Spiritual Care Snapshots, by David Buck

#### Snapshot 1. What is spiritual care?

Spiritual care is one of the key elements in the World Health Organisation’s definition of palliative care for adults and children. It is an important part of the work of a hospice but few can comfortable say exactly what it is. One commonly found definition of spiritual care says that it is,

… that care which recognises and responds to the needs of the human spirit when faced with trauma, ill health or sadness, and can include the need for meaning, self-worth, to express oneself, for faith support, perhaps for rites of prayer or sacrament, or simply for a sensitive listener. Spiritual care begins with encouraging human contact in compassionate relationship, and moves in whatever direction need requires. *[[1]](#footnote-1)*

This is all very well but what does that mean in practice?

###### “I’m not sure what it is that you do, but keep on doing it!”

That’s what John [[2]](#footnote-2) said to me two hours into a home visit. John had been referred to me, the Spiritual Care Co-ordinator, by the community nursing team for spiritual support. The progression of his illness had taken him beyond any hope of cure and he was generally feeling low and anxious.

I introduced myself and asked John some questions. He told me about how long he had lived in his house, DIY, his work as a joiner, his family, wife, children and grandchildren, holidays and how he would so much like to have one last holiday with his family in their caravan. He enjoyed telling his story and I listened carefully wondering what would be helpful to ask about next. Eventually he spoke emotionally about his illness and what was on his mind, his deep sadness at leaving, his worries for his family and his fear of dying. John by far did most of the talking. As I listened I carefully directed talk along lines that I thought might be helpful for John as he explored his thoughts and feelings. As time went by John’s speech relaxed, he sat back in his chair, began to breathe more slowly and deeply and his whole demeanour calmed. He had arrived at a new or different place within himself.

John offered me a tea and asked me what exactly it was that I did. I said that it was kind of just what we had been doing. He wasn’t sure what that was but he certainly felt much better, more hopeful. And the trip to the caravan, he said, somehow seemed more possible. That’s when he said it, “I’m not sure what it is that you do, but keep on doing it.”

I offered my continued support and although I never visited him again at home I kept in touch. He got the caravan holiday with his family after which his condition deteriorated considerably. By the time he came to the hospice as an inpatient he was very tired and weary but seemed to appreciate the few times I sat with him or talked and listened when otherwise he would have been alone.

###### And what do you do?

People ask me what it is that I do.

“Listening and wondering,” I say.

And if they want more I add,

“The listening is of a kind

that assumes that there may be more,

and the wondering often holds an anxiety about

whether I should be doing something

other than wondering.”

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#### Snapshot 2. “But surely it’s all about religion?”

Well sometimes, yes. And sometimes it requires some particular experience, specialist skills and knowledge.

I don’t often talk about my own faith. I did not grow up in a religious environment but have always had a sense that there is something more than just the physical. My faith journey took me from agnosticism, through charismatic Christian evangelicalism, traditional Anglicanism to liberalism, Christianity and beyond. I prefer to describe myself as a person of faith rather than as someone belonging to a particular religion. However, I still retain and exercise the office of an ordained priest in the Church of England. I have worked at Wheatfields as Spiritual Care Coordinator since 2012; before that I worked as a Church of England vicar for a number of years.

I first met Joan [[3]](#footnote-3) in the Day Therapy Unit. Joan had been referred to me for spiritual support because she was struggling with her faith. She was described to me as devout in her faith but had questions. Joan had attended church all her life, she told me, and it had served her well. She was articulate in explaining her beliefs and what these meant to her, loved worship, prayed regularly and enjoyed the social and supportive side of the church community. She gave much of her time to church, gladly and with joy. But after her diagnosis of a terminal illness her feelings changed. Was God still there? Why do my prayers seem to go unanswered? Mostly Joan was worried that she was beginning to doubt and lose her faith. It was fundamentally unsettling for her.

After a couple of conversations with Joan it was clear to me that she was a person of deep faith, it was part of who she was, but her faith was changing, growing. I carefully reflected this back to her. She looked at me with a little surprise and wanted me to explain. Joan knew her bible; I related the scene of the crucifixion from Matthew’s Gospel: “…My God, my God why have you forsaken me?” “Jesus,” I said, “the Son of God, who was there at the beginning of all things with God, doubted too, you know.” And so we talked about doubt – how important it is, especially in faith; it makes us go searching, ask questions and discover new things. And we talked about how the bible says that everyone is made in the image of God – we are like God, God is like us. When we feel pain, God feels pain; when we cry, God cries with us.

What Joan discovered was that for the first time in her life she felt comfortable with doubt. Doubt made sense. It inspired her prayers; she was more honest in prayer than she had ever been before. She told God what she felt and thought. We were able to connect with these thoughts and feelings as we shared Holy Communion and prayed together. For Joan a new closeness with God grew and understanding of the compassion and empathy of Jesus. Yes, at times she was frightened and uncertain, but drew peace and comfort from a new-found sense that God was not just for the good times but also with her during the tough times. It was reassuring for Joan that God, through Jesus, knew what she was going through and felt it like her. It made a difference for her. It settled her spirit.

###### A Certain Woman [[4]](#footnote-4)

And there have been a few

and have doubted

and stood still,

caught,

unwilling in faith.

Until they meet someone

who will not judge,

who will not say what has to be

or will be,

who will not agree or disagree

but listens, hears, receives.

I will not defend your God,

the one you learned of in sermons,

at school, in books or Bible class,

but say,

“Look here,

you and God are but the same image,

and one of you has cried to the other,

‘Why, why have you forsaken me?’”

If he can say that,

doubt also,

then what’s your problem?

You two are so alike?

And then the path to

hope and heaven opens

as doubt is revealed as

substance and sustenance

of journey and faith.

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#### Snapshot 3. Spiritual but not religious

Depending on how we ask people about their faith and beliefs we get different answers. The National Census and British Social Attitudes Survey suggest that anywhere between 25% and 50% of the UK population prefer to describe themselves as non-religious.[[5]](#footnote-5) Some suggest that as many as 20% of the population like to describe themselves as ‘spiritual but not religious’.[[6]](#footnote-6) It is complicated. When someone says that they do not have a religion it does not necessarily mean that they do not have faith and/or beliefs. When someone says that they are spiritual it could be that they are religious but they may not be. There is much to say here but I will touch on just one common theme.

I met Peter [[7]](#footnote-7) on one of my informal visits on the Inpatient Unit. He had not been referred or asked for spiritual support. When I knocked on his door and inquired if I could say, “Hello,” and introduce myself he said, “Come in.” He seemed open and interested as I explained that I was the spiritual care coordinator or chaplain at the hospice. Peter talked warmly about family, home, holidays and work.

And then after a while, quite out of the blue he said, “I don’t go to church. I’m spiritual but not religious. Do you think it is OK not to go to church?” Wondering why he might be saying this to me, perhaps Peter sees me as a representative of church, I asked him to tell me his story. He hadn’t been brought up as a Christian but went to church in his teens and into early adulthood. Peter explained that he felt the need to go searching for ‘something’, God. Initially he had found the order and certainty of church helpful but later found himself questioning church teaching on matters such as divorce, homosexuality, and who or what God actually is – all things that any religion can be very particular about. What troubled him was that he knew there was something good in church but for him too many things did not add up. Christianity, he thought, spoke of love but often, he felt, love seemed absent.

Peter left church behind but not his searching. “In fact,” he said, “I think I found it, a sense that there is something, someone (God?) all around, in everything.” To be out walking on the moors or enjoying a family meal was to be with this “God.” Peter sometimes prayed or meditated and said that he did his best to live out his life’s philosophy, “To treat others as I would want to be treated.” Eventually he paused and with hesitation and palpable sadness said, “But I do feel bad that I’ve never been back to church. I know, actually, that there are many good people there.”

I reflected that generally he seemed to have found peace in life, living by values he held dear, respectful of others, caring for those he loved and that faith and belief (searching) had brought him there. He seemed relieved and said, “It’s been good to talk.” Church hadn’t worked out for him but that was OK, because of what he felt he had discovered on the way. Talking to ‘the Chaplain’ had helped heal some of the broken parts of that journey.

###### I get asked

“Is it difficult

to support

people of all faiths

and of none?”

I note their assumption,

pause,

look them in the eye

and say,

“No,

it is easy

because of the golden

treasure within

that says,

we value

this human thing,

I and you.”

And the rule is easy:

know yourself,

understand,

be empathy more than compassion

and it will inform your response.

But their eyes look back

to say that this is a hard teaching,

surely the fetch and carry

of rite and ritual

is the easy stuff.

Maybe,

but when it really matters,

when you stare death in the face

it’s about treating other

as if it was yourself.

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#### Snapshot 4. Multi-faith

Like many hospices up and down the land, we are not very culturally or ethnically diverse and do not fully reflect the diversity of the communities that we support. The reasons for this are not fully understood but will include things around the perceptions about what a hospice is, differences in cultural and religious practice, and issues around communication.[[8]](#footnote-8) There is a perception by some that hospices, many of which bear the name of a Christian saint, are Christian organisations or are inspired by Christian principles. Many cultures and communities place an emphasis on loved ones being supported and cared for by family members at home who also may not easily engage with healthcare workers. Language is a problem if, when trying to explain what hospices are all about, we simply are not understood.

I first met Rehanah as she came out of Sughra’s room and started walking down the corridor.[[9]](#footnote-9) Although I had not met Sughra I knew of her from the morning handover meeting on the ward. Her daughter Rehanah was with her when Sughra was admitted to the ward, three days ago and indeed, stayed with her much of the time. This was helpful for staff as Sughra’s command of English was poor. Rehanah was able to translate when Sughra was asked the usual questions at admission. So we knew that their faith, Islam, was important to both of them, that Sughra preferred not to be attended by male nurses and that she had some particular dietary wishes, halal food. Also, when asked, Sughra had not wanted the chaplain to visit.

When I saw someone coming out of Sughra’s room I took the opportunity to say ‘hello’ and introduce myself. Rehanah was glad that I did because she wanted to ask me if there was anywhere in the hospice to pray. This, if possible, should include washing facilities for ablution before prayer. So I led her round the building exploring places like the Quiet Room and other things such as the prayer mats that are available.[[10]](#footnote-10) As we went I was able to check that Sughra’s needs were understood and being met. Rehanah was able to explain that the most helpful thing was that one of our nurses spoke Sughra’s native language, Urdu, and easily understood her culturally. This helped mother and daughter a lot, especially if this nurse was on duty when Rehanah could not be there. And “Yes”, we were being very attentive and understanding with all their needs and wishes.

When our little tour ended we came to the conclusion that there really wasn’t anywhere that felt ‘right’ to Rehanah for prayer. Then she asked if it was allowed to say Salat (prayers) with her mother in her mother’s room. “Of course it is,” I said and added that there was a sink with running water for washing there that she could use, and curtains could easily be drawn and a ‘do not disturb sign’ that could be used. I wonder if this is what Rehanah had wanted to ask all along. It turned out to work really well for them both. It brought mother and daughter closer, particularly at a time when Sughra found it difficult to say prayers on her own.

###### Equality and Diversity

I am me,

you are you.

We are human

but do we breathe the same air?

And to claim

To know other

when you understand

so poorly

yourself

is hazardous

and leads to

Fear mostly

and quite a lot of ignorance.

Urgency, impatience,

deafness, disinterest.

And we remain

Two voices,

one real,

one imagined.

Both real.

Perhaps follow

After Lederach,

making friends with fear,

acknowledging complexity,

imagining beyond,

risking.

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#### Snapshot 5. Confession and Absolution

Many of us carry regrets and feelings of guilt about past events and actions. For some, when they understand that they have a life limiting illness, these can seem to come and take over their thoughts and emotions in ways that can be difficult and distressing. The fallout with their father, the affair they never told their partner about or the way they let their friend down at a time of need can become heavy burdens. Sometimes making formal confession to a priest or other minister can be helpful, for others what is needed for release (absolution) is simply another trusted soul.

Sid [[11]](#footnote-11) had been admitted to the hospice for management of symptoms which included psychological and emotional distress. The reasons for his obvious anxiety were not clear. In conversation with a doctor he agreed to a referral for spiritual support. So I went along and introduced myself. Sid asked if I was the padre (chaplain) here and that he was not religious, “Not in that sense,” but wanted to chat. Sid talked about where he lived, family, his job, what he did in retirement and how he came to be at the hospice. And as he did so, he was clearly sussing me out, seeing how I might react to things. Eventually he spoke of his National Service.

Sid’s time in the army, he told me, took him to a troubled part of the world where he experienced fighting in difficult circumstances. He was glad to ‘do his duty’ but was unprepared for what he experienced. In one incident, reminiscent of a scene from a Hollywood movie, when retreating from the enemy they had to leave a wounded colleague behind. In another, when finally moving forward after having been pinned down by a solitary enemy soldier, the unit discovered, after Sid had shot him, that the ‘soldier’ was a boy about twelve years old.

We reflected on many things including friendship, humanity, cruelty, duty, following orders and forgiveness. Sid explained that he had spoken to his commanding officer and army padre at the time about these events. Helpful as this was, it hadn’t changed anything he said. He coped for most of his life by blocking things out and forgetting but now feelings of guilt, remorse and issues of moral injury [[12]](#footnote-12) troubled him greatly. He was telling me, having spoken to no one else about this since his service days, because he felt he had to, he couldn’t take it anymore.

Conscious that I had only limited knowledge of and experience in working with ex-service personnel, I suggested that I return with some details of specialist organisations that might be able to help.[[13]](#footnote-13) When I returned the next day Sid said that he was OK and explained that talking about it with me had lifted a huge burden. This surprised me, things had seemed so horrific. He never fully explained but I felt that he remained feeling sad, remorseful, in grief but somehow starting afresh with a more hopeful, meaningful sense of himself. Having made confession of the things from which pain had come, an internal absolution (freeing) or inner healing had occurred.

###### Trust

Because when I told you the most horrific things

you did not flinch;

the reason for my guilt and shame

did not abhor you;

you lived my life for a moment

and were not overwhelmed

but gave absolution and hope.

And entering my world,

or so it seemed,

you were happy to splash on the surface

or at a moment’s notice, dive deep,

and ask the right questions at the right time

and sit with my unwillingness to speak

but desire to keep you,

and knowing the right time to leave!

And somehow, opened a door to a new insight

so that I alone in my private place

can meet myself and my God afresh

and be transformed. Thank you.

And to conclude;

thank you for your mysterious powers

of gently sitting,

resting your ear in the flow

of what is being spoken

and wondering, pondering,

“Does this mean this?,

What would that mean?”

And so gradually entering the stream

with all who meet with you

as fellow pilgrims.

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#### Snapshot 6. What difference has Covid-19 made?

Plenty and some more but also business as usual. Initially I was the only member of the Family Support Team on-site in the hospice, and more recently only one other member of the team has been in each day. Spiritual care volunteers have had to stay at home also. Even greater care is given to keeping everyone safe.

Exploring how to use the available technology for virtual meetings, support sessions and much greater use of the telephone has been crucial. With the Day Therapy Unit being closed there is a much greater focus on the Inpatient Unit. However, casual, informal visiting by ‘chaplains’ is currently discouraged; a further measure to reduce the risk of spreading infection. We are constantly reviewing things.

It has been a very productive time, thinking through difficult things such as how to ‘do grief’ when we can’t gather for funerals, and how to meet spiritual and religious needs differently. Much sharing of practice and resources has been going on between chaplains which is then passed on to other staff. On a personal level I have not been exempt from the natural flow, the ups and downs, of emotions as the crisis has developed – energised, tired, emotionally wobbly, lost, angry, sad, just needing and seeking peace. Staff support has been a focus.

What stories to share? One really good thing during lockdown has been that ‘emergency marriages’ through the Church of England could still take place. We were able to support two couples, one at home and one at the hospice, the latter ceremony being one I was able to do myself.

And then there was Isabelle,[[14]](#footnote-14) who came to the hospice because she was struggling at home. Church had been the focus of her social life – lunches, quizzes, coffee mornings, etc – but these were no longer happening. As we talked during my visits she shared much about her life: a childhood in poverty but not without love from her mother, factory work, lingering disappointments (especially where men were concerned), loneliness and the comforts of keeping two dogs.

And then out of the blue Isabelle asked me to sing. “Well,” I said remembering that singing was not allowed under covid-19 restrictions, “I’m not a great singer, but I do like to hum.” So sat there in my PPE, through my mask, I hummed Kingsfold,[[15]](#footnote-15) a beautiful, lilting folk-tune which has various resonances. And as the music wove through the places of her story and our meeting I saw tears beginning to fall down her cheeks. “Thank you,” she said, “that was beautiful.”

We are all, I think, adapting to a changing environment, never quite sure about the present and certainly wondering about the future – will it always be like this? Spiritual care feels its way around, listening and wondering.[[16]](#footnote-16)

*I have, during lockdown, been writing some laments. My understanding of these ‘sad songs’ comes via a folk-music tradition. They seek to engage with feelings.*

###### Lament 3

As I did my daily exercise

I saw a man walking rectangles –

along the side of the house,

then left at the wall,

eleven paces,

left at the corner

and down the straight

of the long flower border,

then left at the gate,

eleven paces…

And left again,

back along the house

past the place where he began

and on again,

stick in hand,

old,

slowly,

burdened,

bent with living,

and again –

walking hard ground.

And I passed a little girl

(and her grandma?)

waiting together,

watching,

saying that they heard the ice-cream van

but could not see it,

money in hand,

looking up and down the street.

I shrugged.

I had not heard it but did

not want to say

and, at a distance,

walked on.

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1. NHS Scotland [↑](#footnote-ref-1)
2. Name changed [↑](#footnote-ref-2)
3. Not her real name [↑](#footnote-ref-3)
4. Original title - *A Certain Man* [↑](#footnote-ref-4)
5. See ‘Faith at End of Life’, Public Health England, 2016 [↑](#footnote-ref-5)
6. See BBC News Magazine, 3rd Jan. 2013 <https://www.bbc.co.uk/news/magazine-20888141> [↑](#footnote-ref-6)
7. ‘Peter’ is an amalgamation of various different people [↑](#footnote-ref-7)
8. see ‘Living With Difference: community, diversity and the common good’, The Woolf Institute, 2015 and ‘Palliative and End of Life Care for Black, Asian and Minority Ethnic groups in the UK’, Public Health England, 2013. [↑](#footnote-ref-8)
9. Names changed. [↑](#footnote-ref-9)
10. We have Qur’ans, prayer mats, shawls, compass for finding direction of Makkah, Qur’an recordings. [↑](#footnote-ref-10)
11. Not his real name. [↑](#footnote-ref-11)
12. Moral Injury is the social, psychological and spiritual harm that arises from a betrayal of one’s core values. [↑](#footnote-ref-12)
13. There are various organisations supporting ex-service men and women including Combat Stress whose advice I sought on this occasion. [↑](#footnote-ref-13)
14. Not her real name [↑](#footnote-ref-14)
15. Folk music often reaches deep into our cultural psyche. *Kingsfold* has been used by composers such as Vaughan-Williams and the words of various hymns can be sung to it. Had I had my simple system ‘folk’ flute with me I might have played it on that. [↑](#footnote-ref-15)
16. See Snapshot 1 [↑](#footnote-ref-16)