Describing effects of healthcare chaplaincy: a study in self-perception of chaplains’ contribution to spiritual care.

Nika Höfler, Matthias Mißfeldt, Friederike Rüter & Traugott Roser
Westfälische Wilhelms Universität, Münster, Germany

Background
How do healthcare chaplains working in German hospitals and nursing homes perceive and describe their contribution to a culture of spiritual care within (otherwise often secular) health care? While German language academic literature on health care chaplaincy has seen a rise in controversial debate on concept of spiritual care vs. traditional models of pastoral care, only few studies have been published based on empirical research. One subject often critically discussed is the understanding of (health-related) spirituality; chaplains’ own conception and practice of spirituality, however, has not been studied using empirical methods in the German-speaking area (to our knowledge) but there are several studies from the English language area (e.g. KENT CROSSLEY: Professional Satisfaktion Among U.S. Healthcare Chaplains, in: The Journal of Pastoral Care and Counseling, Vol. 56, No. 1/2002, p. 21-27 or GRACE W. YAN, JOAN BEDER ET AL., Professional Quality of Life and Associated Factors Among VHA Chaplains, in: Military Medicine, 178, 6:638, 2013, p. 638-645). While chaplains represent their churches’ (in most cases) faith tradition (teachings and rituals) within the hospital or nursing home, it is not known how they describe their personal and/or professional contribution and how their spirituality is informed or transformed by their professional experience. It should also be considered whether the care of the chaplains’ own spirituality has an impact on the effectiveness or their own assessment of its effectiveness, especially since the chaplains themselves describe their work. What is the relationship between effectiveness and self-efficacy? And what effects does this have on the welfare and mental health of the chaplain? (cf. CROSSLEY, Loc. cit.: In a study among 1099 chaplains were able to prove a correlation between work-related satisfaction and life-satisfaction.) It investigates the role of one’s own spirituality and how it can be nurtured. After all, especially in a more and more secularized world, the pastor becomes a representative of faith.

Goals
The project aims to collect and evaluate chaplains’ narratives describing effects of their work and presence from their personal experience. Starting with the chaplains’ perspective, we hope to find praxis-based categories to describe effectiveness of pastoral care. We want to find out how chaplains describe their own spirituality between professional role, personal experience, and challenges within
healthcare institutions. Analyzing self-described effects of chaplains’ contribution to healthcare settings and patient centered care, we hope to identify aspects of personal beliefs and practices of professionals in pastoral care: How does the clinical environment touch their own spirituality? Are existential situations of patients or staff, organizational aspects of healthcare factors in chaplains’ spiritual development? Such studies would be conceivable here, which have not yet been carried out in the German-speaking countries and especially for chaplaincy in hospitals. However, various interesting tendencies are visible, which can be further deepened by our empirical work: for instance, studies suggest that compassion satisfaction can have positive effects on the function and effectiveness of chaplaincy (for example, chaplains with a high compassion satisfaction tend to run less risk of showing such phenomena as compassion fatigue or burnout, cf. YAN, BEDER ET AL., loc. cit.). In turn, noticeable efficacy has an effect on the professional satisfaction. This could again be directly related to personal mental health and a spiritual dimension often associated with it. This is based on the assumption that the personal spirituality of the chaplain is bound to have an effect on that of the patient (e.g. with regard to the image of God). It would then also be necessary to examine the effect of effective or just (seemingly) ineffective pastoral care on the pastor himself as a person (and, if necessary, his spirituality) (cf. KELI RUGENSTEIN: Clergy Dissatisfaction. Denominational Hierarchy as a Silent Factor, in: The Journal of Pastoral Care and Counseling, Vol. 59, Nos. 1-2/2005, p. 79-86; CROSSLEY: loc. cit.). Finally, we hope to learn about the process and development of chaplains’ spirituality as part of spiritual care.

**Methods**

Based on the approach taken by the last conferences of ENHCC (Debrecen, Hungary 2016) and ERICH (Leuven, Belgium 2017), to conceptualize research in healthcare chaplaincy around the method of case studies, the project started in Dec 2017 with a call for case studies. Based on the research approach taken by Fitchett G., Nolan S. (ed.) Spiritual Care in Practice 2015, an expert discussion took place to generate an invitation for a call for papers: All healthcare chaplains within the area of both churches were invited via letter/email to write a case report on one experience that describes best their work and its effects, leaving it to the participants to focus on patient- and family-related pastoral care, pastoral care to members of other professions, to ethics consultations, institution etc. We expect between 20 to 40 case reports from each church, collecting 40 – 80 cases that will be analyzed along standards of qualitative research. Data collection is done at the University of Münster. An email-account has been created to collect case reports and prepare analysis. The cases will be anonymized for analysis, following ethics standards for research. Analysis will be done within a research group; methods and results will be discussed both within the research setting and among healthcare chaplains. While the research project will be done within the academic setting of the Department for Practical Theology at WWU Münster (Prof. Dr. Traugott Roser), as a doctoral study by Nika Höfler, the project is a rare cooperation of active health care chaplains and academic theology.

A joint project by the conventions of healthcare chaplains of the Protestant churches of Rhineland (Evangelische Kirche im Rheinland) and Westphalia (Evangelische Kirche von Westfalen) and the department for Practical Theology of the University of Münster (Westfälische Wilhelms Universität Münster), Germany.