



Contents

- Exploration of Purpose and Meaning
- Relationship Work: Saying Goodbye
- The Return of Essence

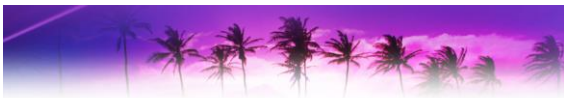


Aims

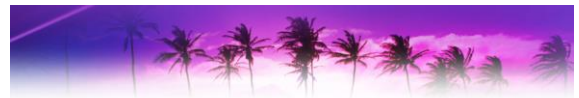
- Broaden the students understanding of the concept of spirituality and its relevance to palliative care
- Examine issues and challenges faced by health-care professionals in assessing and addressing the spiritual needs of the patients and family / carers
- Challenge student to reflect on their own spirituality and how that may influence the care they provide



What is the difference between **Religion** and **Spirituality**

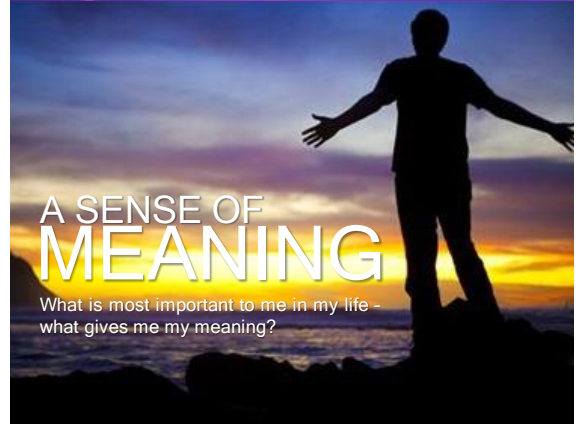
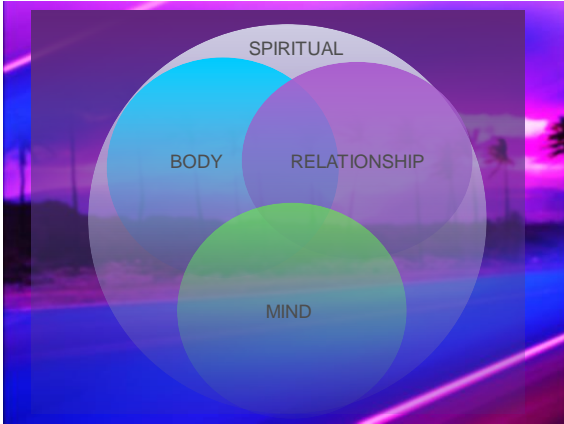


Spirituality is about people, and all people are different!



Religious Care
Spiritual Care





A universal concept that we all share. **Hope**

...while we wait for the blessed hope—the appearing of the glory of our great God and Savior, Jesus Christ.

Titus 2:13



Counter the feelings of abandonment... **Being There**

I'll fight for you, I'll die for you, I'll dry your tears, I'll fight your battles, I'll do anything for you, but I don't know if you would do the same for me.



Freedom from agitation or disturbance **Peace**

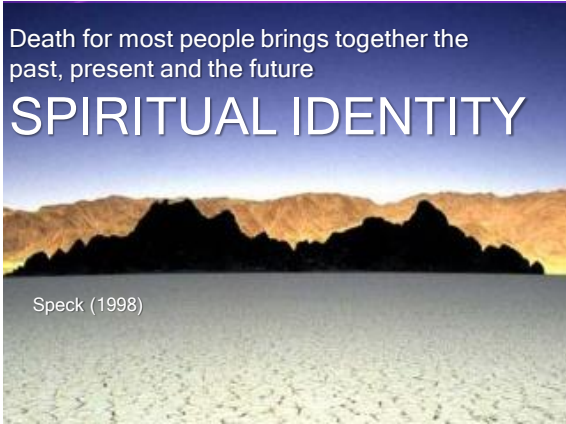
"Peace comes from within. Do not seek it without."

Buddha



Death for most people brings together the past, present and the future

SPIRITUAL IDENTITY





Speck (1998)



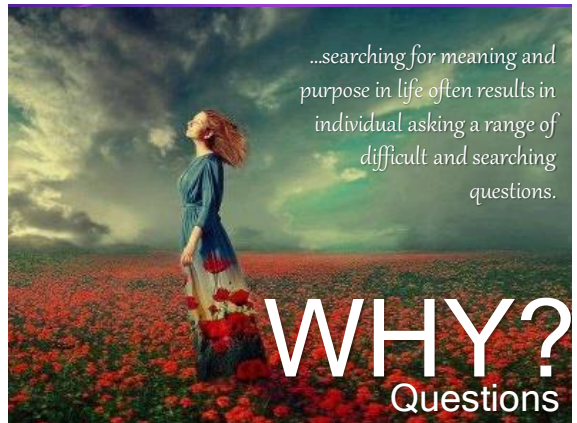
ANGER

May be focused on professionals...

Is often characterized by feelings of uncertainty, loss of control and fear...

DEATH

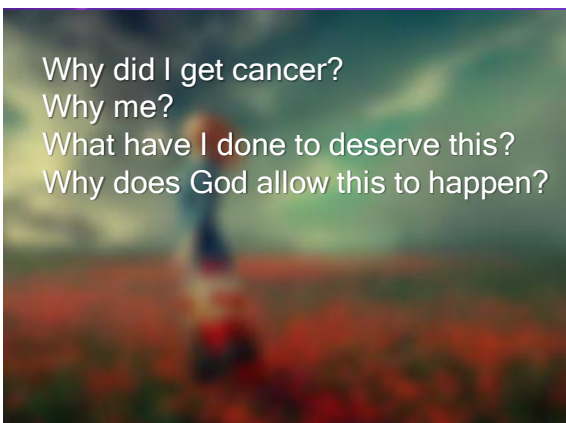


...searching for meaning and purpose in life often results in individual asking a range of difficult and searching questions.

WHY?

Questions

Why did I get cancer?
 Why me?
 What have I done to deserve this?
 Why does God allow this to happen?

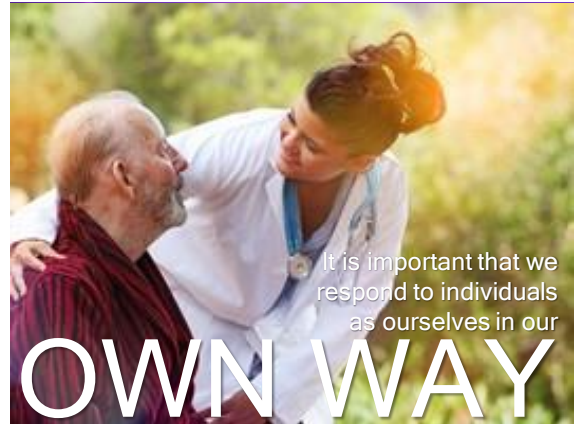



Responding in such a situation requires effective communication skills...

SPIRITUAL SELF-AWARENESS

6 Step Framework for responding Spiritual Distress

- Do not rush in with the answer
- Listen actively
- Explore what has prompted this question
- Respond to the patients feelings
- Be aware of your own feelings
- Refer to other professionals when appropriate



It is important that we respond to individuals as ourselves in our

OWN WAY

HOPELESSNESS

Some people who face the prospect of dying appear to be so overwhelmed that they can no longer sustain a sense of hope in the future...

LACK OF INTEREST
WITHDRAWAL FROM THE COMPANY OF OTHERS

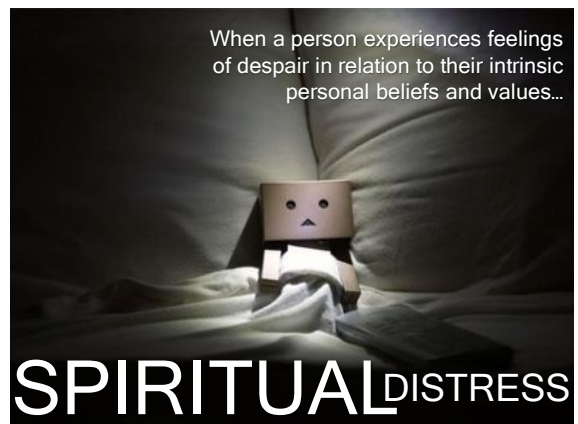
- Socially withdrawn
- Little interest in everyday living
- Doesn't care about physical state
- Doesn't care or don't see the point in going on

DETECTING HOPELESSNESS

Is the key to providing support in order that people find a sense of Hope and Peace...

BEING THERE

When a person experiences feelings of despair in relation to their intrinsic personal beliefs and values...



SPIRITUAL DISTRESS

- Loneliness
- Depression
- Anger
- Agitation
- Stoicism
- Pray / uses religious material
- Sleep Disturbances
- Unusually high levels of analgesic required
- Distressed reaction to visitors

SPIRITUAL DISTRESS INDICATORS

- Repeatedly asks the “Why” questions
- Puts on a brave face
- Expression on intense suffering
- Vocalizes feelings of helplessness
- Talks about God / Religion without gaining comfort

SPIRITUAL DISTRESS INDICATORS

It is important to recognize that the family can also be a source of stress and distress to the patient.



In order to recognize the need for spiritual care and to provide this care for others, it is necessary that we, as professionals and individuals, know ourselves...

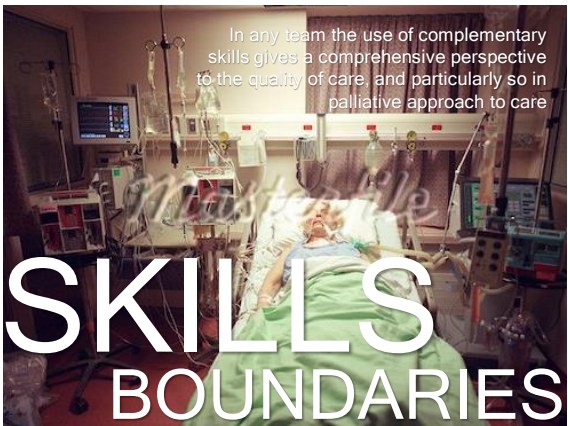
SPIRITUAL SELF-AWARENESS

WHY SPIRITUAL AWARENESS IS IMPORTANT?

- In order to appreciate the spirituality of others we need to be able to appreciate our own essence of self.
- Unless we are aware of our own feelings and spirituality, we run the risk of dealing with issues that are ours rather than dealing with issues raised by the patient or the family for whom we are providing care.

KNOWING OUR SELF

- What is your philosophical outlook in life?
- What are your personal views on death, suffering, religion and the possibility of life after death?



The chaplain or director of pastoral / spiritual care is the professional regarded as having specialist expertise in spiritual care.



CHAPLAINCY

Spiritual assessment must reflect the needs of individuals and recognizes the inevitable overlap with other concepts of need, including the social, psychological and religious.



ASSESSING SPIRITUAL NEEDS

- Reason
- Reflection
- Religion
- Relationships
- Restoration

5 R

APPROACH

The religious element of spirituality



ASSESSING RELIGIOUS NEEDS

- Assurance of vitally important
- No religious objections to post-mortems
- Burial and cremation is a personal choice
- Infants should be baptized when exposed to dead person



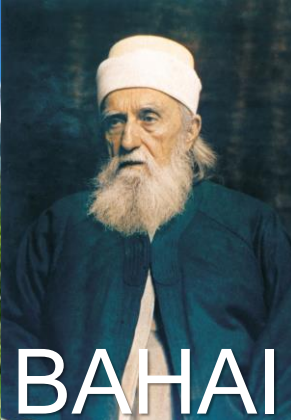
ANGLICAN & FREE CHURCH



- Don't wish to be contacted or make any religious commitment
- Staff can fulfill an important pastoral role
- A sharing of this element of a chaplains ministry should be appropriate

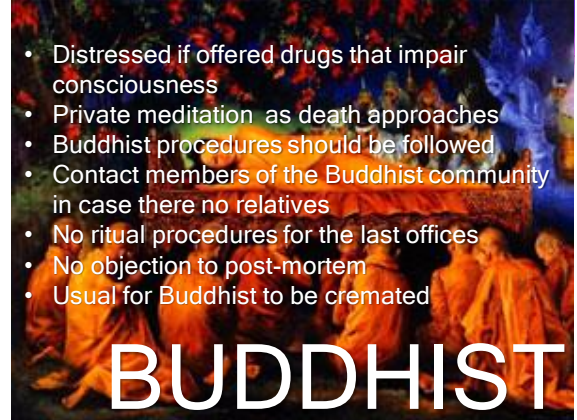
ATHEIST OR 'NONE'

- Have a great respect for physicians
- Require to say an obligatory prayer each day and read from the scriptures of faith each morning and evening (even dying)
- Great respect for life
- No ritual procedures
- No objection to post mortem
- Forbids cremation; buried one hours journey from the place of death.



BAHAI

- Distressed if offered drugs that impair consciousness
- Private meditation as death approaches
- Buddhist procedures should be followed
- Contact members of the Buddhist community in case there no relatives
- No ritual procedures for the last offices
- No objection to post-mortem
- Usual for Buddhist to be cremated



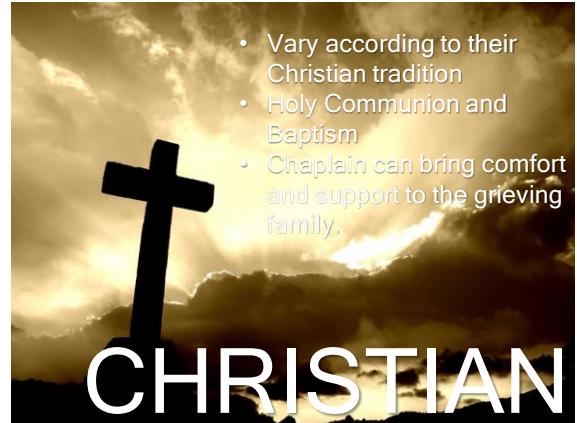
BUDDHIST

- The government has controlled and discouraged religions
- Confucius guided and shaped the way the Chinese lived
- Worship of ancestors
- Discuss needs with the families



CHINESE

- Vary according to their Christian tradition
- Holy Communion and Baptism
- Chaplain can bring comfort and support to the grieving family.



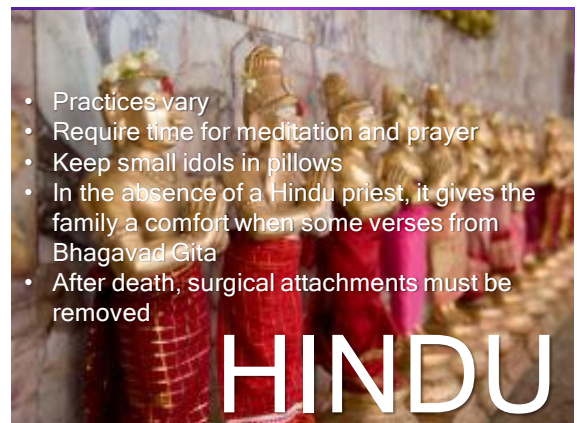
CHRISTIAN



Chaplains: Responsible for caring for the spiritual needs of those Christians.
Free Church minister should be contacted at the patients / family's request

FREE CHURCH PATIENTS

- Practices vary
- Require time for meditation and prayer
- Keep small idols in pillows
- In the absence of a Hindu priest, it gives the family a comfort when some verses from Bhagavad Gita
- After death, surgical attachments must be removed



HINDU

- Body is left for the family's arrival
- No ritual washing
- Respect the performance of last offices
- Grief is expressed openly with gestures, provide a quiet place
- Postmortems are considered extremely objectionable and disrespectful
- Cremated after death
- Children below 5 years are buried

HINDU

- High regard for medical profession
- Seriously ill or dying JW has no morbid fear of death
- Do not have "last rites" or similar ministry
- No preference for cremation or burial
- JW indicate to donate organ

JEHOVAH'S WITNESS

- The next of kin should be informed
- The body of the deceased should remain as it was when the death occurred. Untouched for 30 minutes, during which time surgical attachments should remain in place
- After
 - Clothes should not be removed
 - Eyes and mouth closed.
 - Fingers should be straightened

JEWISH

- Any tubes or artificial limbs should be removed
- Excess dirt be wiped, body not washed
- The body still fully clothed should be wrapped in the bottom sheet
- Jewish law requires the body to remain totally intact after death and regards the carrying out of a post-mortem as a desecration of the body.

JEWISH

- Family should remain in the deceased
- Funeral usually at 24 hours
- Burial is the only option for the Orthodox Jews
- Still born babies should be buried
- Pregnant women are buried together
- If no immediate family available it is a comfort that staff knows can say a prayer

JEWISH

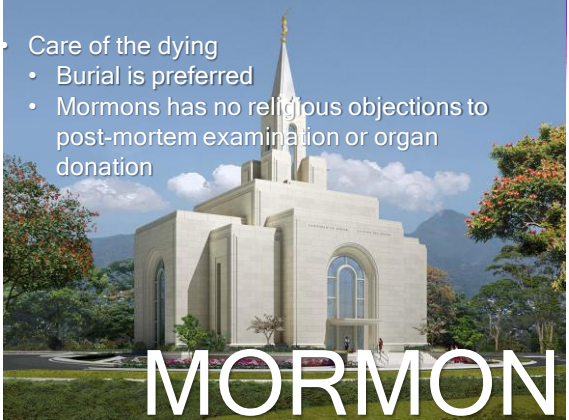
- Mormons who have undergone a special Temple Ceremony wear a sacred undergarment. This intensely private item is normal to be worn at all times. It may be removed for laundering or surgical operations but at all times must be considered as private and treated with respect
- No religious objections to blood transfusion

MORMON

- Health conscious
- Vegetarians
- No blood
- Do not drink tea or coffee
- Alcohol and tobacco are forbidden
- Care of the dying
 - No ritual acts
 - Contact with Mormon Temple is important
 - "Home teachers" will visit and support members
- At death, if the sacred garment is worn it must be replaced on the body once last offices are completed

MORMON

- Care of the dying
 - Burial is preferred
 - Mormons has no religious objections to post-mortem examination or organ donation



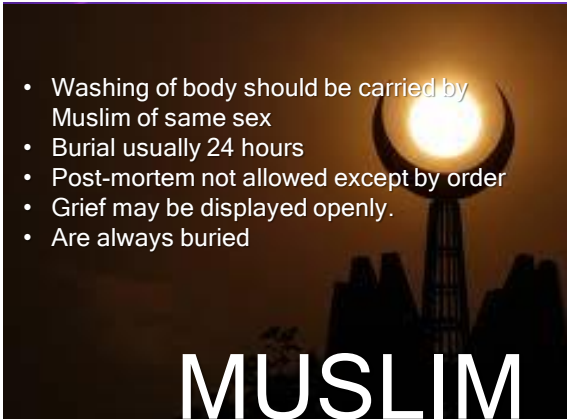
MORMON

- Not necessary to call Imam when dying
- Body should remain untouched for 30 minutes; surgical attachments in place
- No objections to non Muslim handling
- With family's approval
 - Close eyes and mouth
 - Fingers straightened
 - Tubes and artificial limbs are removed



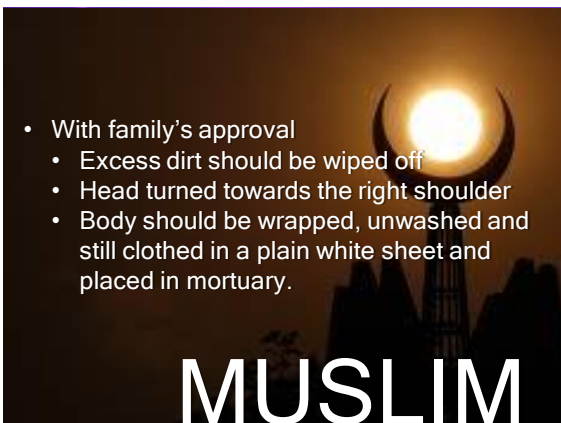
MUSLIM

- Washing of body should be carried by Muslim of same sex
- Burial usually 24 hours
- Post-mortem not allowed except by order
- Grief may be displayed openly.
- Are always buried



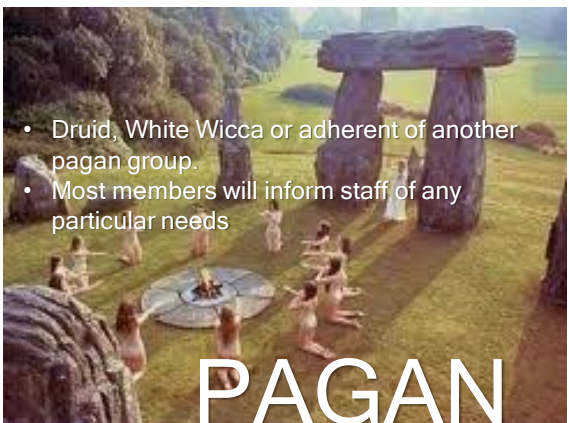
MUSLIM

- With family's approval
 - Excess dirt should be wiped off
 - Head turned towards the right shoulder
 - Body should be wrapped, unwashed and still clothed in a plain white sheet and placed in mortuary.



MUSLIM

- Druid, White Wicca or adherent of another pagan group.
- Most members will inform staff of any particular needs



PAGAN

- Inform family in the earliest possible time to perform rituals
- After death, surgical attachments can be removed
- Family will wash and dress the body
- If family allows
 - Wipe excess dirt
 - Plug incisions
 - Turban left in place
 - Body should be wrapped unwashed

SIKH

- Cremated ASAP
- Still-born babies are buried
- Post-mortem is treated with sensitivity

SIKH

- Expect a visit from the priest for Holy Communion and administer Sacrament of the Sick
- If patient is near death, the priest administer the Last Rites (Viaticum) and Holy Communion
- If in doubt always call the priest.

ROMAN CATHOLIC

ST. JOSEPH
PATRON OF A PEACEFUL DEATH

**ROMAN CATHOLIC
IN MEXICO**

It has been identified that dealing with spiritual issues challenges us because it brings our own mortality sharply into focus.

Facing our own
MORTALITY

- How comfortable do you feel thinking about your own death?
- What are the most important things that you want to achieve before you die?
- What do you believe will happen to you after you die?

REFLECT

Try to answer the questions



What type of palliative nurse are you?



Spiritual Care of the Dying Person

Domino B. Puson, R.N., M.N.