Ultimate Challenges

Brian Thorne

SYNOPSIS

Fired by Carl Rogers, the writer reflects on the state of the helping professions in Britain. His despair is offset by his recent experience as a cancer patient and by a transformative friendship with a young woman who, trained as a counsellor, finds it impossible to pursue her vocation as a therapist because of the assault on her integrity by excessive 'professionalisation'. What hope there is lies in young people throughout the world who dare to live truly loving lives. The 'scourge' of cancer may paradoxically also have within it the promise of a more holistic way of being.

Carl Rogers was nearing his 71st birthday when he delivered his 'New Challenges' address to the American Psychological Association at its annual conference in Honolulu (Rogers, 1973). He was speaking against the background of a successful (if, at times, controversial) professional career, the satisfaction of being a widely published author and the knowledge that he was still much respected and sought after as a speaker, facilitator and group leader. It was to be another five years before I met him personally but, by then 76, he had by no means lost his motivating energy or ability to think and act creatively and, often, provocatively. He was a man who was enjoying the liberation that comes from possessing a firm sense of identity and from having little or nothing to lose. There can be little doubt that in Honolulu, and many other locations subsequently, Carl relished and enjoyed the opportunity to speak his mind bluntly and thus to cause some of his listeners no little discomfort.

I am now the same age as Carl was when I first met him in Madrid. While clearly lacking so distinguished a track record, I am conscious that I too have made a reasonable contribution to my profession, have written several books and enjoy a modicum of public recognition. I ceased to be a practising therapist eight years ago, have probably written my last book, and confine myself these days to the art of spiritual accompaniment, to deepening my personal relationships and to furthering my devotion to a mysterious God. For me, the hurly-burly of an overcrowded professional life is over, there is time and space for reflection and, like Carl, I enjoy the liberty that tells me I have nothing to lose. I have always tried to be transparent in my writing but now, it seems, there can be no possible reason for being anything other than fully expressive of my most pervasive thoughts and feelings as I ponder the current state of the so-called helping professions and their likely future. This article will consequently not make for comfortable reading.

Carl in his American Psychological Association address repeatedly challenges his listeners to 'dare'. Daring means risk taking, facing the possibility that you may be wrong, almost certainly going against the mainstream and, as a result, earning the opprobrium or even the condemnation of the, often, self-appointed authorities. Such daring requires courage, moral conviction and a willingness to face censure and, in the worst cases, ridicule and humiliation. Those in the helping professions run the gravest risks in this world of daring, for the raw material of their endeavours is the human person and human relationships. Notoriously, those who seek to

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penetrate beneath the surface of the human personality and of human bonding find themselves caught up in the turbulence of the heart’s affections and afflictions and are easily shipwrecked. A scoffing world can then decry their foolishness or, if they are helping professionals, their irresponsibility and failure to observe professional codes and boundaries. So-called ‘safe practice’ requires that clients firmly remain clients, cases are subject to paper trails that cover backs, practitioners are subject to rigorous supervision and avoid all compromising ‘involvements’. This is the professional police state, where to ‘dare’ is a foreign concept and where, on the contrary, to conform is necessary for survival. The revelation in more recent times of multiple cases of sexual and physical abuse by persons in positions of power and trust has muddied the waters even further. Nobody, it seems, can be trusted, and all systems of caring must now be constructed on the premise that monitoring is of the essence and signs of intimacy are almost certainly warning signals.

There are those who would suggest that I grossly exaggerate and that things are not that bad. I shall, however, need some convincing. I am only too aware among my own acquaintances of those excellent counsellors, social workers and teachers who have left their chosen profession because they can no longer breathe in the straightjackets which they are forced to wear by their employing agencies or management structures. There are, of course, countless others who continue to function because they have families to support and mortgages to pay but, for many of them, the light has gone out. Heart and soul are stifled and Big Brother lurks round every corner. The gravity of the situation and the toxic nature of the prevailing climate have been brought home to me in a particularly poignant way in recent months, and I want to put this narrative on record for it has implications for the future, whether construed in darkest terms or seen as threaded through with strands of hope.

Last year I was diagnosed with prostate cancer – fortunately at an early stage – and opted for a somewhat lengthy course of radiotherapy. This was not particularly disabling but it necessitated some disruption to my normal existence and daily visits to my local hospital. It also brought me into contact with a number of ‘helping professionals’ as well as revealing to me the power of what I have come to regard as ‘liberated friendships’. My consultant and the array of radiologists who treated me during this period were highly competent practitioners and soon proved themselves to be a bunch of fine human-beings. It was only gradually that I began to realise that the nature of my illness and of my own personality were making major contributions to this situation. Prostate cancer cuts through inhibitions immediately. The most intimate parts of the anatomy are the seat of the illness and the location for treatment. Vulnerable, exposed and utterly at the mercy of the professionals, I found myself – to my unexpected delight – in the position of having no responsibility apart from making myself wholly available to their care and meticulous attentiveness.

Attitudinally my spiritual understanding of the divine dispensation stood me in excellent stead. My task, I saw, was to allow myself to be loved and to trust that those treating me would avail themselves of the permission thus granted. The result was little short of astonishing. What had promised to be a marathon of invasive treatment became for me a daily encounter with human-beings – both professionals and my fellow patients – who were released into a loving responsiveness which made the whole experience deeply satisfying at an emotional level. It was also to prove clinically effective. There was something amusingly symbolic about the news my consultant gave me when we last met. She was pregnant (for the first time) and would have to abandon me (but only for a year!). Illness, vulnerability, preparedness to be loved had released, it seemed, such a flood of loving in this overworked NHS hospital department that it was scarcely surprising that new life should appear in the womb of a consultant doing her job – with love.

Outside the hospital walls something else was happening – a nascent friendship was ‘liberated’ with equally remarkable results. I neither own nor drive a car

and the hospital is some distance from my home. A young woman volunteered her services as my chauffeur and, somewhat reluctantly at first, I accepted the offer. I knew her, liked her, shared with her a love of God and Church, but it was difficult to believe that getting up at crack of dawn to transport me to the hospital was not massively inconvenient, especially when it looked like becoming a regular arrangement. I expressed my anxiety, she frowned and wrote to me. In no uncertain terms she made it abundantly clear that all I had to do was allow myself to be loved and to stop fretting. I complied and we now enjoy a friendship which is transformative. We are not 'in love' and there is no possessiveness and no entrapment. We teach each other what it means to live 'in love'. In some ways, this 'liberated friendship' is the flagship of a whole 'fleet' of other relationships which now enhance my life. It would seem that my vulnerability, together with my willingness – indeed keenness – to be loved have released in others (some of them waiters and waitresses in restaurants I frequent and whose names I do not always know) a capacity for affection and affirmation which sometimes takes my breath away.

There is, however, a sad undertow to this narrative. My hospital chauffeur is a highly intelligent woman. She has a higher degree, is a trained counsellor and has helped to train therapists. She is something of a philosopher, writes poetry, and is fascinated by theology. She more than holds her own in discourse with an emeritus professor who has not yet succumbed to senility. By any normal criterion she should, by now, command a position of some significance in the counselling world. In reality, she earns a precarious living working usually as a scandalously underpaid care assistant wiping incontinent bottoms and washing the bodies of physically impaired adults. Despite the terrible pay she derives some satisfaction from this work because, in her own words, 'it enables me to love'. She has, of course, attempted to earn her living as a 'conventional therapist' but the experience has been more than she can bear. The complexities of codes, regulations and bureaucratic requirements have meant that the demands of integrity, the imperatives of her organism and her invincible vocation to live a loving life have made it simply impossible for her to remain in post. To put the whole matter starkly and unambiguously: being a professional counsellor in our current culture, for this sensitive and ruthlessly honest person, has proved to be a violation of her innermost being and an assault on her soul. And yet I know from my privileged experience that she has abilities and life-enhancing gifts which are totally exceptional. She is, I believe, a potent symbol of what can happen when a person with a commitment to personal integrity and to the demands of love seeks in vain to find a role in a culture where arrogant but craven intellect has become so divorced from the heart's desires that men and women, who are not intrinsically malevolent, are trapped into behaving insanely and can even come to believe that the insanity is the mark of a responsible society. And so it is that counsellors are frightened to offer intimacy to their clients and eschew life-giving involvement, teachers are forbidden to embrace children who are dying of emotional starvation, social workers are buried in paper work or drown in fear-inducing emails from their supervisors who live in dread of the media, doctors peer at their computer screens, juggle with budgets for hideously expensive medications and do not relate to their patients, human resources experts interpret ever more complex employment law, devise processes for competency machines (i.e. employees) and lose track of persons in a mass of grievance procedures. Everywhere, it seems, insanity is disguised as a proper concern for fairness, for scrupulous attention to 'playing it by the book' and, most insane of all, for protection of the individual.

Carl Rogers foresaw the advent of this nightmarish scenario. In his 'New challenges' paper he conjures up the fantasy (a 'bit despairingly', he admits) of a time when 'students and psychologists in general could function as whole persons – not as minds walking around on stilts, or headless feelings muttering wild cries to each other'. He goes on to pose the question: 'Could we accept ourselves as total organisms, with wisdom in every pore – if we would but hear and be aware of that wisdom?' (Rogers, 1973: 387). His vision may have been a vain illusion in 1972; today it seems so far removed from any possible reality as to be unimaginable. And yet, it has all the marks of precisely the wisdom which Rogers believed to be inherent in every human-being. His is the voice of the profoundest sanity in an increasingly mad world.

It will be apparent that I hold out little hope for the helping professions if, as seems likely, they continue to pursue their present trajectory. I see only the intensification of the nightmare as head and heart grow ever more apart and the obsessive preoccupation with 'safe practice' tightens its neurotic grip. The era of 'daring' for which Rogers longed will become the remote fantasy of dreams, and the machine age will become established where the most seemingly intelligent human machines reign supreme and the whisperings of the heart become ever fainter. To complete the depiction of doomsday, it

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needs to be said that the insanity of human fragmentation and the dislocation of head, heart and soul are equally apparent as we grapple as a species (or fail to grapple) with the mighty issues of violence, war, climate change, economic turbulence, population growth and all the apparently intractable threats to the very existence of our fragile planet.

Do I, then, capitulate to despair? The temptation is certainly very great but I resolutely cling to hope. These last few months have nourished that hope in the unexpected ways which I have attempted to describe. My experience as a cancer patient showed me that I and others with me could relax into being trusting, vulnerable recipients of the care provided by practitioners who were both wonderfully efficient and discreetly loving. Could it be, I ask myself, that cancer, which is seen as the great scourge of our times, may be our salvation? The suffering it induces galvanises us, it seems, to draw upon the very best of our resources. As sufferers we are compelled to acknowledge that we are deeply affected in all aspects of our being: we are forced into an awareness of the close links between soma and psyche, we are confronted by our mortality, the snares of materialism and selfishness recede. Society, at large, takes cancer seriously and, as a result, the doctors, nurses and other ancillary workers know that they are caught up in an existential drama of profound import. It is as if the very power of the disease gives them permission to be more fully themselves, and the result is a breakthrough into a more holistic way of being where weeping and laughing have their place, and loving and radiotherapy machines can inhabit the same room. Suffering of this magnitude opens up the path to love, and in the cancer clinic I glimpsed glimmers of hope.

My remarkable new friend is an even greater source of hope although there are times, I know, where she is herself on the verge of despair. She is young, she is intrepid, she is determined not to lose hold of her humanity, and her sense of vocation is so strong that she is all but compelled to remain true to her conviction that she is called to love. I am sure she is not unique. She is, I believe, representative of young people throughout the world who are determined to remain sane in the insane world with whose creation their parents and grandparents have sadly all too often colluded. I believe that such young people have no option but to dare to live lives where they refuse to be anything other than themselves as total organisms 'with wisdom in every pore'. My young friend has renewed the same determination in me so that I know even more assuredly that all that really matters is to love and to be loved and that this simple truth can ultimately save the world – that, together with the remarkable resilience of Nature and the refusal of a Divine Lover to abandon the beloved.

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Reference

Rogers, C.R. (1973) 'Some new challenges', *American Psychologist*, 25 (5): 379–87