ASSESSING SPIRITUALITY

Healthcare Organizations Must Address Their Employees' Spiritual Needs

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ur mission as healthcare workers and leaders is to remove or minimize pain and suffering in our patients. We are devoted to identifying healthcare needs and meeting them. We usually address these needs proactively, even aggressively.

However, we also face another patient population—our own colleagues. How do we, and other healthcare organizations, respond to our employees and associates undergoing crises about the meaning and purpose of life? Before we answer this question, let us first consider the case histories of Frank and Natalie. Their pain epitomizes a growing challenge that Catholic providers should be prepared to meet in our changing healthcare environment.

FRANK: PHYSICAL AND MARITAL DISTRESS

Frank is a 41-year-old chief operating officer (COO) of a major acute care hospital in a large midwestern city. He has been very successful in his career, moving quickly up the management

and administrative ladder. Married to Elizabeth and the father of three children, he lives in an exclusive neighborhood in a beautiful home with scenic views of the suburban countryside. The children attend private schools, and Elizabeth works part-time as a substitute teacher at the local parochial school. They are both active in community work.

Neither feels comfortable with the time they spend alone together, however, and although they are doing well economically, their relationship is deteriorating. Both sense they are drinking too much. Frank is anxious to go to work in the morning and stays late at night. As the COO, he receives much attention and support at work. Although Elizabeth understands his responsibilities and appreciates the family's lifestyle, she has become suspicious of Frank's relationships with women.

Frank is plagued by physical complaints: gastrointestinal disorders, low back pain, and severe headaches. During these spells, he becomes resentful of demands from Elizabeth and his chil-

respond to their managers, physicians, and other employees experiencing deep pain about the meaning and purpose of life. Initial approaches to people in spiritual distress include "tough love," codependence, and assistance programs, along with prayer and compassion.

But a different approach that gives people the space and freedom to pursue their spiritual search and ask questions to discover deeper meaning in life may be more effective. It allows them to accept that they are where they need to be on their spiritual journey, even if that place is painful.

Healthcare organizations can, through their structures and culture, create environments that

promote this spiritual work. The entire organization must be spiritually grounded. Organizations can develop specific programs to address employees' spiritual yearnings, including:

- · Private spiritual direction or companionship
- Formal mentoring
- · Renewal days or retreats
- · Spirituality programs for professionals

Organizations must consider spirituality in recruiting, uphold policies on spirituality, and ensure physicians receive the same spiritual support as other employees. Resources should be allocated for expanded spiritual services, quiet places for reflection, meditation and related classes, traditional retreats, and qualified personnel.

dren. Frank wonders privately whether he is becoming addicted to some of his pain medications.

NATALIE: WORK AND EMOTIONAL STRESS

Natalie is a highly esteemed pediatrician; physicians and nurses take their children to her because they admire her work and compassion. She always wanted to be a "baby doctor." Divorced for three years, she has two

daughters, one of whom has an eating disorder.

growth.

Recently Natalie has been gripped with a profound sense of loneliness and sadness. After years of feeling confident in her abilities as a physician, she finds herself questioning her skills and decisions. Continual fatigue makes her feel like she is climbing a mountain with a 150-pound pack on her back. She is eating and drinking more than usual, and all she wants to do is sleep. Her physician friends recommend Prozac, and her women friends suggest a trip to Florida. She has started going to church again but sits in the pew fighting back tears at her sense of meaninglessness in her life.

CONVENTIONAL APPROACHES

You probably know someone like Frank or Natalie. Perhaps you have felt as they do. Not completely physical or emotional, their condition is spiritual discomfort, a feeling of living without meaning and purpose.

As healthcare providers, we often initially respond in the following ways to help individuals such as Frank and Natalie in our organizations.

- Apply "tough love." We challenge an individual such as Natalie to reconsider all she has achieved: status, money, power, and an opportunity to serve. Rather than feeling sorry for herself, we say, she should appreciate her good fortune and responsibilities and either reframe her negative thinking or resign.
- Codependence/support for the dysfunctional behavior. The organization may send the troubled person to yet another conference or management retreat at a plush resort or organize a

Another approach sees a person's stress as a starting point for

counseling program for spouses of executive and middle managers.

- Employee assistance programs. Courses in time management and programs for impaired professionals are commonly offered.
- Compassion and prayer. Hoping to help colleagues, leaders rely on prayers and compassion to ease their pain.

These approaches convey the need to support and assist per-

sons unable to deal with their distress. But all these efforts are external to the person, directed at the individual's deficits and current needs.

A SPIRITUAL APPROACH

In another approach, paradoxical in nature, nothing is done other than to give individuals the space and freedom to be wherever they need to be and to do whatever the situation calls them to do. Specific programs to assist persons with this approach are discussed later. Acknowledging the person's distress as a starting point for growth, this response honors pain, protects discomfort, and listens to the person's feelings. This spiritual approach creates an opportunity for the individual to ask two important and interrelated questions: What is life asking of me? and What am I asking of life?

A person must ask these questions to discover deeper meaning in life. Using these questions as a prism through which to assess life's experiences helps the individual to consider certain spiritual lessons that may apply to a spiritual journey.

Spiritual Lessons To take a spiritual approach requires individuals to recognize that they are exactly where they need to be. This means that they must accept their spiritual distress as necessary in their search for meaning and purpose in life. They may not like where they are; they may want to change or remove the disturbing circumstances and leave a marriage or change a job. However, framing the situation in these terms helps individuals mobilize efforts to change the external factors and ignore their internal state of

awareness. By accepting that they are where they need to be, individuals open themselves to the possibilities for change from within.

Relational power and presence represent the capacity to nurture and sustain personal and professional relationships. Individuals experience this presence as a process of giving and receiving, of influencing and being influenced. It is a two-

way street. Unilateral power reflects a one-way application of power to influence, control, or change the other person. Unilaterally powerful people believe that loss of control is a failure and that being influenced or affected by experience is a sign of weakness. Relationally powerful people, however, can ask these questions: What is this experience asking of me? What is this discomfort, fear, or anger telling me? Experience is not simply an external event or threat, but an opportunity for people to give meaning to what is affecting them. Relationally powerful people demonstrate an intense interest in and curiosity about life and its potential regardless of the circumstances.

Meaning surfaces as a result of standing still and consciously connecting with the power and energy of the soul, or the spiritual self. The challenge is making oneself stand still in uncomfortable times and places. However, meaning only comes to people when they are sufficiently selfaware and open to receive meaning as the energy and power of their spiritual life. By accepting the truth that they are where they need to be in their lives and responding to their experiences with relational power, people can interpret the meaning of an experience. Their spiritual self becomes the vehicle through which they can listen to what life is telling them.

In their personal and professional lives, people struggling with spiritual distress present healthcare organizations with several challenges. How do we as Catholic providers recognize the presence of spiritual distress or a colleague's unfulfilled yearnings for spiritual development?

Organizations

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pede spiritual work.

What is the responsibility of a Catholic healthcare institution? What should be done, what is being done currently, and what more could be done for these individuals?

Organizations may not directly meet the spiritual needs of their employees, but they create environments that enhance or impede their people's inner spiritual work. See the **Box** on p. 23 to determine how well

your organization integrates spiritual needs into its structure. Ask the question, How do I experience my own organizational culture?

MISSION AND SPIRITUAL DEVELOPMENT

Catholic healthcare organizations have a responsibility to their associates, whether physicians, managers, clinicians, or housekeepers, to respond to their need for spiritual development for the following reasons:

- In his teachings and through his example, Christ calls Catholic providers to a ministry that addresses the physical, emotional, and spiritual health of coworkers, medical staffs, and board members, as well as patients and communities.
- High-quality services cannot be delivered by organizations or people who are not spiritually grounded. Also, it is not enough to have a select group of people in mission effectiveness or pastoral care who are presumed to be "spiritually fit." Burnout distances caregivers from the recipients of their care, and the entire organization must be committed to employees' spiritual needs to assist in preventing these negative responses. Leadership without meaning and purpose can focus on the technical features of institutions, resulting in a unilateral response to internal and external challenges when relational power is needed.
- An intuitive application of the framework outlined in the Box may identify the opportunity for an organizational response to spiritual needs. However, the Franks and Natalies experiencing distress may not realize that they are on a spiritual

journey and may not allow themselves to attend to their own pain or relate to their work situation or family. Healthcare organizations know they can address employees' healthcare needs through smoking cessation clinics, exercise facilities, and stress management classes. Spiritual distress and yearning call for an organizational response as well.

The opportunity to provide spiritual support for employees and associates is challenging. Organizations can easily become confused about the differences between spirituality and religion, between a call to develop a context for a spiritual practice and a sincere desire to spread the Good News. The critical difference is that spirituality can be described as a search for meaning and purpose that is developmental in nature. A person can clarify the different roles of spirituality and religion in this way: My religious tradition, with its symbols, teachings, and liturgical expressions, is meant to serve my spiritual nature. Therefore organizational leaders must be well integrated spiritually to undertake the challenge of creating a space where people can develop their own style and practice of spirituality.

Some Catholic organizations have been doing this work for decades and, more recently, have been developing specific programs directed toward addressing employees' spiritual yearnings. Private Guidance An informal but effective structure has been to provide private spiritual direction or a form of spiritual companionship under the auspices of the pastoral care/mission effectiveness program. For many years, employees and physicians have sought out this support when they became aware of their need for spiritual guidance. This service depends on the availability of qualified professionals, usually women and men religious, who become known through word of mouth.

Formal Mentoring Programs These programs relate mission values to basic spiritual concepts. Lay associates are recruited to these programs to extend the presence of sponsoring communities. Along with a mission values orientation, participants are offered opportunities to identify and develop a spiritual practice that fits their unique situation and capabilities.

Renewal Days or Staff Retreats Employees spend time away from the workplace in remote settings for reflection and inspiration under the guidance of facilitators. Usually providing more didactic discussion than time for reflection, these programs increase awareness of spiritual matters,

especially as they relate to the sponsor's traditions. For example, Vincentian or Franciscan spirituality may be offered so that participants can better understand the healthcare mission, rather than adopt a particular spiritual practice.

Spirituality Programs for Professionals These have been developed to address the particular orientation of nurses or physicians. For example, two programs are offered under the auspices of the Catholic Health Association of Wisconsin. RISEN (Re-Investing Spirituality and Ethics in Networks) was initiated in 1985 and includes a three-part program of mentor training, an intensive orientation and practicum in personal spirituality, and a seminar in relational ethics. Medicine in Search of Meaning is a weekend retreat for physicians that

ASSESSMENT OF HOW WELL AN ORGANIZATION'S CULTURE MEETS EMPLOYEES' SPIRITUAL NEEDS

1.	Assess where your	organizatio	n is on a	scale o	of 1 (low) to	10 (high) in
	promoting spiritual	integration	within ea	ach of th	he following	structures:

- Meetings _____
- Board meetings ______
- Performance appraisals ______
- Partnership talks _____
 Strategic planning _____
- Budgeting process______
- Marketing strategies______
- Educational programming _____ Job descriptions ____
 - System level meetings ____

 Leadership styles ____
 - Grievance procedures _____
 - Grievance procedures ____

 Hiring practices_____
 - Termination practices _____

II. Assess where your organization falls on a continuum ranging from complete spiritual disintegration to full spiritual integration, according to your experiences:

Spiritual Disintegration Hopelessness Unsympathetic Unilateral power Unforgiving Spiritual Integration Hopefulness Empathy Relational power Forgiving

Jnilateral power
Unforgiving
Work as job
Fear
Powerlessness
Harsh
Reactionary
Isolation
Disrespectful

Work as vocation Openness Creativity Merciful Responsive Community Respectful allows participants to reexamine their motivation for entering the medical profession and to consider current barriers to and opportunities for sustaining that drive. Structured with case studies and spiritual lessons, the program assists physicians to rekindle meaning and purpose in their professional and personal lives.

These efforts represent significant organizational responses to

creating environments and cultures where spiritual practice and development can occur. The success of these programs suggests that additional efforts can expand their potential.

Organizations do not need to make people spiritual; spirituality does not develop from the outside. Even though everyone is born with a spiritual nature—a center of personal power—one's spiritual capacity is often hidden, rather like a financial treasure growing in a savings account one does not know one has. Once they discover that they have this treasure, they can access its energy and power.

What types of resources can organizations provide to foster and nurture that spiritual treasure inherent in its employees? How would a health-care organization change if all its people had a clear connection to their source of personal power, their spiritual nature and capacity? This certainly would help physicians, leaders, managers, and employees renew themselves and their commitment to their work.

OPPORTUNITIES FOR SPIRITUAL GROWTH

Healthcare organizations should ask the following questions about their structures and how they relate to issues of spirituality:

- Do recruiting and hiring practices consider the spirituality of candidates for employment, especially in executive leadership positions? Does the organization ask candidates to describe their spiritual practices and what they might need to sustain them?
 - Does the organization uphold a stated policy

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on spirituality, a statement that affirms and supports developing and maintaining a spiritual practice? Are resources allocated for the necessary personnel and programs to implement this policy?

• What type of spiritual support is offered to physicians? Does the organization perceive them as being different and not needing what it offers its other employees?

These questions can

help to identify issues and opportunities within already existing structures for personal and cultural enhancements. More extensive efforts with greater resource requirements might consist of the following efforts for both physicians and organizational personnel:

- Active promotion and underwriting of spiritual direction or mentor services
- Provision of quiet space within or near the institution for meditation, prayer, and reflection
 - Classes on meditation, yoga, or tai chi
- A benefit plan that includes therapeutic massage, integration of body structures, and other physical programs
- An organized weekend or week-long retreats—traditional silent retreats with facilitators in appropriate retreat centers, not golf courses or expensive resorts
- An active, ongoing search for individuals who have a calling to provide spiritual companionship to colleagues, with training and support to extend their ministries

Catholic providers and healthcare employees are exactly where they need to be on their journey toward more spiritually developed and sustaining organizations. It may seem ironic that at a time when organizations are struggling with questions about Catholic identity, their leaders would be called to look inward at the spiritual foundation of their organizations and acknowledge the spiritual needs of all employees and associates. They are where they need to be, however, and accepting this can be the starting point of promoting the spiritual development of their colleagues in need.