

Spirituality

So what is spirituality? It is the core of our being. It is where the sacred is. The World Health Organisation (2014) acknowledges the importance of dealing with a person's spiritual dimension as part of providing wholistic health care. This is a welcomed change when we consider that 30 years ago spirituality was an optional extra in the care of a person. Spiritual Care is realising that we do not have all the answers. It is about journeying with people in their pain and questioning about life's meaning. It is not about having religious platitudes up your sleeve like saying that 'this must be God's will'. Instead, it is about not knowing, and being a compassionate friend on the journey.

Spirituality is a broader concept than religion, although religion is one expression of spirituality. Not everyone has a religion but everyone is a spiritual being. MacKinlay's (2006) model of spirituality acknowledges that ultimate meaning is mediated through 4 areas: Relationships- intimacy with others and/or God or a Higher Power, Creation/ Environment- nature, garden etc, the Arts- music, drama etc and Religion – worship mediation etc.. She argues that good religion incorporates all 4 areas in this meaning making process.

"Health is not just the absence of disease, it is a state of physical, psychological, social and spiritual well being" (World Health Organisation, *Precis of discussion*, 1948).

The spiritual aspect of care

The World Health Organisation (WHO) has made many statements about the importance of the spiritual part of the person.

The WHO states: "Until recently the health professions have largely followed a medical model, which seeks to treat patients by focusing on medicines and surgery, and gives less importance to beliefs and faith. This reductionist or mechanistic view of patients as being only a material body is no longer satisfactory. Patients and physicians have begun to realise the value of elements such as faith, hope and compassion in the healing process. The value of such 'spiritual' elements in health and quality of life has led to research in this field in an attempt to move towards a more holistic view of health that includes a non-material dimension, emphasising seamless connections between mind and body".

"Traditional spiritual practices such as the development of empathy and compassion are being shown to be vital active ingredients, even prerequisites, in effective healthcare – in the carer and the cared for they build wellness and happiness. Effective and efficient healthcare must now (re)take into account these core values." (Reilly, 2005)

"Spirituality is part of health, not peripheral but core and central to it. It pervades our every thought and action, each caring moment. Spirituality and health are bonded to each other, inseparable companions in the dance of joy and sadness, health and illness, birth and death." (Wright, 2005)

"Illnesses are deeply meaningful events within people's lives, events that often challenge people to think about their lives quite differently. Spirituality sits at the heart of such experiences. A person's spirituality, whether religious or non-religious, provides belief structures and ways of coping through which people begin to rebuild and make sense of their lives in times of trauma and distress. It offers ways in which people can explain and cope with their illness experiences and in so doing discover and maintain a sense of hope, inner harmony and peacefulness in the midst of the existential challenges illness inevitably brings. These experiences are not secondary to the 'real' process of clinical diagnosis and technical care. Rather they are crucial to the complex dynamics of a person's movement towards health and fullness of life even in the face of the most traumatic illness." (Swinton, 2005)

"What we feel and believe about our health can directly affect it; indeed, there is a direct impact upon our cellular structure from our emotional state. We therefore need to look more deeply at spirituality because it directly affects the wellbeing of patients. This in turn challenges us to find more rigorous assessment tools and more appropriate ways of addressing patients' spiritual needs than ticking the religion box in the case notes." (Pert, 1999)

"Furthermore, there is a growing body of evidence that stress, burnout, and the disenchantment of professional carers with their work has its roots in issues more complex than pay and conditions. Issues such as meaning, purpose, relationships, and connectedness at work (the very stuff of spirituality) are just as important as other matters, if not more so, in producing a happy and contented workforce, and an organisation that does its job well." (Wright, 2005)