

The Mennorode Statement of the 12th ENHCC Consultation 2012

1. Integral view

As chaplains, we understand the human person in a holistic and integral way. This means that four dimensions are essential in the human person: the physical, psychological, social and spiritual. In healthcare, the spiritual dimension is not always fully recognised, and even if recognised, it is not always put into practice. In a diverse society, it is a challenge to make the importance of the spiritual dimension understandable.

2. Inter-disciplinarity

All professionals have a shared responsibility in the care for the whole person. Therefore, collaboration is essential. In working together the different professional groups have a special responsibility. Chaplains are specialists in the care for the spiritual dimension. Chaplains should be aware of their own beliefs, tradition and the culture in which they live in order to respect and to understand the patient and the other caregivers.

3. Intra-disciplinarity

Chaplains should also work in an intra-disciplinary way within chaplaincy. This implies a clear identity of all chaplains, a lived relation with their Church, faith community or organisation and enough freedom to organise their work. It also implies a common identity of all chaplains as being responsible for the spiritual care of all in the healthcare community.

4. 'Multi-linguality'

Working in complex and continuously changing healthcare systems, chaplains, like all professionals, need professional training, including knowledge of and a critical attitude towards the system. Chaplains should be able to explain the specific nature of their work in a common language that is understandable for all people involved in the care system and in wider society. Chaplains should be 'multilingual'.

5. Integration

There is a full spectrum of involvement from complete isolation to total integration. Chaplaincy should be integrated in the healthcare system, but there is no golden rule for the degree of integration: this is dependent on the people involved and the context. In any case, there must be a guarantee of the particular confidentiality linked to chaplaincy.

6. Evaluation

Chaplains work as professionals in a professional context. Some aspects of spiritual care can be evaluated, therefore chaplaincy should develop its own standards of measurement based on validated methods.

7. Prophecy

Chaplaincy and the chaplains' prophetic task is to enable the healthcare system to be person-centred and to contribute to the ongoing development of the healthcare system and the Church or faith community.

8. Hope

In the awareness that human life is subject to many uncontrollable events, chaplains may give expression to incurable, irresolvable or tragic situations in life. They may help people to make a connection between their own life story and stories of sacredness or human wisdom in relation to meaning and hope.