Largest Body of Research in Spiritual Care in Health Care Released Today at HealthCare Chaplaincy Network Annual Conference

First Empirical Data on Role and Effectiveness of Chaplaincy Care Interventions

NEW YORK, NY – Six studies released today launched a new field of research in spiritual care in health care. The studies revealed important advances in understanding the role of spiritual care in treating people facing serious illness, including cancer and ALS. Until now, no empirical data has existed on the contributions of chaplains in health care.

The studies were released at the inaugural conference of HealthCare Chaplaincy Network (HCCN), Caring for the Human Spirit: Driving the Research Agenda in Spiritual Care in Health Care, taking place March 31 – April 3, 2014, at the New York Academy of Medicine.

“This is the first large-scale attempt at forming an evidence base for chaplaincy care effectiveness in health care,” said the Rev. Eric J. Hall, HCCN President and CEO. “This conference is the launch pad for a rigorous new field of long-overdue research.”

Research Highlights:

- This is one of very few studies to provide an in-depth picture of spiritual care work with patients. No validated spiritual assessment tools have existed prior to this study. Even three sessions with a professional chaplain had important, positive effects for patients. The research raises the possibility that spiritual care should be studied as a potentially powerful intervention for patients with various serious illnesses, not just cancer.

Spiritual Assessment and Intervention Model (AIM) in Outpatient Palliative Care for Patients with Advanced Cancer, University of California, San Francisco, Project Director, Laura Dunn, MD, Project Chaplain, Allison Kestenbaum, BCC
- A diary study of 1140 chaplain-patient encounters demonstrated the value of chaplain-patient communication and revealed that more than half of chaplain visits focused on issues other than spiritual. The study also showed that conversations with patients were more likely to be about “practical matters” (family care, life review, medical care, work) than about “ultimate concerns” (expressed emotions, existential matters, spiritual/religious matters, physical symptoms). **Impact of Hospital-Based Chaplain Support on Decision-Making During Serious Illness in a Diverse Urban Palliative Care Population**, Emory University (Atlanta), Project Director, Tammie Quest, MD, Project Chaplain, George Grant, ACPE

- The data from this study is a first step in furthering the understanding of how chaplaincy care influences patient well-being and medical decision making at the end of life. **Hospital Chaplaincy and Medical Outcomes at the End of Life, Dana Farber Cancer Institute (Boston)**, Project Director, Tracy Balboni, MD, Project Chaplain, Angelika Zollfrank, BCC

- Researchers analyzed seven in-depth case studies that reveal how medical professionals utilize chaplains in the care of seriously ill children. They learned that most health professionals have little or no understanding of what chaplains do and that this has implications for patient and family care. Key findings showed that: tangible objects are very important (e.g., prayer shawls and teddy bears); physical interaction builds trust (e.g., eye contact). **Understanding Pediatric Chaplaincy in Crisis Situations, Children’s Mercy Hospital (Kansas City)**, Project Director, John Lantos, MD, Project Chaplain, Dane Sommer, BCC

- For the first time, researchers established that it is feasible for chaplains to use a standardized, low-cost phone-delivered intervention. This has important implications because the intervention is measurable, controllable and transferrable. Both religious and non-religious participants found conversations with the chaplain meaningful and without an agenda. **Caregiver Outlook: An Evidence-Based Intervention for the Chaplain Toolkit, Duke University Medical Center (Durham, NC)**, Project Director, Karen
Steinhauser, PhD, Project Chaplain, Annette Olsen, BCC

- This study begins to explain how spiritual care is helpful by revealing a common language, list of activities, effects and outcomes for chaplains. The research showed that professional chaplains play a major role in helping patients express their wishes about end of life and advance care planning. The study generated 348 taxonomy items. “What do I do” – Developing a Taxonomy of Chaplaincy Activities and Interventions for Spiritual Care in ICU Palliative Care, Advocate Charitable Foundation & Advocate Health Care (Chicago), Project Director, Kevin Massey, BCC, Co-Principal Investigator, William Summerfelt, PhD

Keynote speakers at the conference include leaders in the fields of Oncology and Palliative Care:

- Linda Emanuel, MD, PhD, Director, Buehler Center on Aging, Health & Society, Institute for Public Health and Medicine, Northwestern University and Senior Vice President for Research and Education, HealthCare Chaplaincy Network
- Kathleen Foley, MD, Professor of Neurology, Neuroscience & Clinical Pharmacology, Weill Medical College of Cornell University
- Charles F. von Gunten, MD, PhD, Vice President, Medical Affairs, Hospice & Palliative Care, Ohiohealth
- Jimmie C. Holland, MD, Wayne E Chapman Chair in Psychiatric Oncology, Memorial Sloan-Kettering Cancer Center

Additional Resources:

- www.chaplainsonhand.org

ATTRIBUTION TO HEALTH CARE CHAPLAINCY NETWORK IS KINDLY REQUESTED IN ALL NEWS COVERAGE.

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About HealthCare Chaplaincy Network

HealthCare Chaplaincy Network (HCCN) is a national health care organization that provides spiritual care for the seriously ill and their caregivers regardless of religion or beliefs.

www.healthcarechaplaincy.org  www.chaplainsonhand.org

About the John Templeton Foundation


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