



Universität Zürich  
Theologisches Seminar

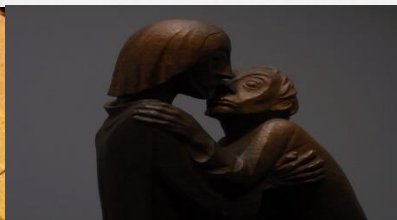
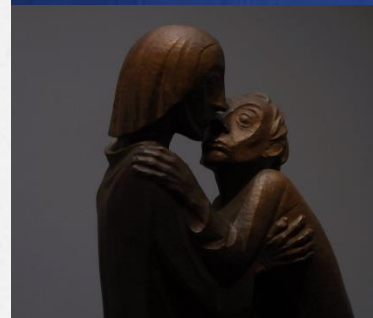
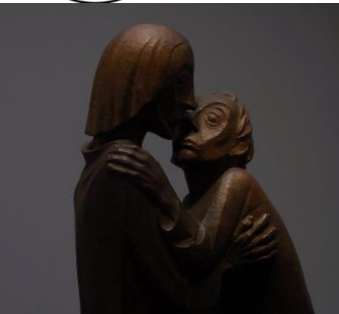


# Implementation of Spiritual Care in the medical process

## A three-step multimethod approach study in Switzerland

May 23, 2014

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## Spiritual Care in Switzerland

### Best-practice standard claims:

- o spirituality as part of the Palliative Care concept
- o the SPIR, HOPE and FACT-tools highly recommended
- o all professional groups should be involved in meeting patients' spiritual needs
- o Problem: interviewed physicians are very reluctant to implement spiritual assessments





## Spiritual Care in Switzerland

The results of the first study can mainly be explained by three reasons:

1. Although 62% of the Swiss people belong to the church, religion is losing its authority in all aspects of social life. Hence talking about religious beliefs became a very sensitive topic in Switzerland.
2. The collection and interpretation of data on patients' spiritual needs and the subsequent interventions appear to be arbitrarily determined by the attitudes of the specialist staff involved.
3. There is currently no concrete data on the implementation and effectiveness of Spiritual Care in the intervention process in Switzerland



# Spiritual Care in Switzerland

## Research questions of our project:

1. In which aspects do the spiritual concepts of physicians differ from the concepts of nursing staff, psychologists and chaplains?
2. How can interprofessional cooperation in Spiritual Care be organised in an acute care hospital?
3. How do the patients' spiritual needs influence the medical decision process?





## First study

### First study: Qualitative interviews

- thirty physicians, nursing staff and clinical pastors were interviewed about their spiritual concepts, needs and their meaning for their work with patients
- the interviews lasted between 1 and 1.5 hours
- the data was analyzed by the ATLAS.ti tool. This coding system is a useful workspace for building models and theories from the various findings.



## Results

### 1. Which areas are related to spirituality and religiousness?



Our analysis shows that the Spiritual Care concept is related to 26 main thematic areas, including:

- meaning of life
- meaning of autonomy
- questions about ethics and what comes after death
- religious beliefs
- discovery of the self, etc.





## Results

### 2. What are the factors that influence the personal spiritual concept?



We could discover **11** factors influencing the spiritual concepts, such as:

- religious education
- religious role models
- formation background
- critical life events
- affiliation to a religious community, etc.



## Results

### 3. Influence of spirituality and religiousness on the working life:



We found that the physicians', nursing staff's, psychologists' and chaplains' work is influenced by spirituality in 5 main areas:

- ethical decisions
- own value system
- counselling techniques
- the coping process
- gut instinct/intuition





## Second study

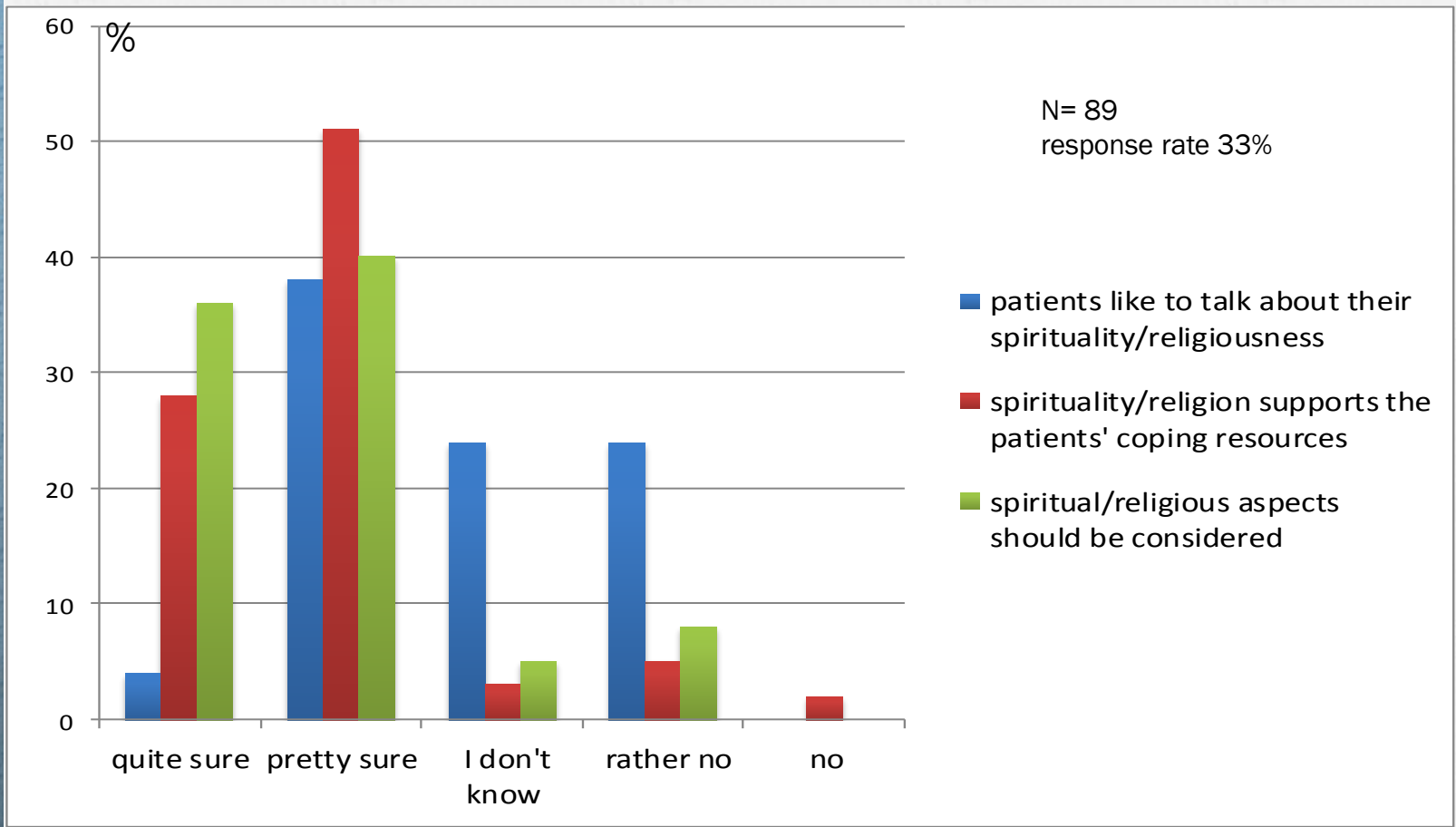
**Second study: Questionnaire to all physicians, nursing staff, psychologists and chaplains from university hospitals in Switzerland**

- o **inclusion criteria: professionals work with patients suffering from life-threatening illnesses**
- o **we aim to spread approximately 1'200 questionnaires to get a response rate of at least 30%**
- o **the questionnaire will be evaluated statistically by multivariate regression models**



## The spiritual dimension in oncology- A survey among Swiss oncologists

Dr. med. Priska Bützberger, Dr. phil. Regula Gasser, 2013 (forthcoming)







## Third study

### Third study: Case studies

A medical team in Zurich started defining a strategy on emergency measures and medical decisions concerning patients at a more advanced stage of a life-threatening illness

This highly relevant topic offers an important opportunity to investigate the inter-professional cooperation in Spiritual Care, because:

- the strategy includes an integration of the patients' system of meaning and values
- all the medical caregivers, the patient and also his/her relatives are involved in the medical decision-making process

We plan to investigate the implementation of this strategy by using case studies.



## Aspects of the HOPE-Questionnaire

factors that influence  
the spiritual concept



**H:** Sources of hope, meaning, comfort, strength and connection

**O:** Organised religion

**P:** Personal spirituality and practices

the patient's value system



**E:** Effects on medical care and end-of-life issues





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**Thank you very much for  
your attention!**

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