Welcome to Spirituality in Healthcare

Banyan Tree
Learning Objectives

1. Define spirituality.

2. Build awareness around spiritual practices and increase skills on how to provide culturally competent care across spiritual differences.
Dimensions of Diversity

Adapted from Diverse Teams at Work, Gardenswartz & Rowe (Irwin, 1994)

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Cultural Competence

“The ability to form effective and authentic relationships across difference”

(Gary Howard, REACH Center for Multicultural Education, Seattle, Washington)

This doesn’t mean you are an authority in the values and beliefs of every culture. What it means is that you hold a deep respect for cultural differences and are eager to learn.
“Culturally Competent Health Care”

“Requires a commitment from doctors and other caregivers to understand and be responsive to the different attitudes, values, verbal cues, and body language that people look for in a healthcare setting by virtue of their heritage.”

Oliver Goldsmith, MD

Source: Adapted from The Permanente Journal Winter 2000 / Vol 4, No 1
In the Presence of Mystery
“The Spiritual Journey”

1. In small groups, define and discuss the assigned word.

2. Be prepared to report your description in a few minutes.

“We are not human beings on a spiritual journey,
we are spiritual beings on a human journey”
~ Pierre Teilhard de Chardin ~

Source: In the Presence of Mystery
Terminology

- **Spirituality** – Covers all belief systems. It is a highly subjective, personal and individualistic concept.

- Religion – Celebrates community and shared meaning. Teaches beliefs and practices and expects members to conform to its institutional requirements (Sociology of Religion)

- Atheist – one who does not believe in the existence of a God.

- Agnostic – An agnostic affirms “I don’t know” or asks “How can we know”?

- Faith – Unquestioning belief; complete trust or confidence.

- Numinous – Fascinating and awesome mystery.

- Soul – An entity without material reality, regarded as the spiritual part of a person. (Webster’s New World)

Source: In the Presence of Mystery
Major Ways Spirituality is Expressed in the World

<table>
<thead>
<tr>
<th>Demographics</th>
<th>Per Group</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Christianity</td>
<td>2.1 billion</td>
<td>33%</td>
</tr>
<tr>
<td>Islam</td>
<td>1.5 billion</td>
<td>21%</td>
</tr>
<tr>
<td>Secular/Nonreligious/Agnostic/Atheist</td>
<td>1.1 billion</td>
<td>16%</td>
</tr>
<tr>
<td>Hinduism</td>
<td>900 million</td>
<td>14%</td>
</tr>
<tr>
<td>Chinese Traditional</td>
<td>394 million</td>
<td>6%</td>
</tr>
<tr>
<td>Buddhism</td>
<td>376 million</td>
<td>6%</td>
</tr>
<tr>
<td>Judaism</td>
<td>14 million</td>
<td>0.22%</td>
</tr>
<tr>
<td>Sikhism</td>
<td>23 million</td>
<td>0.36%</td>
</tr>
<tr>
<td>Other/Unknown</td>
<td>16.1 million</td>
<td>3.42%</td>
</tr>
<tr>
<td><strong>Major World Religion Total</strong></td>
<td></td>
<td><strong>100.00%</strong></td>
</tr>
</tbody>
</table>

Source: Adherents.com
## Major Ways Spirituality is Expressed in the United States

<table>
<thead>
<tr>
<th>Demographics</th>
<th>Percentage of Adult Respondents'</th>
</tr>
</thead>
<tbody>
<tr>
<td>Christianity</td>
<td>76.5%</td>
</tr>
<tr>
<td>Nonreligious/Not Reported</td>
<td>14.1%</td>
</tr>
<tr>
<td>Judaism</td>
<td>1.4%</td>
</tr>
<tr>
<td>Other faiths</td>
<td>1.2%</td>
</tr>
<tr>
<td>Eastern Religions</td>
<td>1.0%</td>
</tr>
<tr>
<td>New Religious Movements (NRM)</td>
<td>0.9%</td>
</tr>
<tr>
<td>Islam</td>
<td>0.5%</td>
</tr>
<tr>
<td>Buddhism</td>
<td>0.5%</td>
</tr>
<tr>
<td>Agnostic</td>
<td>0.5%</td>
</tr>
<tr>
<td>Atheist</td>
<td>0.4%</td>
</tr>
<tr>
<td>Unitarian Universalist</td>
<td>0.3%</td>
</tr>
<tr>
<td>Wiccan/Pagan/Druid</td>
<td>0.1%</td>
</tr>
<tr>
<td>Native Americans</td>
<td>0.05%</td>
</tr>
<tr>
<td>Baha’i</td>
<td>0.04%</td>
</tr>
<tr>
<td>Sikhism</td>
<td>0.03%</td>
</tr>
</tbody>
</table>

Source: The National Survey of Religious Identification (NSRI), 1990 & the American Religious Identity Survey (ARIS), 2001. Table doesn’t total 100% because of rounding
Patients need to receive care that addresses their needs related to...

- Psychosocial
- Cultural
- Emotional
- Spiritual
We Are M. D. Anderson

Caring—By our words and actions we create a caring environment for everyone.
• We are sensitive to the concerns of our patients and our coworkers.
• We are respectful and courteous to each other at all times.
• We promote and reward teamwork and inclusiveness.

Discovery—We embrace creativity and seek new knowledge.
• We help each other to identify and solve problems.
• We seek personal growth and enable others to do so.
• We encourage learning, creativity, and new ideas.

Integrity—We work together to merit the trust of our colleagues and those we serve.
• We hold ourselves, and each other, accountable for practicing our values.
• We communicate frequently, honestly and openly.
• By our actions, we create an environment of trust.
Is Spirituality Good for Your Health?

- 35% of Americans engage in prayer to heal their medical conditions.
- 57% of Americans indicated that it was very important to them.
- That figure increased to 72% for Americans over age sixty-five.
- About one in five Americans describe themselves as “spiritual”.
- A 2006 study of 838 medical inpatients aged 60 or over found that 88 percent indicated that they were spiritual.
- Over 100 of the 141 American medical schools have courses on spirituality.

Source: Spirituality in Patient Care: Why, How, When, and What
What are the Challenges?

- A person’s beliefs are not respected.
- Understanding how others express their spirituality.
- The implication that a person is not spiritual enough.
- Spiritual issues might cause undue anxiety in the patient.
- Spiritual issues come up that you are unprepared to handle.
- An unintended message is sent that the patient is nearing death.
- Some beliefs discourage medical care and effective health treatment.

Source: Spirituality in Patient Care: Why, How, When, and What
What is your Role?

- Supporting Spiritual Care
  - Nurses
  - Physicians
  - Social Workers
  - Allied Health Workers

- Specializing in Spiritual Care
  - Chaplain/Priest
  - Clergy/Pastor
  - Imam
  - Rabbi
  - Guru
  - Others

Source: Spirituality, Health and Healing
Unit Two: Spiritual Practices

Banyan Tree
In My Culture...

After birth our children are...

To heal a person we...

A ritual we follow during serious illness is...

The dead should be...

Our Spiritual Belief Is...
Spiritual Rituals in Healing and Dying

- They may directly evoke a higher power or healing source.
- Rituals contain steps for recovery.
- They reduce anxiety and depression.
- They reduce feelings of helplessness.
- They encourage self-acceptance.

Source: Spirituality, Health and Healing
What are Worldview Issues Related to Healing and Dying?

1. Why does illness happen?
   - Genetics, environment
   - Punishment for sins
   - Bad Karma
   - Spells, curse
   - God’s will

2. How do I get better?
   - Western medicine
   - Traditional medicine
   - Divine intervention
   - Prayer
   - Rituals

Source: Spirituality, Health and Healing
## Worldview Medical Belief Systems

<table>
<thead>
<tr>
<th>Medicine Model</th>
<th>World Health View</th>
<th>Approach to Healthcare</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Germ Theory</strong></td>
<td>“Allopathic” (Dualistic) Philosophy – system of medicine that embraces all methods of proven treatments</td>
<td>Intervention comes by surgery, medications, radiation, etc.</td>
</tr>
<tr>
<td>European, Euro-American</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Body and Forces of Nature</strong></td>
<td>“Naturopathic” Direct connection between the body and forces of nature.</td>
<td>Fatalistic/Deterministic view with a mystical entity in control (Allah, Brahma, God). Use of traditional healers, folk practices.</td>
</tr>
<tr>
<td><strong>Whole Body Approach</strong></td>
<td>Homeopathic (holistic) Medical philosophy in which the person, not the disease is treated. A healthy body is a state of balance.</td>
<td>Hot/Cold Theory Use of Traditional healers Acupuncture, qigong, herbs.</td>
</tr>
<tr>
<td>Asian, Asian-American, Pacific Islander, Native American.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Source: Adapted from Cook Ross
Instructions

☐ Discuss some common beliefs/practices in healthcare.

☐ Record some common beliefs/practices of the selected group.

☐ Choose a spokesperson.
Debrief

- How do these beliefs and practices impact healthcare?
- What are some common themes?
<table>
<thead>
<tr>
<th>Belief System</th>
<th>Diet</th>
<th>God (s) and Universe</th>
<th>Health care Practices</th>
<th>Life’s Purpose</th>
<th>Text</th>
</tr>
</thead>
</table>
| **Hinduism**  | Avoid beef and pork | One Supreme Reality (Brahman) manifested through gods/goddesses | • Eldest male makes decisions  
• Final thoughts impact afterlife  
• Yoga, Meditation | Gain release from reincarnation | *The Vedas, Upanishads, Bhagavad Gita,* |
| **Judaism**   | Kosher dietary rules are followed more or less strictly | YHWH | • Restrictions apply on the Sabbath  
• Do not use a razor  
• Provide time for prayer | Obey God’s Commandments and live ethically  
Focus is on this life | Bible (Tanakh), Talmud |
| **Buddhism**  | Some are Vegetarians | Buddha taught nothing is permanent | • Pain meds may be refused  
• Bardo is important | Purpose is to avoid suffering and gain enlightenment | *Pali Canon Mahayana sutras* |
| **Christianity** | Restrictions apply in some denominations | Believe in one God Who is a Trinity of Father, Son, and Holy Spirit | • Prayer  
• Anointing of the sick  
• Some practice the Sabbath on Saturday | Salvation is through faith in Christ and for some, good works | Bible |
| **Islam**     | Avoid pork, pork products, lard, cookies, chips. | One God (Allah in Arabic) | Purification  
Prayer 3-5 times daily  
Only ritually clean hands may touch the Quran | Humans must submit (Islam) to the will of God to gain Paradise after death. | Qur’an |

Source: Adherents.com and The Illustrated Encyclopedia of World Religions
<table>
<thead>
<tr>
<th><strong>Do</strong></th>
<th><strong>Don’t</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Ask questions when in doubt.</td>
<td>Assume that every member of a particular faith will adhere to all tenants of the faith.</td>
</tr>
<tr>
<td>Remember there is a fine line between cultural practices and spiritual/religious rituals.</td>
<td>Deny a person hope, it may be all they have.</td>
</tr>
<tr>
<td>Suspend your Judgment.</td>
<td>Prejudge a person based on your spiritual experience, or lack of.</td>
</tr>
<tr>
<td>Use spiritual resources (i.e. Priest, Imam, Rabbi, Guru etc).</td>
<td>Forget your role or it’s limitations.</td>
</tr>
<tr>
<td>Remember that when in crisis, some people search for different answers to the same questions.</td>
<td>Forget to use available resources i.e. Department of Chaplaincy and Pastoral Care.</td>
</tr>
</tbody>
</table>
Compassion as a spiritual quality resides at the heart of culturally competent care. The word compassion comes from the Latin “compassio,” which means:

“to feel with”
What Can Health Care Professionals Do?

- You are in a strategic position to assist people in their most critical moments.

- As requested, you can show a growing interest in the spiritual needs of patients:

  - 46% wanted their nurses to acknowledge and respect their spiritual beliefs.

  - 55% wanted their nurses to assist them with prayer.

  - 76% wanted to be able to talk to their nurses about God.

Source: The Psychology of Coping and Religion
“Empathic Response in Spirituality”

“Empathic acknowledgement of patient emotions and concerns may have a number of beneficial outcomes such as strengthening the relationship with the patient and identifying important patient concerns.”

Source: www.mdanderson.org/icare
“Empathic Response in Spirituality”

Carkuff’s Levels of Emphatic Response:

Level 1  (unhelpful)    Helper is not listening, shows no awareness of patient’s feeling.

Level 2  (unhelpful)    Helper has awareness of the most superficial feelings expressed by the patient; responses fail to recognize these feeling.

Level 3              Helper’s responses match the surface feeling expressed by the patient.

Level 4              Helper is listening; their responses demonstrate understanding of the patient’s feelings. The patient is shown compassion by the listener.

### The FICA Spiritual Assessment Tool

<table>
<thead>
<tr>
<th><strong>F = Faith</strong></th>
<th>What is your Faith or Belief? Do you consider yourself spiritual or religious? What things give meaning to life?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>I = Influence</strong></td>
<td>Is your faith important in your life? What influence does it have on how you take care of your health?</td>
</tr>
<tr>
<td><strong>C = Community</strong></td>
<td>Are you part of a spiritual or religious community?</td>
</tr>
<tr>
<td><strong>A = Address</strong></td>
<td>How would you like me to address these issues in your healthcare?</td>
</tr>
</tbody>
</table>

Source: Christina Pulchalski, MD (1999)
The George Washington Institute for Spirituality and Health (GWish)
The FICA Spiritual Activity

Please divide into pairs as 1 & 2.

Focus on using the F. I. C. A. Tool.

Be yourself or an imaginary patient.

Take 2-3 minutes and then switch roles.
Spirituality in Healthcare Action Plan

What can I do to become more culturally competent?

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

What actions steps can I take to build my skills?

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________


Questions