

# Faith in Older People

**NEWSLETTER - Issue Summer 2011** 

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## Mission Statement Faith in Older

**People** aims to celebrate the lives of older people and to support the spiritual care of older people and their families

# Faith in Older People

Registered Company SC322915 Registered Charity SC038225

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# WHY SPIRITUAL CARE SHOULD MATTER IN THE NHS

BY Geoff Lachlan

If, as Teilhard de Chardin has said,

"We are all spiritual beings trying to express
our humanity," then the holistic definition of
health as "a complete sense of physical,
mental, social, and spiritual wellbeing" is



Geoff Lachlan

crucial. For spirituality involves finding meaning, purpose, and hope in life. Whilst belief in organised religion may have declined, belief in a non-material part of life is still prevalent.

Recent developments in quantum physics tend to support the importance of non-material factors in our lives. Through the "interconnectivity of all matter" actions can have an effect at a distance (the "non-local effect"). It has been observed that electrical conductivity in the DNA of isolated human cells can be affected at a distance of 350 miles by the triggering of different emotions in their original donors.

Also, studies show human cells grow more quickly in a culture dish when "touched" by positive and empathetic thoughts regularly, even though the cells are not derived from the person "touching." Thus empathy can influence human DNA.

(for further references see our website – <a href="www.faithinolderpeople.org.uk/">www.faithinolderpeople.org.uk/</a>/ Resources/papers/Why Spirituality Matters in the NHS today)

More significantly the empathetic intentions of spiritual healers have been shown to have a detectable effect on the MRI scans of the brains of recipients at a distance – another "non-local effect." The part of the brain affected is also associated with the *placebo response*, which is now known to be our powerful inner healing drive and not just a positive psychological response towards the doctor's treatment. So whilst we do not yet have <u>hard</u> scientific evidence that prayer does work for physical and mental healing, the recent study above of healers sending prayers for healing to recipients demonstrates a clear pathway for a healing effect to happen.

Psycho-neuro-immunology is the science of understanding how psycho-social factors in our lives (are we loved? do we suffer discrimination? does our life have meaning, purpose, and hope, etc.) affect the functioning of our immune system through connections with the brain. So factors that affect our spirituality/spiritual wellbeing can influence our immune systems. In this way mind (and all its internal and external influences) and body are not separated, and we should speak of the mindbody.

Continued / p2.....

website: faithinolderpeople.org.uk

# WHY SPIRITUAL CARE SHOULD MATTER IN THE NHS (continued)

The evidence base for supporting the positive link between spirituality and health is mushrooming and no longer confined to the palliative care situation with the terminally ill. HIV/Aids patients with positive spiritual wellbeing have been shown to have maintained better functioning immune systems than those without.

If patients are struggling spiritually, with life having lost meaning and hope prior to significant cardiac surgery, they will not experience such a good surgical recovery and outcome. Coronary artery stenting (keyhole opening up of blocked/narrowed arteries) does not work so well in patients suffering from a sense of hopelessness.

Even today most disease cannot be cured, so "Health-Related Quality of Life" (HR-QoL) is becoming an important measure of the effectiveness of treatment. Spiritual wellbeing has now been shown to be strongly positively associated with HR-QoL, particularly with chronic long-term conditions such as arthritis, and most cancers.

The Scottish Government has stated that "...spiritual care is integral to the holistic care it provides." With 60% of patients who use the NHS being over the age of 60 years Faith in Older People has an important role to play in influencing the NHS to care for their spiritual needs. As the current financial restrictions impact on the NHS it is imperative that we strive for spiritual care not to be neglected.

Geoff Lachlan OBE MBChB, FRCSEd, MA (Study of Religions)

Geoff was recently appointed as a **FiOP trustee** and has worked as a general surgeon in the NHS for 30 years, before resigning his post in Fort William and joining the Scottish Inter Faith Council as Health Development Officer. This new work involved collaborating with NHS Education on several Spiritual Care projects from an inclusive inter faith and belief perspective. He has a particular interest in promoting the evidence base for the positive link between spirituality and health.

### **EDUCATING** and informing...

#### The Malcolm Goldsmith Annual Lecture

Faith in Older People (FiOP) was delighted by the level of enthusiasm and interest which greeted this inaugural lecture held in New College on 17<sup>th</sup> May 2011.



Our Chairman, Christopher Davies, highlighted the work of FiOP and the reasons for establishing the Malcolm Goldsmith Annual Lecture in honour of our founder.

".....Malcolm Goldsmith has researched,

lectured and published extensively on spirituality and dementia and brings a warmth and enthusiasm to all that he does.

"When he retired from the Board a few months ago, the Trustees expressed the wish to show our indebtedness

and to honour his achievement by holding an annual lecture in his name".

It was especially pleasing that the event



was held in collaboration with the Centre for Theology and Public Affairs (CTPI) and Dr Jolyon Mitchell from the Centre welcomed the participants to the College.

Our inaugural lecturer was The Rev. Professor John Swinton, Professor in

Practical Theology and Pastoral Care in the School of Divinity at the University of Aberdeen and Theological Advisor to Faith in Older People



The event provoked very positive feedback

......this was a memorable event. The whole evening went so well, and with an amazing cross-section of attendees from across Edinburgh and beyond. I was seated next to someone who enthused greatly over John's sensitive and profound lecture.

Thanks for organising such a superb lecture – I am really delighted that FiOP exists ...the work is so important – it is good for us to hear about it and be challenged by it.

Page 2 Website: www.faithinolderpeople.org.uk

# The Malcolm Goldsmith Annual Lecture....continued

People may wonder what relevance theology and philosophy have any more, are they really any use to us in this modern world of computers, celebrity and all the trappings of modern media?

What use could ideas be to people who work in care homes or to those who worry about their neighbour who has developed dementia? Yet these ways of looking at the world really do help when you start to try and think about "What is a person?"

Professor John Swinton's lecture 'Who will hold my soul? Dementia, friendship and the spirituality of caring communities' was a really good example of how theology, philosophy, psychology and medicine are all needed to help us understand what it means to be a person and how maintaining that "personhood" in turn depends on those around us if we develop dementia.

It was witty, engaging, wide-ranging and very accessible (and so was the audience!)

The Lecture Hall was "stowed out" and several people who wanted to come had to be advised "it's full!" in the days before, so luckily we had it filmed.



How we as carers, visitors, professionals or family members understand "personhood" strongly affects how we behave around people with dementia, do we really see them as people to whom all normal dignity should be accorded, or do we think "they've already gone, there is no one really in there anymore". The tendency to look at people differently when they have a diagnosis of dementia compounds the feelings of loneliness and isolation that they already experience.

John explored recent work about the effects on the brain of loneliness which shows that loneliness doesn't just have an emotional impact but a physical impact too.

This sense of exclusion is dramatically illustrated by the verse in Psalm 88 "...You have driven my friends away by making me repulsive to them. I am in a trap with no way of escaping."

John wove his lecture around key elements from Malcolm's work over the years on spirituality and dementia using the quote

"We are remembered by God long before and long after we make any recognisable response to God. We are unconditionally accepted by God and we are unconditionally acceptable to God"

John emphasised how important it is to reassure people that they are not forgotten by God. The problem for many people with dementia it is not that they have forgotten things but that *they have been forgotten*.

Another theme was how important it is to 'befriend time' rather than to see it as a constraint. We need to allow ourselves to be 'in the moment', particularly with people who have dementia. It is alright to be still, not to talk but to find ourselves in quiet companionship. In care homes where the staff have so many tasks to undertake finding these quiet moments with an older person is so important and the act of 'being present' is so precious.

Maureen O'Neill, Director Faith in Older People

A DVD of this event will be available shortly. Please contact Faith in Older People, email info@fiop.org.uk or tel 0131 346 7981



other feedback

...Thank you for organising the wonderful Malcolm Goldsmith Inaugural Lecture. I found it to be really inspiring, stimulating and informative. I was so glad I was able to attend. You must all feel really satisfied with the success of the evening?.

Page 3 Website: www.faithinolderpeople.org.uk

# NHS SPIRITUAL CARE IN THE COMMUNITY!

On 30<sup>th</sup> March, Maureen O'Neill and I joined 113 other delegates from the NHS and Voluntary sectors at a stimulating conference in Perth entitled *Building Resilience*, *Enhancing Community Wellbeing*.

Five pilot sites throughout Scotland placed either a Chaplain or a chaplain-trained volunteer in a GP surgery to provide a simple, reflective listening service to patients who might otherwise inappropriately be labelled "depressive", and would leave the surgery with a prescription for antidepressants.

Another project in Dundee involved the concept "Social Prescribing" whereby similar patients were assessed for referral to various selfhelp groups, including the prescription of exercise through walking or a local health and fitness club.

We learnt that resilient communities ".....demonstrate love, peace, kindness, joy and goodness, accepting that people do suffer, are able to remain hopeful in adversity, and yet are able to recover meaning in their lives". These are spiritual concepts which NHS Healthcare Chaplains are now interested in supporting within the community. Evidence suggests such communities stay healthier, and make better recoveries from ill health.

How exciting that the NHS is now recognising the value of enhancing community wellbeing by supporting spiritual need. Could this be an opportunity for Faith groups, who are part of the community already, to work alongside the NHS professionals?

Geoff Lachlan

#### COMMUNITY CHAPLAINCY LISTENING

In the past financial year, the Scottish Government and NES have funded the development of pilot Community Chaplaincy Listening (CCL) Services within GP surgeries in several health boards across Scotland as part of a single action research project. CCL is part of a shift towards developing spiritual care services in community settings in line with Scottish Government spiritual care guidelines, the person-centred agenda of the Quality Strategy and Shifting the Balance of Care.

In most health boards chaplains have been providing CCL services although a few specially recruited, trained and supervised volunteers have also been involved. CCL tries to enable patients to explore existential questions and (re)discover their inner resources to help deal with times of adjustment and loss in their lives.

The research aims to:

- assess patient wellbeing following involvement with the service
- perform a cost benefit analysis in relation to savings which the services may make in relation to prescribing, GP time and hospitalisation.

In the coming year a continuation of CCL activity will enable pilot projects to be embedded further and will enable more GP surgeries to be involved in a wider range of health boards to provide this service.

A DVD is available from NES which includes feedback from the stakeholders involved in the initial pilots - service users, GPs, a health board medical director and chaplains.

This received very positive feedback when showcased at a national conference held recently in Perth Concert Hall

Further information from: Ewan Kelly, Programme Director for Healthcare Chaplaincy and Spiritual Care email: ewan.kelly@nes.scot.nhs.uk

#### **NEW TRUSTEES**

Our organisation has recently appointed new trustees Geoff Lachlan (see left column and page 2) and

#### Mrs Helen Thomson BSc, RGN, SCM

Helen worked in the NHS for 27years in varying Nursing and Midwifery roles, making the leap of faith to Social Care 12 years ago. Helen specialises in dementia related issues; currently holding the post of Regional Care manager with Bield Care; supporting and developing services in Fife and the Borders.

Page 4 Website: www.faithinolderpeople.org.uk

## TRAINING ...

#### **FIOP Mentoring Programme**

# "Spiritual care underpins all holistic care"

Remark made by one of the participants in the mentoring programme.

This programme was devised as a consequence of growing literature that shows that attending to the spiritual needs of older people in residential care enhances quality of life, confers dignity on both resident and carer and generally encourages good care and a sense of well being within the home community. Research carried out by Harriet Mowat on behalf of FIOP (Faith in Older People) focused on the importance of working with staff and acknowledging staff spiritual needs for this difficult work of old age care.

The spiritual life and therefore the spiritual care of people is now part of the NHS agenda. It is acknowledged in Health Directive Letter 76 and specifically makes a distinction between religious and spiritual care, the former being part of the latter. It locates the spiritual care of patients as central to inclusion, equality and diversity and patient choice and at the heart of patient focused health care. Grampian Local Authority now have a spiritual care policy and Standard 12 of the National Care Standards for Older People, Social Care and Social Work Improvement Scotland (SCSWIS) indicates the need to take into account the spiritual needs of older people in residential care.

There is also an increasing acknowledgement that despite breath-taking advances in medical care there is still a need for basic dignity, and value based practice that attends to the day to day routines of care as well as the high tech end of care. Older people living in residential care tend to reside at the care end of the cure-care continuum. They deserve society's great respect and attention. Regular political pronouncements about dignity, choice and mutuality are testament to this. Regular accounts of poor care are testament to the need for this focus.

Through this research process FIOP has concluded that:

- Spiritual care in older people's homes is something that is carried out on a daily basis but is not recognised as such.
- Spiritual care is thought to be about religious care rather than a broader concept of personal caring.
- Staff do not have time to attend long training programmes. The training must fit in with the smooth running of the home.
- Training needs to be sustainable and "walk with" the mood and tempo of the organisation
- Staff have spiritual needs which can be met to some extent by the training programme which will in part focus on their spiritual selves.
- Existing training tends to be around the SVQ model and focus on policy rather than experiential practice.
- Routine caring tasks can become important spiritual encounters with appropriate connections made between the two. The training can make these connections.
- Naturally occurring events, such as death, dying, depression, birthday, seasonal markers are opportunities for spiritual care practice.

Based on these findings FIOP believe that a training model must include:

- A philosophy that embraces the idea that we are all spiritual beings with spiritual needs and the potential to be spiritual carers.
- Recognition that staff and residents alike are experiencing ageing and that ageing is a spiritual journey.
- Acknowledgement that each Home is different and requires preparation for training including observation and understanding of the culture and philosophy of the home. Training programmes must be customised.
- A method that uses narrative and story as the means of eliciting spiritual care meaning and reference to the naturally occurring markers and life of the home such as dying, death, and seasonal events.

The FiOP mentoring programme emerged out of this work with some initial support from the Scottish Government and we are now poised to launch a programme funded by the Esmée Fairbairn Foundation. This will allow us to extend the programme to care homes and others over the next three years. The programme is led by Dr. Harriet Mowat.

For further information contact Maureen O'Neill at info@fiop.org.uk

Page 5 Website: <a href="www.faithinolderpeople.org.uk">www.faithinolderpeople.org.uk</a>

#### TRAINING ... continued ...

The last few months have been very varied

This Spring, Ca(I)re, based in the Eric Liddell Centre in Edinburgh, asked Penny Grieve to help a group explore how chronic pain affects spiritual wellbeing; in June Mary facilitated a very thoughtful discussion for volunteers from Moose in the Hoose and the City of Edinburgh Council on "the feelings of loss and bereavement that volunteers experience when the people they visit die" She also spent a day in Paisley at the request of The Buddies of Hunters Hill with residential and day care staff looking at "How to talk about what really matters" and the communication skills that help, especially when people develop dementia.

We continue to work on an ecumenical basis where possible and spent a day with Pilgrim Care in St Andrew's in May on **spiritual care** & dementia.

Our work with churches included a day long conference in Dundee organised by the Church of Scotland when Mary ran a workshop on "Transition from home to care – how can the church help?"

Mary also worked with elders and pastoral assistants in Balerno and Barclay Viewforth and with a friendship group in Stockbridge Parish Church. Ali Newell continued her work with the Catholic congregations in the West of Scotland and Sue Kirkbride and Mary ran a workshop on "Worshipping with people with dementia" in the Lauriston Centre at the successful Dementia and Spirituality Conference that the Archdiocese of St Andrews & Edinburgh ran this June.

Our work with the Scottish Episcopal Church also continues - Maureen spoke with a congregation in Hamilton; Ali Newell ran a course in Glasgow; Mary spoke to the Glasgow & Galloway Diocesan Synod and ran a day's training for the clergy (see photo above right).

Mary had a session with the Theological Institute for the Scottish Episcopal Church (TISEC) students in Kinnoull on the practicalities and theology which underpins the church's response to old age and dementia in particular.

After Easter Mary shared her explorations on "Death and Afterlife in the Bible" with the pastoral link visitors in St Mary's Episcopal Cathedral, Edinburgh.

If any of these topics appeal – do please ask us to run something in your area.

"You alerted us to new data, got us thinking in new ways and helped us to widen our imaginations and our praxis."



Mary with some clergy from the Diocese of Glasgow & Galloway.

#### **CREATIVE COMMUNICATION**

Perth 2<sup>nd</sup> Sep 2011 £65
Lecture Room, Perth Art Gallery & Museum
Edinburgh 7<sup>th</sup> Oct 2011 £65
Royal Scots Club, Abercromby Place
Both days run from 10.00 – 4pm
To book a place – contact info@fiop.org.uk

These one-day seminars start with the perspective that while the experience of dementia presents profound difficulties to the individual and those around them, it can also include personal growth and discovery, joy and wellbeing, and rich new possibilities for connectedness and relationship.

Our focus will be on exploring ways of connecting with persons with dementia through language, nonverbal communication and creative activities, and finding new ways to savour and celebrate our shared humanity. We will look at how genuine communication and compassion in relationships address the spiritual needs of both persons with dementia and those who support them.

We will offer new ideas and perspectives, together with very practical approaches, which draw on the experience of the presenters, and from a wide range of others including people with dementia themselves. Words, stories, images and films will convey these messages in warm, humorous and memorable fashion.

John Killick is a writer who has championed the role of the arts for people with dementia for 16 years.

Kate Allan is a psychologist whose interests include communication, creativity and wellbeing in dementia.

Page 6 Website: <u>www.faithinolderpeople.org.uk</u>

## **Recommended Reading**

### Spirituality and Personhood in Dementia

There is growing recognition of the significance of a person's spiritual life in forming an essential basis for their sense of identity. This book offers an inter-disciplinary approach to spirituality and personhood in dementia for those of all faiths or none.

"We derive and preserve our personhood from relationships with other people"

"...and those continued relationships are a very important aspect of spirituality"

"communication is not entirely dependent upon actual language – body language plays a huge part".

"I need clues to help me to remember who you are"

Edited by Albert Jewell Jessica Kingsley Publishers ISBN 9781-849051545

#### Time for Dementia

A collection of writings on the meanings of time and dementia offering insight in the context of dementia into:

The meaning of time; clocks; time to love; being in the moment; night time; past times; pastimes and making good use of time.

"Time is the currency of dementia care; we spend it on what we value most"

Edited by Jane Gilliard and Mary Marshall Hawker Publications ISBN 978-1-874790-92-1

#### Reflections of Life

Words of Comfort and Encouragement that: give comfort and hope; help articulate that within us which is difficult to express; affirm thoughts and feelings which are hard to share, as normal; remind us we are not alone in our experience and response to it.

NHS Education for Scotland Thistle House 91 Haymarket Terrace EDINBURGH EH12 5HD

### Being with God: Words of Hope

Words of Hope is one of 3 Bible and prayer guides in the Being with God series for people with dementia – and the elderly who are struggling with memory loss.

ISBN: 9781844275205

See www.scriptureunion.org.uk

#### **EVENTS**

#### **FESTIVAL OF SPIRITUALITY**

For tickets for the following events in Edinburgh Contact The Hub or St John's (Venue 127)

### **Body & Soul**

Saturday 13th Aug 2011

11 a.m. - 12 noon St John's (Venue 127)

Cutting edge science clearly demonstrates that there is a positive relationship between spirituality and health, with a resultant stimulation of our bodies' natural healing powers. However, the NHS still does not fully acknowledge this ancient yet vital aspect of holistic health which is essential for the most effective practice of modern healthcare.

How can we encourage scientific medicine to rediscover its long forgotten art, and to practice holistic (or whole) healing?

With **Dr Geoff Lachlan** a former general surgeon who has produced interfaith and belief spiritual resources for use in NHS Scotland and **Dr Vinod Kumar**, a GP who now practices medicine in conversation with **Professor Kenneth Boyd**, Professor of Medical Ethics at the University of Edinburgh.

#### Spirituality - Have You Found Any Yet?

Wednesday, 10th August 2011

St John's (Venue 127) (9.30-11.00 am or 11.30-1.00pm) Tickets £8.00 or £6.00 concession

Faith In Older People And Alzheimers'
Scotland invite you to a discussion about the spiritual care of older people.

We will be showing a short film using the voices and experiences of older people and people with dementia.

These conversations, which open up issues for staff, residents and relatives, help us to understand the importance of enabling older people to have their spiritual needs met as well as enhancing the well-being of those caring for them. The aim of the discussion is to explore in more depth the issues.

(A DVD will be available for those attending)

Page 7 Website: www.faithinolderpeople.org.uk

#### We celebrate

#### ageing and faith

Developing an understanding of spiritual care of older people.

Encouraging people to celebrate growing older and

recognising and affirming their gifts and experience.

We offer support and training to pastoral carers

and

ordained members on an ecumenical basis and amongst people of other faiths.

Supporting caregivers within health and long term care institutions to enhance the quality of life and wellbeing

by ensuring the inclusion of spiritual care for older people

### Faith in Older People

Director Maureen O'Neill

Training Officer
Mary Moffett

Administrator Jean Myers

We are actively seeking further funding from a variety of sources and are particularly grateful to all individual donors.

Can you help?

#### THE OLD CRACKED POT, a traditional story

A water bearer in India had two large pots, hung on each end of a pole which he carried across his neck. One of the pots had a crack in it, and while the other pot was perfect and always delivered a full portion of water at the end of the long walk from the stream to the master's house, the cracked pot arrived only half full



For a full two years this went on daily, with the bearer delivering only one and a half pots full of water in his master's house. Of course, the perfect pot was proud of its accomplishments, perfect to the end for which it was made. But the poor cracked pot was ashamed of its own imperfection, and miserable that it was able to accomplish only half of what it had been made to do.

After two years of what it perceived to be a bitter failure, it spoke to the water bearer one day by the stream.

"I am ashamed of myself, and I want to apologize to you.

"Why? asked the bearer. "What are you ashamed of?"

"I have been able, for these past two years, to deliver only half my load because this crack in my side causes water to leak out all the way back to your master's house. Because of my flaws, you have to do all of this work, and you don't get full value from your efforts," the pot said.

The water bearer felt sorry for the old cracked pot, and in his compassion he said, "As we return to the master's house, I want you to notice the beautiful flowers along the path."

Indeed, as they went up the hill, the old cracked pot took notice of the sun warming the beautiful wild flowers on the side of the path, and this cheered it some. But at the end of the trail, it still felt bad because it had leaked out half its load, and so again it apologized to the bearer for its failure.

The bearer said to the pot, "Did you notice that there were flowers only on your side of your path, but not on the other pot's side? That's because I have always known about your flaw, and I took advantage of it. I planted flower seeds on your side of the path, and every day while we walk back from the stream, you've watered them. For two years I have been able to pick these beautiful flowers to decorate my master's table. Without you being just the way you are, he would not have this beauty to grace his house."







