



The cherry on the cake or the yeast in the dough?

About chaplaincy in palliative care

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CHAPLAINCY?



Welcome to the multi lingual world of chaplaincy

- A chaplain needs to be multi lingual
 - Language of patients and loved ones for spirituality
 - Language of care
 - Language of economics
 - Language of theology/reflection in life view
 - Language of research
 - Language of stories
 - ...

A chaplain is a bearer of stories

Palliative care as a womb

A sacred space

- A place in and out of daily business (another world: micro kosmos)
- A place that shows society how good care should look (the strength and force of compassionate care)
- A place of mercy (root of Hebrew for womb and mercy are identical: rechem from root racham)
- A place to transform (life balance and prepare for death)
- A place of connectedness (relational and spiritual)
- A place of transition (from here to there)

A chaplain is a creator of space

The chaplain in palliative care (pallium)

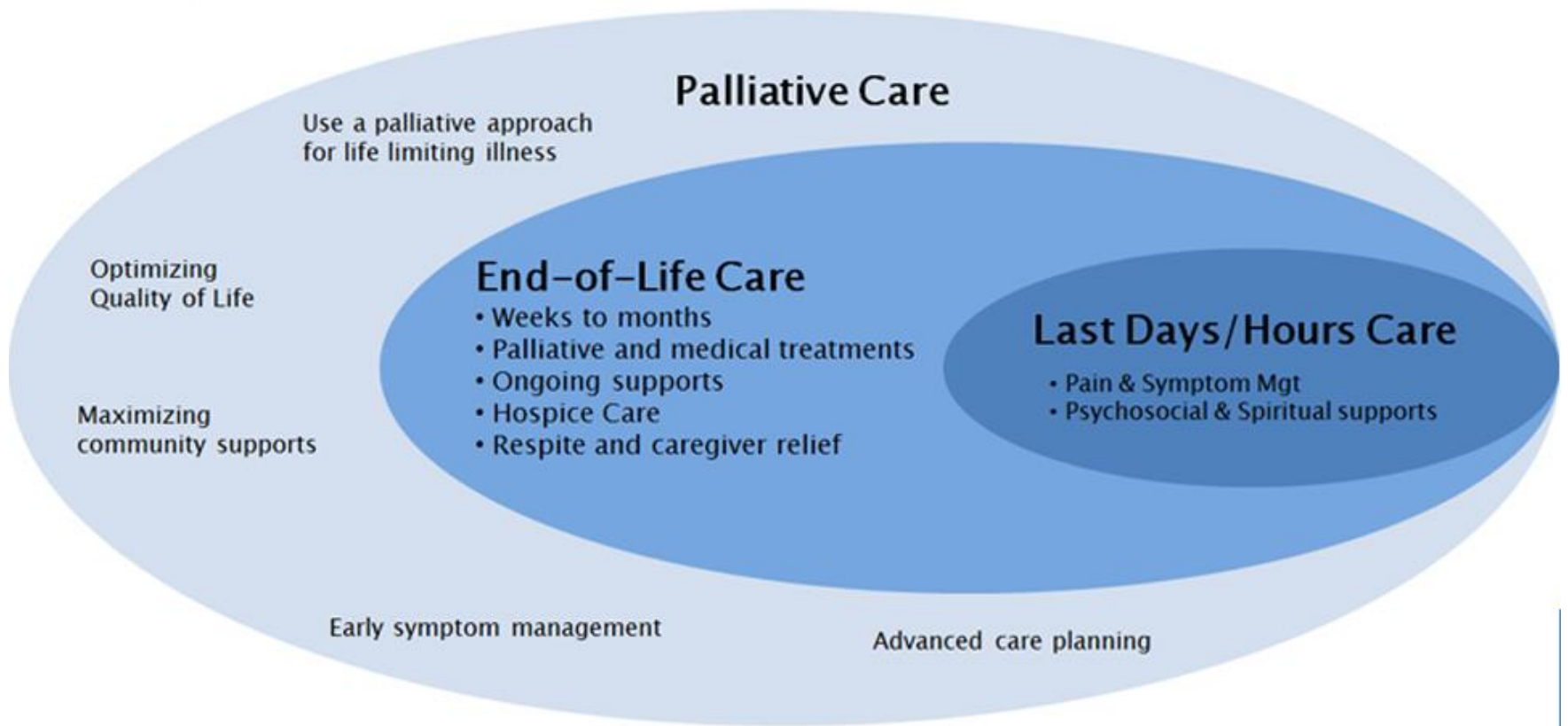
- Patient centered care from a biblical perspective
- Where you go I will go, and where you stay I will stay

(Ruth 1, 16)



Cherry on the cake

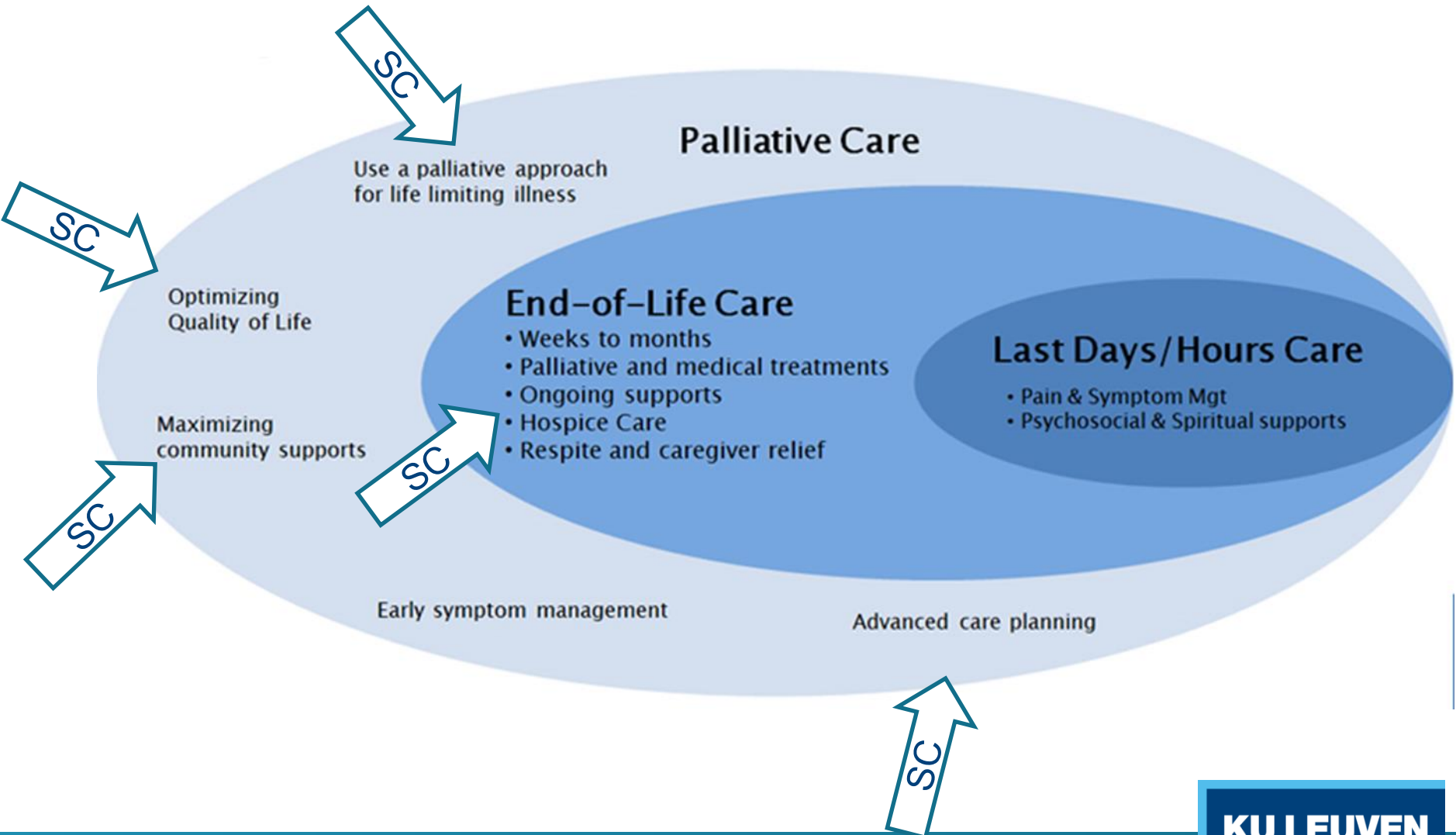




Yeast in the dough



SC= Spiritual care should be integrated



Every one needs to do SC

- So why chaplains?
 - Background and training
 - Very diverse in Europe (European Network for HC Chaplaincy)
 - Professional competencies, spiritual care competencies
 - Code of ethics (conduct)
 - Professional associations
 - Knowledge
 - Knowledge of different traditions, own tradition and contemporary search for meaning, theory of sc,
 - Speak language of spirituality (language of symbols and metaphors, non verbal)

So why chaplains?

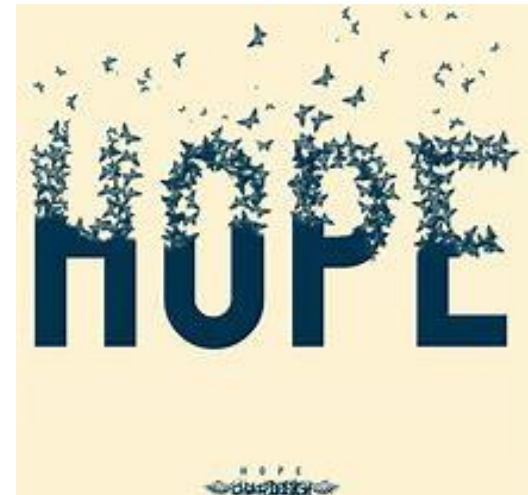
- **Spirituality**
 - Are able to put own spirituality in dialogue with scientific approach of spirituality and religion (seconde naïvité – Paul Ricoeur) and therefore can use their spirituality as an instrument or have room for spirituality others
- **Trust**
 - Experts in relationship building
- **Confidentiality**
 - Despite secularization the connection between chaplain and confidentiality continues to exist
- **Coping with powerlessness**
 - Questions of meaning (slow questions) don't know an immediate answer - chaplains are used to dealing with powerlessness.
 - See powerless as a space where new things can happen

So why chaplains?

- Getting to the spiritual dimension
 - Level of facts, level of emotions, level of spirituality
- Dealing with ultimate hope and fears

‘As another chaplain once taught me, distinguishing between fears that occur before the last breath and fears that occur after the last breath is a great way to help determine whose expertise is needed at the bedside’. Daniel D. Matlock, MD

Daniel Sulmasy MD: ultimate hope is spiritual



So why chaplains?

- What chaplains do in PC:

Study of 2015 (Jeuland-Fitchett ao) in the US

Primary activities of chaplains

- Building relationships (76%)
- Ritual support (64%)
- Introducing spiritual care
- Connecting patients with their faith communities

Taking care of death, dying, grieving (69%)

Aligning patient's values with goals of care (55%)

The more chaplains are integrated, the higher they score on this item

Existential an spiritual distress (82%)

So why chaplains?

- Dealing with images of God

Why did God allow this to happen to me? (faith as protection) Marion Muller-Colard : L'AUTRE DIEU. La Plainte, la Menace et la Grâce, 2014. God as a source of resilience (God is different and pulls us into the dynamics of creation)

- Bridging: making communication better between patients, loved ones and staff
- Life balance stories
- EOL: chaplain helps patient to decide (based on spirituality: values, psychosocial identity, transcendence...)
- QOL: higher when spiritual care happens
- Follow up on loved ones- bereavement

So why chaplains?

- Training and counseling (generalist – specialist)
 - Comparison with staff on ICU in The Netherlands: 66% states they feel competent to deal with spiritual issues. 90% thinks that the chaplain is the specialist. 23% too little time to deal with spiritual needs. (Suzan Willemse)
 - Chaplain as part time counselor on palliative care to teach staff how to deal with spiritual issues. (generalist-specialist). Recent research of Joep van de Geer.
 - Traugott Roser ao, 2017: Expert discussion on spiritual history taking (uncomfortable: time, burdensome, insecure, invading privacy, doing harm)
- Family meetings
- Culture – room for the sacred
- Interdisciplinary teams
- Staff support – staff rituals

ERICH PROM SPIRITUAL CARE

- Patient's perspective on chaplains is important
- Validated research instrument, starting with research in 6 European countries
- NHS Scotland, Austyn Snowdon
- UK palliative care
- www.chaplaincyresearch.eu



Chaplain as a pointer to the source

- Are we enough patient centered?
- Is quality of life enhanced?
- Are we burning ourselves up?
- Are we all building a story of care?
- Is giving and receiving in balance ?
- Is there room for the sacred, rituals, spirituality?

