

Provincial Synod: Executive Meeting, March 24, 2014

Pastoral Counselling, the College of Psychotherapists and a need for clarity within health-care pastoral ministries.

In response to the Ontario Government's decision of 2007 to regulate that part of the health care sector which provides mental health services, a College of Registered Psychotherapists and Registered Mental Health Therapists of Ontario (CRPRMHTO) was proposed.

The function of the new College was to regulate psychotherapists and mental health therapists in the public interest striving to ensure that practitioners were competent, ethical and accountable.

For some time, professional chaplains have advocated for inclusion within the mandate of the College under the classification of Mental Health Therapist. If the Canadian Association of Spiritual Counsellors, (CASC) had been successful, such inclusion would or could have required all clergy who engage in pastoral counselling to become members of such a College.

However, over the past several years, as the Transitional Council for the College of Psychotherapists and Mental Health Therapists continued their work, it became clear that there is a lack of clarity as to where pastoral counselling lies within the spectrum of psychotherapy and mental health. Does pastoral counselling involve psychotherapeutic or mental health therapeutic methodologies? If so, how would the distinction be made? How might it be monitored or evaluated? Where does mental health care end and pastoral care begin?

The Provincial Synod of Ontario believes pastoral counselling rests within that ministry which is protected by the Ontario Human Rights Code allowing for freedom of religious practice. As such, inclusion of pastoral counselling within the control of a professional college would be considered unduly burdensome and would infringe upon the pastoral ministry of most clergy.

In the spring of 2011, the Venerable Dr. Harry Huskins, in consultation with Provincial Chancellor Christopher Riggs had written to Joyce Rowlands, CRPRMHTO Registrar, expressing concern *"that clergy will be able to continue to perform their traditional functions of providing counselling and spiritual care without impediment under the legislation."*

In November of 2012, Suzanne McGune, Assistant Deputy Minister, Health Human Resource Strategy Division wrote to the Transitional Council informing them that *... after extensive policy and legal reviews of the proposed legislation .. proposals to regulate mental health therapists who do not practice psychotherapy cannot be included within the Psychotherapy Act of 2007, (paraphrase).*

In October of 2013, Joyce Rowlands, wrote to Mr. McKenna, Chair of the Canadian Association of Spiritual Care, Ontario Council *... As you know, there has been controversy in Ontario that may also be causing concern in other parts of the country (or so we are told), on the question of whether chaplains and other spiritual care providers will be required to become registered with the new College of Registered Psychotherapists of Ontario. The short answer to the question is, 'no', they will not,*

Therefore, as this legislation proceeds towards being acclaimed by Queens Park, (most likely this year, depending upon possible election interruptions) hospital chaplains **will not** be required to become members of the proposed College of Psychotherapists.

However.... questions remain which must be answered.

Once the College of Psychotherapists is proclaimed, hospitals, which uphold CASC membership as a qualification of employment, may require staff chaplains to hold membership within the College as well. As the focus of training within the college will be the practice of psychotherapy, the spiritual and religious dimension of chaplaincy may be lost. Regardless, the additional training involved to qualify for membership within the College will place additional demands upon the resources of both individuals and Diocese regarding such training.

Therefore, Diocese's may be required to evaluate how they can remain committed to the ministry of health-care chaplaincy.

It may be prudent for the Provincial Synod to monitor this concern and if necessary join with other faith communities in advocating to the Ontario Hospital Association that chaplains need not be members of the College of Psychotherapy, especially those chaplains who are financially supported by faith communities.

When the College of Psychotherapy is proclaimed, the Provincial Synod must encourage those Diocese which currently endorse lay chaplains to review this practice. Such endorsement may not be necessary, or prudent once the College is proclaimed.

It is difficult to anticipate the full impact or implications upon the ministry of health-care chaplaincy once the College of Psychotherapy is proclaimed. With CASC choosing to become a member of the College, it is certain current training programs will change in both focus and content. Therefore, it is recommended to the Executive that the Provincial Synod continue to monitor both the developments of the College of Psychotherapy and the evolution of CASC training programs for health-care chaplains, especially in within the context of the Ontario Human Rights Code and its application to freedoms of religious practice.

Submitted
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Definitions:

Psychological Counselling (psychotherapy)

Scope of practice: The practice of psychotherapy is the assessment and treatment of cognitive, emotional or behavioural disturbances by psychotherapeutic means, delivered through a therapeutic relationship based primarily on verbal or non-verbal communication.

Controlled Act of Psychotherapy: In the course of engaging in the practice of psychotherapy, a member is authorized, subject to the terms, conditions and limitations imposed on his or her certificate of registration, to treat, by means of psychotherapy technique delivered through a therapeutic relationship, an individual's serious disorder of thought, cognition, mood, emotional regulation, perception or memory that may seriously impair the individual's judgement, insight, behaviour, communication or social functioning.

Religious / Pastoral Counselling

Faith traditions and communities often speak of spiritual, religious or pastoral counseling as occurring within the context of ministry. Ministry is not an abstraction. Ministry is exercised by people and within relationships that are situated in a particular place and a particular time within the milieu or organization of a faith tradition and community. (*R. R. Gaillardetz, Towards a Contemporary Theology of the Diaconate: Worship. Vol. 79, #5, Sept. 2005.*)

The client therefore knows and understands that they are involved in either spiritual, pastoral or religious counseling rather than psychotherapy because there is a *faith or spiritual dimension* to the counseling relationship or context. This dimension is usually identified by the identity of the counsellor, and her/his professional and organizational affiliation.

Spiritual, pastoral and religious counseling is distinct from other forms and methods of psychotherapy because of the assumed spiritual or religious dynamic within the counseling therapeutic relationship. There is the underlying faith assumption of the pastoral or religious counselor and the assumed presence of a *spirituality* within the approach of the spiritual counselor.

While faith, religion and spirituality arise as common themes within almost all forms of psychotherapy, what distinguishes pastoral and religious counseling is the accountability of the counselor. The pastoral or religious counselor functions partly as a representative affirmed by their faith community. (*Rodney J. Hunter, General Ed., Dictionary of Pastoral Care and Counselling, Abingdon Press, Nashville, USA, 1990*)

*Therefore, religious/spiritual/pastoral counselling is primarily supportive in nature and content. Individuals whose needs exceed supportive counselling **must** be referred to appropriate qualified professionals.*