Text as Discourse*, in: Black (ed.), D.A., Linguistics and New Testament Interpretation Essays on Discourse Analysis, Broadman, Nashville, 1992.

<sup>2</sup> Doty, W. G., Letters in Primitive Christianity, Fortress Press, Philadelphia, 1983.

Boone undertook a study of American fundamentalism employing discourse analysis that depended upon Foucault. Her book is about 'the doctrine of inerrancy' - the fundamentalist belief that the Bible is the exact record of the word of God. The book naturally concerns itself with power, and this is best illustrated in a chapter dealing with the relationship between the text and the fundamentalist preacher. It is basically *his* interpretation which lends authority to the daily guidance that a congregation receives. She writes:-

I am proposing that fundamentalism has succeeded marvellously in covering its *finalization* of the text with the cloak of *utterance*. By denying that authority arises in community, or in discourse, to use Foucault's, the door may well be open for a tyranny of interpretation in which authoritative interpreters are able to exercise power over their subjects by effacing the distinction between text and interpretation, an effacement especially apparent in literalistic reading when it is claimed that the interpreter does nothing more than expound the "plain sense" of the text.<sup>3</sup>

None of these methods which have theological connections are going to be used in the case studies below, but rather discourse and narrative analysis from social science will be developed according to the principles laid out in Chapter II.

### **Karen Hull-Reeves**

Karen is a health visitor from a practice in an inner city area and therefore has considerable nursing experience. She supplied the only passage on holistic medicine which could be analysed. She was also the only respondent to write more in response to the question quoted in line 1 and therefore it merits a small section on its own. There are three noteworthy points in this short extract: first, she chooses to reproach the interviewer for his use of the word 'approve' in line 2. Her response indicates that she wishes to maintain an objective stance on this issue. She is suggesting that to make a judgement is part of a value system and is therefore subjective. If this is a correct reading of her comment, it suggests that our concern with openness is justified and is by implication acknowledging that there are different value and cultural systems and traditions.

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<sup>3</sup> Boone, K. C., The Bible Tells Them So: The Discourse of Protestant Fundamentalism, State University of NY Press, New York, 1989, p78f.

- 1 I: If you are in medicine, are you aware of holistic approaches and  
alternative therapies?
- 2 Do you approve of alternative medicine?
- 3 R: "Approval" is based on a value system.
- 4 I see 'conventional' medicine as often symptom controlling  
5 and 'alternative' medicine as often more  
6 concerned with the seat or course of the dis-ease (*sic*).
- 7 I am sure these approaches can be mutually complementary  
8 since e.g. pain control could well involve using a syringe-driver using  
opiates,  
9 and using aromatherapy massage to relax tension and pain related anxiety.

Second, Karen shows the tension concerning control in different forms of medicine and she opts to talk of symptom control. In lines 4 - 6 she describes the nature of control in each case and suggests the common view of biomedicine as a controlling discipline whilst complementary medicine involves exploring the illness and finding the seat and course of the illness. Of course, these are not her terms; she uses 'dis-ease' which implies considerably more than 'illness'. The term is commonly used among Christian and non-Christian healers alike and is chosen to indicate that illness is a bodily state without the definitive identification of simple symptoms which can be dealt with successfully by orthodox medicine.

Third, in line 8 and 9 there is a contrast between two types of pain and their control. She acknowledges that opiates may control certain pathological pains whilst certain other pains resolved from tension and anxiety and may be relieved by complementary treatments and she chooses aromatherapy as an example which is increasingly used in hospitals. Nurses are now often sent on courses to learn the technique.

### Pat Cummings

Pat Cummings is involved in counselling connected with child care. She has been a member of the Community for five years. She wrote this very short piece which is quoted in full:

- 1 Being at peace with yourself;  
2 being in a right relationship with others;  
3 feeling the connection between yourself and the whole of creation,  
4 being aware of it;  
5 undergirded by the awareness of the love of a personal God.

This is the only example of a religious definition which does not come with either a story or an explanation. It cannot be analysed by either of the methods used in this chapter nor should it be because it is a simple statement of faith and commitment which the writer has not attached to any activity. Pat's statement belongs to the 'faith' mode of discourse and reminds us of definitions of *shalōm* which are reminiscent of Wilkinson and others who have written in that mode.

There is however a difference which is significant: Pat begins with personal peace, and then discusses right relationships with others and with creation. This is a much more contemporary discourse than that which was offered in Wilkinson's *Health and Healing* but is linked to that type of discourse which stresses faith in a personal God. Once again, she uses a much gentler form which is characteristic of the softer approach of the Iona Community and its liturgy. Line 3 emphasises the 'green' (ecological) concern which now manifests itself throughout the Community. Even with such a simple definition there is an obvious intention to define the 'green' element within her faith and also to place that concern within community by choosing to surround line 3 with two higher orders of awareness and importance.

This passage does add to the cumulative definition of wholeness insofar as Pat offers a green imperative which has been lacking elsewhere. This should not be ignored but noted as a sign of a modern concern.

In some of the analyses that follow, reference is repeatedly made to both the "nurse's account" and "Susie's story" which are both parts of L. D's contribution. Both are pivotal to this chapter and are probably the most revealing findings, it is therefore inevitable that reference will be made to them outside the section and it is strongly suggested that the reader skips to them on pages 209 and 212 respectively.

### **Margaret Stewart**

Margaret Stewart started her career as a doctor, decided to study theology and then become ordained as a minister, and has now gone back to medicine via counselling in an occupational setting. During a personal discussion at the 1996 Community

Plenary on Iona, she explained that her original inspiration for changing from medicine to theology was her distress at witnessing so much depression amongst young mothers at well-woman clinics, who had been socialised into the role of submissive marriage and child rearing. She felt that theology might offer an insight into higher values which could be shared with such as those. In counselling her work brings her into contact with more complex clientele and in her work with the DSS as a medical examiner she experiences the vagaries of the claimant system, which is either abused or under-used. She scribbled a response to my questions in a very short time and produced a thoughtfully technical answer during a very hectic Iona Community Plenary in 1995:-

*Wholeness*

1. Wholeness - Integration of all the states of being of an individual to create a whole.
2. Integration of individual "whole" beings into interdependent organism.
3. States of being would include - physical integrity, psychological stability,
4. ability to make and sustain relationships,
5. spiritual development.
6. Wholeness, like health is an ideal only to be glimpsed
7. in rare moments of our present state of existence,
8. it is what in other contexts I might refer to as "the kingdom".
9. Health - to me- is something a bit more tangible -
10. again never perfect but an entity to which quantifiers of degree can be attached
11. bad, good, poor, improving, deteriorating etc.
12. Also qualifiers of classifications physical, mental, social, sexual, occupational, community etc.
13. Wholeness therefore is a global term, beyond qualification.

Margaret Stewart spent some time as the Church of Scotland representative at the Budapest conference on wholeness and healing<sup>4</sup>. It was part of a series of regional conferences which took place on various continents. Among the preparatory papers was a book written by James McGilveray which contained a foreword by David Jenkins who defines wholeness thus:-

Healthy functioning is probably most often the capacity to contribute to health providing wider purposes and relationships are being properly responded to. Such an approach further provides a positive way of facing up to and living with sickness where it seems irremovable, suffering where it is inescapable or necessarily enduring for the time being, limits which make every healthy episode an episode

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<sup>4</sup> European Consultation of the Christian Understanding of Health, Healing and Building Community, held in Budapest, September 3-9, 1986, under the auspices of the Christian Medical Commission of the World Council of Churches and in co-operation with the Ecumenical Council of Churches in Hungary. Published as: Who Lives, Who Dies, Who Cares - Listening and Caring, January 1987.

only, and death. Practically speaking health is never reached, it is always sought in ever widening circles and it is frequently but temporarily enjoyed. From a faith point of view health is probably best thought of as an "eschatological" idea. That is to say it is what God promises and offers in the end and so what is available now both in foretastes and as the aim and ideal which judges our current activities and structures while at the same time provoking us to more healthy responses and exciting us to a search which is at the same time a seeking of health and an enjoying of health.<sup>5</sup>

A brief examination of the World Council of Churches' involvement with healing issues shows the gradual change in the conception of health and wholeness illustrates the shift from purely ecclesiastical and medical issues to that of community-based matters. In 1964, the first consultation was held in Tübingen which prepared material on the state, funding and function of Church hospitals in developing countries and questioned some of the centralising influences of well-endowed hospitals when community primary care might be more appropriate. It was the era of specifically trained paramedics who would go out into remote and ill-served communities. The Nairobi Assembly of the WCC in 1975 recommended a project be undertaken into "Health, Healing and Wholeness" by organising regional conferences on a global scale. Margaret Stewart took part in the European Consultation in Budapest which dwelt on community relations or the lack of them in the cities of today. This report spoke of the fragmentation of life in European society and the stress which is felt in the loneliness of our cities. Brokenness was the theme of Jean Vanier whose paper appears to have had a profound influence on the overall conference. He spoke of the isolation of those with learning difficulties but also discussed his awareness of others who are isolated by addiction and broken relationships. In 1983, an interim report was presented to the Vancouver 6th Assembly of the WCC and it revealed the transition to a radical critique of society in terms of health and wholeness. The text lacked any biblical definition of wholeness and came closest to defining terms in a diagram which is reproduced below. One of the values of this document was that it showed the influence of the regional variations, yet all with their different emphasis.

.... in Central America, the issue of structural injustice and its effect on health was highlighted. In Africa, the issue of traditional healing in an African spirituality were central to the discussion of health, healing and wholeness. In Europe in,

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<sup>5</sup> McGilvray, J., The Quest for Health and Wholeness, German Institute for Medical Missions, Tübingen, 1981, pXIIIf.

community building was added as an important concern. Each of the consultations and meetings produced its own report<sup>6</sup>.

The resulting synthesis led to a report which presented health as a social problem and responsibility for society and for the Church. Health is represented as the problem of justice, an issue of peace and one of spiritual qualities. The report also brought in the "integrity of creation", in other words, environmental issues related to health. It called upon congregations to witness to these four issues in which through abuse caused so much human suffering. Although it used typical language of the WCC, it brought forth the brokenness of the world and concentrated on the need of congregations to eradicate the sources of guilt and injustice which destroy God's beneficence. Every other page has an insert in the form of a story from one of the regional conferences which illustrated some "sign of hope". These contained stories about liberation movements offering health facilities or one from Norway about a student with advanced muscular-dystrophy. In terms of discourse, it is interesting to note that even the WCC uses narratives about disability to describe success.

Such a wide consultation which resulted in a broad examination of health and wholeness which may well have been disseminated to the Iona Community by Margaret Stewart and other members who attended the Assembly of the WCC in Vancouver. Lesley MacDonald, a member of the Community, was one such delegate from the Church of Scotland in 1983.

The difference between these two examples of discourse are quite striking in three ways: first, the definition is technical and impersonal; second, it prescribes an ideal for the individual which probably is derived from a counselling ethic; and third, it does not tell a story. In other words, the latter point stresses the attempt to be objective and to avoid anecdotal material. Margaret Stewart prided herself in her brevity and conciseness and referred the researcher to a feature in *The Coracle* which articulates

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<sup>6</sup> Christian Medical Commission, Healing and Wholeness - the Churches' Role in Health, WCC Geneva, 1991, piii.

the same definition but in more polished language<sup>7</sup>. She is presenting an idealised image of an integrated person who is whole. Line 6 expresses this explicitly and takes her into the realm of theology. The reference in line 8 to “the kingdom” is an explicit Christian reference to a central theme of Jesus. In at least two of her professions, namely the ministry and occupational counselling, her goals are determined by her theological outlook which happens to be very liberal. Here again is an example of a profession influencing the nature of a discourse.

The influence of counselling is almost always present in clause after clause, and offers a prescriptive description of a fulfilled and successful personality in several different environments which her clients might encounter. Lines 12 and 13 not only act as an evaluation, or possibly a coda, but make it clear that all aspects of life are covered by ‘integration’ or ‘wholeness’.

Margaret Stewart also contrasts health with wholeness which at this juncture is important because it qualifies the rather prescriptive definition of wholeness. Lines 9 to 12 show that she is aware of the idealised nature of her definition and that in the ‘real’ world there must be a qualitative qualifier of wholeness which she defines as “health” (see page 34 and the conclusion pages 285ff). This discourse stresses points that were not in the vocabulary of earlier theologians who influenced the Iona Community and who often did not have such diverse skills in so many fields.

In conclusion, it is possible to draw together elements from these two definitions. One of the first striking features is that neither mentions God, although as noted in Margaret Stewart’s notes some reference is made to ‘kingdom theology’. This is not without significance because it tends to suggest a secularised approach, which was not available to earlier writers. In L.D.’s account ‘brokenness’ is continually contrasted with ‘wholeness’, whilst in the latter account ‘wholeness’ is contrasted with ‘health’ in the same way as ‘ideal’ would be with ‘practical’. In both cases the authors draw on their professional experience in framing their replies. Wholeness is

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<sup>7</sup> Margaret Stewart appends the following sentence to her definition: “I suppose simplistically for me wholeness would represent perfect health, completeness, harmony.” She then refers to: *Reflections Column, The Coracle*, No. 17, vol. 3, July 1994, Page 6.

always signified by spiritual qualities, be these religious or personality traits, and success is implied in both cases. L.D. refers to the successful help that was offered, Margaret Stewart suggests that an integrated personality exhibits a good quality of life in relationships, community and all the other areas mentioned in line 12. The conclusion must be that wholeness qualifies a state of health or being and is either recognised as unattainable or becomes an attribute to be bestowed on someone. As Margaret states, "health is an ideal only to be glimpsed." [Line 6].

### **Alison May**

Alison May was a language teacher before becoming a Vocational Guidance Counsellor which she finds much more rewarding and offers a greater commitment to wholeness. She writes:-

The work I do now is much less well paid but infinitely more satisfying. It is not in any way medical, but certainly has a lot to do with wholeness.

Once again we are confronted with a reflection on a member's career and life-choices and an impression of the influence she has on her clients. This also showed itself in her choice of project as a New Member.

My project as a new member was voluntary work at a Church based training centre for physically disabled young people. A large part of what I did there (and it was eventually to become a full-time paid job) was helping young people who had been defined by their disabilities to find out what their abilities were and to take control of their own lives - to become whole people.

Such quotes as these indicate the depth of her commitment to wholeness as a concomitant of her professional aims and helps to give an insight into the definition which she offers as a reflection of her aims.

1. [Wholeness is...]
2. Something like a state of balance between the needs of body, mind and spirit -
3. an awareness in the individual of this balance.
4. I work as a Vocational Guidance Counsellor with people with mental health problems
5. therefore my concern is not with their physical or mental illness -
6. I'm not qualified -
7. but with their sense of self-worth,
8. rebuilding self-confidence,
9. finding a sense of direction
10. which, though I've never thought of it that way before, could be defined as spirit.

There are some important words which indicate Alison's frame of mind. She is uncertain of herself in line 6 and again in line 7 there is a contrast between this line and the next in that "self-worth" contrasts with "I'm not qualified". Is there a degree of uncertainty within these two lines? Line 10 indicates surprise at her own analysis. Alison then compiles a list of life-skills which she aims to instil in her clients. The list is somewhat akin to the anecdotal lists which the previous member produced in search of her definition. The qualities which are suggested all lead to a more rounded personality that may be more attractive to future employers.

### ***Discourse within the context of narrative (twin analysis)***

The next two informants chose to define wholeness technically, but within the context of their respective professions. Since their definitions are important it is intended to submit them to discourse analysis, but to explain them in the context of the stories they offer from their careers or religious experience. The stories are not analysed, because they do not advance any definition of wholeness, but do set matters in perspective.

#### **Jan Smith**

Jan Smith has worked for several years as a nursing tutor specialising in MacMillan nursing and the care of the dying. She has recently returned to hands-on work in a hospice setting. She came from an evangelical background and had experience of power-healing in charismatic circles. In her letter she gives several examples of the types of effect such faith can have on people's health.

..... one of my sad memories was of a middle aged nurse, again from a charismatic evangelical church who had found a lump in her breast. Her bible reading for that day had been the passage about 'none of these diseases' so she had claimed that passage and healing, and had nothing. When she referred to me the wound was indescribable and she had secondaries everywhere. She died six weeks later in the Hospice never having accepted that she was dying, never at peace and the whole experience was so sad. As I write and think about these things I realise again how much of it made me; people were taught that God healed, which for most ordinary folk means cured and then it didn't happen and there was a struggle to find an explanation.

She quotes several examples of the distress and failure of such encounters with charismatic healing and relates her joy at finding the liberation of the approach of the

Iona Community and the peace which comes of the healing service. In the light of these reflections, she offers the following discourse on wholeness:-

1. Wholeness to me is an obscure concept.
2. I am sure it must imply some sort of personal integration of body/ mind/ spirit
3. but how this is manifest I have no idea.
4. I used to think it was about being at peace with
5. and accepting life-limiting illness
6. and the inevitability of death
7. but the more I work with and teach about death and dying
8. the more I realise how unrealistic that is;
9. also some of the research suggests (in very limited diagnostic groups)
10. that a fighting or denying coping strategy may actually lengthen survival time
11. so what right have I to promote acceptance
12. as the appropriate response to a terminal diagnosis?

Wholeness, however, remains a spiritual quality which can either be secular or religious, but *this is offered in the past tense* and may be part of her new-found freedom from the influence of her charismatic past. Lines 8 to 12 indicate how experience brings a more open attitude and with it a comfortable relationship with doubt. It has long been 'received wisdom' that a 'fighting spirit' can combat cancer<sup>8</sup>. Many commentators have drawn correlations between personality traits, life events such as the loss of a significant other, or the repression of anger and other hostile emotions and cancer, and have come to conclusions that there are indeed personality profiles associated with cancer. An early recorded reference to such correlation goes back to 1601, by Galen<sup>9</sup>. Siegel, who is cited, has recently welcomed the extension of psychotherapy to those undergoing transplant surgery as an extension of the 'fighting spirit' argument<sup>10</sup>. This is the most significant point in Jan's narrative. The

<sup>8</sup> For a popular American exposition of this see the publicist Dr Bernie Siegel:

Siegel, B.S., Love, Medicine and Miracles: Lessons Learned About Self-Healing from a Surgeon's Experience with Exceptional Patients, Harper and Row, New York, 1986.

<sup>9</sup> quoted in: Rosch, P.J., *Stress and Cancer* (1984), p3, in Cooper (ed.), C.L., Psychosocial Stress and Cancer, Wiley & Sons, Chichester, 1985. See also: Cooper, C.L., *The Social Psychological Precursors to Cancer*, *ibid.*

<sup>10</sup> Siegel, B.S., *Predicting Bone Marrow Transplant Success*, Advances - The Journal of Mind-Body Health, Vol.12, no.1, Winter 1996, p3.

Regarding cancer see:- Wood, C., *Is Hope a Treatment for Cancer?*, Advances, Vol. 12, No. 3, Summer 1996, which specifically reports on the Bristol Cancer Help Centre.

In a review article, St George points out that research in Holistic medicine at present is mainly concentrated on recovery processes:- St George, D., *Current Issues in Complementary Medical Research: From Inter- to Intra-Professional Research*, Journal of Holistic Health, No. 53, Summer, 1997, p11ff.

first definition is sufficient yet is rejected for one which more accurately fits her present situation and is what many would accept. The intrusion of experience offers a more profound understanding. What is illustrated is the occurrence and resolution of an 'epistemic crisis' (see p 278).

What Jan is reacting to is the prescriptive attitude which can be found in so many people who seek to promote wholeness as a panacea for the solution of problems to do with health. She reacts to her previous examination by using and rejecting prescriptive words such as "promote" and "appropriate. Her aims in nursing are now to enable patients to live comfortably with the condition which confronts them and to live with their terminal illness. This indicates a rejection of both the glib approach of the charismatic groups which she broke away from, whilst also showing a willingness to enter into dialogue with various modes of discourse surrounding wholeness. There is much debate in nursing circles about holistic education and perhaps she is being more pragmatic in the light of such literature<sup>11</sup>. The point Oberst, who is cited, makes is that there is an imbalance between the established teaching of nurses to have a holistic approach to their patients, compared with their lack of knowledge of holistic theories in scientific research.

Jan Smith's definition offers an opportunity to see the dynamics of a definition evolving in the light of experience and to understand how the progress of both a religious and a nursing career can effect changes in perspective. Evangelical Christianity gave way to the approach of the Iona Community, and lecturing has given way to practical nursing. As in many of the other examples, what is being witnessed is the development of a theology as life and circumstances progress.

In the passage offered above there is only one mention of wholeness and no mention of brokenness but rather of personal integration. Is this significant? Compared with line 1 it is clear that Jan has moved away from wholeness and has decided to concentrate on "personal integration" which gives her the freedom to develop the

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<sup>11</sup> Oberst, M.T., *Holism, Holes, and Wholes*, Research in Nursing and Health, Vol. 16, No. 1, 1993, p1f.

concept of line 4 and 5 of “being at peace with and accepting life-limiting illness”. Such a concept contains within it the potential to escape the dualism which will be obvious in Susie’s story (see page 212) which depended so much on the contrast between her friend’s physical disintegration and her mental and spiritual qualities. There is no such dualism here.

Tom Gordon may be expected to produce a very technical definition of wholeness, but his letter is in fact intensely personal. It comes in this section because it is theologically informed and is therefore qualitatively different from the previous narratives.

### **Tom Gordon**

Two passages from the Reverend Tom Gordon’s letter will be examined in detail. They come from a long letter which reflects on his growing involvement with healing and therefore with wholeness. He has spent many years in the parish ministry and has moved to the post of Chaplain at the Marie Curie Hospice in Edinburgh. Tom reflects in his letter on how the Iona Community’s involvement in healing has influenced his thinking and understanding of wholeness and healing since 1973 when he “ran away” from the laying on of hands during a student retreat. In the first passage which is to be analysed, he cites the influence of Ian Reid whose contribution was examined in the last chapter. Subsequently, Tom Gordon worked with another member in Glasgow and was asked to take the regular healing service one Sunday. He had learnt by this time that the leadership of such a service did not depend upon the talents of any one individual but on the whole community of love in Christ. He encountered the not unusual hostility in his own church but has now found the interest which is reflected in the passages.

The passages have been selected for two reasons: first, they offer an insight into how a definition grows, and second, the longer passage shows how that definition may work in a professional setting and may expand our understanding of the dilemmas facing Jan Smith. This first passage represents a re-appraisal of her understanding of wholeness:

- 1 And that meant- as I look back on it now - the beginning of a new appraisal,
- 2 or indeed an introduction for me, of the idea of wholeness,
- 3 the body, mind and spirit being one in a complete person,
- 4 each part needing healed at different times.
- 5 Ian Reid, the then leader, was very helpful, both in a corporate and in an individual sense.
- 6 The seeds of my own growth, disturbing though it was, were sown.

This passage occurs just after Tom Gordon has written of his first experience in 1973 and really offers little that is new in lines 2, 3 and 4. The key concept which he introduces is "complete person" which would appear to consist of a body, mind and spirit. This line contains a formula which is almost trinitarian in a 'chalcedonian' style and exhibits the theological background of the writer. Line 4 contains a surprise - Tom suggests that parts of the 'trinity' may require healing at different times; that the three parts may need treatment at differing moments. This suggests that a dualism might enter into his work and counselling if he decides to concentrate on the mind or the spirit. Such would be consistent with the team-work which is about to be discussed, but if this were to be the case it would suggest that Tom encounters certain compartmentalisation within the hospice.

- 1 With patients, their carers, other members of the multi-disciplinary team and other professional colleagues,
- 2 the functions of chaplaincy include: provision of pastoral care and counselling;
- 3 provision of an ethical, theological, existential and pastoral resource;
- 4 and provision of opportunities for worship and religious expression
- 5 and for acknowledgement and interpretation of issues raised in dying and death.
- 6 If we believe - as I do - that at the heart of being human is a spiritual experience,
- 7 then the spiritual dimension can be challenged and dislocated in the face of life-threatening illness.
- 8 Spiritual care and healing, therefore, is the recognition of this dimension in order
- 9 that people can be supported in their search for meaning, faith and hope
- 10 [and] be enabled to recognise the wholeness of life within dying and death.
- 11 It is in the area of existential thought, therefore, that I find myself operating more and more,
- 12 seeking new language, symbols, signposts or whatever, with those who are "dislocated" -
- 13 including
- 14 from a specific religious framework (cf. the Psalmist - "My God, my God, why have you forsaken me?")
- 15 - and who need help both to acknowledge and interpret their "suffering" of the spirit.
- 16 The whole Iona process helps me not only to understand the validity of being in that place as a chaplain,
- 17 but to feel the rightness of me personally working with these issues.
- 18 It also helps me to see that this "spiritual healing" is not in my hands alone,
- 19 but as I play my part in all the care that is offered by all the people in all their different ways for all the issues a patient or a carer - or even a member of staff - is living with.

20 Healing belongs to a community of love

The orientation of this section of discourse is very informative and important as a guide to Tom's self-definition as to the functions of a hospice chaplain. In a few lines he crafts a job description in considerable detail which offers his understanding of his professional contribution to the multi-disciplinary team. He quotes nine possible functions which embrace many facets which allow a great deal of creativity within a hospice setting. However, Stewart McGregor was reticent in defining his, or anyone else's, role within the hospital preferring to rest on the role of a "clown". Such indeed is a contrast but it must be borne in mind that McGregor is opposed to hospices in a separate sector of the NHS. It is useful to have this contrast and to find a chaplain who is content with his role.

The main body, lines 6 to 14, maintains the theological input into both his work and the definition which is being addressed. He uses one word in two different lines which add to the collection of alternatives to 'brokenness' as 'wholeness', namely 'dislocated' which is explained in line 9. If the components of the 'trinity' can be treated separately, it may be argued that a crisis unbalances them in such a way that the chaplain is required to right the balance. Lines 14 and 15 indicate a specific religious example of "dislocated", that of the moment of doubt which Jesus had on the cross. Nevertheless, Tom indicates that he seeks other modes of help and support for those in need and distress ("new language, symbols, signposts of whatever"). It appears safe to conclude that 'dislocation' is now another part of a synthesis of wholeness. Here it is appropriate to quote another passage from his letter which distances him from a strictly Christian definition of wholeness. He states in the paragraph prior to those enumerated:-

I am convinced of this - the spiritual dimension of our wholeness is not confined, and cannot be confined, by the religious. It can be defined by religious language and symbols and even doctrine, but not confined by it.

The problem of this definition along with that of others is that there remains in the respondents' minds the notion that they must identify qualities which are of a spiritual

nature. There is little wrong with this aim except that it allows a dialogue to develop which has the seeds of dualism within it because despite the best intention of their practice, and there is always the risk of allowing one's Christian value-system to place undue emphasis on the spiritual component of the 'trinity'. If this were to be the case there would be a tendency to distort the holism which most are professing.

This dualism can have an effect upon one's attitude to the healing service and to the laying on of hands insofar as it may effect the way such a service is approached. If the service is considered to care for the 'Spirit', there may be a tendency or propensity to regard healing as being devoid of the possibility of physical healing or improvement before, during or after the service. It is possible to hypothesise that with the more open and inclusive liturgy of healing which was discussed in Chapter II there is now a greater scepticism about the efficacy of the laying on of hands which encourages members to disguise such beliefs under the guise of attention to the spirit which may be broken by the world as well as personal difficulties. This has been suggested by both Margaret Stewart and by Tom Gordon.

### ***Narrative Analysis***

It is now necessary to choose a method of analysis for a larger examination of the texts which manifestly exhibit stories directly relating to wholeness. The method of narrative analysis is particularly useful for such a small sample and also because it does not corrupt the intimacy of some of the responses. Graham uses qualitative analysis to examine the stories which surround pregnancy and argues that other methodologies would fail to do justice to the intimacy of such events.<sup>12</sup> The method that has been chosen here was devised by Labov and Waletzky<sup>13</sup> who maintain that a story has a beginning and an end and within it there are natural sequences of episodes which tend to consist of orientation, complicating action, evaluation and coda. These four illustrate the flow of a story: the first describes the

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<sup>12</sup> Graham, H., *Surveying Through Stories*, in Bell & Roberts, C. & H. C., *Social Researching: Politics, Problems and Practice*, RKP, London, 1984, Ch. 6.

<sup>13</sup> Labov & Waletzky, W., *Narrative Analysis: Oral Version of Personal Experience*, in Helm, J., *Essays of the Verbal and Visual Arts*, University of Washington Press: Seattle, Seattle, 1967, pp12-44.

scene, then the plot is developed, after which the narrator evaluates the event or events. The coda is not necessarily a climax, but is certainly a return to the present, reality or the overall theme. The latter makes its connection with music rather obvious and appropriate. Since we are dealing with a written text which presumably has been given a structure of its own, it would seem inappropriate to break it into poetic stanzas as Gee advocates.<sup>14</sup> Finally, analyses which are appropriate to ideological discourse have been rejected, because the respondents had not been asked to make ideological responses and it would be wrong to entrap them by building up ideological categories to meet their responses. The methods and rationale of Billig<sup>15</sup><sup>16</sup> are appealing as are those which examine the attitude towards Maoris in the educational system of New Zealand,<sup>17</sup> but they do not meet the needs of this enquiry. Riessman has written an overview of most methods of discourse analysis,<sup>18</sup> but in a separate paper she argues for her own use of Labov and Waletzky's method:-

This method is particularly well suited to studying the presentation of self in everyday life, for storifying experience is a naturalistic form for others about ourselves. Unlike traditional qualitative methods, this approach does not fragment the text into discrete content categories for coding purposes but, instead, identifies longer stretches of talk that take the form of narrative - a discourse organised around time and consequential events in a 'world' recreated by the narrator. The approach assumes interviewees structure their replies in the ways they do for strategic reasons - to effectively communicate 'what happened' - and, consequently, determining the organisation of the discourse is an important analytic task.<sup>19</sup>

Only one respondent asked that confidentiality be preserved by changing names and disguising characters in the story, who actually have nothing to do with the Iona Community. This explains why these important stories have distinctive titles.

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<sup>14</sup> Gee, J. P., *A Linguistic Approach to Narrative*, Journal of Narrative and Life History, No. 1, 1991, pp15-39.

<sup>15</sup> Billig, M., *Ideology & Opinions*, Sage, London, 1991, especially chapter 1.

<sup>16</sup> Billig, M., *Fascists: A Social Psychological View of the National Front*, Academic Press, London, 1978.

<sup>17</sup> Potter & Wetherell, J. & M., *Fragmented Ideologies: Accounts of Educational Failure and Positive Discrimination*, Text, Vol. 9, No. 2, 1989, pp175-190.

<sup>18</sup> Riessman, C. K., *Narrative Analysis*, Sage, London, 1993.

<sup>19</sup> Riessman, C. K., *Strategic Uses of Narrative in the Presentation of Self and Illness: A Research Note*, Soc. Sci. Med., Vol. 30, No. 11, London, 1990, p1195.

**A nurse****'Me'**

- ABSTRACT
- 1        You [the researcher] ask what I understand by wholeness.
- ORIENTATION
- 2        The best way I have of looking at wholeness is to think of me.  
 3        I am not broken or divided into parts  
 4        but I am a whole complex creation with a body a mind and a spirit.  
 5        At times part of me may well be broken and may need to be fixed  
 6        but the rest of me will continue to function.
- COMPLICATING ACTION
- 7        But as well as being me -  
 8        I am part of my family -  
 9        I am mother to my children -  
 10       daughter to my parents -  
 11       sister to my brother and once a wife to my husband -  
 12       an employee to my employer [this last added later].  
 13       All these people have some part to play in my wholeness  
 14       and indeed I play a part in their wholeness.  
 15       My patients are usually part of my life because temporarily they are "broken".
- EVALUATION
- 16       When I first became a nurse my role was to help make people better  
 17       but as part of the nursing team I would for instance be given a list of 5 or 6 patients  
 18       who needed a drink every hour and dutifully I would ensure they received that  
 19       drink.  
 20       One of my colleagues would be given a list of 5 or 6 people who needed help with  
 21       oral hygiene  
 22       and she would do that.  
 23       How much more sensible it would have been for us to have been shown  
 24       the correlation between hydration and dry mouths  
 25       and to combine these tasks and made the patient feel more whole.  
 26       Thankfully nursing has changed  
 27       and I am certainly thankful that the care I now deliver takes in the whole patient.
- CODA
- 28       I try to think of their wholeness and use the "me" as a rule of thumb,  
 29       I try to remember that while one part of them might be broken  
 30       the rest of them is functioning.  
 31       Even when it is not as simple as returning them to full health  
 32       it is still possible to treat them as a "me".

L.D. constructs her definition in stages by offering increasingly complex illustrations of her meaning. She orientates the reader by offering a simile that defines wholeness terms of "me". A "me" which could be herself potentially contains all the elements of wholeness in body, mind and spirit as would appear in most definitions but in lines 2 and 5 wholeness is contrasted with brokenness and an indication is given that illness involves being broken. In the complicating action which follows, illness is set aside in order that she can build up a picture of selfhood that is made up of all the significant

others that make up our lives. This moves her definition on to a personal level which is going to recur in subsequent parts of her narrative. Lines 12 to 15 show a transition from employee to a caring nurse who recognises the brokenness of others who are ill, thus reinforcing the association of brokenness and illness.

This transition is important because L.D. now illustrates her obligation to offer wholeness through her vocation which involves nursing people back to wholeness. However, her training did not satisfy her need to treat patients in such a way that they remained whole. With experience L.D. understands that nursing methods could create brokenness by not approaching the patient holistically. The Iona Community significantly recognises all its members by their occupation, period of membership, address and significant other. In other words, one's vocation is vitally important and it is not surprising that L.D. returns her definition of a Christian doctrine to the profession in which she is supposed to apply it. However there is a curious logic in her definition because patients, 'broken' people, are basically "not me", in that they are clients being served by someone who may be presumed to have more wholeness in this context. This occurs in other narratives also: the idea that the Community is serving 'broken people' is common. In previous parts of the dissertation, there was ample evidence that there was a shift from the concept of wholeness to that of brokenness. This probably came about when the Iona Community became more concerned with the theology of Vanier<sup>20</sup> which stressed the weakness and poverty of those who are broken by society, drugs or disability. Jean Vanier had a different, if not greater, understanding of the feelings of brokenness than previous members of the Iona Community had had when seeking to bring wholeness to those who had experience of hard lives and ill-health. It is fair to speculate that L.D.'s life had shown her a more broken mode of being than many others had seen and that the more discordant nature of today's society makes "brokenness" a more attractive concept than wholeness.

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<sup>20</sup> Vanier, J. The Broken Body - Journey to Wholeness, DLT, London, 1988. Note the deliberate contrast in the title.

The next story has been altered to meet a request from L.D. and illustrates how a letter may become more personal and yet continue to elaborate her intention to define wholeness. She begins a story about a close friend but never forgets to offer further elaboration. Her method is both moving and carefully crafted.

The letter becomes increasingly personal in tone and we find that L.D. allows her search for answers to the researcher's questions to become reminiscences about a close friend who died of a long and devastating disease. It may well be that she felt that this letter gave her the opportunity to work through the twin traumas of her divorce and bereavement. Both are plainly obvious in the following story which could simply be read as a personal account, yet it still addresses the central question, "What do you understand by wholeness?"

### Susie's Story

#### ABSTRACT

1 My best friend, Susie, died of Motor Neurone Disease 18 months ago.

#### ORIENTATION

2 She was a wonderful person,

3 she was kind, had a great sense both of humour and of the ridiculous,

4 she loved life, she fought for things which she held dear and she supported many people.

5 She was diagnosed as having MND some 2 years before she died

#### COMPLICATING ACTION

6 but those 2 years were full of trials for her.

7 Her whole "me" was falling apart.

8 She lost her mobility,

9 she had to "retire" from work at 39 years old,

10 she had difficulty in eating and in speaking

11 and finally died from a pulmonary embolus before she lost her speech completely.

#### EVALUATION

12 She never however lost her dignity and she fulfilled a life-long ambition of being married -

#### 2nd COMPLICATING ACTION

13 Ken was her husband for only eighteen months

14 but their relationship was very deep for that short time.

15 During her increasing disease my marriage ended...

16 and I turned to her for help.

#### 2nd EVALUATION

17 Susie said that she thought that with her MND nobody would come for help to her again

18 and although she was devastated by my situation she did gain a feeling of worth.

19 Susie will always be a part of my 'me' -

#### CODA

20 I often think of her

21 and although physically that part of me has gone

22 she will always be part of the whole me.

Lines 2 - 5 have been designated 'orientation' because they paint the picture of a "wonderful person" who appears to have endless qualities that are admired by many. This is a typical lead into a story illustrating wholeness. Line 6 might have been part of the orientation but it has been deliberately put in with the 'complicating action' because it contains the keyword "trials" that are then listed in lines 7 - 11. Consistent with L.D.'s attitude to nursing exhibited in the last text we now have a list of all the dysfunctions of the body. The 'evaluation' is, in this instance, a single line 12 where it becomes obvious that spiritual qualities override these physical afflictions. Wholeness is associated with dignity and the resolve of a person to maintain that type of quality over any adversity. However, there is more involved than spiritual qualities; there is the ability to fulfil ambitions, in other words, to gain fulfilment.

Thus we have a definition of wholeness which focuses almost entirely on spiritual qualities as opposed to physical. There is almost a dualism in the implied definition. The body may go to pieces but the brain and concomitant dignity will stay intact. This attitude will appear several times more but L.D. goes on to another story.

In lines 13 - 16 she talks about Susie's marriage and then turns to the real subject of this section, which is the break up of her own marriage. There is a deliberate contrast between a wholesome marriage and one that is breaking. L.D.'s wholeness is being broken and we now see a further aspect of definition appear, that of someone who is still able to help another. The broken person is helping to heal the 'whole' person, which leads to the conclusion that Susie will always remain part of the "me" which is L.D. In popular Christian literature such a person is known as the 'wounded healer'<sup>21</sup>. Whole people are expected to be useful people and their friendship can be treasured for their spiritual qualities.

There are two further stories which reinforce the impression that any account of wholeness: a) comes out of experience; and b) is emotionally related to clients or friends who in some way are broken by adversity.

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<sup>21</sup> e.g., Nouwen, H. J. M., The Wounded Healer: ministry in contemporary society, Garden City; N.Y, Doubleday, 1972.

The next story is devoid of theory and does not mention wholeness, but suggests the archetypal connection between disability and people's idealised perception of their mental and spiritual state.

### Ruth Goodheir

#### *Wholeness and Disability*

- ORIENTATION
- 1       8 years ago I spent six months as an assistant in the L'Arche Community in  
Inverness.
- 2       I shared a room with a woman from Skye who has cerebral palsy.
- COMPLICATING ACTION
- 3       She had experienced deep rejection and hurt in her life  
4       and had spent 12 years of her adult life in a mental institution.  
5       She was about my age  
6       and had been denied so many of the things I take for granted.  
7       Home, family, children, sex, physical movement, work etc..  
8       Yet she was able to forgive and love people
- EVALUATION
- 9       in a way that I found very humbling.
- 10       I think if there is one main thing that my time in the L'Arche Community taught  
me
- CODA
- 11       it is that it is the poorest and the weakest people on the earth  
12       who really know how to pray.

Ruth does not attempt to define wholeness but chooses to tell this story which is by definition possibly the purest example of a story in the technical sense. It locates itself within a time-frame and describes a definite episode which occurred on Iona. For many years, groups of adults with cerebral palsy have been visiting a centre in Bunessan on Mull and also Iona and have stayed in the MacLeod Centre, and Ruth tells of her experience with a cerebral palsied woman. The Complicating Action describes her life-style and in line 6 Ruth begins in the first person to contrast her life with that of her friend. Ruth talks in terms of her friend's deprivations which are listed in line 7. The Evaluation is important because it confirms that this has had an emotional effect upon Ruth whilst reminding her of the influence of L'Arche Community which deals with broken people. The two lines act as a transition from an emotional feeling to an awareness of what she had learnt at L'Arche Community at an earlier stage. It leads directly to the Coda which offers a theological conclusion about the "weakest people on the earth", a conclusion which stresses that she, and

others, may learn from people who appear to be spiritually more 'whole' than the likes of Ruth.

This story does not mention any of the concepts dealt with in this chapter, yet it highlights the need people have to relate their experiences which make up their religious convictions. Disabled people offer an obvious example of 'religious perfection' which may be far from the truth but which is a tempting example to quote in the pursuit of 'wholeness' or 'brokenness', whilst at the same time giving the opportunity for service with the knowledge that it will generally be gratefully received.

The story deserves to be quoted because it illustrates the very prevalent tendency for writers to idealise disabled people in their search for definitions and to confuse their emotions with a truth which is built on the shakiest of foundations. The dubiety lies in the assumption that disabled people have identical personalities which have the same expectations as able-bodied people. They in fact do have but over time they become modified.

The next narrative moves us from personal reflections to a professional definition which still retains a subjective input. It will act as a transition from the former to the more technical definitions which will conclude this section.

### **Sheila Woodcock**

Sheila Woodcock is a pharmacist of many years standing and is married to a United Reformed Minister in Redditch. In 1988 she submitted a dissertation on holistic medicine as part of a Masters degree in health studies at Swansea University. The dissertation is a very personal reflection on the subject and makes no attempt to avoid the use of the first person singular. Because of this, the entire discourse may be treated as a whole but within it there are passages that are clearly narratives. One reflects her own professional experience, whilst the second is a paraphrase of an article in a journal which can be compared in order to see if there are different emphasises.

Firstly what is her thesis? She shares a great deal with Stewart MacGregor in terms of political commitment and involvement, but in terms of the general discourse being discussed throughout she chooses a different mentor from the latter. This puts her thesis in a slightly different mode in that she refers mainly to Dr. Patrick Pietroni who is the leading advocate of humanistic practice in the UK and is now a member of the Marylebone<sup>22</sup> practice in London. She argues that holistic health practice treats the whole person where she is; be that in her family relationships, housing state or marginalised position as woman, elderly person or young child on the poverty line. Her political statement criticises the two-tier health service and the increasing emphasis on some budgeting and bidding system which favours the most vociferous department and devalues the less glamorous but vital areas of psychiatric and elderly care. She further argues that there is insufficient money spent on preventive medicine and an ambivalent and lax policy towards cigarette and alcohol advertising. She also gives vent to her frustration that so much money is wasted on Trident as a nuclear deterrent. The result of an under-funded NHS is that those who receive funding are specialists who have a vested interest in “medicalising social problems”.

For the last few months I have been involved in a large psychiatric outpatients' clinic and have come to evaluate the use and abuse of a wide range of tranquillisers and anti-depressants. I often look at some of the patients and wonder why they have got to this state of affairs. Is this little bottle of pink, yellow or blue pills really the answer? Might there be unacceptable side-effects? Is a 'prop' really the answer? Have the psychiatrists given the patient what he wants or needs? Will this be a short term first-aid measure whilst something is done about this person's life-style or circumstances, or will it be the beginning of the road to addiction? What kind of support should the NHS give people in their health crises? What about the root cause of illnesses? For example, unemployment, bad, or no, housing, family stress. There are always the people behind the 'patients', persons whose lives have been changed. Are they in fact ill, diseased or are we once again medicalising social problems because we do not know how else to cope?<sup>23</sup>

Such a broad sweep is entirely consistent with the concerns of the *British Holistic Medical Association* which was founded in part by Pietroni who encourages a multi-disciplinary approach that places health in the wide-ranging contents which Sheila refers to at the outset of her dissertation. She is not searching for a definition of

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<sup>22</sup> Woodcock, S., The Holistic Approach to Health, unpublished MSc. Thesis, presented to Swansea University, 1989, p36

<sup>23</sup> *ibid.*, p1f.

“whole person” but rather seeking the appropriate way to approach a person in a context of holistic medicine. The narrative that reflects her professional experience will illustrate this, but first let it be noted that she is motivated by her professional vocation as have other respondents. Apparently many of the members of the Iona Community are motivated by the Protestant work ethic.

The story which she uses comes from her own practice whilst working with a dermatologist with a high reputation for innovative therapy.

### ORIENTATION

1 I have the pleasure and privilege of working with a top class dermatologist  
 2 who is also a sensitive person.  
 3 I have said many times that his patients feel better just by meeting and talking with him.  
 4 (My dispensing of his special creams and ointments is a bonus).

### COMPLICATING ACTION

5 A few months ago I was involved in the case of a twelve year old girl  
 6 who had been covered with a particularly resistant skin complaint for years.  
 7 Her mother despaired, she had tried everything and they thought they had seen everyone,  
 without success.  
 8 I saw her when she arrived at the hospital,  
 9 dragged in by her mother,  
 10 protesting because she did not want to go through it all over again.  
 11 Half an hour later a very different person handed me her prescription to be dispensed,  
 12 with her mother at the side of her shedding tears, this time of joy.  
 13 ‘What a lovely man’ she said,  
 14 ‘We walked into his consulting room, he looked at my daughter and said  
 15 “What beautiful eyes and hair you have”!  
 16 So she has, but most people have never noticed that because of her terrible skin.  
 17 This was his opening, and the beginning of a very special relationship.  
 18 He told his patient that he could not make her better overnight  
 19 but if she did as he suggested faithfully every day  
 20 he thought there would be an improvement in about three months.

### RESOLUTION

21 I had the privilege of seeing that girl blossom from a shrinking, desperately unhappy girl  
 22 into a beautiful extrovert young lady

### EVALUATION

23 who will always be grateful to a wonderful doctor who knows  
 24 that real healing is about people starting where they are,  
 25 giving hope but no false promises  
 26 and enough self-confidence for them to find healing qualities within themselves.

### CODA

27 This consultant dermatologist always remembered that the skin he treated was the skin of a person<sup>24</sup>.

There are four characters in this narrative from Sheila Woodcock’s dissertation, all of whom illustrate some aspect of the holistic medicine debate. Their characteristics

<sup>24</sup> *ibid.*, p21f. (This reference applies to the whole extract, which has since been annotated)

crop up in many examples of stereotypical physician, patient or relative. The other character is Sheila herself. Authors who seek to promote holistic health care usually paint a glowing image of the physician's caring qualities and successful consultation and communication skills. This dermatologist is no exception and is considered to be a man of great sensitivity. The mother was distraught with anxiety about her daughter and distressed by the lack of success with previous physicians and their prescribed medication. The daughter herself was withdrawn and insecure as a result of her stigma.

Lines 13 to 15 show how the physician changed the entire relationship between patient and doctor by treating the daughter as a person and restoring the mother's confidence as a result. The following lines illustrate how difficult some find it to look behind the stigma to see the true persona. Ideally, holistic physicians recognise the importance of the individual and place that obligation above diagnostic or clinical skills. Next, he involved his patient in a realistic assessment of her treatment and gave the pair responsibilities for the conduct of treatment. These have all been alluded to in previous chapters and are here being recited by the respondent but a further review may be in order. The holistic skill of the physician is of a considerable concern to medical educationalists who have addressed the subject of training from the Sixties onwards. To some extent, the literature is a polemic against the over clinical approach in America but it illustrates the mind-frame of narratives like the one above.

All critics of the 'biomedical' model, theological and secular writers alike, are united by a desire not only to treat a disease but to understand the whole person and offer the whole gamut of medical care to him. Schön writes of the demise of absolute trust in professional knowledge and the inflexibility of traditional medical training and pleads for a training which produces a 'reflective practitioner' who can respond to individual needs as a case develops<sup>25</sup>. By learning to 'reflect-in-action' a doctor may attend to problems which would otherwise have gone unnoticed in the mechanistic

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<sup>25</sup> Schön, D., *op cit*, p58ff.

treatment of a single disease symptom. Such an approach, he believed, would result in an enhanced role for the beleaguered professional. Problem-solving education has been introduced in many Canadian medical schools - McMaster to name but one. Engel rounds on those who suggest that psychiatry is too vague a science, dealing with rather nebulous socio-psychological trivia and argues that the biomedical model which is being defended by them should be replaced by a biopsychosocial model. The scope of such a model "...is determined by the historic function of the physician to establish whether the person soliciting help is 'sick' or 'well'; and if sick, why sick and in which ways sick; and then to develop a rational program to treat the illness and restore and maintain health."<sup>26</sup> Engel then refers to an earlier paper in which he asks, Is grief an illness? He can only answer that question by seeing the patient in his total environment and by expanding the holistic role of the practitioner. Grief, like 'just being sick', can put great demands on the counsellor, therapist or physician. There are many papers, it has to be said self-congratulatory papers, which describe how human their professional manners are compared to the brusqueness of many doctors in the American hospital system.

If Sheila is examined as a character, we first note that she resolves the story in an emotional manner not one of objectivity; she shows the joy which comes of watching a patient recover and merit words like 'blossom', 'beautiful' and 'lady'. Then comes the evaluation and a reiteration of admiration for the dermatologist before defining healing in lines 24 to 26.

Healing is defined as having four qualities: first, people are accepted as they are; second, they are offered hope but, third, no unrealistic expectations; and, last, they are boosted in such a way that they may find healing qualities within themselves. It is possibly this confidence that people can find healing combined with a religious conviction as appears below that encourages even paramedics like Sheila to find meaning in the healing service of which the laying on of hands is now such an integral part. She paid a study visit to Pietroni's practice which is located in the parish church which serves Harley Street. The St Marylebone Health Centre offers various

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<sup>26</sup> Engel, G. L., *op cit*, p132.

therapies and the opportunity to partake of spiritual counselling and healing<sup>27</sup>. She writes of spiritual healing thus:-

Many people have turned to prayer and the laying on of hands when all allopathic medicine has failed. Sometimes their own faith or their partner's has made this possible and helpful. Particularly in the field of cancer it is important to differentiate between healing and curing. Some of the people who have been treated by spiritual healers or the Ministry of Healing would not claim to be cured in the recognised sense of the word but they have experienced healing, a peace of mind, a joy in the life remaining to them, a sharing of themselves with family and friends, and remarkable remissions and disappearance of tumours has occurred. Whereas religious patients may claim a miracle, holists would look at the reorientation of the patient to positive thinking, good expectations and the letting go of anger, fear and resentment and the support of a group of like-minded friends.

The second narrative to be analysed is the paraphrase of an account from the *Journal of the American Medical Association*. The method which will be used is to compare the emphasis between Woodcock's account and that of S. J. Sontag, the original author. This will be done by placing the relevant extracts in parallel columns. The article in question is a narrative, part of a regular feature asking for a first person reflection on an episode. Sontag's story is written about a hospital in Illinois and features four characters besides the narrator: a patient, an intern, a medical student and a resident. The point of the exercise is to question why Sheila Woodcock chooses to concentrate on only two characters, the patient and the intern, thus choosing her emphasis from one the central motifs in the debate about holistic medicine and practice.

What emerges in the analysis is a conflict between two signs of holistic or humanistic treatment and practice which have already conflicted in her dissertation. It will be interesting to examine why one of these signs, or symbols, concerns Woodcock more than the other. The first sign is that of excessive biomedicine as illustrated in lines 8 to 13 of Sontag's original as opposed to the second sign of sympathetic treatment which is the real point of both narratives. By emphasising human qualities rather than the fragmenting nature of much medical practice, Woodcock is taking her understanding of humanistic practice down one route which is different from our

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<sup>27</sup> Woodcock, *op cit*, p36.

other informants and is unexpected from someone in a medical profession which deals in many drugs.

Her narrative version is largely accurate, which is why the intern has not been quoted in the extracts. The purpose however is to show that she has been very selective in order to define her version of holistic medicine and has misjudged some important clues in the original narrative as to the nature of holistic practice. The most important section to take from the original is the resident's list of tests, which recites the importance of biomedicine and clinical testing (lines 6-10). This is the real centre of the debate about holism in medicine and is addressed by both Pietroni and Capra. It would have made strategic sense to quote this passage, as it would have been helpful to mention the way the student is characterised as being sycophantic (lines 3-5). It has been noted that Sheila Woodcock dwelt on the intern's social background, but in the original we have another example of this in a rather 'WASPy'<sup>28</sup> liberal comment about the resident's middle-class social upbringing, and the supposed influence of the Vietnam war and other American atrocities on his parents. The point to be asked is whether the medical approach is determined by social background, or whether both writers are guilty of romanticising the influence of hardship. We must conclude that for both authors social background is part of holistic medicine, that they assume that physicians can gain the necessary skills from trials and tribulations in their personal life. If this is a way of talking of empathy, so be it, yet empathy can be developed in many different ways. The development of empathy is not tied to social background but to skills developed in a broad and eclectic training which has been the plea of so many of the authors discussed in this thesis.

Sheila Woodcock is illustrating the importance of spiritual qualities in the healing process and the need to develop appropriate skills in one's vocation to meet the demands of treating or caring for 'whole people'. Yet it is equally important to stress the influence of technical matters on the breakdown of wholeness. It will be remembered that L.D. dealt in her first narrative with the technicalities of oral hygiene

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<sup>28</sup> White Anglo-Saxon Protestant

in nursing, whilst Sheila Woodcock devotes relatively little space to the prescription of inappropriate drugs, tranquillisers and the like, when she could have chosen to make this a central part of her search for wholeness within her profession. She does make the references but fails to offer an explanatory narrative to substantiate her position.

Her choice is fascinating in that it reveals her inner desire to tell her story about wholeness as a professional who demands a high level of spiritual awareness from medical practitioners. What she is really revealing is her own spiritual aspirations and qualities.

Extracts of parallel text are printed on the next page, prior to a more general conclusion which makes mention of some more general material from other informants.

**Paraphrased Account**

1 There was reported in the Journal of  
 2 American Medical Association the case of a  
 3 man with chest pains.  
 4 He was admitted to hospital.  
 5 The resident and student wanted to discharge  
 6 him  
 7 because they could find nothing organically  
 8 wrong  
 9 but the intern spent a long time with him -  
 10 listening.  
 11 She uncovered his biographical life from his  
 12 happy European childhood  
 13 to his experience in the concentration camps.  
 14 The horrors he witnessed,  
 15 the blame he took upon himself  
 16 in his powerlessness and the constant guilt  
 17 had taken its toll.  
 18 He had come to America after the war  
 19 and had believed that the Americans had done  
 20 all they could to stop the mass extermination  
 21 of the Jews  
 22 and the pain was intolerable.  
 23 Then the President visited Bitburg Cemetery  
 24 and he felt totally alone with no-one to talk to  
 25 or understand him.  
 26 It had taken an intern who had struggled  
 27 through college working part-time as a  
 28 waitress,  
 29 a nursing assistant and a taxi-driver  
 30 because her immigrant parents could not  
 afford to help her,  
 who knew what struggle and hardship was.  
 She listened and understood.  
 She knew that Twentieth Century high-tech  
 medicine was not the answer for this person  
 and that a good doctor was more than a reader  
 of laboratory reports and a prescriber of  
 medicines.  
 After his discharge he wrote to her  
 saying that he possessed the only real peace he  
 had known since childhood  
 and was free from torment.  
 He said 'You have given me a piece of your  
 heart'.  
 It was a giving and receiving from a person to  
 a person, a sharing,  
 a deep personal relationship  
 that briefly brought a Jewish gentleman  
wholeness and healing  
 which gave him real peace to the end of his  
 days.<sup>29</sup>

**Original Account - Extracts**

*R - Resident, I - Intern, S - Student, N - Narrator*

1 **R:** Why was he admitted?  
 2 There's nothing wrong.  
 3 **N:** I could see the student was learning  
 4 well.  
 5 Within two hours he and his resident  
 6 had already determined  
 7 that hospitalisation wasn't necessary.  
 8 **R:** You're the attending. [physician]  
 9 What tests do you want?  
 10 A Bernstein, endoscopy, oesophageal  
 11 manometry, and ultrasound of the gall  
 12 bladder?  
 13 While we're at it we'll get a lower GI  
 14 film  
 15 so we can get him out of here.  
 16 **S:** How does that relate to his present  
 17 problems?  
 18 **I:** I need more time. Give me a little  
 19 more time.  
 20 **R:** We should get the test results and  
 21 then get him out of here.  
 22 **N:** And the resident?  
 23 A brilliant foreign medical graduate,  
 24 the product of a well-to-do middle-class  
 25 family.  
 26 Shouldn't he understand?  
 27 Perhaps not. After all, it was not he  
 28 but his parents and his parents' parents  
 29 who remember  
 30 the Bataan death march, Corregidor, the  
 rape of Nanking,  
 the Burma campaign, the Amritsar  
 massacre, the destruction of Manila.  
**R:** So why do you think he died?  
 I knew we should have done an  
 endoscopy.<sup>30</sup>

<sup>29</sup> Woodcock, *op cit*, p7.

The letter that was sent to members asked various specific questions but at no point asked for stories. The questions were specific but lacked guidance as to the expected answer and stories were not expected except in the case of reflections on the healing service itself. It will be shown that the definitions which have been offered do not conform to the expectations of the thesis. When Duncan was discussed elsewhere, his approach to wholeness was criticised because he depended on the story of Lin who suffered from cerebral palsy and had developed a fulfilling life for herself and for others. It was asserted that Duncan had failed to define wholeness by confining himself to a story which had an implicit definition but little substantive indication of his meaning.<sup>31</sup> There was a hint that resorting to stories was, at best, an inadequate approach to defining wholeness and at worst, a sentimental and condescending method (see page 35). This chapter, underlined by the previous six stories, has shown that certain doctrines may be defined by stories if these are to make sense to those to whom Christian teaching is relevant to their professions and the care that they offer to clients. Such a finding runs counter to expectations and thus merits considerable investigation.

### ***Micro-Analysis***

It would be wrong to dismiss the idea that wholeness can be defined conceptually by exegesis or hermeneutics, but in the context of this chapter the aim is to show how definitions evolve from experience. A definition must neither be tautologous nor redundant communication, in that it says nothing that is not known already. The problem that confronts us here is to extract a definition from the discourse and narratives which sometimes lack the coherence of simple statements. By using the methods of Dassetto, I believe that his early work is being introduced to English speaking academia for the first time, save that he has now moved on to examine more contemporary Belgian issues, some studies of which have been translated into English.

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<sup>30</sup> Sontag, S. J., *A Piece of Her Heart*, Journal of the American Medical Association, Vol 259, No. 7, 1988, p1071f.

<sup>31</sup> Duncan, D., Health and Healing: A Ministry to Wholeness, St. Andrew Press, Edinburgh, 1988, p81f.

Some scholars have undertaken sociological investigations into aspects of faith, i.e. denominational issues or social trends in religions. Such studies have either depended upon traditional sociology of religion or have developed a structuralist or post-structuralist approach, perhaps because many of these studies are French. Two such originate from Louvain in Belgium, in the Department of Sociology where the writer studied in 1973. This was one year prior to its move to Brussels, which was in response to the linguistic divide of Belgium. The head of department, Professor Houtart,<sup>32</sup> was working on Catholic values, whilst some of his students were engaged in more linguistic approaches to work on Papal Encyclicals, using the concept of deep grammar which had been developed by Chomsky. His methods bring together “key words” in one small utterance or statement and rank them in order of their contribution to the overall conceptual structure. It is probably more correct to write of transformational grammar because the end product is to examine how concepts are transformed. Dassetto’s method was to identify key words in a sentence and then use “deep grammar” to discover if these sentences were closed, in much the same way as narrative analysts claim that a story must be fixed by time references in order for it to stand in a coherent form. He argues:-

It [the method] thus gives information about the structure of a text or of a type of text and of the place which each element occupies in the inner structure. It also has the advantage that it is not limited to the phrase, but furnishes information about much larger units. The value of this analysis can be brought to light much more forcibly if it is employed in a comprehensive analysis. [Translation from French mine]<sup>33</sup>

In 1973 an entire issue of *Social Compass* was devoted to linguistic and discourse analysis of religious texts. In the introduction, Houtart writes of the need to study “religious language as a phenomenon of communication and considering the social conditions of this communication: sociology of the speaker, of the listener, of the socio-cultural environment of communication, of obstacles, or of ‘noise’.”<sup>34</sup> Interestingly, Burke points out that religious language should be regarded as belonging to a fourth category when he discusses it in his book *The Rhetoric of*

<sup>32</sup> Houtart, Fr., *Extra-Ecclesial Interests and Maintaining the Status Quo of the Churches*, *Concilium*, Vol. 6, No. 7, Burns & Oates, London.

<sup>33</sup> Dassetto, F., *Analyse Du Discours Religieux et Sociologie*, FERES, Louvain, 1973, p120.

<sup>34</sup> Houtart, F., *Editorial*, *Social Compass*, XX/3 1973, p358.

*Religion*<sup>35</sup> which would further suggest that religious language requires special treatment by sociologists as Houtart suggests. Rousseau and Dassetto developed the idea of transformational grammar a little further and produced an analysis of a sermon in terms of the message and the influence which Jesus Christ had on men (*sic*) and on the world. They draw on more continental linguistic material than in Dassetto's book.

For the past ten years Felice Dassetto has developed studies on immigrants within Belgium<sup>36</sup>. More recent research has been carried out on value systems in traditional discourse depending upon Weber and Levi-Strauss. Currently Rudi Laermans has been employing these methods in order to document value changes within the Belgian Catholic church<sup>37 38</sup>.

### **L.D.'s definition**

Having chosen a method for micro-analysis, we shall analyse a key word structure using Dassetto and then consider L.D.'s definition of wholeness, which is told as an illustrative narrative that develops into a story and which contains all the elements of a definition. Thus we will be able to detect the substance of a definition that remains embedded in the story.

Dassetto's method is particularly useful where the key words may in fact come from different discourses. What was of interest in 1973 was theology and economics, thus interesting sentences would contain an element from both disciplines. The figure below illustrates an analysis of one line #4 from L.D.'s story which links wholeness with elements which are common to both theological and secular definitions:-

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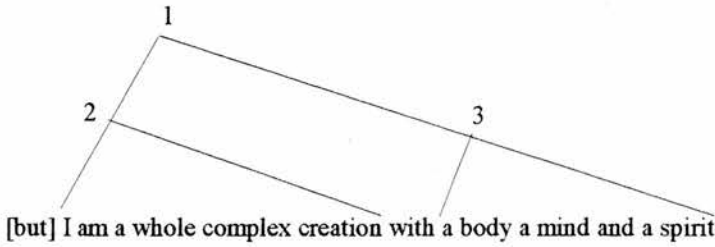
<sup>35</sup> Burke, K., *The Rhetoric of Religion - Studies in Logology*, UCLA Berkeley, London, 1970, p14. He delineates three categories of language: words about nature, socio-political words, and words about words.

<sup>36</sup> Dassetto, F., *Pour une théorie des cycles migratoires*, in Bastenier & Dassetto, A. & F., *Immigration et Nouveaux Pluralismes*, De Boeck Université, Bruxelles, 1990.

<sup>37</sup> Laermans, R., *Roman Catholicism and "Methodical Conduct of Life": Catholic Action in Flanders in a Weberian Perspective*, *Social Compass*, vol. 38, No. 1, 1991, pp87-91.

<sup>38</sup> Laermans, R., *From Truth to Values: A Sociological Analysis of the Public Discourse of Catholic Organisations in Flanders*, *Social Compass*, Vol. 42, No. 1, 1995, pp69-77.

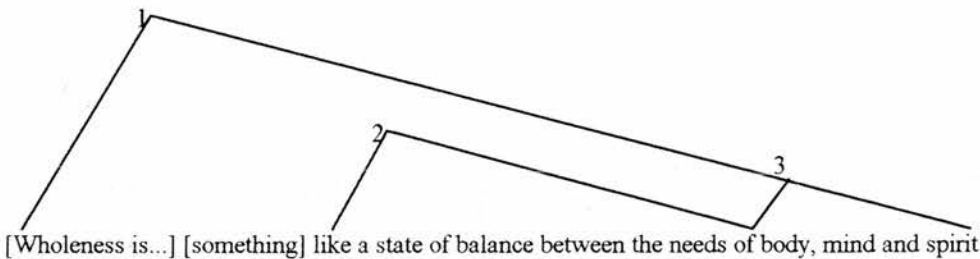
Figure 10 - L.D.



Line 4 contains one central concept outlined by number 1 which is undergirded by two separate concepts, i.e. a description of herself in number 2 and a qualification of “whole complex”, i.e., the personal description, in number 3. Line 4 is the central concept of the narrative given above, so it is appropriate that it should be submitted to a finer analysis. L.D. states in this sentence quite succinctly her knowledge of who or what she is (I am a whole complex creation) then links this with a less personal affirmation that she has a body, a mind and a spirit. Of course L’s real definition lies in the previous line and is summed up in the word “me”, but this is not fleshed out in a single line but in a complete narrative. The word creation implies some metaphysical or supernatural origin, but in this analysis one word cannot stand alone. Such a method is useful for a micro-analysis but we have examined her whole story, which should be considered as requiring macro-methods.

Alison May

Figure 11 - Alison May



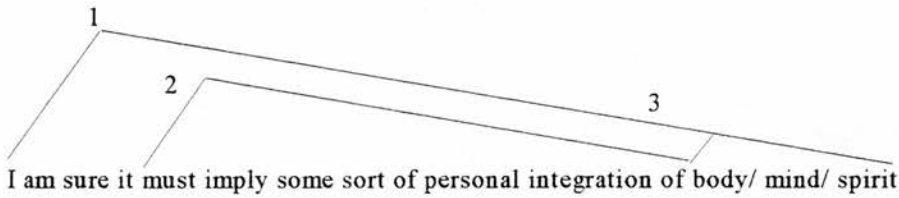
This key sentence has been taken from line 2 above in her account. Alison May offers a similar definition to many of the other members but introduces as her second level the concept of balance between different states of being. She implies some kind of harmony between body, mind and spirit and expects that this may be achieved without reference to where the person is coming from but rather describes where the

person might be going. If this is so, it offers some insights into where that person might be going. It is introducing a term, balance, which is akin to 'integration' or 'health' in the sense that it remains an ideal.

**Jan Smith**

Jan Smith's definition is like so many others, full of hesitancy and is very much related to her specific field of nursing in so far as it relates to palliative care and concerns a particular aim of the hospice movement, that of bringing peace to patients in the last days of their lives. The most important thing to note are the words "personal integration" as she has moved away from wholeness as a central component of her key definition.

**Figure 12 - Jan Smith**

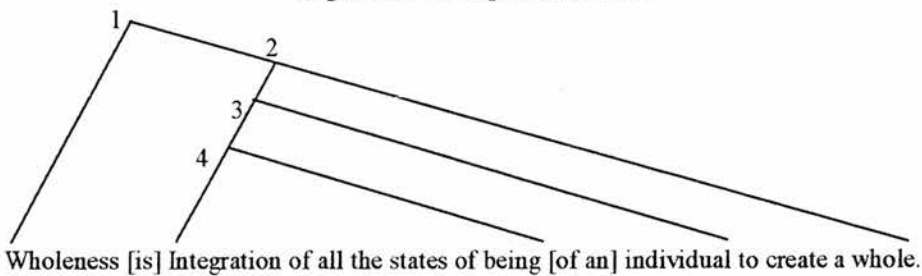


**Margaret Stewart**

As in the case of L.D. the structure of the key sentence can be examined separately by applying Dassetto's method. This will show that the core concepts which Stewart chooses are different from L.D. and the origin of the difference will have to be explained.

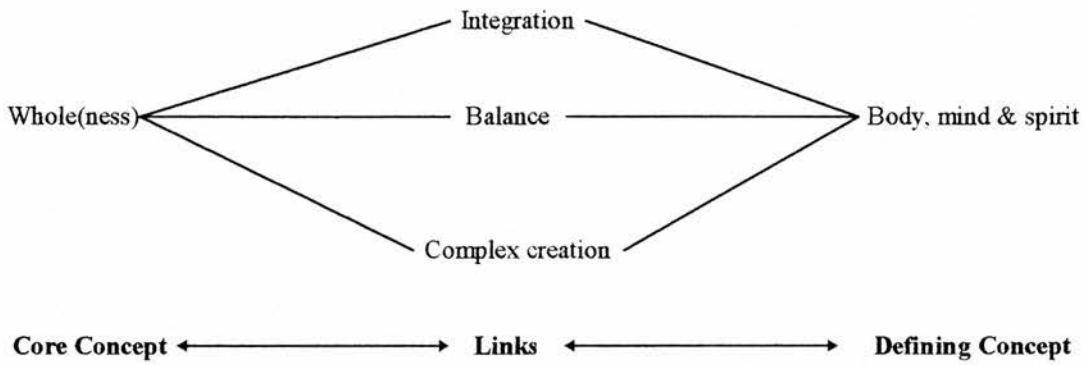
The analysis looks like this:-

**Figure 13 - Margaret Stewart**



There is one point from the sentence to be noted: the word wholeness at the beginning is either redundant or the sentence is circular. The “[is]” was added to make a sentence; Margaret Stewart simply had a dash. Nevertheless there appear to be four levels of concept in the sentence. #4 introduces the concept of integration and combines the normally trinitarian formula of body, mind and spirit with all states of being of an individual. This would appear to be more important than the notion of ‘body, mind and spirit’ alone and is qualified in #2 which credits the individual with a contribution to a whole. It is a different key sentence to that of L.D. which reverses the whole emphasis and makes creation a pivotal word.

**Figure 14 - Profile of Definitions**



In order to collate the definitions or descriptions in some easily recognised pattern the chart above has been devised by myself to highlight the various key concepts. This diagram summarises the four lines which were analysed by Dassetto’s method, but this particular figure is postulated for this dissertation. The dissertation centres around a core concept of wholeness and in every chapter there has been a recurrent defining concept or theme - that of body, mind and spirit. What this chapter has illustrated is that there can be different ways of linking ‘wholeness’ to ‘body, mind and spirit’. The four respondents have chosen different routes to link the two, as illustrated above. Without the link either of the other two are meaningless. It is revealing that three links have shown themselves. ‘Integration’ was introduced at an early stage by König who wrote in the forties from a Steiner perspective. ‘Balance’ is a new word which may have to be explored later; it belongs much more to the New Age language and is almost synonymous with ‘harmony’. ‘Complex creation’ is one

phrase of a genre which implies some kind of metaphysical property. The links reveal creative activity in the search for wholeness and also illustrate the position of the respondent in terms of linguistic usage. When respondents are presented with a notion of wholeness (core concept) coupled with the concept of 'body, mind and spirit' (defining concept) as they were in questions 2 and 3 of the letter (see Appendix III) they have been presented with the task of making the connection which they have done in a variety of ways as illustrated, which have been called links, i.e., integration, balance, complex creation.

The letters sometimes contained material which talked either about the healing service itself or holistic medicine. These comments do not come in the form of definitions and so may not be examined so formally. It is also doubtful whether they relate narratives which reveal core structures. By relating some of them, it is hoped that attitudes will be revealed.

### ***Healing and Holistic Medicine***

There is a wealth of material still remaining in these letters which deals with the nature of the healing service and with attitudes towards holistic medicine. Only one passage is suitable for close analysis but the rest shed light on some of the ethical and religious issues involved in these matters. Asked what she understood by a holistic approach, Miggie Milroy explained how as a school doctor she treated every child as unique; that child "was the most important child in the world to her parents at that moment in time". This may not be an intellectual response, it may not even be an answer that addresses the question but it contains the essence of an ethical position: Miggie is making a statement about professional commitment to patients and about a sympathetic diagnosis which will have a lasting influence on that patient. This small and hastily composed response is a good introduction to the rest of the material.

Some of the respondents talk of the healing service and talk of the peace which they themselves have received at the service. Some also distinguish between officiants, their style and emphasis. They also indicate that they have not only conducted the

service but have often participated in receiving the laying on of hands in search for that peace.

I have been coming to Iona on and off for over 30 years, and remember healing services conducted by both George and Ralph Morton. I preferred Ralph's lower key approach. I don't remember any particular incidents, but I have been at many services which were long depressing recitals of illnesses, and at others where taking part in the laying on of hands I felt what I can only describe as a slight electric current flowing. I had never conducted a healing service until this week - it was only the second time I had conducted a service in the Abbey at all. I was initially reluctant to do it, but got a lot of support from my family group beforehand, and felt very much supported at the service.

Alison May raises each of these issues in the above quote: she compares the styles of Ralph Morton and George MacLeod and expresses a preference for the former's "low key approach", thus indicating that there can be an aesthetic involved in the service. She then describes how many have reacted to the service (cf. George Wilkie's letter) and expresses satisfaction when the laying on of hands yielded an experience of some phenomenon representing a presence of healing power. Like most other leaders, Alison expresses a reluctance to conduct a service but derives a sense of support from the Community and in particular from her Family Group. There is often an almost biblical reluctance like those of the prophets to prophesy or of Moses to accept his commission at the Burning Bush.

Tom Gordon also showed a reluctance to accept the implications of what the healing service might mean and could not accept at all the laying on of hands and left this part of the service. Yet the experience of the discussion and fellowship of the week on the island staying in the abbey gave the kind of support which allowed him to grow. The experience of the healing service on Iona is not simply one of a momentary experience within a service but may continue in the activities of the week or in discussion of an informal or formal nature. The following quotation makes this point:-

I first attended a healing service on Iona in 1973 during Divinity Students' week. I was very disturbed by it, and walked out of the second part - the laying on of hands. I could cope with the prayers for others - even by name, which was a strange experience for a douse presbyterian - but the other part was foreign to me. I didn't understand it. I was angry, confused, upset..... So I did what we are all inclined to do when we feel like that - I took myself out of the situation, I ran away! That service, my reaction and the reaction of others - those disturbed by it and those who felt liberated by it - sparked off a deep and important discussion during that week.

His letter further shows, as was noted above that it was only in the context of a loving community that he conducted such a service in his first parish as an assistant minister. He was serving with another Community member, the Rev'd John Cook in Easterhouse: St George's and St Peter's, who held a monthly service where the leader went to the person in the congregation who indicated a need for laying on of hands by sitting at the end of the pew. This is where Tom Gordon really discovered the power of "a community of love" because he knew intimately the problems of those who were asking for help. This seems an insignificant incident to relate but it contrasts with the impersonality of the large service in the height of summer on Iona and the contrast is important to Tom. It may be discussed further in the concluding chapter, but at the moment it would be wise to record his words:-

I was invited, quite early on in my assistantship, to lead one of these services. I had already - thankfully, and despite the particular style of the service itself - moved away from any concern I might have had that one person could have healing powers, and that I would not be good enough - or even wish to take on that mantle. I did find, however, that preparation for and conducting of the services was both moving and challenging. The whole Iona thing about the whole community of faith being the context in which healing takes place was the primary focus and lasting impression of those services. Even when John Cook indicated that he personally had been relieved of a specific pain in the laying on of hands one evening, I did not feel that was me. It was only my facilitating the community of worshipping people to be a channel of healing and wholeness, and it was that community of faith that had been a channel of healing.

In these services, therefore, and in the discussions afterwards, allied to the continuing pastoral care of the people concerned by all who ministered to them in the life of the congregation, developed my understanding of wholeness, as well as helping me to see the rightness of the healing approach in Iona, that it belongs to the whole people of God, and can find its focus in the gathering of the people for worship, prayer and the laying on of hands.

These two paragraphs elucidate the whole nature of a "community of love" and illustrate how Tom was enabled to lead such a service as he learnt the value of touch and the laying on of hands as part of an ongoing pastoral care of the "people of God" in what was a remarkably community oriented congregation. It was the Iona experience localised in a housing estate in Glasgow and offered the same kind of opportunity as some have seized on Iona.

Other respondents find the community aspect most important. Jan Smith writes:-

I came to Iona some seven years ago from charismatic evangelical background in which I had spent almost all my adult life following a classic 'conversion experience' as a teenager. The most influential church during that time, and the

one I attended for the longest period had very strong and clear teaching about healing, that it was the will of God to heal, that it was our responsibility as Christians to pray for healing for ourselves and others, that in order to be 'successful' we had to have faith which meant (more or less) that in prayer we had to claim the promises of God and believe we had already received. As I write this I am aware that to someone not familiar with the charismatic evangelical movement it may sound very jargonistic and odd.... Though with the passage of time, with change and experience I am not sure I understand any longer even if I did then.

Jan is here describing the ethos of an evangelical and charismatic community as the congregation in which she was brought up and came to love, if not to totally understand, but in this paragraph the contrast with Iona is immediately apparent - in the way her writing is structured. She unfortunately does not describe her experiences on Iona in any detail.

Margaret Stewart illustrates in her remarks about the healing service that she is not concerned with physical healing but rather indulges the type of dualism which was previously discussed. She understands the healing service and laying on of hands as addressing the spirit within us. This is perhaps a way of coping with a scepticism concerning physical healing but reveals a flaw in the holistic approach which her definition advocated. She writes:-

We speak at the Healing Service in the Abbey of the person as body, mind and spirit. Attending to the spirit is as much part of what is required of us and others as is attending to the body and to the mind. To be as effective as we can be, in whatever way we choose, requires attention to be focused across the wholeness of our being - including spirit.

This quotation is very difficult to read - in that it contains the 'holistic formula' of body, mind and spirit but then appears to exclude the body and concentrate on the other two elements which can be addressed within a healing service. Margaret does not justify such a position but this is how it reads. She offers a definition of spirituality which explains in part this opposition to physical healing and acknowledges that there is a power present in such events as a healing service and in fellowship in general. She is able to acknowledge the power of the Iona healing service and the laying on of hands.

For me spirituality is quite simply the business of attending to the spirit - my spirit, your spirit, the Holy Spirit. There is within each of us, a force which is inbuilt into the physical and psychological systems but yet is also apart from them; a power which leads us to seek and allows us to find growth and development and

healing - The ways in which we understand this will differ depending on our underlying culture and belief-system...spirituality is not exclusively Christian.

There is a power which can lead our lives in certain directions and will lead us to the acceptance of the laying on of hands if this is appropriate. She deliberately uses words which are common in various belief systems (the force of life, life-force, physis, spirit).

### **Conclusion**

There are occasions when the findings of social science can lead to theological conclusions. The foregoing is one such example. In this chapter, stories have been supplied by members of the Iona Community who have been asked to work towards a definition of wholeness. In earlier chapters, several authors were chosen for their interest in wholeness and the definition which they offered, cf. Wilson, Lambourne and Wilkinson to name but three, whilst later George MacLeod exhibited a definition based perhaps on his brother-in-law, Allan Murray. These definitions almost always were based on exegesis which depended either on an interpretation of Scriptures to find holistic attitudes to culture or ways of linking wholeness to concepts of salvation. In the upper two genres of writing on page 55 there are illustrations of the types of key-words which are employed by authors writing in these modes and which often form the foundations for their argumentation. In the case of most of this sample, no such attempt has been made to relate any conclusions to exegesis but rather to existential situations either experienced as part of a profession or an emotional situation in one's personal life. In the last chapter, three members were closely examined and they, too, wrote in an exegetical style in at least some of their passages but this group have chosen not to do so. Apart from the fact that very few of the sample were theologians, it might be suggested that they belong to a different generation and are more willing to work without base concepts that were important to earlier theologians.

In conclusion, this chapter is a testimony to people's ability to relate theology to every-day life and to reach their own positions and to work through life's progress through different cultures and experience. There are examples of movement from

charismatic positions to that of the Iona Community and from certainty to uncertainty. There has also been further evidence that the theology of wholeness has given way to that of the theology of brokenness. Concomitant with this is the move away from sin to brokenness as an understanding of any departure from God's purpose and will. In fact, this move enables a new kind of confession and of healing when people think of brokenness as a natural but regrettable state of being rather than the more heavily laden concept of sinfulness which appeared to be at the heart of much of early theology within the Iona Community and healing in general. These points will have to be pursued in the concluding chapter but have already been present in chapters II and that on George MacLeod and his assumption of guilt. Fraser and Galloway have both emphasised the role of experience in theological formation in recent years. Ian Fraser has published a collection of formative anecdotes from his ministry in South America, the WCC in Geneva and various ministries in Scotland. His purpose has been to meditate and then compose a prayer. He clearly draws upon experience of others to communicate the richness of theology in meeting the situation of the moment. He shows, in one instance, how the mutuality of confession works in practice.<sup>39</sup> Kathy Galloway, on the other hand, reveals her conviction that speech provides the impetus to theological reflection as women relate their experiences of abuse, political struggle and poverty. She reflects in one meditation on the redeeming rhythm of daily life on Iona and in the Abbey indicating that people's experience will produce stories from their stay with the Community.<sup>40</sup>

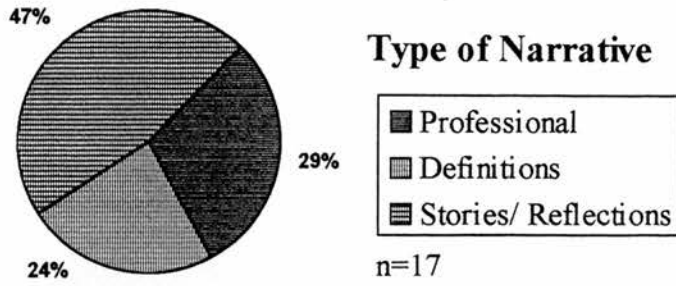
The overall conclusion can be more concisely stated by means of a pie chart. Each piece of analysis plus every indented quote has been classified according to whether it draws on professional experience, a story or reflection or a definition. A story in this case invariably refers to a third person or personal growth. The statistics show quite clearly that stories/reflections are the most popular way of dealing with the question, "What is wholeness?". Given this information the pie chart is sufficient:-

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<sup>39</sup>Fraser, I. M., *Strange Fire*, Wild Goose Publications, Glasgow, 1994, p92f.

<sup>40</sup>Galloway, K., *Talking to the Bones*, SPCK, London, 1996, p42ff.

Figure 15 - Distribution of Narrative



Whilst previous chapters have either historical or descriptive evidence we now have empirical evidence of attitudes for future theological discussion. This will be one time when theology can be informed by sociological investigation.

## Analytical Illustrations

### Introduction

This chapter has three purposes, the first two of which arise from the Introduction. The aim is to develop the thesis set out therein by discussing coherence theory as a tool to understanding the discourse of different groups in a pluralistic society. It is intended to show that coherence gives knowledge and beliefs justification within their own orbit. Second, the chapter on methodology suggested that consideration of motives would be raised at a later stage. Third, this section is really a footnote to the analysis of George MacLeod's discourse and, for that matter, Ian Cowie's. At various points in this thesis, questions have been raised about the academic stature of most of George MacLeod's documents and much of Ian Cowie's writings. No disparagement was intended and this is hoped to show that, in fact, this is the process of living theology.

### Coherence Theory and the Significant Whole.

This section is central to the overall thesis. There are several ways in which coherence is sought in religious literature. In terms of exegesis, many authors have sought to examine the coherence of individual biblical passages as an aid to both understanding and to establish the integrity of the author. Rosenblatt and Sitterson in the introduction to a collection of papers argue that coherence is traditionally sought by rabbinical scholars and the folios of the Talmud stress the continuity of interpretations and point to moments of disjunction when advances are made in arguments<sup>1</sup>. In a paper in the same volume, Sanders highlights the pluralism of gods in the OT and argues that many of the seeming complexities can be made coherent by understanding the OT as a monotheizing text which controls many narratives<sup>2</sup>. A second area exists in the examination of the theories of certain theologians,

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<sup>1</sup> Rosenblatt & Sitterson (eds.), J.P. & J.C., "Not in Heaven" *Coherence and Complexity in Biblical Narrative*, Indiana UP, Indianapolis, 1991, *Introduction*.

<sup>2</sup> Sanders, J.A., *The Integrity of Biblical Pluralism*, *ibid*, p164ff.

particularly those with a historical background<sup>3</sup>. It is also possible to consider the coherence of types of theology<sup>4</sup>. Whatever method and definition of coherence theory is employed by these various investigations, it is obvious that the concept of coherence is well established in various branches of theology. From bibliographies and abstracts it would appear that much of the concern about coherence comes from evangelical writers who, one suspects, are attempting to establish 'rules' which will confine choices in the same way that this thesis is attempting to establish 'rules' which will open choices. If this is so, the method of coherence in fact may be lacking in cogency because of its manipulability.

In the introduction it was stated that the aim of the thesis was to show how different discourses could co-exist within the overall field of religion. Healing and wholeness provide an excellent medium in which to test this thesis, because it is an area which encompasses so many potential fields of discourse, and yet is generally surrounded by some understanding of holism. The coherence theory of truth gives us the possibility of outlining legitimate areas for tolerance and mutual understanding of different positions. In order to make this work it will be necessary to look at one particular aspect of the coherence theory of truth, namely what is a "significant whole"?

Combining the two concepts of coherence and significant whole, it is possible to undertake a threefold analysis. First, the coherence theory of truth provides a philosophical understanding of truth which if properly applied would lead to tolerance, and the reverse, criteria for rejecting a discourse as being unworthy of tolerance. Second, coherence theory can be applied sociologically, in other words it is possible to ask what people do in practice when they combine discourses from different fields. Lastly, certain aspects of the philosophy of social science can be examined in relation to the significant whole.

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<sup>3</sup> Forstman, H. J., *Coherence and incoherence in the theology of John Calvin*, Revisoning the past; ed. by M Engel, et al, 1992

<sup>4</sup> Craig, W. L., *Divine Foreknowledge and Human Freedom: The Coherence of Theism: Omniscience*, Evangelical Quarterly, No 66, 1994, p362ff.

The coherence theory of truth can be traced to F. H. Bradley, who first published his theory in 1914 in *Essays on Truth and Reality*<sup>5</sup>. Bradley argues that truth can be found in the coherence of ideas or beliefs and that a significant statement of the truth becomes a system which is significant in its logical consistency. The system is the totality of the beliefs which are consistent with one another. Each statement must entail the succeeding one and may not include statements which err from the totality of the whole. Bradley takes a high view of truth thus avoiding the charge that truth can be found in any set of beliefs by arguing that they must correspond to the reality of the basics of a common reality. The system is most likely to fail when too many conjunctives are added to the set, as if a shopping list was being prepared, which makes the probability of inconsistency with any central belief more likely. There is a fundamental objection to coherence theory in that it may lead to Pluralism which Bradley counters by arguing that only systems which relate to universals can actually be entertained. Such a charge is only a concern here insofar as this thesis is seeking to justify certain kinds of pluralism and will turn to more pragmatic theorists to advance the argument. It will also become obvious that Bradley expounded a theory which is a useful analytical tool even today.

It is important in this context to consider the difference between coherent beliefs and coherent propositions about the nature of reality. There are different types of systems of thought which can be distinguished: first there is thought based upon ontic belief which clearly identifies objects on which truth may be built. Such systems look for objective truth and tend towards the dualism which characterises much philosophy based upon the Cartesian separation of mind and matter. They have been attacked by so many previously mentioned authors in this thesis. The other form of system is epistemological and admits the possibility of beliefs as constituting satisfactory systems of truth. In fact, what Bradley sought was internal consistency and examples of all-inclusive knowledge<sup>6</sup>. The two are inter-connected but their difference lies in a debate about realism and idealism, ontological thought and epistemological thought.

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<sup>5</sup> Bradley, F. H., *Essays on Truth and Reality*, OUP, Oxford, 1914.

<sup>6</sup> *ibid.*

Bradley is concerned with describing statements that reflect Reality as a given. He had stated such a view in an earlier publication but his reiteration reads thus:-

Everything which appears must need be predicated of Reality, but it must not be predicated in such a way as to make Reality contradict itself<sup>7</sup>.

Subsequent coherence theorists recognised the essential idealism within the theory and applied it more to beliefs. Walker argues that the debate is polarised into those who are or are not idealists, and of the former he writes:-

... the coherence theory holds that truth consists in a relationship of coherence amongst beliefs, and not in correspondence with a reality independent of beliefs, it is not surprising that many coherence theorists have held that reality is ideal, in the sense that it is our minds' creation<sup>8</sup>.

Joachim arguing in 1906, introduced the concept of "significant whole" to signify the totality into which all "constituent elements" might fit. These elements had to cohere within the control of the whole into which any concept which could be conceived could enter provided it did not violate the coherence of the whole<sup>9</sup>. In terms of justification, each judgement or presumption had to fit the criteria of control within the whole and could be rejected if the statement could not have any grounding in reality. This analysis of the "significant whole" led to an understanding of the coherence of knowledge and thus introduced the possibility of extending this idea to social issues and theology. Bradley suggested that coherence theories could exhibit a pure or impure logic which is developed by Quine who explained this distinction in several essays. This means that more modern theories can be introduced, given that both Bradley and Joachim recognised that there is a distinction between philosophical truth and epistemological belief. Walker draws this distinction more boldly in a chapter on coherence and knowledge, but suggests that Quine was prepared to be more pragmatic in his approach. Therefore two factors will be looked at in a more modern way, that of system and a broader explanation of a pragmatic approach to a significant whole. The significance of both lie in their implications for the authority

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<sup>7</sup> *ibid*, p224.

<sup>8</sup> Walker, R. C. S., Coherence Theory of Truth - Realism, anti-realism, idealism, Routledge, London, 1989, p19.

<sup>9</sup> Joachim, H. H., The Nature of Truth, OUP, Oxford, 1906, p66f.

of theology in a post-modern society. This implication will be considered as part of the theological conclusion in the next chapter (see pages 271ff).

Bertalanffy's *General Systems Theory* is used mainly in psychology, but was also important in the Sixties because it added to the general understanding of interconnectedness, which became increasingly common in 'New Age' thought as exemplified by MacManaway, Burton and Sir George Trevelyan<sup>10</sup>. It also lays down some parameters for understanding what is a pure system and what is impure. Bertalanffy writes of 'closed' and 'open' systems. A 'closed' system contains some element which is intrinsic to itself, i.e., faith, pure mathematics or physics; whilst an 'open' system involves organisms whose evolution is dependant on vicarious factors in its environment<sup>11</sup>. In reality there are very few 'closed' systems and his theories became more fashionable in epistemological studies, which were not dealing with ontological issues. For instance, systems theory can be applied to psychiatry where the client is being holistically assessed according to his or her own system of thought<sup>12</sup>.

On a pragmatic level, Quine (who was quoted in Quinton) argues that in a stricter theory of coherence, any statement would not only have to cohere with the theory's internal logic but also be justified by independent rules outwith the theory<sup>13</sup>. Such an assertion makes many positions seem untenable, including perhaps theology. It is unreasonable to take the stricter position but by considering the first position it becomes possible to delineate epistemological routes to wholeness and to identify differing internal rules. Quinton argues that in a simple theory of coherence statements must have their own internal logic in order to meet the criteria of coherence but may not have to be empirically verifiable or justified<sup>14</sup> (see page 62).

<sup>10</sup> Bertalanffy, L. von, *General System Theory*, Allen Lane, London, 1971.

<sup>11</sup> *ibid.*, p31.

<sup>12</sup> Masserman, J. H., *Systems theory and holism in social psychiatry, a philosophic-integrative commentary. Honorary Presidential Address of the American Association for Social Psychiatry (1985, Boston, Massachusetts)*, *Psychiatric-Journal-of-the-University-of-Ottawa*; Sep, 1986, Vol 11, No. 3, pp127-131.

<sup>13</sup> *ibid.* p.216.

<sup>14</sup> Quinton A., *The Nature of Things* Routledge/Kegan Paul, London, 1973, p.217.

Epistemological rules at this level of philosophy do not in themselves advance the argument, rather they lead up a cul-de-sac which could well result in the dismissal of all epistemologies of wholeness and healing and therefore a second element has to be built into the use which is made of Quine and Quinton

There are two steps which still remain to be taken. The first is to convert from philosophy to social science and the second from abstractions to social reality. The debate about holism has developed in the past decade in two interesting directions. The large volume of writing relates to language and also expands the rules of coherence as it has been outlined by LePore and Fodor<sup>15</sup>. Much of the concerns in linguistics philosophy deals with coherence in translation etc. However the main concern is with writers such as Kincaid, who has produced voluminous papers on the philosophy of science. One, in particular, deals with social science. He questions whether it is justified to always regard society holistically, whilst the individual is not so treated<sup>16</sup>. This paper highlights the conflict between a holistic theory and its pragmatic applications by the individual, whose behaviour may in fact contradict the sociological theory which could be regarded as a predicator of their behaviour. Kincaid's suggestions can be applied to the field of complementary medicine and to the relationship between biomedicine and Divine Healing as it has been understood by the Iona Community and by many other healers within the churches. What will be argued is that individuals or organised groups adopt postures about holism which are not logical but are coherent in their understanding of their purpose. In other words people express their beliefs about healing in ways which may have a coherent structure which does not adequately accommodate holism.

First, it is questionable whether people use so-called holistic therapies in such a way that their use is consistent with a belief in holism. In the West, Shiatsu is regarded as holistic whilst in Japan it is being integrated with Western medicine and is no longer regarded as holistic as most recipients in the West would expect. In Japan, there has

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<sup>15</sup> LePore & Fodor, E. & J., *A Shopper's Guide to Holism*, Blackwell, Oxford, 1992.

<sup>16</sup> Kincaid, H., *Empirical Nature of the Individualism - Holism Dispute*, *Synthese* Vol 97, No 2, 1993.

been a great rise in kampō, or East Asian medicine which includes several kinds of massage, acupuncture and moxibustion, which Westerners might regard as holistic compared to cosmopolitan, or Western medicine. We would consider Shiatsu to be holistic with an all-inclusive view of the cosmos etc., yet the individual Japanese patient may only visit a kampō clinic to have a frozen shoulder treated<sup>17</sup>. Because there is a cultural will within Japanese medicine to retain the traditional ways side by side with Western imports, the whole person is treated using both methods. It can furthermore be contended that the Shiatsu which is practised is limited to specific ailments which may be not subject to the cosmological theory which would prevail in a Western practitioner's repertoire of holistic jargon.

Second, the BMA, quoting a variety of surveys, appears to accept estimates that in the UK 2.5% of population may have consulted alternative therapists and that there were twelve practitioners per 100,000 of population and that these figures are growing. The survey quoted was published in 1985<sup>18</sup>. Its review also shows that most patients do not see alternative medicine as an either/or. Surveys quoted in the same source suggest that patients are often consulting their NHS General Practitioner whilst attending an alternative therapist. The relationship between alternative, or complementary medicine and the BMA is theoretically interesting but the relationship remains an uneasy one as has been so often exemplified by George MacLeod, and also the churches' attitude towards the BMA.

The aim of the rest of this section is to illustrate how the Iona Community has developed a coherent system of healing which has always been in partnership with the medical profession. The Community has increasingly had doctors as members, and there has never been a time when those who have written about healing have dismissed the God-given role of the medical profession. This has often been backed by the writings of the BMA. In 1947 for instance, the BMA published a joint statement with the Churches entitled *Medicine and the Church* which recognised the

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<sup>17</sup> Lock, M. M., East Asian Medicine in Urban Japan, University of California Press, Berkeley, 1980, p253ff.

<sup>18</sup> BMA Board of Science and Education, Complementary Medicine, OUP, Oxford, 1993, p30ff.

significant value of spiritual guidance which visiting clergy could offer to those who are ill at home or in hospital<sup>19</sup>. George MacLeod collected this amongst his papers on healing and never failed to remember the medical profession in prayers for healing. It is here contended that this partnership was a 'significant whole' and further illustrations must now be offered.

An argument will be developed that George MacLeod and Ian Reid based their understanding of the relationship between the church and the medical profession upon an interpretation of Pauline theology which is both coherent and holistic. An example will be taken from MacLeod's 1948 paper on Divine Healing and from Reid's pamphlet. In this way we hope to show that their theologies are governed by a coherent logic which stands the test of Quinton's 'less strict' system. The relevant passage from MacLeod reads as follows:-

(11.) the command to preach the Gospel and to heal the sick, with the problems of power to carry out the double [task?]. Mission, was given to the whole Church, including the laity, and not confined to ministers of religion.

(12.) Hence the whole Church, and, in any given place, the whole congregation, bears this responsibility. Within this congregation there will be specialists, e.g. parsons and doctors, who can and should contribute their special gifts and training to this work.

The logic of these two theses must lie in the doctrine of the Body of Christ which is found in 1st Corinthians, chapter 12. The question is whether such a foundation gives coherence to MacLeod's theory? It is possible to find a system in Paul's theology by considering Robinson's description of the Body of Christ. Paul uses words like 'unity', 'whole' and implies by 'reconciliation' the idea that we all acquire a new, 'rightwised' state with God. We in some way become whole persons so that, as with the OT and the Gospels, it is possible to argue that the new man in Christ is also a unitary whole in faith, hence the idea of the Church as the Body of Christ. J. A. T. Robinson comes close to a holistic theory of the Church when he states, whilst commenting on 1 Cor. 12: 12, that "The unity of Christ, as of the human body, is his [Paul's] starting point. He then proceeds to show that the body cannot in fact consist only of 'one member', but must be 'many'... The point of the verses that follow... is

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<sup>19</sup> Editorial BMJ, 8/11/47, vol.ii, p.112.

*not* that the different members must be united among themselves... but precisely that there must be more than one member if there is to be a body at all.<sup>20</sup> We are not members of the Church, as we might be of a trade union; but are members in the unity of the Body of Christ which is the Church.

The conception of the unity of all gifts within the Church provides a coherent structure which holds together the doctrine of Divine Healing which MacLeod never intended to conflict with the medical profession. It also makes it clear that the openness which characterised his theology allowed the recognition of many different types of gifts which would fit into the overall Pauline pattern of the Church. In the case of Ian Reid and Allan Gordon, there was an open co-operation between a minister and a doctor which betrayed Gordon's faith in the power of prayer.

By revisiting Ian Reid's pamphlet (see page 185) we can illustrate the sharing of gifts from the following quotation:-

As Christians we believe that all healing is from God. This is just as true whether the sick person recovers spontaneously, receives treatment from a doctor or is brought before God in prayer. If the person has appendicitis the healing is through the surgeon's blade; if he has pneumonia healing is through the antibiotics prescribed; and this healing can be reinforced through prayer.<sup>21</sup>

This passage mentions three possible healing processes which recognise the gifts of a surgeon, a pharmacist and a congregation through prayer. The latter is common to both and yet again fits into a Pauline ecclesiology. Both MacLeod and Reid recognise that most people who request prayers on Iona are in fact recipients of orthodox medicine and they work this into their writings. Reid, for instance, writes:-

We have heard of one man who was given a month to live by doctors when they diagnosed stomach cancer at an operation. He required large doses of morphine to relieve his pain. Prayer was made at his bedside by others (including the doctor in this case). That man left hospital weeks later, never needed another injection for pain, and lived eighteen months of useful, satisfying life before dying peacefully.<sup>22</sup>

It has always been common in the healing service to pray for people undergoing medical treatment and psychological stress and the healing service is seen as running

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<sup>20</sup> Robinson, J. A. T., *The Body*, SCM, London, 1951, p59.

<sup>21</sup> Reid & Gordon, *op cit*, 'Healing Today'.

<sup>22</sup> *ibid*.

in parallel to the treatment they are receiving. To such recipients of prayer, it is not a question of either/or, but prayer is an integral backup to the whole trauma of illness. The significant whole lies in the support of the church, and in this case of the Iona Community and the Healing Circle which has been established. Hufford describes the reality of most peoples' choices by offering an analysis of their behaviour in relation to illness which usually results in a rationalisation, which we might contend is a "significant whole" (see page 35). He suggests that with certain exceptions, such as Christian Scientists, few individuals depend entirely upon Spiritual Healing, we may also cite the evidence of one of the respondents: Jan Smith, quoted in Chapter VI, page 202. She evinces considerable distress about the number of patients she has known who have failed to accept medical treatment and relied solely on prayer. The Iona Community has never encouraged such a position and the openness of their approach is perhaps responsible for the influence they have had on the wider established Church of Scotland. What is being offered to people seeking healing on Iona is a belief system which can be held together as a whole in the larger context of the Church. Healing is not part of a closed system which is confined only to a sect such as that promoted by Wimber and described by Percy (see page 49).

The question was posed as to whether differing groups can reconcile and recognise divergent viewpoints as having validity if they could only accept the internal logic and coherence of each other's position. The real test of this lies in the claim of certain 'New Age' groups to represent a valid constellation of opinions. The test of coherence could now be applied to the groups discussed in Chapter V. In particular, do the religious claims of such groups cohere in any meaningful way? Do they dovetail into the conclusions which are reached? This will be difficult because there is little evidence that religious statements cohere with these groups' attitudes to wholeness and healing.

Each therapy has its own coherence, some may be built on one inventor's theory or experience such as reflexology or Iridology which depend upon one named author as,

indeed, does homeopathy<sup>23</sup>. Others depend upon systems, mainly cosmological, which have been developed over centuries and cohere by the cultural dictates of the country of origin. These have already been dealt with on page 52 of the Introduction to coherence theory. The point to be addressed here is whether there is any coherence in the religious statements of MacManaway and others? Throughout the history of alternatives to established religion there have been attempts to promote syncretistic systems of beliefs. These have often lacked coherent links with other discourses which affect healing and wholeness. The difficulty in discussing such statements is in ensuring that any objection to their lack of coherence with other parts of the discourse does not contradict the general tenor of the thesis. In this instance we are not concerned with the inter-play of discourses but with the coherence of that inter-play.

Olsen has written a paper on coherence and the 'New Age' movement which illustrates the usefulness of the concept in analysis. It is not however without pitfalls. Olsen basically argues that a 'New Age' world-view is seldom verifiable and is seldom complete. He writes more about verification than coherence in this part of the paper and complicates it further by suggesting that the verification must be seen in the light of Christian doctrine. He then discusses three areas which he contends are not sustainable in 'New Age' thought. First he writes of "inconsistent relativism", which points up the flaw that 'New Age' thought often depends upon the relativism of ideas in the formation of their own, yet then denies rights to those who do not share them. Second is "inconsistent monism". Generally the 'New Age' movement accepts the slogan "All is One" and offers very compelling arguments about good which do not consider evil at all. Is evil part of the "All"? This is a point with which I have considerable sympathy, as when it comes to healing 'New Age' therapies have little to

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<sup>23</sup> Homeopathy still refers back to Dr. Samuel Hahnemann, who published in 1810: The Organon of Healing Art, followed by Pure Materia Medica and Chronic Disease, which are considered to be more important.

Iridology owes its modern development to Dr. Ignatiz von Peckzely, who published in 1881: Discoveries in the Field of Natural Science: Instruction in the Study of Diagnosis from the Eye.

Reiki owes its development to Dr. Mikao Usui, who worked in the mid-1800's in Kyoto, Japan.

All quoted in: Olsen, K., The Encyclopaedia of Alternative Health Care, Piatkus, London, 1992.

offer incurable conditions in which 'harmony' may not be restored, i.e. cerebral palsy, multiple sclerosis, and any other motor neurone disease. Third, Olsen points to "inconsistent humanitarianism" which follows on from the previous<sup>24</sup>. Quite simply there is not an ethic which is applicable to the whole of humanity. Whilst this paper is important, it really makes no reference to coherence theory and appears to substitute consistency for coherence, and 'verifies' everything with reference to Christianity.

'New Age' statements about religion tend to lack any corporate sense of belonging but rather indulge the individual's personal insight which often appeared in the form of revelations (cf. Eileen Caddy on page 144). Sir George Trevelyan believed fervently in angels and in the tradition of theosophy developed a theory of the seasons of different angels<sup>25</sup>. MacManaway asserts that healing has for too long been controlled by the church and by the medical establishment, and he not only attempts to prove his ecclesiastical credentials but also takes part in all the conferences organised about the Cosmic Christ and other titles listed on page 153. Just as the Iona Community prepared to entertain other forms of healing, so was Bruce MacManaway and others in the Columba Hotel prepared to entertain Christianity. Unlike George MacLeod there is not the panoply of ecclesiology to fall back on as a source of coherence. Their coherence came rather from the concept of energy or psi ( $\Psi$ ). Both Burton and MacManaway believe in the omnipresence of energies both within the cosmos and channelled throughout the bodies of humans and animals alike. Benor expresses the universally strong belief in psi energies amongst most healers thus:-

Healing has many names, reflecting the "blind man and the elephant" phenomenon of multiple observers' reports from varied perspectives. My preference in scientific discussions is the term psi healing, where the Greek letter  $\Psi$  is used in parapsychology to denote the range of phenomena ...<sup>26</sup>.

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<sup>24</sup> Olson, R. E., *Christianity, Coherence and the New Age Movement*, Christian Scholar's Review, No. 4, Vol. 20, 1991.

<sup>25</sup> MacCarthy, F., *Craftsman at work on the New Age*, The Guardian, 16 February 1996, p19.

<sup>26</sup> Benor, D. J., *Further Comments of "Loading" and "Telesomatic Reactions"*, Advances, Vol. 12, No. 2, p72, 1996. The quote comes from a more general discussion than is indicated in the title, which is a response to a previous article.

The concept of psi ( $\Psi$ ) has not been introduced as a concept before and therefore needs some justification. Psi is a chosen abbreviation for parapsychological<sup>27</sup>. Benor does admit that there is a controversy about whether all healing is psi healing and suggests that homeopaths, some chiropractors, herbalists and acupuncturists might dispute that  $\Psi$  energy is in fact involved in their work<sup>28</sup>. Benor, for his part, argues that  $\Psi$  energies are always present. He includes amongst his colleagues and contacts Bruce MacManaway<sup>29</sup>, which suggests that it is possible to use  $\Psi$  to delineate the diagram below in reference to the group active on Iona, who were discussed Chapter V.

The figure below attempts to illustrate the overlap between the discourses of the Iona Community and the conferences held in the Columba Hotel. The shaded area represents the small amount of coherence which the two groups share. The Iona Community has members who have referred to energies in talks or in prayers, some have even consulted the MacManaway brothers on Iona. As was shown in the last chapter, the conferences under the Wrekin Trust always paid notice to what was going on in the Abbey. The reason why neither group shows coherence in this overlap is because they both pick and choose from each other's concepts within differing discourses. The Iona Community has often sought to incorporate certain 'New Age' ideas into their thinking, particularly in the case of Ian Cowie, whilst the other groups on Iona have never produced coherence in their discussions of the Christian religion and dogma. Yet the dependence on more individualistic interpretations of Christianity have always appealed to the 'New Age' and theologians such as Matthew Fox who understands the impatience of some 'New Age' proponents to further the search for new expressions of spirituality.

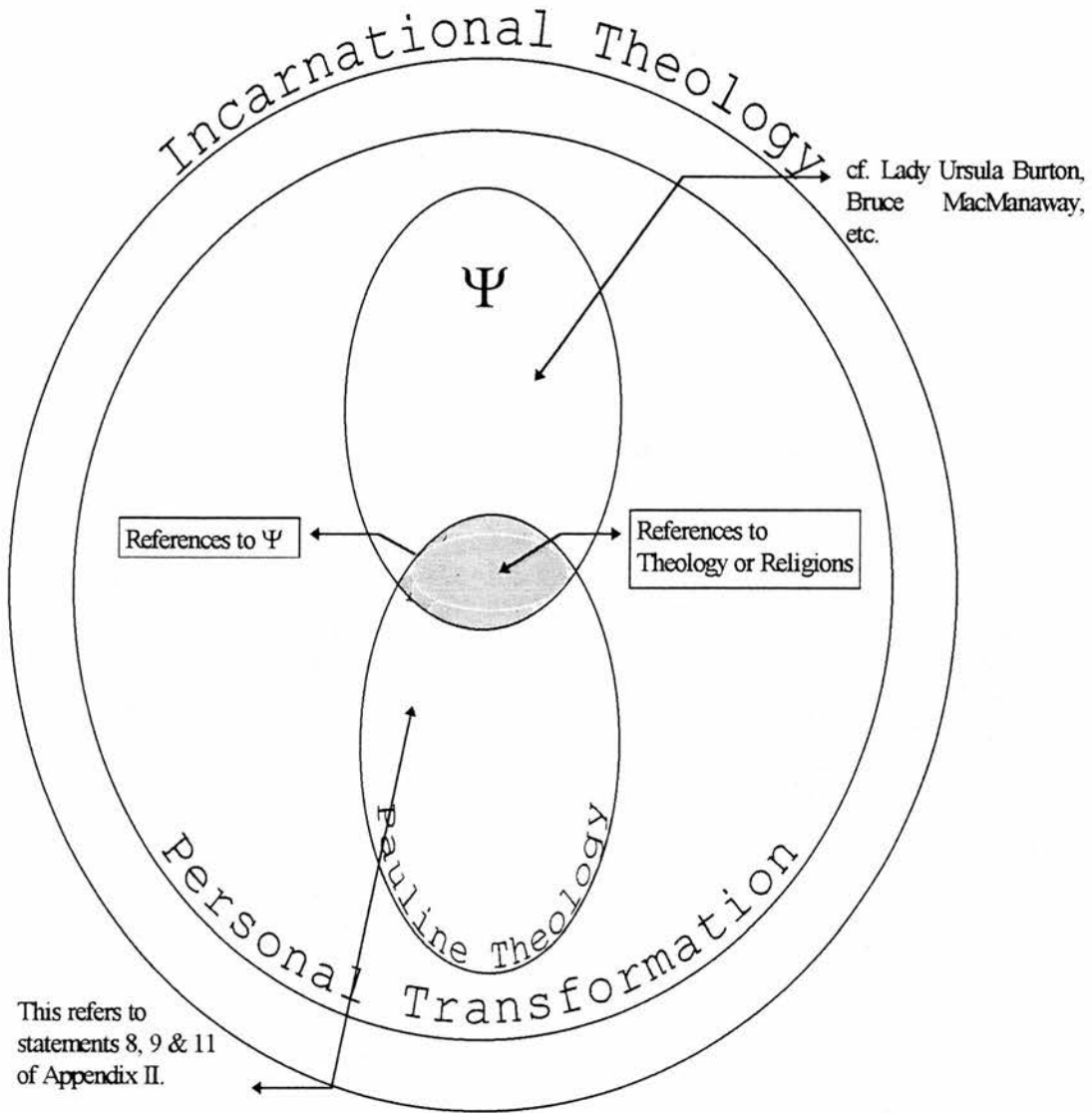
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<sup>27</sup> Benor, D. J., Healing Research - Holistic Energy Medicine and Spirituality Volume 2, Helix, München, 1994, p211. Originally Published as The Psi of Relief, 1987.

<sup>28</sup> *ibid*, p104.

<sup>29</sup> *ibid*, p243.

.Figure 16 - Circles of Coherence



The outer circles represent the two meta-narratives relating to healing on Iona<sup>30</sup>

The figure illustrates two distinct discourses which almost collide when placed together in the context of the closeness of the Iona environment. Like all grey areas, the grey intersection in the centre of the diagram poses the most difficult problem. Neither the references to psi energies by the Iona Community or the religious references by the type of 'New Age' thinking of the group associated with the Wrekin Trust and the Columba Hotel are in themselves coherent except in a wider context which accounts for the other two circles. These references tend to be random in their

<sup>30</sup> see Chapter I, p6.

use yet integral to their respective discourses. It has been shown how George MacLeod used random accounts of psi energies in talks and lectures, and also how members have referred to Odic forces in prayers without much knowledge of their meaning. Likewise, the other group do not understand traditional and coherent theology but rather depend on disparate insights into religious inspirations. To find coherence it is necessary to look to the two outer circles which tie the discourses of  $\Psi$  and of Pauline Theology together. These circles are Incarnational Theology and Personal Transformation respectively. The former is central to the thrust of this thesis whilst the latter has to be taken from other authors.

Both outer circles require further elaboration in order to distinguish them from the discourse of the inner circles. They are the meta-narratives, i.e. they are not essentially about healing, but the healing discourse is dependant upon their underlying assumptions. In the case of *Personal Transformation*, McGuire has developed the thesis that individuals who are involved in healing groups in America are basically trying to transform the current understanding of self as it is understood by societal conventions and biomedicine. She rejects the older theses that such group affiliations are mainly a statement of identity<sup>31</sup>.

Chapter II contended that Incarnational Theology was the driving force behind the early work of the Community and that the leaders asserted that everything was subject to the sovereignty of God. Such is the importance of the latter characteristic of Incarnational Theology that we can again use the label of *meta-narrative*. Divine Healing was not an 'optional extra' but was as much part of the mission of the Church and her congregation's obligation. It also meant that every activity of mankind was subject to prophecy and ministry. The Body of Christ was the setting in which all these activities would not only fit but be conducted. Yet, as knowledge of alternative healing methods became an issue, so the overlap in discourses developed. Looking now at the inner circle, personal transformation, another picture emerges where religious discourse becomes not the governing feature of coherence, albeit important, but the search for self dominates. Drane identifies personal transformation as a chief

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<sup>31</sup> McGuire, M. B., Ritual Healing in Suburban America, Rutgers UP, New Brunswick, 1988, ch. 10.

goal of the New Age Movement<sup>32</sup>, and Trevelyan offered this as the central theme in his two main books<sup>33</sup>. Burton argues in similar vein. The hope is expressed that men and women are journeying towards a higher spiritual existence and capability and therefore a greater harmony with both nature and its primal forces. Jesus is one religious leader of many who have progressed this journey and offered religious insights which can be placed alongside those of the Bhudda and Indian gurus. The Findhorn Foundation also talks in terms of personal transformation when it encourages pilgrims to undertake a “dance” of discovery<sup>34</sup>.

Within these circles both the Iona Community and the other healers on Iona conduct their respective highlighted discursive activities of building the Body of Christ or developing awareness of  $\Psi$ . The problem with the area of intersection between the two discourses is that whilst the interjections between the two may be loosely coherent within the larger framework, it cannot be so claimed within the small grey area. It is in the context of this area that participants at the conferences within the Hotel attended the Abbey and John Harvey organised the joint conference with Peter Caddy where Harvey disagreed so much with Caddy's assertions of agreement with orthodox Christianity (see page 143). The Iona Community always feels uneasy about their relationships with such groups and can be quite defensive. This would seem to be perfectly justified and returns to an earlier part of the discussion. It was suggested that what was sought was some understanding of differing positions within a pluralist society of beliefs. Rorty argues that philosophy which depends upon epistemological analysis misses the point of the truth of ontology which combats relativism and makes for a more consistent philosophy<sup>35</sup>. He seeks to find truth in the spaces of inter-subjectivity which exist between different contenders of the truth.

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<sup>32</sup> Drane, J., What is the New Age saying to the Church?, Marshall Pickering, London, 1991. For a more explicit explanation of personal transformation see:-

Church of Scotland, Board of Social Responsibility, Reports to the General Assembly, Edinburgh, 1993, p490ff.

<sup>33</sup> Trevelyan, G., A Vision of the Aquarian Age, Coventure, London, 1977.

Trevelyan, G., Operation Redemption - a Vision of Hope in an Age of Turmoil, Turnstone, Wellingborough, 1981.

<sup>34</sup> Riddell, C., The Findhorn Foundation, Findhorn Community, Forres, 1990.

<sup>35</sup> Rorty, R., Philosophy and the Mirror of Nature, Blackwell, Oxford, 1980, ch. 4.

It is possible to build a “significant whole” which is coherent to the person or persons manipulating the extent of their experience and knowledge. As with the Iona Community there has been a steady growth in healing activities since its inception and many have found great comfort and solace in the services and atmosphere of the Abbey. The importance of this atmosphere has lain in the openness which has allowed people to retain their beliefs in orthodox medicine or to develop an interest in complementary therapies or to give spiritual expression to their deepest political hurts in a service which heals at the level which people feel comfortable. This is for each one to find for themselves that their brokenness may be healed.

### **A Grammar of Motives**

Kenneth Burke wrote a series of books on rhetoric which are not of interest in this context but the introduction to *A Grammar of Motives* sets forth a theory of drama, mainly tragedy, which was then used as a framework for the analysis of philosophy and of constitutional debate. The introduction serves as a more general theoretical basis for discourse analysis. It suggests that motives may be analysed in dramatic terms by setting out the five components of a dramatic plot. Plays are punctuated by Acts which allow a character to be developed and integrated into the larger dimensions of the work. Each episode demands five features as laid out below and covers most actions which might take place on stage. For instance, a murder requires a space in the play for it to be carried out (Act), a setting for it (Scene), a perpetrator (what kind of person is s/he or what qualities of mind might s/he have?); (Agent), a weapon (Agency) and, say, a revenge (Purpose)<sup>36</sup>. This dramatism is very simple but has a more complicated aim which is to show where authors decide to place the emphasis of their theory. Any drama has a point which is more important than the others when it comes to accounting for the dynamics of the actors as seen by the audience.

Burke analysing constitutional law in light of the above pentad draws conclusions about the nature of constitutions, in particular the Constitution of the United States of

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<sup>36</sup> Dr Steve Tilley of the Department of Nursing Studies in Edinburgh University originally suggested Burke as a tool of analysis.

America of 1789. The Constitution was an enactment by the Founding Fathers whose mind-set was represented both by the scene in which it was framed and the agents who drafted it. Thus one may talk of the Jeffersonian influence or the Hamiltonian emphasis. The former stressed the federal nature of the new country; whilst Hamilton stressed the plurality of the states within the federated nation.<sup>37</sup> His work extended to theology and it seems natural to apply his schemes to our respondents or their papers.

The emphasis must fall on at least one of these five. For example, Hamlet emphasises the poison which Claudius poured into his father's ear, for the plot which he devises with the players for a play to entrap his step-father. The poison was the agency and was highlighted by Hamlet's speech as the feature most likely to move Claudius to a state of guilt. Burke insists that motives may be analysed at the point of most emphasis. Speech is intentional and can signify the motive contained within the writing or utterance. Drama depends upon the character's articulation of a purpose in the action which is depicted and indicates the implications for any structured situation.

It is now proposed to consider some of the issues surrounding discourse within the Iona Community as it is related to wholeness and healing. As a preliminary guide the following scenario is repeated from Chapter II:-

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<sup>37</sup> Burke, K., The Grammar of Motives, *op cit.*, p374ff.

<u>Act</u>	<u>Scene</u>	<u>Agent</u>	<u>Agency</u>	<u>Purpose</u>
Healing	Healing Service	Member	Iona Community (Iona)	Healing in a certain narrative

In the above example healing is a desired aim of the Iona Community that is facilitated by the weekly service which is conducted by a member on behalf of the Community who publish and offer talks on the nature of wholeness and healing for the individual and the world. However, on different occasions and in different historical periods, the emphasis of the chosen language may have encouraged entry at any one of the five elements of the drama.

The above scenario presents an ideal situation which is almost self-explanatory. The element that requires most explanation is the Purpose which is defined in rather truncated short-hand. The narratives of healing and of wholeness have been amplified throughout the previous chapters, and therefore must imply all that has been written by members over the years and must take account of changing theories and emphases. A dramatic statement may arise out of a narrative but need not refer to it nor be consciously aware of it, but must reflect the Purpose behind the action which is being taken or the feelings which are evoked by the situation. The method demands that the greatest point of emphasis indicates the relative value of any component. For instance, a person may feel especially grateful to a specific member and emphasise his or her role thus attempting to make the drama dependent on the Agent. Of course, this has not happened to any great degree, but when Margaret Wright retired, the type of affection and love that was shown to her was testimony to her reputation. With the advent of prayer secretaries, reputations have inevitably grown.

Chapter V suggested that Iona has always been seen as a place of pilgrimage and that various groups have exploited this to their own ends. It is to be hoped that Burke may offer a tool to examine the claim in terms of discourse. It will then be shown how those seeking healing may enter from a different position and may in fact present a different ordering of the five components. It has not been possible to access the weekly prayer-lists but a few examples do exist in published form and are amenable to analysis. The purpose in both instances will be to prove that certain motives do prevail within the minds of the subjects of this thesis.

First, the indications that Iona was regarded as a place of pilgrimage will be considered from the utterances of certain people who have been already quoted in other parts of the thesis. Pilgrimage suggests a special place and does not necessarily imply the voluntary movement of people to that place although this does occur. The motives are too numerous to analyse (see Chapter V). The stress placed on Iona can be found in the thinking of Kathy Galloway. It has already been noted that she and Ruth Burgess intend to publish a book aimed at facilitating a healing service on the mainland, implying that they presently feel that Iona is the only place where a service of this particular type can take place. In the extract from *Transfigured by Ceremony* which was quoted on page 117, the first sentence gives a certain importance to Iona:-

We have a service every Tuesday night in the Abbey on Iona, in which we pray by name for people who are sick, and lay hands on any who wish to receive this ministry.

Her entire exposition is based on this foundation and although the other elements of the pentad are present she chooses to put this one, the Agency, to the fore and the Scene is made specific to the Abbey. Another example can be taken from the Reports to the General Assembly which are specifically pleading the case of the Iona Community and of the activities on the island. On page 12 above, the following phrase sets the Scene for the motivation to extend a healing ministry to the mainland: "So great has been the demand upon the resources of the Abbey for this ministry...". This, written in 1980, again stresses the Agency by implication. Another report, in 1984 (see page 66), highlights the perceived cosmopolitan nature of Iona and goes on to tell the very human story of how one recipient of healing returns to the island to give thanks, repeating a pilgrimage previously made to the Community which became the Agency of his healing. It will be recalled that Burke wrote another book on supernatural language which suggested that it was difficult to accept such language in the normal context of discourse which he contends has three elements<sup>38</sup>. God should properly be thought of as the Agent:-

Iona continues to attract a wide range of people from different parts of the world...

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<sup>38</sup> Burke, K., *The Rhetoric of Religion*, *op cit*.

It was particularly satisfying to have a "thank you" recital given by Jurgen Hess, the internationally known violinist.

Ron Ferguson does not mention the role of the Community as such, but in his description of liturgy, on page 111 in chapter II, he made it very clear that the broader principles of community, or the full involvement of the whole congregation in the Healing Service have been drawn from the formation of the Iona Community.

George MacLeod was always excited by numbers in connection with healing, quotations from material he had read were quoted. From page 86 it is possible to cite how he frames the impact of Godfrey Mowatt in 1947 in the same way thereby suggesting that the pilgrimage atmosphere of Iona might have been important:-

On the last evening over 70 people came to an hour of private meditation prior to the service itself and considerably over 200 - more than half the total population of the island came to the Act of the Laying on of Hands<sup>39</sup>.

Is it possible to redraw Burke's scheme to show the type of drama which might be played by someone going forward for the laying on of hands during their stay on Iona? Given the number of theories which suggest reasons for people's quest for healing and wholeness, this must be a possibility which will not detract from the individual's sincerity of motive or belief. Basically it will be assumed that the Act is the laying on of hands in its entirety; the Scene represents the individual's motivation to participate; whilst the Agent is the perceived need felt by the individual. The final two elements in the pentad depend upon the actions which take place during the service. The Agency is touch and the Purpose is that of the aspirations of the recipient. The scheme now looks like this:-

<u>Act</u>	<u>Scene</u>	<u>Agent</u>	<u>Agency</u>	<u>Purpose</u>
Laying on of Hands	Personal Choice or Decision	Ailment, Guilt or Social Concern	Touch	Healing, Blessing or Cure

In the absence of new testimony, it will again be necessary to choose passages which have already been quoted and used in another context. There are two types of passages which might be considered which would illustrate the above model. First, there are interpretations which members have written, and second, there are personal

<sup>39</sup> MacLeod, G. F., *Annual Report, circa, 1947, op cit.*

accounts of the healing experience. There are more of the former available. Again, Kathy Galloway's passage is enlightening in that two sentences contain the kernel of an analysis (see page 117). The elements of Burke's scheme will be inserted into her text by posing questions in italics.

"People go forward to receive the laying on of hands (*Act = what is happening?*) to be healed (*Scene = why?*) of anger, of greed, of fear, of selfishness and of all the other things that make us all broken people. (*Agent = what kind of people?*) ..... receive the laying on of hands (*Agency = what do they effectively receive?*) because they are seeking absolution" (*Purpose = what do they want?*).

This simplistic illustration does show the flow of motivation as understood by Galloway and highlights the word "absolution" which is the key which she considers to be the essence of their motivation. Burke is very aware that drama involves more than one actor and thinks in terms of co-agents and even counter-agents who may perform different roles and operate by different agencies. However, in the case cited above all the actors are alleged to be motivated in the same manner. Is it now possible to select a passage which contains a negative resolution of the actor's motive? Tom Gordon may provide an example. Dramatically, he represents an anti-hero in this example which was alluded to on page 205 when he had many negative feelings towards the laying on of hands and all that the healing service contained and implied.

"[I] walked out of the second part - the laying on of hands. (*Act = what happened?*) I could cope with the prayers for others - even by name, (*Scene = what happened?*) which was a strange experience for a douse presbyterian - but the other part was foreign to me. (*Agent = what kind of person?*) I didn't understand it. (*Agency = what did he effectively have?*) I was angry, confused, upset..... So I did what we

are all inclined to do when we feel like that - I took myself out of the situation, I ran away!" (*Purpose = what went wrong?*)<sup>40</sup>

This is a difficult but interesting example, because the emphasis throughout is on what might have happened and the motive for relating the story depends upon the act and the denouement and the end of the sequence, when the purpose has not been fulfilled, save that it is probably a logical conclusion. This can be stated in theological terms, indeed Ian Cowie has done so in his story of his first experience of the laying on of hands. It will be recalled that Ian Cowie described his first experience of the laying on of hands with Godfrey Mowatt on page 114 and recounted his experience had been entirely negative. He explained the reason for this in the fact that he went forward with the emphasis on the act, convinced that healing would naturally follow. He described the negativity as "cheap grace". Theologically this reminds us of the distinction between faith and works, and the danger in being motivated by an action rather than the purpose or frame of mind (Scene) which inspires the Act. The doctrine of faith was much to the fore in the period when George MacLeod was at the peak of his evangelism and still had the Moderatorship of the General Assembly of the Church of Scotland and work with Church Extension building new parishes throughout deprived areas of the nation ahead of him. Faith mission was central to campaigns like the *Tell Scotland Movement* and to the experiments in industrial chaplaincy. The idea that works could achieve renewal without faith was an alien concept. If this is a fair reading of Ian Cowie's remarks, it can be argued that exactly the same applies to the account given by Tom Gordon. The difference with his account is that the whole drama falls to pieces when he states that he "ran away".

Let us take one last example from George MacLeod's *Notes on Divine Healing* (see Appendix II) from 1948. The thesis which has been chosen deals with faith which of course is one of the genres of writing outlined in **Figure 3** on page 55. In this particular sentence MacLeod so stresses faith that the most important feature of

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<sup>40</sup> This passage is a continuation of Tom Gordon's response to my letter seeking empirical information.

motivation lies in the Agent. It can be shown that the central emphasis lies in the frame of mind of the person seeking Divine Healing.

“Faith is a necessary condition of spiritual healing. (*Act = what is required?*) The hall-mark of such faith is not a conviction of physical cure but the conquest of fear, (*Scene = what happened?*) a surrender to God and a complete confidence in the reality of His love (*Agency = what did the person require to do?*) and the fulfilment of His purposes.” (*Purpose = what was the theological aim?*)

George MacLeod indicates that faith is the most important factor in both understanding and motivating healing on which he gradually concentrates more and more in the final five theses of his notes on Divine Healing in 1948. The central question to be asked is what is the dramatic impact of faith. There must be little doubt that in his opinion the Act depends upon faith but it is not the dynamic of the motive. This lies rather in either the Scene or in the Agency which describes the state of mind of the person desiring healing and wholeness. Godfrey Mowatt used much the same language in his lectures (see page 86) on Iona begging people to throw themselves on the mercy of God. Likewise, MacLeod hopes for a similar response by expecting people to “surrender to God and a complete confidence in the reality of His love”. Such explicit sentiments contrast with the analysis made by Galloway who does not mention God in the passage quoted. This may be because the service has become much more universalist than the restricted services of the Forties which, despite their popularity, were of a different era.

The three examples which have been analysed show how motives may be interpreted or recounted in different ways but always in the framework of the pentad of Burke’s dramatism which highlights the dynamics of a situation. Galloway portrays worship as drama which has essential ritual within it<sup>41</sup>. This makes it important to identify the type of person bringing their motives to the service. Thus Burke’s dramatism is a good tool of analysis and it has been shown that it can be used in at least two different

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<sup>41</sup> Galloway, K., *Transfigured by Ceremony*, *op cit.*

applications to the same problem, that of the healing service. The analysis also allows us to see theological truths within the analysis such as the doctrine of faith and of works. It is a technique which could be applied to many liturgical situations.

### **A Reassessment**

When I was writing and assessing George MacLeod's contribution to the development of Divine Healing and, by implication, the rest of his work, it was suggested that he was a "theological magpie". Such an assessment was both disparaging and methodologically dangerous. Since many colleagues uttered similar opinions with great affection we shall depart from the former, but the latter, that of methodology, must be addressed. The question which must be asked is whether this type of analysis helps our understanding of his contribution or in some way demeans it. At the outset, I adopted a neutral position as regards the veracity or reality of Divine Healing and this has led me to look in on the discourse as a disinterested party. This, now requires methodological explanation.

In order to do this it is necessary to explore the work of Foucault and his *Archaeology of Knowledge*, not in order to find a method of literary or academic criticism but to offer a rationale for so observing MacLeod's discourse and for that matter, the information supplied by those who have written to me. In *Archaeology of Knowledge*, Foucault sets out certain rules for the writing of epistemological history which have been followed in this thesis, but also in works such as that of Boone who examined the discourse of fundamentalism<sup>42</sup>. Foucault asks us to depersonalise discourse and considers it in the context of its historical contribution. After some elaboration it will become obvious that such was the intent here, to strip discourse of the weight of belief behind the utterances. This method is consistent with any observation of people working out the implications of a discourse for themselves without making the history into that of personalities involved in the developments of the discourse. Geudez puts it thus writing from a sociological and psychological perspective:-

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<sup>42</sup> Boone, K. C., The Bible Tells Them So - The Discourse of Protestant Fundamentalism, NYP, New York, 1989.

L'« objet » des sciences humaines est non pas l'« Homme » mais des hommes. Or ces hommes considérés en société parlent et communiquent<sup>43</sup>

She further observes that mankind can only be properly considered as playing their role in society as talking and communicating beings which is a common starting-point for most analytical sociologists.

This may be elaborated further by considering the appropriate way to regard discourse. Discourse is made from utterances which builds into a system which Foucault calls an “archive” which contains all the accumulated knowledge in a given discourse. Gutting describes the archive as the determining cultural and discursive feature of a society in which statements are formulated and used to make sense of the formulation of all statements which are offered to the community to which they are relevant. Thus George MacLeod left a legacy which others have built upon and developed in new but consistent ways with the tradition of the Iona Community.<sup>44</sup>

No judgements may be made as to the veracity of any *énonces* and Foucault clearly states that anything from learned articles to gossip may be used to form a system of discourse. This trivial list which is offered by Foucault<sup>45</sup> underlines the framework of his book which delineates various levels at which statements may be made with effect. These vary from the work (*oeuvre*) to the simple sentence. He goes on to write about the connections and disjunctives, and names the resultant cumulation of knowledge, a positivity. Such positivities build into a discourse which may become an archive.

What George MacLeod offered throughout his ministry was a series of statements which followed certain rules and conventions which governed the nature of Divine Healing in his understanding. He saw it as a sacramental activity, ordained by a Sovereign God who brought healing through his son, Jesus, the word made flesh and

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<sup>43</sup> Guedez, A., Foucault, Psychotèque, Paris, 1972. Translation reads:

The object of Social Sciences is not to look a person, but rather people. However people must be considered as talking and communicating within society.

<sup>44</sup> Gutting, G., Michel Foucault's archaeology of scientific reason, CUP, Cambridge, 1989, p242f.

<sup>45</sup> Foucault, M., The Archaeology of Knowledge, Routledge, London, 1972, p24.

incarnated in the world of our imperfections and injustices. The way in which he assimilated the statements and information on the subject may be called his “discursive formations”. Foucault defined “discursive formations” as the gathering of statements into a series which are governed by conventions and objects which give them a unity<sup>46</sup>. Foucault is not examining the knowledge or the mind behind it, but is looking at the history of the discourse and its epistemological acceptance by society, in this case the Iona Community.

Instead of seeing, on the great mythical book of history, lines of words that translate in visible characters thoughts that were formed in some other time and place, we have in the density of discursive practices, systems that establish statements as events (with their own conditions and domain of appearance) and things (with their own possibility and field of use). They are all these systems of statements (whether events or things) that I propose to call *archive*.<sup>47</sup>

What is being proposed here is that George MacLeod developed a system of theology around healing and wholeness which was not theologically systematic but represented theology being done. There have been many pleas made by various theologians that theology should be derived from experience and from the culture in which it is written. The chapter on George MacLeod showed that he developed his theology from exposure to the thoughts of many and convictions about the nature of the Church. The sum of his work constitutes the archive which meant so much to the Community and at the appropriate time was taken over by the more modern approach of members like Kathy Galloway who in their turn developed their own discursive formulations.

It may be objected that such systems do not constitute scholarly theology nor even major works, yet such as these are the epistemological history of a contemporary movement within the Church of Scotland and beyond. One of Foucault’s objections to modern thought is that mankind succumbs to a tendency to objectification which makes humans objects rather than subjects. This is not a problem of great concern here, but the method of objectification which arises in *Archaeology of Knowledge* shows that mankind eventually becomes the subject of his own studies. The object

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<sup>46</sup>*ibid*, 31ff.

<sup>47</sup> *ibid*, p128.

becomes the subject be it sociology, psychology or medicine. Rabinow describes Foucault's method thus:-

Foucault's third mode of objectification represents his most original contribution. Let us call it "subjectification". It concerns the "way a human being turns him- or herself into a subject"<sup>48</sup>

Is this a form of alienation, mankind alienated by his own knowledge? We spend so much time theorising that we forget the true object of our studies. In the case of academic theology, it is all too possible to forget the minister working in the pastoral role and adapting theology to the needs which occur within his situation. Such may be the situation within this thesis: George MacLeod and many others responded to the demands of the War, whilst others pieced together their life experiences to produce the cross-fertilisation which was characteristic of Ian Cowie who brought together his childhood experiences of Rudolf Steiner education and connections which he had with alternative healing methods. To subject such experience to rigorous theological scrutiny is to objectify their work. But this is surely paradoxical? If we choose to study these men then we must make their theological utterances the subject of investigation and criticise them accordingly but if we examine only their discourse as an epistemological history, Foucault would argue that we do not objectify the individual writer but build a history of the episteme which is now part of the Iona Community and most of its members. Not every member of the Iona Community has delved deeply into the history of Divine Healing but most now accept it as part of the spirit of the Community. Foucault does not wish to follow Hegel but the idea of a collective spirit appearing in a period of history is a tempting idea to follow, which designates as archive. This begs the question of the status of healing and will be pursued in the Conclusion.

At the conclusion of the case study of Divine Healing within the Iona Community, there is ample evidence to indicate that most forms of statements (*énonces*) have been exhibited. The stories and definitions given by respondents have been multifarious in

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<sup>48</sup> Rabinow (ed.), P., The Foucault Reader - An Introduction to Foucault's Thought, Penguin, London, 1991, p10f. The parts in quotes come from Rabinow, from Michel Foucault, *Subject and Power*, Michel Foucault: Beyond Structuralism and Hermeneutics, Dreyfus & Rabinow (eds.), H.&P., UCP, Chicago, 1982, p208.

style and content and likewise the three named members in Chapter V showed how creative members could be drawing on totally different material and finding their inspiration in different motives. All from the shortest comment on wholeness to the full-length books of Cowie constitute a formidable archive which has become the tradition of the Community. One point which must be discussed in the next Chapter is the status of such a discourse which is far from univocal in its style, origins, or sources. The discourse appears to lack the dogmatic base which many hold in common when it comes to the central doctrines of the Church.

Having deconstructed much of the discourse surrounding wholeness and healing it is incumbent upon me to offer a conclusion which reconstructs wholeness and healing in a theologically relevant way.

## Conclusion

### Introduction

The aim of this conclusion is four-fold: first, to identify the status of healing in general and in the Iona Community in particular; second, to draw on the experience of one member of the Iona Community in the field of post-modernism and theology to suggest how this may have altered an awareness of healing; third, to translate empirical narrative analysis into theological narrative; and fourth to look at the merits and implications of openness as a way of approaching healing and wholeness.

### Status of Healing

However much writers try to make theologies of healing and wholeness central to Christian belief, most have failed in their endeavours because the Church has never chosen to make this the key-stone of faith. The Iona Community has never maintained that healing is central to its purpose, indeed it is little known for this activity outwith the fellowship which believe that the Healing Service and Prayer Circle meet their particular needs. Ferngren argues that the church never really adopted healing as a central doctrine and that neither the early church nor the church of later ages chose to concentrate on this, although their prominence in producing and running hospitals increased its reputation for care considerably. Vaux likewise argues that a "duty of care" in medicine is the basis of a christian ethic. He discusses, from a Lutheran perspective, Pauline theology; human dignity; and compassion and care<sup>1</sup>. He outlines the Christian's obligation to cease reducing care to clinical procedures and diagnosis and to see the patient as one who is vulnerable and for whom God has imposed on the professional carer an obligation to help the weak, the vulnerable and the suffering.

Part of the explanation may, Ferngren argues, be that theologians could never come to grips with dispensational theology. Early theologians regarded the apostolic era as a special period of healing after Christ, which was not continued in future generations

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<sup>1</sup> Vaux, K.L., Health & Medicine in the Reformed Tradition, Crossroad, New York, 1984.

and so they encouraged the church to turn to caring, medicine and hospital provision<sup>2</sup>. Kelsey outlines how the Reformers spent little time dealing with healing and how the traditional neglect was carried on by liberal theologians such as Schleiermacher who devotes about twelve pages to miracles in *The Christian Faith*<sup>3</sup>. Such undermining of Christ's healing ministry continued with the tradition of Bultmann and subsequent attempts to demythologise. Basically the Reformers rejected miracles because of their suspect position in the medieval Church<sup>4</sup>. A theology of miracles sat uneasily upon Aquinas<sup>5</sup> and others, who were trying to develop a neo-Platonic scientism and their legacy spilled over into the philosophical arguments about the nature of miracles in the eighteenth and nineteenth centuries, in the philosophy of Hume and the English Deists<sup>6</sup>.

The Iona Community occasionally indicates that healing and wholeness is central to their doctrine, yet this is only revealed once a year at the Hallowing service. In 1996 the Apostles Creed was swapped in favour of the statement of faith of the Church of Scotland, which is contained in the *Book of Common Order* of 1994. The third article reads as follows:-

We proclaim Jesus Christ, God the Son: born of Mary,  
by the power of the Holy Spirit, he became one of us, sharing our life and our  
death.  
He made known God's compassion and mercy, giving hope and declaring  
forgiveness of sin,  
offering healing and wholeness to all.  
By his death on the cross and by his resurrection, he has triumphed over evil.  
Jesus is Lord of life and all creation<sup>7</sup>.

The placing of healing and wholeness in a very central position in this article about Jesus stresses it at the centre of the nature and quality of his work. Also to emphasise the point during this service it was decided to depart from the usual hymn

<sup>2</sup> Ferngren, G.B., *Early Christianity as a Religion of Healing*, Bulletin of the History of Medicine, Vol. 66, No. 1, 1992, pp1-15.

<sup>3</sup> Schleiermacher, F., *The Christian Faith*, T&T Clark, Edinburgh, 1928 (trans. by MacKintosh & Stewart).

<sup>4</sup> Kelsey, M.T., *Healing and Christianity*, SCM, London, 1973, p22ff.

<sup>5</sup> Melinsky, M. A. H., *Healing Miracles*, Mowbray, London, 1968, p42ff.

<sup>6</sup> *ibid*, p47ff.

list and to insert the *Hymn for the Church* by Anna Briggs. Again, it can be seen that healing is central to her conception of the Church. It is an affirmation in song and in keeping with her other hymn on healing (see page 125):-

The church that offers healing  
Discerns its wounds and loss;  
The church that faces dying  
Shares life beyond the cross;  
To people torn and broken  
Your mercy is revealed;

We praise your name, who love us,  
The Healer and the Healed<sup>8</sup>.

From these quotations and the structure of the Hallowing Service it is evident that the Iona Community is prepared to acknowledge the centrality of wholeness and healing in the most important service of the year, but is not prepared to include it in its Rule or requirements of commitment by its Members. With the move towards an emphasis on creationist theology (be it Celtic or otherwise) it may be argued that members have been asked by the Rule to engage in reconciliation and stewardship of creation. The fourth Rule commits members to strive for peace and justice. In keeping with Justice, Peace and the Integrity of Creation (JPIC) the first six articles deal with what many now regard as the central concern of healing.

**We believe:**

1. that the Gospel commands us to seek peace founded on justice and that costly reconciliation is at the heart of the Gospel.
2. that work for justice, peace and an equitable society is a matter of extreme urgency.
3. that God has given us partnership as stewards of creation and that we have a responsibility to live in a right relationship with the whole of God's creation.
4. that, handled with integrity, creation can provide for the needs of all, but not for the greed which leads to injustice and inequality, and endangers all life on earth.
5. that everyone should have the quality and dignity of a full life that requires adequate physical, social and political opportunity, without the oppression of poverty, injustice and fear.
6. that social and political action leading to justice for all people and encouraged by prayer and discussion, is a vital work of the Church at all levels.

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<sup>7</sup> Printed in: Service Of Hallowing Of New Members And Renewal Of Vows, 1st August 1996, © Iona Community.

<sup>8</sup> Briggs, A., *The Hymn for the Church*, © The Anglican Church of Canada. Printed in: Service Of Hallowing Of New Members And Renewal Of Vows, *op cit*.

The seventh article deals with nuclear disarmament and weapons of mass destruction. Politically this was the most sensitive, because whilst George MacLeod and some others saw nuclear disarmament as the most important aim there were others who had to be accommodated who were neither pacifists nor totally committed to the abolition of Britain's nuclear deterrent. However, there is no doubt that the latter issue, along with issues of justice such as the Asylum and Immigration Act, still take up much more time and energy than healing which remains the preserve of the group which is interested in it. The purpose of introducing the peace commitment and reconciliation at this late stage is to emphasise the point which has become increasingly apparent that healing now involves prayers for the environment, ecology and political stability in a world broken by "our sin". If reconciliation is synonymous with healing in the context of peace and justice we have further evidence that the whole debate has changed since 1938 when broken bodies were returning from the brokenness of World War II.

The theme of reconciliation is common to a number of communities and each in their own way translates reconciliation into healing or, in the last case discussed, wholeness. The purpose in briefly mentioning some of these communities is because of their links with Iona and because they offer examples of how peace and justice have coalesced with healing, making it appear that the modern emphasis on 'ecological healing' within the Iona Community is perhaps an inevitable consequence of expanded horizons of inter-relatedness. Lourdes comes into a category of its own, which is not entirely relevant because it is based on a 'sacred' site, rather than a purpose. The healing of Lourdes follows from this site rather than from its aims.

The three communities worthy of mention are: the Taizé Communauté in Burgundy, France; Corrymeela, about 55 miles from Belfast; and Riesi in the centre of Sicily. Roger Schutz established Taizé on what was the border between Vichy France and occupied France, and during the war worked with freedom fighters manning escape routes to Switzerland. It was an ideal site for a centre of reconciliation after the war, and the rule of common care, service and devotion soon provided the opportunity for reconciliation. In 1962, a German organisation called *Scühnezeichen*, which literally

means reconciliation, built the Church of Reconciliation<sup>9</sup>. In common with the aims of *Scühnezeichen* they have also helped in many ways in the life of the Corrymeela Community. Corrymeela which was established in 1965 by Ray Davey, who had intimate knowledge of the Iona Community and also Taizé, made the common life and reconciliation central to the Community life. It was immediately thrust into the conflicts of Northern Ireland and achieved much by their ecumenical family weeks, etc. A reading of McCreary's journalistic account leaves one in no doubt that individual healing was always occurring as traumatised children and widows come to terms with the brutalisation of the conflict. Finally, Corrymeela was declared open by Pastor Tullio Vinay who firstly established Agape in the Italian Alps and then Riesi in Sicily<sup>10</sup>. I visited Riesi in the early Seventies and found it to be a centre which was attempting to reconcile some of the dysfunctions of Sicilian society, i.e. the role of women, the use of land and the dominance of the Mafia.

In terms of wholeness, all these centres plus similar communities in Florence have been studied by Ian Fraser of the Iona Community, who believes that wholeness must be found in the inclusiveness of communities<sup>11</sup>. The point of all these communities is that they each have a common theme of reconciliation and, by default, healing and have been intimately connected by common knowledge conveyed by members, one to the other. The Iona Community certainly is the only one to have started with Divine Healing, but as it has developed it has absorbed the concept of reconciliation in conflicts, be they of gender, religion, race or class.

Whilst mainstream denominations and theologians have tended to marginalise healing, the Iona Community has successfully kept the feeling of obligation to heal alive over the last sixty years. George MacLeod and others have seen it as a sacramental activity as part of the incarnational theology which inspired the corporate life of the Community. Yet one cannot escape the subjectivity of liberal theology and the fact that the healing activities have been developed at the subjective level. In order to

<sup>9</sup> Historical details from: Haggis, T., *The Spirituality of Taizé*, Grove Books, Nottingham, 1994.

<sup>10</sup> Historical details from: McCreary, A., *Corrymeela - The Search for Peace*, Christian Journals, Belfast, 1975

<sup>11</sup> Fraser, I. M., *Living A Countersign*, Wild Goose, Glasgow, 1990.

progress the argument it is necessary to show that such subjectivity is no bad thing. It is to Peter Millar that we must turn to provide the bridge between subjectivity and a more objective approach through narrative analysis and theology.

### **Post-Modernism**

Peter Millar gave a stimulating paper to the Iona Community Week upon Iona in 1996 which purported to be a report on his first year as Warden of the Abbey. The report was more a treatise on post-modernism which had concerned him during studies in Chicago two years earlier. He considers that post-modernism is both a curse and an opportunity for the Church and the island activities on Iona. The age is characterised by plurality which allows many different belief systems to coexist in a pick-and-mix fashion where religion offers many different kinds of authority and can leave many people totally confused or searching for an understanding which eludes even visitors to Iona trekking across Mull without any clear conception of what Iona may be about. On the economic front, Millar argues that the poor of Madras are so as a direct result of the wealth of the West and the domination of multi-national companies which undermine the sovereignty of nation-states. Last, he identified the insecurity which people feel in a climate of terrorism. Christians may rise to the challenge of this new circumstance by looking for the opportunities which have been created by holding on to the values which are central to faith, be it Christian or otherwise. He contended that evangelism was still viable and vital in today's world and that it should be characterised by "openness".

Surely given our post-modern condition, we must be more open rather than less. But it is exactly at that point that continuing discernment is needed. What does it mean to be "more open"? Do we have life-giving news to offer - news that is, in its essential nature, different from any other news? Have we in the Community a continuing work of evangelism? of announcement? of sharing the story? And how do we do that in a world marked by fragmentation and the loss of the large narrative? Have we an encapturing vision linked to a prophetic and radical voice?<sup>12</sup>

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<sup>12</sup> Millar, P.W., *A reflection on our ministry on Iona*, (unpublished), Community Week 1996, p1.

His message was clearly an encouragement to embrace the possibilities of post-modernism whilst being aware of the pitfalls and angst which post-modern faith must face. He presented the problem of the age thus:-

I believe that we have to see this new period of “postmodernity” as “beyond” rather than “against” modernity. Post-modernity is marked, for example by “plurality” but this does not necessarily mean that “anything goes” and that we need not have any central convictions, but rather that differences should be both protected and promoted. I would argue strongly (cf. the views of J. S. Mill) that all cultural positions are not equally acceptable, but that does not mean that the ‘hidden cultures of history’ have not much to teach us in the West<sup>13</sup>.

In personal inquiries which resulted in correspondence, he answered the question of how post-modernism relates to healing. He argues that people in a post-modern age are more inclined to seek a ‘direct’ experience of God and may invest their search in a quest for healing. It is almost more natural to seek this personal experience now than it was in the days of George MacLeod because one’s religious practice is not dependant upon the specific authority of a minister or any other agent but can become compartmentalised. For example, a quest for healing can be added (or subtracted) without reference to an overall authority which in the past has often split congregations as reported by some of the respondents in Chapter VI. He writes of direct experience:-

I also believe that we are discovering (or rather rediscovering) the power of prayer in healing. This is partly because the modern mind, in my opinion, wants a direct experience of the divine rather than some mediated experience. Within post modernism there is this search for the transcendent; we cannot live in a world denuded of transcendence. I think also that healing is seen to be important in many lives because of a greater recognition of evil/darkness/threatening powers. Many people want to be ‘healed’ and what they mean is taken out of their ‘inner darkness’ which they feel powerfully. For myself, I see this as a growing reality... so much could be said here. I also think that post-modernity allows a lot of space for ‘inspiration’ that overcomes the modern dichotomy between infallible inspiration and a complete denial of divine inspiration. So given a ‘realistic account’ of divine inspiration (in this contemporary sense) we can say then that the healing stories in the Bible address us with a sharpened authority and relevance/meaning<sup>14</sup>.

It is important to note the qualifications which he makes after this. He insists that it is vital to offer a reasonable explanation of healing, that it is in fact dangerous and counter-productive to let people’s “experience” develop without guidance. This is

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<sup>13</sup> *ibid.*, p3.

<sup>14</sup> Millar, P.W., correspondence dated 7th August 1996.

where the Iona Community must add its distinctive voice, maintaining the openness which Millar would have as a characteristic of all of its mission and evangelism. Percy pointed out in a seminar held in New College on 7th February 1996 that the fundamentalist revivalism which is characteristic of Wimber and others also suits the post-modern mind, in that it allows people to adopt maverick theologies with impunity because “anything goes”<sup>15</sup>. In his book he writes:-

It must also be remembered that revivalism, although originally a reaction to the ‘mixed offerings of modernity’, is now definitively a post-modern movement. It flourishes under the conditions of post-modernity, freely competing in the spiritual free market, playfully engaging with tradition and experience, whilst remaining broadly true to its foundational dogmas<sup>16</sup>.

Percy acknowledges a considerable debt to Berger, who wrote prior to an understanding of post-modernity, which principally came into Anglo-Saxon consciousness with the translation of Lyotard from the French in 1984<sup>17</sup>. In *The Heretical Imperative* Berger depicts some religious movements as reductive reactions to modernity, in other words the believer works out what is plausible in the midst of modernity<sup>18</sup>. This model is one of three: first, the deductive model which reinforces old religious traditions; second, the reductive model as described above; and the inductive model which is the model which he hopes will be adopted as the way forward for mainstream religion. In this inductive model modernism is absorbed and criticised in an endeavour to produce a plausible response to the challenge it poses<sup>19</sup>. The Iona Community would be characterised as inductive. All three are the product of nineteenth century Christian liberalism and the subjectivism which came from Schleiermacher and the schools which followed. The rise in some quarters of the

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<sup>15</sup> View expressed at a seminar conducted in New College.

<sup>16</sup> Percy, M., *Words, Wonders & Power*, SPCK, London, 1996, p150.

<sup>17</sup> Lyotard, J.-F., *The Post-modern Condition: A Report on Knowledge*, Manchester UP, Manchester, 1984.

<sup>18</sup> Berger, P., *The Heretical Imperative - Contemporary Possibilities of Religious Affirmation*, Collins, London, 1980.

<sup>19</sup> The concepts in this book evolved from Berger’s work in the sociology of knowledge, which started from a Weberian analysis of societal institutions. This foundation was spelt out in: Berger & Luckmann, P. L. & T., *The Social Construction of Reality*, Penguin Press, London, 1967; and was acknowledged in: Berger et al., P. L., *The Homeless Mind*, Penguin, London, 1974; which describes experience in a pluralistic society as life-worlds, that are chosen as identities, in a pluralistic society [p71ff.]. His earlier attempts at explaining experience and identity have rather been overtaken by post-modern theory.

deductive model owes more to the reaction to this than in the neo-orthodoxy of Barth<sup>20</sup>.

The main concern of this thesis has been with the attitude of healers rather than those seeking healing and therefore we must apply Peter Millar's theories to those who help in the healing ministry within the Iona Community as members or associates. Can it be argued that the discovery of healing power is also a "direct experience of God"? Millar attests to a conviction in the power of prayer and its relevance to healing both in the personal sense and the international intercessions for the healing of the nations. "I also believe that we are discovering (or rather rediscovering) the power of prayer in healing", he states in his letter. How may the experience of so many be described in terms which adequately address the phenomenon whilst avoiding the explanations and denials of the past? In this conclusion, an alternative understanding or description of healing will be developed in contrast to previous explanations.

If we combine three concepts from the previous paragraphs an argument may be advanced. First, Percy's reference to experience in a "free market" reminds the modern analyst of the priority of experience in reaching any formulation of religious belief. Berger then offers three ways in which experience can be channelled and Peter Millar claims that healing is attractive in a post-modern society because it offers a "direct experience of God". James and Otto can be quoted as evidence to back a theological assertion that religious experience is to a large extent experiential<sup>21</sup>. Discourse and narrative analysis go behind the experience to provide an understanding of its structure. They gather together the background of the experience and its application, its history and effect and the biographical accumulation in the experience of an individual. The case studies which have been undertaken in this thesis have invariably placed theology in the biographical experience of the subject. This is particularly obvious in the analysis of the stories of members (Chapter VI), and in the background to Ian Cowie and it can also be argued in the case of George MacLeod.

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<sup>20</sup> Berger, 1980, *op cit.*, p200ff.

<sup>21</sup> James, W., *Varieties of Religious Experience*, NY Modern Library, New York, 1929.

Otto, R., *The Idea of the Holy*, OUP, Oxford, 1936.

What can therefore be undertaken is an examination of experience which has led to an inductive model applied to healing. I contend that this is an alternative way of looking at how theology is in fact done.

If we now combine an understanding of our post-modern situation with the liberal theology which has been in existence for a long time, it may be possible to combine the social-scientific disciplines of discourse and narrative analysis with the creative possibilities of post-modern subjectivity to offer a theological reconstruction.

### **Healing as Narrative**

Anthropologists have built many papers and studies around the ethnomedicine of various groups, which may provide a key to identifying the creativity linking the three elements mentioned in the preceding paragraph. Many of these studies have centred on Asian countries or are undertaken by medical sociologists who describe religious behaviour in terms which are suggestive of narrative. Although we have concentrated on the narratives of healers, it is possible to learn from these studies. If there are health narratives; there must also be healing narratives describing the experience of healers as they have been exposed to be the influences which have shaped their attitudes. *It has not been doctrine but circumstance and individuals who have shaped the narratives of this thesis.* Thus it will repay to examine these studies as previous reference has been made to Japanese culture with reference to Lock (see page 62) who described the intermingling of Western and traditional medicine in *kampō* clinics. The attractiveness of Asian cultures lies in the pluralism of influences on medicine, not to mention religion and much else. In fact, the studies include India and Egypt.

A health narrative is the story of how the help of medicine or healers is sought by an individual, it is the story of his/her perception of progress and needs. Early has developed a definition of such narratives by suggesting that the quest for health is episodic and may involve several ventures into different types of treatments, treatments which are appropriate to one's position and circumstance. Having made fundamental decisions about treatment the narrative continues to describe the search

for the appropriate remedy and takes into account the feelings of peers. Her studies have been of women in Cairo and have been related to gynaecological matters and child-care concerns<sup>22</sup>. They must make decisions about their lifestyle in relation to Western values and decide whether to accept modern allopathic medicine or continue with the traditional beliefs and practices. She develops her definition of health narrative thus:-

A 'therapeutic narrative' is defined here as a commentary on illness progression, curative actions, and surrounding events - both relevant and irrelevant<sup>23</sup>.

The value of Early's work is that she insists that all narratives must "provide a biographical context and experiential reference"<sup>24</sup> for the understanding of both disease and well-being. It is relevant in the context of this thesis, because practically all the people who have been examined have set their healing experiences in biographical stories. Again it must be stressed that the argument is that convictions about healing and wholeness arise out of experience and encounters.

Early's work is quoted by Tribhuwan and Gambhir at the beginning of a paper proposing a model of ethnomedicine in the tribes of India, which make up about 20% of the country's population. They are basically concerned with the poor health of the tribes which he deals with in another book written with a senior colleague<sup>25</sup>. The import of the former is in the model which is produced to provide a schema for examining therapeutic episodes in health narratives. It is not dissimilar to some of the models addressed in previous chapters. However, by way of introduction reference might be made to *Therapy* by David Lodge who describes the life of a man who indulges his neuroticism about a pain in his knee by paying for many alternative therapies and being willing to jump from one to another. Tubby Passmore, the central character, is supposedly happily married but is known to be having a very close, but platonic, relationship with another woman whenever he is in his flat in

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<sup>22</sup> Early, E., *The Logic of Well-Being - Therapeutic Narratives in Cairo, Egypt*, Social Science & Medicine, July/Sept., Vol. 16, 1982.

<sup>23</sup> *ibid.*, p1491.

<sup>24</sup> *ibid.*, p1492.

<sup>25</sup> Jain & Tribhuwan, N. & R. D., Mirage of Health and Development, Vidya Nidhu, Pune, India, 1996. For a useful definition of ethno-medicine see pages 146ff.

London. She too is in therapy, seeking psychotherapy for her lack of success in sexual relationships. When Passmore's marriage breaks up he has a great urge to have sex with any woman he can remember from the past. Interestingly, after a sordid weekend in Spain with his long-term confidant, she dismisses her therapist because she realises she actually has no need of a man. Her healing narrative is completed by a random experience. He is eventually cured by a combination of Kierkegaard, with whose private life and resultant moral philosophy he becomes obsessed, and an existential experience with an adolescent love now a mature woman on a pilgrimage in Spain<sup>26</sup>. The entire experience of Tubby Passmore is an example of a therapeutic model in that he chooses appropriate therapies at different times and eventually finds a cure almost by serendipity when he joins the pilgrimage. Maureen had embarked on this pilgrimage after the loss of her son, murdered when an aid worker in Africa. Maureen had also had a mastectomy which caused her husband, Bede, to reject her sexually, but she responded to Passmore's tenderness in kissing the scars whilst making love. Once more, the healing narrative has an unanticipated resolution. These few lines seem to sum up how nebulous therapy, or healing, may actually be:-

"Damien was her favourite child. She was devastated. That's why she's gone off on this absurd pilgrimage."

"You mean, as a kind of therapy?" I said.

"It's as good a word as any, I suppose," said Bede<sup>27</sup>.

Lodge's novel is quoted because it is a perfect example of a health narrative and an amusing look at the plethora of therapies available to Passmore. It is also noteworthy that healing actually only occurred when it was least expected, both in his case and in several other characters - hence the nebulous definition offered above.

John Maillard, who was a healer in the time of George MacLeod, cites five people who influenced him in the development of a healing ministry. Some were teachers, but most significantly his mother was a seminal influence and likewise the experience

<sup>26</sup> The pilgrimage was in fact to Santiago de Compostela. See Costen, M., *The Pilgrimage to Santiago de Compostela in Medieval Europe*, in: Reader & Walter (eds), I. & T., *Pilgrimage in Popular Culture*, MacMillan, London, 1993.

<sup>27</sup> Lodge, D., *Therapy*, Penguin, London, 1995, p277.

of the loss of his brother in an accident. The suffering of this healer comes through in his account (see page 70).

Last on the subject of narratives, the work of Levin and various associates is worthy of mention. He asserts that there is a causal connection between health and religion, although he would shy away from a strict definition of causation: association would be a better word<sup>28</sup>. In a review article on hypertension, Levin and Vanderpool provide twelve theses for further research: the interesting ones concern behaviour. Religious groups are known to ban smoking, often alcohol and some, such as the Mormons, do not even allow stimulants. There is also evidence that religious attendance reduces stress and the certainty of faith offers confidence in the face of illness. Although these are behavioural matters they lend themselves to narratives about health i.e. the recovered alcoholic assisted by a certain church<sup>29</sup>. By the same token, there are many instances of pastors using the likes of recovered alcoholics as illustrations for sermons which emphasise the merits of a particular denomination or church.

Alisdair MacIntyre, in a paper which is essentially a riposte to Kuhn, describes the term 'epistemological crisis' to denote the way individuals formulate their difficulties in coming to terms with a new state of knowledge<sup>30</sup>. They often do so in terms of dramatic narrative and MacIntyre argues that the only study of this is in fact *Hamlet*. In the play, Hamlet returns to Elsinore and has to come to terms with the death of his

<sup>28</sup> Levin, J. S., *Religion & Health: is there an association, is it valid and is it causal?*, Social Science & Medicine, No. 11, Vol. 38, 1994.

<sup>29</sup> Levin & Vanderpool, J. S. & H. Y., *Is Religion Therapeutically Significant for Hypertension?*, Social Science & Medicine, No. 1, Vol. 29, 1989. There have been a number of studies on the value of regular church attendance, such as:-

Ellison, C. G., *Religious involvement and subjective well-being*, Journal of Health and Social Behaviour, No. 1, Vol. 32, March 1991.

Balkizas & O'Hare, D. & M., *The helping hand of God: how two people with learning disabilities found acceptance and support in the community through former institutional routine - that of going to church every Sunday*, Nursing Standard, 23 November 1994.

Marcoen, A., *Spirituality and personal well-being in old age*, Ageing and Society, No. 4, Vol. 14, December 1994. The above three were electronically searched from HEBS on CD-ROM.

<sup>30</sup> MacIntyre, A., *Epistemological Crises, Dramatic Narrative, and the Philosophy of Science*, The Monist, No. 60, 1977. Also reprinted in: Appleby et al., J., Knowledge and Postmodernism in Historical Perspective, Routledge, London, 1996.

father, the new marital status of his mother and the rule of Claudius. He also had to relate to friends who were not familiar with the new ideas of Wittenburg, such as Rosencrantz and Guildenstern. It is relevant here because what is witnessed in the members' testimony is the struggle to understand the concept of wholeness to which they have been introduced in dramatic narrative form. Each of the narratives which has been examined shows how members have assimilated their own "epistemic crises" in the course of their careers as they have been confronted with wholeness and healing.

Now, the point that must be stressed here is that these narratives are manifestations of the subjective feelings and beliefs of people who must work out their positions with reference to their biographical and biological state at any given time. The narratives which people tell about their health are enriched by the various episodes which they undergo and by the choices which they make in the pursuit of health or a cure. The same is true of those who are really concerned with finding appropriate healing methods be these prayers or therapies in which they may acquire skills. This thesis has sought to show how members of the Iona Community acquired interest, knowledge and skills in discussing healing and offering it to others. Therefore the concept of healer's narrative may be developed from the discourse and narrative analysis which has been done in the preceding chapters. This bridges the gap between subjective doctrine and empirical reality. The concept of healing narrative must now be inverted and applied to the healer rather than the healee (*sic*).

Nearly every account of an individual's contribution to the healing ministry on Iona has contained at least some story and often more than one. Stories have also been used to illustrate and justify stances which have been taken. The healers have exhibited their own stories or have had empathy with other people's. One may think of MacLeod's sermons on "people who have influenced me", or the use made of an intern's story which was analysed in depth in Chapter VI. Many have been given the opportunity to fail in the open and accepting environment of the Abbey, cf. Tom Gordon's struggle with the healing service and the discussions which he could freely

enter into in confidence during his week on the island with other divinity students (see page 205).

The ability to heal is acquired by experience rather than by learning as other components of the Christian may be learnt through socialisation and education or by a conversion experience. Lyall recounts how experience shapes the counsellor as well as the counsellee, each bringing their own narrative to the counselling interaction and offer within the counselling a dialogue of experiences<sup>31</sup>. Such insights are enriched by the gains of narrative theology.

Iona brought together features which presented unique opportunities in the life of George MacLeod and which enriched his already successful ministry. Without the influence of David Russell and many others, his openness would not have grown. Without the crisis of war, the need for intercessions would not have been so pressing. Without the encouragement of a wider Church south of the border, MacLeod might not have been introduced to a mainstream concern for healing in the Church of England and to the support offered to a Missioner for Healing throughout the Church. Of course, he had to have a theology which could meet the crisis of 1940 and a conviction that Divine Healing could be relevant to a movement which was opposed to the War.

I support the view of Vanier who insists that his volunteers in L'Arche communities arrive as helpers but in the process of helping become healers. As a disabled person, I have watched many carers acquire the skills needed which can be learnt only by experience and by personal interaction. Very few can care without the pain of trial and error and some never succeed, as I am sure Vanier has found on many occasions. This may explain why many congregations may be reluctant to enter the realm of healing. In his narrative Tom Gordon wrote of his fear of his congregation which prevented him from introducing healing as a feature of worship in his first Church of Scotland charge.

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<sup>31</sup> Lyall, D., Counselling in the Pastoral and Spiritual Context, Open UP, Buckingham, 1995, p101f.

This was more to do with church structures and their intimidating effect on me and not in any sense because of a diminishing of the growing validity of healing services in my understanding of the church<sup>32</sup>.

The reluctance of many members of congregations to take part in healing services may be explained by their lack of experience or by an unwillingness to acknowledge powers which seem to conflict with medicine and demand that they become personally involved in someone else's illness. The informants and writers in this study have in some way become involved in people's brokenness, deprivation or illness and have striven to identify with their plight in the love of Christ. It is at this point that personal narratives meet theological narratives and use must be made of Hauerwas and in particular his work in the field of medicine.

It will be recalled that when forgiveness was discussed on page 106 reference was made to Hauerwas in connection with forgiveness within the community of faith and how he insists that the qualities necessary for forgiveness can only be found in the narrative of the life of Jesus and his living presence in those who are in fellowship. A constant theme of Hauerwas is that the problems facing Christians can only be resolved within the community of the faithful. When it comes to healing and to medicine, he becomes much more specific: first he deals with the problem of evil; second, with theodicy; and third with the constraints of medicine. These three have implications for our conclusion and will be dealt with separately.

Hauerwas firstly argues that the problem of evil is basically the result of Enlightenment theology and philosophy. In this period God becomes all-powerful, all-caring and beneficent and the purpose of the theodicy is to justify the belief in such a God in the face of suffering. The narrative of the dealings of the Judeo-Christian God with his people should present no problem with the 'problem of evil' to the community of the faithful. The Judeo-Christian tradition finds God's love even in the depth of suffering. The Psalms contain many examples of worship whilst in a state of depression, anxiety, anger or oppression which do not doubt God's goodness but

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<sup>32</sup> Personal letter, *op cit*.

accept the state which has befallen the psalmist<sup>33</sup>. The psalmist does not accuse God of causing his suffering, but may well find it comforting to work through the suffering whilst worshipping the God who stands with him. Misfortune simply happens and is not to be explained save as part of our personal narrative of his love. This modern problem with evil can be traced back to the Enlightenment when dualism was introduced into a philosophical view of a God. This led to the dilemma that although God was not responsible for causing evil, he at least could prevent it<sup>34</sup>. Thus the development of theodicy.

Therefore, secondly, Hauerwas notes that theodicy cannot explain or mitigate the suffering surrounding the death of a child when the questioner is asking from a perspective of post-enlightenment theodicy. It is only when the narrative of Christ's suffering and passion is brought before us that a conversion to an understanding of God's narrative can be found to have meaning for us<sup>35</sup>.

Thirdly, Hauerwas suggests that modern medicine has taken the place of theodicy in the sense that hospitals and other institutions build their own narratives which are often as mythical and as hollow as the theodicy of the last three centuries. Medicine has its own narrative which empirical research can confound by showing, for instance, how children suffering from leukaemia actually understand their impending death which adults and medicine try to conceal from them<sup>36</sup>. Hauerwas, in an earlier book *Suffering Presence*, asserts that being there to suffer with a person in silence is often the only way of offering comfort, he offers both a narrative and a reference to Job's comforters. Those engaged in medical practice, and indeed others, must search for the narrative of God in the setting of suffering or incurable illness, as he goes on to discuss. In this search they will discover that God actually was a suffering God himself in the suffering of Christ on the cross. The church is responsible for taking this narrative to the medical profession and to the hospital in order to offer the

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<sup>33</sup> Hauerwas, S., *Naming the Silences - God, Medicine and the Problem of Suffering*, T&T Clark, Edinburgh, 1993, p42ff.

<sup>34</sup> *ibid*, p40.

<sup>35</sup> *ibid*, p112ff.

<sup>36</sup> *ibid*, p126ff.

opportunity for a community of care to grow, where the ill are not isolated but become part of the community.

For unless there is a body of people who have learned the skills of presence, the world of the ill cannot help but become a separate world both for the ill and/or those who care for them. Only a separate community that is pledged not to fear the stranger - and illness always makes us a stranger to ourselves and others - can welcome the continued presence of the ill in our midst<sup>37</sup>.

Narrative theology has implications beyond the description of theology as stories, it suggests that we must have a respect for men and women as story tellers and relate their reality to the consequences of theological realities and possibilities. In discussing openness, it will be shown that it provides an environment in which stories, both theological and personal, may develop.

### **Implications of Openness**

In the second part of this conclusion one question must be answered, and one elaboration made. How does one answer the question posed by churches as to what are legitimate therapies? What is the answer to the charge of my colleague on page 5, who questioned the position of shiatsu *vis á vis* Christianity? The relevance of openness, as dealt with in Chapter I, lies in its creativity and ability to explore where others condemn. It however may be argued that to embrace every type of alternative therapy or healing mechanism is irresponsible at worst and amoral at best. Not only must criteria be found by which to judge alternatives, but this must be extended to Divine Healing itself, which may be motivated in various ways. These ways must be open to discernment as motives are questioned.

First let us consider alternative therapies. It can be stated categorically that churches have no right to offer a blanket condemnation, as did the Church of Scotland in 1993 (see page 39), but one must have criteria with which to discriminate between therapies and modes of Divine Healing. Beginning with therapies: the most important area of discernment is a cross-cultural concern. Many alternative therapies arise out of traditional medicines of another culture and by implication different cosmologies. The Church should not fear cross-cultural fertilisation, but may well

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<sup>37</sup> Hauerwas, S., *Suffering Presence*, T&T Clark, Edinburgh, 1988, p81f.

ask itself whether such is acceptable when adapted for different purposes. Shiatsu provides an example which provides three criteria which ought to be worked through in judging its worth. First, it is beyond doubt that shiatsu offers an alternative view of the body and of the utilisation of energy in curative ways. Such a description was offered by Kaptchuk on page 59, his assessment is objective, historical and can be understood in the West, as can any cultural variation. Such an approach is non-exploitative, and because of its objectivity should not be condemned. However, Cowmeadow introduces a second element into an assessment of shiatsu by devoting, in his popular book on the subject, a section to bodily auras<sup>38</sup>. This includes a 'cosmic aura', which cannot be substantiated in terms of Chinese culture. Levin and Coreil point out that shiatsu can be both traditional and 'New Age' and it can be argued that Cowmeadow's extension of Chinese cosmology beyond its traditional limits gives ground for criticism in terms of the 'New Age' implications<sup>39</sup>. Those who discern the difference between two types of shiatsu may further a case that one type goes beyond the limits of their christian beliefs. The third criteria is the sensible approach. It is that advocated by Lock in her examination of kampō clinics in Japan, where Eastern and Western medicine are mingled (see page 242). She argues, as would some practitioners in this country, that shiatsu is simply a tool, a method of massage which is useful in the treatment of certain symptoms. Viewed thus neither of the latter two criteria are relevant. When the Iona Community is open enough to allow for alternative therapies, it too should come to opinions using criteria which are available in any serious study of individual treatments. Ian Cowie has undertaken such an analysis of dowsing when coming to the conclusion that it should be acceptable to Christians, the way forward is to reconstruct our knowledge of alternative therapies, to understand fully what their implications may be for an ethical and christian understanding<sup>40</sup>.

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<sup>38</sup> Cowmeadow, *op cit*, p19ff.

<sup>39</sup> Levin & Coreil, J. S. & J., 'New Age' Healing in the U.S., Social Science & Medicine, Vol. 23, 1986, p 891.

<sup>40</sup> For Ian Cowie's discussion of dowsing. He maintains that the translation of *qesem* in Deut. 18:10-11 is better translated as 'dowsing', the use of a pendulum or other such implement. see page 182.

Other ethical considerations may also be taken into account. It may be that Divine Healing is inspired by motives other than those of healing and wholeness may be far from the healer's intention. The most prominent criticism of power healing comes from Percy who argues that (a) healing in the context of Wimber's theology is a manifestation of the power of God to reveal himself in "signs and wonders" which bring people to faith. Percy believes that a Gospel is taught that lacks the essential quality of love which Jesus manifested in his healing where his concern was with the excluded and the weak rather than with an ego-centric desire for self-amelioration on the part of the seeker or recipient of healing. The healing of Jesus was conducted at considerable personal cost and often with an awareness of the theological dangers in teaching onlookers truths about compassion and mercy, for instance when he healed on the Sabbath. Wimber has very little to say about the obedient relationship of Jesus as Son seeking his Father's will which was to reveal his love through his Son.

Additionally, (b) Percy suggests that power healing is manipulative: in so far as Wimber ceased to stress healing when the Toronto Blessing produced more successful results in building congregations. In this examination of the *Church Growth Movement*, Percy describes the rhetoric of evangelism which concentrates on power and identifies healing as one of the signs of powerful growth in congregations<sup>41</sup>.

The other significant criteria which must be considered surround the entire issue of wholeness itself. If wholeness is defined as the qualitative qualifier of healing, it must follow that any healing which is to be valued by Christians and non-Christians alike, should offer the opportunity for wholeness or integration to occur. This concept was first mooted on page 34 and developed in the analysis of Margaret Stewart on page 200. I would argue that the structure of the healing service and its place in the overall life of the Iona Community offers such an opportunity, yet such a generalisation requires to be qualified. The positive side of this statement lies in the commitment of its members to translate theology into social action. All the stories told by members about wholeness arose out of a long-term view of healing. Those

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<sup>41</sup> Percy, M., "How to Win Congregations and Influence Them": *An Anatomy of the Church Growth Movement*, Modern Churchman, No. 6, Vol. 34, 1992, p30.

engaged in work with the disabled or the deprived were acutely aware that the long-term approach was the only realistic choice. One might even argue that healing which expects miraculous results has by its very nature short-term goals and if it has the expectations described by Percy, any result which is less than immediate may be counted a failure. Miraculous healing must have an immediacy to satisfy its constituency, a constituency to which the Iona Community does not pander. Wholeness is achieved over time and can comfort a person even when healing fails. Yet, this lays the Iona Community open to the charges which Ian Cowie makes in his latest book, namely that the healing service is not properly so because it lacks the necessary counselling. I believe that this charge has not been addressed in any meaningful way by the Community.

The modern Iona Community has failed to tackle this problem in the way George MacLeod tried to integrate pastoral concern with intercessory prayer. The present prayer-list is so demanding that there is little time to dwell on individual details and concerns. Similarly, the current obsession with confidentiality means that the giving out of details during services or in prayer-lists precludes the type of specific prayer which George MacLeod sought in earlier days. Ian Cowie believes that healing can only be offered in the light of counselling and intimate knowledge of a person's ailment. Applied to the Church in general, that healing which smacks of short-termism should be avoided.

Associated with this problem is the danger that healing becomes a single issue. George MacLeod regretted that the largest audiences on his South African tour as Moderator were those who came to hear about Divine Healing rather than politics and related issues of racism. Single-issue theologies should be avoided at all costs and it should be recognised that inevitably the reductionism which takes place reduces the likelihood of the achievement of wholeness.

This raises the question of reductionism which is contrary to a spirit of wholeness and provides another criterion by which healing may be linked to wholeness. Levin & Coreil argue that despite the claim of 'New Age' therapies to make holistic

approaches to clients, many therapies are in fact very reductionist. They use iridology as an example by pointing out that the entire treatment is focused on the iris in the same way as conventional medicine specialises on one organ, or group of organs<sup>42</sup>. Reflexology might be cited as another example concentrating on the sole of the foot. This is a charge which deserves further consideration. Most writers in the field of healing, be it Divine Healing or 'New Age', write in holistic terms and should not be found guilty of reductionism. Yet a wrong assessment of a miracle may well focus entirely on one small aspect of an individual to the exclusion of their real problem. Jesus healed in such a way that he released the person from the whole exclusion from society which was as big a problem as the illness. Miraculous cures of today may be equally blinkered in their aims with the consequent reduction in their significance. In an interesting editorial in a medical journal which mentions Lourdes, Martin argues that today's miracle is often so attributed due to lack of medical knowledge which are subsequently explained scientifically.

Acts of healing which are not explicable in terms of our current knowledge of medicine are believed to have been mediated by God; unfortunately, as research closes the gaps in medical knowledge so God appears to be 'edged out' or at least to become less active<sup>43</sup>.

He cites as an example the behaviour of certain syndromes, which may result in 'miraculous' remissions ("cures") when medical science has not yet documented the natural history of such syndromes. There was a case before the Medical Committee of Lourdes when a woman was declared cured of Budd Chiari syndrome, she subsequently relapsed and died in 1970<sup>44</sup>.

In other words, many instances which the *International Medical Committee of Lourdes* find to be miraculous are revealed to be medically explicable some years later. The concentration on the single symptom reduces the eventual religious significance of the incident. Any therapy which reduces a problem simplistically must be suspect to all who seek to treat someone holistically.

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<sup>42</sup> Levin & Coreil, *op cit*, p891.

<sup>43</sup> *ibid*, p3.

<sup>44</sup> Martin, E., *Divine Healing: the Christian View* (Editorial), Journal of Roy. Coll. of General Practitioners, January, 1986, p3.

If one contrasts power healing with that which is guided by openness, it is possible to see the value of the latter. Percy stresses the point but Wimber cannot countenance failure: he relates Wimber's reaction to the death of David Watson which was, "The Devil murdered him!" Such is the rhetoric of tragedy which is used to explain failure. Wimber's theodicy takes no account of wholeness in so far as nothing but a successful outcome may suffice; gradations have no quality and thus have no reference to any qualifier such as wholeness.

Furthermore, Percy makes the concept of charisma central to his thesis and argues that movements which are dependent on charismatic leaders often fade with the decline of the inspiration supplied by the leader. Contrasted with the movements which Percy examines, it should be borne in mind that the Iona Community is almost sixty years old and has never claimed to have a leader in the field of Divine Healing. I contend that openness has kept the healing service alive and allowed it to evolve. Many of the members who have informed this thesis have experienced painful failure. To quote but two examples - Anna Briggs experienced the death of her husband due to a brain tumour and then went on to write eloquently about caring and writing hymns about healing and wholeness. In the summer of 1996, she suffered a brain haemorrhage which has radically affected her short-term memory. Another example that will be recalled from the text is L. D.'s account of her best friend's illness, marriage and death which she turned from a story of tragedy to one of the triumph of wholeness (see page 212).

Openness has been sustained by incarnational theology which guided all the work of the Iona Community from its beginnings and has been at the root of the new interest in both Celtic theology and creation theology. If Christ is embodied in everything, he is present in rejoicing and in suffering. The struggle to integrate all the ideas which have accumulated on Iona is a narrative of obedience to the guidance of the Spirit and has often been painful as when his Community wrestled with the 'New Age' ideas circulating around the Columba Hotel and lurking around the pressure to renovate the Nunnery.

George MacLeod often said, "Follow the light you see." That was the route he took in his search for an understanding of Divine Healing and its pastoral implications. Kelsey has identified the renewed interest in incarnational theology as a pivotal development in the understanding of healing which was also coupled with the disintegration of Newtonian physics. He concentrates on the theological changes caused by quantum theory in an earlier book<sup>45</sup> and cites Heisenberg's Gifford lectures of 1955 as an example of how a physicist spelt out how his theories should affect natural theology<sup>46</sup>. It would be a useful research project to consider the full implications of George MacLeod's understanding of matter which seems to correlate to views such as Heisenberg and Kelsey (see pages 82 & 95). MacLeod quoted Einstein on most occasions and did not appear to have any knowledge of the type of philosophical debate which would have enriched any understanding of both healing and the budding ecological issues. But then, perhaps by 1960 his academic curiosity was fading in the face of the urgency of the peace issue. He was, after all, following the light he saw.

Kelsey actually is more concerned with Jung's interest in the dream-like qualities of the Gospel as one might find in anthroposophy. He writes:-

It is then difficult to imagine that the Spirit of God himself could become incarnate in one human being, first received in the womb of a woman and then born as a human infant, or to see that at such a time there might have been the star, the visions of angels, the dreams of Joseph and the Wise Men, the forewarning and flight into Egypt? These things are scarcely incredible; rather they show the incarnation actually to be the ultimate extension of the action of Spirit in human life<sup>47</sup>.

Incarnational theology has provided an impetus towards a holistic understanding of the world and mankind's predicament both at the global level and the personal. The Iona Community has always been regarded as being a radical movement within the Church of Scotland and other denominations. The essence of such radicalism has been the assertion of incarnational theology over against a trend towards neo-

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<sup>45</sup> Kelsey, M.T., Encounter with God, Hodder & Stoughton, London, 1972.

<sup>46</sup> Heisenberg, W., Physics and Philosophy - the Revolution in Modern Science, Allen & Unwin, London, 1959.

<sup>47</sup> Kelsey, *op cit.*, p331.

orthodoxy and varieties of fundamentalism. Incarnational theology demands that love be all-embracing, and thus cannot be subject to the reductionism of other types of healing. It means that love of God is "embodied" in the very substance of life. Campbell asserts:-

The central Christian doctrine of incarnation is one which can seem shocking in its implications for those who want a wholly spiritualised faith. It locates the love of God unambiguously within the body and finds its invincibility in the simplest of bodily expressions.<sup>48</sup>

The result of such an attitude is that incarnational theology denies personal spirituality to the extent that it is only concerned with oneself. The tension which this has created within the Community over the last sixty years has led to many reforms, most notably in three areas: nuclear disarmament (which has not been a topic here), hymnology and healing with its implications for wholeness. The constancy of the concern of the Iona Community has been part of that reform and because it has not depended on any one charismatic individual, George MacLeod excepted somewhat, the concern for healing and wholeness has been sustained and has prevailed in the consciousness of the churches.

The openness to other ideas has produced a fertility which has helped to offer a pointer to the direction which others should take. The Iona Community has been considered a vanguard to reforms in the Church of Scotland and has successfully influenced the *Healing Committee of the Church of Scotland* and the Community has found its concerns published in hymnbooks and liturgies in many publications of the Wild Goose Group and many other anthologies. The authors of such material have not been noted for their membership of the Iona Community but for their wider contribution to Church life. In fact, the Iona Community has produced very few members who have publicised the work of healing in its name. They have done so as part of their Christian vocation rather than members of a body. Ian Cowie has perhaps been an exception but even this is doubtful. It is more accurate to suggest that they have commended the Community by their works in the various fields which have been revealed in case studies throughout this thesis. Stewart McGregor has

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<sup>48</sup> Campbell, A. V., *Paid to Care?*, SPCK, London, 1985, p83

applied all his efforts in hospital chaplaincy recognising and supporting the central tenets of the Iona Community but applying them in the pursuit of his vocation in the Royal Infirmary of Edinburgh. This means that the movement of healing has spread its influence not by the charisma of a healing leader but by the diffusion of influence by its members who have been inspired by the Community.

There have been several achievements or ideas have been incorporated into the open-ended approach to healing and wholeness adopted by the Iona Community and individual members. In summary, three achievements or landmarks are worthy of note. First, there is the integration of other therapies and methods into the thinking of many members. George MacLeod was open to the methods of Rudolf Steiner and to certain energies. Ian Cowie was likewise disposed and Ron Ferguson was quoted as being influenced by his sabbatical visit to Calcutta and Madras (See page 38). Ferguson gave an account of his sabbatical in India in *Grace and Dysentery* in 1987<sup>49</sup>.

Second, the development of the concept of 'brokenness' brought a fresh impetus into the life of both the healing service and confession in general. Sin was no longer a matter of deep personal guilt as it had been understood in the early years but was much more a human condition which could be healed and the opposite pole of wholeness could result in both the individual and in the state of the world and environment.

Third, as more members have joined who have careers in medicine or caring professions, the greater the awareness of the wounded nature of the healer has been a force for good. It is hard to think of a respondent in this survey who has not felt vulnerable in the light of the healing service, their vocations or the hurts of events in their lives. This generalisation might not extend to George MacLeod but Ron Ferguson does make reference to his vulnerabilities in his biography, and does so with great pathos in his play *Every Blessed Thing* which was premiered in 1993. The discussion of the 'wounded healer' has implications beyond the original religious significance which was suggested by religious populists. The twin concepts of 'gift'

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<sup>49</sup> Ferguson, R., *Grace and Dysentery*, Wild Goose, Glasgow, 1987.

and 'wounded healer' are cited by N. J. Fox who writes of the significance of the gift of the healer or of the carer in offering to a sick person his or her skills in order that they may basically survive<sup>50</sup>. Such giving can be painful and when combined with an awareness that you yourself are a wounded healer it can lead to a much more holistic approach to the sick person. The idea of the gift is reminiscent of Campbell's "moderated love" which nurses are expected to give to their patients despite the rather sexist assumptions about caring, which may impose professional burdens upon them<sup>51</sup>. The case studies show quite clearly that there is a resilience in the theology of the Iona Community which has carried most healers through what can only be classed as personal crises. This can only be achieved if theology is open enough to adapt to cognitive changes in a person's life. Without understanding the pain and anxiety of pursuing a vocation there cannot be the creativeness which has been witnessed here.

### **Personal Postscript**

Martin, whose comments on Lourdes were noted above, suggests that there are three groups of physicians and others who are interested in spiritual or divine healing:

1. Those who deny it completely, regarding "all healing as a biophysical process and deny the possibility of any supernatural intervention."
2. The view of the *International Medical Committee of Lourdes*, who would tend to force God into being a god of the medical gaps.
3. Those who wish to cooperate with divine healing, seek validation of those concerned and work with them.

Whilst these three categories would appear to cover anyone interested in the field, it does not seem to me to be adequate for my needs. After the survey of this thesis which of course has implied much consideration of the subject matter, it seems to me

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<sup>50</sup> Fox, N.J., *Postmodernism, Sociology and Health*, Open UP, Buckingham, 1993, p98ff. He quotes G. Bennet, *The Wound and the Doctor*, Secker and Warburg, London, 1987, as his main source.

<sup>51</sup> Campbell, A.V., *Moderated Love - A Theology of Professional Care*, SPCK, London, 1984.

that there is another category. There are those who understand healing and healers as a phenomenon which is beyond doubt, who may, like myself, believe that Jesus was a healer, yet have no explanation as to why the phenomenon exists. If no explanation is available, does one know by faith? I think not. It remains a mystery for which we should give thanks. The point about discourse analysis is that one does not have to make a decision, as the discourse itself reveals the answer in the richness of other people's lives.

## Appendix I

LORD, WE COME TO THEE

For Thy loving Presence with us, promised to us through the ages:

**We thank Thee Lord.**

For the Power given to us through the Holy Spirit to intercede for Thy weak and suffering children:

**We thank Thee Lord.**

For the health of soul and body given in answer to our prayers:

**We thank Thee Lord.**

For the gift for healing given to Thy Church and manifest in Thy members:

**We thank Thee Lord.**

*(Here take in any special occasion for thanksgiving: ending with the same response.)*

LET US BE DELIVERED FROM EARTHBOUND THOUGHTS BY REMEMBERING GOD'S ACT OF HEALING IN THE SENDING OF CHRIST.

FROM EARTHBOUND THOUGHTS MAY WE BE DELIVERED.

By Thy Holy Incarnation, by Thy healing ministry, by Thy stripes and wounds and by Thy resurrection from the dead:

**Good Lord, deliver us.**

By Thy human sympathy, by the touch of Thy hand, by Thy power over all evil, and by the voice that raised from the dead:

**Good Lord, deliver us.**

By the quickening of the Holy Spirit, by the medicine of the Sacraments, by the anointing of the sick with oil, by the prayer of faith, and by the sanctifying of all human knowledge and earthly remedies:

**Good Lord, deliver us.**

*(Here take in any special experience that has come to the group, such as, "By Thy power manifest among us in the restoration to health, now in this present time, of John..." ending with the same response.)*

LET US ASK GOD'S FORGIVENESS FOR OUR OWN FAILURE AND THE FAILURE OF OUR FELLOWSHIP IN THE PAST.

YEA, LORD, FORGIVE—

If we have broken Thy laws of health: if we have been ignorant or careless of Thy Commands: if we have brought suffering upon ourselves or upon others, by impurity, gluttony or intemperance.

**Forgive us, Lord.**

If we have despised or neglected our bodies: if we have misused and enslaved our minds: if we have allowed our spirits to become a prey to worry, distrust or despair:

**Forgive us, Lord.**

If we have abused Thy gifts of food and drink: if we have rejected the remedies of nature: if we have neglected the healing powers of the mind: and if we have forgotten Thee, the Great Physician.

**Forgive us, Lord.**

For all that time, and in this our Fellowship, blunts our witness and makes obstacles to Thine inflowing power:

Forgive us, Lord

Appendix I I  
FacsimileTHE IONA COMMUNITY, AUGUST, 1948.A few notes on D I V I N E H E A L I N G.

1. All healing is divine, whether brought about by physicians, surgeons, psychiatrists or Faith Healers, or without the assistance of any of them. "I dressed his wounds and God healed him." (AMBROISE PARÉ).

2. God does not will anybody to be ill; hence he ~~cannot~~<sup>must</sup> will all to be well, and it is not necessary to add, "if it be Thy will" to any prayer for health.

3. From this it follows that sickness must be contrary to the will of God, and its presence proves some interference with or limitation of the purpose of God.

4. It does not, however, follow that the sickness is due to the sin or folly or negligence of man, since there are clearly other disorders, such as earthquakes, tempests, floods and droughts, for which man cannot be held responsible.

5. On the other hand, there are many illnesses, particularly more of a functional nature, in which the disorder of the body is closely associated with the disorder of the mind, such as worry, anxiety, frustration, guilt, self-pity and self-centredness. They in turn are closely associated, either consciously or sub-consciously, with sin, which is disorder of the soul. It is this type of sickness which is most likely to benefit from spiritual as opposed to material treatment.

6. Human beings are obviously limited and to a large extent conditioned by their material needs, e.g. food, warmth and shelter, by the circumstances of their environment, and by their material nature, which involves the processes of birth, growing old and death.

7. We cannot, therefore, deny or avoid our responsibility for studying man's material nature or supplying, as far as possible, the material needs of all men.

- 2 -

8. There is then a place for doctors and nurses and others who minister to man's material needs. Such people are not more materialist than any others, such as carpenters, masons, engineers or bus drivers, whose work is concerned with material objects.

9. On the other hand, since man's nature is a trinity of body, mind and spirit, there is a clear need for the closest co-operation between doctors, psychiatrists and ministers of religion, if the goal of health or wholeness is to be achieved.

10. Faith is a necessary condition of spiritual healing. The hall-mark of such faith is not a conviction of physical cure but the conquest of fear, a surrender to God and a complete confidence in the reality of His love and the fulfilment of His purposes.

11. The command to preach the Gospel and to heal the sick, with the promise of power to carry out the double mission, was given to the whole Church, including the laity, and not confined to ministers of religion.

12. Hence the whole Church, and, in any given place, the whole congregation, bears this responsibility. Within this congregation there <sup>will be</sup> ~~with~~ specialists, e.g. parsons and doctors, who can and should contribute their special gifts and training to this work.

13. Any form of healing, or claim to effect cures, is bound to have a popular appeal since people are deeply concerned with sickness, in themselves and in their friends. Most people would sooner be cured of sickness than of sin.

14. The danger of over-emphasis on physical cure is increased by the dangers of sensationalism, superstition and magic.

15. The Doctrine of Divine Healing arouses no opposition except, possibly, from doctors out of professional jealousy. The political implications of the Gospel, the demand for peace and social justice, arouse all the opposition of vested interests in power and property. Preaching the Gospel may, therefore, require greater courage than healing the sick.

## Appendix III

### Letterhead

3rd July, 1995

#### Department of Christian Ethics & Practical Theology University of Edinburgh

Dear ,

On re-reading the letter which I sent to you some time ago, I now realise that some of it was very vague and obscure. I really do need your help and advice in order to write a worthwhile dissertation. I hope that with the help of a firmer letter you will be able to help. There are two themes to my dissertation: one is the openness of the Iona Community in all realms, but particularly in healing; and the other is that many people have found different paths to wholeness through their experience of life and understanding of theology or faith.

I would like to ask you the following questions:-

1. Have you memorable experiences of the healing service on Iona and/or elsewhere?
2. What do you understand by 'wholeness'? Does it imply body, mind and spirit?, and how would you apply your understanding to patients or clients?
3. The Iona Community advocates projects as a way of stimulating our commitment as New Members. Have you undertaken any project which might involve healing or wholeness? If you are in medicine, are you aware of holistic approaches and alternative therapies?
4. Do you approve of alternative medicine?
5. Are you aware of how the healing service came about and of George MacLeod's personal interest?
6. Can you describe any current or recent activity connected with the above?
7. All these questions have assumed your interest in healing and wholeness. Do you find that it is a total irrelevance to your life and work?

As David Lyall pointed out in his letter, it would be better if your comments could be attributed to you, but if you wish to make comments in confidence, please say so.

With my difficulties in writing it would be much easier if you could put pen to paper, but I shall bring a tape recorder to Community Week if any of you wish to give me an interview.

Shalōm

## Appendix IV

Tom Gordon, Chaplain  
[Address Supplied]

8 March 1995

Dear Graham,

Thanks for your letter. What follows is a rather rambling response. I hope it is helpful.

I first attended a healing service on Iona in 1973 during Divinity Students' week. I was very disturbed by it, and walked out of the second part - the laying on of hands. I could cope with the prayers for others - even by name, which was a strange experience for a douse presbyterian - but the other part was foreign to be. I didn't understand it. I was angry, confused, upset..... So I did what we are all inclined to do when we feel like that - I took myself out of the situation, I ran away! That service, my reaction and the reaction of others - those disturbed by it and those who felt liberated by it - sparked of a deep and important discussion during that week. And that meant - as I look back on it now - the beginning of a new appraisal, or indeed an introduction for me, of the idea of wholeness, the body, mind and spirit being one in a complete person, each part needing healed at different times. Ian Reid, the then leader, was very helpful, both in a corporate and in an individual sense. The seeds of my own growth, disturbing though it was, were sown.

I went then to work with John Cook in Easterhouse. John was - and is - a remarkable man, and he had a monthly healing service as part of his cycle of different styles of evening worship. During the service - based on the Iona style - those who wished hands laid on them moved to the end of the pew, and the leader of worship - not the community who were present, which is interesting - laid hands on the individual concerned. It was warm and personal, and there was as much healing going on in discussion/counselling afterwards. I myself felt no need to ask for laying on of hands. I was "well". Only the weak, or those with a specific ailment, needed this or so I believed at that point. But I had no more animosity for it. It was just that it was to do with other people and not me.

I was invited, quite early on in my assistantship, to lead one of these services. I had already - thankfully, and despite the particular style of the service itself - moved away from any concern I might have had that one person could have healing powers, and that I would not be good enough - or even wish to take on that mantle. I did find, however, that preparation for and conducting of the services was both moving and challenging. The whole Iona thing about the whole community of faith being the context in which healing takes place was the primary focus and lasting impression of those services. Even when John Cook indicated that he personally had been relieved of a specific pain in the laying on of hands one evening, I did not feel that was me. It was only my facilitating the community of worshipping people to be a channel of healing and wholeness, and it was that community of faith that had been a channel of healing.

In these services, therefore, and in the discussions afterwards, allied to the continuing pastoral care of the people concerned by all who ministered to them in the life of the congregation, developed my understanding of wholeness, as well as helping me to see the rightness of the healing approach in Iona, that it belongs to the whole people of God, and can find its focus in the gathering of the people for worship, prayer and the laying on of hands.

In moving to my first parish, I did not have the personal confidence to begin a healing service. This was more to do with church structures and their intimidating effect on me and not in any sense because of a diminishing of the growing validity of healing services in my understanding of the church.

I should also say that during this period of a few years since my initial exposure to the healing service on Iona, I had attended the healing service in the Abbey on a number of occasions. Three things are clear as I look back on that now. Firstly, I had the confidence to lead a healing service on Iona when I was asked to because of my experiences in Easterhouse. Secondly, the close link between prayer and the laying on of hands became clearer. And thirdly - and this was quite a revelation to me - that I myself needed to kneel for the laying on of hands. That was all about admitting my own weaknesses, and placing myself in the hands of God's people and God's power, but also because I was in my ministry carrying concerns for many people, and they could have access to healing through hands being laid on me.

This last part - needing to be healed because I cared for others - is now very important to me. That healing - manifested in support of the christian community, in going for my own counselling, and in the laying on of hands in Iona and elsewhere - continues. It matters. My wholeness is crucial if I am to help heal others. They can be healed as I am healed on their behalf.

It is important to me, therefore, to see my healing in Iona, and in the context in which I live and work, to be both for me and for and on behalf of others. I recall some years ago hearing a minister say to a dying man who had told him he was unable to pray such was his fear in the face of death, that in his "barrenness" of prayer-life he - his companion on the journey - would do the praying for them both. Not praying only for his friend, but praying his prayers for him. I did not understand what that meant then. But I do now.

As I have moved now into hospice chaplaincy, four things are uppermost in my mind which I feel are related to the above. Firstly - and this certainly comes from Iona - that as we seek to care for the whole person in a palliative care environment, the spirit needs to be healed. And even when the body is dying, healing can go on. People can die healed, and do. I understand that now.

Secondly, the offering of healing is not confined to this medicine or that, this "right" word or that, or even this God or that..... It is about a deeper power working in a person, that you and I, and the wider community of carers, can facilitate or be a part of, but which is much bigger than any narrow confine we can define.

Thirdly - and this is what the previous paragraph brings me to - I have to go on being healed, loved, supported, prayed for, and all that means, all the time in order that I can have any part to play in the healing of others.

And finally, I am convinced of this - the spiritual dimension of our wholeness is not confined, and cannot be confined, by the religious. It can be defined by religious language and symbols and even doctrine, but not confined by it. Let me unpack that a little more fully.

The Hospice movement exists to provide palliative care and support service to people with life-threatening illnesses, their carers and their families. This work is undertaken by a group of disciplines with skilled knowledge and experience, some of which interlink and overlap, and one of which is the chaplaincy. My role as a chaplain in a hospice, therefore, represents a commitment that, along with the work of the other disciplines, the hospice meets the totality of the needs of patients and their carers. One facet of the chaplaincy is to help colleagues in the multi-disciplinary team, patients and carers to raise and discuss deeper issues than those around their immediate disease process.

With patients, their carers, other members of the multi-disciplinary team and other professional colleagues, the functions of chaplaincy include : provision of pastoral care and counselling; provision of an ethical, theological, existential and pastoral resource; and provision of opportunities for worship and religious expression and for acknowledgement and interpretation of issues raised in dying and death.

If we believe - as I do - that at the heart of being human is a spiritual experience, then the spiritual dimension can be challenged and dislocated in the face of life-threatening illness. Spiritual care and healing, therefore, is the recognition of this dimension in order that people can be supported in their search for meaning, faith and hope be enabled to recognise the wholeness of life within dying and death.

It is in the area of existential thought, therefore, that I find myself operating more and more, seeking new language, symbols, signposts or whatever, with those who are "dislocated" - including from a specific religious framework (cf. the Psalmist - "My God, my God, why have you forsaken me?") - and who need help both to acknowledge and interpret their "suffering" of the spirit. The whole Iona process helps me not only understand the validity of being in that place as a chaplain, but to feel the rightness of me personally working with these issues. It also helps me to see that this "spiritual healing" is not in my hands alone, but as I play my part in all the care that is offered by all the people in all their different ways for all the issues a patient or a carer - or even a member of staff - is living with. Healing belongs to a community of love!

Graham, this has been much longer than I had anticipated. I hope it makes sense - even in bits! It has been good for me to write it in any event!

All good wishes for your studies. If I can have played a little helpful part in that then I will be delighted.

Yours in Christ - and in his healing Community

Tom Gordon

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