Psychological needs

9: Spirituality

Aim of this worksheet
To consider the importance of spiritual and religious care and the care of patients, relatives and carers.

How to use this worksheet
- You can work through this worksheet by yourself, or with a tutor.
- Read the case study below, and then work on the questions overleaf.
- The work page is on the right side, the information page is on the left.
- Work any way you want: you can try answering from your own knowledge (in which case fold over the information page), you can use the information page (this is not cheating - you learn as you find the information), or you can use other sources of information.
- It should take you about 15 minutes. If anything is unclear, discuss it with a colleague.
- If you think any information is wrong or out of date let us know.
- Take this learning into your workplace using the activity on the back page.

Case study
Joe is a 59yr old man who is divorced. He has 1 daughter, his son died in childhood. He describes himself as having had a religious upbringing, but the death of his son challenged his faith and he has not been to church since that time. He considers himself to be a caring and compassionate father and has a wide circle of friends. His love of gardening and being outdoors has helped him through difficult times. He has recently been diagnosed with inoperable lung cancer.

Produced by
St. Oswald’s Hospice
Regent Avenue
Gosforth
Newcastle-upon-Tyne
NE3 1EE
Tel: 0191 285 0063
This version written and edited by:
Jo Isbister, Denise O’Neill, Susan Besford, Karen Harrison, Diane Langford
Clinical Nurse specialists.
Eileen Ridley, social worker
Nigel Goodfellow, David Shaw, chaplains.
Newcastle Hospitals NHS Trust
Claud Regnard
Honorary consultant in Palliative Care Medicine, St. Oswald’s Hospice
### What is Spiritual and Religious Care?

In order to meet the Spiritual and Religious needs of patients, carers and staff it is important that we are clear about what Spirituality and Religion is. Here are some definitions for you to look at:-

**Spirituality:**
- “The need to give and receive love; the need to be understood; the need to be valued as a human being; the need for forgiveness, hope and trust; the need to explore beliefs and values; the need to express feelings honestly; the need to express faith or belief; the need to find meaning and purpose in life”
  
- “Spirituality is universal, deeply personal and individual: it goes beyond formal notions of ritual or religious practice to encompass the unique capacity of each individual. It is at the core and essence of who we are, that spark which permeates the entire fabric of the person and demands that we are all worthy of dignity and respect. It transcends intellectual capability, elevating the status of all of humanity.”
- “Spiritual needs are the 4th domain in holistic care alongside physical; psychological and social needs. Spirituality helps well being – it is usually given in a one to one relationship, is completely person centred and makes no assumptions about personal conviction or life orientation.”

**Religion:**
- Is the way in which some people give expression to their Spirituality.
- The purpose of most religious traditions is in part to enable people to achieve as far as possible a state of well being in relation to God (Deity), to self and to others.
- Rites and Rituals are a central part of Religious Life and it is important that the specific Religious Needs of individuals are addressed as part of their care as this enables them to give expression to what they believe.
- Is about a Community and its beliefs and practices. Religious care needs to be given in the context of shared religious beliefs, values, liturgies and lifestyle of a faith community which might be exclusive as well as inclusive in nature.

### True or false

1) **F** Joe identifies family, friends, outdoors and gardening as important to his ability to cope with difficult situations. Maintaining access to these things/people will be crucial in helping him feel valued and respected.

2) **T** Joe indicates that a religious faith has been part of his upbringing. His diagnosis might unearth topics that he explored when his son died. He might find talking to someone from a faith community about his doubts and questions helpful.

3) **F** Closed questions are unlikely to allow Joe to express his feelings. In contrast, open questions allow to say what he feels. For example, it may help to ask about what helps Joe cope with difficult situations and people who he might find helpful to speak to.

4) **F** Individuals (patients and staff) often feel awkward or embarrassed talking about spiritual and religious matters. Fears and perceptions about Church and their attitude to people who have doubts or have stopped going.

### Meeting spiritual and religious needs involves

- Being observant: a) looking for verbal and non-verbal clues about what gives people meaning and purpose in their lives, and b) looking for signs of distress – anger, sadness, bitterness, regret
- Being serious about people’s views … even if they do not make sense in your world view.
- Taking time, to listen and to attend to individual needs. Spiritual and religious care is about “Being” not just “Doing”
- Not being afraid to raise the questions about individuals needs … you might miss the opportunity to enable people to do what they need to do.
- Responding appropriately to people’s needs … including referring to other’s who can help if you feel out of your depth.
What words would you associate with Spirituality and/or Religion?

_Underline_ spiritual words and _circle_ religious words

- faith
- anxiety
- compassion
- emotion
- acceptance
- creativity
- hope
- baptism
- love
- value
- communion
- purpose
- family
- social
- self awareness
- feeling
- trust
- peacefulness
- walking
- sunshine
- sense of well being
- reading
- self worth
- warmth
- forgiveness
- prayer
- sense of being
- understanding
- pictures
- music
- comfort
- meaning
- ritual
- freedom

Consider whether the following statements correspond to spiritual needs, religious needs or both (the first is done for you)

1. It would help Joe to focus on his new diagnosis. **True**  **False**
2. Thinking about his son’s death could be helpful **True**  **False**
3. Specific, direct questions will help Joe explain his needs **True**  **False**
4. Clinical professionals are usually comfortable asking questions about spirituality **True**  **False**
FURTHER ACTIVITY: Spirituality

Think about a conversation you have had with a patient recently. How could you have better addressed their spiritual and religious Needs.

FURTHER READING: Spirituality

Key documentation
NHS SCOTLAND (2009) Spiritual care matters- an Introductory Resource for all NHS Scotland Staff
NICE (2004) Improving Supportive and Palliative Care for Adults with cancer.
Piderman KM, Johnson ME. Hospital chaplains’ involvement in a randomized controlled multidisciplinary trial: implications for spiritual care and research. The Journal of Pastoral Care & Counseling; JPCC. 2009; 63(3-4): 8-1-6.
Spiritual & Religious Care Competencies for Specialist Palliative Care (2003) www.mariecurie.org.uk/healthcare
Spiritual Care at the End of Life: a systematic review of the literature (2011), Universities of Hull, Staffordshire and Aberdeen

Further information resources:
Colleagues; Chaplains and Chaplaincy Departments; Multi Faith Calendar’s/Resource sites

15 minute worksheets are available on:
- An introduction to palliative care
- Helping the patient with pain
- Helping the patient with symptoms other than pain
- Moving the ill patient
- Psychological needs
- Helping patients with reduced hydration and nutrition
- Procedures in palliative care
- Planning care in advance
- Understanding and helping the person with learning disabilities
- The last hours and days
- Bereavement

Available online on www.clip.org.uk