



Ageing and spirituality

Genesis oncology lecture

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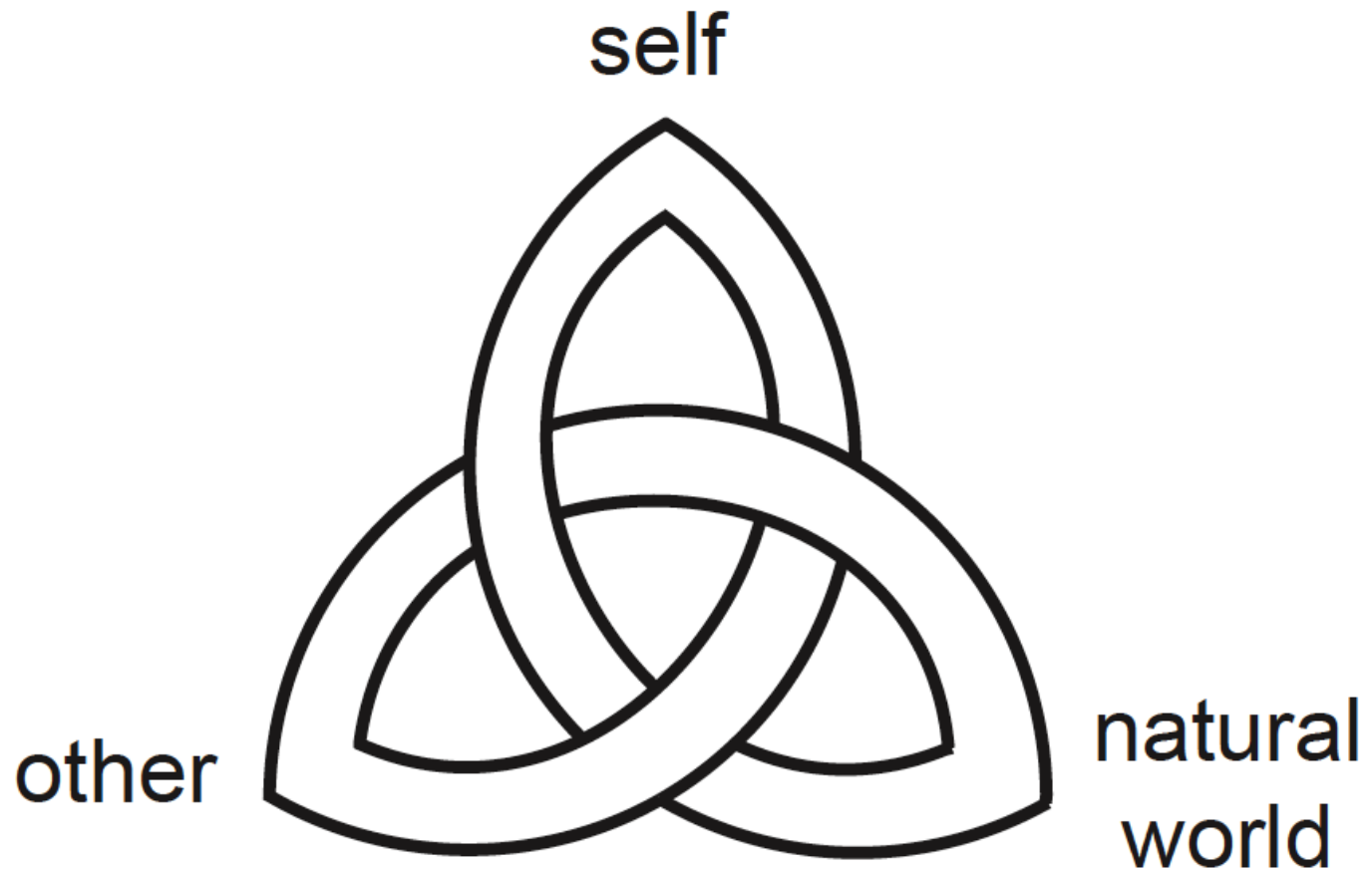
What are we talking about?

- “ that which is essential to our humanity, embraces the desire for meaning and purpose, and has personal, social and transcendent dimensions.”

(Allen & Coleman) 2006, 205-206

- “that which lies at the core of each person’s being , an essential dimension which brings meaning to life... understood ... broadly as relationship with God, however God or ultimate meaning is perceived by the person and in relationship with other people”

(MacKinlay 2001)



Spirituality as connection-A. Holmes (2010)

A map of the terrain?

Including-

- Meaning
- Purpose
- Values
- Beliefs
- Identity
- Self awareness
- Etc.



Getting old...

- We are getting old
- The population is getting old



This is a sign of great success

The tragic triad

1. Pain
2. Guilt
3. Death

(Frankl 1984, p.161)



Response to the “tragic triad”

1. Turn suffering into human achievement and accomplishment
2. Derive from guilt the opportunity to change oneself for the better
3. Derive from life’s transitoriness an incentive to take responsible action (p.162)

Erikson

Spiritual task of old age

Integrity vs despair

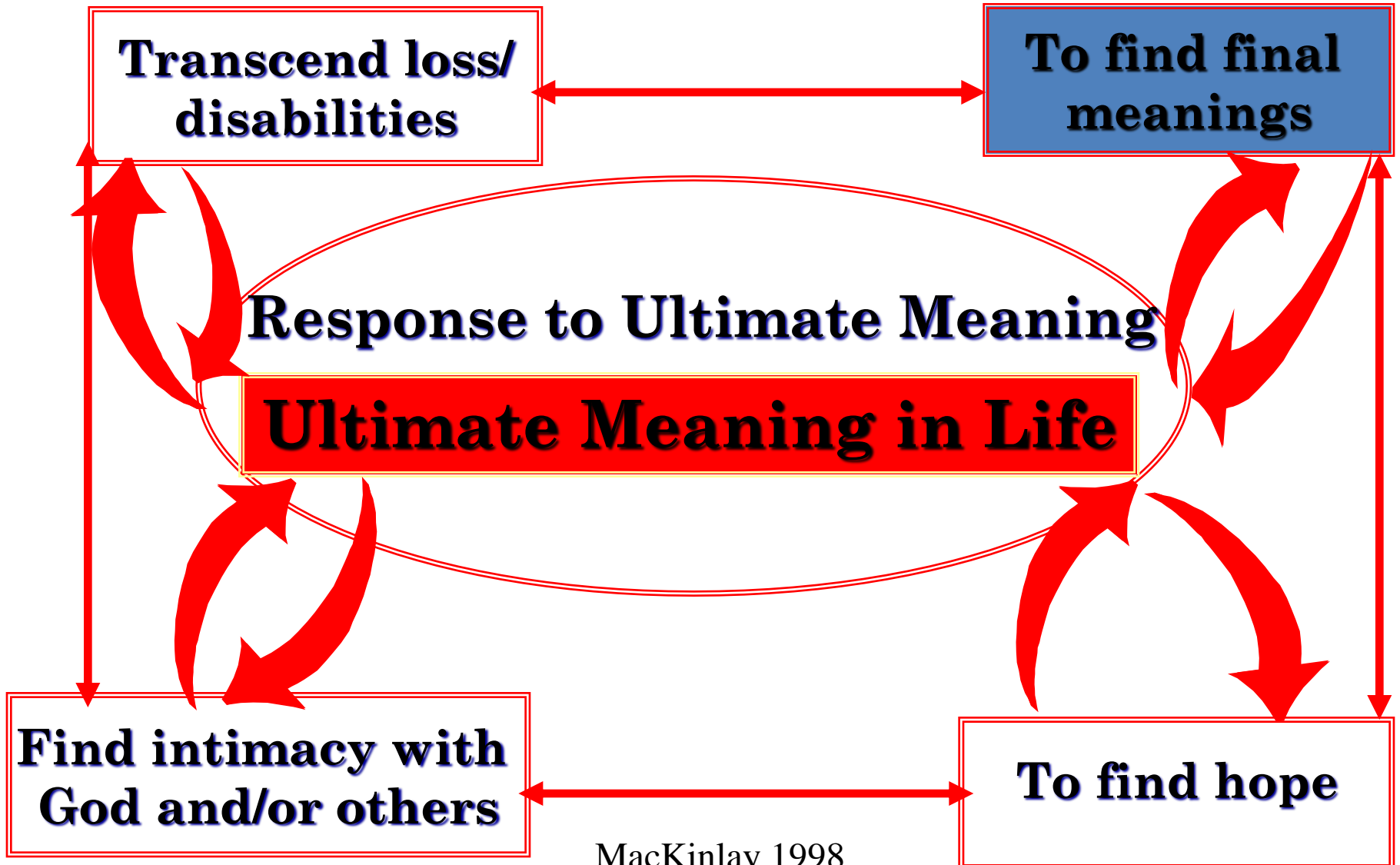


wisdom

Finding meaning (Frankl 1984)

1. Creating a work or doing a deed (work-what we give)
2. Experiencing something or encountering someone (love- what we take)
3. By the attitude we take to unavoidable suffering (a tragic optimism -the stand we take)

Spiritual Tasks & Process of Ageing: A continuing process



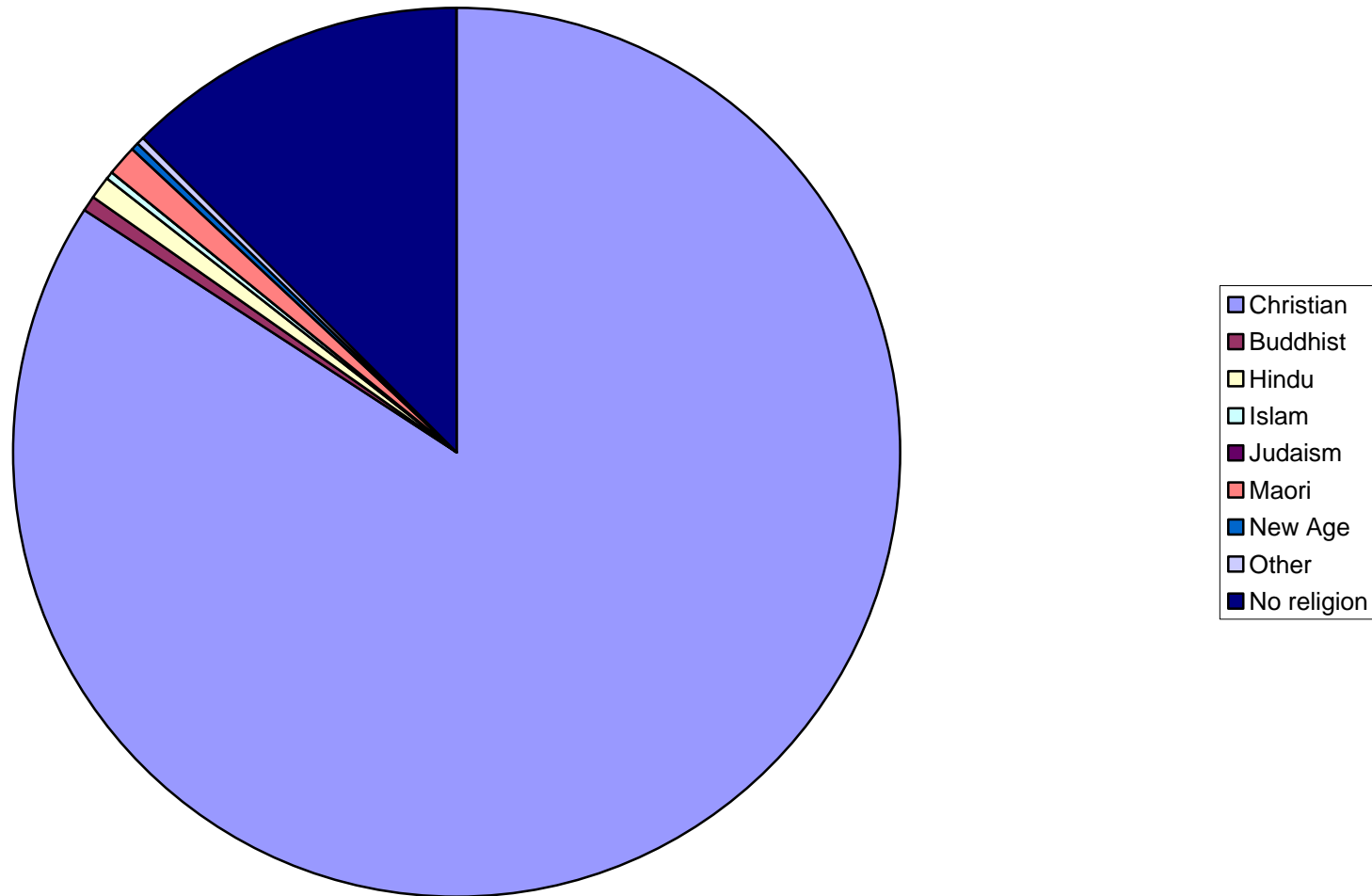
Spirituality and Religion

(MacKinlay 2011)

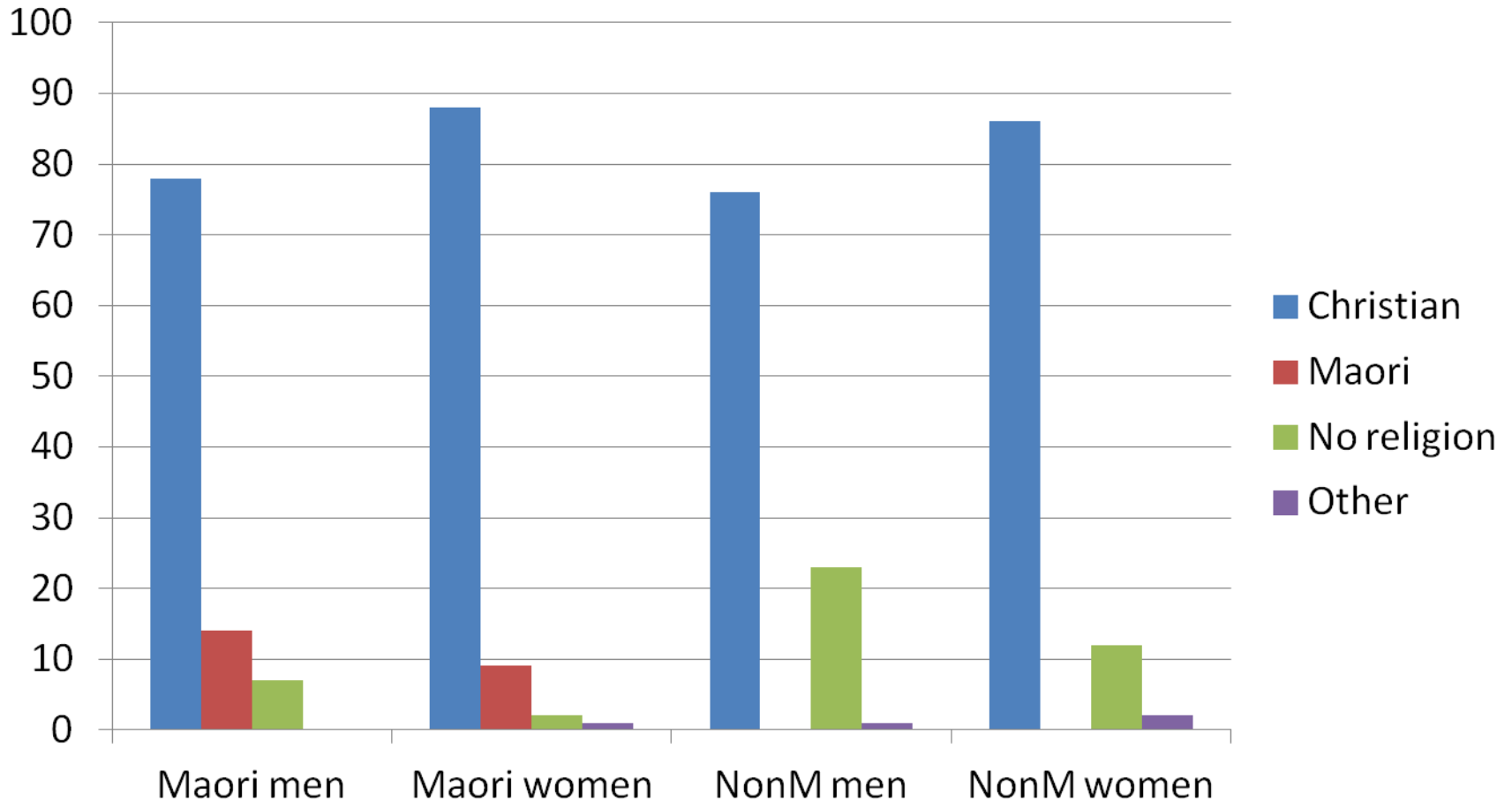


Religious affiliation of older people (NZ Census 2006)

Religious affiliation >65



Religion in people >85years in BOP



Spirituality, old age and health

Marked increase in research since 2000

Spirituality / attention to spiritual needs →

- Increases overall wellbeing / QOL / self esteem
- Improves health
- Speeds recovery /improves coping
- Helps cope with non-recovery
- Assists in finding meaning through illness
- Associated with “successful ageing”

Te whare tapa wha

Taha tinana - Physical well-being

Taha hinengaro - Mental and emotional well-being



Taha whanau - Social well-being

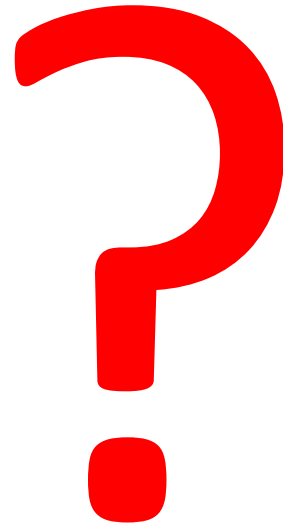
Taha wairua - Spiritual well-being

Health policy

- **Wellbeing:** “A dimension of health beyond the absence of disease or infirmity, including social, emotional and spiritual aspects of health”. (From the Glossary of HOOPs 2002)
- “ **a *holistic approach*** to care and support- including consideration of physical and mental health, social, emotional and spiritual needs of older people.” (HOOPS):
- Increasingly we are considering residential aged care as **palliative care**.

“Palliative care embraces the physical, social, emotional and spiritual elements of wellbeing”

What it's like on the ground



Issues for older people in residential care - chaplains' views

- Loneliness 29 / 29
- Adjustment to residential care 28 /29
- Grief and loss 27/29
- Finding meaning/purpose 27/29
- Adjustment to mental change 27/29
- Adjustment to physical change 26 /29
- Meeting spiritual needs 26/29

Other issues

- Loss of independence/privacy/dignity
- Family issues
- Resolving past hurts / forgiveness
- Need for non-judgmental listening and acceptance:
- Theological / spiritual/ existential issues:

“I think of all the needs, the one of wanting to be known, loved and accepted is still the pressing one. All of my residents just long for someone to have the time to sit and listen to who they are, where they came from what their beliefs and values are and not to be judged. People need time and individual conversations... I only scratch the surface.”

“At the end of the service, I take each one’s hand in turn giving them *the peace*.

Every now and then someone would stop me to say “I am scared” or “worried” or simply cry.

Then I take a few minutes asking if he/she would like me to pray with him/her and that is just what they want, to be prayed for.

I wonder if they have any access to a clergy to call and ask for a prayer before they go to bed if they feel troubled.”

Who should provide spiritual care for older people in NZ?

- Family and friends?
- Staff?
- Church?
- Chaplains?

- Implicit or explicit?



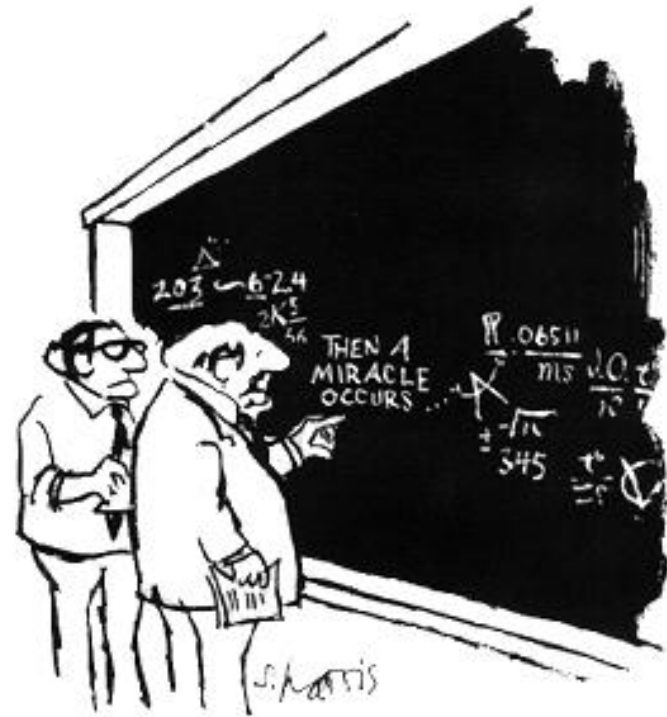
Why MHSOP workers don't ask about spirituality

- Lack of *time*
- Not emphasised as important part of assessment (culture is the same).
- Focus on safety and progress (but not *process* of recovery)
- *Secular society*... religion ignored
- Ask but don't always record in file (depends how relevant)
- "*Medical model*": science elbows out religion / spirituality

Alfred Whitehead, logician/ mathematician, then theologian in 1929 noted

- “ an inverse relationship between that which is most amenable to measurement or quantification and that which is most meaningful or valuable to humans.”

(in Benning and Khokhar 2007)



"I think you should be more explicit here in step two."

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Health and aged care staff were:

- Passionate about working with older people
- Sophisticated in their understanding of spirituality
- Grateful to have the opportunity to reflect on this aspect of care

Workshop attendees = 144

Aged-care workforce = 35,000

% workforce attendance = 0.4%

Summary

- I have talked about what spirituality is and its relevance to older people.
- I suggest that though policies prescribe “holistic care” we don’t actually know how or who should provide spiritual care to older people.
- Provision of spiritual care will become more challenging as the population ages and there is a much more diverse understanding of spirituality.
- I detect an increased interest in spirituality in New Zealand

“ If we do not assess for spiritual needs, we will not even begin to notice these needs, nor find ways of addressing them. As I see it, spiritual needs underlie the psychosocial needs of people---they lie at the very core of what it is to be human. If we neglect these, especially for people at critical points of their lives and for those who are facing their frailty, dying and death, then we neglect something equally important as failing to provide food... Spiritual care can no longer be seen as an optional care component.” E. MacKinlay 2006 p.69

Resources

www.centreforageing.org.au

www.selwyncare.org.nz