European Network of Research on Religion, Spirituality and Health

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Editorial

Dear colleagues, dear friends,

The 3rd European Conference on Religion, Spirituality and Health (ECRSH) in Bern 2012 belongs to the past. It was again a great meeting with inspiring lectures, workshops and encounters. For further information read the next paragraph.

The organisation of the conference became only possible because of Stefan Rademacher who helped with the conference office. You will find his portrait later in the newsletter. I thank Stefan for his great effort for the conference

In July Stefan Rademacher took over the position of Jacqueline Bee who left the Research Institute by the end of the month. Jacqueline Bee got the opportunity for a carreer in theological research and education. I thank Jacqueline for her support and active contributions in the past three years.

René Hefti, M.D.

ECRSH 2012

Focus on Spiritual Care

The conference gathered experts from 23 European and foreign countries including South America, Australia, New Zealand and Asia. The main topic was Spiritual Care, a holistic and interdisciplinary approach in clinical medicine emerging from palliative care. Prof. Eckhard Frick from the Ludwig-Maximilians University in Munich, professorship of Spiritual Care, presented the



Bern Lecture on "Spiritual Care – how does it work?". In addition Prof. Harold Koenig from the Duke University Medical Center in Durham spoke on "Spiritual Care in the United States – research, understanding and practice".

Considering the topic of Spiritual Care a discussion takes places on the meaning of the term "spiritual". For some experts "spiritual" is an equivalent to "human" and therefore includes basically every human behaviour, as for others spirituality needs to be related to the transcendent (Zinnbauer, 1997). In health sciences anthropological definitions of spirituality are predominant (Baier, 2006). Spirituality is understood as a distinct human dimension expressing itself as spiritual needs and struggles.

Spiritual Care in clinical practice is an interdisciplinary approach including and integrating all health disciplines as established in palliative care. This approach is based on an extended psychosocial model (Hefti, 2011) and can be applied to all medical specialities from family medicine to cardiology, surgery, gynaecology and psychiatry. To emphasize the significance of spiritual care Prof. Frick quoted FitzGibbon: "If a nursing practice procedure is mishandled, the worst can happen is that the patient dies; if a spiritual care procedure is missed, it can mean the eternal death of the soul" (FitzGibbon, 1951). This thought provoking statement underlines the importance of the spiritual dimension and the need for training basic competencies in spiritual care. One core competence is taking a spiritual history using a person centred approach. Specific instruments supporting a spiritual history are the SPIR interview or a newly developed spiritual distress assessment tool (Monod, 2012).

For further information please visit our post-conference website offering pdf and audio files of many of the presentations (www.ecrsh.eu, see programme).

René Hefti, M.D. Scientific and organizing committee ECRSH 2012, Research Institute for Spirituality and Health/Switzerland

Young Researchers Award 2012

Two outstanding contributions were honoured with the Young Researchers Award. The award winners are Dr. Barbara Hanfstingl and Eunmi Lee, M.A. We are glad to present their contributions herewith:

The Relationship between Psychiatric Staff's own Spirituality and their Attitudes towards Religiosity/Spirituality of Patients (E. Lee in cooperation with K. Baumann)

Since the end of the 1980's religious and spiritual beliefs have been highlighted as an important dimension of patients such as physical, mental or social factors. In the context of a growing body of international research on questions related to these topics, though not in German-speaking countries, our study focused especially on psychiatric staff.

We examined spirituality of psychiatric staff and staff's attitudes towards religiosity/spirituality of patients based on staff's own experiences, as well as the relationship between the two variables. The survey's main instruments were DUREL (1) for measuring intrinsic religiosity, taken as the indicator of spirituality in this study, and the questionnaire of Curlin et al. (2), whose questions regarding attitudes towards religiosity/spirituality of patients were categorized into positive and negative influences on health. The medical, therapeutic and nursing staff of psychiatry and psychotherapy departments of German university hospitals and confessional clinics (total 21 hospitals) replied to this research during the period from October 2010 to February 2011. The response rate was 24.43% (n = 1654).

The respondents have a moderate degree of spirituality (M = 7.0 (SD = 3.15) on a scale of 12.0*). A significant difference of spirituality was shown between staff in university hospitals and confessional clinics (Univ.: M = 6.48, Confess: M = 7.55, p < 0.01). Moreover, based on staff's own therapeutic experiences, psychiatric staff believes that religiosity/spirituality plays an important role for patients, such as the

support of religious communities or motivation for therapies. Here, a significant correlation (one-tailed Pearson correlation) was identified (between spirituality and positive influence: r = 0.413, p = 0.000, between spirituality and negative influence: r = -0.139, p = 0.006).

Many studies emphasize the influence of staff's attitudes on the therapeutic process (3, 4). Our study verifies that staff's attitudes towards religiosity/spirituality are related to how they interpret the experience of religiosity/spirituality of their patients. In conclusion, this study suggests that staff's awareness about their own religious/spiritual attitudes should be increased, so that religious/spiritual issues could be effectively and appropriately dealt with in treatments, which will result in an improvement of therapies for both patients and staff.

Note: More results of this study will be published in 2012 as a dissertation.

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Implicit and Explicit Self-Regulation, and Spirituality: A Comparative Study with Students and Elder Persons (B. Hanfstingl in cooperation with J. Olsacher)

The aim of our research deals with the relation between implicit and explicit selfregulation and spirituality and their differences between students and elder persons. Koole et al. (2010) define procedures underlying explicit self-regulation as analytical and future-oriented, like a planning system, whereas implicit self-regulation can be understood as a "systemical intelligence", feeling-oriented and focused on the congruence of one's own identity and self. Koole et al. postulate that implicit self-regulation tends to covary with spirituality, associated with "ego-transcendence" (Kuhl, 2005, p. 23). In a paper-pencil study we asked 135 students (aged 18 until 25; 80% female) and 72 elder (aged 56 until 87; 72% female) to fill out a questionnaire containing sociodemographic data, the German volitional component inventory (VCI; Kuhl & Fuhrmann, 2008), a German version of the Mystical Orientation Scale (MOS; Francis & Louden, 2000), and the German Centrality scale (Huber, 2003). Analyses show that people with higher religious and mystical levels have higher values in the implicit self-regulation scale selfaccess, but they have more everyday stress

as well. Whereas elder people show higher values in religious beliefs and implicit self-regulation, students show higher values in mystical beliefs and explicit self-regulation. Our future research will deal with the question, if implicit self-regulation is something that "comes with lifetime", whereas explicit components of self-regulation tend to be higher in younger people. We argue in support of a functional-analytical, process-oriented, and maybe developmental view on spirituality.

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References of all the contributions you find in a special issue "references", see website: www.fisg.ch/dynasite.cfm?dsmid=92513

Announcements

Dr. Stefan Rademacher - our new co-worker in the Research Institute

Stefan Rademacher studied Science of Religion in Berlin. The doctorate (PhD) brought



him to the Institute of Science of Religion at Bern University. Since October 2011 Stefan Rademacher took the responsability for the conference office of ECRSH 2012. Since July 2012 he became a co-

worker in the Research Institute for Spirituality and Health and will support the different activities. Stefan, coming from the flat lands of eastern Germany, likes the beauty of the Swiss montains and Science Fiction.

Our Conference Book "Spiritualität und Gesundheit" is available now

It is our pleasure to inform you that our book «Spiritualität und Gesundheit. Aus-



gewählte Beiträge im Spannungsfeld zwischen Forschung und Praxis» (Spirituality and Health. Selected Contributions on Conflicting Priorities in Research and Practice) with contributions from the

ECRSH 2008 and 2010 has been published now. It was our concern to include both German as well as English articles in order to take the international readers into consideration. The range of articles runs from overviews and fundamental contributions to the integration of spiritual approaches in clinical contexts. We express our thanks to the authors who provided their articles for this publication.

The book can be ordered on the website of the Research Institute www.fisg.ch (see shop) or directly on the website of the publisher www.peterlang.com.

5th Meeting of the Transdisciplinary Workgroup Spirituality and Illness TASK

September 10/11, 2012, Bielefeld/Germany For further information see: www.grp.hwz.uni-muenchen.de/task/.

"Krankenhausseelsorge oder 'Spiritual Care'?" Der professionelle Umgang mit spirituellen Bedürfnissen im Krankenhaus

Fachtagung der Ev. Akademie Berlin in Kooperation mit der Evangelischen Zentralstelle für Weltanschauungsfragen EZW September 21/22, 2012, Berlin/Germany (Ev. Bildungsstätte auf Schwanenwerder) For further information see: www.ekd.de/ ezw/veranstaltungen_2719.php.

"Zahlt sich Spiritualität aus?" Organisation, Unternehmenskultur und Spiritual Care

2nd Scientific Symosium of the Internationale Gesellschaft für Gesundheit und Spiritualität (IGGS)

October 5/6, 2012, Munich/Germany (im Exerzitienhaus Schloss Fürstenried) For further information see: www.spiritualcare.de.

Impressum

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