

# How Can I Provide Cross-Cultural Spiritual Care?

Workshop Global: Friday September 19, 2008: 2:45-3:45 PM: Lecture Objectives (3-5):

- 1) Understanding and practicing the spiritual history
- 2) Review how to recognize spiritual need
- 3) Providing spiritual care for non-Christian patients
- 4) What would spiritual care look like on a short-term healthcare mission trip?

## I. What Is Spiritual Care?

### A. Spiritual care is NOT just “sharing the Gospel”

1. Spiritual care, to be caring, must meet patient needs
2. Spiritual Care is a caring heart expressed through
  - a) Attentive presence
  - b) Quality health care
  - c) Actions and words carrying God’s love and grace
3. Identifying and strengthening the patient’s **resources**
4. Helping patients manage their **burdens**
5. Helping patients clarify their goals and walk their pathway
6. **NOTE:** This is not specifically Christian
  - a) It is appropriate for any patient, regardless of worldview, religious persuasion or without a belief or interest in the supernatural
  - b) It’s primary goals are patient focused—meeting patient needs
  - c) Whether or not it becomes Christian depends on the Holy Spirit, not on us

### B. We initiate spiritual care to find evidence of the Holy Spirit at work

## II. Who is the patient/client?

Medical-Spiritual Reality	Cultural Reality
What do you see?	Do you see the family, tribe and national culture?
What is the meaning of this illness?	How do the family and culture define the illness?
What are the patient’s resources and burdens?	You see these from your perspective. Recognize those placed by the culture and family.
What are the expectations?	What do you expect to be the outcome? What does the family and culture expect for an outcome?
How will you learn about all of this?	

### A. Listening and Hearing

Medical-Spiritual Reality	Cultural Reality
Respond from “inside” the patient’s story	What is the patient saying?
Hear gently with love, without judgment	What do the words mean?
Reach out and “touch” compassionately	What is culturally appropriate touch?
Etiology and pathogenesis of illness	Meaning of illness; role of fear; How illness relates to patient’s personal Hx; Etiology of illness: Role of others; Role of spirits

**B. Hear the lament:**

Medical-Spiritual Reality	Cultural Reality
Hear the patient's "lament"	What are patient laments?
The Holy Spirit will identify the lament	How does the lament fit into the culture? Naming the lament gives the patient power over it The lament is culturally specific

**C. Speaking Words**

Medical-Spiritual Reality	Cultural Reality
From whose agenda?	What do your words mean to the patient?
Don't try to "fix" the patient's lament!	Learn the proper response to patient's lament Christians in the culture Non-Christian's in the culture! Experts in the culture

**D. Utter words: so the patient "becomes homesick for what you have"**

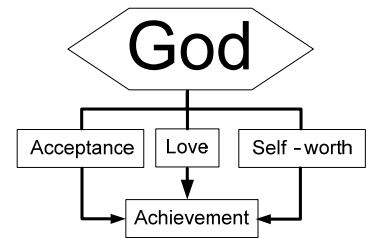
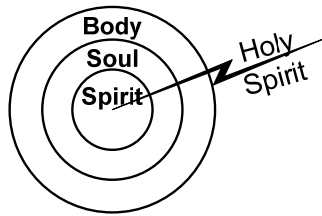
**III. Understanding Spiritual Care:**

**A. How Did We Get to This Mess?**

Why are things the way they are?

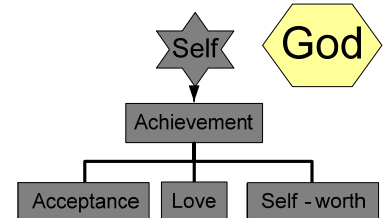
**B. The Gift of Creation:**

- We were created to be in harmony with God
- His Spirit joined with the human spirit supplies our needs for acceptance, love and self-worth



**C. The "Fall": upside down—hopelessly fractured**

- Broken relationships with God; thus, no source of self-worth, love and acceptance
  - Exploit our physical/sexual, emotional, intellectual and social aspects
  - Instead, we become self-centered, manipulative, unable to give or receive love
- We seek to create our own acceptance, love and self-worth but nothing works right. We are chronically stressed and hide from the pain in alcohol, drugs, sex, work, etc.



**D. Dynamics of Brokenness: new worldview**

- With the "Fall" humans moved our trust from God to self and created a new worldview with its beliefs and values

	Created: Cooperative	The fall: Competitive
<b>Worldview</b>	God-centered	Self-centered
<b>Belief:</b>	Trust & cooperation	Trust only self
<b>Value</b>	Relationships &	What enhances me; exploitation

2. With the fall, humans moved from transparent openness TO guilt and shame blaming both spouse and God

**E. We bought the enemy's lie<sup>1</sup>:**

1. Living THE Lie: performance + opinion of others = self-worth
  - a) The lie promised to make life beautiful
  - b) In fact, it put us on a treadmill of endless hopelessness
2. Types of lies:

Name of Lie	False Belief	Consequences
Performance Trap	Must excel	Fear of Failure
Approval Addiction	Must be approved	Fear of Rejection
Blame Game	If fail→ unworthy	Fear of Punishment
Shame	I cannot change	Fear of exposure

3. How the lie manifests in culture?
  - a) Role of power, sex, money, etc.,
  - b) Striving to achieve and get approval
  - c) Accepting my status as punishment, hiding, shamed

**F. Dynamics of spiritual care—dealing with the lie and unfulfilling demands<sup>2</sup>**

Medical-Spiritual Reality	Cultural Reality
Crises and resultant stress	Poverty, demeaned by others, without security Fitting or rising above your given role Illness, stigmatization, discrimination, etc.,
Stressors	Culturally defined, rooted in tradition and myth
Coping	<b>Primary appraisal:</b> how does stress affect my significance <b>Secondary appraisal:</b> evaluation of resources and burdens Resources: helpful attributes Burdens: unhelpful attributes <b>Tertiary appraisal:</b> face crisis or bow to it?

**G. Stress**

1. Definition: anything that threatens my significance
2. Occur in a cultural setting
  - a) Defined by family/tribe
  - b) Hear to differentiate spiritual and cultural issues
3. Living the lie and life is in disarray with confused goals & pathways
4. Resources and burdens are culturally defined and have to do with
  - a) Personal history: successes, strengths, failures, etc.,
  - b) Perception of expectation and available help→ defined by family
  - c) These are spiritual issues

<sup>1</sup> Robert S. McGee, *Search for Significance*, revised ed., 1998. W Publishing Group, Nashville, Tenn.

<sup>2</sup> Pargament, Kenneth I. *The Psychology of Religion and Coping*, The Guilford Press, New York, 1997 (for the rest of this section).

5. How you can differentiate cultural issues from spiritual issues:
  - a) You will need strong support from
    - (1) Someone who understands family dynamics and culture's expectations
    - (2) Someone in the culture who understands Biblical spirituality
    - (3) Nationals may try to manipulate you to achieve personal status!
  - b) Question, learn the reasons for the "norms," i.e. expectations
  - c) Weigh the responses: How would these affect you?
  - d) Persist, question → How do their responses differ from yours?
    - (1) If differ, how do they handle the consequences?
    - (2) If not different, clarify the words and their meaning, etc.,
    - (3) Clarify: What is successful coping?
    - (4) How frequently is coping successful?
  - e) Acquire an excellent translator, even if non-Christian.
    - (1) You need to talk extensively with selected patients to deepen your understanding
    - (2) Test what you learn as you talk to subsequent patients
6. Identify positive and negative spirituality:
  - a) Spirituality: searching the sacred for meaning & hope
  - b) How does their negative spirituality differ from yours?
    - (1) What is its source?
    - (2) How is it practiced?
    - (3) Who opposes it?
  - c) Clarify their positive spirituality
    - (1) Self-worth, love and acceptance are fundamentally spiritual; they are God's gift!
    - (2) As God's precious child—hope, God is with us
7. Coping
  - a) Without God's gift of Biblical spirituality, people seek to preserve significance by multiple coping mechanisms
  - b) What are culturally approved coping mechanisms vs. unapproved
    - (1) Why are the accepted ones accepted?
    - (2) Evaluate the probable consequences of acceptable coping
  - c) What happens when coping is not successful? How often does this occur?

## H. Coping in times of stress<sup>3</sup>

1. CONSERVATION: keep pathway and values (as per culture)
  - a) Initial response to stress → maintain the familiar
  - b) "Keep doing the same thing!"
2. TRANSFORMATION: change values or/and pathways
  - a) Need to change values and/or pathways when stress exceeds ability to conserve
  - b) Mandates change in goals and/or pathways
  - c) Difficult to do and associated with anxiety
  - d) May go against culture!
  - e) Spiritual strength clarifies, gives courage, direction and strength

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<sup>3</sup> *Ibid.* Pargament, Kenneth I.

## IV. Conservation and Transformation

		Destinations of Significance	
		Conservation of Ends	Transformation of Ends
Pathways to Significance	Conservation of Means	<b>Preservation</b>	<b>Re-evaluation</b>
	Transformation of Means	<b>Reconstruction</b>	<b>Re-creation</b>

### A. Transformation requires spiritual clarity

1. What does culture say about this?
2. What acceptable options are open? Are these useful?
3. Evaluate them; some may be very destructive

### B. To Restore Significance

1. **Preservation:** first: **conserve** values/pathways
2. **Reconstruction:** change pathways
  - a) Necessary to **↑** resources and **↓** burdens
3. **Re-evaluation:** change goals
  - a) Ends → not achievable
  - b) Time limited and requires change of pathways (Re-creation)
4. **Re-creation:** change goals & pathways
  - a) These demand major changes of worldview
  - b) Needs increased spiritual support to be successfully done

## V. Spiritual Care: Spiritual Diagnoses:

### A. Etiologic diagnosis: who is trusted

### B. Pathophysiologic diagnoses: the lie trusted

1. Performance trap: *fear of failure* → the strong one
2. Approval addiction: *fear of rejection* → people pleaser
3. The blame game: *fear of punishment* → accuser
4. Shame: *fear of exposure* → withdrawn

### C. Laments: soul's anguish

1. **Laments:** symptoms of spiritual disease
2. Sadness, fear, abandoned, angry, guilt, shame, etc.
3. Symptoms are produced by the laments, whether directly or secondarily
  - a) As we listen the Holy Spirit helps identify the lament
  - b) Lament: focuses on the current illness in the setting of life's story
    - (1) Meaning in culture and family system
    - (2) Meaning and significance of present illness
    - (3) Blame:
      - (a) Personal failures with secondary blame and hopelessness
      - (b) Failures of others: i.e. abandonment, betrayal, anger, bitterness
    - (4) Unfairness of life, fearful, uncertain, etc.,
  - c) As you listen to the patient's clinical history → hear the lament
  - d) Naming the lament gives patients power over the lament

## VI. Spiritual Healing

### A. Dynamics: A changed worldview

1. Worldview → cooperative
  - a) Belief: trustworthiness of God
  - b) Values: relationships and truth
2. Relationship with God transformed to trusting
  - a) Growing in knowledge of God
  - b) Growth in trust of God

### B. God heals each of the lies:

Because of	You	You have
<b>Justification</b> <i>(Performance trap)</i>	are completely forgiven & fully pleasing to God	no fear of failure
<b>Reconciliation</b> <i>(Approval addiction)</i>	are totally accepted by God	no fear of rejection
<b>Atonement</b> <i>(Blame game)</i>	know you are unconditionally loved by God; no hell	no fear of punishment
<b>Regeneration</b> <i>(Shame)</i>	are a new person complete in Christ	no fear of exposure

## VII. Spiritual Care: Spiritual Healing

### A. Only the Holy Spirit can help a patient:

1. Move closer to God
2. Internalize God's unconditional personal love, acceptance and complete forgiveness
3. Trust God's goodness and faithfulness

### B. Clarify Who God is:

1. Creator who created and knows each person intimately
2. Father who loves and accepts each person
3. Savior who gave Himself to rescue us because we were lost and destined to die
4. God-man Who came to this world, lived as a man that He might reveal God and call us to Him
5. Died the most horrible of deaths to save us from our entrapment by sin

### C. Past: forgiveness

### D. Present:

1. Recognize and identify the patient's lament
2. Help find successful coping with life's stresses
  - a) With repentance and confession come forgiveness
  - b) With forgiveness → freedom from past
  - c) Able to receive and give love
3. Rx etiology & pathophysiology

**E. Future:**  
1. Patients receive meaning, hope & courage; change behaviors, care for self

**F. Begin where the patient is:**

1. Lament (discussed above)
2. Burdens and resources:
  - a) What is working for the patient: resources (are they valid?)
  - b) What does the patient want—need: resources (where looking?)
3. Where is the Holy Spirit working?
  - a) Looking for God, spiritual strength, hope, courage
  - b) Troubled about behaviors, fearful of punishment
  - c) Values goodness, justice, beauty, hope, meaning
4. Look at the intersection of lament and needs for the evidence of the Holy Spirit's work
5. Follow what the Holy Spirit guides you to do.

### **VIII. What would Spiritual Care look like on a short-term healthcare mission trip?**

**A. Touching the patient, bringing hope**

**B. Helping the patient realize that there is an “Ultimate Being” Who knows him, loves and cares about him—in fact, would like to help him**

**C. Helping the patient internalize a sense of preciousness**

**D. Speaking in some way about the character of God:**

**E. Differentiate:**

1. When physical and spiritual care are separated, spiritual care is usually generic, done out of duty and awkward thus confusing the patient
2. When spiritual care is integrated into all aspects of health care it is patient specific, identifies and meets specific needs so that patients receive the spiritual care and moves closer to trusting God