



Canadian spirituality and health: A pastoral care and counselling perspective

Thomas St. James O'Connor, ThD
Elizabeth Meakes, MTS

Abstract

This article highlights the need for Canadian pastoral caregivers and counsellors to embrace the “research” side of spiritual care (in addition to the “faith” side). The article reviews the number of publications on spirituality and health by chaplains and pastoral counsellors in five peer reviewed Journals. Ten percent of the articles are authored by Canadian chaplains, pastoral counsellors and/or theologians – 20 % of the articles in the two Canadian-based publications. Readers are encouraged to embrace research and to follow through to publication. Six bright spots are mentioned. These include the Society for Pastoral Counselling Research (SPCR), the Canadian Association for Pastoral Practice and Education (CAPPE) and various Canadian theological schools that publish research.

Introduction

Central to the practice of pastoral care and counselling is dealing with the spiritual issues of the client/patient (VandeCreek, 1999; VanKatwyk, 2003; Meier, O'Connor and VanKatwyk, 2005). Many other health care disciplines such as nursing (DiCenso et al., 1998), medicine (Levitt, 2005), occupational therapy (Baptiste, 2005), physiotherapy (Clarke et al., 2005) and family therapy (Walsh, 1999) also strive to address the spiritual needs of patients/clients. Pastoral care and counselling is rooted in a theological/religious/spiritual foundation as well as the various theories from the social sciences (MacNeill, 1951; Clebsch & Jaekle, 1967; Holifield, 1983; Gerkin, 1997; O'Connor, 2002; O'Connor and Meakes, 2005). Chaplains and pastoral counsellors receive at least a Masters level education that includes practicums under supervision and/or Supervised Pastoral Education (SPE) in the Canadian Association for Pastoral Practice and Education (CAPPE). These practical experiences with clients and patients focus on how to conduct a conversation with clients/patients around the client's spiritual needs. This is a challenging area. One of the goals is to avoid converting the client to one's own particular belief. (VandeCreek, 1999; Sloan et al., 2000). At the same time, clinicians desire to give clients the opportunity to speak about their spiritual needs especially around the particular situation that

O'Connor, T. (2006), Canadian spirituality and health: A pastoral care and counselling perspective, *Counselling, Psychotherapy, and Health*, 2(1), 20-29, April 2006.

brought them for help. Certainly, the literature on spirituality indicates a variety of understandings of spirituality and health and this makes the conversation even more challenging (McCarroll et al., 2005). Some clients opt not to discuss spiritual needs and desire to address other issues. Pastoral care and counselling respects that and honors clients' decisions. However, sometimes a psychological problem masks a spiritual problem and vice versa (VanKatwyk, 2003).

In most fields, the clinical work is usually guided and informed by research. Spiritual care in our contemporary society stems from two paradigms: faith traditions and research. (O'Connor and Meakes, 2005). The faith paradigm is based on sacred texts and tradition that require the caregiver to offer spiritual care based on a mandate from the Divine and/or faith community. The faith tradition paradigm of spiritual care is the most dominant one in our society. In the last thirty years, a second paradigm based on research has developed (O'Connor et al., 2002). This paradigm is not based on sacred texts or mandates from faith communities. Rather, this approach to spiritual care is based on empirical research (Barbour, 1997) that indicates that spiritual care is beneficial to the health and well being of patients and clients (VandeCreek, 1995; Koenig, 1997; Koenig, McCullough and Larson, 2001; Levin, Larson & Puchalski, 1997; Levitt, 2005; O'Connor & Meakes, 2005). An evidence based approach to pastoral care and counselling arises from the research paradigm to spiritual care (O'Connor & Meakes, 1998). In evidence based spiritual care, clinicians ought to be using the best available research in service to their clients (O'Connor, and Meakes, 1998; DiCenso et al., 1998; O'Connor, 2002). While evidence based spiritual care is mostly foreign to the faith paradigm, research is crucial in our scientific age (Barbour, 1997). Ideally, research ought to be guided by the experiences and questions that arise from the clinical setting. However, this is not always the case. A previous study by Thomas O'Connor and colleagues (O'Connor et al., 2002) indicates the huge amount of research being published in scientific and medical journals on spiritual care. However, what have Canadian chaplains and pastoral counsellors published in terms of spirituality and health? What kinds of research do Canadian chaplains and pastoral counsellors utilize in their publications? Who is publishing these articles and where are they located? What are the implications for clinical work and research in pastoral care and counselling?

Quantity of publications by Canadian Chaplains and Pastoral Counsellors on Spirituality and Health

The number of Journals published today is enormous. To discover the number of publications done by Canadian chaplains and pastoral counsellors on spirituality and health is challenging. Electronic searches of databases do not contain all journals nor do they identify the country where authors reside. The authors have done previous searches of electronic databases and also manual searches that have been published (O'Connor et al., 2001; O'Connor et al., 2002;). To gain a rough estimate of the quantity of publication by Canadian chaplains and pastoral counsellors on spirituality and health, a manual search of five Journals was employed. This involved searching a Journal, article by article, and noting two items. First, was the article on spirituality and health? Second, was the article published by a Canadian chaplain and/or pastoral counsellor. The first issue was answered by reading the title, abstract and sometimes the full text

O'Connor, T. (2006), Canadian spirituality and health: A pastoral care and counselling perspective, *Counselling, Psychotherapy, and Health*, 2(1), 20-29, April 2006.

of the article. The second question was answered by examining the author's degrees, professional identification and the address where he/she could be reached.

Five journals were selected. The selection criteria was based on the Journals most used by pastoral care and counsellors to publish. The Journals were searched for a five year period (2000-2004) to discover the number of publications done by Canadians. The five journals are *Consensus*, *The Journal of Pastoral Care and Counselling* (previously known as *The Journal of Pastoral Care*), *Pastoral Sciences/Sciences Pastorales*, *Pastoral Psychology* and *The Journal of Religion and Health*. All five are peer reviewed. *Consensus* is a Canadian Lutheran journal published biannually by Waterloo Lutheran Seminary in Waterloo, Ontario and Luther Seminary in Saskatoon, Saskatchewan. *The Journal of Pastoral Care and Counselling* is published quarterly in Decatur, Georgia and one of the journals that CAPPE members can select as part of their membership. This Journal also has the largest subscription rate in North America for practitioners and theologians of pastoral care and counselling. *Pastoral Sciences/Sciences Pastorales* is a bilingual journal (English and French) published biannually by St. Paul's University in Ottawa. This journal can also be selected by CAPPE members. *Pastoral Psychology* is published six times in the year by Princeton. *The Journal of Religion and Health* is published quarterly by the Blanton-Peale Institute in New York.

Articles in each of these Journals during 2000-2004 were reviewed by the authors to discover if the article focused on spirituality and health. The reviewers also noted Canadian authorship. In the case of many authors, the article was examined to see if one of the authors was Canadian. The results of the search are present in Table 1. Table 1 is the number of articles on spirituality and health written by Canadian chaplains, pastoral counsellors and/or pastoral theologians in five Journals for the years 2000-2004. (See below.) The Table indicates that Canadian chaplains, pastoral counsellors and pastoral theologians published 52 out of 518 or approximately 10% of these articles. Also, in these 52 articles, there were 86 Canadian authors which indicate that most were written by more than one Canadian. Most of the articles had an affiliation with a theological school rooted in the university. The more predominant theological schools are the bilingual pastoral care and counselling program at St. Paul's at the University of Ottawa, the French pastoral counselling program at the University of Sherbrooke, pastoral care and counselling program at Waterloo Lutheran Seminary at Wilfrid Laurier University, pastoral theology at Toronto School of Theology at the University of Toronto and pastoral care and counselling program at St. Stephen's Theological school at the University of Alberta.

Table 1: Articles on Spirituality and Health by Canadian Chaplains, Pastoral Counsellors and/or Pastoral Theologians in Five Journals (2000-2004)

Five journals (2000-2004): <i>Consensus</i> , <i>Pastoral Psychology</i> , <i>Pastoral Sciences/Sciences Pastorales</i> , <i>Journal of Pastoral Care and Counselling</i> , <i>Journal of Religion and Health</i>	Number
Total Number of Articles in the Five Journals	518

O'Connor, T. (2006), Canadian spirituality and health: A pastoral care and counselling perspective, *Counselling, Psychotherapy, and Health*, 2(1), 20-29, April 2006.

Total Number of Articles authored and/or co-authored by Canadian Chaplains, Pastoral Counsellors and/or Pastoral Theologians	52
Total number of Canadian authors in the 52 articles	86
Percentage of Canadian articles (52) to total number of articles in Five Journals	10.0%

Table 2 presents the articles on spirituality and health written by Canadian chaplains, pastoral counsellors and/or pastoral theologians in two Canadian Journals. These are *Consensus* and *Pastoral Sciences/Sciences Pastorales* in 2000-2004. Table 2 shows that Canadian chaplains, pastoral counsellors and/or pastoral theologians authored and/or co-authored 20% of the articles in two Canadian Journals. This doubles the percentage when compared to Table 1. Table 1 includes three American journals. The three American journals are the ones most known in the field. The number of articles on spirituality and health is lower in *Consensus* than *Pastoral Sciences/Sciences Pastorales* because *Consensus* also publishes sermons and articles on systematic and historical theology. Also noteworthy is that the two Canadian Journals publish twice a year while the American journals publish at least four times a year. *Pastoral Psychology* publishes six times a year!

Table 2: Articles on Spirituality and Health by Canadian chaplains, pastoral counsellors and/or pastoral theologians in two Canadian Journals

Two Canadian Journals: <i>Consensus</i> and <i>Pastoral Sciences/Sciences Pastorales</i> (2000-2004)	Number
Total number of articles in the two Canadian Journals	117
Total number of articles authored or co-authored by Canadian chaplains, pastoral counsellors and/or Pastoral theologians	23
Total number of Canadian chaplains, pastoral counsellors And/or pastoral theologians in the 23 articles	33
Percentage of Canadian articles to total number of articles in the two Journals	20%

Kinds of Research Used in Publications

The reviewers also searched for the kind of research conducted according to the following areas: theoretical, qualitative including case study, quantitative, combined quantitative and qualitative or uncertain. The reviewers had received previous training in this kind of search and have published using electronic and manual search strategies (O'Connor et al., 2002; O'Connor et al. 2001). Table 3 presents the types of research designs used on spirituality and health by Canadian

O'Connor, T. (2006), Canadian spirituality and health: A pastoral care and counselling perspective, *Counselling, Psychotherapy, and Health*, 2(1), 20-29, April 2006.

chaplains, pastoral counsellors and/or pastoral theologians in the five Journals. The most frequent for of research is qualitative research including case studies which is 48%. This is followed by more theoretical or hermeneutical research design (41%). Last is quantitative (07%) and combined quantitative and qualitative research (04%). Certainly, the tradition of Biblical, systematic and historical theology is more hermeneutical in design. This has carried over to pastoral theology. The clinical nature of chaplaincy and pastoral counselling with its interview method makes an easy fit with qualitative research. Surprisingly, qualitative research has surpassed hermeneutical or more theoretical research design.

Table 3: Types of Research done by Canadian authors in the five Journals.

Types of Research	Number = 52 (%)
Qualitative including case study	25 (48%)
Quantitative	4 (.07%)
Combined Qualitative and Quantitative	2 (.04%)
Theoretical or Hermeneutical	21 (41%)

Who is doing the research

The search of the Journals also indicates some researchers in Canada are in the area of spirituality and health and work from a pastoral care and counselling perspective. These include Deborah Everrett, Gilles Fortin, Terri Lynn Gall, Fred Konig, Pam McCarroll, Elizabeth Meakes, Augustine Meier, Marie-Line Morin, Thomas St. James O'Connor, Kathleen O'Neill, Carol Penner, Martin Rovers, Peter VanKatwyk. This list is not exhaustive but indicates a number of researchers across the country from the English and French sectors.

Implications and Suggestions

The number of publications by Canadian chaplains, pastoral counsellors and pastoral theologians in the area of spirituality and health in the five journals is small. When this is compared to what is published by non-theologically based researchers, the small number gets even smaller (O'Connor et al., 2002). The study on Canadian chaplains' experiences of spiritual assessment tools indicates (O'Connor et al., 2005) that Canadian chaplains prefer to use their own informal tools that they have created from their clinical ministry. They do not proceed to publish these home-grown tools. Research and publication are not strong values among Canadian clinicians in pastoral care and counselling. Service to clients and patients is the more dominant value amongst clinicians. When one moves to the theological school and university, there is more publication. When one examines the list of researchers who publish (see above), the vast majority belong to theological schools and universities. This reality among Canadian chaplains and pastoral counsellors underlines the differences between the academy and clinical world. John Ralston Saul (1999) believes that an apt metaphor for the Canadian people is Siamese Twins. Canada is made up of three founding nations (French, English and Native) that are joined together. Saul

O'Connor, T. (2006), Canadian spirituality and health: A pastoral care and counselling perspective, *Counselling, Psychotherapy, and Health*, 2(1), 20-29, April 2006.

points out that there is always the temptation to split the Siamese twins. Similarly in Canada, there is both the academy and the clinical world in pastoral care and counselling. One temptation is to separate them. The other challenge is to have both work together for mutual benefit. How can the theological schools and the hospitals and pastoral counselling centres work together to provide the best spiritual care for clients?

In examining the types of research outlined in this study (Table 3), the percentage of qualitative studies including case study is 48% and the percentage of qualitative studies including hermeneutical is 41%. Quantitative research is minimal. Canadian chaplains and pastoral counsellors prefer the more 'soft' kinds of research that are more adapted to the clinical environment. Most chaplains and pastoral counsellors are not familiar with quantitative research methods. Few theological schools even offer a course on research methods that include quantitative research. This is an area of further growth.

Some bright spots exist in the Canadian experience. One is the Canadian Association for Pastoral Practice and Education (CAPPE). CAPPE combines both pastoral care and counselling in one association and utilizes both of these streams in pastoral education. CAPPE is bilingual involving Anglophones and Francophones. Certainly, there have been many tensions between the various groups in CAPPE. However, as Michael Ignatieff (2000) and John Ralston Saul (1999) note, as typically Canadian, there has been much compromise and give-and-take to make the union work.

Another bright spot is the development of the Society for Pastoral Counselling Research (SPCR). This society is over ten years old and is bilingual. This society is designed to encourage research and publication in the area of pastoral care and counselling. Like CAPPE, it holds an annual conference. SPCR, under the guidance and encouragement of its founder, Augustine Meier, has published the proceedings of its conference in four books and in various peer reviewed journals. In truly Canadian fashion, SPCR has made an informal agreement to work with CAPPE to encourage research and publication in the field of pastoral care and counselling.

A third bright spot is *Pastoral Sciences/Sciences Pastorales*. This bilingual journal is peer reviewed and brings together research written from both the academic and clinical perspectives. Most of the authors are Canadian. However, authors from other countries, especially the United States, also publish articles in this Journal. Many of the presentations from SPCR are published in the Journal.

A fourth bright spot are various programs that have attempted to integrate academics, clinical work and research. St. Stephens' theological school at the University of Alberta is working with the Edmonton hospitals and pastoral counselling sites in combining academics and clinical work through Supervised Pastoral Education. Saint Paul University in Ottawa offers an MA in pastoral ministry. This masters level program is bilingual (French and English) and includes clinical placements in the Ottawa hospital as well as pastoral counselling. The University of Sherbrooke offers a masters program in French in pastoral counselling. This program includes clinical work, academics and research. Waterloo Lutheran Seminary offers an MTS, MTh and DMin in

O'Connor, T. (2006), Canadian spirituality and health: A pastoral care and counselling perspective, *Counselling, Psychotherapy, and Health*, 2(1), 20-29, April 2006.

pastoral counselling and a graduate Diploma in Spirituality in a Healthcare Setting. These graduate programs are connected to St. Joseph's Healthcare system and Cambridge Memorial Hospital. In the residency program at St. Joseph's, residents are required to take a graduate course in research and design a research project based on their clinical assignment that is presented at the SPCR conference in May.

A fifth bright spot is a forthcoming book titled *Spirituality and Health: Multidisciplinary Explorations* edited by Augustine Meier, Thomas St. James O'Connor and Peter VanKatwyk (2005). The book emphasizes spiritual care from both the faith and research paradigms. Chapters are authored and co-authored by researchers and clinicians from a variety of disciplines and a variety of faith groups in Canada: pastoral theology, family medicine, occupational therapy, physiotherapy, chaplaincy, pastoral counselling, oncology, congregational ministry, psychology, Native spirituality, Islam, Christian, etc. This book provides quantitative, qualitative and hermeneutical research in underlining an evidence-based approach. Most importantly, theology and the paradigm of faith are part of the partnership. As indicated above, most of the research and publication on spirituality and health stems from the research paradigm often neglecting the faith paradigm. This book presents ideas and evidence from both paradigms. The book focuses on those partnerships and in truly Canadian style gives no definitive answer but rather offers explorations.

A sixth bright spot between the faith and research paradigms in Canada is shown in a recent study of Canadian chaplains' experiences of spiritual assessment tools (O'Connor et al. 2005). In the study, none out of a sample of 101 said that they always used a spiritual assessment tool that has been published. Many commented on using a more informal, narrative approach that was not rigid. There was lots of criticism of published tools and the chaplains and pastoral counsellors expressed uneasiness with the research paradigm. However, they also saw a need for such an approach. Twenty-nine (30.5%) have created their own tool. These tools created by the chaplains would fall somewhere between the research and faith paradigms. These unpublished tools are associated with the hospitals in which they originated: The Health Care Corp, St. John's Newfoundland; the Ottawa Hospital; St. Michael's Hospital, Toronto; Scarborough Grace Hospital (mentioned twice); General Hospital in Guelph, Ontario; St. Mary's Hospital in Kitchener, Ontario; Riverview Health Center in Winnipeg, Manitoba (mentioned three times); Alberta Hospital, Edmonton (mentioned twice); and the Vancouver Hospital. These unpublished spiritual assessment tools were based on a variety of ideas including Paul Pruyser, George Fitchett, Paul Jones, Christina Pulchaski and James Fowler. The Enneagram and Myers-Briggs are also mentioned as the basis for informal assessments and conversations in ministry. Chaplains are not satisfied with existing tools and create their own that are more user friendly.

Encouraging research by both academics and clinicians is important for the development of the field and profession. One way to increase the amount of research is for clinicians to take a research course as part of the CAPPE training. The course could be given as a pre-institute at the annual CAPPE Conference. A second way is to join SPCR (The Society for Pastoral Counselling and Care Research) or other pastoral research societies and be immersed in the research culture.

O'Connor, T. (2006), Canadian spirituality and health: A pastoral care and counselling perspective, *Counselling, Psychotherapy, and Health*, 2(1), 20-29, April 2006.

A third way is to develop a research cluster in one's institution, be it hospital or agency, to discuss a research project and be supportive to each other. Fourth, research ought to be done with the intent of publication in a journal. Finally institutions need to be encouraged to value research in spiritual care, particularly if research is a component of the mission statement at the institution.

References

Barbour, I. (1997). *Religion and science: Historical and contemporary issues* San Francisco: Harper-Collins.

Baptiste, Sue (2005) Spirituality in occupational therapy. *Spirituality and Health: Multi-Disciplinary Explorations* A. Meier, T. O'Connor and P. VanKatwyk (eds.) Waterloo, On: Wilfrid Laurier University Press, 139-148.

Clarke, Beverley et al., (2005) Measuring and assessing suffering in arthritic patients *Spirituality and Health: Multi-Disciplinary Explorations* A. Meier, T. O'Connor and P. VanKatwyk (eds.) Waterloo, On: Wilfrid Laurier University Press, 227-264.

Clebsch, W. and Jaeckle, C.R. (1967). *Pastoral care in historical perspective* New York: Harper.

DiCenso, A., Collum, N., and Ciliska, D. (1998). Implementing evidence-based nursing: some misconceptions *Evidence-Based Nursing* 1: 38-39.

Gerkin, C. (1997). *Introduction to Pastoral Care* Nashville: Abingdon Press.

Holifield, E.B. (1983). *A history of pastoral care in America* Nashville: Abingdon Press.

Ignatieff, M. (2000) *The Rights Revolution* Toronto: Anansi

Koenig, H. (1997). *Is religion good for your health: The effects of religion on physical and mental health* New York: Haworth.

Koenig, J., McCullough, D. and Larson, D. (2001). *Handbook of religion and health* New York: Oxford University Press.

Levin, J.S., Larson, D.B., and Puchalski, C.M. (1997). Religion and spirituality in medicine: Research and education, *JAMA* September 3, 278(9), 792-793.

Levitt, C. (2005) Spirituality and Family Medicine. *Spirituality and Health: Multi-Disciplinary Explorations* A. Meier, T. O'Connor and P. VanKatwyk (eds.) Waterloo, On: Wilfrid Laurier University Press, 61-72.

O'Connor, T. (2006), Canadian spirituality and health: A pastoral care and counselling perspective, *Counselling, Psychotherapy, and Health*, 2(1), 20-29, April 2006.

MacNeill, T. (1951). *A history of the cure of souls* New York: Harper.

McCarrol, P., O'Connor, T., & Meakes, E. (2005) Assessing plurality in spirituality definitions. *Spirituality and Health: Multi-Disciplinary Explorations*, A. Meier, T. O'Connor and P. VanKatwyk (eds.) Waterloo, On: Wilfrid Laurier University Press, 43-59.

Meier, A., O'Connor, T. & VanKatwyk, P., (eds.) (2005) *Spirituality and Health: Multi-Disciplinary Explorations*, Waterloo, On: Wilfrid Laurier University Press.

O'Connor, T., and Meakes, E. (1998). Hope in the midst of challenge: Evidence-based pastoral care, *The Journal of Pastoral Care* 52(4) Winter, 359-368.

O'Connor, T., Koning, F., Meakes, E., McLarnon-Sinclair, K. Davis, K & Loy, V (2001) Quantity and Rigor of Qualitative Research in Four Pastoral Counselling Journals, *The Journal of Pastoral Care* 55, 3, 271-280.

O'Connor, T. (2002). Is evidence-based spiritual care an oxymoron? *Journal of Religion and Health* 41 (3), 253-262.

O'Connor, T., McCarroll-Butler, P., Meakes, E., Jadad, A. and Davis, A. (2002). Review of quantity and types of spirituality research in three health care databases (1962-1999): What are the implications for health care ministry? *The Journal of Pastoral Care and Counselling* 56(3), 227-232.

O'Connor, T. and Meakes E. (2003). Religion and health research: Critique of critique is not well balanced, *The Journal of Pastoral Care and Counselling* 57(1), 85-6.

O'Connor, T., and Meakes, E. (2005) Toward a New Paradigm Reconciling Faith and Research. *Spirituality and Health: Multi-Disciplinary Explorations* A. Meier, T. O'Connor and P. VanKatwyk (eds.) (Waterloo, ON: Wilfrid Laurier University Press. 11-22.

O'Connor, T., O'Neill, K., Meakes, E, Penner, C., Davis, K., & Stauldinen, G. (2005) Not known, not used and needed: Canadian chaplains experiences of published spiritual assessment tools. *The Journal of Pastoral Care and Counselling*, 59, 1-2, 97-108.

Saul, J.R. (1997). *Reflections of a Siamese Twin: Canada at the End of the Twentieth Century* Toronto: Penguin.

Sloan, R., Bagiela, E., and Powell, T. (1999). Religion, spirituality and medicine *The Lancet*, 353, February 20, 664-667.

O'Connor, T. (2006), Canadian spirituality and health: A pastoral care and counselling perspective, *Counselling, Psychotherapy, and Health*, 2(1), 20-29, April 2006.

Sloan, R., Bagiella, E., VandeCreek, L., Hover, M., Casalone, C., Hirsch, T., Hasan, Y., Kreger, R., Poulos, P. (2000). Sounding board: Should physicians prescribe religious activities, *The New England Journal of Medicine*, 342(25), June 22, 1913-1916.

VandeCreek, L.(ed.) (1995) *Spiritual Needs and Pastoral Services* Decatur, Georgia: The Journal of Pastoral Care.

VandeCreek, L. (1999). Should physicians discuss spiritual concerns with patients? *Journal of Religion and Health* 38(3) Fall, 193-201.

VanKatwyk, P. (2003) *Spiritual Care and Therapy: Integrative Perspectives* Waterloo, ON: Wilfrid Laurier University Press.

Walsh, F. (ed.) (1998) *Spiritual Resources in Family Therapy* New York: Guilford Press.