

Outline: Introduction to Recognizing the Spiritual Element in Coping

1. The Joint Commission on Accreditation of Healthcare Organizations (JCAHO) mandates assessment of the spiritual element in the life of the veteran consumer of civilian health services; however for many service personnel, the significance of the spiritual aspect of living is far deeper and more basic than accreditation compliance.
2. For those service members who experience a spiritual element in their makeup, it is the part of one's being that provides explanation for the meaning of human existence, the purpose of life. For many, it is the core element that motivates and empowers.
3. Those who are spiritual may or may not recognize that part of their belief system. For some it is simply intrinsic, but the spiritual is unexamined. At the other end of the spectrum of spiritual expression are those who consciously and devotedly honor this aspect and the God or gods of their lives through their way of life and religious practice.
4. Warfare, combat, witnessing death, heroic sacrifice, as well as carnage and waste can either strengthen spiritual rootedness, or these experiences may weaken or even destroy what faith, hope, and meaning have anchored this soldier, Marine, reservist, or guardsman.

For this reason, we need to equip ourselves to hear this element in the stories of service men and women.

5. This is not to say that we would attempt to fill the role of the spiritually equipped, the chaplains, priests, pastors, rabbis and others.
6. Moreover, what we hear, we may not recognize as spiritual unless we reflect upon our own and others' beliefs. Some stories may be shocking. We tend to think only in terms of pastors, priests, and rabbis and omit strains of spirituality that we experience as most alien. But we need to listen and learn.
7. Mary Mantilla is here to elaborate on our role as social work practitioners as we listen for the spiritual element in the stories of service personnel, veterans and their families

RECOGNIZING THE SPIRITUAL ELEMENT IN COPING

Clinical Preparedness for Social Work Practice with Military Families

Poughkeepsie Grand Hotel September 28, 2012

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YES, WE ARE MANDATED, BUT

- JCAHO mandates assessment of the spiritual element
- For many service personnel, the significance of the spiritual aspect of living is far deeper than accreditation compliance.

THE SPIRITUAL IS A CORE ELEMENT

For Many Service Personnel -

PROVIDING:

- Explanation of human existence
- The purpose for living
- Source of motivation
- Empowerment
- Hope
- Healing

WARFARE

- Can affirm, weaken or destroy one's spiritual moorings, the anchor of life

WE NEED TO EQUIP OURSELVES

- To hear this element in the stories of service men and women
- Not to replace chaplains
- Knowing that what we hear, we may not recognize as spiritual unless we reflect upon our own and others' beliefs

"SPIRITUAL ASSESSMENT SHOULD, AT MINIMUM, DETERMINE THE PATIENT'S DENOMINATION, BELIEFS, AND WHAT SPIRITUAL PRACTICES ARE IMPORTANT TO THE PATIENT. THIS INFORMATION WOULD ASSIST IN DETERMINING THE IMPACT OF SPIRITUALITY, IF ANY, ON THE CARE/SERVICE BEING PROVIDED AND WILL IDENTIFY IF ANY FURTHER ASSESSMENT IS NEEDED. THE STANDARDS REQUIRE ORGANIZATIONS TO DEFINE THE CONTENT AND SCOPE OF SPIRITUAL AND OTHER ASSESSMENTS AND THE QUALIFICATIONS OF THE INDIVIDUAL(S) PERFORMING THE ASSESSMENT."

Joint Commission (2008). <http://www.jointcommission.org/accreditationprograms.html>

AS OF JANUARY 2011

- More than 19% of service members returning from combat reported potentially experiencing TBI during deployment
- 700,000 military spouses
- 400,000 spouses of reservists
- 700,000+ children have experienced one or more parents deployed
- (www.defense.gov)

DIFFICULTIES FACING MILITARY FAMILIES

- Multiple deployments lead to feelings of alienation from community
- Within family: emotional struggles related to changing responsibilities, roles and duties
- Feeling like a guest within one's home
- Children acting afraid, not warm, even distrustful toward the returned service member

DIFFICULTIES CONTINUED...

- Substance use and abuse
- Issues related to PTSD and TBI such as:
 - Sleep disturbance, sleep violence, aggression, memory problems, physical and emotional dis-ease or disability, vision and perception changes
- Physical and emotional trauma
- Guilt
- Spiritual crisis related to the ego dystonic behaviors often required by military service

The root of suffering is the loss of meaning and purpose in life. The absence of physical suffering is *not* enough to sustain life.

~Victor Frankl

TREATMENT OF TRAUMA

- Assisting the client in making new meanings of the traumatic experience
- Religion and spirituality are a large part of many of our meaning-making frameworks.
- Dept of VA, U of Minnesota, Loyola U: Those who view their faith and faith community as sources of validation, acceptance and support are more able to create healthy meanings and move toward recovery, whereas those who view their higher power or faith community as judgmental or punitive often have difficulty recovering from trauma.

MILLER & REIMANN (2003)

- Through meta-analysis found that religious and spiritual involvement is associated with greater longevity, coping skills, health related quality of life, decreased anxiety, decreased depression, and lower suicide rates.
- Strong correlation between the degree to which spiritual and emotional needs were addressed by care providers and overall client satisfaction.

SPIRITUAL ASSESSMENT

- Spiritual Life Maps
- Spiritual Ecomaps
- Spiritual Genograms
- FICA
- Canda and Furman
- Worcester CMA
- HOPE
- CSI-Memo
- FAITH

ASSESSMENT RESOURCES

- Spiritual Life Maps
- Spiritual Ecomaps
- Spiritual Genograms

Available online at

<http://www.nacsw.org/Download/CSW/SpiritualAssessment.pdf>

- By Hodge & Holtrup

FICA

- **F**aith and belief: Do you consider yourself spiritual or religious? Do you have spiritual beliefs that help you cope with stress?
- **I**mportance: What importance does your faith or belief have in your life?
- **C**ommunity: Are you part of a spiritual community? Is this of support to you and how?
- **A**ddress in care: How would you like me (your healthcare provider) to address these issues in your care?

CANDA & FURMAN'S QUALITATIVE SPIRITUAL QUESTIONS

- What nourishes you spiritually- for example, nature, music, intimacy, witnessing heroism, meditation, creative expression, sharing another's joy?
- What is the difference between shame and guilt? What are healthy and unhealthy shame and guilt?
- What do you mean when you say your spirits are low? Is that different from being sad or depressed?

CANDA & FURMAN'S QUALITATIVE SPIRITUAL QUESTIONS

- What is an incident in your life that precipitated a change in your belief about the meaning of life?
- What helps you maintain a sense of hope when there is no immediate apparent basis for it?
- Do you need forgiveness from yourself or someone else?
- What currently brings a sense of meaning and purpose to your life?
- Where do you go to find a sense of deep inspiration or peace?

WORCESTER CMA QUESTIONNAIRE

- Spiritual health: Research has shown a strong connection between spiritual health and physical/mental health. Please answer the following questions to help us evaluate your overall health status.
- Do you worry a great deal?
- Does life seem empty?
- Do you feel at peace?
- Do you feel guilty or ashamed?
- Do you feel restless much of the time?
- Is your life joyful?
- What is your religion, if any _____
- How often do you attend religious services during the year?
- Do you consider yourself very religious/fairly religious/slightly religious/ not at all/ no religion
- How much is religion as source of strength to you?

HOPE

- **H** Sources of hope, meaning, comfort, strength, peace, love, and compassion. What is there in your life that gives you internal support? What do you hold on to during difficult times? What sustains you?
- **O** Organized religion: do you consider yourself part of an organized religion? How important is it to you? What aspects of your religion are helpful and not so helpful to you?
- **P** Personal spirituality/practices: do you have personal spiritual beliefs that are independent of organized religion? What are they? Do you believe in God/Higher power? What aspects of your spirituality/practices do you find most helpful?
- **E** Effects on medical care: Has being sick (or your current situation) affected your ability to do the things that usually help you spiritually?

CSI-MEMO

- **CS**- Do your religious/ spiritual beliefs provide Comfort, or are they a source of Stress?
- **I**- Do you have spiritual beliefs that might Influence your medical decisions?
- **Mem**- Are you a member of a religious or spiritual community, and is it supportive to you?
- **O**- Do you have any Other spiritual needs that you'd like someone to address?

FAITH

- **F** Do you have a **F**aith or religion that is important to you?
- **A** How do your beliefs **A**pply to your health?
- **I** Are you **I**nvolved in a church or faith community?
- **T** How do your spiritual views affect your views about **t**reatment?
- **H** How can I **H**elp you with any spiritual concerns?

JCAHO SUGGESTED QUESTIONS

- Who or what provides you with strength and hope?
- Do you use prayer in your life?
- How do you express your spirituality?
- How would you describe your philosophy of life?
- What type of spiritual/religious support do you desire?
- What is the name of your clergy/rabbi/ minister, etc.?
- What does suffering mean to you?
- What are your spiritual goals?
- Is there a role of church / synagogue/ mosque in your life?
- How does your faith help you cope with illness?
- How do you keep going day after day?
- What helps you get through this experience?

IF WE KNOW THAT THE RESEARCH BEARS OUT THE IMPORTANCE OF SPIRITUAL ASSESSMENT, *WHY ARE WE NOT DOING IT?*

- Fear of saying the wrong thing/ possibly insulting client or family
- Concern that we may sound judgmental or intrusive
- Discussion of religion is stigma
- Agency guidelines regarding what should be included in clinical documentation
- Concern that we may react strongly/adversely to client response
- Concerns about our own spiritual beliefs
- The fact that we have little or no training in spirituality and religion

CANDA & FURMAN 1999 SURVEY

Only 17% of NASW affiliated direct practitioners felt that Social Workers generally possess the knowledge to address spiritual issues.

WHAT CAN WE DO?

- Work toward being as spiritually competent as we are culturally competent
- Foster relationships with a variety of spiritual leaders: rabbis, pastors, Imams, etc.
- Examine our own spiritual and religious beliefs
- Listen for cues from clients that they do have spiritual beliefs, and use this as an opportunity to start the conversation

- We must remember that we are part of a *continuum of care*, and that *we can seek assistance and make referrals to VAs, chaplains, clergy, and religious institutions.*
- David Hodge (2001) states that, as clinicians, we need to *avoid, "becoming spiritual directors for our clients.* The point of therapy should always remain on *marshaling resources to ameliorate* the presenting problem."

A FINAL WORD ON *MEANING MAKING*...

He who has a *why* to live, can bear almost
any *how*.

~*F. Nietzsche*