

Current Thinking on the Role of Spirituality in Medical Education & Training

By Shannon Calderone

Ontological assumptions that serve to rationalize our understanding of human existence have, with the rise in positivism, become increasingly de-linked from the realm of the spiritual. The empiricism which underlies the contemporary philosophy of science has, until recently, eliminated any possibility for spiritual inflection upon the very black and white world of scientific realism.

Yet, despite the increasing sophistication of biotechnologies that serve to detect the slightest physical failing, enhanced communications which transmit the latest research discoveries across the globe, and governmental safeguards to ensure the quality of medical progress is carefully monitored and maintained, there remains a sizeable gap in our ability to articulate the role that the human spirit plays in health and wellness.

While examining the mind-body-spirit connection is not unique to the world of medicine, formal ministering to the spiritual health of a patient has only recently found a foothold in the training of medical professionals. The increasing emphasis upon holistic care in medical education has led to a general proliferation of discussion on the spiritual dimensions of the patient-physician encounter.

Reflective of this growing trend, Student JAMA (a student-initiated publication published through the Journal of the American Medical Association), recently dedicated their June 2004 issue to a discussion of the "...interaction between personal belief systems and components of institutional medicine (pg. 2880)." Offering a range of research-based articles, Op-ed pieces, and a book review, this publication reflects some of the most up-to-date thinking on the subject of spirituality and medical education and training.

What follows is a summary of key articles offered in the June Student JAMA issue that may be of interest to our readers:

Medical School Curricula in Spirituality and Medicine, Fortin, A. & Gergen Barnett, K.

This article provides a meta-analysis of recent literature on medical school curricula that focuses upon spirituality as well as the prevalence of spiritually-based courses currently offered within US schools of medicine. Based upon their 2004 survey of school literature and curricular listings, the authors found that 84 programs included discrete courses and/or programmatic components that focused upon spirituality in medicine. While these programs and courses varied in terms of the point at which students received this instruction (1st versus 2nd years), and the educational methods typically utilized (lecture vs. small group discussions), there was great consistency in students' overall preparedness to conduct a patient's spiritual history and to respond to spiritual considerations within the context of patient-physician interaction.

Taking a Spiritual History, Koenig, H.G.

Concern over the quality of patient care has recently led to a fundamental re-questioning of the ways in which physicians interact with patients. Based upon a 2003 survey of 1,732,562 patients, patient satisfaction with the emotional and spiritual aspects of care was deemed one of the lowest ratings among all clinical care performance measures taken. The task of providing comprehensive care for patients often includes an awareness and appreciation for all facets of the individual's physical, emotional, and spiritual well-being. For this reason, the task of taking a "spiritual history" has been recently introduced into clinical training. This article looks at some of the considerations physicians-in-training should reflect on in completing a spiritual history, including the appropriateness of the task under particular circumstances.

Spirituality and the Patient-Physician Relationship, Astro, A.B. & Sulmasy, D.P.

This article surveys recent literature that addresses various facets of the patient-physician interaction as it relates to the amenability of both parties to incorporating spiritual considerations into the clinical encounter. Based upon a number of research findings, it appears that a direct correlation exists between patients' self-reported religiousness and the degree to which they would be open to spiritual-related concerns as part of their medical care. Likewise, in recent surveys physicians have expressed overwhelming willingness to incorporate spirituality as part of their care regimen, although there is some concern over whether the subject should be initially broached by the physician or the patient. Moreover, spirituality among physicians and other medical staff has been linked to lower scoring on such items as "diminished empathy" and "emotional exhaustion". Such findings tend to demonstrate the salience of spiritual-based connections to the quality of on-going clinical care.

Book Review: "Heal Thyself: Spirituality, Medicine, and the Distortion of Christianity" by Joel James Shuman and Keith G. Mendez (Oxford University Press, 2003), Tsai, A.C.

Shuman and Mendez's book offers a thought-provoking new twist to the on-going dialogue on spirituality as a complement to medical care. The authors claim that a proselytizing of medical care has occurred whereby the spirituality-health discussion is primarily one grounded in a generic, "utilitarian" accounting of religion. They add that both health care and spirituality have become increasingly commodified, leading to a "fetishizing" of both health and religion. In turn, this commodified form of spirituality has served to dilute and distort traditional forms of Christian spirituality. While critical of the current melding of spirituality with health care, both are careful to offer alternatives to the current utilitarian approaches to the spirituality-health dialogue; alternatives derived in large part from Christian scripture, poetry, and literature.