

The British Association for the Study of Spirituality was founded in 2009 in order to:

- encourage the further study of spirituality in its practical and theoretical aspects;
- strengthen the teaching and learning of spirituality as an academic and professional discipline;
- encourage dialogue about spirituality with different faiths, professions and interest groups;
- encourage and facilitate scholarship and research in spirituality, through the development of a journal and joint collaborative research projects;
- establish an international journal of the association;
- hold a biennial Conference;
- hold at least one General Meeting of the Association in each calendar year.

'Spirituality in a Changing World' is the Association's First International Conference. We are grateful for funding support from The British Academy, The National Forum for Mental Health, The Higher Education Academy Subject Centre for Philosophical & Religious Studies, The Montgomery Trust, and the Department of Health/National End of Life Care Programme.

### **TABLE OF CONTENTS**

Conference Information1
Message from the Vice-Chair of BASS2
Message from the Chair of BASS3
Programme4, 5
Parallel Sessions6, 7
Keynote Speaker Biographies 8, 9
Caitlin Matthews10
Abstracts11-38
Advance Notice of Next International BASS Conference39

### **CONFERENCE INFORMATION**

# Registration

The Registration Desk is located in the entrance hall at Cumberland Lodge.

Registration is open at the following times:

16.00 - 18.30 Tuesday 4 May 08.00 - 09.30 Wednesday 5 May 08.00 - 09.30 Thursday 6 May

# **Meditation Sessions**

8.30 - 9.00 Wednesday 5 May & Thursday 6 May. These will take place in the Sandby room. The Chapel is available for private use throughout the conference.

#### **Location of Sessions**

All plenary sessions take place in the Flitcroft room in The Mews adjacent to the main lodge.

Parallel sessions take place as follows:

Greening, Windham, Sandby, Hogson rooms in The Mews; the Library, L27 in the main lodge.

### **Eating and Drinking**

Teas, coffees and lunch are provided by Cumberland Lodge for all delegates. Tea/coffee is served from the bar at midmorning and mid-afternoon breaks. Lunch should be taken in one of the three dining rooms (Cumberland, Prince Christian or Princess Helena).

The bar (operates as a pay bar) will be open for about an hour before dinner. All delegates are welcome to use the bar whether or not they are resident at Cumberland Lodge.

### **Conference Dinner**

Wednesday 5 May at 19.00.

### **Reception Rooms**

The Drawing Room, Sitting Room, and the Tapestry Hall are available to all delegates throughout the conference as are the outside grounds.

# **Trip to Windsor Castle**

Tuesday 4 May, depart Cumberland Lodge at 13.30.



On behalf of the Conference Committee, I am delighted to offer you a warm welcome to the 1<sup>st</sup> International Conference of the British Society for the Study of Spirituality. It has been a journey of discovery for us in putting together the programme and the networking that has gone alongside that, to realise how rich in breadth and depth is the contemporary study of spirituality in the UK. We are also heartened by the responses from our international colleagues, some of whom are joining us as delegates to this conference, as they applaud and support what we are trying to do here in the UK. Put simply, our aim is to bring together our different starting points in a genuine encounter, and for the illumination which ensues from that to be brought to bear on the complex worlds in which we both live and work. This is what *Spirituality in a Changing World* is all about, and we hope that we will all be challenged, strengthened and refreshed in our individual journeys as much as we together reach towards new heights and horizons.

We are fortunate to have secured six excellent Keynote speakers as well as a stimulating and diverse range of papers from delegates. We are also delighted that Caitlin Matthews, the acclaimed spirituality trainer who uses the mediums of song and story-telling, is to join us for the conference dinner and after. It is a packed programme but we hope nonetheless that you will find time to enjoy the beautiful interior and surroundings of Cumberland Lodge.

Warmest wishes in anticipation of a great conference!

**Margaret Holloway** 

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**Chair of the Conference Committee and Vice-chair of BASS** 



Welcome to the 1st International Conference of the British Association for the Study of Spirituality. We are delighted that you have decided to spend time with us and we look forward to your contribution with anticipation. We hope you will agree that the line up for the conference both in terms of keynote presentations and parallel sessions is exciting and challenging and we hope that there will be something in the programme to fit with all of our expectations. BASS was set up as a forum for hospitable, interdisciplinary conversations aimed at exploring the significance of spirituality for a variety of contexts and perspectives. Perhaps the term 'hospitality' sums up the main intentions of the organisation and of this conference. In order for me to be hospitable towards you I need to respect you and to value your perspective and beliefs. If I have to pretend that I agree with you or if I have to dumb down my own views in order not to offend you then we can never really have a meaningful conversation and we are unlikely to become friends. But if I respect your integrity and you respect mine, then we can engage in hospitable friendly conversations. If we offer one another hospitality then even the contentious issues may become avenues that reach towards creative friendships. So we hope that all of us can approach the conference with hospitable intentions; seeking after rigorous, clear and firm engagement with the issues, but always seeking after truth in a spirit of friendship that opens all of us to new possibilities and constructive change. So it is with anticipation of great times together that we welcome you and look forward to the gifts that each of us will both bring and receive.

**Much Peace** 

**Professor John Swinton** 

**Chair of BASS** 

# FIRST INTERNATIONAL CONFERENCE OF THE BRITISH ASSOCIATION FOR THE STUDY OF SPIRITUALITY TUESDAY 4 MAY - THURSDAY 6 MAY 2010 SPIRITUALITY IN A CHANGING WORLD PROGRAMME

	SPIRITUALITY IN A CHANGING WORLD PROGRAMME				
DAY 1 TUESDAY 4 MAY	16.00	Arrival and Registration			
TOLSDAT 4 WIAT		Cumberland Lodge Welcome & Drinks Reception			
	17.30	Cumberiand Lodge Welcome & Drinks Reception			
	18.15	CONFERENCE OPENING Margaret Holloway Chair of Conference Committee			
	18:30	KEYNOTE 1 (Chair: Margaret Holloway) Venue: Flitcroft 'Religion and Spirituality: never the twain shall meet?' Professor Linda Woodhead Professor of the Sociology of Religion, University of Lancaster and Director AHRC/ESRC, Religion & Society Research Programme, United Kingdom			
DAY 2	19.20	Questions			
WEDNESDAY 5 MAY	8.30 - 9.00	Meditation (led by Arthur Hawes) please bring a favourite stone			
	9.15	KEYNOTE 2 (Chair: Wilf McSherry) Venue: Flitcroft 'Loss of meaning, crisis of faith' Dr Robert Neimeyer Professor of Psychology, University of Memphis, United States of America			
	10.15	BREAK			
	10.30	Parallel sessions 1			
	12.00	KEYNOTE 3 (Chair: Cheryl Hunt) Venue Flitcroft 'Children and spirituality: everything to play for' Dr Rebecca Nye Visiting Fellow and Freelance Researcher & Lecturer, Cambridgeshire, United Kingdom			
	12.50	Questions			
	13.00	LUNCH			
	14.00	Parallel sessions 2			
	15.30	BREAK			
	16.00	KEYNOTE 4 (Chair: Arthur Hawes) Venue Flitcroft 'Maintaining the spirit in the world of work' Dr Josie Gregory Director of the Foundation for Workplace Spirituality, Surrey, United Kingdom			
	16.50	Questions			

	17.00 - 18.00	Round Tables Choice of Round Table running simultaneously Venue Library Round Table 1 (Chair: Professor Margaret Holloway) Social Care Lead, National End of Life Care Programme Hull University, United Kingdom 'Spiritual Care at the End of Life'
		Venue Sandby Round Table 2 (Chair: Dr Rebecca O'Loughlin) Academic Coordinator (Theology), Subject Centre for Philosophical and Religious Studies, University of Leeds, United Kingdom 'The interdisciplinary teaching of spirituality'
	19.00	CONFERENCE DINNER followed by Caitlín Matthews Foundation for Inspirational and Oracular Studies and the StoryWorld project
DAY 3 THURSDAY 6 MAY	8.30 - 9.00	Meditation (led by Bernard Moss)
	9.00	Parallel Sessions 3
	10.30	BREAK
	11.00	KEYNOTE 5 (Chair: John Swinton) Venue Flitcroft 'Healthy lives? The spiritual challenge of 21st century health-care' Dr Harold Koenig Professor of Psychiatry and Behavioural Sciences and Associate Professor of Medicine, Duke University, United States of America
	11.50	Questions
	12.00	KEYNOTE 6 (Chair: Edward Bailey) Venue Flitcroft 'Can Spirituality Transform Our World?' Professor Ursula King Professor Emerita of Theology and Religious Studies and Senior Research Fellow at the Institute for Advanced Studies, University of Bristol, United Kingdom
	12.45	Questions
	12.55	CONFERENCE CLOSE  John Swinton Chair of BASS Executive
	13.00	LUNCH
	14.00	BASS Annual Business Meeting Chair John Swinton Venue Flitcroft
	15.30	Tea and Depart
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	Wednesday 5 <sup>th</sup> May 2010 - Parallel Sessions 1					
Theme	(T1) Psychology &	(T2) Religion &	(T3) Business &	(T4) Education	(T5) Health	(T5) Health
	Counselling	Theology	Organisations			
Room	L 27	Library	Windham	Greening	Sandby	Hogson
Chair	Michael O'Sullivan	Caroline Humphrey	Mike Baxter	Digby Warren	Dawn Edge	Edward Howells
10.30 -	T1.1 Coleman:	T2.1 Rossbach:	T3.1 Charles / Smith:	T4.1 Breadon:	T5.1 Nolan:	T5.4 Findlay:
10.55	The religious content and	Spiritual resistance and	The relevance of	Spiritual	Did someone say	Standing in the GAP
	practice involved in	inner freedom	spirituality in Policing:	development in the	'Spiritual Care'?	
	meaning reconstruction		a meta-analysis	twilight zone		
11.00 -	T1.2 Psaila:	T2.2 Schnell/ Keenan:	T3.2 Walsh:	T4.2 Hunt:	T5.2 Kevern:	T5.5 Minford:
11.25	A study of the spiritual	A trace of spiritual	Spirituality, policing	Understanding	Can reductionists	The soulful
	dimension of counselling	atheism	and the art of being	spirituality	be chaplains too?	foundations of
	and psychotherapy					healing
11.30 -	T1.3 Buckeldee:	T2.3 Horan:	T3.3 Palmarozza:	T4.3 Jelfs:	T5.3 Clarke:	T5.6 Schep-
11.55	How do counsellors and	Spiritual experiences	Truth at work	Spirituality and	Christian theology	Akkerman:
	clients experience	from childhood		learning	and nursing	Spiritual care in
	spirituality?					nursing & social work
						in the Netherlands
		1	Vednesday 5 <sup>th</sup> May 2010	ı	1	
Theme	(T1) Psychology &	(T2) Religion &	(T3) Business &	(T4) Education	(T5) Health	(T5) Health
	Counselling	Theology	Organisations			
Room	L 27	Library	Windham	Greening	Sandby	Hogson
Chair	Larry Culliford	Christopher Findlay	Jon Smith	Jill Banks-Howe	Tim Harlow	David Race
14.00 -	T1.4 Baldacchino:	T2.4 Adamson:	T3.4 Cullen:	T4.4 Warren:	T5.7 Nazir:	T5.10 Lynch:
14.25	Personality, stress and	Spirituality in	'Leaders in our own	Re-visioning higher	What proportion of	Mindfulness-based
	spiritual coping of	contemporary funerals	lives'	education	psychiatrists take a	coping with
	nursing students				spiritual history?	University life
14.30 -	T1.5 Johnson:	T2.5 Steffen:	T3.5 Howard:	T4.5 O'Loughlin:	T5.8 Edge:	T5.11 Tokumara:
14.55	The impact of healthcare	The experience of	Spirituality and the	Teaching spirituality	Conversations with	Fear of death and
	staffs' understanding	'sensing the presence	holistic development	in higher education	God or	afterlife
		of the deceased'	model		psychopathology?	
15.00 -	T1.6 Bussing:	T2.6 Becker:	T3.6 Bowman:	T4.6 Rogers:	T5.9 Koslander:	T5.12 Hall:
15.25	Aspects of Spirituality,	Health	Spirituality at work	Spirituality in	The varieties of	Considering
	Connectedness & self-	bereavement in Japan:		Healthcare	spiritual experience	spiritual needs of
	centeredness in	figures of light and				pregnant women
	Adolescents	continuing bonds				

	Thursday 6 <sup>th</sup> May 2010 - Parallel Sessions 3						
Theme	(T6) Health Education	(T2) Religion and Theology	(T3 ) Business and Organisations	(T6) Health Education	(T5) Health	(T5) Health	
Room	L 27	Library	Windham	Greening	Sandby	Hogson	
Chair	Jennifer Hall	Robin Morrison	Ronald Walsh	Donia Baldacchino	Bernadette Flanagan	Bernard Moss	
9.00 -	T6.1 Van Leeuwen:	T2.7 Whiting:	T3.7 Lamont:	T6.4 Banks-Howe:	T5.13 Furness:	T5.16 Anand:	
9.25	Towards nursing competencies in spiritual care	A particular spirituality: Dorothy Day and the Benedictine tradition	Spiritual intelligence at work	'Caring spiritually for the atheist – a contradiction in terms?'	Social work, religion and belief	The relationship between spirituality, health and well-beingof Undergraduate students	
9.30 – 9.55	T6.2 Cone:  Developing student  competencies in spiritual  care	T2.8 Grimley: The emergence of a neo monastic Spirituality	T3.8 Nisbet:  Do faith communities  have more spiritual  capital than some  leading consumer  brands?	T6.5 Culliford: Teaching medical students about spirituality	T5.14 Gilbert/ Parkes: Of Gods and Gurdwaras	T5.17 Selman: The meaning of spiritual well-being among people receiving palliative care in South Africa and Uganda	
10.00 – 10.25	T6.3 Caldeira: Teaching spiritual care to nursing student	<b>T2.9 O'Sullivan:</b> Spirituality and social justice	T3.9 Race: Community, spirituality and services	T6.6 Giske: Opening up for learning spiritual care	T5.15 Eagger: Assessing patient's spiritual needs in a mental healthcare setting	<b>T5.18 Slater:</b> Spirituality in end of life care	

#### **KEYNOTE SPEAKER BIOGRAPHIES**

# **Professor Linda Woodhead**

Linda Woodhead is Professor of Sociology of Religion at Lancaster University and Director of the £12m AHRC/ESRC Research Programme on Religion and Society. She has written on the decline of the churches and the rise of alternative forms of spirituality in the west, and has recently completed a book on religious emotion. Other books include: *The Spiritual Revolution: Why Religion is Giving Way to Spirituality* (with Paul Heelas, Blackwell, 2005) and *An Introduction to Christianity* (Cambridge University Press, 2004). www.lindawoodhead.org.uk

# **Professor Robert Neimeyer**

Robert A. Neimeyer, Ph.D., is a Professor of Psychology, University of Memphis, where he also maintains an active clinical practice. Neimeyer has published 23 books, including *Meaning Reconstruction and the Experience of Loss*, and serves as Editor of the journal *Death Studies*. The author of over 300 articles and book chapters and a frequent workshop presenter, he is currently working to advance a more adequate theory of grieving as a meaning-making process. Neimeyer served as President of the Association for Death Education and Counselling and Chair of the International Work Group for Death, Dying, & Bereavement. In recognition of his scholarly contributions, he has been granted the Eminent Faculty Award by the University of Memphis, and made a Fellow of the American Psychological Association. <a href="https://webmac.com/neimeyer">http://webmac.com/neimeyer</a>

#### Dr Rebecca Nye

Dr Rebecca Nye combines her career as an academic researcher, speaker, author and trainer on children's spirituality, with sharing her passion for an innovative approach to spiritual education called 'Godly Play'. Rebecca was responsible for the introduction of Godly Play to the UK (also to Germany and Finland), and has helped to establish widespread use of this challenging praxis in schools, churches, home groups and even theological training. A notable development in the UK has been the uptake of this approach in adult contexts. Rebecca conducted a landmark research study of children's spirituality

(see *The Spirit of the Child*, Nye with Hay), and was also responsible for developing the Psychology and Christianity project at the Faculty of Divinity, University of Cambridge (see *Psychology for Christian Ministry*, Watts, Nye and Savage). Rebecca has had research posts, from research assistant to Reader, at the universities of Birmingham, Nottingham, Cambridge and Anglia Ruskin. Currently she teaches and supervises in the spirituality and education area on a freelance basis at a number of UK universities. She has three children, one each at preschool, primary and secondary, and lives in Ely, Cambridgeshire.

# **Dr Josie Gregory**

# PhD. BA.(Hons). CTA (P). PGCEA. PGDipl. Hum. Psychol (IDHP), RGN. Dipl. Nurs. UKCC (CCPE)

Josie has held positions as a Senior Lecturer in Management, and in Professional Education working with clients in the private and public sections in the UK. She is an organisational consultant, coach, psychotherapist and professional supervisor. As a faculty member of the Human Potential Research Group at the University of Surrey – UK, (1990 -2009) she promoted a humanistic approach to personal and professional development which was reflected in the MSc in Change Agent Skills and Strategies. She is a psychologist and holds professional and postgraduate academic qualifications in humanistic and transpersonal psychology, professional education, group facilitation, and psychotherapy. Josie has been teaching one-to-one facilitation (coaching) and qualitative research methods on a master's programme in Organisational Change since 1995.

As a freelance consultant and academic she continues to teach and research personal, group and organisational change, spiritual development and group facilitation. She is presently researching post secular spirituality in organisations, transformational and spiritual leadership, the phenomenology of human experience and states of consciousness. She endeavours to bring all her experiences and perspectives to her present work in change psychology, transpersonal psychology and psychotherapy, research methods teaching, coaching and supervision practice. Josie is an Associate of Ashridge Business School where she is on the faculty for the Professional Doctorate in Organisation Consulting. She is also a faculty member on the MA/MSc in Psychological Coaching and a supervisor to the professional doctorate in psychological psychotherapy at the Metanoia Institute – London – UK and is associated with Roffey Park Institute, W Sussex.

She is a Founding Director of The Foundation for Workplace Spirituality www.workplacespirituality.org.uk

# **Dr Harold Koening**

Harold G. Koenig, MD, MHSc. Dr. Koenig completed his undergraduate education at Stanford University, his medical school training at the University of California at San Francisco, and his geriatric medicine, psychiatry, and biostatistics training at Duke University Medical Center. He is board certified in general psychiatry, geriatric psychiatry and geriatric medicine, and is on the faculty at Duke as Professor of Psychiatry and Behavioral Sciences, and Associate Professor of Medicine. Dr. Koenig is founding co-director of the *Center for Spirituality, Theology and Health* at Duke University Medical Center, and has published extensively in the fields of mental health, geriatrics, and religion, with nearly 350 scientific peer-reviewed articles and book chapters and 40 books in print or in preparation. His research on religion, health and ethical issues in medicine has been featured on dozens of national and international TV news programs (including ABC's World News Tonight, The Today Show and two episodes of Good Morning America), nearly a hundred national or international radio programs, and hundreds of newspapers and magazines (including Reader's Digest, Parade Magazine, Newsweek, Time, and Guidepost). Dr. Koenig has given testimony before the U.S. Senate (1998) and U.S. House of Representatives (2008) concerning the benefits of religion and spirituality on public health, and has given many seminars and workshops on the topic.

http://www.spiritualityandhealth.duke.edu/about/hkoenig/index.html).

His latest books are (1) Faith and Mental Health (2005), (2) In the Wake of Disaster (2006), (3) Spirituality in Patient Care,  $2^{nd}$  edition (2007), Medicine, Religion and Health (2008), Religion and Spirituality in Psychiatry (2009).

# **Professor Ursula King**

URSULA KING FRSA is Professor Emerita of Theology and Religious Studies and Senior Research Fellow at the Institute for Advanced Studies, University of Bristol. Educated in Germany, France, India and England, she has lectured all over the world and published widely, especially on women and gender issues in religions, interfaith dialogue, spirituality, and on Pierre Teilhard de Chardin. She has held several visiting chairs in the USA and Norway, and been awarded honorary doctorates by the universities of Edinburgh, Oslo, and Dayton, Ohio. In 1996 she gave the Bampton Lectures at the University of Oxford, published as Christ in All Things. Exploring Spirituality with Teilhard de Chardin (SCM Press, 1997). Other publications include Women and Spirituality: Voices of Protest and Promise (Macmillan 1993), the illustrated biography Spirit of Fire: The Life and Vision of Teilhard de Chardin (Orbis Books, 1996), Christian Mystics. Their Lives and Legacies Throughout the Ages (Routledge, 2004), and most recently The Search for Spirituality: Our Global Quest for Meaning and Fulfilment (Canterbury Press, 2009).

# **Caitlin Matthews**

Caitlín Matthews teaches across spiritual divides all over the world, helping people find their own unique spiritual pathway through song, ritual, meditation and practice. She is the author of 60 books, including *Sophia: Goddess of Wisdom, Walkers Between Worlds* and *Celtic Devotional*. She is co-founder of FíOS, the *Foundation for Inspirational and Oracular Studies*, which is dedicated to the sacred arts. Caitlín has a shamanic practice in Oxford dealing with soul-sickness and ancestral fragmentation. With John Matthews, she has developed the StoryWorld project, which brings storytelling to all all ages. <a href="https://www.hallowquest.org.uk">www.hallowquest.org.uk</a>



#### **ABSTRACTS**

WEDNESDAY 5 MAY 2010 PARALLEL SESSONS 1 10.30 – 11.55 am

**PSYCHOLOGY & COUNSELLING (T1)** 

**ROOM L27** 

Session T1.1

John H Spreadbury<sup>1</sup>; **Peter G Coleman** <sup>1</sup>
Professor of Psychogerontology, University of Southampton, UK

# The religious content and practice involved in meaning reconstruction and coping with spousal bereavement

**Introduction:** The use of religion by older adults coping and adjusting to spousal bereavement has been under researched within psychology and gerontology. The present study aimed to identify the specific religious content and practice used in coping with grief, and investigate how religious content and practice are related to meaning reconstruction (i.e. sense making, benefit finding, identity change), thought to be central to grieving.

**Method:** In-depth semi-structured interviews were conducted with 26 British older adults (M=76.3 years) all with a Christian belief, and who had experienced spousal bereavement. Interpretative Phenomenological Analysis was used to analyse interview transcripts and identify the religious cognition and practice used in coping and meaning reconstruction.

**Results:** Four main themes were identified: Benevolent religious cognition; Biblical assurances; religious ritual; and spiritual capital. Christian beliefs involving afterlife reunion and a sense of providence were salient to sense making and benefit finding processes. Biblical passages from both the Old and New Testament supported coping by reaffirming the central tenets of the faith, while stories/themes of suffering helped participants to understand their own experiences of loss. Rituals such as attending Mass/Eucharist and prayer provided behavioural mechanisms for expressing grief, and feeling a continuing bond with the deceased. Performing roles/jobs within the Church were integral to developing a new purposeful identity.

**Conclusion:** Christian belief and ritual are used in different ways by bereaved older adults. Christian belief is related to meaning-making processes, while Christian ritual is related to regulating grief-related emotion. Diverse Biblical passages facilitate coping by supporting meaning making.

### Session T1.2

# Ms Claudia Psaila

Psychologist, University of Malta

# A study of the spiritual dimension of counselling and psychotherapy as understood and experienced by Maltese practitioners: Initial findings

Given that many in the caring professions consider spirituality a fundamental dimension of human experience and identity, one may assume that psychotherapy and spirituality are inevitably linked since psychotherapy deals with the human being and with human experience. Moreover, the increase in secularization and the emphasis on the subjective and the personal in people's experience of spirituality and religion have led to an increased interest in psychotherapy, counselling and other forms of activities and professions that deal more closely with the personal and subjective (Heelas, Woodhead, Seel, Szerszynski and Tusting: 2005; Moore and Purton: 2006; Sperry and Shafranske: 2005; West: 2004). A qualitative exploratory study was carried out with two groups of Maltese counsellors, psychotherapists and clinical and counselling psychologists. Each group attended a series of 4 FOST (focus/study group) sessions. Key areas explored include the participants' conception of spirituality and religion and their understanding and experience of the spiritual dimension in counselling and psychotherapy. Broadly, the study

focused on the ways in which spirituality may become manifest and express itself in the counselling and/or psychotherapeutic process, the roles and experiences of the therapist and the client regarding spirituality in counselling and psychotherapy and the identification of the factors that may contribute to the spiritual dimension of counselling and psychotherapy. The study and initial findings will be presented together with a brief description of the Maltese context.

### Session T1.3

#### Jill M Buckeldee

PhD student, Department of Health and Social Care, University of Reading, UK

# How do counsellors and clients experience spirituality and spiritual issues in psychodynamic counselling?

It has been well documented that mental health workers including counsellors and psychotherapists are generally less religious than the populations that they serve (Worthington et al 1996, Smiley 2001, Delaney et al 2007). However the majority of these workers regard religion as beneficial (Delaney et al) and spirituality plays an important role for many of them e.g. Shafranske and Maloney (1990), Davis and Timulak (2009). The meaning of spirituality in many studies though has not been clearly elucidated. Despite repeated requests religion and spirituality are rarely included in the education, training or supervision of counsellors and psychotherapists e.g. Martinez and Baker (2000), West (2009). This is in contrast to findings that clients want these topics to be included in therapy e.g. Knox et al (2005), Jenkins (2006). The inclusion of religion and spirituality into psychodynamic work can be particularly problematic (Ross 2006). Previous research has demonstrated that it can be uncomfortable and that there is a lack of theoretical frameworks in which to work e.g. Martinez and Baker, Wyatt 2002. Most research has explored the topic of religion rather than spirituality in therapeutic relationships. This study proposes to explore spirituality within psychodynamic counselling relationships from both counsellor and client perspectives. The aim is to enable counsellors to reflect on their weekly practice with clients through the use of diaries. Counsellors and clients will also be interviewed about their spiritual beliefs and practices and their experiences of therapy. A range of psychodynamic counselling agencies will be included in the study.

# References

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WEDNESDAY 5 MAY 2010 PARALLEL SESSONS 1 10.30 – 11.55 am

### **RELIGION AND THEOLOGY (T2)**

#### **ROOM LIBRARY**

### Session T2.1

# **Dr Stefan Rossbach**

Senior Lecturer, Centre for the Study of Politics and Spirituality (CSPS), University of Kent, UK

# Spiritual resistance and inner freedom: the political significance of mysticism

Many authors emphasize the significance of Karol Wojtyla's election as John Paul II as a crucial factor in the collapse of European communism and yet it is rarely acknowledged that Wojtyla – the most 'visible' human in history, seen 'live' by more people in history than any other man or women – was a mystic. By the time of his election as Pope, Wojtyla had already completed a considerable body of work in which he reflected on the political and spiritual crisis of the 20<sup>th</sup> Century as the manifestation of a crisis in the very understanding (and hence practice) of personhood and action. His 'mystical' approach to these questions was heavily influenced by the writings of the Carmelite friar St John of the Cross (1542-1591). The work of St John of the Cross, in turn, was informed by a life-long meditation on the Song of Songs, which is full of Temple imagery and symbolism, thus leading us back to the spirituality of the Jerusalem Temple. My essay offers a reconstruction and analysis of this genealogy of influences as well as of Wojtyla's life-work in order to explore how – in a political context marked by war, totalitarian oppression and later nuclear deterrence – the life lived by a mystic could have the impact that it had, thus defying the commonplace contradistinction between contemplation and action.

### Session T2.2

# **Tatjana Schnell**

Assistant Professor, University of Innsbruck, Institute of Psychology, Austria

# William Keenan

School of Social Sciences, Nottingham Trent University, Nottingham, UK

#### A Trace of Spiritual Atheism

This paper is about a significant boundary in the mapping of belief, namely, the elusive margin separating theism from other potential modes of spirituality. In the renewed discourse on religion and spirituality, atheism, perhaps understandably, has been a silent presence, a neglected zone of belief, commitment and meaning. As the 'Other' of the conventionally 'spiritual', a concept that generally seems to carry the baggage of its religious roots, the 'atheist' is typically presumed to inhabit a lifeworld in which God is not only dead, but any spiritual traces of his/her shadowy presence, are decisively, deliberately and defiantly evacuated from the intellectual, emotional and organisational world in which the atheist, as über-rationalist, elects to dwell.

How realistic is this aspiritual or anti-spiritual conception, sometimes self-conception, of the contemporary atheist? To what extent does 'spirituality' apply to the atheist believer? Does 'spirituality' form a component of the atheistic choice of lifeworld meaning? What might be meant by 'atheistic spirituality'? Are there varieties of atheist spirituality just are there are of religious spiritualities? For present purposes, spirituality comprises the following components: concepts of fate, sacredness, transcendent power, and cosmic order.

In this presentation, self-declared atheists are compared with a representative sample of religionists (individuals who are members of a Christian Church). Atheists report significantly less meaningfulness – but they do not suffer more from crises of meaning than religionists do. But is it adequate to view atheists as a homogeneous group? Cluster analysis tells us that three clusters should be differentiated: The first can be distinguished from both others by the importance they give to spirituality (comparable to religionists). Interestingly, these 'spiritual atheists' are also those atheists who report the highest values of meaningfulness.

So, what are the key components of 'spiritual atheism'? The evidence so far tends to suggest the following: they are predominantly female; they are oriented by tradition, practicality, morality, and reason, as well as valorizing well-being and relatedness. A question for discussion is: What then are the defining features of atheist spirituality in contrast to more conventional conceptions of atheism and more traditional 'theistic' modes? Are there grounds for reconsidering the boundary line between theism and non-theism and the possibility of an emergent process of respiritualization at work in contemporary society? This may have significance for the multi-faith, multi-cultural dialogue.

# Session T2.3

# Majella M. Horan

Reasearch Assistant, University of Northampton, Psychology Department, UK

# **Spiritual Experiences from Childhood**

This exploratory study examined the experience of adults who were, by their own definition, on a spiritual path. Semi-structured interviews were conducted with nine adult participants, ranging in age from 29 to 63. Following thematic analysis conducted from a realist perspective, a major area identified was the beginning of the spiritual path in early childhood. Some of the participants described childhood anomalous experiences which affected their worldview and which they associated with their spiritual development. Also described was an innate knowledge or knowing, often inconsistent with their inherited spiritual tradition. Firstly, the experiences described could be said to refute the psychological developmental models of child development, suggesting that, rather than being a preconventional spirituality which is later outgrown, the spirituality of childhood may have a validity that continues into adulthood. Secondly, the innate knowledge described by many of the participants highlight a gap in the research into spiritual intelligence and childhood spirituality.

WEDNESDAY 5 MAY 2010 PARALLEL SESSONS 1 10.30 – 11.55 am

**BUSINESS & ORGANISATIONS (T3)** 

# **ROOM WINDHAM**

Session T3.1

# Ginger Charles, Ph.D.

Police Sergeant, Arvada Police Department, Colorado, USA **Dr Jonathan Smith**Senior Lecturer, Anglia Ruskin University, Cambridge, UK

# The Relevance of Spirituality in policing: A Meta-Analysis

Policing is a demanding occupation. Repeatedly dealing with death, serious injury, horrific crime scenes (rape, murder, and riots), the need to be constantly alert whether on or off duty, and being ostracized by communities, friends and family are only some examples of what officers encounter. All take their toll on police officers: on their health, fitness and well-being, and on their view of people and the world. The toll also extends to those who are served by these officers. While this heavy toll is recognized within policing, there are still high levels of sickness absence, ill health, divorce, alcohol/drug related problems as well as suicides. These manifestations are clear illustrations of the extremely challenging nature of policing. If we take a look at the deeper issues related to the above challenges we see that at a fundamental level they have a spiritual component to them. This spiritual component is often unrecognized by the police service. Police forces typically emphasize the physical and mental well-being of officers but neglect their spiritual well-being. There are sound moral and business reasons for placing a greater focus on this area though. The purpose of this paper is to present the synthesis of findings from two independent PhD research programs in this area of spirituality. It identifies the key issues related to coping

strategies and officer fitness, highlights how embracing the spiritual dimension may assist officers in the development of effective coping strategies, and finishes by identifying how these issues might be taken forward.

### Session T3.2

#### Ronald J Walsh Jr.

Detective Lieutenant, Nassau County Police Department, Nassau County, NY, USA

# Spirituality, Policing and the Art of Being

Law enforcement officers throughout the world are tasked with the responsibility of helping the helpless and fulfilling the role of primary caregiver for our cities, towns and villages. This position often times leaves the officer feeling abused, alienated, and alone. Agencies throughout the world spend time, money and effort ensuring that every recruit, every new officer, receives the best available training. This includes defensive tactics, weaponry, the law and legal issues, physical fitness, cultural diversity, and numerous other areas, all in an effort to ensure the best possible service to the public. But, what about the people who perform this vital function? What about their souls?

This presentation walks the listener through the life of a police officer. Exposing not only the inner workings of what it feels like to perform the "Job", but bringing to light the emotional and inner turmoil of decisions wherein life and death are in the officer's hands. Law Enforcement is the one area, the one commonality that every society has; the keepers of the peace. Law enforcement has the unlegislated responsibility of providing society the cue's for what behaviour is and is not acceptable. Think of a corrupt Police department in the world, and without exception the population is in turmoil. Empirically driven, I reveal the importance of intellectual and emotional honesty with oneself, of humility, of gratitude for the insights of others, and of the inevitable interconnection of one man's journey with those of others, and the life-altering significance those interconnections have.

# Session T3.3

# **Paul Palmarozza**

Head of Corporate Finance Training, ILX Group plc, London

# **Truth at Work**

Ethical behaviour in the workplace is a crucial issue for business today. The disastrous results of compromising principles are all too obvious. The talk will examine ways in which we move towards greater Truth at Work. Setting the scene -Truth is a difficult subject to discuss. The idea that there is one truth about any subject is not readily accepted. For many speaking the truth is not a moral imperative. Acting truthfully in business- or in life- is about applying fundamental moral principles as the basis of our decisions. We shape our lives by the values we hold dear and the decisions we make each day. We will examine our values and the basis for our decisions in terms of a hierarchy of morality, beginning with the basis being our spiritual beliefs down to saying whatever is needed to get a result. The real problem is when we become so determined to get results that expediency becomes the rule in a society. Truth at Work- The main topics are honour, integrity, trust. Honour - How important to your success in business is your personal reputation? the reputation of your company? of your industry- e.g. Banking. Integrity is consistency in thought, word and deed. Trust is essential in business - no trust, no deal; no deal, no business. We will look briefly at how to establish trust and how to re-build it once it has been lost. From fine principles to profit is the direction.

WEDNESDAY 5 MAY 2010 PARALLEL SESSONS 1 10.30 – 11.55 am

**EDUCATION (T4)** 

#### **ROOM GREENING**

#### Session T4.1

### John D Breadon

Churches National Adviser in Further Education Institution: Church of England/Methodist Church

# Spiritual development in the twilight zone: nomenclature confusion and the personal development of post-16 learners

The paper will discuss the contested area of spiritual, moral, social and cultural development (SMSC) within the further education sector. It will begin with an historical overview of the concept of spiritual development in post-16 state education since the 1944 Education Act. Attention will be paid to the relationship between changing educational terminology and the secularisation of British society since the end of the Second World War. Concluding remarks will suggest that the meaningfulness of the word spiritual in post-16 education is now under serious threat as it cedes space to rival terms such as personal development and well-being.

#### Session T4.2

# **Cheryl Hunt**

Senior Lecturer, University of Exeter, UK

# Understanding spirituality in the context of lifelong learning and professional practice

This presentation will begin with a summary of the author's own journey towards an understanding of spirituality and its relationship with her professional practice. This began with an attempt to articulate her practice as a community educator in the 1980s - when Lovelock's (1979) *Gaia hypothesis* was beginning to provide new imagery with which to challenge existing scientific worldviews - and led to an Economic and Social Research Council (ESRC) seminar series which she co-ordinated, entitled *Researching spirituality as a dimension of lifelong learning* (ref: RES-451-26-0008). The purpose of the presentation is to highlight some of the key issues raised during the seminars. In particular, it will focus on John Heron's (1996: 53) 'pyramid of fourfold knowing' to suggest how this model might be used to locate two different forms of spirituality (transpersonal and transcendental) to which participants in the seminars alluded. The presentation is intended to contribute to debates about the nature of contemporary spirituality, how this relates to an emergent '*Gaian*' worldview, and with what implications for lifelong learning and professional practice.

References: Heron J (1996) Co-operative Inquiry: Research into the Human Condition (London: Sage).Lovelock J (1979) Gaia: A New Look at Life on Earth (London: Oxford University Press).

# Session T4.3

#### **Helen M Jelfs**

Research Associate, University of Bristol, UK

# Spirituality and learning: using a personalised inquiry project to explore the relationship of learning and spiritual development in young people

Educational institutions are challenged to rethink their mission, curriculum, pedagogy and modes of inquiry to meet the challenges of current times (O'Hara 2006). Although Church of England schools supposedly offer a spiritual dimension (Archbishops' Council 2001), research suggests this focuses on religious practices and is not specifically related to teaching, learning and curriculum; however a strong relationship between learning, character, spiritual awareness, values and the attainment of students has been established (Arthur et al., 2006). Whilst personalising learning is current in education policy, little attention is given to the 'person' of the learner or their spiritual development. This research explores the relationship between spirituality and learning in a faith-based secondary school. It involves an innovative learning environment which includes the notion of 'learning power', (Deakin Crick 2006), and a personalised inquiry project in which students are facilitated in attending to four 'stations' in a learning journey: identity and story, leading to personal choice; learning dispositions and values; knowledge skills and understanding necessary for achieving their goal; a practical outcome of service learning or engagement in the real world. Three teacher researchers are working with two year 8 English classes and one year 9 French class in the school to implement this alternative pedagogy. A pre and post intervention self report 'measure' of learning power is compared with student attainment data, and narrative and semi-structured interviews with teacher researchers and students, observations, video recording and documentation monitor and explore the contribution this pedagogical approach makes to students' spiritual development and learning.

WEDNESDAY 5 MAY 2010 PARALLEL SESSONS 1 10.30 – 11.55 am

**HEALTH (T5)** 

**ROOM SANDBY** 

Session T5.1

#### **Steve Nolan**

Chaplain, Princess Alice Hospice, Surrey, UK

# Did someone say 'spiritual care'? Psychospirituality as a paradigm for non-religious spiritual care

Spiritual care is problematised when considered in non-religious contexts, for example, in health or social care. In such contexts, the pressing question is the familiar one of definition: how are we to understand spirituality? This paper attempts to shift the wearied debate about definition away from its preoccupation with religion by identifying three questions that need to be considered prior to addressing the question of definition, which it then does, proposing the concept of 'psychospirituality'. The first prior question is methodological – 'how do we go about answering the question what is spirituality?' This paper proposes a phenomenological approach. Given this approach, the paper next asks 'how "spiritual" and "spirituality" might be understood phenomenologically?' Finally, on the basis of answering these two prior questions, the paper asks, understood phenomenologically, 'how does spiritual care differ from humanistic psychological care?' Having addressed these prior questions, the paper proposes the concept of psychospirituality – human being as soul-spirit – as a paradigm for spiritual care in non-religious contexts.

#### Session T5.2

# Peter M Kevern

Director of Studies, The Queen's Foundation for Ecumenical Theological Education, Birmingham, UK

# Can reductionists be chaplains too? Reasons why nurses should leave 'spiritual care' to the professionals.

In a paper published in *Nursing Philosophy* in 2008, John Paley sparked an extended debate with his argument that the term 'spirituality' was vacuous, obscurantist and reliant on concealed theological claims. He concluded that, as such, it had no place in the training and practice of health care professionals. Granting the force of Paley's 'reductionist' position, the present author examines underdeveloped themes within his paper. In particular, resources from current research in the cognitive science of religion which he overlooks point to a continuing need for something like 'spiritual care' even if its metaphysical claims are rejected. Consequently, a reductionist approach strengthens rather than undermines the case for a parallel structure of spiritual care such as hospital chaplaincy, helping to give greater definition and legitimacy to the role of chaplains within the health care system.

# Session T5.3

# **Dr Janice Clarke**

Senior Lecturer, Institute of Health and Society, University of Worcester, UK

# **Christian Theology and Nursing**

The focus on the spiritual care of patients has led to a renewed interest in the intersection of religion and nursing. Traditionally nurses have been taught that in order to care for a patient with a religion you needed a handy guide to the food, festivals and death rituals of the main monotheistic religions. However this 'list' approach has been criticised as simplistic whereas an appreciation of how religious beliefs affect health practices might be more useful. The recent furore over the nurse who prayed with a patient suggests that we need to re-examine how nurses view religion and deal with religious practices and how these practices influence and overlap with spiritual needs. In addition, the desire to differentiate between spirituality and religion has resulted in more reductionist interpretations of religion as a tool or subgroup or spirituality which could be seen as being disrespectful. This paper will therefore survey the boundary between spirituality and religion; explore attitudes to religion in nursing and ask what is necessary for nurses to know about a person's religion.

This paper will build on published work about Clarke, J. (2006) Religion and spirituality: a discussion paper about negativity, reductionism and differentiation in nursing texts, *International Journal of Nursing Studies*, 43, 775-785 and anticipate a forthcoming book chapter on Christianity and Nursing.

WEDNESDAY 5 MAY 2010 PARALLEL SESSONS 1 10.30 – 11.55 am

HEALTH (T5)

**ROOM HOGSON** 

Session T5.4

### **Christopher D Findlay**

Consultant Psychiatrist, 5 Boroughs Partnership NHS Trust / Keele University Academic Psychiatry Unit, Runcorn, UK

Standing in the GAP: the importance of spirituality within recovery in General Adult Psychiatry; insights from the practice of EMDR in trauma resolution.

General Adult Psychiatry is practised within sectors throughout the UK. Usually patients have access to one consultant psychiatrist within their geographical area. Patients may only get to see a consultant after they have been seen by members of an Access and Advice Team before being accepted to the care of a Community Psychiatric Team. It is at this point that they may meet with a consultant general adult psychiatrist. The reason for involvement with a psychiatrist is usually because of 'severe and enduring mental illness'. It is increasingly recognised that psychosis (severe mental illness) may result from psychological trauma. This trauma is held within the body and is expressed in bodily sensations, psychological distress and mental illness. Using a trauma focussed approach such as EMDR (eye movement desensitisation and reprocessing, after Shapiro), some psychiatrists have found that the pain associated with past psychological injury can be relieved and new patterns of thought can emerge. Positive resources are draw upon to enable this transformation. This may be the spiritual resources (spiritual energy) of the patient, the psychiatrist or both. It is common to experience an unusual peace and stillness during the therapy. Some patients describe being 'touched'. This enables them to accept themselves and move on in life. Case material derived from this practice may provide food for theological reflection. Implications for research and service development will be discussed.

#### Session T5.5

### **Eunice Minford MA FRCS Ed**

Consultant Surgeon, Milltown Institute and NUI Dublin, Northern Health and Social Care Trust, Co Antrim, N. Ireland Antrim Area Hospital, Northern Health and Social Care Trust, 45 Bush Road, Antrim, BT41 2RL

# The Soulful Foundations of Healing

Illness and disease and the suffering they bring are common to the condition of life as a human being irrespective of religious tradition or belief. Despite modern medical therapy many illnesses and diseases are increasing and a paradigm shift is required to reverse this trend. This research sets out to explore the spiritual foundations of healing and hypothesizes that there may be a universal healing route based on the fundamental ontological nature of the human being irrespective of religious tradition or belief. This research uses the lens of the esoteric healer who understands spiritual wisdom, the human person and illness and disease at a fundamental energetic level. The intention is to uncover a universal healing route that is consistent with both science and the spiritual wisdom of the ages. A qualitative study was performed utilising the methodology of hermeneutical phenomenology. Five esoteric healers from the Universal Medicine School of esoteric healing underwent one hour semi-structured interviews. These were thematically analysed and the methodology was applied in order to answer the research question 'What are the spiritual foundations of healing as understood, experienced and expressed by esoteric healers?' Emerging from this research, this paper will present 'The Soulful Foundations of Healing' — a universal healing route based on the energetic and soulful understandings of the human person, illness and disease and healing. It is by the application of these understandings that a paradigm shift may occur to reverse the current rising trends in illness and disease.

# Session T5.6

# Annemiek E Schep-Akkerman

Researcher Lectorate Health Care and Spirituality, Reformed University of Applied Sciences, P.O. Box 10030, 8000 GA Zwolle, The Netherlands

# Spiritual care in nursing and social work in the Netherlands: obvious, but not natural

**Introduction**. Care nurses and social workers provide to meet the spiritual needs of their patients/clients, is understood as spiritual care. There seems to be a gap between what is expected in theory and what is actually practiced.

**Purpose**. To investigate spiritual care in daily practice.

**Method**. An online questionnaire was set up, with questions about personal spirituality, spirituality in work and demographic characteristics. Answers were calculated as percentages of the total group.

**Results**. 372 nurses and 46 social workers completed the questionnaire, mostly women and Christians. In theory, three quarter of all nurses and two third of all social workers state it is part of their job to see spiritual needs of their patients/clients. In both groups, about one third say it is also a task to help patients/clients in these needs. Only a few respondents think they have no task in spiritual care. In practice, two third of all nurses and half of all social workers spoke about spiritual needs with patients/clients. Ten percent of all respondents did not practice any spiritual care last month. There are remarkable differences between nurses and social workers.

**Discussion**. So, there is a gap between theory and practice. However, spiritual care is obvious, but (sad to say) not natural. Spiritual care is about 'being there', about listening to and making contact with the patient/client. There has to be more attention to spiritual care in educational programmes to close the gap, to stimulate the right attitude in nurses and social workers.

WEDNESDAY 5 MAY 2010 PARALLEL SESSONS 2 14.00 – 15.25 pm

# **PSYCHOLOGY & COUNSELLING (T1)**

#### **ROOM L27**

# Session T1.4

**Dr Donia Baldacchino,** Senior Lecturer Nursing, Institute of Health Care, University of Malta Dr Paul Galea, Faculty of Theology, University of Malta

# Personality, stress and spiritual coping of nursing students

#### Aim

This correlational study is part of a longitudinal study conducted at the Institute of Health Care in Malta. It sought to identify differences and relationships between personality, academic/professional stress and spiritual coping of undergraduate nursing students (n=115).

# Methods

Two cohort groups of students undertaking the second year Diploma Nursing/Midwifery (n=70) and BSc(Hons) (n=45); male(n=23), females(n=92); aged (18-20) years.

Three self-administered questionnaires were completed in class under supervision:

- NEO Personality Inventory (Costa & McCrae 1992)
- Academic and professional Stress Questionnaire (Rhead 1995)
- Spiritual Coping Strategies Scale (Baldacchino 2002)

### **Results**

The results showed lower mean scores on Neuroticism with higher scores in extraversion, agreeableness conscientiousness and average scores in openness. A significant difference (U=622.500, p=0.011) was found between agreeableness and gender with females (M=18.63, SD=10.793) scoring higher than males (M=16.43, SD=1.165). No significant differences were found in the five personality factors and age. The most common academic stressors reported by students were revising and sitting for examinations. Clinical stressors included watching a patient suffering, caring for dying patients and communicating with patients about their approaching death. No significant relationships were found between total stress and any of the personality factors. Students reported higher scores in the use of existential coping strategies such as appreciating nature, relationship with friends than religious coping such as prayer. A positive significant relationship was found between agreeableness and total spiritual coping(r=0.217, p=0.028). No significant differences were found in personality, stress and coping between the two cohort groups of students. These findings indicate the complexity in the students' modes of coping with stress in their nursing education programmes.

# Conclusion

The current nursing/midwifery course programmes need to be evaluated in order to address the personal and caring needs of students. Screening students' personality before recruitment, providing academic and clinical mentorship and counselling services may help them cope better with stress and become more active in appreciating life experiences, while welcoming novel challenges in their personal and professional life. Further longitudinal research including other variables such as self-esteem and spiritual well-being are recommended, supported by qualitative data collection, so as to identify fluctuation of results across time.

#### Session T1.5

#### **Chris Johnson**

Chaplaincy Manager, Bradford teaching Hospitals NHS Trust, UK

# The impact of healthcare staffs understanding, development and usage of assessment tools within the spiritual care of patients: A qualitative research study

Limited research has been done on the effectiveness and viability of assessments but little on spiritual assessment tools developed by nurses and in acute settings capturing their understanding and knowledge of spirituality, **with** researchers. This was the intention of this qualitative study. The researcher (a non-healthcare professional) worked first with nurses on their perceptions and understanding of spiritual care. This will be followed by nurse teams assessing and developing (with the researcher) their own spiritual assessment tools.

This Action Research study therefore is working with healthcare staff to consider current practice and where necessary devise, and implement spiritual assessment tools appropriate for the patients in a range of ward settings. Finally, the implications of any change of practice and outcomes will be evaluated. The context is the concept of Patient Centred Care used consistently across the NHS and knowledge of this is assumed.

There are three phases to this study. Phase 1 has been completed and involved 29 healthcare members of staff being interviewed in 5 clinical areas. This population included consultants, ward managers, senior sisters, staff nurses, healthcare assistants, physiotherapists and therapy assistants. The data was analysed using thematic and dilemma data analysis methodologies.

Six primary themes emerged from the data: The Context of Care, Best practice in spiritual care, Means of understanding spiritual care, Hospitalization can lead to spiritual trauma, Spirituality is the same a religion and Spirituality is complex.

The Issues or 'Dilemmas' identified within these primary themes:

# 1. Patient Centred Care:

Understood to be important for most staff <u>however</u> it is only aspirational or driven by NHS/Governmental political agendas.

Requires staff to give time to patients however they have very quality/quantity little time to give.

### 2. Best Practice in Spiritual Care

This is part of patient centred care <u>however</u> there is no time to provide it.

Requires understanding of and respect for different cultures/requires staff to draw alongside and listen to patient's stories/needs compassion <u>however</u> it is not their responsibility.

# 3. Experience, age, life skills important for staff in good Spiritual Care

Understanding of patient's spiritual requirements only comes with time and experience. Some nurses/doctors have these life skills <u>however</u> these skills can be taught to all staff of any age and the good use of patient documentation including care plans can make spiritual care available to most patients.

### 4. Hospital experience can lead to patients suffering spiritual trauma

Most healthcare staff recognize that patients can suffer from spiritual trauma during their hospital stay <u>however</u> most patients do not want to discuss these issues. Most do not recognize or know (or understand) about spirituality and/or needs.

# 5. Spirituality is the same as religion

Most staff found it difficult to differentiate spirituality and religion and so conclude that some patients are spiritual/religious and some are not. <u>However</u>, a minority said that all people are spiritual and for some it was equated with superstition and/or emotions.

# 6. Spirituality is difficult to explain

The majority found spirituality a difficult concept to define and so said they had no idea what it meant <u>however</u> a minority identified it as privacy and dignity. Some offered their own approach omitting the word spirituality.

# Session T1.6

Arndt Büssing<sup>1</sup>, Axel Föller-Manchini<sup>1,2</sup>, Peter Heusser<sup>1</sup>

# Aspects of Spirituality, Connectedness and Self-Centeredness in Adolescents

**Background:** We investigated associations between aspects of spirituality and self-centeredness among adolescents. **Methods:** In an anonymous cross-sectional survey we enrolled 254 adolescents (51% girls; mean age 17  $\pm$  0.7 years) from 4 high-schools in West-Germany. We applied standardized questionnaires to measure aspects of spirituality (ASP; alpha = .94), life satisfaction (BMLSS, alpha = .87), and additional items addressing self-centeredness, compassion, ethics etc.

Results: Adolescents appreciated *Conscious interactions* (with others, self, environment) the most, while they gave low scores for *Prayer /Trust in God* and *Transcendence conviction*; *Search for Insight / Wisdom* reached intermediate scores. Female students had significantly (p<.001) higher scores than males with respect to *Conscious interactions* (F=20.7) and *Prayer /Trust in God* (F=12.1). Particularly *Conscious interactions* and *Search for Insight / Wisdom* correlated with the intention to cling on the ideal to help others (r between .25 and .37). Significantly more boys than girls accepted this statement that "consideration for others is fine, but what really matters in the end is that I get ahead in school and my career" (52% versus 35%; p=.031, Chi2). This attitude of self-interest and rejected mutual consideration correlated moderately with the statement that what matters in life is the own good (r=.43), that compassion prevents others to actively care for themselves (r=.26), and negatively with *Conscious interactions* (r=.23).

**Conclusion:** Self-centeredness was observed particularly in male adolescents. This may have an impact on their social behaviour as adults. Teachers should support and encourage them in particular to develop as responsible and considerate individuals.

WEDNESDAY 5 MAY 2010 PARALLEL SESSONS 2 14.00 – 15.25 pm

**RELIGION & THEOLOGY (T2)** 

**ROOM LIBRARY** 

Session T2.4

# Sue E Adamson

Reaserch Fellow, University of Hull, UK

Other authors: Margaret L. Holloway, Vassos Argyrou, Peter Draper, Daniel Mariau

### Spirituality in contemporary funerals

This paper reports on a study funded by the AHRC. The study commenced in October 2008 and will run until the end of March 2010. Through a focus on contemporary funerals, it aims to explore: the changing nature of belief in contemporary society; the search for rituals and practices to express contemporary spiritualities; the impact of secularising and postmodern trends on an established socio-religious event (the funeral); the ascription of meaning, both individual and subjective and socially prescribed; the connections between meaning and identity, including spiritual and religious identities; and the ethnically diverse and pluralist contexts in which these phenomena are played out. The paper will present findings from analysis of data obtained from case studies of around 50 funerals and 30 interviews with professionals involved in the funeral industry. Each case study comprises: observation of prefuneral meetings between families and funeral directors and celebrants; observation of the funeral; a post-funeral focused interview with the bereaved person(s). The paper will consider perceptions of the purpose of the funeral

<sup>&</sup>lt;sup>1</sup> Centre for Integrative Medicine, Research Group Spirituality and Coping, Faculty of Medicine, University Witten/Herdecke, Gerhard-Kienle-Weg 4, 58313 Herdecke, Germany

<sup>&</sup>lt;sup>2</sup> Alanus University of Arts and Social Sciences, Faculty of Education

and the extent to which this concerns spirituality. It will explore the choices made by bereaved families, the influences which inform them and meaning that these express. It will present evidence of a range of beliefs concerning death and the afterlife and show that, while religious/ philosophical beliefs do not seem to be important for mourners in funerals today, 'meaning' is pursued in ways which transcend or infuse everyday life.

# Session T2.5

Edith Steffen, Supervisor: Dr. Adrian Coyle

Trainee Counselling Psychologist, Department of Psychology, University of Surrey, Guildford, Surrey GU2 7XH

# The experience of 'sensing the presence of the deceased' and spiritual meaning-making in bereavement

This presentation focuses on the challenges and potential benefits of conceptualising the common experience of 'sensing the presence of the deceased' in bereavement as a spiritual phenomenon. It draws on a recently completed qualitative investigation following a review of the relevant literature (in press). The nonmaterial quasi-sensory 'feeling of presence' of the deceased tends to be in conflict with dominant Western assumptions about reality, life and death. Although generally experienced as beneficial, there is a reluctance to disclose its occurrence for fear of having it 'explained away' or being thought of as 'mad' or 'stupid'. Cross-cultural research has shown that these experiences can be seen as expressions of the continuing bond with the deceased which can be conceptualised within spiritual/religious frameworks. However, a spiritual perspective not only challenges rationalist and individualist principles but also many religious understandings about life beyond death and the possibility of postdeath communication. This places particular demands on bereavement counselling and therapy, often the only places where such experiences can be made sense of through a process of narrative exploration. It is argued that socially sanctioned conceptual frameworks need to be available for the meaningful integration of this experience as illustrated by a thematic analysis of in-depth interviews with twelve perceivers, which showed that those who were able to conceptualise the experience within spiritual/religious frameworks derived greater benefit from it, for example personal growth or finding deeper meaning. This suggests that bereavement counselling may need to be more prepared to facilitate spiritual/religious meaning-making following this experience.

#### Session T2.6

# Carl B. Becker (Ph.D., DLitt.)

Professor, Kokoro Research Centre, Kyoto University, Sakyo-ku, Kyoto, Japan 606-8501

# Healthy Bereavement in Japan: Figures of Light and Continuing Bonds

In East Asian Buddhism, Amida refers to a Being of Infinite Light who escorts believers to the Pure Land (the next world) when they die. This is a widely documented and deeply grounded religious experience. Amida and the Pure Land can be personally encountered both through disciplined meditation and through deathbed experience. Modern researchers had to invent the English term "Figure of Light" to label this core central to Near-Death Experiences, but this phenomenon was already labelled and understood for 2000 years in the Pure Land tradition. In Japan, rich historical records of deathbed visions describe the Near-Death Experiences of devout believers who reported seeing Amida and the Pure Land at their deathbeds. These experiences of a Figure of Light at deathbeds, complemented by Japanese ritual practices that reaffirm continuing bonds with the deceased, not only proffer hope to the dying, but help to ameliorate burnout of medical caregivers, to decrease futile medical expenses treating terminal patients, and to reduce absenteeism, depression, accidents, and mental instability of the bereaved. In short, the Japanese spiritual affirmation of continuing bonds with the next world is based on the phenomena they experience at deathbeds, and serves to protect the health and sanity of their caretakers and bereaved.

WEDNESDAY 5 MAY 2010 PARALLEL SESSONS 2 14.00 - 15.25 pm

# **BUSINESS AND ORGANISATIONS (T3)**

#### **ROOM WINDHAM**

Session T3.4

#### **ANNE CULLEN**

Psychosocial & Spiritual Care Manager, Princess Alice Hospice, Surrey, UK

# 'Leaders in our own lives'- learning from palliative care social work to develop distributed leadership that realises the potential of both service users and professionals

This presentation draws on a study that demonstrated parallels between the practice of the specialist palliative care social workers and the skills and characteristics of effective leaders, as presented in recent accounts of close 'charismatic' or 'transformational' leadership. It showed that social work practice in these settings was informed by an attitude of profound respect and sustained availability towards both service users and colleagues, including a commitment to 'being with' people in circumstances of intractable suffering. Operating from this perspective, and drawing on professional skills of communication, sensitive and sophisticated risk management, creativity and networking, social workers enabled both service users and colleagues to identify and mobilise their strengths and capacities. This promoted the emergence of a distinctive dynamic of distributed leadership within the multidisciplinary palliative care team; within which the voices of patients and carers became part of an effective process of collaboration that enabled each member of the team to optimise their distinctive contribution. From a management and organisational development perspective the presentation indicates some helpful directions for developing distributed leadership within the transient and informal multi-disciplinary coalitions that are required to achieve the aims of the End of Life strategy, including an enabling, as opposed to a directive, management function. From a practice perspective it suggests that social work is at its most effective within a professional context that affords adequate scope to combine psychological and spiritual care with more formal and practical activities.

# Session T3.5

# Sue J F Howard

Founding Partner, Holistic Leadership, Hertfordshire, UK

# Spirituality and the holistic development model – influences on personal leadership

Purpose: To demonstrate the central importance of spirituality to leadership development through the use of the Holistic Development Model. Intention: To share a framework and process which can help leaders to identify and deepen their own understanding of spirituality and how it is relevant to their leadership role. I will share my PhD research to this point. Contribution: Provide insight into the holistic development model and how it can be used practically within organisations to create dialogue around spirituality, spiritual values and personal spiritual growth.

# Session T3.6

# **Timothy James Bowman**

University of London Thesis Degree: PhD, Ford Motor Company Ltd, Kent, UK

# Spirituality at Work: An Exploratory Sociological Investigation of the Ford Motor Company:

Spirituality in the context of work has become increasingly topical but there has been little empirical or specifically sociological research conducted to date. After reviewing this research, a case study is reported of a Benedictine monastery as an exemplar for a global and enduring organizational form that emphasises the integration of work with spirituality. Benedictinism is primarily explored through non-directive interviews. From its analysis the "spiritual-

family", a new ideal type of spiritually informed social structure based on charismatic authority is proposed and compared against Weber's ideal type of bureaucracy. In their purest forms, the spiritual-family *elects* and Weber's bureaucracy *appoints* their superiors respectively. The essential structural difference between the two is the means for this selection.

These two ideal types are then used to investigate the Ford Motor Company. This second case study, of a contemporary global industrial organization, is explored from two perspectives: a) the official pronouncements of its most senior spokespersons; and b) non-directive workplace-based interviews with grassroots level "knowledge workers" in conjunction with extensive participant observation over a three-year period. Analysis of these extremities reveals a shared aspiration for a radical reform of the underlying corporate authority structure from a type characterised by Weber's legal-rational type, typical of bureaucracy, to one more adequate described by his charismatic and contrary form.

Finally, the investigation briefly considers the affinity of this new ideal type with broader social and workplace trends, and finds that it is high. However, a transformation from a bureaucratic to a spiritually informed organizational structure would require a paradigm shift that in present circumstances within the Ford Motor Company is improbable short of a major crisis.

WEDNESDAY 5 MAY 2010 PARALLEL SESSONS 2 14.00- 15.25 pm

**EDUCATION (T4)** 

**ROOM GREENING** 

Session T4.4

Digby P Warren and Dave Griffiths

Learning & Teaching Coordinator, CAPD, London Metropolitan University, UK

Re-visioning higher education: exploring links between spirituality, teaching and learning

In contemplating prospective models of 'the university', Barnett (2009) moots possibilities such as the 'therapeutic', 'authentic' and 'ecological' university engaged with and for the good of the world. That picture has strong resonances with other frameworks that offer an alternative vision for higher education, reflected in notions such as *Gaia* consciousness (e.g. Midgley 2001), 'ecological' thinking (e.g. Capra 1997), spiritual intelligence (e.g. Zohar & Marshall 2000), 'presencing' (Senge *et al.* 2005) and transformative learning (e.g. Dilts 1990, Mezirow & Associates 2000, Cranton 2006, Nagata 2006, Taylor 2007, Dirkx 2007). What these have in common is a recognition of the interconnectedness of all forms of life, spiritual awareness as a core aspect of being, learning and development, and the place of intuition, feeling and imagination in knowledge generation and knowledge application, alongside rational thought. This paper outlines salient conceptions and values associated with these frameworks, and explores their implications for teaching and learning. Turning to pedagogical practice, the paper draws on select recent literature (e.g. Tisdell 2007, Hunt 2009, McIntosh 2008, 2009, Schwabenland 2009, Dixon 2003, Nagata 2006) in sketching an array of methods and activities than can assist students to tap into inspiration, insight and creativity, gain a deeper sense of meaning and perspective on what is being learnt, and foster their holistic development.

#### Session T4.5

# Rebecca M. O'Loughlin

Academic Coordinator , Subject Centre for Philosophical and Religious Studies, Department of Theology and Religious Studies, University of Leeds, UK

# Teaching spirituality in higher education: opportunities and challenges

The Subject Centre for Philosophical and Religious Studies is seeking ways to increase its engagement with those teaching spirituality in higher education (HE) in the UK, with a view to developing our understanding of the pedagogical opportunities and challenges facing this group. To this end, we are running a one-day, interdisciplinary workshop to explore issues around teaching spirituality in higher education HE in the UK in January 2010. This point of the workshop will be to initiate a conversation with, and between, academics teaching spirituality both within, and outside of, Theology and Religious Studies (TRS) departments (for example, we are also inviting academics from Healthcare and Business Studies departments, amongst others), and to get a sense of the unique teaching and learning issues facing both groups. The views of chaplaincy workers, equality/diversity officers, staff developers, and students will also be represented at this event. This paper will report on the outcomes of the workshop, which will be of general interest to BASS conference delegates, including: the achievements, developments, challenges, special problems and issues which delegates (at the Subject Centre workshop) have identified as being involved in the teaching of spirituality in HE in the UK; the unique issues involved in teaching spirituality outside TRS departments and/or without a TRS background; methods for teaching spirituality in HE; the role of assessment in teaching spirituality; and other related topics.

# Session T4.6

# **Melanie H F Rogers**

Course Leader- MSc Advanced Nurse Practitioner/Advanced Healthcare Practitioner. RGN, Advanced Nurse Practitioner-MSc Advanced Nurse Practitioner, Queens Nurse, Department of Human and Health Sciences, University of Huddersfield, UK

Janice E Jones, Senior Lecturer- Occupational Therapy, Occupational Therapist- MSc, Dip COT, University of Huddersfield, UK

### Spirituality in Healthcare- An Inter Disciplinary Approach to Education

This presentation will discuss the development of regular Inter Disciplinary Learning (IDL) provision and the evaluation of recent collaborative study days debating the role of spirituality in healthcare. The intention is to discuss how spirituality impacts health-care practice and provision and why educational programmes need to encompass spirituality. Much has been written about holistic care provided by healthcare practitioners (Shutler 1993, Hagedorn 1995 & Mezey et al 2003) yet including spirituality in educational programmes is frequently omitted. There seems to be an acute anxiety felt by those in caring professions about spirituality despite an increase in society's exploration of the subject (Tacey 2004). Healthcare practitioners often feel unprepared to address spirituality within practice (Belcham 2004). There is good evidence to suggest that integrating spirituality into patient care improves healthcare outcomes (Mayers 1998). The collaboration of a Nurse Practitioner and Occupational Therapist has provided IDL provision in order to address the lack on spirituality teaching within a range of programmes for all healthcare disciplines.

This presentation will contribute an innovative approach to integrating spirituality within healthcare educational provision and provide a forum for debate about the barriers and limitations which have been faced.

WEDNESDAY 5 MAY 2010 PARALLEL SESSONS 2 14.00 – 15.25 pm

**HEALTH (T5)** 

# **ROOM SANDBY**

Session T5.7

Dr. Saliha Nazir<sup>(1)</sup>, Dr. Gunnen Ghosh<sup>(2)</sup>

- 1. Speciality Doctor, Kent & Medway NHS & Social Care Partnership Trust,
- 2. Stepping Stones, 38 Mason's Hill, Bromley, Kent BR2 9JG

# What Proportion of Psychiatrists Take a Spiritual History?

#### Introduction

Somerset Spirituality project found that many clinicians either ignore an individual's spiritual life completely or treat their spiritual experiences as nothing more than manifestations of psychopathology.

### Methods

We undertook a cross sectional survey in the whole trust to find out the proportion of psychiatrists who assess the impact of spirituality on their patient's life.

### **Results**

The survey revealed that 50% of the psychiatrists take a spiritual history or discuss the impact of spirituality on their patient's lives.

# **Conclusion**

The study identified a need for raising awareness about taking a spiritual history and the tools for doing so. Several factors were also identified which might hinder the psychiatrists from incorporating this in the routine assessment.

# Session T5.8

# **Dawn Edge**

Research Fellow, The University of Manchester, UK

# Conversations with God or psychopathology? Black Caribbeans, Pentecostalism and mental health practice.

Researchers, clinicians, and policy makers increasingly acknowledge the potentially positive role of spirituality and religion for managing mental illness, aiding recovery, and maintaining emotional and psychological wellbeing. Emerging evidence suggests that enhancing the role of faith-based organisation might be a particularly effective strategy for improving the mental health of Black and Minority Ethnic (BME) communities who, whilst mistrustful of mainstream mental health services, are more amenable to receiving psychological support from non-statutory agencies and more likely to endorse spirituality in mental healthcare than their White counterparts. However, research also suggests that, at best, event those mental health professionals who are committed to integrating spirituality and religion into mental health practice lack the confidence and competence to do so. At worse, mental health practitioners are antagonistic – tending instead to pathologise spiritual beliefs and practices. Exploring the notoriously poor relationship between Black Caribbeans and the UK's mental health system, the centrality of Black Majority churches in Caribbean communities in the UK, and the New Horizons suggested by emerging policy framework; this paper examines the opportunities and challenges for meaningfully incorporating spirituality into mental healthcare – particularly where practice may be regarded as 'radical' or 'fundamentalist' in nature.

# Session T5.9

Tiburtius Koslander, Unni, Å. Lindström, António Barbosa da Silva

Corresponding author and presenter. RN,MNSc,Doctoral Student. Tiburtius Koslander, Department of Caring Science, Sweden

Professor Unni Å. Lindström, Department of Caring Science, Åbo Akademi University in Vaasa, Finland Theol. Dr. and Professor António Barbosa da Silva at Ansgar School of Theology and Mission, Norway

# The varieties of spiritual experience and their meaning for patients' mental health An empirical study with a hermeneutical analyze

Generally, in the Western countries' healthcare system, the legitimated knowledge is based on medical science, without recognition of patients' spiritual dimension. On the contrary, patients' spiritual experience is seen as a sign or symptom of mental disorder. Today's secularization and multi faith society are significant for mental care. There are secularized people with many different spiritual belongings. Second, there are people with different culture backgrounds and all of them may come in contact with mental healthcare. The theoretical pre-understanding of this study is caring science perspective, which implying that the human being is an integrated whole consisting of body, psyches and spirit who has inner longing for God or higher power. When the human being acquires faith in God or in a higher power, he or she becomes holy, which impacts his/her health. This does not mean living necessarily without any suffering from bodily, mental, spiritual or existential illness. The result of this study shows that patients could have positive or negative spiritual experience, the meaning of which may have different effect on their mental health. Anyway, it is a very important task for caregivers to explore and address patients' spiritual dimension, i.e., to help and empower them who have negative spiritual experience, and to recognize the positive effect of spirituality on mental health.

WEDNESDAY 5 MAY 2010 PARALLEL SESSONS 2 14.00 – 15.25 pm

**HEALTH (T5)** 

**ROOM HOGSON** 

Session T5.10

Siobhan Lynch<sup>1</sup>, Marie-Louise Gander<sup>2</sup> & Harald Walach<sup>1,3</sup>

- <sup>1,</sup>PHD Student/Part Time Lecturer
- <sup>1,,3</sup> Psychology Department, School of Social Sciences, University of Northampton, U.K. <sup>2</sup> University Hospital Berne, Inselspital, Brust- und Tumorzentrum Frauenklinik, 3010 Berne, Switzerland

# Mindfulness-Based Coping with University Life (MBCUL): A Randomized Wait-List Controlled Study

Mindfulness and mindfulness-based approaches are becoming increasingly hot topics in student health and well-being. Mindfulness-based approaches have been shown to help individuals deal with stress and promote well-being in the workplace and more mindful students appear to be more able to change perspectives more readily and respond accordingly. An 8-week mindfulness meditation-based programme has been developed to help students cope with university life and the many stresses and strains associated with it. This study builds on the promising results of a non-randomized wait-list controlled pilot study of. Students were randomised into either the MBCUL group (N= 14) or the wait-list control group (N=11). Questionnaires which examined levels of anxiety, depression, perceived stress, coping and mindfulness were administered and post MBCUL interviews were conducted. The results show significant within-group decreases in perceived stress (z=-2.191, p=.03), anxiety (z=-2.409, p=.02), depression (z=-2.547, p=.01) and on problem solving (z=-2.333, p=.02) and positive reappraisal (z=-2.082, p=.04) between time 1 and time 2 in the MBCUL group only. A significant increase in levels of mindfulness (z=-2.431, p=.02) was also observed in the MBCUL group. Significant between group differences were observed in the change scores for anxiety (z=-2.777, p=.005), depression (z=2.097, p=.04), perceived stress (z=2.356, p=.02), positive reappraisal (z=-2.713, p=.007) and reported levels of mindfulness (z=-2.705, p=.007). Students reported finding MBCUL a useful

toolkit for them which had positively impacted their lives. These results suggest that MBCUL is a useful programme which helps students to cope better with the pressures of student life.

# Session T5.11

# Sadako Tokumaru<sup>1</sup>, Sunggy KIM<sup>2</sup>

Professor, Joetsu University of Education

- 1; 1-1-504 Yamayashiki Joetsu Cty, Niigata, Japan
- 2; 20/105 Woojutown Hwangseong-dong Gyeongsangbuk-do Gyeongju-si Korea.

# Fear of Death and Afterlife ~Comparison of Japanese and Korean Students

Historically, much of Japanese spiritual culture was inherited from Korea, but today, Japan and Korea display distinct worldviews. This study investigated 465 Japanese and 321 Korean students' fears of death and attitudes towards afterlife, using the multidimensional fear of death scale (MFODS), and using SPSS for factor and variance analyses. Gender differences between Japan and Korea proved insignificant, with females showing higher anxiety in both cultures. Compared to the Japanese, Korean students showed higher "fear of afterlife" but lower "fear of leaving their bodies to science", "fear of the process of dying itself," and "fear of their loved ones' deaths." Factor analysis distilled five factors central to fear of death and afterlife, in which Japanese and Korean students proved similar overall. However, these results starkly contrast with similar surveys conducted in the United States, indicating the importance of cultural considerations in developing death education programs.

# Session T5.12

#### Jennifer S. Hall

Senior Midwifery Lecturer, University of the West of England, Bristol, UK

# Considering the spiritual needs of pregnant women, their unborn babies and partners.

Within the UK currently there is an expectation that health carers will provide women-centred, holistic care to pregnant women and their families (NMC 2009). It could be argued that, as there is limited understanding of spiritual care related to pregnancy and the unborn child that it is unlikely that spiritual needs are being met within a holistic care package. The purpose of this discussion will be to consider what these needs may be and how midwives and other care professionals could provide spiritual care. In addition reference will be made to provision of pregnancy care in a Christian church setting.

**THURSDAY 6 MAY 2010** 

PARALLEL SESSONS 3 9.00 – 10.25 AM

**HEALTH EDUCATION (T6)** 

**ROOM L27** 

Session T6.1

# René R van Leeuwen

Lector Healthcare & Spirituality, Reformed University for Applied Sciences Zwolle, The Netherlands

# Towards nursing competencies in spiritual care: effectiveness of an educational programme

The holistic approach in health care includes attention to the spiritual functioning of patients, because it may also affect a patient's wellbeing. Spirituality seems to be an under-utilized aspect of nursing care because of an educational gap. It implies that there is a role for nursing education.

This presentation intends to give insight in the impact of an educational programme in spiritual care on Dutch nursing students competencies in this area. The attendees of this presentation will be challenged to consider if the results can be generalised to their own healthcare or educational contexts. The impact of the educational programme was investigated by a combination of quantitative and qualitative research methods. In a quasi-experimental longitudinal observational study (pre-test and post-test) competencies of students (n=97) were assessed by using the Spiritual Care Competency Scale (SCCS) and by assessing outcomes of students analysis of vignettes regarding spiritual care. The qualitative component of the investigation contains an analysis of students reflective journals from thematic peer review sessions regarding spiritual care. Statistically significant changes over time were found across all the subscales of the SCCS. The analyses of the vignettes showed a divers image of the students competence. The learning effects from the thematic peer review sessions as indicated by students were summarized as: gaining awareness, developing confidence and a change-directed attitude. The research raises questions about the content of education in spiritual care, the assessment of competencies and the role of teachers. In this presentation the results will be further explained to and discussed with the attendees.

Reference: R. van Leeuwen (2008). Towards nursing competencies in spiritual care. University of Groningen

# Session T6.2

# Pamela Cone, RN, PhD

Nursing Professor, Azusa Pacific University School of Nursing, USA

Developing Student Competencies in Spiritual Care: A Grounded Theory study of how Norwegian Nursing Teachers facilitate Student learning of Spiritual Care practice.

<u>The purpose</u> of this study was to understand how teachers prepare nursing students for spiritual care.

A study on spiritual care nursing education was conducted among four nursing programs in Bergen. This international collaboration funded by the Fulbright Foundations of the US and Norway had one investigator from each country. The importance of the situatedness of spiritual care was better understood as we explored differences in history, tradition, and values and the influence of Norwegian values of individuality, equality, privacy, and moderation on nursing care. Seven focus groups were conducted with teachers. Data were analyzed according to the constant comparative analysis approach of grounded theory.

The main concern of teachers was how to develop student awareness of patient cues for spiritual needs and learn strategies for meeting needs in the spiritual domain. The nursing teachers resolved this concern through the substantive grounded theory, **Developing Student Competences in Spiritual Care**. This basic social process has three stages: 1-Raising Awareness to the Spiritual Domain, 2-Reflecting on Spiritual Needs, and 3-Discussing Spiritual Care Strategies.

Subcategories for stage 1 include "Providing written materials on spirituality" and "Requiring reflective essays on spirituality". Stage 2 includes "Giving scenarios where spiritual needs are primary" and "Encouraging peer discussion on spiritual need scenarios". Stage 3 includes "Doing Role Plays to demonstrate spiritual concerns" and "Discussing Spiritual Care strategies in patient care settings". The question remains in the minds of teachers of how well they are teaching spiritual care and how well the students learn through these teaching/learning modalities.

# Session T6.3

# Sílvia M. Caldeira

Nursing lecturer, School of Nursing - University of Madeira, Portugal

Teaching spiritual care to nursing students: from the programme contents to the lessons' experience

The research results are unquestionably about the negligence in spiritual care and focus one of the most related causes that is the lack in nursing education. Graduation Nursing Course at the School of Nursing of Madeira's University was changed to Bologna Programme in 2008/2009. It was an opportunity to introduce such an important subject in undergraduate nursing course. Third semester students (38) were in classroom studying about "nursing

and spiritual experience in health/illness transition process". The lessons plan was developed for 9 hours and included next major items: human person, holism and spirituality; spiritual needs; spiritual development; illness and suffering as an spiritual developmental opportunity; spiritual care; nursing skills in spiritual care; exploring International Classification for Nursing Practice (ICNP); nursing process; nurse as an spiritual person and spiritual agent. The 2 major objectives were: understand spirituality concept in living experience, particularly, in health/illness transition process and apply scientific nursing methodology (nursing process) when spiritual needs are recognized. Methodology included contents exposure and discussion, reading texts, reflection about personal experiences, group work, listening to music and guided imagination. To all students were given a written examination. In hospital practices students frequently discuss spiritual subjects about their patients when presenting their nursing process and made the expected links to previous lessons. This is an important subject in nursing courses because promote student's personal development, skills to recognize spiritual needs, create unique opportunity to explore ICNP and helps patients in their transition experience in Health/illness.

THURSDAY 6 MAY 2010 PARALLEL SESSON 3 9.00 – 10.25 am

**RELIGION AND THEOLOGY (T2)** 

**ROOM LIBRARY** 

Session T2.7

### Russell L. Whiting

School of Education and Social Work, The university of Sussex, UK

# A particular spirituality: Dorothy Day and the Benedictine tradition

In social work studies in recent years the topics of spirituality and religion have been much discussed. These discussions have for the most part been conducted in general terms and have resulted in a broad appreciation of the value of the consideration of religion and spirituality in social work. Whilst such discussions have broken new ground there are limits on how much further discussion couched in general terms can proceed. This paper suggests that one way to enrich these discussions is by considering particular spiritual traditions, not to endorse one over another but to come to appreciate their varied richness and complexity. For example, the term Christian Spirituality is not a particularly meaningful or helpful term in this context because it is so broad. Better to consider its various outworkings such as Orthodox spirituality, Quaker spirituality or Benedictine spirituality. One concrete way to do this is to take a biographical approach. Unfortunately social workers tend not to write autobiographies or speak openly about spirituality (see Whiting 2008 for implications of this). One exception is Dorothy Day, one of the founders of the Catholic Worker movement in the USA. When she was 58 years old Dorothy Day became a Benedictine Oblate. This paper will use Day's writings and the Rule of St. Benedict to examine how she lived out a form of Benedictine spirituality, exploring such themes as stability, materiality, and humility. It will consider the resonances that this particular form of spirituality might have for contemporary social work.

Reference: Whiting, R. (2008) "No room for religion or spirituality or cooking tips". Exploring practical atheism as an unspoken consensus in the development of social work values in England. *Ethics and Social Welfare*. 2.1 pp. 67-83

# Session T2.8

# **Anthony K Grimley**

Monos – 'Centre for the Study of Monastic Spirituality and Culture', Coalville, Leicestershire, UK

# The emergence of a Neo Monastic spirituality: a symptom of or reaction to, post modern society?

Neo Monasticism is becoming a new word on the lips of many Christians during the beginnings of the 21st century. The term itself has been used in a variety of ways within the monastic tradition; In a sense, the term opens itself up to usage in relation to any new development within the monastic tradition. For the Christian of the 21st century the term Neo Monasticism primarily finds its source within a letter written in 1935 by the late great German theologian,

Dietrich Bonhoeffer to his brother Karl-Friedrich. Running contemporaneously with the emergence of neo monasticism, the Christian community at large is waking up to the fact that we are now living in a cultural 'new age', which sociologists call 'post modernity' and is in part illustrated in the large amount of books now being published concerning post modernity with the word 'Christian' nestled into their titles. An occurrence of this slow awakening, particularly on the emergence of a neo monasticism, is that the effects of post modernity have already begun to take shape in the lives of individuals and in their environment. What is significant here is not so much the existence of post modern ideas, but the fact that people are often unaware of these changes within society and their own lives. As a result, as individuals and communities seek to change amidst the new cultural developments, is the change, as reflected in the development of new spiritualities like new monasticism, in danger of becoming a symptom of, or a reaction to, post-modernity?

### Session T2.9

### Michael F. O'Sullivan

Director of the Higher Diploma and MA Programmes in Applied Christian Spirituality and Senior Lecturer Milltown Institute of Theology, Spirituality, and Philosophy, Dublin 6, Ireland

# **Spirituality and Social Justice**

The purpose of the presentation is to articulate a way of integrating a commitment to social justice within the framework of spirituality. The intention in the presentation is to show the value of spirituality in tackling social injustice. In carrying out this intention the paper will contribute to the task of disputing positions that consider or make spirituality an obstacle rather than a friend in the struggle for social justice. The paper proceeds in its task by deriving the category 'spirituality' from the foundational desire that directs human knowing and choosing. This self-transcending desire is spiritual because it seeks communion with beauty, truth, goodness and love, which have been differentiated in compact human experience over time. These being ultimate realities they are spiritual in character. Spirituality so conceived integrates a commitment to social justice on the grounds that social justice is about beauty, truth, goodness and love in life. This conception gives social justice work a spiritual form of meaning. It contests, for example, a traditional conception of Christian theology that considers God's salvation to be otherworldly and interested only in a disembodied soul. It provides instead anthropological spiritual grounds to support the argument of Latin American liberation theology that salvation by Jesus Christ is holistic and involves participation in the transformation of history. For liberation spirituality, however, this common human spirit inspiring and informing commitment to social justice is ultimately gifted to the human heart and community by God's passionate love and fulfilled by the gift of Jesus Christ.

THURSDAY 6 MAY 2010 PARALLEL SESSIONS 3 9.00 – 10.25 am

**BUSINESS AND ORGANISATIONS (T3)** 

#### **ROOM WINDHAM**

Session T3.7

# **Georgeanne Lamont**

Managing Director, Lamont Associates, Ascot, UK

Spiritual intelligence at work for effective management in the 21<sup>st</sup> century – a practical approach for sustainable and highly effective workplaces

The presentation will demonstrate how to develop spiritual intelligence successfully and appropriately within an organisation. It will show the key tools and principles that underlie soul-friendly organisations and show what it looks like in practice when working with live business issues. Based on over twenty years of research and application

in the field the presentation will provide a range of stories of soul-friendly companies, both SMEs and multinational. It outlines a theoretical framework formulated in the early '90s and road-tested extensively, internationally over the last 20 years. It explores eight practical tools that can be used immediately back at work to release the very best in people and to create a culture of high trust. The presentation will provide a sound way of applying spiritual intelligence in a secular and multicultural society. The outcomes of this approach relate directly to business concerns such as productivity, performance, profit, engagement, absenteeism, well-being, mergers, relocations, reorganisations, cost-cutting, team meetings, growth and change. It invites managers to use a holistic, practical approach that will transform the workplace with ease and respond to the pace of change with agility. We draw on 'Values and Visions' Lamont and Burns, Hodder and Stoughton 1995, and 'The Spirited Business' Lamont, Hodder and Stoughton 2002.

# Session T3.8

### **Robert J.Nisbet**

Programme Manager for Safeguarding & Dignity in Care, Department of Health, East Midlands, UK (private submission)

# Do faith communities have more spiritual capital than some leading consumer brands?

The presentation will explore faith communities (Hindu, Muslim & Christian) as entrepreneurial businesses and question whether they have sufficient spiritual capital to be nurturing and sustainable in contemporary Britain.

Building on the work of ZOHAR. D and MARSHALL. I (2004) Spiritual Capital. Wealth We Can Live By. (Bloomsbury), the presenters premise is that for many faiths in Britain, Maslow's hierarchy of needs has been applicable in understanding their history particularly in the context of their diasporas. There is now a requirement for that hierarchy to be inverted and for faith communities to move from the politics of survival, and harmonising relationships with other faiths to that of being modern businesses that are deeply sustainable and organisations with spiritual capital. Using the example of Leicester City's faith communities as an exemplar of community cohesion, has this also extended to holism and connectivity with non faith communities? How can faith communities through spiritual capital assist in those communities where there are deep crisis of meaning, lack of belief in anything and the undercurrents of extremism for many young people. The presentation concludes by asking the question of whether certain consumer businesses have more spiritual capital and that many of their brands become synonymous with a person's identity. Can faith communities create more spiritual capital in Britain's consumerist society?

# Session T3.9

# Dr David G. Race and members of L'Arche communities in the UK

East Lynne, Chelmorton, Buxton, UK

# Community, spirituality and services – issues for faith based communities

When Jean Vanier met three men from a French institution in 1963, and changed lives by inviting them to share a home with him, he did not have to conform to the 'vulnerable adults agenda', undergo police checks, or adhere to prevailing professional or managerialist views of 'best practice.' Yet the movement of communities of people with and without learning disabilities, known as L'Arche, has developed into a worldwide example of possibility, of sharing and commitment based on an acceptance of mutual vulnerability. At its heart is an ecumenical spiritual sense of the value of all human beings, and the often unrecognised but unique contribution **from** people with learning disabilities to communities, not just their passive receipt of 'services.' This presentation highlights, through the use of real examples from L'Arche in the UK, the tensions that increasingly appear to exist between a vision of community and the 'rules' of service funders and professionals. These may be expressed at a personal level, such as restrictions on the development of friendships between the disabled and non-disabled members of communities; or at organisational level, in terms of boundaries set by funding authorities as to the sort of physical space and/or sort of 'service' provided by any given community. In the light of this, the onset of 'personalisation' seems to present both opportunities and threats. The presentation thus explores the reality of service provision within a vision of mutuality of relationships.

THURSDAY 6 MAY 2010 PARALLEL SESSIONS 3 9.00 – 10.25 am

# **HEALTH EDUCATION (T6)**

#### **ROOM GREENING**

# Session T6.4

### **Jill Banks Howe**

Senior Lecturer Teesside University, School of Health & Social Care, Middlesbrough, UK

# 'Caring spiritually for the atheist – a contradiction in terms?'

Spirituality is about personal development, spiritual growth is about surpassing the self and caring about others, and the need for others to care for you. Arguably the difference for an atheist is that this caring is not directed by religion. Atheists are often portrayed as being so; due to misfortune or tragedy in their life and hardly ever considered as having made a rational choice. If there are misconceptions around atheism, then how can we care spiritually for the atheist? This presentation will aim to challenge the concept of atheism within spiritually and argues that atheism needs to be explored in terms of spiritual care, especially in the dying trajectory. There are those who would claim that atheists are quick to believe in God in times of crisis, that approaching death sees conversations to religion, no evidence exists to support this theory. However perhaps we need to consider the spiritual needs of a person before their theological beliefs. Is religion the easier concept? If holistic care is to be embraced healthy debate needs to take place, without fear of offense or being outside of 'Political Correctness'.

### Session T6.5

# **Larry D Culliford**

Consultant Psychiatrist & Author, Royal College of Psychiatrists, UK

# Teaching 3<sup>rd</sup> year medical students about Spirituality

This paper will report on a successful teaching programme on spirituality and healthcare conducted by the author at Brighton and Sussex Medical School from 2005 to 2007. Student profiles, rationale, course objectives and content will be presented, together with an evaluation based on learning outcomes, student feedback forms and their 1500 word written reports. An educational balance of knowledge, skills and attitudes/values seemed important when planning the programme. Students learned to enquire about patients' spirituality. They appeared to respond particularly well to spiritual skills training, also to input and discussion regarding compassion and spiritual values.

# Session T6.6

# Tove Giske, RN, PhD

Associate Professor, Research & Development in Nursing, Haraldsplass Deaconess University College and Haraldsplass Deaconess Hospital, Norway

# Opening up for learning Spiritual Care: A Grounded Theory study of how Norwegian Nursing Students learn to practice Spiritual Care

<u>The purpose</u> of this study was to understand more about how we can best prepare our students for spirituality in nursing

#### Contribution

The study was conducted by two co-investigators from the US and Norway. This international collaboration raised our awareness of how differences in history, tradition and values influenced our findings, and thus, led to a deeper

understanding of the cultural context of this study and how Norwegian values of individuality, equality, privacy and moderation influenced spirituality in health care. The results come from interviews of undergraduate students in 10 focus groups from three nursing programs. Data were analysed according to grounded theory methods.

Students' main concern was found to be: How to create a professional relationship with patients and maintain it when spiritual concerns are recognised. How the nursing students resolved this is presented in the substantive grounded theory named "Opening up to learning spiritual care". This basic social process has three intertwined stages called "Preparing for optimal connection", "Connecting and supporting patients", and "Reflecting on experiences".

"Preparing for optimal connection" has two subcategories: "Knowing who you are" and "Preparing in school". "Connecting and supporting patients" explains how students work in practice with "Connecting in mutual vulnerability" and by "Supporting patients respectfully". "Reflecting on experiences" was an important part of the learning process where both successes and failures were discussed through and through. The entire process is iterative as students continue to learn and develop spiritual care awareness and competence over the course of their years in nursing education.

THURSDAY 6 MAY 2010 PARALLEL SESSIONS 3 9.00 – 10.25 am

**HEALTH (T5)** 

**ROOM SANDBY** 

Session T5.13

**Sheila. M. Furness, Philip. A. Gilligan**MA Social Work Programme Director, University of Bradford, UK

# Social work, religion and belief: a framework for reflection on practice

Social work education and training should prepare practitioners better to recognise and work with those for whom religion and spirituality have significance (Furman et. al, 2004; Gilligan and Furness, 2006). This presentation explores the need for a framework that will assist social workers and other practitioners to identify when religion and belief are significant in the lives and circumstances of service users and how to take sufficient account of these issues in specific pieces of practice. It will outline the Furness / Gilligan framework that was developed, in part, from interviews with practitioners about how religion and belief impacted on their work. The framework can be used as part of existing assessment frameworks, while being potentially useful at all stages of intervention. It concludes that such a framework provides the necessary structure and challenge to assist social workers (and others) in acknowledging and engaging with such matters that can remain overlooked, ignored or avoided, regardless of how significant they may be to service users.

References: Furman, L. D., Benson, P. W., Grimwood, C. and Canda, E. R. (2004) 'Religion and spirituality in social work education and direct practice at the Millennium: A survey of UK social workers', *British Journal of Social Work*, **34**(6), 767–92. Gilligan, P. and Furness, S. (2006) 'The Role of Religion and Spirituality in Social Work Practice: views and experiences of social workers and students' *British Journal of Social Work*, **36** (4), 617-637.

#### Session T5.14

# PETER D. GILBERT, 1. MADELEINE E. PARKES<sup>2</sup>

- <sup>1</sup> Professor of Social Work and Spirituality, Staffordshire University/Birmingham and Solihull Mental Health NHS Foundation Trust, UK
- <sup>2</sup>Birmingham and Solihull Mental Health NHS Foundation Trust

18 Oakham Drive, Dudley, West Midlands, DY2 7TL

# Of Gods and Gurdwaras: The role of Spirituality in Mental Health in Birmingham and Solihull Mental Health NHS Trust

The purpose of this paper is to overview and disseminate the current good practice examples emerging in the NHS in the field of Spirituality and mental health care. Spiritual and religious care has been integrated into the provision of both acute and community mental health care services in Birmingham, which is an increasingly multi-cultural and multi-faith city. A range of dynamic and effective projects that work, both with faith communities and an increasingly broad definition of spirituality, have contributed to the effective inclusion of spirituality as part of an holistic approach to recovery from mental illness. Interventions that are culturally relevant and faith appropriate are being tested as part of an embryonic research programme – the first of its kind for the NHS. The Presentation will contribute to the growing interest in spirituality and its relationship to mental health care, in particular providing a unique contribution of an evidence-base.

# Session T5.15

# Sarah A Eagger

Consultant Psychiatrist, National forum of Spirituality and Mental health/Royal College of Psychiatrists Special Interest group of Spirituality and Psychiatry CNWL NHS Foundation Trust, London, UK

# Assessing patients' spiritual needs in a mental healthcare setting

Spirituality is a top-of-the-agenda item for many users and yet psychiatrists and other mental healthcare workers are often not confident in exploring this with their patients. The 'strengths perspective', which posits clients personal and environmental strengths as central to the helping process encourages us to enquire sympathetically about what gives his or her life most meaning, and about what helps most in adversity. The 'how to' of this topic will be expanded first by exploring ideas about the relevance of spiritual needs and care and then by examining in more detail the variety of screening instruments available. As well as asking 'Why' the spiritual needs of psychiatric patients should be addressed, also questions about 'How', 'Who' and 'When' will be discussed. The differences between quantitative versus qualitative approaches, and also narrative versus interpretative frameworks will be explored for understanding spirituality as necessarily intrinsic to optimal care-planning in the context of mental healthcare. The presentation will also examine some of the dilemmas in this area.

THURSDAY 6 MAY 2010 PARALLEL SESSIONS 3 9.00 – 10.25 am

**HEALTH (T5)** 

**ROOM HOGSON** 

Session T5.16

Varun Anand<sup>1</sup>, PARAMJIT S GILL<sup>2</sup> JUNE JONES<sup>3</sup>

- 1. Medical Student, School of Health and Population Sciences, University of Birmingham, UK
- 2. School of Health and Population Sciences, University of Birmingham
- 3. Interactive Studies Unit (ISU), Primary Care Clinical Sciences, School of Health & Population Sciences, University of Birmingham

# The relationship between spirituality, health and well-being in undergraduate students in the UK

**Introduction:** Who am I? Why do we exist? What is the meaning of life? Students throughout the world explore spirituality and actively pursue a reason for existence; '...there is a desire for belonging and to find purpose in life'. A US study has shown that low self-reported spirituality amongst students predicts risky health behaviours including tobacco and alcohol consumption. Adults (mean age of 63.4) with a greater sense of purpose and meaning in life have fewer physical and psychological symptoms and higher levels of subjective well-being. However, there is a dearth of data from the UK.

**Aims:** The primary aim of this study is to explore the relationship between spirituality and the health and well-being of undergraduates at a multi-faith UK university. Secondary aims are to explore whether the relationship varies by course and/or being a member of a faith society. It will be the first study of its kind in the UK.

**Methods:** The study will take place at the University of Birmingham. 1500 undergraduate students from a random sample of departments will be asked to respond to an online questionnaire. The latter includes the Spiritual Well-Being Scale and validated questions relating to their health and subjective well-being. Data analysis will be carried out using SPSS and descriptive and regression analyses will be undertaken. Data collection will take place early in 2010 and results will be available for presentation at the conference.

# Session T5.17

**Lucy E. Selman<sup>1</sup>**, Dr Richard Harding<sup>1</sup>, Prof Irene J. Higginson<sup>1</sup>, Dr Marjolein Gysels<sup>2</sup>, Revd Peter Speck<sup>1</sup> and members of the Encompass Collaborative<sup>3</sup>

# The meaning of spiritual well being among people with life-limiting, progressive illness in South Africa and Uganda: a qualitative study

**Background:** Evidence suggests that spiritual well being (SWB), manifested as a sense of peace and life worth, affects quality of life (QoL) in advanced disease. Understanding the meaning of SWB to patients is vital if healthcare services are to meet spiritual needs. However, research is lacking in this area, particularly in sub-Saharan Africa (SSA).

**Aim:** To explore how patients with incurable, progressive disease in SSA describe their SWB and conceptualise 'peace' and 'life worth', in order to inform care provision.

<sup>&</sup>lt;sup>1</sup> Research Associate Department of Palliative Care, Policy and Rehabilitation, King's College London, UK

<sup>&</sup>lt;sup>2</sup> Barcelona Centre for International Health Research (CRESIB), University of Barcelona, Spain

<sup>&</sup>lt;sup>3</sup> South Coast Hospice, South Africa; Witwatersrand Palliative Care, Chris Hani Baragwanath Hospital, Johannesburg, Gauteng, South Africa; Hospice Palliative Care Association of South Africa, Pinelands, Cape Town, Western Cape; Hospice Africa Uganda, Makindye, Kampala, Uganda.

**Methods:** A purposive sample of patients was recruited by local researchers at 4 palliative care services (3 South African, 1 Ugandan). Semi-structured interviews were recorded, transcribed and translated into English for thematic content analysis in NVivo.

**Results:** 72 patients were interviewed in 7 languages. Mean age 45.1 (SD 15.9); 48 (66.7%) women; diagnosis: cancer N=28 (38.9%), HIV N=43 (59.7%). Respondents described good SWB despite hardship, although ambivalence/ suffering were also reported. Life worth related to perception of self/ world, family relationships, QoL. Peace was conceived as a feeling/ experience dependent on relationship with God/ others, acceptance of illness. Uncontrolled pain, social rejection and family worries were barriers to peace; lack of life worth was associated with futility, loneliness, past trauma.

**Conclusions:** The meaning of SWB is embedded within culture and language. Patients from SSA conceptualise SWB in relational terms, and struggle with existential concerns in addition to practical/ financial worries. Despite considerable resilience, patients in this population demonstrate a need for spiritual support integrated with physical and psychosocial care.

# Session T5.18

# **Victoria Ruth Slater**

Research Officer, Oxford Centre for Ecclesiology and Pastoral Theology, Ripon College, Oxford, UK

# Spirituality in end of life care: mapping the contours of a mature discourse in order to enable effective spiritual care.

Over the past decade, discourse on spirituality in End of Life Care has been preoccupied with seeking definitions and in distancing itself from religion. Drawing on Worsley's analysis of the state of discourse on spirituality in counselling, I argue that these preoccupations have led the discourse to a point of incoherence that corresponds in developmental terms to adolescence. The need for the discourse to distance itself from its parent – religion – whilst still being close to it has generated an unnecessary and untenable rift between the religious and non religious. It now needs to become mature enough to move beyond this split to embrace a holistic concept of spirituality enabling us to talk more helpfully of spiritualities as functional or dysfunctional, therapeutic or destructive. The presentation characterises spirituality as universal in nature and distinct in expression. It maps the contours of a mature discourse placing at the centre the meanings the patient ascribes to their spirituality, the capacity of the carer to enter into the lived experience of the patient and to communicate therapeutic understanding, and the willingness of carers to familiarise themselves with the contours of their own spiritual life. Seven themes that underlie effective spiritual care are outlined and it is suggested that the way to develop effective spiritual care is to be open to learn the deep spiritual meanings of emotional and psychological distress through encounters with others. Thus we learn what it means to be a spiritual carer rather than administers of spiritual care.



Advance notice of the next International BASS Conference
May 2012
(exact dates and venue to be confirmed)