**NHS Education for Scotland**

**Talking about Bereavement Podcast Series**

**Transcript of ‘Meeting people where they are: Perspectives from a hospital and prison chaplain’ podcast episode**

**Presenter:** Lynne Innes, Senior Educator, NHS Education for Scotland / Lead for Spiritual Staff Care and Wellbeing, NHS Fife (LI)

**Speaker:** Ken Russell,retired hospital and prison chaplain (KR)

**LI:** Hello and a very warm welcome to the Talking About Bereavement podcast, brought to you by the Bereavement Education Programme at NHS Education for Scotland. I'm Lynne Innes from the education team and I'm so glad you're here. In this series, we'll be opening up honest and thoughtful conversations about bereavement. I'll be joined by guests who’ll share their experiences, insights, and the meaningful work they're doing to support others through grief and bereavement. Whether you're a professional, a carer, or someone with a personal interest, there's something here for you.

**LI:** Hi again, and welcome to this episode of the podcast. I'm really pleased to introduce my guest today. We've got a great conversation ahead, so let's dive in. If you find this episode helpful, please consider subscribing, sharing it with a colleague or a friend, and leaving us a review. Your support helps us reach more people and keep these important conversations going. My guest today is Ken Russell. Hello and welcome, Ken, how are you?

**KR:** Hi Lynne, I'm fine, thank you very much.

**LI:** And Ken is a Fifer. Born in Methil, he became a Church of Scotland Minister who served in Fife, then beside Loch Lomond before coming to a church in Stirling. For much of that time he was also a part-time hospital chaplain doing one or two afternoons a week in hospital. Now Ken has sent me a very comprehensive biography of his work and life and there's lots of really valuable information in that, but I felt it would be a bit disingenuous of me to read it out. So I'm going to come to Ken and ask him to expand a bit on that introduction I've given, which is a very small introduction to what Ken has done. And tell us a bit more about yourself, how you've got to where you are in terms of your life and work Ken, if that's okay?

**KR:** Sure, thank you, Lynne. So as you, as you told the listeners, I, I began as a parish minister and I was a parish minister in, in various places and I enjoy parish ministry very much. I think I, from an early stage I was really quite aware that I probably had two jobs or my job had two aspects. There was the traditionally churchy religious part of it. That was good. I enjoyed that. But I was also very involved in connecting with the community, the parish. I mean a Church of Scotland minister is a parish minister, which really means the community. So I was involved in school chaplaincy, part-time healthcare chaplaincy for much of my time, as well as chaplaincy to the Air Cadets and also meeting and connecting up with a number of other organisations in the community who were trying to help people so very much in the church but also out of it. And I have particular joy and energy in doing the, the community aspect. And I guess I probably also knew quite early on that I would be my, the direction that my ministry would go in would be towards probably full-time chaplaincy at, at some stage. I very much wanted to meet people where they are, as we say, very much to listen to their experience and see how I can connect with, with, with that.

**LI:** So, yeah, I noticed you said you, you wanted to meet people where they are and, and I just wondered if you, if how you would feel about expanding on that a bit about what, what do we mean when we talk about where people are?

**KR:** Yeah, cause’ I'm also aware that's almost a cliche, isn't it? Where are you at, meet people where they're at. It's almost one of these, not quite a tick box thing, but it's very important that we meet people where they're at. But what do we mean? And I've been thinking about that as I’ve been, I've been thinking about us going to be having our conversation. And I think for me, the key is listening to their experience, their feelings, what's happening for, for them. So particularly in, in relation to, to, to bereavement. It's not me trying to place them on a, a map of a journey through bereavement, although these maps are very helpful. It's about me listening to what they're saying. It's giving them space to tell me how awful it is or how hopeful they are or how disillusioned. It's giving a space to allow them to fully express themselves. And, and I guess that that started off when I was doing funerals in the parish and, and other kinds of pastoral work, visiting people in hospital, visiting people in, in various challenging situations. And it became very much about how is this for you? How are you experiencing it? And that carried on when I went into full time chaplaincy in the range of diverse situations that that hospital chaplaincy took, took me into meeting a couple who, whose young baby had died, meeting somebody who's had a, a challenging diagnosis, meeting someone whose loved one had, had died suddenly, an accident or whatever, or somebody whose life was changed. It was always about they're the expert or they’re the person who's living the experience. And my role was to focus very much on hearing and receiving their expressions of it. And when I went to prison, I work as a, as a prison chaplain, there was hugely diverse experiences and painful experiences that many of the guys it was a, it was a men's prison, I worked in, it was all male. Many of the traumatic and sometimes violent experiences that they had experienced as, as, as young people, which I am very fortunate I hadn't had that experience. My role was at their invitation, walking into the stories of their lives and letting them tell me some of that stuff. And what I found in the various settings I was doing this was that by respecting fully and wholly the other person and their experience, somehow also it, it often was of some help for them, some comfort to them, some release for them. Now that didn't mean that I fixed anything. And certainly not, there wasn't change quickly, but the very experience of, of, of, of being heard that their painful experience being received was helpful for them. And I was learning from them, but I was kind of with them, standing with them, sitting with them, walking with them, which is an immense privilege.

**LI:** Yes.

**KR:** And they open up and, and, and tells you the, the, the painful stuff in their, in their lives.

**LI:** Yeah. When you were talking there, I was thinking about, you know, it was, it is a privilege, isn't it, to, for people to tell you their kind of innermost thoughts and feelings. And I work as a, a healthcare chaplain too. And so I was kind of identifying with some of what you were saying there around that privilege, that kind of trust that we have as healthcare chaplains and how we, we support people. But the other thing I was thinking about was that that real skill, and it's much, much undermined skill I think, that real skill of creating a safe space for people to talk and listening to them. And that, you know, you said there I wasn't able to fix anything. And we know that fixing is, is not the roles that we inhabit, but actually that listening role, which sometimes we say, I just listened. I tried to stop myself from saying just listen because actually listening is so powerful and there's no just to it. It's actually quite hard to listen, to truly listen to people. So it is a real skill, but we know the power behind the listening and particularly around people. But well, you know, it's, it's listening is important for anybody but I know that within a bereavement context, it becomes really, really powerful to listen to people who are, who are grieving and who are bereaved.

**KR:** Yeah, absolutely. One of the, the things I just, just remembered actually from way back when I was a probationer minister, the first funeral that I went to do, I was anxious about it, but the visit and hearing people talk about the deceased and so on, it all went well and, and it was okay. The second funeral, for some reason I came out of the, the funeral visit not sure, not entirely comfortable and it was something I couldn't quite put my finger on. And I realised as I did more and more funerals, often I would feel, yeah, we were okay and that was helpful. Other times there was a surprising element to it, and I began quite quickly to learn I had to be okay with not feeling okay. It was important that I had the capacity, but I'm thinking, I'm not sure what's going on here or the strength of their feeling, or whatever it was that was making me feel uncomfortable. I had to learn to be okay with staying present to them. And later on I could reflect on that. I could talk to someone about that, talk to a colleague and, and, and much later on I learned about supervision and all that kind of thing and the huge benefit of that. But intuitively, early on, I knew I'm going, if I'm going to keep doing this kind of stuff, I need to be able to be okay with not feeling okay. And I would say that,

**LI:** Yeah.

**KR:** I often said that to students who were in placement with me. You won't feel okay when you go into a, a situation that have had some horrendous loss, sudden loss of a loved one. It's, it's not okay, it's awful for them. So how are you going to feel okay as you listen to them. You've got to be okay, not feeling okay.

**LI:** And I wonder, I, I was talking to somebody earlier today actually somebody that I was giving some support to and I was actually, well, I was talking about sitting with discomfort actually. And sitting in that place of, that is uncomfortable. But I wonder, I wonder if, and this is just a wondering, have we moved away from, from not being okay? You know, have we as a society, and I know this is a huge thing to say, but as a society, are we, are we not okay with being not okay? And so, you know, we often hear people saying don't want to talk about bereavement or don't want to talk about, we don't want to, you know, don't want to think about what happens when we die or anything like that, because actually it's quite hard and painful to think about that. But have, have we moved away from not being okay? Do we, are we in, are we now kind of inhabiting a different kind of culture where we have to be okay all the time?

**KR:** It's interesting because one of the things that I hear, I hear younger members of my family who actually do understand social media say is that on Facebook, people generally never paint the pictures of the, the, the, the, the, the difficult bits of the holiday. It's always when it's the food's beautiful and the sun's right. You paint your best, you put your best image out. And it's almost like there's pressure there for folk to have to make sure that they, that they do that. And I wondered if that is indeed a, a reflection of, of it. And there is a lot of stuff about feeling good and helping people to feel good and feeling goods good. It's good to feel good and healthy. But yeah, I think, I think we maybe have lost the capacity or something of the capacity to give each other space to, to weep and wail and mourn and all the rest of it. And in the prison, that was one of the challenges for the, the, the, the guys I met. They had often had a, a several layers of, of, of pain and loss and trauma. Certainly, many of them were in an environment where drugs and drink were readily available. And they learned that that worked, that anaesthetised, and they got into a way of life of, of deadening down their pain. They to sustain that financially, they had to get into, often had to get into illegal criminal activities, which led to a series in prison, series of stays in prison. After a number of years, many of them woke up to the fact that where's their life was going. They got a detox. And then they, as they got a detox, the stuff that they'd been trying to dampen down came welling up. That's when we got a lot of our, our referrals. But often the guys were terrified, understandably, they didn't want to step into the pain. They really wanted some ‘see some of that bereavement stuff Ken, wave your magic wand and make me feel okay.’ And I had to help them to understand that actually, this is going to be hard. Maybe it's a bit crude, but one of the analogies that I, I used with them was being sick. I said, look, you know what it's like I says, if you, you're, you're, you're feeling sick, you've maybe had too much to drink or you've eaten a dodgy meal and you think if you can get your head in the pillow, you get to sleep before I'll be all right. So that you know how it doesn't work, 5 minutes after you're lying down, your head's down in the pan, you're throwing up and it's awful. It's coming down your nose, it's nipping, it's stinking, all the rest of it. I said but you also know how even as that's happening, you're starting to get some relief. And you can't generally, you can't go on being sick for more than a few minutes. And you feel better. I said guys, that's what grief is like. There's a lot of the stuff that we have to find to, to express. I said and to be honest, even if, I’ve often sat with folk, people sobbing their heart out, but generally at any given time, most folk won't sob uncontrollably for more than 10-15 minutes. You know, it'll be like, and you have to do that quite a lot of times. So that's a kind of long-winded way of responding to you. But you're, you're this, this, I've got to be okay. I've got to put the face on. And it's about helping people that it's also okay for them not to feel okay as part of, as part of this long journey through grief.

**LI:** Yes. And, and we know that, you know, for a lot of people, it is a long journey through grief.

**KR:** Yeah.

**LI:** And it's, it's, you know, I suppose it's, it's learning to live with the grief to an extent because that grief is not something that they will recover from. And they'll, they'll be different, won't they? They'll be different from how they were before. So it's, but, but, but it is quite hard to go through that, I think. And, and I wonder if I, I hadn't thought about social media and the way that you just talked about it there. But actually you're absolutely right. Everything that we see in social media is usually happy, upbeat pictures of something good that's happened. People very rarely post the stuff that's really maybe not quite so pleasant or that, you know, the beach covered in rain, it's usually covered in sun, you know, whatever so.

**KR:** Yeah.

**LI:** So yeah.

**KR:** Yeah.

**LI:** So in terms of then, like you've talked about how, how you support, how you’ve supported people who are bereave, who are bereaved. I wonder if you've got any thoughts on how, how we ensure that we do that well to support people who are bereaved.

**KR:** Yeah, yeah. I think the first thing is, is it about them or is it about me? Now that means recognising that I might not feel okay about it at this moment for whatever reason, but it's about to the best of my ability being present to them. Or is it about me feeling better? You know, you sometimes see people say, oh, I don't know what to say or I'm so sorry and they start getting upset. And then the bereaved person ends up comforting them, which is, you know, so it's, it's about staying, staying with, with them. I think that's the, that's, that's probably the most important thing. I think we can learn if, if we're in a privileged position and I believe any of this kind of work and chaplaincy especially is a, is an enormous privilege where people tell you about their lives. So that's where we can learn so much because if, if we're doing it and if we're journeying with people, we also can learn that somebody who, who, who one day could see no way forward two or three months later, life's still terrible, but I'm actually not quite as bad as I was and I'm seeing some hope and so on. We can learn from them and we can sometimes share with them when it's appropriate insights from, from other people who've been, been bereaved. Other things we can do is we can give them, we might call it professionals, we might call it models or images or, or ideas that can help them locate themselves on the map. So saying to the, giving the guys the sickness, that's really a model of it's got to get worse before it gets better. You've got to accept it. But there's, there's, there's other, other kinds of things that we can do. So all of the, the, the classical, any of the bereavement things that we've learned, the stages, stages of grief and so on, not to say, ah, now this is where you are and this is where you've got to get to. But, but when a person’s saying it, it really just doesn't feel real, it really doesn't feel real. I know in my head it's happened, but it just doesn't feel like it's real and I'm going to waken up tomorrow and, and they'll be there again. We can help them to know that, you know, lots and lots of people say that to us. Lots, lots, lots. You don't actually even have to use words like denial or shock and things. Or maybe you can, as we listen to them, we can maybe help them to know where they are on a, on a map.

**LI:** Yeah. And I think, I mean, we're kind of back to that meeting people where they are and kind of sitting alongside them, aren't we? And giving them somewhere to be heard. And, and I wonder, we do obviously in spiritual care do quite a lot of bereavement support as, as you will have done as well when you're working in spiritual care and hospitals and, and prison chaplaincy. And there is this feeling that we're going to do some magic, as you said, but actually we don't. And sometimes that's quite intimidating when, when you go into a space and you think this person thinks I'm going to do magic, and I really don't have any magic.

**KR:** That’s right.

**LI:** And I don't think I'm going to make it look like I've got any magic. It can be a bit kind of overwhelming actually

**KR:** Yeah.

**LI:** sometimes because there's so much expectation on what we can do. And actually, what we do is we listen, we sit alongside, we remain present with people and create that space that is available for them to be in while we, while we kind of sit alongside them. I noticed you also said, I'm just going to go back a wee bit to your, your biography cause’ you said, you said in your biography in 2020, you turned 65 and you retired one week before COVID brought us national lockdown. Tell me a bit about what your, your life has looked like since you, you retired cause’ you haven't really retired. You've obviously continued to do other work, but there was quite a lot of work that you've done around bereavement support. So it'd be good to

**KR:** Yeah.

**LI:** hear that.

**KR:** Yeah, I went, I went straight into another lockdown and I was lined up to, to be a part-time locum in the church doing a Sunday services plus a couple of days a week doing a bit of pastoral work and funerals and so on. But national lockdown prevented very much of that happening. But like all the rest of us I had to learn very quickly how to make YouTube videos and do church services and things like that. I know, I know that about six months into it, I was really missing the prison. I really did miss enormously the, the intensity of the, the conversations, the honesty of the earthiness of the conversations. So anyway, kept, kept going and we came out of lockdown and we got on with things that locumship came to an end. I went and did another one and I'm just about to finish my third one after five years. And I am, I am saying no more, no more, no more locums at the moment. But also I got recruited to do one day a week bank chaplaincy back at NHS Forth Valley. I think it was about 15 months I did that and as part of their spiritual care listening service that, that was much of what I got involved in. So I was, I was particularly bereavement referrals. So I was doing quite a lot of full-on bereavement support for people who had been referred by community practice and so on. I also got involved, one, one of the things when guys were leaving prisons, the prison they said was that one of the big dangers is association. If they meet up with old pals, old lags, old cronies, they'll get back into bother. And as I like to tell folk I had a curry with Kenny McGehee who was one of the chaplaincy coordinators in the prison and he got me roped into doing some helping deliver, design and deliver some training for senior management team on bereavement. So I also like to tell folk that year I was in all 15 jails in Scotland [inaudible] and delivered. And that was kind of cherry picking some bits of bereavement theory and tuning that into some of the particular aspects of, of a bereavement in prison, which sadly often was, was, was suicide. Yes, I was, I've been doing that as well. I'm kind of coming to a, a yeah I am at a what next? What next? And it's actually been quite interesting thinking about this, this conversation with you, Lynne, because probably my, my bio is a, was a bit of a, bit of a reflection. And I'm, I've got 2 ideas for what I'm going to do next. One is to be, to be quite honest, I'm going to do, for the next three months I'm doing hee haw. But if I'm being more pretentious, I'll say it's my sabbatical. So I'm reflecting and seeing just, just in, in, in what way the kind of insights, understandings, skills that have been privileged to, to develop over the years can still be of use in a way that's appropriate to somebody who's 70 and wanting to also try and get the hang of, hang of retirement. And I've also lined up to do a creative writing course when, when I'm off as well. So, so we'll see. I don't know what's going to happen. We'll see. But that's, that's the fun. That's actually the fun. It's, I don't feel I've stopped. I feel I've, I've stepped away from full time retirement over the last five years I've been doing a version of that and now I'm going into the next, next version and who knows where it will go.

**LI:** And does, does that feel like, I wonder if that feels, does that feel like a good kind of phase of life?

**KR:** Oh, yeah, yeah, yeah. It feels, it feels, it feels very exciting. Yeah, definitely.

**LI:** Yeah and obviously the listeners won't be able to see your face, but I can see your face because we're recording this, we can see each other and I can see, you know, you, there's a lot of kind of lighting up of your face and your kind of facial expressions as you've talked about that part of

**KR:** Yeah.

**LI:** coming through COVID to this, to where you are now. And obviously going into your sabbatical period of three months, which yeah, I think we could all maybe think about our sabbatical at this stage in our lives too.

**KR:** One of the, one of the things I didn't mention in the bio, but I did a bit of training with the Glasgow Ignatian Spirituality Centre, training spirituality, including doing their spiritual exercise of Ignatius of Loyola. But one of the things that's quite big in to the for, in the Ignatius spirituality is help people to look for the light, look for the energy, where's the life, look for the life. What, what inspires you, what fires you, what, what, what makes you want to get up in the morning? And that actually transferred very well into, into the prison when you were helping listen to guys who were trying to make change, you know, but also relates very much to, to our own life. And I guess that's, that's what I'm, I'm looking for. Where, where is the light, the energy, the force, the spirit, the universe, God, whatever you call it. Where, where is that present in my life? Where is that present in the journey? Where am I being, being called, called for? So that's probably why I kind of lit up a bit when I talk.

**LI:** I suppose that brings us on nicely to just the final thing that I was going to say was, and maybe, maybe I’ll maybe phrase it in, in your words, which is I'm going to ask you about how, how do you keep well in your, how have you kept well in your job and your role and the commitment to the work you're doing? But perhaps, maybe, maybe that's how, how has the light kept you well in your, in your job, in your role and commitment? And have you been able to focus on the light in the times of some of those jobs you've done? Because we know that these jobs are, can be hard jobs, they can be isolating jobs, they can be lonely jobs. They have moments of pure joy, but they're not all moments of pure joy. So I kind of wonder how you've kept, kept yourself in the light or keeping well.

**KR:** I am quite, I am quite verbal. I talk a lot. You'll, you'll, you'll have noticed that and the listeners will, will hear that and may well have thought where's he going is he answering Lynne's question as he wanders around. I don't always know what I think until I hear myself say it. So things like journaling for, for decades I've, I’ve journaled and just, just expressing it freely where you are. That's, that's been really good. I've used, I've used pastoral supervision. That was, that was an important part of what I was doing in the, in the prison. I negotiate, when they wanted me to do quite a lot of the bereavement stuff and they were calling it counselling. And although I trained in counselling, I would, I would be saying, well, actually it's just not counselling. I'm using counselling skills because of training counsel. There's no, it's a different kind of setup. But, but, but they were going to call it counselling. So I said to them, it's not really ethical for us to be doing this without me having supervision. So you need to give me time for this and pay for it and get that. So once a month I had a session with Michael Paterson, who’s well known

**LI:** Oh yes, yes,

**KR:** which is just fantastic. I learned a lot from that, gained a lot from that. I've also used spiritual direction and, and kind of part of listening to the light is when certain things, in any job, there's things that you love to, as you said, there's things you love doing and there's bits that kind of grind you down and you just have to do these because that's part of it. But if, if, if in any given situation, too much was becoming the stuff that was not life giving, I've kind of always noticed that, reflected on it and then had conversations with whoever is my line manager, whatever I'm saying, you know, what do you, what's, what do you most want me to do here? Here's, what can I most give in this situation so that I can try and make some, some readjustments. Sometimes it's been the line manager or something, just been myself, you know, where, what am I prioritising here to keep that, to keep that going and also try to keep, to keep reasonably active, you know, and, and in retirement, enjoy walking and sometimes going to the gym. And this morning my wife and I were out on our, our side by side tandem. We, we have a three-wheeler tandem.

**LI:** Okay.

**KR:** My wife [inaudible].

**LI:** Okay.

**KR:** We sit side by side. It's, it's a great [inaudible] we've had it for about four years. We've got a trailer. We take it places. So we're down near Culross and went round Preston Island a couple of times, have the coffee and cake.

**LI:** Ah right, right.

**KR:** Fresh air,exercise, that that's all helpful as well.

**LI*:*** Yeah, absolutely.

**KR:** Yeah.

**LI:** Absolutely. I'm going to finish off with it's, it’s the last two sentences of your bio because I think it would be really nice to kind of to read this out because it, it feels like a kind of real summary of, of what we've talked about in this fairly brief podcast. But you said, I continue to be committed to communicating with people in language that they speak and understand and not in ultra-technical or highly theological speak, meeting people where they are. And I think that's a lovely ending to this podcast. You've talked about what meeting people where they are means and the importance of communicating with people in the language that they speak. And that I think we've heard you talking about how you've, you have communicated with people in that language throughout your, your career. And, and I've really, really enjoyed speaking with you and I've very much enjoyed reading your bio. And you said you're about to do a creative writing course, but I felt that, that bio was pretty creative. So you're, you’re, you’re, you’re on your road. So, in my humble opinion. So thank you so much for joining me today, Ken. It's been an absolute pleasure speaking to you. Really it has. And thank you for sharing some of your life and work with us. And, and I hope you can enjoy your next three months doing hee haw.

**KR:** Thank you, Lynne, thank you for having me. It's been a pleasure talking to you. And thank you very much for your good wishes.Thanks.

**LI:** Not at all. Thank you just now. Bye bye.

**KR:** Bye.

This podcast episode was recorded in August 2025 and can be found at <https://www.sad.scot.nhs.uk/podcast/> or on [Spotify](https://open.spotify.com/show/11AORpjHqbsYwgg1DJUtLk?si=687dba351d1f45d4).

For more information visit [www.sad.scot.nhs.uk](http://www.sad.scot.nhs.uk/) or contact supportarounddeath@nes.scot.nhs.uk

© NHS Education for Scotland 2025. You can copy or reproduce the information in this resource for use within NHS Scotland and for non-commercial educational purposes under creative commons CC BY-NC 4.0 Deed | Attribution Non-Commercial 4.0 International | Creative Commons. Use of this resource for commercial purposes is permitted only with the written permission of NES.