



# *The Kaleidoscope of Spirituality: Creating Connections to Enrich Quality at the End-of-Life*

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Gateway Alliance for Compassionate Care at the End-of-Life

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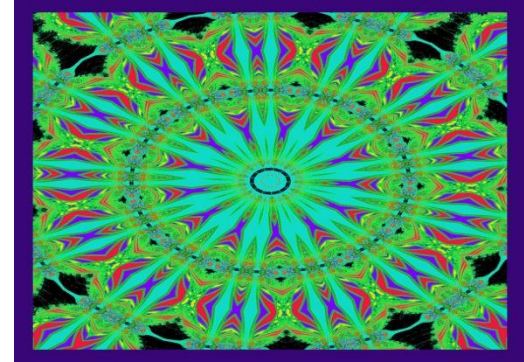
# ***Dedications***

*This lecture is dedicated to the many individuals who have provided us the honor of journeying through their lives and death, and who provided us with the gifts of growth, tears, laughter and hope.*

# ***Objectives: Our Journey***

- To expand our worldview regarding the importance of applying diverse spiritual approaches at the end-of-life
- Identify spiritual themes that appear at the end-of-life
- Apply approaches to empower patients to move from suffering to transformation

# *Defining*



Kaleidoscope (MacMillan Dictionary, 2015)

“A scene, situation or experience that keeps changing and has many aspects.”

“A toy that shows changing patterns consisting of a tube with colored pieces inside.”

# ***Distinguishing between Religion and Spirituality***

Religion: *Ligare – to tie or bind*

*Spirituality: Spirtus – to breathe*

*Medicine/Healing Arts & Spirituality*

# The Importance of Diverse Spiritual Approaches at EOL

- Interfacing disciplines
- Culture & Meanings vary; upbringing/beliefs norms, stereotypes
- When a spiritually sensitive relationship is created, it “honors diversity and the ability to relate across belief systems.” (Oxford Textbook of Palliative Care Social Work)
- Understanding self and beliefs of others

# Historic Roles

Physician = Chaplain

Provided:

- \*Physical/ Diagnostic Tools

- \*Herbal Remedies

- \*Spiritual/Redemptive Messages

(Gunderman R., Wilson, P., 2008)

Shamans

Relationships Change

# Science and Spirituality

Einstein – Paraphrase

“Spirituality without medicine may be lame, but medicine without spirituality is blind”



# *Spirituality and End-of-Life*

Much of who we are is about how we make meaning out-of-life.

Many find meaning in spirituality and religion.

The lenses through how we understand:

Health Life Healing Illness Death

# How Does Spirituality Help?

- Making sense of suffering and pain
- Finding hope
- Offering strength to resolve unfinished business
- Affirming the value of life
- Providing hope of bonds with loved ones, now and after death.

# But Even More...

- Spirituality helps us to cope with fear and loss of control:

Pain

Suffocating

Losing control of bodily functions

Mental functions

Loss of dignity

# Helping to Face the Fear of the Unknown

What happens when I die?

What will happen to me afterwards?

What will happen to my loved ones?

What legacy do I leave behind?

# The Personal Dying Experience

Clients do different things during the dying experience to include becoming:

Angry

Anxious

Tearful

Hopeful

Quiet

Depressed

They may also :

Question beliefs

Feel empty inside

Be Afraid to sleep

Report physical symptoms and pain that may be correlated to spiritual distress

Seek forgiveness (Exercise)

# Spirituality Assessments

Multiple Journals promoting care

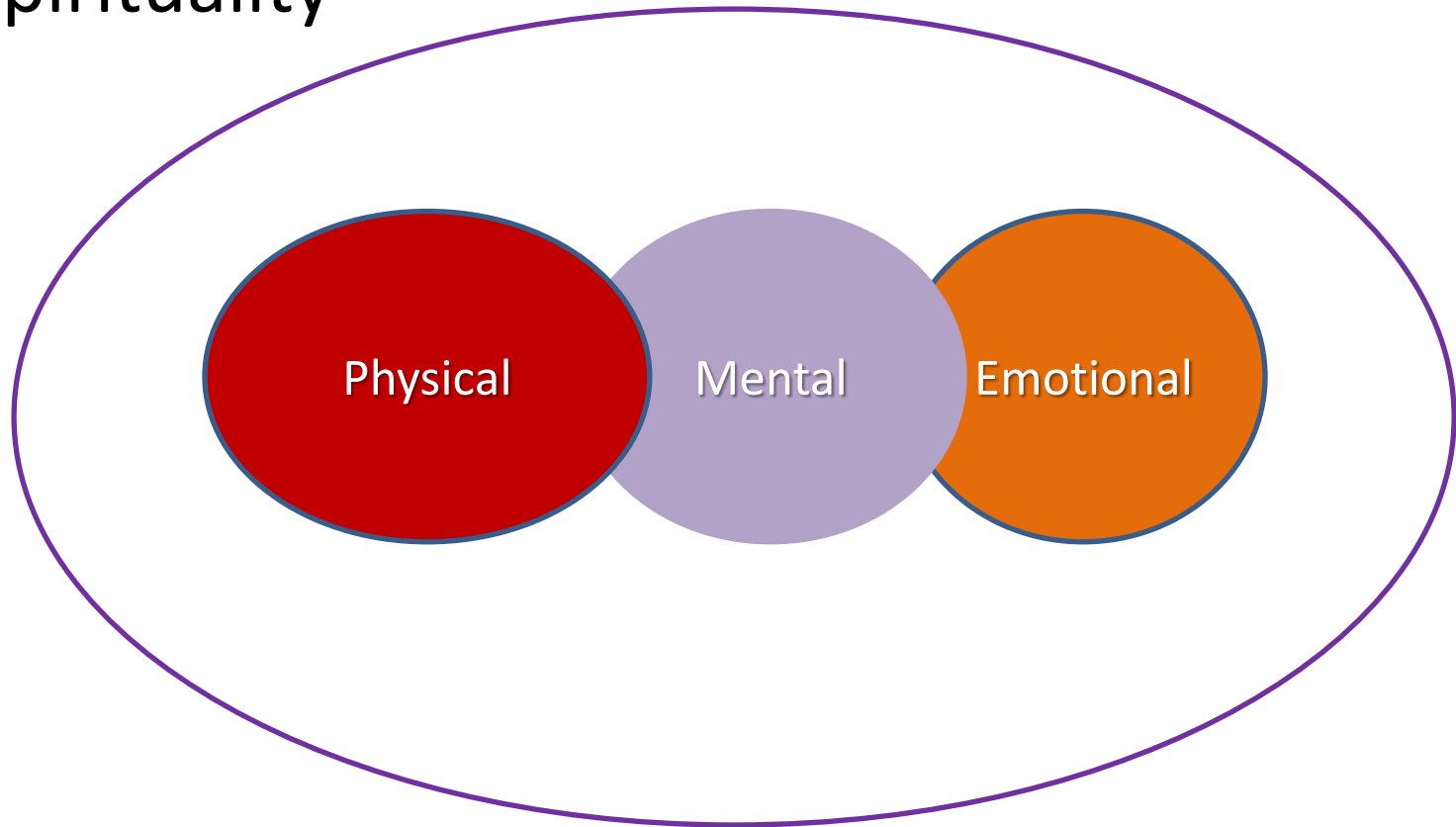
Numerous Assessments:

\* FICA      \*HOPE

\*SWAT

# *The Whole Person Concept*

- Spirituality



# Obstacles to Providing Spiritual Care

- Insufficient time to address concerns or needs
- Religious beliefs focus on miracles only
- Institutional obstacles
- An atmosphere of mistrust between client and provider
- Tensions resulting from miscommunications
- Identifying who gets the referral
- Fear in Delivery/Lack of Knowledge
- Uncomfortable with questions



# Moving a Patient from Suffering to Transformation

Because dying is deeply personal, avoid directing the process by:

- \* ***Preaching*** your beliefs
- \* Instructing ***NOT*** to be sad
- \* Describing ***your*** personal fears about death

# Provide Your *Presence*

- What does it look like?

Asking about one's life story

Holding their hand

Reading a favorite book aloud

Sitting quietly while one rests

Sitting with loved ones

# Questions Will Come

Listen carefully to the feeling behind the question:

***“What happens after death?”*** = Uncertainty

***“Will I go to Heaven?”*** = Needing Hope

***“I’m afraid of going to Hell”*** = Regret

***“What do you believe?”*** = Needing assurance

***“Why is GOD doing this?”*** = Helplessness

# How Does one Respond?

**“What happens after death”**

“It sounds like you’re uncertain. Are you feeling afraid?”

**“Will I go to heaven?”**

“What does heaven look like to you?”

**“I’m afraid of going to Hell”**

“You sound a little scared. Tell me more”

**“Why would God do this?”**

“You most feel powerless right now.”

# The Key is Keeping the Spiritual Focus on the Client

- These responses help to keep focus as they invite the patient or their loved ones to experience more deeply
- What do you do if someone really wants to know what you believe?

Share without trying to convince...if a deeper conversation is needed, refer to their Chaplain

# EOL Spiritual Themes Identified

- Coping can be enhanced
- The importance of religion and spiritual care
- Presence/companionship
- By exploring, and creating treatment plan, the patient is involved with some control
- Unfinished business can be addressed
- We can journey along to support a positive outlook
- Experiencing nature

# How Does Your Patient See Nature?

## A New Area to Assess

Live Plants

Pet Therapy

Colors

Pictures/family/sunsets/pastoral scenes

Mandalas

Music/sounds of Nature

# Interventions

- Guided Imagery
- Breathing techniques
- Music Therapy
- Art Therapy
- Deep Relaxation Exercises

Not recommended for use with psychotic disorders

(Oxford Textbook of Palliative Care; Reese; Altilio, Otis Green)



# The Kaleidoscope

- Has no recognizable patterns
- Emphasis may change in an instant
- Vocabulary/afterlife  
communications/language
- Affirmation of connections
- Control and manipulation of environment
- Existence

# Your Final Challenge

What spiritual gifts do you offer your patients  
and their loved ones?

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