This volume contains the chronological publication of seven inaugural lectures that were given on the occasions of the acceptance of the Endowed Chairs, established by KSGV at several universities in the Netherlands and Flanders. All the Chairs have the domain of religion/worldview and mental health as their main concern. These academic lectures reflect the issues, related to mental health, that were and are fostered by KSGV and its precursors. The first lecture was given in 1996 by Marinus van Uden, who had already started his work in 1994. The most recent lecture was given by Peter Verhagen, in 2022. Hence, these lectures cover a period of almost 30 years. Establishing Endowed Chairs on behalf of KSGV has contributed to the development of an ‘academic infrastructure’ for the study of mental health, religion, spirituality, and meaning-making, at five universities (Tilburg, Groningen, Utrecht, Leuven, and Nijmegen), in five disciplines (psychology, theology, sociology, psychiatry, and philosophy). In this way, this journey of academic establishing time and again reaches a new stop on ‘the long and winding road’ of religion and mental health.

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The Long and Winding Road

Religion and Mental Health through the Years
International Series in Mental Health and Religion

5

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The Long and Winding Road

Religion and Mental Health through the Years

Marinus H.F. van Uden & Peter J. Verhagen (eds.)
International Series in Mental Health and Religion

published in collaboration with

KSGV

KSGV is an independent Dutch association that aims to explore the relationships between faith/religion/meaning and mental health.

To this end, KSGV endeavors to inspire a scientific investigation of and reflection on current religious issues in mental healthcare and in society. It pursues a critical discernment regarding a mentally healthy approach of religion and meaningmaking.

KSGV issues publications since 1952.

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Introduction

Marinus van Uden & Peter Verhagen

This volume contains the chronological publication of seven inaugural lectures that were given on the occasions of the acceptance of the Endowed Chairs, established by KSGV at several universities in the Netherlands and Flanders.

All the Chairs have the domain of religion/worldview and mental health as their main concern.

This collection of academic lectures is more than just an occasional edition. They reflect the issues, related to mental health, that were and are fostered by KSGV and its precursors. The first lecture was given in 1996 by Marinus van Uden, who had already started his work in 1994. The most recent lecture was given by Peter Verhagen, in 2022. Hence, these lectures cover a period of almost 30 years.

KSGV (Katholiek Studiecentrum voor Geestelijke Volksgezondheid) [Catholic Study Centre for Mental Health] is a scientific organisation focusing on the relationship between religion/worldview and mental health. At present (2022), KSGV has well over 800 members, among whom a large number of spiritual caregivers and pastors, psychologists, psychotherapists, and psychiatrists. In 2006, the term Katholiek (Catholic) was replaced by Kenniscentrum (Expertise Centre), and KSGV continued as Kenniscentrum voor levensbeschouwing en geestelijke volksgezondheid [Expertise Centre for Worldview and Mental Health]. Since 2016, KSGV participates, together with four other Dutch organisations in the domain of religion/worldview and mental healthcare, in a new cooperative, the FZGG: Federatie Zingeving en Geestelijke Gezondheid [Federation Meaningmaking and Mental Health]. The other participants are the Christelijke Vereniging voor Psychiater, Psychologen en Psychotherapeuten (CVPPP) [Christian Association for Psychiatrists, Psychologists and Psychotherapists], the Kennis Instituut Christelijke GGZ (KICG) [Knowledge Institute Christian Mental
Healthcare] and the Stichting Psychiatrie en Religie [Foundation Psychiatry and Religion].

KSGV’s role can be elucidated by means of three themes.

Immediately after World War II, long before the term existed (at least as it is used in today’s psychological language), the pursuit of a ‘positive mental health’ was being advocated (Westhoff, 1996, 81ff). The Catholic movement for mental health participated in this pursuit.

Establishing Endowed Chairs on behalf of KSGV has contributed to the development of an ‘academic infrastructure’ for the study of mental health, religion, spirituality, and meaningmaking, at five universities (Tilburg, Groningen, Utrecht, Leuven, and Nijmegen), in five disciplines (psychology, theology, sociology, psychiatry, and philosophy).

KSGV is also contributing to the societal discussion. To that end, KSGV is issuing Dutch-language publications in the series Geestelijke volksgezondheid [Mental Health], and in addition publications outside this series are issued regularly. Furthermore, there is the English-language international series: International Series in Mental Health and Religion, of which the present publication is the fifth volume. Moreover, in the framework of this societal discussion, KSGV organises annual study days in the Netherlands and, since many years, also in Flanders. All this can be considered fairly unique.

In the following, we will further elaborate on the themes of ‘positive mental health’ and ‘academic infrastructure’.

Positive mental health

KSGV has evolved out of the R.K. Charitatieve Vereniging voor Geestelijke Volksgezondheid [RC Charitable Association for Mental Health], which was founded in 1930, and after World War II was named the Katholieke Centrale Vereniging voor Geestelijke Volksgezondheid (KCVGV) [Catholic Central Association for Mental Health]. In 1972, when in the Netherlands the existing denominational associations in the area of mental healthcare merged into the then Nederlands centrum Geestelijke volksgezondheid (NCGV) [Dutch Centre Mental Health], nowadays the Trimbos Institute, KCVGV was transformed into the Katholiek Studiecentrum voor de Geestelijke Volksgezondheid (KSGV) [Catholic Study Centre for Mental Health].
In this context, the role of F.J. Buytendijk (1887-1974) is worth mentioning; he had converted to Catholicism in 1937 and took office as chairperson in 1948. He was professor in Utrecht, Nijmegen, and Leuven, in general, theoretical, and comparative psychology respectively (Abma, 2015). KCGV’s efforts so shortly after the war were not only focused on psychological unhealthiness, or on preventing it. It was also about positive mental health, although we probably are not used to assign such an early date to the use of this term. After all, in its present-day meaning the adjective ‘positive’ in combination with health, psychology, and psychotherapy has come into fashion around the start of this century (Seligman, 2004), even though nowadays we are willing to seek its roots much deeper and even to connect it with William James’s (1842-1910) concept of ‘healthy-mindedness’ and religion. Hence, immediately after World War II positive mental health should particularly be seen as a striving for mental hygiene and mental health within a context that at that time still was Catholic.

But what then is mental health? Maybe there was no need to invent this concept, but it surely had to be developed further. H.M.M. Fortmann (1912-1970) would soon remark that the guiding question in mental healthcare should not be what is good, but what is healthy (Fortmann, 1974). In the search for answers to this question, someone like C.J.B.C. Trimbos (1920-1988) played a large role, alongside others. Trimbos became one of the founders of the Dutch social (non-medical) psychiatry. He is known as one of the people who have taught Catholics to talk about issues that were saddled with guilt and shame (Westhoff, 1996). It sounds almost contemporary to hear him say that, from a psychohygienic perspective, humankind’s suffering is inherent in their existence, and that it should not be seen as just something that should be eradicated.

Anyway, with this we are on to two thoughts that, with all the changes and complications in mental healthcare since that time, are firmly on the agenda again: 1) what is the significance of religion, spirituality, and meaningmaking for mental health, and 2) positive health, also nourished by religion, spirituality, and/or meaningmaking, cannot be put on a par with eradicating suffering. From 1972 onward, however, all this gets a completely new organisational focus in the efforts to transcend the pillarisation of mental healthcare. The Catholic movement for mental health then continues in KSGV. On several
occasions, attention has been paid to KSGV’s history, like in 2015 at its eighty-fifth anniversary (Abma, 2015), and earlier at its sixtieth anniversary (Fortmann, 1990). However, these jubilees hark back to the foundation of the R.K. Charitatieve Vereniging voor Geestelijke Volksgezondheid in 1930 – an appropriately documented history still is long in coming.

**Academic infrastructure**

For many years, empirical research regarding mental health and religion was dominated by input from the English-speaking regions. By establishing a first Endowed Chair in 1994, KSGV was able to gradually accomplish its own input in this area of research, alongside that which was being achieved from the angle of the academic psychology of religion. A red thread that can be observed in the inaugural lectures of the Endowed Professors is the shift from institutional religion to individualised religion and meaningmaking (‘lived religion’). Of necessity, this shift went hand in hand with a conceptual re-orientation regarding the meaningmaking process, and with shifts in the concrete research questions fitting into this. On the other hand, the attention for religion in the narrower sense did not disappear. Time and again, professional attitudes, knowledge and competences emerge in order to make clear that religion, spirituality, and meaningmaking are not incidental, optional aspects of mental health, but are intrinsically connected with psychological functioning, and hence are also intrinsic aspects of the professional practice of the care disciplines. Although much has already been said and written about this, it is far from self-evident. This makes – to mention a third aspect recurring in these lectures – the project of religion and mental health in particular also an interdisciplinary affair. That still is a big challenge. Although almost everybody is claiming that neither mental health nor meaningmaking can be studied solely from this or that discipline, this does not yet make actual interdisciplinary research a habit. In short, there still is enough to do. Having developed an academic infrastructure, KSGV can consider itself lucky with the opportunities that are available in this way. Many PhD projects in the area of religion and mental health have meanwhile been successfully completed, supervised by KSGV professors.
As mentioned above, KSGV has established its first Endowed Chair of 'Worldview and mental health, with special attention for the psychological aspects' at Tilburg University in 1994. This Chair had its focus on the role of worldview and religion in mental healthcare, psychological helpgiving, and psychotherapy. The Chair was held by Prof Dr Marinus van Uden, clinical psychologist and psychotherapist, until the end of 2019. On 2 February 1996, he assumed his office with his inaugural lecture, titled 'Between meaningmaking and finding meaning. En route in the clinical psychology of religion'. In his lecture, he addresses the tension between religion as a meaningmaking system versus religion as a domain in which meaning can be found. Hence, between making meaning and finding meaning. He illustrates this by means of a case study of a patient with severe obsessive complaints, and shows to what extent religion here can perform a pathogenic as well as a supportive function. Finally, he points to the importance of creativity and fantasy, in order for the helpgiver and the one requesting help to be able to abide together in what Winnicott (1971) called the 'intermediate sphere' and Pruyser (1992) the 'illusionary world'.

In 2005, a second Endowed Chair was established, at the University of Groningen, 'Worldview and mental health, with special attention for spiritual care'. This Chair is held by the theologian Prof Dr Hetty Zock. She assumed her office on 13 March 2007 with an inaugural lecture, titled 'Not of this world? Spiritual care and meaningmaking from the perspective of the psychology of religion'. She describes and analyses the shift within the profession of spiritual caregiver from denominationally oriented to care for meaningmaking. Parallel to this runs the change in the work that spiritual caregivers are doing, from being religious functionaries to being meaningmaking experts. Connected with this, there is a change from a denominationally endorsed training and institutional endorsement to a non-denominational professional practice without endorsement. All of this demands a reflection on the spiritual caregiver’s profession, as well as a renewed consideration of the relationship between spiritual care and psychology. In the light of these developments, spiritual caregivers are required to have hermeneutic as well as psychological competences.

In 2012, a third Chair was established, at the University of Humanistic Studies in Utrecht, 'Worldview and mental health, with special attention for psychiatry'. This Chair is held by the psychiatrist
Prof Dr Arjan Braam. He gave his inaugural lecture, titled ‘Worldview and psychiatry: Christ delusion or Cross-table?’, on 24 October 2013. Arjan Braam formulates two purposes for the Chair. In the first place, stimulating empirical research regarding the interplay between worldview and various psychiatric problems. In the second place, becoming more sensitive to meaningmaking questions and worldview in clinical practice: which vocabulary and which attitude will stay helpgivers in good stead? An assumption in this context is that the conversation about meaningmaking and worldview will put the helpgiver in a more equal position with the client. Would Buber’s ‘Ich und Du’ [I and Thou] actually resonate more in the psychiatric treatment practice than expected?

A fourth Chair was established in 2015, again at Tilburg University, held by the psychologist of culture and religion Prof Dr Jos Pieper, named ‘Worldview and mental health, with special attention for the societal aspects’. It was ksgv’s intention to raise the themes of worldview and mental health not only in the domains of clinical psychology, psychiatry, and spiritual care, but to bring our themes also more explicitly to the attention in the wider fields of society, culture and politics. The inaugural lecture was given on 14 October 2016, titled ‘At home in the cosmos. Meaningmaking in the participation society’. In this lecture, first an analysis is made of the stressors (at the individual level) that are characteristic for the present-day Dutch participation society. Religious coping theory is used for analysing these stressors and the meaningmaking questions connected with them. To that end, a distinction is made between meaningmaking questions, sources of meaningmaking (including religion), the meaningmaking process, and the effects of meaningmaking on citizens’ quality of life. Finally, a number of suggestions for future research are offered.

When this latter Chair’s term of office ended in 2019 through the Chairholder’s retirement, the sociologist of religion Prof Dr Kees de Groot was appointed to this Chair in Tilburg. He assumed his office on 8 January 2021 with his inaugural lecture, titled ‘Questions of Life. A sociology of the care of souls’. Kees de Groot argues for research regarding the role of worldviews in spiritual care now that the churches have begun to play a smaller role in this respect. He sketches a picture of how spiritual care, through the current interplay of market
and state, is detaching itself from the diversity of ‘lived religion and irreligion’ in the ambition of serving ‘positive health’. Both in comparison with many other contemporary societies, and in historical perspective, dealing with mental distress in the Netherlands has come to stand at a relatively large distance from lived religion and irreligion. Mental healthcare, itself partly born out of pastoral initiatives in the 1960s, makes use of a medical model. Spiritual care, barely emancipated from religious pastoral care and humanistic counseling work, is also dominated by the improvement of individual functioning. In his lecture, De Groot asks what the process of professionalisation, first of mental healthcare and then of spiritual care, does to the soul of a profession.

For years, KSGV has had the intention to strengthen the good Flemish-Dutch cooperation by establishing an Endowed Chair at a Flemish university.

This intention was realised in 2016 with the appointment of an Endowed Professor at the kU Leuven. This Chair, named ‘Worldview and mental health, with special attention for spirituality, mysticism and psychoanalysis’, was held by the philosopher of religion Prof Dr Herman Westerinck from October 2016 till September 2021. The inaugural lecture, titled ‘Pleasure and discontents. About psychoanalysis, mysticism, subjectivity and psychopathology’, was given on 18 May 2017. Westerinck postulates that Freudian psychoanalysis fundamentally questions a qualitative difference between normality and pathology. Also, it challenges modern views regarding the consistency of the subject and regarding religion as a solid system of meaning. Notably, this comes to the fore in psychoanalytic perspectives on mysticism and spirituality, with its aspects of pleasure and discontent. Drawing on readings of Freud, Lacan and Foucault, this contribution explores the significance of psychoanalysis for theories of religion and mysticism, subjectivity and psychopathology.

In September 2021, Prof Dr Herman Westerinck was succeeded in Leuven by the psychiatrist Prof Dr Peter Verhagen. The name of his Chair is ‘Worldview and mental health, with special attention for spirituality and psychiatry’. On 18 March 2022, he gave his inaugural lecture, titled ‘The soul is on air; love is her weight’. Drawing on a hermeneutical-phenomenological point of view, his purpose is to evoke the soul by listening, despite the fact that, scientifically speaking,
The soul appears to have been more or less sidetracked. This in spite of the fact that the discourse about the soul has been one of the most successful ones for ages, and still is. This evoking by listening happens in three steps. Firstly by listening, also based on empirical research, to what people say about their spiritual life. Secondly, by listening to the exception that the soul is, because of which she permanently resists her liquidation. Thirdly, by listening to the weight that the soul has, namely her power to gently instigate motion: love.

Finally, in this context it is important that the above-mentioned Prof Dr Herman Westerink in June 2022 has assumed a KSGV Chair at Radboud University Nijmegen, named ‘Worldview and mental health, with special attention for its aspects from philosophy of religion and its psychoanalytic aspects’.

In this way, this journey of academic establishings time and again reaches a next stop on ‘the long and winding road’ of religion and mental health. This journey could never be taken for granted. Often, there were unexpected turns and blockades that, however, never have made us stray from our path. We go ahead. Onwards and upwards! Lead me to your door...

The long and winding road
That leads to your door
Will never disappear
I've seen that road before
It always leads me here
Lead me to your door

The wild and windy night
That the rain washed away
Has left a pool of tears
Crying for the day
Why leave me standing here?
Let me know the way

Many times I've been alone
And many times I've cried
Anyway, you'll never know
The many ways I've tried

And still they lead me back
To the long winding road
You left me standing here
A long, long time ago
Don't leave me waiting here
Lead me to your door

But still they lead me back
To the long winding road
You left me standing here
A long, long time ago
Don't keep me waiting here
Lead me to your door

The Beatles: *The long and winding road*

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