Karoliina Niikula welcomes everybody and is happy to see so many of us, even after all the hard work of yesterday and explains the programme of the day, which will be somewhat lighter, especially with the visit to Bruges in the afternoon.

“Describing effects of healthcare chaplaincy. A study in self-perception of chaplains’ contribution to spiritual care” is the subject of the first conference in seminar room 1, presented by Nika Höfler, representative of a research group at the Westfälische Wilhelms Universität Münster, Germany, currently investigating the effectiveness of health care chaplaincy for patients, relatives, hospital staff and the chaplains themselves (the project is running from December 2017 to 2021). It is the first time that research of this kind is being done in Germany, so it is very new and exciting indeed.

Nika explains that their research starts with qualitative methods (case studies and narrative interviews), followed by a quantitative method (survey study).

In stage 1 only the chaplains are involved and the research question is: “How do healthcare chaplains perceive and describe their contribution to a culture of spiritual care within health care?” Focus is on understanding spirituality, the relationship between effectiveness and self-efficacy, and the effectiveness of healthcare chaplaincy (from the chaplain’s own view). The goal is to learn how nurturing one’s own spirituality affects the effectiveness of the chaplains as a whole. The structure of the reports is based on what Fitchett and Nolan describe in “Spiritual Care in Practice” (2015). The chaplains are encouraged to write a retrospective narrative and to reflect on it.

Nika gives some preliminary results based on 30 case reports, involving mostly patients, but also relatives and 1 staff member. (By the way, not surprisingly, out of 30 chaplains, 25 are between 50 and 60 years old, only 2 are younger). In 7 cases there was documented proof of effectiveness, through letters from patients or medical staff expressing gratitude. Nika presents examples of reflections from chaplains expressing how they feel their spirituality is helping them in their (successful) practice, in relationship to God, to the moment, and to the patient.

Ewan Kelly, moderator, was struck especially by a quote of one of the chaplains’ reports, touching the heart of this ENHCC Consultation:

“Pastoral care is ???, not done.”

In conference room 1, Valerie Steassin (rabbi, NAJC – Neshama International Association of Jewish Chaplains & Association Spiritual Care, Israel) gives a musical workshop on “Inspiring new tunes for ancient Biblical verses”. She first explains that she grew up in a (liberal Jewish) family in France, with roots going back to Russia, Poland, Hungary, Algeria and Morocco. She moved to Israel at the age of 17. Her spirituality is inspired more by American Judaism than by Israeli Judaism. She found a connection with conservative Judaism, took classes in Jewish studies and was the first woman to be ordained as a rabbi in Israeli Conservative Judaism in 1993.

In the religious tradition in Israel, prayer is mostly seen as part of a ritual, a duty, something that “has to be done”. These prayers are often very long, hard to understand and not appealing to people who did not grow up in this religious tradition. But she experienced that it is possible to get that connection through music. Valerie introduces us to Hebrew Nigunim (‘tunes’, ‘melodies’) as a form of spiritual connection and meditation, often with repetitive sounds (f.i. “ai-di-dai”) rather than lyrics. She also presents music with lyrics from the poet-rabbi Yehudah Halevy and rabbi Kook, and
invites us to sing together, even though the beautiful melodious, oriental tunes in combination with the Hebrew language are not so easy!

As prayers can be quite formal, music can help chaplains not only to nourish their soul and stay attuned with their own spirituality, but also to connect with patients in prayer.

Anne Vandenhoeck, moderator, points out that as outsiders we may have an idea of Judaism as a set of different ‘stable’ traditions, but anyway we have learned that also in Judaism there is a constant search of renewing spirituality. One of the participants remarks – and Valerie agrees – that the melodies that we heard, may have been composed recently and be fairly new, but that they are rooted in ancient traditions and therefore touch the heart of the human, in a way present in the heart of each of us.

After the coffee break, in conference room 1, Simon Harrison (president CHCC, UK), talks about “Broadening the Roots. A Key Feature of Nurturing Spirituality in Healthcare Chaplaincy”. Simon began in the Evangelist tradition but now cherishes Franciscan spirituality, and has done doctoral research in the concept of “unity”. It has made him very sensitive for language, and for the limitations of f.i. the concept of “spirituality”. He works in a very diverse chaplaincy team (Catholic, Humanist, Baptist, …).

Simon makes clear his perspective: “What’s best for the profession of chaplaincy to survive?”

“To a hammer everything looks like a nail”. With this saying Simon points out that an anthropological approach of spirituality (as a combination of belief and behaviour) is far too broad. Not everything is “spirituality”. In publications you find a whole range of different definitions of the term, despite the fact it cannot be defined. Yet, it is supposed to be applicable to anyone and to give a moral ground. Simon argues that chaplaincy meets a very broad set of needs and that effective chaplaincy teams need to acknowledge the diversity of patients and their needs (cultural / religious / individual / spiritual / pastoral) without calling every aspect of that “spiritual”. So, chaplaincy is more than spiritual care, it has many more dimensions. It cannot deliver “one size fits all”, generic provision.

Nurturing diversity is therefore essential. That means, f.i., feeding our cultural roots, celebrating our religious/belief identity, taking pastoral care of ourselves and each other, and continuing our spiritual journey. We need to feed the identity, individuality and authenticity of the chaplain as an individual within the team.

Carmen Schuhmann (University of Humanistic Studies, the Netherlands) is a former humanist chaplain in prison. She speaks about “Spirituality in Humanist Chaplaincy: Theoretical and Empirical Perspectives”.

Can there be a secular spirituality? “Yes”, is Carmen’s definite answer, and she illustrates it with pictures of a bird, the stars, art, that relate deeply with her very personal story and spirituality.

In the Netherlands, there is a long tradition of humanist practice (Jaap van Praag, founder of the Humanist League in 1946; chaplains since the 1950’s). For Carmen, the “spirit” of humanist spirituality is well expressed as “Not expecting anything, hoping for everything” and “Fully aware of the mysteriousness of life”.

She refers to the philosophers Charles Taylor and Iris Murdoch. For Taylor it is essential that people find orientation in life toward a morally good life, and this is where chaplaincy comes in. Healthcare chaplains meet with people in severely disorientating situations. In “God and Good”, 1970, Iris
Murdoch writes about the move from selfishness to unselfishness, about realism, and about transcendental visions of the good. In this sense, the chaplain can be an agent of hope.

Inspiration is said to be found in inspiring people, meditation on compassion and mindfulness, the good in people, nature.

Representing the Good in chaplaincy practice consists, among other things, of recognizing the mysteriousness of the client as Other (and of the “others” in their narratives!) and of addressing political questions concerning the Good.

It seems that disorientation in moral space is a condition of our time, and this is where chaplaincy enters.

Note that Carmen’s article, “Representing the Good: Pastoral Care in a Secular Age”, will appear in “Pastoral Psychology” in open access.