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Role models in healthcare: should spiritual care of the dying be the concern of health professionals?

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Context

Medicine and healthcare have always been characterised by role models

➢ **Caring nurse**

➢ **Expert physician**

➢ **Skilled surgeon**

➢ **Efficient matron**

Organisational role models

➢ **Hospitals – targets, clinical success rates, throughput, cure (Watts, 2015)**

➢ **Hospices – good death (Howarth, 2007)**

➢ **Nursing/care homes – well-managed quiet death (Komaromy, 2009)**

What about spirituality?

- ➤ **Contested**
- ➤ **Subjective**
- ➤ **Highly personal**
- ➤ **Conceptually pluralistic**

What does the literature say about meanings of spirituality?

- ➤ **Different from religion (Rumbold, 2002)**

- ➤ **Feature of personhood (Moore & Purton, 2006)**

- ➤ **Meaning and value in life (Zohar & Marshall, 2001)**

- ➤ **Connected to religious belief**

- ➤ **Spirituality can be whatever we want it to be but is always culturally and socially shaped (McSherry, 2006)**

- ➤ **What remains of 'the self' when material things drop away (Vivat, 2008)**

And what is meant by spiritual care?

- ➢ **Person-centred attention (Wright, 2004)**

- ➢ **Giving time & listening (Twycross, 2003)**

- ➢ **Acknowledging 'how we have become' in a non-judgmental way (Hockey, 2002)**

- ➢ **Helping someone to understand themselves (Vivat, 2008)**

Spirituality and palliative care

➢ **Spirituality and spiritual care are central to palliative care philosophy & practice (Watts, 2010)**

➢ **This extends to the dying person's family and friends (Randall & Downie, 2006)**

➢ **Is the role model of holistic care as part of palliative care practice ethically sustainable?**

Spiritual care of dying people

➢ A relational model of care

➢ Putting the dying person 'back together again' in their full context

➢ A form of healing now routinely seen as one of the responsibilities of healthcare professionals

➢ Is this either appropriate or realistic?

From my own research an older man, talking about the efforts of a palliative care nurse to minister to his spiritual needs, comments: "*she doesn't know me and I don't want to explain*".

Alternative approaches

➢ **Spiritual care of dying people as part of a public health model (Kellehear, 2005)**

➢ **Developing confidence in death and dying awareness through education programmes**

➢ **Death doulas**

Kellehear's model

➢ **Development of non-professional social caring capital**

➢ **Friends and family**

➢ **Involves honouring individual and community legacies with 'reflecting back processes'**

➢ **Reminding and remembering**

➢ **Reciprocity with dying people contributing to the spiritual wellbeing of caregivers**

Death awareness

➢ **Introduction of death education as a mandatory part of the school curriculum**

➢ **Increasing opportunities for young people to volunteer and have work experience in settings connected to death – hospices, funeral companies and day care centres**

Death doulas

➢ A friend at the end

➢ Open and honest communication about death

➢ Some doulas have a spiritual approach, but not all

➢ End-of-life companionship as a service – invited in

➢ In this communitarian model death is seen as the natural conclusion to life

Rebecca Green, commenting on the place of spiritual care in her approach as a death doula explains:

"Some people will hate me for this, but so be it. If a person has not found 'spirituality' to be useful to them before they became ill, why introduce it when a person is facing death? I feel it's a way of avoiding the living person in front of you and avoiding yourself. Providing a 'solution' to this 'problem' of death, with a story. It's big business, this spirituality. It preys on the vulnerable and it's a crutch that's going to break when you lean on it. You have your life, your living moments and yourself – right up to the very end. You are enough – you don't need to be spiritual" (Guardian, 5/5/2014).

So where does this leave us?

➢ **Spiritual care of dying people can be complex and is shaped by context**

➢ **Shared across domains of practice – ministers of religion and healthcare workers**

➢ **Community competence involving family, friends, neighbours and dedicated death companions**

➢ **Always has the feature of connectivity**

Thank you!