

Meaning & Spirituality in Dutch Mental Health Care



Most patients and their family members/loved ones believe it is important to consider meaning and spirituality in the treatment of mental health problems. A focus on meaning and spirituality in diagnosis and treatment is fully in line with a recovery-oriented approach in mental health care. Therefore, the core recommendation in this module is for professionals to discuss meaning and spirituality with patients and their loved ones. In doing so, they touch on what is essential for the patient and contribute to their recovery. The starting point for these conversations is how the patient (and their loved ones) perceive meaning in life and spirituality.

Although a conversation about meaning and spirituality may not always be easy, that is no reason to avoid the topic. The conversation can itself be a meaningful experience for everyone involved. This mutual person-to-person contact can create energy and inspiration that is valuable to the patient, loved ones, and professional alike. It does not always need more time either; sometimes a small comment makes all the difference.

Core recommendations for professionals

Core recommendation is: talk about meaning with the patient and relative

1. Devote attention to the patient's, their loved ones, and your own sense of meaning in life and spirituality. The conversation about meaning and spirituality promotes recovery and makes your work more rewarding.
2. Discuss meaning and spirituality in your contact with the patient and their loved one(s). Then involve meaning and spirituality in treatment if the patient feels the need.

3. Create a safe, open, and inviting setting that fosters a trusting relationship with the patient. Listen closely and do not be judgmental.
4. Connect with the patient's and loved ones' beliefs and perceptions about meaning in life. Identify their perspective, needs, context, and cultural identity.
5. Sometimes you cannot or do not need to do anything right away because questions about meaning and spirituality rarely have a ready-made answer.
6. Be aware of your own worldview because that interferes into your thinking and actions as a professional.
7. Use any interventions or methods to explore, discuss, or examine questions and answers with the patient.
8. Pay respect to the patient's worldview. Do not use your position as a professional to try to convince a patient of or promote a worldview.
9. Collaborate, coordinate with, or refer the patient to other professionals who provide 'spiritual care', such as experts by experience, mental health and art(s) therapists, chaplains in mental health care, or religious/ideological organizations. Refer patients when you encounter limits yourself.

About meaning, spirituality, philosophy of life, and religion

Meaning making is the process by which people give direction to their lives based on what is most important or meaningful to them. Meaning and spirituality are different for everyone. For example, people find meaning in their relationships with family or friends, in work or hobbies, in religious or philosophical practices, or in contributing to a better world. Everyone needs to have meaning in their lives.

We use the terms meaning and spirituality in this module as an umbrella concept to which other concepts are related or overlap:

- Spirituality is closely related to meaning. Spirituality is the way in which people (individually or collectively) experience, express, and/or seek meaning, purpose, and transcendence, and the way they connect to the moment, to self, to others, to nature, to the significant and/or the sacred.
- Worldview (including religion) is a certain view or philosophical perspective of life that people may have.

Relationship between meaning and mental health problems

Meaning and mental health problems are related in three ways:

1. Sense of meaning and mental health influence each other reciprocally: they can promote or hinder each other. People who experience sense of meaning in life may develop fewer mental health problems or have a healthier trajectory when they face psychological problems. Thus, meaning and spirituality can contribute to recovery. A philosophy of life can also do the opposite: make a person vulnerable to psychological problems or partly or fully cause these problems or cause them to reoccur and/or persist. Patients may also have been harmed by spiritual or religious practices and institutions. And - finally - psychological problems may harm or enrich a person's sense of meaning or spirituality.
2. Mental illness can involve facets of philosophical or spiritual beliefs. For example, a patient having a psychotic episode may become convinced that he is Jesus or Mohammed. Such an experience can often mean a lot to patients and have lasting value.
3. Patients sometimes look to their worldview or spirituality to derive explanations for their mental illness

or a perspective on their treatment. For example, a psychiatrist may recommend medication to mitigate psychological symptoms, while the patient may attribute their symptoms to possession or their recovery to a higher power.

Being mindful of meaning is a form of prevention for mental illness

Paying conscious attention to meaning and spirituality can normally be understood as a healthy lifestyle habit. Research shows that people who pay attention to meaning and their worldview generally have better mental health or fewer psychological complaints.

Thus, attention to meaning can be preventive and stimulated by such things as:

- public knowledge transfer. For example, in the media or by social organizations such as schools, voluntary organizations, or faith communities;
- exploring the theme of meaning and spirituality with the patient and explaining its connection to psychological symptoms. If necessary, the professional can refer the patient to community organizations, spiritual care, recovery academies, etc.;
- focusing on meaning and spirituality and preventing relapse, and alerting patients and loved ones to opportunities for contact with (for example) like-minded people.

Exploring meaning and spirituality during the diagnostic phase

Meaning is involved in the diagnostic process through 'exploration.' This creates an understanding of the role of meaning and spirituality in the patient's life, mental health issues, and recovery possibilities. The exploration consists of at least four parts:

1. The patient, their loved one(s), and the professional explore whether the situation involves questions about meaning and spirituality.
2. The professional identifies whether the patient's system of meaning making has stalled.
3. The professional and patient investigate whether the questions about meaning and spirituality interact with the patient's psychological symptoms
4. The results of the exploration - if relevant - become part of the treatment plan.

Consider the following in the exploration:

- Signal from the beginning that meaning and spirituality can be discussed. This is important because patients sometimes find it difficult to discuss such matters.
- Recognize that a conversation about meaning in life often can itself be a meaningful experience for the patient.
- If necessary, use tools to ask about meaning and spirituality (e.g., the Mount Vernon Cancer Network questions, the FICA Spiritual History Tool, the Diamond model or an assessment of meaning and purpose).
- Also pay attention to meaning and spirituality when considering or assessing suicidality.

Meaning and spirituality during treatment and recovery

It is recommended that every professional in mental health care pays attention to questions about meaning and spirituality. After all, these questions can play a role during treatment of mental illness: they can influence the onset of symptoms, their course, and the success of treatment. The professional

should not pathologize questions about meaning and spirituality unnecessarily; such questions are an ordinary part of human existence.

Considering these questions in the treatment may take the form of:

- using attitude and conversational skills (e.g., moving toward the pain, self-disclosure, discussing one's life story (narrative), awareness of asking 'slow questions' (existential questions about matters such as life and death or love and illness));
- employing interventions or methods that may have a positive effect on experiencing meaning and spirituality.

Working on meaning and spirituality can be seen as an inspiration for personal recovery. Recovery cannot be directed. However, professionals can use methods or approaches that support attention to meaning and spirituality in recovery. Support for recovery is also available outside formal mental health care settings, such as in recovery centers and centers for self-directed care, spiritual networks, and philosophical and/or faith-based communities.

Reintegration, rehabilitation, and participation

Meaningful participation in society is important for everyone. Similarly, work is an important source of meaning in life. However, it is not always a given that people with serious and long-term psychological problems can find meaningful ways to spend their days. They require a diverse range of activities that closely matches their values, interests, and abilities. Those activities might include centers for self-directed care, recovery academies, peer support, recovery support groups, the Active Recovery Triad (ART), Triple C, and experiential expertise.

Limits and risks

Professionals must be aware that focusing on meaning and spirituality can potentially have negative effects, such as the risk of spiritual struggle or countertransference through treatment. The professional should avoid persuading a patient to adhere to a particular or different worldview.

While focusing on meaning and spirituality, the professional may encounter certain limits:

- practical limits (e.g., insufficient time or an inappropriate (treatment) setting);
- personal limits (e.g., if the professional is struggling with a similar life question, or if their own worldview conflicts too much with that of the patient);
- professional limits (e.g., lack of expertise or competence).

Organization of health care

Considering meaning and spirituality is a task for every professional involved in care and thus not the exclusive task of one or a few professions. It may sometimes be desirable to collaborate with professionals from the same or another discipline. For instance, a patient may find it easier to connect with a professional colleague when it comes to certain interventions, a worldview, and/or a culture.

To ensure good care for meaning and spirituality, it is recommended that this theme be included in an organization's quality policy and that the organization or institute formulates a vision about such care. Training professionals to develop skills that allow them to consider meaning and spirituality in treatment is another prerequisite for providing good 'spiritual care.'