

DETAILS OF ENCOUNTER ARE KEY IN TELESPIRITUAL CARE

In a recent issue of *Health Progress*, I wrote, "... systems are turning to technology to extend spiritual care in non-acute settings. While some provide spiritual care over the phone, others use telemedicine to offer a face-to-face encounter between the chaplain and the patient in a rural or remote setting. The ability of chaplains to adapt to these new ways of delivering spiritual care will be critical."¹



BRIAN SMITH

At first glance, "telespiritual care" might appear cold, sterile and incapable of providing warmth, compassion and respect to be conveyed between the professional chaplain and the patient or family members. Some might even think that because this medium does not allow us to touch, it does not meet the criterion of healing as Jesus healed.

But, Jesus also was asked to heal from remote distances. When the centurion with a sick servant tells Jesus it is not necessary to enter under his roof, but to only speak the word of healing, Jesus did not contradict him by saying, "I have to be there in person to bring true healing."² Similarly, when the Canaanite woman pleads with Jesus to cure her daughter at home who is being tormented by a demon, Jesus tells her it will come to pass because of the woman's great faith. "That very moment her daughter got better."³ What lies at the center of Jesus' healing ministry is not the necessity for physical touch, but rather that there be an interior experience, what Pope Francis calls "an inner encounter with Jesus."

On Jan. 24, 2014, Pope Francis delivered a message for the 48th World Communications Day. He revisited a favorite theme of his pontificate: the need for the church to go out of itself and encounter the world where it is. In the context of World Communications Day, he applied this "Theology of Encounter" to communications technology:

How, then, can communication be at the service of an authentic culture of encoun-

ter? What does it mean for us, as disciples of the Lord, to encounter others in the light of the Gospel? In spite of our own limitations and sinfulness, how do we draw truly close to one another? These questions are summed up in what a scribe — a communicator — once asked Jesus: "And who is my neighbor?" (Luke 10:29). This question can help us to see communication in terms of "neighborliness." We might paraphrase the question in this way: How can we be "neighborly" in our use of the communications media and in the new environment created by digital technology? I find an answer in the parable of the Good Samaritan, which also is a parable about communication. Those who communicate, in effect, become neighbors. The Good Samaritan not only draws nearer to the man he finds half dead on the side of the road, he takes responsibility for him. Jesus shifts our understanding: It is not just about seeing the other as someone like myself, but of the ability to make myself like the other. Communication is really about realizing that we are all human beings, children of God. I like seeing this power of communication as "neighborliness."⁴

Applying Pope Francis' concept of neighborliness to the use of telespiritual care, and even more broadly, the use of telemedicine, may help us see how this instrument of communications technology actually can help us to further extend the healing ministry of Jesus. At the heart of neighborliness is the desire to draw near to another and to take responsibility for him or her because I see myself in the person who is suffering. I want that

person to be treated the way I would want to be treated.

On a personal level, if I were a patient in a remote location with few qualified professionals, I would want access to medical and spiritual resources via technology to deal with my illness and/or spiritual distress. I also would want the experience to be one in which I received empathy and reassurance so that I could place my trust in the healers treating me. In short, the encounter would still need to be one in which I felt respected, engaged and heard. I would want the human interaction to be considered as important as the latest medical technology.

An example from the field might further illustrate how important this is. Julie Jones, executive director, mission and ministry, at Mercy in St. Louis, recently said Mercy is developing video conferencing between patients in three of its clinics to two chaplains who are located in remote

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locations. She explained that the technology part is ready, but the process piece is taking time.

“We want to make sure the experience is not sterile and functional,” she said.

“Where can a clinic patient sit and have a spiritual conversation beside an examination room? The setting should be inviting and not sterile,” she added.

Mercy also is considering what kind of professional setting might provide the best backdrop on the computer or tablet screen for the consulting chaplain as he or she talks with a patient or family. Attention to such details of the spiritual care encounter will be an important part of delivery through this new medium.

Marketing research says many people, especially Millennials, prefer to get their medical information from the Internet before they talk to a medical professional. Because the Internet can provide both accurate and inaccurate information, however, online research isn’t enough: a patient still must consult with a professional who can accurately assess, diagnose and treat him or her.

The same might be said of the apparently infinite number of spiritual resources and self-help websites that are appearing every day on the Internet. It can be challenging to know which of those resources are reliable and professionally developed.

My point is many people who are sick and in spiritual distress are turning to the Internet for help. Many of these individuals do not have a spiritual home or anyone they can talk to about their emotional and spiritual needs in a time of illness.

It is challenging for a naïve and vulnerable patient to know which resources on the Internet are reliable and professionally developed. I can recommend two from the Health Care Chaplaincy Network for patients and caregivers in spiritual distress.

Chaplainsonhand.org is a free spiritual support resource developed by professional chaplains. It provides counseling to patients, family members, caregivers — anyone seeking help, regardless of religion or beliefs. The site includes a “Chat with a Chaplain” feature allowing people to connect with a professional health care chaplain by email or phone to receive spiritual support. The website also provides reading resources and accepts prayer requests.

CantbelieveIhavecancer.org is modeled after the Chaplainsonhand.org website. As its name indicates, this site is dedicated to providing spiritual support and care for patients facing cancer, as well as their friends, loved ones and caregivers. The resources are aimed at newly diagnosed patients, those in treatment, survivors and those who are having difficulty with a terminal cancer diagnosis. Similar to Chaplainsonhand.org,

CantbelieveIhavecancer.org offers written materials, “Chat with a Chaplain” and accepts prayer requests.

These Web-based resources were designed specifically as a starting point for those in communities that do not have access to professional health care chaplains. The websites are not meant to replace a professional chaplain, but rather supplement and lead to an encounter with a chaplain if needed.

Pope Francis noted:

It is not enough to be passersby on the digital highways, simply “connected”; connections need to grow into true encounters. We cannot live apart, closed in on ourselves. We need to love and to be loved. We need tenderness. Media strategies do not ensure beauty, goodness and truth in communication. The world of media also has to be concerned with humanity; it too is called to show tenderness. The digital world can be an environment rich in humanity; a network not of wires but of people. ... Only those who go out of themselves in their communication can become a true point of reference for others. Personal engagement is the basis of the trustworthiness of a communicator.⁵

Technology can assist us in being neighbors, but it cannot replace human encounter. As we study the possibilities technology has to offer in

delivering spiritual care to patients and families who do not have direct, local access to trained professional chaplains, we need to pay more attention to the processes we are developing than the equipment we are purchasing. There is no substitute for genuine empathy, engagement and compassion.

Jesus healed through being interconnected to people both in face-to-face situations and remotely. As we use new means of communication, we always must make sure God’s love is being experienced in the encounter and that we are being connected to one another as neighbor to neighbor.

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NOTES

1. Brian P. Smith, “Spiritual Care in the Midst of Health Care Reform,” *Health Progress* 95, no. 5 (September-October 2014): 55.
2. Matthew 8:5-13.
3. Matthew 15:21-28.
4. Pope Francis, “Message for the 48th World Communications Day,” Jan. 24, 2014. http://w2.vatican.va/content/francesco/en/messages/communications/documents/papa-francesco_20140124_messaggio-comunicazioni-sociali.html.
5. Pope Francis.

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