The Impact of Religion on Health Practices

Linda I. Davis, PharmD, MA & Christopher Owens, PharmD
Health Disparities and Cultural Competence
Special Interest Group Webinar
March 20, 2013, 2pm EST
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Objectives

• To provide an introduction to world religions, their beliefs, demographics, and health practices relevant to pharmaceutical care

• To better understand the role of religion/spirituality in health care and the related responsibilities of healthcare practitioners in the delivery of patient care
Outline

• Introduction
  – Definitions
  – Background regarding religion and health
  – Religion and Spirituality in the U.S.

• Brief Overview of Selected World Religions
  – Demographics and Basic Faith Tenets
  – Health Practices

• Patient Spirituality Assessments
POLL Question #1

How important is spirituality in your own life?

A. Very important
B. Somewhat important
C. Neither important/nor unimportant
D. Somewhat unimportant
E. Not important at all
POLL Question #2

Patients’ spiritual beliefs should be assessed and considered as part of routine medical care.

A. Strongly agree
B. Somewhat agree
C. Neither agree nor disagree
D. Somewhat disagree
E. Strongly disagree
POLL Question #3

How often do you conduct a spiritual assessment of your patients during a medical consultation?

A. Always
B. Often
C. Sometimes
D. Rarely
E. Never
BACKGROUND
Definitions

• To discuss this topic effectively, health care professionals need a clear understanding of three terms:
  – Religion
  – Spirituality
  – Health

• Empirically-derived definitions of these terms appear in the literature
Religion & Spirituality

- **Religion** is an organized community of faith that has written doctrine and codes of regulatory behavior.
- **Spirituality** is concerned with personal belief and experience of a divine or a higher purpose; it is how individuals construct meaning and what they individually and communally experience, attend to, and honor as sacred in their lives.
- *For those socialized in a religious tradition, these two are often related.*

Tisdell, 2003, p. 29
Health

• The term “health” comes from the root term *hal*, which means “to be whole”
• The World Health Organization (WHO) describes health as “a state of complete physical, mental, and social wellbeing and not merely the absence of disease or infirmity” (1948)
• The term “quality of life” has been identified as a key component of overall health and wellness
  – In 1998, the WHO noted that quality of life must include attention to individual’s cultural context and value systems
Religion & Health

• Research on the relationship between religion and health dates back to at least 1872
  – Intercessory prayer and mortality
• Growing attention in the medical literature has been noted starting in the late 20th Century
• Prompted renewed debate on the appropriate role of religion and spirituality in the clinical setting
The Debate: Pros

• Advocates for a partnership between religion and health claim the following:
  – Citations from the literature in support of religiosity (regardless of specific faith) and reduced all-cause mortality, disability, cancer mortality, CV disease, medical service utilization
  – Religious activities often constitute a significant part of individual identity and influence coping mechanisms as well as inform decisions about medical treatments
The Debate: Cons

• Opponents of such a partnership claim the following:
  – The magnitude of benefit is weak in many of studies cited and they are methodologically flawed
  – Ethical concerns should prevent health care professionals from integrating spirituality and clinical practice
    • To avoid paternalism, healthcare practitioners should not impose morality, adhere to a materialistic or purely scientific view of the body and health
  – Supporting patients’ religious beliefs may actually do harm by inadvertently encouraging a belief that illness is due to moral shortcomings
Value of Addressing Patient Spirituality

• Regardless of purported health benefit (or harm), religion/spirituality may be a dynamic in the patient’s understanding of illness
• Religious convictions may affect health care decision making
• Spirituality may be a patient need and be important in coping with illness
  – Survey data indicate that up to 77% of patients desire that their spiritual needs be addressed by clinicians
• Spirituality may be a part of overall “quality of life” and as such should be addressed by an ethical and conscientious practitioner
RELIGION IN
THE UNITED STATES
Religion & Public Life

- A survey by the Pew Forum conducted in 2007 detailed the religious affiliation of the American public
  - Interviews with more than 35,000 Americans over the age of 18
- Reported that religious affiliation in the U.S. is both “very diverse and extremely fluid”
Pew Survey Key Findings

• Nearly 85% of the U.S. population identifies some religious/spiritual affiliation
  – Most report a Christian faith (78.4%)

• Approximately 28% of respondents have left the faith in which they were raised for another faith or to none at all
  – The number of people who say they are unaffiliated with any particular faith (16%) is more than double the number who say they were not affiliated with any particular religion as children

• Men are more likely than women to claim no religious affiliation (20% vs. 13%)

• About 37% of married couples consist of spouses with different religions
Major Religions in the U.S.

- Christian: 78.4%
- Unaffiliated: 16.1%
- Hindu: 0.4%
- Muslim: 0.6%
- Buddhist: 0.7%
- Jewish: 1.7%
- Other: 1.2%
- Refused: 0.2%

Pew Survey 2007
Christianity in the U.S.

Non-Christian, 21.6
Protestant, 51.3
Catholic, 23.9
Mormon, 1.7
Jehovah's Witness, 0.7
Orthodox, 0.6
Other, 0.3

Pew Survey 2007
Topography of Faith in the U.S.

- Interactive map from USA Today based on Pew Survey findings located at:
AN APPROACH FOR CLINICIANS
General Comments

• Religious traditions have a long history and may be difficult to understand from the perspective of “an outsider”
  – It is unrealistic to assume that clinicians will have a complete understanding of the variety of religious traditions of their patients

• It is difficult to predict how any one patient or family member may understand and live that religion
  – Different adherents to the same faith may approach certain decisions differently

• Many texts and resources exist, such as:
General Comments

• Separating religious tradition from cultural identity and practices can be difficult
• While typical clothing or grooming might be helpful in identifying a member of a particular religious faith; not always the case
• The **best way** to become acquainted with a faith is to have conversations and interactions with practicing members
• Our approach in this presentation will be to summarize key points of selected faiths, highlighting the aspects that play the greatest role in healthcare
  – Beliefs and practices related to birth, death, and diet
Religions to be discussed

- Buddhism
- Sikhism
- Hinduism
- Islam
- Judaism
- Roman Catholicism
- Protestantism

- Recent Religious Movements in America:
  - Christian Scientists
  - Jehovah’s Witnesses
  - Latter-Day Saints
  - Seventh-Day Adventists
POLL Question #4

Members of which religious group may decline blood transfusions, even in life-threatening situations?

A. Hindu
B. Muslim
C. Catholic
D. Jehovah’s Witness
E. Mormon
POLL Question #5

Which religious faith holds that death has occurred only when cardiac function has ceased?

A. Orthodox Judaism  
B. Catholicism  
C. Islam  
D. Buddhist  
E. Sikhism
Buddhism

• One of the four largest religions in the world
• Found primarily in Southeast Asia
  – Different countries may have different cultural practices blended with beliefs
• Many Westerners are adopting Buddhist practices
Buddhism: History & Beliefs

• More a spiritual practice than a set of doctrines
  – Four Noble Truths
  – Eightfold Path
• Believe that life is full of suffering, ultimately unsatisfying and temporary
• Peace and meaning in life is found through following the Eightfold Path, escaping the cycle of reincarnation and attaining *Nirvana*
• **Quality** of life is more important that quantity
Buddhism: Health Beliefs & Practices

- Some believe that a spiritually focused person will not become sick
  - May believe that cures can be obtained by thinking correctly or using herbs

- Birth is considered a special time when consciousness enters the womb to be reborn
  - Conception is considered the beginning of life
  - Birth control that prevents conception is acceptable

- Death is considered a transition point to the next life
  - Dead bodies may be kept in the home for 3 days, and not touched; in the hospital, family may request that the body not be disturbed for as long as possible
Buddhism: Health Practices

• End-of-life decisions often guided by two important goals: having an alert mind and not being in excessive pain
  – Pain medication is acceptable if it does not dull consciousness
• Dietary practices include eating moderately, abstaining from alcohol and drugs that impair mental clarity
  – Often are vegetarians
  – Sanctity of life is highly valued; some groups may never intentionally kill any living thing
• Western medicine is often avoided, even some Eastern medical practices are shunned because they use animal products
• Organ donation is acceptable; blood donation is considered honorable
• Because of the emphasis on peace and quiet, modern ICUs may be particularly ill-suited for Buddhist patients
Sikhism

• The 5\textsuperscript{th} largest religion in the world
  – 22 million adherents
• Most reside in India in the Punjab region
  – Traditional homeland of the religion
• About 500,000 live in the United States
  – Approximately 100,000 in California
  – Yuba City, CA has the largest Sikh population in the country
Sikhism: History & Beliefs

• Faith was founded in the 1400’s
  – Sacred scripture: Guru Granth Sahib
• Sikh means one who learns, or a disciple
  – Most important goal is to seek truth
• Key beliefs include: meditation, earning one’s living in an honest and honorable way, sharing with those in need, and serving others.
• The human soul is believed to be inherently good, although it is marred by mistakes and faults
  – Persons can become closer to truth and God through reincarnation
Sikhism: Health Beliefs & Practices

- Many Sikhs will combine Western medical therapies with herbs and other alternative therapies (such as Ayurveda).
- Life is considered sacred from the moment of conception to death.
  - Birth control is acceptable, but some may choose not to use it as it may be viewed as disrupting the natural cycle of life.
  - Abortion is not allowed except in cases of medical necessity.
- End-of-life practices and beliefs:
  - Prolonging life in a vegetative state is discouraged.
  - Assisted suicide or euthanasia discouraged.
  - Following death, it is important that the five articles of faith remain respected (the 5 Ks).
  - Autopsies are allowable; cremation is done as soon after death as possible.
Sikhism: Health Practices

• Dietary practices include avoiding meats when the method of killing is believed to be cruel
  – Avoid cigarettes, alcohol, and illicit drugs
  – Do not practice fasting or have other dietary restrictions
• Treatments that involve hair removal may be refused
• Sexual topics are considered extremely private and patients may not be willing to discuss them with healthcare providers
• Treatment by a provider of the same sex is preferred
Hinduism

• The 3rd largest religion in the world
  – 850 million adherents
  – 13% of the world’s population

• Most reside in India, where they make up 80.5% of the country’s population
  – Other countries include Nepal, Bangladesh, Pakistan and Thailand

• About 766,000 live in the United States
Hinduism: History & Beliefs

- One of the world’s oldest faiths
  - Sacred scripture: the Vedas and Bhagavad Gita
- Hinduism is a polytheistic religion
  - The Supreme God is called Brahman
- The ultimate goal for a Hindu is to become one with the Absolute Truth, Infinite Bliss, or Brahman; this leads to a state and peace and serenity
  - There are many approaches to finding God, including yoga, meditation, and devotion
Hinduism: Health Beliefs & Practices

- Sickness and injury are ascribed to *karma*
- Many Hindus will combine Western medical therapies with herbs and other alternative therapies (especially Ayurveda)
- Life is considered sacred and each person has a need to fulfill his or her destiny
  - Birth control is acceptable and the *Vedas* do not forbid it
  - Abortion is not allowed except when the mother’s life is in danger
  - The preference for a son may place pressure on a woman to continue having children until she has one
- **End-of-life practices and beliefs:**
  - Prefer to die at home
  - Cremation is preferred to embalming; organ removal is discouraged
  - Suicide, assisted suicide, and euthanasia are discouraged
  - Artificial life support is discouraged as it interferes with karma and the cycle of reincarnation
Hinduism: Health Practices

• Dietary practices:
  – Vegetarianism is common
  – Even if animal products are consumed, most will still avoid beef and pork
  – Fasting may be practiced and is considered purifying

• The right hand should be used when performing tasks on patients whenever possible (cultural understanding of cleanliness)

• Treatment by a provider of the same sex is preferred

• Women often look to their husbands for advice on medical issues
Religions

- Islam
- Judaism
- Roman Catholicism
- Protestantism
- Recent Religious Movements
Islam

- Over 1 billion people in the world are Muslim
  - Of this, only 10% are of Middle Eastern heritage
- Reside in Asia, Africa, and Arab countries
- Estimated population in the U.S. is about 2.3 million
  - Approximately 65% are immigrants
Islam: History & Beliefs

- From the root word meaning “peace” or “submission”
- Founded by the Prophet Muhammad in 610 AD
  - Sacred scripture: the Qur’an
- Five Pillars of Islam:
  1. Belief in one God, Allah, and Muhammad as His messenger
  2. Prayer must be done 5 times daily facing Mecca
  3. Daytime fasting observed during the month of Ramadan to develop self-control, devotion to God, and care for the poor
  4. Annually give 2.5% of one’s capital for the needy
  5. Must perform a pilgrimage to Mecca at least once during one’s lifetime
Islam: Health Beliefs & Practices

• Bodies are given as a trust from God
• Believe that for every illness there is a cure; but not for aging or death
• Traditional medicines and practices are often used
• Life is considered sacred
  – Birth control is acceptable
  – Abortion is not allowed except when the mother’s life is in danger
• End-of-life practices and beliefs:
  – Suicide, assisted suicide, and euthanasia are forbidden
  – Withdrawal of life support often requires a meeting of the entire family
Islam: Health Practices

• Circumcision is expected
• Blood transfusions are acceptable
• Organ donation is acceptable
• Smoking and alcohol consumption is forbidden
• Dietary practices:
  – Consumption of pork is forbidden
  – Fasting may be practiced during Ramadan
• Treatment by a provider of the same sex is preferred
• Psychiatric diagnoses are often not accepted by the family
Judaism

- The worldwide Jewish population numbers approximately 14 million
  - About 40% of these reside in Israel
- Estimated population in the United States is about 6 million
- Other major countries that are home to Jewish populations
  - Russia, France, Canada, and the United Kingdom
Judaism: History & Beliefs

• The oldest monotheistic religious system
  – Dates back Abraham in 1750 BCE
    • other key figures include Isaac, Jacob, Moses, and David
  – Sacred scriptures: the Torah and the Talmud
  – Teaches that God created the universe and designed it to have meaning and purpose
  – God desires to enter into relationships with people (covenants)
  – Other principles include a belief in the Messiah and the resurrection of the dead
  – An important commandment is to attend to the sick
  – For the orthodox, many laws guide daily life
Judaism: Health Beliefs & Practices

• Profess value for the sanctity of life and respect for the body
• Life is considered sacred
  – Birth control is acceptable (condoms are discouraged)
  – Abortion is not allowed except when the mother’s life is in danger
• End-of-life practices and beliefs:
  – Suicide, assisted suicide, and euthanasia are forbidden
  – Belief that no one should die alone (families will often be present and spend large amounts of time)
  – Cremation is discouraged, but allowed
  – They utilize cardiac-oriented definition of death (cessation of the heart beat)
Judaism: Health Practices

- Circumcision is expected at 8 days of age
- Blood transfusions and organ donation are acceptable
- Dietary practices:
  - Observance of Kashrut (keeping kosher) varies among individuals, but ought to be considered
  - Consumption of pork and shellfish may be avoided in addition to other Leviticus guidance
- Treatment by a provider of the same sex is preferred
- Sabbath, a holy day, is observed from sundown on Friday to sundown on Saturday
  - Some patients may refuse treatment on the Sabbath
Christianity

- Roman Catholic
- Protestant
- Christian Scientist
- Jehovah’s Witness
- Latter-day Saint
- Seventh Day Adventist
Roman Catholics

- Demographics
  - World’s largest Christian church with over 1.2 billion members

- History and Beliefs
  - Maintains the basic Christian tenants of faith
  - Believes it has the authority and responsibility to be a conduit for God’s grace of salvation, healing, and prayer through the seven Sacraments, including baptism, confirmation, and anointing of the sick
  - Traces its authority back to St. Peter, an original apostle of Jesus
  - Led by the Bishop of Rome, also known as the Pope
  - Believe in the intercession of saints
Catholic Health Beliefs

• Medication and biomedical treatments are ways of cooperating with God’s grace for relief and healing
• Most patients and families will want a priest to visit, pray, anoint, and give Holy Communion
• Dietary practices:
  – No dietary restrictions
  – Abstaining from meat on Fridays is encouraged, but only required during Lent
  – Fasting is expected on Ash Wednesday and Good Friday
Catholic Health Beliefs

• Natural Law is a key tenet of Catholic faith as it regards life and death
  – Birth
    • Sexual activity is approved by God within marriage for the purpose of procreation; life begins at conception
    • Infertility treatments that rely on technology and/or do not involve the conjugal act are not acceptable
    • Contraception is forbidden
    • Abortion is considered murder, only acceptable in cases when the life of the mother is in grave danger
  – Death
    • Euthanasia and assisted suicide are forbidden
    • Baptism is important for a baby with a poor prognosis
    • Administering the last rites (3 of the Sacraments) prior to death is very important
Protestants

• Demographics
  – More than ½ the population in the United States

• History and Beliefs
  – Diverse group of Christian churches that split from the Catholic Church beginning at the “Reformation”
    • Anglican, Baptist, Lutheran, Methodist, Presbyterian
  – Most accept many of the basic Christian tenets of Catholicism (incarnation of God, Trinity, literal resurrection)
  – Fervent belief in prayer, the authority of the scriptures, and belief in an afterlife
Protestant Health Beliefs

• Medication and biomedical treatments may be used, according to most denominations
• Some denominations have practices relating to anointing with oil or other such rituals; many will appreciate the reading of scriptures or prayer
• Dietary practices:
  – The issue of diet is a personal one
  – Rules will vary with the denomination; some are vegetarian
  – Some have days of fasting for religious observance
  – Consumption of alcohol in moderation is acceptable for most protestant faiths
Protestant Health Beliefs

• Most have strong views on sexuality and end-of-life practices; believing that such matters are best left up to God
  – Birth
    • Sexual activity is approved by God within marriage for unitive as well as procreative purposes
    • Infertility treatments are generally acceptable
    • Abortion is generally considered murder, however many find exceptions in cases of rape, incest, or if the life of the mother is in danger
  – Death
    • Belief death has occurred with cessation of “whole brain” function
    • Euthanasia and assisted suicide are forbidden
    • Palliative care to ease suffering at the end of life is encouraged
RECENT RELIGIOUS MOVEMENTS IN AMERICA

Christian Scientists
Jehovah’s Witnesses
Latter-Day Saints
Seventh-Day Adventists
Christian Scientists

• Demographics
  – Do not publish membership figures
  – A worldwide directory is available at www.churchofchristscientist.org/worldwidedirectory
  – Daily newspaper is the Christian Science Monitor

• History and Beliefs
  – Based on the teachings of Jesus
  – Complete explanation of the faith may be found in Science and Health with Key to the Scriptures by Mary Baker Eddy
  – Founded in 1866 as the Church of Christ, Scientist
  – Prayer is considered a method or “science” through which one may be connected with true reality and the healing power that is available from God
Christian Science Health Beliefs

• Major belief is that healing does not come from a person’s body or mind, but from God’s Mind through prayer

• The individual’s prerogative to make their own health decisions is supreme and is unimpeded by any Christian Science teaching
  – There is no ordained clergy

• Many do not believe in any medical intervention and usually only go to a hospital or clinic for births or injuries
  – Some are opposed to ANY medications or treatments;
  – Some parents believe they have the right to refuse medical treatments on behalf of their children

• Dietary practices:
  – The issue of diet, as with other health-related practices is a personal one
  – Tend to abstain from alcohol, tobacco, and other substances
Christian Science Health Beliefs

- Tend to be conservative on most bioethical decisions, though many decisions are ultimately left up to the individual
- They do not have an official position on:
  - Abortion
  - Birth control
  - Assisted reproduction
  - Euthanasia or assisted suicide
- Memorial services are typically held in the home; end-of-life decisions left up to the individual or family
Jehovah’s Witnesses

• Demographics
  – World-wide membership listed as over 7 million
  – In the U.S., higher concentrations in the southern and western states

• History and Beliefs
  – Presbyterian-turned-Congregationalist Charles Taze Russell formed the movement in 1879
  – Believe that Christ has already returned spiritually and that we live in the last days
Jehovah’s Witness Health Beliefs

- Disease and illness are inherited from the Fall of Adam; because of it, he could not pass on life free from sickness to his offspring
- View the body as a temple and value healthy living
- Seek healthcare when ill or injured and will use many forms of biomedical treatment
- Many Witnesses work in healthcare
- Dietary practices:
  - Will not consume blood or the meat of animals from which blood has not been properly drained
    - This extends to blood transfusions, which they may refuse
    - Blood fractions are permissible
  - Abstain from tobacco and narcotics
  - Consumption of alcohol in moderation is acceptable
Jehovah’s Witness Health Beliefs

• Conservative views on sexuality and end-of-life practices
  – Birth
    • Sexual activity is approved by God within marriage
    • Family planning methods are left up to the couple
    • Infertility treatments the utilize semen or eggs from individuals other than the couple involved are not acceptable
    • Abortion is condemned
  – Death
    • Believe that the soul ceases to exist when dead, but there is hope for a resurrection
    • Euthanasia and assisted suicide are forbidden
Latter-Day Saints

• Demographics
  – World-wide membership listed as over 14 million
  – Most are in the U.S. and South America
  – In the U.S., highest concentration is in Utah/Idaho

• History and Beliefs
  – Founded by Joseph Smith, Jr. in 1830
  – Official name is The Church of Jesus Christ of Latter-Day Saints, also referred to as Mormons
    • Considers itself Christian, but neither Catholic nor Protestant
  – Follow the teachings of the Bible and the Book of Mormon, as well as other scriptures and believe in a living prophet and continuing revelation from God
Latter-Day Saint Health Beliefs

• View the body as a temple and value healthy living
• Seek healthcare when ill or injured and will use many forms of biomedical treatment as well as alternative therapies
• Will often call upon a lay clergy of Elders of the Church to provide anointing with consecrated oil and pronounce blessings of healing or comfort to the sick or injured
• Dietary practices:
  – Follow a health code called “the Word of Wisdom”
  – Abstain from alcohol, tobacco, tea, coffee, and illicit drugs (caffeine is not forbidden)
  – Meat is to be eaten sparingly; healthy diet emphasized
Latter-Day Saint Health Beliefs

- Conservative views on sexuality and end-of-life practices; most health practices left up to individuals and families to decide under inspiration from God
  - Birth
    - Sexual activity is approved by God within marriage
    - Family is emphasized and planning methods are left up to the couple
    - Infertility treatments are left up to the couple; use of sperm or eggs from individuals other than the couple is discouraged
    - Abortion is forbidden except in cases of rape, incest, or if the life of the mother is in danger
  - Death
    - Believe in an afterlife of the spirit and in a resurrection of the body
    - Oppose euthanasia and assisted suicide; palliative care preferred
    - Cremation is acceptable if required by local law
Seventh-Day Adventists

• Demographics
  – World-wide membership listed as over 16 million
  – India, Brazil, and the U.S. each have over 1 million members
    • Within the U.S., most members are in California, Florida, Oregon, Texas, and Washington

• History and Beliefs
  – Organized in 1844 by James and Ellen White
  – Observe the seventh day (Saturday) as the Sabbath and believe in the second coming of Christ (the Advent)
  – The Bible is the source of their beliefs; view themselves as belonging to Protestantism
Seventh-Day Adventists Health Beliefs

• View the body as God’s temple and healthy living is highly valued
• Seek healthcare when ill or injured and will use many forms of biomedical treatment as well as herbal therapies
  – May request prayer and anointing from a pastor or Elder of the Church
• Many Adventists work in healthcare and many churches offer seminars and classes on healthful living
• Dietary practices:
  – Many adhere to a vegetarian diet
    • Those that are not vegetarian still refrain from pork, shellfish, and other unclean meats, according to the guidance in Leviticus
  – Abstain from alcohol, tobacco, and caffeinated beverages
Seventh-Day Adventists Health Beliefs

• Conservative views on sexuality and end-of-life practices
  – Birth
    • Sexual activity is approved by God within marriage
    • Family planning methods are left up to the couple
    • Abortion is unacceptable, but may be permitted in cases of rape, incest, or if the mother’s life is in danger
  – Death
    • Believe that the soul ceases to exist when dead, but there is hope for a resurrection
    • Oppose euthanasia, suicide, and assisted suicide
Recommendations for Healthcare Practitioners: Putting it all together
**General Suggestions: Practitioner to Patient**

- Practice “compassionate presence” with every patient
  - Listen and support, do not guide or lead
- Be attentive to patients’ and family beliefs
  - Obtain a “Spiritual History”
  - Abide by patients’ requests to decline some aspects of medical care (medications, blood transfusions)
  - Be aware vegetarians will abstain from any animal based medications including certain insulin products and gelatin capsules
  - Encourage communication regarding medication scheduling changes during times of fasting
General Suggestions: Practitioner to Patient

– When providing counseling on medication, offer a complete explanation of a medication’s mechanism and allow the patient to make their own decision
– Offer patients time and privacy to pray if desired
– Incorporate spiritual practices as appropriate

• Involve chaplains as members of an interdisciplinary health care team
  – Members of certain faiths will wish for a priest, pastor, or church elders to minister to them
Spirituality Assessments

• Part of taking a patient’s social history may appropriately include spiritual aspects
  – Helps clinicians to recognize needs and desires and may prompt referrals for chaplain services
  – Most importantly, it opens the door to conversations about values and beliefs, availability of support networks, and coping skills

• Examples:
  – HOPE Assessment
  – FICA method of spiritual history taking
FICA Method

• Series of questions to help guide healthcare provider-patient conversations related to spirituality

• F: Faith and Belief
  • Beliefs that help you cope? Give meaning?

• I: Importance and Influence
  • How important is spirituality to you in general? Is it important enough to affect some health decisions?

• C: Community
  • Are you part of a spiritual community?

• A: Address and Action
  • Take the answers from FIC and determine a course of action to address each one? Is a chaplain needed?

Puchalski, 2001
HOPE Assessment

- Developed at Department of Family Medicine at Brown University
  - Designed to allow healthcare providers to gather information in a non-threatening manner, is brief, and covers critical areas
  - Allows the patient to tell his/her own story
- Series of questions that guide the conversation

Anandarajah, 2001
HOPE Tool

• H: Sources of hope, meaning, comfort, strength, peace, love, and connection
  • “How are you holding up?”
  • “What resources do you draw on?”

• O: Organized religion
  • “Do you consider yourself religious?”
  • “Are you part of a congregation or community?”

• P: Personal spirituality and practices
  • “Do you have specific religious practices you would like to engage in at this time?”

• E: Effects that the above may have on medical care and end-of-life decisions
  • “Are there specific beliefs that we should be aware of?”
  • “Do you wish to speak with a chaplain?”
One Final Note: Practitioner Exercise of Beliefs

- Patients are not the only ones with religious beliefs and spiritual needs
  - Healthcare providers may likewise be members of religious communities
- Some aspects of patient care may be unacceptable to practitioners
  - Participation in treatments that hasten death, result in abortion, contraception, emergency contraception, or fertility treatments
- It is important that such beliefs are disclosed to one’s employer so that appropriate arrangements can be made to ensure patient care for legally permitted and expected services
- Conscientious refusal to participate in some practices or dispense certain medications is defensible morally and by law (“Conscience Clauses”)

Baergen & Owens, 2006
Summary

• Spirituality is an important component of many of our patients’ lives (as well as our own as practitioners).
• Evidence suggests the value of addressing this aspect as part of overall patient care.
• According to some surveys, nearly 80% of patients desire spirituality to be addressed as part of their medical care.
• The U.S. is religiously diverse and constantly changing.
• Health care practitioners need to be aware of basic beliefs and practices they may need to address as part of delivering holistic patient care.
• Assessment tools such as FICA and HOPE exist to help clinicians obtain spiritual histories and document beliefs related to healthcare desires.
• Conscientious refusals to participate or dispense medications are ethically justified, if handled appropriately.
References

• Puchalski CM. The role of spirituality in health care. BUMC Proceedings 2001;14:352-357.
QUESTIONS?