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Teaching Spiritual Care of the Nonreligious: Part 2

Editor's Note: This is the second of a three-part series.

Abstract

Curricula for teaching chaplains to provide skillful spiritual care of the nonreligious should include self-inventory of each chaplain's attitudes and assumptions regarding nonreligious persons, and the translation of religious care giving skills into a variety of nonreligious vocabularies and interventions. A number of learning tools are proposed as means to these goals.

Keywords: spiritual care, spiritual care of the nonreligious, teaching spiritual care, spiritual care curriculum, Clinical Pastoral Education

Introduction

In **Part I of this series**, we reviewed the diversity of persons in the United States who consider themselves "not religious," and argued that chaplains should and can provide ethically appropriate and skillful spiritual care to this rapidly growing population (Thiel and Robinson, 2015). We offered a few suggestions as well as two assessment tools useful for working with persons from this demographic. Part 3 of this series will focus on some of the unique dynamics in spiritual care to contemporary American Jews.

This second article offers ideas for teaching spiritual care of the nonreligious -- both preparation for the teacher and curriculum for the learner. Clinical Pastoral Education (CPE) Supervisors may wish to contextualize parts of this curriculum to their settings prior to utilizing them with their students, and Directors of Spiritual Care may similarly adapt the material to use in the continuing education programs for their staff chaplains.

Method

We reviewed a multidisciplinary range of contemporary literature on the nonreligious, interviewed professors of pastoral care and CPE Supervisors, and spoke with humanist chaplains. From our own experience as chaplain educators and students, we drew on familiar learning tools and created some new ones. Here we offer an "A La Carte Menu" of curriculum suggestions for chaplain educators to select from and contextualize to their own settings, in order to help chaplains develop spiritual care skills for working with nonreligious persons.

Results

Spiritual Care Curriculum

Introduction to "[America's Changing Religious Landscape](#)": Explore the Pew study of Religion in America (Pew 2015) with your students and staff, utilizing some of the interactive features on the website. Part 1 can be assigned as preparatory reading.

Explore with the students:

- *What are the demographics of your regional area?*
- *Are they changing, and if so, how?*
- *What are the demographics of your particular institution?*
- *What are the unique spiritual care needs of your setting, and what skills might chaplains need to learn to be effective there?*

Focus in on the number of unaffiliated persons in your regional area. With Level II or Supervisory CPE students, ask them to wonder aloud as a group:

- *Why might some people have left or never been attracted to religious/spiritual traditions?*

See also the tool listed below called "Eavesdropping on Our Own Internal Conversations."

Treasure Hunt: Once the students understand how spirituality may present in secular ways, ask them to engage in a virtual treasure hunt for signs of secular spirituality in the course of their clinical work. Ask them to make a list of the spiritual but not religious objects observed in their clinical work in the course of a week. Look for quotes posted in a room, items at a bedside, messages on T shirts, tattoos, symbolic jewelry, even hospital marketing slogans. Share the lists or photos with the group. Remind interns that pictures can be taken of patients and families only with permission, for teaching purposes only, and should not be posted on-line for others to view.

Attitudes Seminar: Ask your group to brainstorm associations to the word "Religion." Write the list on the board. Notice together whether the words suggest positive, negative, and/or ambivalent relationships to religion. Wonder together about how being a chaplain might relate to these feeling responses.

In a like manner, ask your students to brainstorm associations to the words "Spiritual," "Agnostic" and "Atheist." Notice together whether the associations are positive, negative, or ambivalent. Wonder together about how each participant's personal associations might influence them as they do a first visit with someone who has identified themselves as "Unaffiliated" or "None" upon admission?

Experience of Religious/Spiritual Change Essay and Seminar: Ask the students to write an essay that articulates their actual experience – in contrast to belief or opinion – of changes in religious/spiritual beliefs/practices. Here are typical prompts:

- *Describe two significant changes in your religious/spiritual beliefs/practices over your life. What was the experience that led to each change?*

- *Describe two aspects of your own religious/spiritual tradition with which you are not comfortable. For each, give an example of a situation in which you experienced this discomfort.*
- *Describe two powerful or formative spiritual experiences you have had outside of your religious/spiritual tradition.*
- *What are the top two things outside of your current religious/spiritual tradition that you would put on your own list of "Something's Greater Than Myself" that motivate who you are and hope to become? (These might be persons, concepts, values, ideals, etc.)*

Have each student read their essay aloud in the group, allowing time for questions and comments about each. Encourage participants to respond to the peers whose experiences are most different from their own, and to withhold sharing their own religious beliefs and personal judgments. Remind students that this is good practice for learning how to talk with persons for whom they are chaplains.

Eavesdropping on Our Own Internal Conversations: Explain the basics of **Internal Family Systems theory,** including the concepts of "Parts" and of the unifying "Self" (Schwartz, 2001). Ask each person to identify the "part" of them that responds positively to religion/spirituality. Likewise, ask each person to identify the "part" of them that reacts negatively to religion/spirituality. This may be a part that is active when one cringes looking at the religious news headlines, or that goes on alert when someone starts relaying the story of a scandal involving a clergyperson or chaplain. Or it may be a part that feels judgmental when the conversation turns to one's former religious tradition, or to spiritual beliefs and practices that feel strange to the student. After students have gotten to know both of these "parts" in themselves, ask them to listen in on an imaginary internal conversation between their positive and negative parts, and to write down some sample dialogue:

- … when you are offering spiritual care to a religious person of your own persuasion.
- … when you offer spiritual care to a religious person of a very different tradition than your own.
- … when you offer care to a nonreligious person who left your religion.
- …. when you offer spiritual care to a nonreligious person who has no connection to your own religious tradition.

Ask the participants to read these conversations in the group and then explore:

- *I wonder what it was like to eavesdrop on the part of you that feels positively about religion/spirituality?*
- *I wonder what it was like to eavesdrop on the part of you that feels negatively about religion/spirituality?*
- *I wonder if you discovered any "hot button" situations that are difficult or costly for you when they arise in providing spiritual care?*
- *What growing edges might you want to work on?*

Interview: Invite as a speaker an articulate and thoughtful person who has left their religious/spiritual tradition of origin and now considers themselves nonreligious. Ask the speaker to share their spiritual journey with the students/staff chaplains. After the guest relates his/her spiritual narrative, invite the participants to ask questions.

Then wonder together how a sensitive chaplain might approach the guest's bedside if the guest were a patient. Underscore that this seminar is an opportunity to practice skills in talking with someone who

may be different from themselves, to model humility in serving the nonreligious, and to use secular language when talking about spirituality.

Spiritual Assessment Seminar: Use the spiritual assessment tool from the **Appendix of Part I** of this series, or another spiritual assessment tool you have taught to your students/staff. Have the group give examples of how each of the seven themes (or the equivalent in the model you use) might present itself in "religious" language, and examples of how each part might present in "secular" language.

Verbatim as a Theological Event: This Level I tool, included in **Appendix C** accompanying this article, is adapted from a presentation to chaplains by Rev. Will Spong (Spong, 1970's). The facilitator moves the participants through a step-wise, analytical process, leading eventually to connections to sacred sources and to theological issues inherent or at stake in the encounter. When used in addition to the typical Verbatim Seminar, this tool helps students develop skills and awareness of their own clinical theological reflection. At the end of the session, one might ask students to explore:
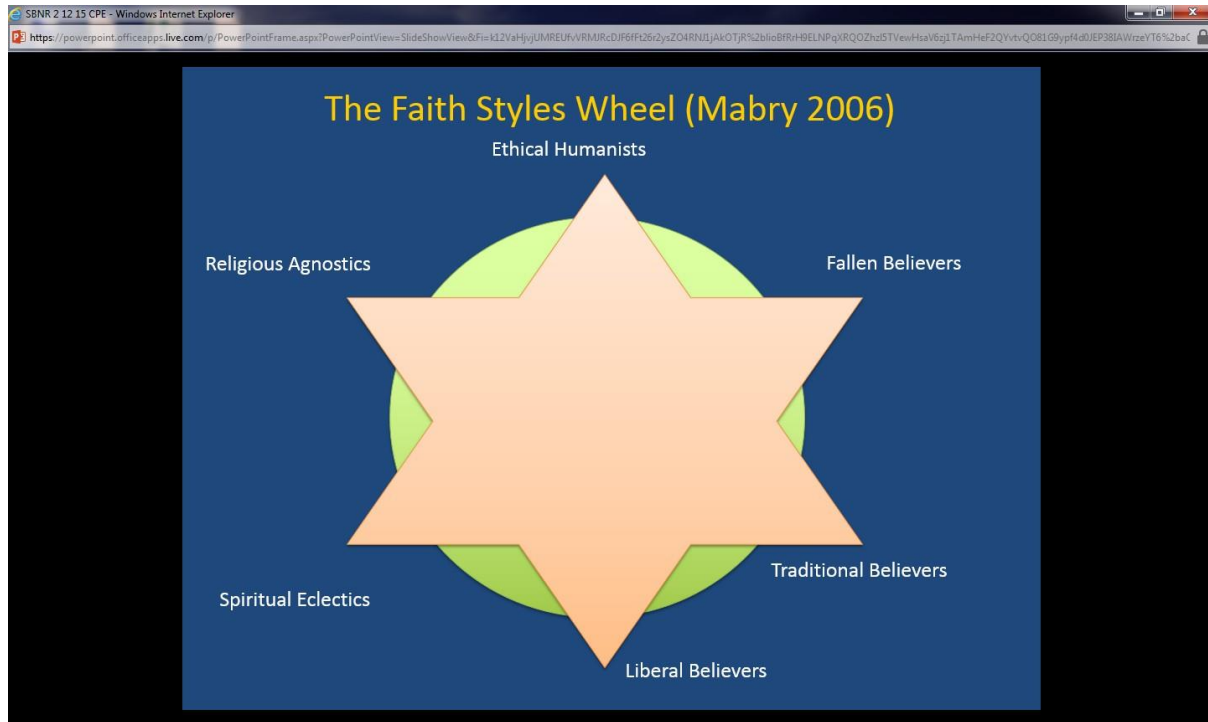
- *How might the patient define their own theological issues?*
- *Are these the same as the chaplain's or different?*
- *What are the theological implications of this for the chaplain?*

Verbatim as a Secular Event: Assign Level II students to write and present at least one verbatim during the CPE unit on a person whose spirituality is not expressed in religious language. Goals of this exercise are to identify the patient's areas of a) spiritual distress, b) spiritual strengths, c) spiritual resources, and d) a spiritual care plan for the chaplain's ongoing work with the patient. The presenter and group should try to discover and use the same spiritual or nonreligious language the patient has chosen. Only once the plan is complete, ask students:

- *What are your own theological reflections on the encounter?* (Note whether the chaplains' are similar or different from the patient's.)
- *If you were to serve as chaplain to this nonreligious patient long-term, what might happen to your own theology? Might it change? Might it stay the same?*
- *How do you feel about your answers to the previous questions in terms of your own pastoral identity and authority* (Balboni, 2013)?
- *What is at stake theologically for you?*

Open-Eyed Prayer: Once students have increasing comfort with leading spontaneous prayer in the vernacular of the religious patient, present the idea of open-eyed prayer in secular language for the nonreligious person in their care. Notice how both "prayers" function in a spiritual care conversation to summarize issues, convey that the patient has been heard, affirm companionship in their situation, name that which is trustworthy, and acknowledge the hope and mystery of how things will turn out. As part of a verbatim seminar discussing a conversation with a secular patient, ask the students to give examples of open-eyed prayers the chaplain might offer at the end of such a conversation.

John Mabry's Faith Styles Wheel: Review John Mabry's conceptualization of faith styles (Figure 1) (Mabry, 2006).

The Faith Styles Wheel (Mabry 2006)

Mabry suggests that a person may migrate around the circle during their lifetime. Typical precipitants for such movement include serious illness, grief, unprecedented life experiences, spiritual epiphanies, exposure to other cultures or beliefs, and normal human development. All of these are active in hospital settings! Wonder with the students:

- *Where are you on Mabry's wheel (*Traditional Believer, Liberal Believer, Spiritual Eclectic, Religious Agnostic, Ethical Humanist, or Fallen Believer*)?*
- *Did you start there, or have you shifted from a different point on the wheel? What did the shift (if any) feel like?*
- *Providing spiritual care to which believers on the wheel is the biggest challenge for you?*
- *What are your spiritual care temptations given your location on this wheel?*

Assure students that everyone has biases, and that our responsibilities are to be aware of our own temptations, and to refer when we cannot provide optimum spiritual care to a particular person or in a particular situation.

Spiritual Resources for Nonreligious Persons

Once students have a good handle on SGTO's, have them brainstorm a list of possible spiritual resources for nonreligious persons. Keep adding to the list as the unit progresses, as students discover new resources through their clinical work.

Poetry: Provide students with a small selection of poems and readings that provide metaphors and phrases that might be useful in spiritual care conversations. For example, John Fox's poetry often focuses on the medical context (Fox, n.d.). His poem "**When Someone Deeply Listens to You**" includes the following stanza:

When someone deeply listens to you

Your bare feet are on the earth

And a beloved land that seemed distant

Is now at home within you.

As a group, discuss:

- *What metaphors from this stanza can you imagine finding useful in a chaplaincy visit?*
- *How could these be brought into a spiritual care conversation?*

Ask students to continue adding to the collection of poems and readings over time, so that each creates their own chaplain's resource manual for a variety of situations, expressed in a variety of religious, spiritual, and secular vocabularies.

Plan a Secular Memorial Service for a Nonreligious Person: This occasion may present itself naturally in the course of work or clinical education, or a teacher can assign staff/students the joint task as a learning experience. It will help chaplains seek out, share, and gain familiarity with the wide variety of secular texts, music, and rituals appropriate for a secular memorial service.

Plan a Service for Your Hospital/Institution Following a Trauma:

Again, this necessity may arise of its own accord, or may be included in a formal curriculum. As the numbers of unaffiliated and nonreligious persons climb, chaplains become by default the primary spiritual caregivers of many employees in a hospital community. Some traumatic events can have so much impact that hospital staff benefit from gathering as a community to acknowledge the trauma, comfort one other, and nurture their courage and hope.

Assign students to work in small groups, and let each group choose the context it wishes to address. One group might create a service in response to a natural disaster (a devastating hurricane like Katrina, for example), and another in response to intentional violence (the Boston Marathon bombing). Services should use language and symbols comfortable for the whole hospital, religious and nonreligious alike.

Have each working group present its service in the larger group. Debrief what the challenges were in putting together the service, and how it was received.

Discussion

Clinical Pastoral Education can be conceptualized as an ongoing spiral of action, reflection, and integration, followed by new action, new reflection, and new integration. The development of new curriculum should be understood as progressing in a similar fashion. It is imperative for the teaching chaplain to engage personally with both arms of the curriculum -- the attitudinal activities, as well as the more skill-based tools – before presenting them to staff/students. The teacher's experience of both arms of the curriculum will increase their self-awareness, as well as provide information about the adjustments or fine-tuning needed for their chaplaincy context.

The care of the nonreligious may bring up negative or ambivalent feelings in the teacher as well as in the students. Just as most CPE students are invested in being religious professionals, most staff and teaching chaplains are credentialed as religious professionals, with deeply formed religious identities and personal investment in religious institutions. Stepping outside of one's own religiosity far enough to see both the integrity and challenges in nonreligious worldviews takes a mature level of spiritual and psychological development, as well as deep humility. If we are going to teach spiritual care of the nonreligious in order to prepare others for professional chaplaincy, we must know how to do it ourselves, and value doing it well. Both capacities ultimately arise from the integrity of our own theological grounding. These are no small accomplishments.

The contexts in which we offer spiritual care continue to change, becoming increasingly diverse and complex. We believe it is chaplains' professional obligation to keep growing. As our dear CPE supervisor Randy Jones said years ago, "You can only help another as far as you yourself have gone" (Jones, R., 1986).

We invite feedback on this curriculum. Which tools worked well? Which did not? What other tools do you use in teaching staff chaplains and students how to provide spiritual care to the nonreligious?

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