

# European Network of Research on Religion, Spirituality and Health

Newsletter Fall 2012

Volume 7 • No. 3

## Editorial

### Dear colleagues, dear friends,

The present Newsletter and the last one in 2012 contributes to the discussion on multidimensional models of the individual. Peter J. Verhagen presents such a model that includes biological, psychological, social and spiritual aspects in a hierarchical order. Its a summary of his keynote lecture at ECRSH12.

If you like to discuss a scientific topic, propose a theory or announce a publication or an event, don't hesitate to contact us! This newsletter brings you in touch with a growing audience interested in the field of religion, spirituality and health. Please just send us an e-mail to: [info@rish.ch](mailto:info@rish.ch).

*Stefan Rademacher, PhD*

## The Bio-Psycho-Social Model and Spiritual Life: Failure & Future

### Starting point

The BioPsychoSocial model was/is primarily used in clinical practice as a non-reductionist approach to mental disorder [1, 2]. However, the model is not clear about how these three (or four?) dimensions relate. Are they levels of increasing complexity, as George Engel seems to suggest? Do they have their own language and methods?

### Objection I

The BPS model lacks an integrative framework and does not explain how these levels or domains work together.

### Objection II

The BPS model is not open to meaning-centered aspects of illness and health [3].

### Counter-argument

It is possible to reformulate the BPS model such that it is open to religion and spiritu-

ality and that it integrates empirical findings at the interface of psychiatry and religion. A reformulation along these lines would integrate the spiritual dimension in clinical practice and would allow the use of spiritual resources in coping with illness and in managing one's problems. Research on 'psychiatry and religion' does suggest that spirituality and religion can be helpful for persons with physical and mental disorders and that the correlations found cannot be explained by or reduced to other psychosocial variables.

### Theory

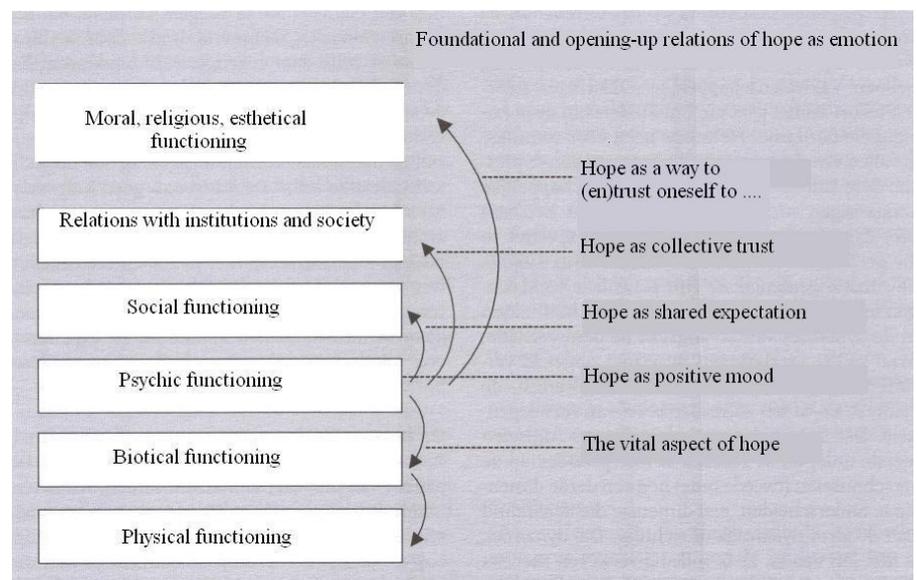
(Based on the systematic philosophy of the Dutch philosopher Dooyeweerd.) Human functioning can be analyzed as a structural whole, in which substructures are interwoven without loss of their relative independence. The structural whole has its own internal destination. Human emotions as part of the psychic substructure prepare for an immense diversity of acts and act-like behaviours. This preparing for is called 'anticipation'. So anticipation refers to the reflection of elements of the higher functions within human emotional life which as such is part of the psychic structure. So, emotional life is co-determined by analogical moments which anticipate the higher func-

tions of the structural whole. Feelings as trust and hope can be interpreted as feelings that anticipate faith (spiritual life). As such, as feelings, they remain within the boundaries of emotional life. However, the words 'trust' and 'hope' may denote other events, acts of trust or hope, acts that bear witness of our confidence in somebody or in a certain state of affairs [4].

### Hope

Hope is an affective disposition, which expresses itself in a variety of ways. In a weaker sense it means something like positive expectation, having confidence in the future. Hope is reaching out to what is not yet there, in the anticipation of something positive to come. The opening-up of feeling lead to more concrete expectations, that includes a cognitive dimension. This expectation is not merely private, it may be shared with other people, explicitly or implicitly. The psychic sphere is opened up to the social, to the level of institutions and society and finally to the realm of meaning, morality and esthetics.

If emotional life opens up to these higher levels of functioning, they are no longer just expressions of the self. They become social by attuning to the wishes, feelings and interests of others around us. Each of



the higher levels adds another connotation to the feeling (see figure).

#### Conclusion

The refinement we propose is based on a view on human functioning as structural whole, in which substructures are interwoven. Each 'lower' substructure is encompassed by the next, higher substructure, the structural whole encompassing them all. Each encompassed or underlying substructure functions in a foundational sense within the higher substructure. Each substructure is qualified by the function which is used to denote them. The structural whole is open to a wide variety of functions including spiritual life [5]. This approach allows us to formulate new answers to the failure of the BPS model because it offers an integrative framework (Objection I) and it is open to meaning centered-aspects of illness and health (Objection II), and open to spiritual life.

#### Works cited

1. Engel, G.L. (1980). The clinical application of the biopsychosocial model. The American Journal of Psychiatry, 137, 535-544.
2. McLaren, N. (1998). A critical review of the biopsychosocial model. Australian and New Zealand Journal of Psychiatry, 32, 86-92.
3. Lewis, B. (2007). The biopsychosocial model and philosophical pragmatism. Is George Engel a pragmatist? Philosophy, Psychiatry & Psychology, 14, 299-310.
4. Glas, G. (1998). Psyche and faith. Beyond professionalism. In P. J. Verhagen & G. Glas (Eds.), Psyche and Faith. Beyond professionalism (pp. 167-184). Zoetermeer: Uitgeverij Boekencentrum.
5. Glas, G. (2002). Churchland, Kandel, and Dooyeweerd on the reducibility of mind states. Philosophia Reformata, 67, 148-172.

Peter J. Verhagen MD, MA (GGZ Centraal, Harderwijk & Gerrit Glas, MD, PhD (Dinmence, Zwolle)

#### Correspondence:

Peter J. Verhagen, psychiatrist  
WPA Section on Religion, Spirituality and  
Psychiatry  
GGZ Centraal, Harderwijk, the Netherlands  
[p.verhagen@ggzcentraal.nl](mailto:p.verhagen@ggzcentraal.nl) or  
[verhagen.p@wxs.nl](mailto:verhagen.p@wxs.nl)

## Announcements

#### Publications:



#### Spiritualität in den Gesundheitsberufen

Harold G. Koenig  
Ein praxisorientierter Leitfaden. Bearbeitet und mit einem Geleitwort von Dr. med. René Hefti. Stuttgart: W. Kohlhammer 2012

#### Aids und Religion

Carsten Klöpfer

Der psychologische Beitrag von Buddhismus und Christentum zu Präventionsstrategien gegen die psychosozialen Folgen von HIV/Aids. Ein Vergleich zwischen Südostasien und Europa am Beispiel Thailands und Luxemburgs  
Göttingen: V&R Unipress 2012

#### Oxford Textbook of Spirituality in Healthcare

edited by Mark Cobb, Christine M. Puchalski, Bruce Rumbold  
Oxford: Oxford University Press 2012

#### The Psychology of Religion and Spirituality for Clinicians: Using Research in Your Practice

edited by Jamie Aten, Kari O'Grady, Everett Worthington Jr.  
New York: Taylor & Francis/Routledge 2012

#### Meetings & Conferences:

#### „Spiritualität in der Medizin - Luxus oder Notwendigkeit?“

November 7, 2012, 13.30 - 18.00  
Klinik SGM Langenthal

For further information see:  
[www.klinik-smg.ch/index.php/veranstaltungen.html](http://www.klinik-smg.ch/index.php/veranstaltungen.html)

#### „Neue Bewusstseinskultur in einer aus den Fugen geratenen Welt“

2<sup>nd</sup> Conference „Meditation und Wissenschaft“ of the Oberberg-Akademie Berlin



Neue Bewusstseinskultur in einer aus den Fugen geratenen Welt  
16.-17. November 2012 in Berlin

November 16/17, 2012

Berlin, Atrium der Deutschen Bank

For further information see:  
[www.oberberg-stiftung.de/veranstaltungen/events/kongress-meditation-wissenschaft-2012.html](http://www.oberberg-stiftung.de/veranstaltungen/events/kongress-meditation-wissenschaft-2012.html)

#### „Zeit. Geist. Zeitgeist - Neue Herausforderungen in Psychotherapie & Seelsorge“

International Congress of the Akademie für Psychotherapie und Seelsorge APS



Akademie für  
Psychotherapie  
und Seelsorge

May 8-11, 2013, Würzburg, Congress Centrum

For further information see:  
[www.aps-kongress.de](http://www.aps-kongress.de)

#### „Ageing Gifts - Ageing Changes - Ageing Hopes“

5<sup>th</sup> International Conference on Ageing and Spirituality



July 7-10, 2013, Edinburgh

For further information see:  
[fiop-mha.events-made-easy.com](http://fiop-mha.events-made-easy.com)

#### Impressum

This Newsletter is published by the Research Institute for Spirituality and Health, Langenthal / Switzerland

Editorial board: René Hefti, Stefan Rademacher, Maria Teschner

RISH - Research Institute for Spirituality and Health  
Weissensteinstrasse 30  
CH-4900 Langenthal / Switzerland  
Phone +41 (0) 62 919 22 11  
Fax +41 (0) 62 919 22 00  
[info@rish.ch](mailto:info@rish.ch) / [www.rish.ch](http://www.rish.ch)