Heart and Soul Matters

A guide

To providing spiritual care in mental health settings
In this valuable resource, Spiritual Health Victoria tackles the elusive area of spirituality in mental health work. The very word spirituality is enigmatic. Some people may be more comfortable with the word religion, or philosophy, or cultural tradition. Others may not be comfortable with any such words at all.

What makes you feel whole and real and authentic? What makes you feel connected to others? What gives your life meaning and purpose? What gives you hope? Our answers to these questions point to what matters most in our life and to what protects us. Our inner strength and wisdom can be invaluable to our recovery and survival in times of distress, illness or crisis.

Every experience of distress or illness is unique. Only the one who experiences it knows what it really feels like, and they are the only one who intuitively know the source of their own inner strength. So, in mental health care, it is vital that each person is given the opportunity to talk about that source of strength and for mental health workers to acknowledge it as deeply important in planning ways to support them.

In this booklet, mental health workers will find practical, simple guidelines to discovering and understanding the spiritual beliefs and practices of people in their care. This will assist workers in helping people to use their inner wisdom and strength to deal with their situation. It is my hope that this resource will also give greater support to mental health workers to draw on their own spirituality in their work.

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Many factors contribute to good mental health. At a very basic level things like diet, sleep and exercise form a foundation for mental health and wellbeing.

In addition, a sense of feeling connected to self and others supports us to participate fully in life. When challenged by mental illness, this sense of connection which lies at the heart of being human becomes fragmented.

The person with a lived experience of mental illness has the opportunity to redefine the meaning and purpose of their existence.

Spiritual care recognises this dimension of a person and supports them in their search for meaning, purpose and hope as they re-connect to themselves and others.

Within this process, people are supported to put the pieces back together and to re-experience life in its wholeness.

In this way spirituality plays a fundamental role in helping people live with or recover from mental health issues.
This guide is intended for staff working in community and clinical services supporting people living with mental illness, their families and carers. It explains why the recognition of a person’s spirituality in their individual support plan is integral to health and wellbeing outcomes. It is designed to equip staff, carers and family members with essential information to confidently engage in conversations within the spiritual domain of people’s lives.

This guide emphasises the recovery model of service delivery and makes significant connections to its foundations in spirituality and spiritual care values.

Recovery places a renewed focus on bringing lived experience together with the expertise, knowledge and skills of the mental health workforce, and in doing so reminds us all of the important place of authentic expression. You will notice similar language and themes emerging in both spiritual care and recovery models.
Spiritual Health Victoria has adopted the following principles, which are based on emergent models and understandings of the significant factors that contribute to health, wellbeing and quality of life. More recently there has been a global move to expand measures of health and wellbeing, quality of life, human development and capabilities beyond conventional clinical and economic measures to be inclusive of the spiritual dimension.

These principles are:
- spirituality is a universal phenomenon
- spirituality is one of the domains of holistic health care
- spiritual care is respectful of and responsive to diversity
- spiritual care is integral to the provision of person-centred care
- spiritual care is integral to the provision of compassionate care
- spiritual care is a shared responsibility
- spiritual care requires a whole of system and whole of organisation approach.
SPIRITUAL CARE IS A SHARED RESPONSIBILITY
Spirituality may be experienced in a quest for meaning, purpose, connection, belonging and hope. It can deepen with growing reflective capacities and self-awareness, and can become more conscious at major turning points in life. It is recognising that the human experience is a part of the whole, and our individual journey is about growing in wholeness.

Spirituality is embedded in the unique experience and story of each person.

The individual story can be heard, and the person’s spirituality and unique reality discerned in each encounter and context.

We can also be aware that during the course of our lives our relationship and experience of spirituality can change. What we hold as true and important to our being may change over time.

As staff we remain mindful of this dynamic when supporting people in this aspect of their lives.
What is religion?

The origin of the word ‘religion’ is derived from the Latin word *religio*. It means to re-connect, re-establish or re-bind our links to the divine in a quest for wholeness.

Over many centuries the word ‘religion’ has come to be more associated with organised institutional faith-based expressions and the meaning of the word in modern times has taken on a narrower interpretation.

For many, religion is a helpful tool in both talking about spirituality and giving expression to it. The community of support helps care for and nurture the individual.

For others, their religious experience has been one of exclusion, alienation and disempowerment that has left them with no sense of self or connection. These experiences can be very damaging to a person’s mental health.

Staff and carers need to be aware of the differences in peoples’ experiences so they can honour them and give support for the choices people make as they move forward in their healing journey.

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Spirituality can be communicated in many different ways, and is often unique to the individual. There are no specific rules and the best guide is to simply ask a person what forms of expression may best support their needs.

People may develop and express their spiritual practice through the following span of traditional religious to secular activities:

- belonging to a faith/religious tradition and participating in associated community-based activities
- ritual and symbolic practices such as lighting a candle or burning incense
- pilgrimage and retreats
- meditation, prayer and mindfulness
- reading sacred texts
- sacred music (listening to, singing and playing) including songs, hymns, psalms and devotional chants
- living by certain values/acts of compassion
- gratitude practice
- contemplative reading (literature, poetry, philosophy)
- wearing particular clothes or eating particular foods
- cultural or creative activities such as art, cooking and gardening
- engaging with and enjoying nature
- activities that develop self-awareness such as yoga and breathing exercises
- physical activity, group or team sports and recreational activity that involves a special quality of companionship
- maintaining stable family relationships and friendships (especially those involving high levels of trust and intimacy)
- voluntary work

Mental Health workers can never underestimate the significance such expressions have in people’s lives, nor the healing potential these activities can offer.

It is important to be aware that some people may consider these activities central to their lives and wellbeing, but may not think of themselves as spiritual nor associate these activities with spirituality. (adapted from Royal College of Psychiatrists, 2005).
Spiritual care is not proselytising nor does it impose the workers’ beliefs or values upon the recipient. It is commonly offered in a one-to-one relationship, is person-centred and makes no assumptions about personal conviction or life orientation.

... and how is it provided?

“When faced with significant illness, many people require more than just physical care to help them cope. This care is most often delivered through attentive and reflective listening and seeks to identify the patient’s spiritual resources, hopes and needs.

Care is provided from a multifaith and spiritual perspective offering support, comfort, spiritual counselling, faith-based care and religious services to patients and their families.

Spiritual care professionals are most often employed directly by the institution or in partnership with a faith community and are often referred to as spiritual care practitioners, pastoral care practitioners, chaplains or visiting chaplains. Faith communities across Victoria make a significant contribution to spiritual care services by funding full and part-time
positions and providing trained volunteers to add to the breadth and depth of services” (Spiritual Health Victoria, 2016), p.7

In mental health settings, spiritual care is often facilitated in group settings which commonly take the form of spirituality discussion groups. These groups may be based around spiritual values such as forgiveness, compassion or trust. Participants may explore the theme of God or the Divine in their lives.

When spiritual care is delivered in this way, people have the opportunity to explore what their spirituality means to them and how it can be a supportive element to their health and wellbeing.

For many this offers a unique opportunity to express themselves and feel seen and heard at a very deep level by their peers and workers. Whilst these groups are ideally facilitated by experienced spiritual care practitioners, there is an opportunity for everyone to develop skills in this area.

“We get to share our humanity and it’s beautiful.” (Participants’ voices)

Whether we provide spiritual care in a one-to-one or group setting, it offers an important opportunity for people to focus on those areas of life that give hope, meaning and purpose. People can explore a dimension of themselves which helps them make sense of their vulnerability and experience of illness. It can be an important resource in which to maintain hope for the future.

Spiritual health and wellbeing supports a sense of feeling good about ourselves. We feel this when we begin to or are fulfilling our potential, attain a sense of direction in life and feel a sense of equality with others.

It is worth remembering that spirituality is important to people whether or not they have a lived experience of mental illness.

“The group helps us to connect in love and understanding with other people.”
How does the recovery model reflect spiritual care values?

There is no single definition of the concept of recovery for people with mental health issues. The guiding principle is hope – the belief that it is possible for someone to regain a meaningful life despite serious mental illness.

The definition of recovery that the Australian National Framework for Recovery-Orientated Practice has adopted is:

“Being able to create and live a meaningful and contributing life in a community of choice with or without the presence of mental health issues.”

(2013) p.2

The lived experience and insights that people and their families have are at the heart of recovery culture.

The concept of recovery was conceived by, and for people living with mental health issues. Recovery describes their own experiences and journeys, and affirms personal identity beyond the constraints of their diagnoses.

The National Framework affirms the following principles:

- promoting a culture and language of hope and optimism
- placing the person and their mental health issues first and viewing their life situation holistically, including being...
responsive to spirituality

- supporting personal recovery by focusing on strengths and personal responsibility
- acknowledging, valuing and learning from the lived experience.

Within the paradigm of recovery, all people are respected for the experience, expertise and the strengths they contribute (adapted from Commonwealth of Australia, 2013).

The recovery model of service delivery aligns very closely to spiritual care principles:

- both focus on those areas of our lives that give us hope, meaning and purpose
- both consider the whole person (i.e. body, mind and spirit/soul)
- both seek to make positive connections with others in the community
- both acknowledge the journey aspect of life
- both support an individual’s authentic expression in the world
- both acknowledge and celebrate lived experience.

Further factors that support the recovery journey include being believed in, listened to and understood.
Spirituality for many is a deeply transformative experience that fosters good mental health and recovery.

Spirituality can help people maintain good mental health by:
- offering a system of meaning and existential coherence in the midst of suffering
- enhancing coping mechanisms by supporting such things as hope, value, meaning and purpose
- participation in specific activities which may offer support and protection from anxiety and depression
- facilitating social integration into caring communities that create a feeling of being connected (adapted from Swinton, 2005).

When engaged in a range of activities that make up active spiritual life, people may discover additional resources that help support other areas of their life to grow and flourish.

Some spiritually based skills and resources include:
- nurturing self-love and developing positive self-esteem, self-control and confidence
- self-reflection and honesty
- staying focused in the present, remaining alert, unhurried and attentive
- being able to rest, relax and create a still, harmonious state of mind
- developing greater empathy for others
- finding the courage to witness
and endure distress while sustaining an attitude of hope

- developing improved discernment, for example deciding when to speak up or act and when to remain silent and bide one’s time
- learning how to give without feeling drained
- being able to grieve and let go
- affirming and deepening relationships with self, others and with God/creation/nature

- a new sense of meaning, resulting in the reawakening of hope and peace of mind, enabling people to accept and live with problems not yet resolved (adapted from Royal College of Psychiatrists, 2005).

Spirituality for many is a deeply transformative experience that fosters and supports good mental health and recovery.
The role for mental health staff is to ascertain how people cope with new and unfamiliar situations, how their spirituality may have been a resource to them in the past and how it plays a role in their recovery journey. The following questions are adequate to start a conversation into the spiritual dimension of a person’s life.

A good way to begin is simply to ask, “What sustains you?” or “What keeps you going in difficult times?”

A person’s answer to this question usually indicates their main spiritual concerns and pursuits.

There are two aspects to look at:
1. What helpful inner personal resources can be encouraged?
2. What external supports from the community, specific faith tradition or other sources of connection are available to the person? (Adapted from National Health Service, 2009)

The aim is to help people find the language to express themselves authentically and identify resources that will assist in their recovery. This process can have important therapeutic value.

It is important to ask these questions on an on-going basis as a person’s spirituality may change over time.

Identifying a person’s spiritual needs offers a window into their search for meaning, love and relatedness, forgiveness and hope.
The information gained from these conversations is recorded in the individual recovery care plan so that all staff are aware of the spiritual needs and resources of the person in their care.

Some important things to note:

- Where God is identified as a helpful and supporting influence, it is logical that they will want God to be acknowledged as part of the care support they receive. To determine what this support may look like, the worker simply needs to ask the person what will work best for them, remembering that individual preference and need varies.

- Where God is identified as a judging presence, they may have a lived experience of being troubled and ambivalent about their beliefs. This can be profoundly debilitating and be expressed by incongruent behaviours. As a worker you need to approach this with extreme sensitivity. This may be the time when a person is most in need of your support.

A spiritual care practitioner is able to provide additional support and undertake a more in-depth assessment upon referral. They would utilise specific spiritual care assessment tools, listed in the reference section at the end of this guide.

“What sustains you?” or “What keeps you going in difficult times?”
Responding to spiritual needs

**Spiritual care is an invitation to see the world and be with people in a way that is sensitive to their inner experience.**

We can actively support people by:

- documenting the spiritual beliefs and needs of the person as part of the initial assessment that serves as an active and helpful reference in their care and treatment
- encouraging people with a lived experience to explore what is important to them spiritually, noting this, acting upon it in care plans and confirming its value as a self-help strategy
- listening carefully to a person’s story allows opportunities to make sense of, and help reconcile experiences, including illness experiences
- being aware that people express their spirituality in many different ways which can influence the decisions they make about the treatment they receive, or how they want to be supported
- setting limits with people by not complying with every request or continuing long and repetitive conversations which may not be helpful. As with other areas of mental health work, spiritual care requires the maintenance of good boundaries to provide
safety for the person and to maintain the therapeutic relationship

- being inclusive of people who may not regard themselves as spiritual or religious, by giving them the opportunity to speak to a spiritual care practitioner, chaplain or community faith leader

- providing an environment for purposeful activity that supports spiritual expression such as creative art, structured work, enjoying nature and including these activities in individual recovery care plans and reviews

- making a room or space available where people can sit quietly, reflect, worship, pray or talk with others

- being responsive to the significance of various cultural and community days which may indicate a day of celebration or remembrance (Spiritual Health Victoria, 2016)

- being aware that some people have struggled with aspects of their sexual identity, and that this may have impacted their sense of self and connection to both people and the sacred. Exercising sensitivity to spiritual issues may be particularly important in these instances, for example members of the LGBTIQ community (adapted from Mental Health Foundation, 2007).

Relationship is the most important tool you have for working with people. Be mindful that the quality of your presence will be felt by the person as they share their story with you.

**Caring for the whole person, including heart and soul, really does matter.**
MENTAL ILLNESS IS A DEEPLY PERSONAL AND MEANINGFUL EVENT
It is easy to forget that mental illness is a deeply personal and meaningful event in a person’s life before it becomes a diagnosis. Diagnoses give formal structure to a personal experience but they do not (or should not) define the nature of that experience. Mental illness brings about changes in people’s lives; events which often challenge people to think about certain aspects of their lives quite differently. Sometimes these changes are pathological, at other times they are transformative and deeply spiritual.” (Swinton, 2005), p.4

For many people with a lived experience, there is a tendency to see the world in a very fluid, symbolic and reflective way. They have an ability to embrace the whole of life – nature, divinity, mystery, fantasy and indeed the more mundane of the human experience, as one. For some, there is no boundary between the visible/invisible or human/divine, and all can coexist simultaneously.

People with psychosis, may hold unusual beliefs (delusions), describe hearing voices (auditory hallucinations) or have other experiences that seem out of touch with reality. While these phenomena are commonly understood to be part of a diagnosable mental illness, there can be other spiritual or religious expressions that are within keeping of, and similar to normal experience.

There are many culturally appropriate examples that are not considered signs of mental illness, i.e. believing in angels, hearing the voice of god, communing with
ancestral spirits or praying. Whilst some aspects may become distorted because of psychosis, generally speaking, spiritual and religious experiences:

- are not distressing to the individual
- are deeply moving and provide comfort
- do not require treatment or intervention
- can be transformative – ‘a kind of rebirth’
- can include other experiences where visual, auditory or kinaesthetic perceptions are heightened.

Whether or not such experiences are symptoms of psychosis, it is fundamental that staff respond sensitively to descriptions of such experiences, particularly when people are in a state of heightened awareness or emotion.

Being open minded shows respect, encouraging people to talk about their inner world. This helps reduce any feelings of distress. As people share their stories with others, they name, shape and give meaning to their own unique experience and life. This is an opportunity for workers to explore deep and symbolic meanings even when these are psychotically expressed.

It is crucial then, that religiosity or spirituality is not wholly dismissed or ignored.

A referral to a spiritual care practitioner can be instrumental in supporting the person and worker at these critical times.

There will be times when spiritual beliefs will not be sufficient to relieve all of a person’s distress, especially if it has progressed in severity. Professional mental health support will be needed to help a person return to a safe state, where they can once again use their spiritual resources to stay well.
AN OPPORTUNITY TO BE HEARD AND UNDERSTOOD
Historically, staff working in mental health have overlooked spirituality because services have been traditionally aligned to the ‘medical model’ which views mental health problems as caused largely by biological factors.

This has left little room for spirituality to be considered a normal, acceptable and transformative part of mental health care and recovery. Most staff have not received any training in this area, so as a worker you may initially feel uncomfortable and in unfamiliar territory when discussing spirituality with the people you support and care for.

For some, such conversations may come easily and naturally. For others, they may be difficult and sometimes uncomfortable. It is helpful and important to respect your own feelings and reactions.
Understanding your own beliefs and values, in addition to broadening your knowledge about spirituality, can assist you in your work.

Practical things to enhance your confidence or skills in the provision of spiritual care may include:

- seeking out supervision opportunities that support you to talk about any concerns or tensions
- requesting additional resources or training opportunities
- if your health care service employs a spiritual care practitioner, seeking them out for a conversation
- strengthening community and cultural inclusion through linkages with community faith leaders and organisations that support a range of spiritual expressions (adapted from Mental Health Foundation, 2007).

Fostering more meaningful spiritual conversations and connections in our support relationships, provide the opportunity to take mental health care to a deeper level.

_Spiritual Care: creating more compassionate, person-centred health care._


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