E-Learning Module F: Spiritual Domain

This Module requires the learner to have read Chapter 6 of the Fundamentals Program Guide and the other required readings associated with the topic.

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Please reference as follows:

GETTING STARTED

This e-Learning Module has been designed to consolidate key concepts from the required readings and provide an opportunity to begin applying these concepts through self-directed reflection and scenario-based work, in preparation for the case-based discussions, in-person, with other learners.
GETTING STARTED

In this module you will review the content highlights associated with Chapter 6.

It would be best if you have read Chapter 6 in advance and have the Program Guide, as well as the Domains of Issues Laminate, with you as you complete this module.

You will be prompted to write down your thoughts or ideas during this module. You can do so in the ‘notes’ section at the end of Chapter 6 in your Program Guide. These notes are just for you; you are not required to share them.

Consider bringing forward any questions from the e-Learning Modules to your next Peer-to-Peer Exchange or your next Case-Based Learning Session.
TOPICS COVERED

✓ Understanding the Fundamentals
✓ Understanding Spiritual Issues
✓ Spirituality and Religion
✓ Observing the Individual’s Experience
✓ Interacting with the Individual and Caregivers
✓ Supportive Care Strategies
✓ Self-Care
UNDERSTANDING THE FUNDAMENTALS

Refer to the Domains of Issues Laminate to identify issues in the Spiritual Domain. These are the issues that we will explore in this module.
UNDERSTANDING SPIRITUAL ISSUES

Refer to the ESAS-r tool in your Program Guide and identify symptoms related to the Spiritual Domain.
UNDERSTANDING SPIRITUAL ISSUES

The symptoms related to the Spiritual Domain on the ESAS-r are:

- Depression
- Anxiety
- Sense of well-being
UNDERSTANDING SPIRITUAL ISSUES

Until his or her last breath, a person is frequently still growing, seeing things from a changing perspective, and making meaning in spite of or because of suffering. A person experiences suffering when the points of meaning and purpose of life are challenged, threatened or taken away. Illness is a major life event that can cause a person to question such things as:

- Why is this happening to me?
- What gives meaning to my life right now?
- Is there life after death?
- Is there a higher power e.g. God, the Great Spirit, a Creator?
- Am I being punished?
SPIRITUALITY AND RELIGION

- There are many definitions of spirituality and religion. Review the definitions in the resource guide and write down, in your opinion, the difference between spirituality and religion in your notes.
Involvement and practice in a community of faith may or may not be a part of an individual’s spirituality. Spirituality is unique to each person and the experiences and expression of spirituality are diverse.

- Reflect on how spirituality is expressed in your life.
SPIRITUALITY AND RELIGION

Spirituality may be expressed in many ways, such as by means of relationships with family; through connectedness with nature, the arts or music; through participation in a particular religion and its rituals.

Exploring and acknowledging one’s beliefs and values, and engaging in personal spiritual quests enables you to appreciate the importance of spirituality in the lives of the person and his or her family.
OBSERVING THE INDIVIDUAL’S EXPERIENCE

Spiritual concerns and/or spiritual pain are often not acknowledged. The person may not even be aware that what is being experienced is spiritual angst. For example, if the person says, “I’m afraid to go to sleep at night” the possible reason for spiritual distress is that the person is fearful of dying alone. Spiritual pain may manifest in various ways.
OBSERVING THE INDIVIDUAL’S EXPERIENCE

Examine the following statements and identify the potential reasons for spiritual distress for each.

1. “I wish I had spent more time with my kids”
2. “I should have stopped smoking a long time ago”
3. “I wish it would all end”
OBSERVING THE INDIVIDUAL’S EXPERIENCE

Examine the following statements and identify the potential reasons for spiritual distress for each.

1. “I wish I had spent more time with my kids”
   - The person may be expressing remorse

2. “I should have stopped smoking a long time ago”
   - The person may be expressing regret

3. “I wish it would all end”
   - The person may be expressing hopelessness
OBSERVING THE INDIVIDUAL’S EXPERIENCE

If spiritual pain is suspected, you can ask the person to reflect on any of the following questions (not necessarily requiring immediate responses from the person):

What do you see as the meaning and purpose of your life as you live with this life-limiting illness?

▪ What is your source of hope?
▪ What keeps you going from day to day?
▪ What gives you inner strength?

The Program Guide provides a variety of tools that may also aid in the identification and assessment of spiritual pain (i.e. the FICA, SPIRIT and HOPE tools).
OBSERVING THE INDIVIDUAL’S EXPERIENCE

Simply being present is a means of providing spiritual care. Listen, listen, listen to the person’s story. Listen for more than words, listen for emotion, listen for symbols, and listen for where energy is placed.

Silence is a form of communication and it indicates respect and concern as the person struggles with his or her spiritual pain.

- Using the CLASS tool discussed in Chapter 2, identify some of the important elements of effective communication to consider when addressing spiritual care issues.
INTERACTING WITH THE INDIVIDUAL AND CAREGIVERS

- During this process, it is important for the care provider to be fully aware of his/her own biases and emotions. Recall your answers as to how you express spirituality in your own life. How might your personal expression of spirituality influence how you provide care? What biases or emotions might you need to overcome? Capture your thoughts in your Notes.
INTERACTING WITH THE INDIVIDUAL AND CAREGIVERS

Some barriers that you, as a health care provider, may need to overcome in order to help the person and his or her family address spiritual care issues might include:

- Feelings of insecurity related to spirituality
- Feelings of embarrassment related to the emotions that may surface
- Personal spiritual doubts
- Personal opinions and views that color interpretation and assessment
- Lack of self awareness, (i.e. who am I?, what is meaningful in my life?)
Respect and a non-judgmental approach related to culture and religion is an essential component of our interactions. The person and his or her family will guide how cultural and religious practices should be included in the care plan.
The person living with a life-limiting illness and his or her family may have a variety of spiritual needs, such as finding meaning and purpose, finding forgiveness and acceptance, and finding a source of hope and strength.

The goal of care related to this domain is to enable the person and his or her family to identify and address spiritual pain and experience the growth in spirit that health care providers so often witness in persons who are living with dying.
SUPPORTIVE CARE STRATEGIES

- Within your role, how can you support the person and his or her family experiencing spiritual pain? Refer to Chapter 6 in your Program Guide and review the list of Supportive Care Strategies. Capture your ideas in your notes.
SUPPORTIVE CARE STRATEGIES

Consider strategies such as:

✓ Mobilize appropriate supports based on the person’s spiritual history; this may mean consulting such resources as a chaplain, elders and native healers, or prayer groups.

✓ Reframe hope. Hope might initially be for cure and over time it may change to hope for control of the disease and then to hope for comfort and avoidance of suffering. Communication strategies for reframing hope may include asking open-ended questions such as, “What do you hope for? How can we help?” or “If cure for your disease isn’t possible, what is the next most important thing that we can work toward?”

✓ Accompany the person and his or her family at this time in their life journey; be present in the face of suffering.
SELF-CARE

Caring for the person and his or her family with deep spiritual suffering can be exhausting and draining. It is important to be aware of the impact of the sometimes strong emotions experienced, (e.g. sense of failure or frustration at not being able to alleviate the person’s suffering).

- The resource guide provides a variety of healing tools and therapies to support persons who are dying. However, many of these very same therapies may be helpful “self-care” strategies. Identify and document at least 3 strategies that you will use as a means of self-care.
BRINGING IT TOGETHER

The health care team has the privilege of participating in “watching through the night”; the sacred act of being present in the face of suffering, despair, fear and all the physical, emotional, social and spiritual trials of dying.

This is central to providing good palliative care.
WHAT HAPPENS NEXT

To prepare for the next e-Learning Module, you will need to read the associated Program Guide chapter in advance. In order to complete the next e-Learning Module you will need both the Program Guide and Domains of Issues Laminate with you.