A. BENEFITS FOR PATIENTS AND FAMILIES
Six research areas are summarized here that describe the benefits of attention to the spirituality of patients and family members.

1. Supporting Religious/Spiritual Beliefs and Practices
   ✝ A growing body of research demonstrates the health-related benefits of religious and spiritual beliefs and practices. A recent meta-analysis of data from 42 published mortality studies involving approximately 126,000 participants demonstrated that persons who reported frequent religious involvements were significantly more likely to live longer compared to persons who were involved infrequently (McCullough, Hoyt, Larson, Koenig & Thoresen, 2000).

   ✝ In a study of nearly 600 older, severely ill, medical patients, those who sought a connection with a benevolent God, as well as support from clergy and faith group members, were less depressed and rated their quality of life as higher, even after taking into account the severity of their illness (Koenig, Pargament, & Nielsen, 1998).

“The work of professional chaplains offers distinct benefits to... the patients and their family members, the professional healthcare staff, the organization itself, and the community within which it resides.”
In a study of 1,600 cancer patients, the contribution of patient-reported spiritual well being to quality of life was similar to that associated with physical well being. Among patients with significant symptoms such as fatigue and pain, those with higher levels of spiritual well being had a significantly higher quality of life (Brady, Peterman, Fitchett, Mo, & Cella, 1999).

CONCLUSION: These and other studies demonstrate that religious faith and practice impact emotional and physical well being. Professional chaplains play an integral role in supporting and strengthening these religious and spiritual resources.

2. The Importance of Religious/Spiritual Coping during Illness

In a study of older adults found that more than half reported their religion was the most important resource that helped them cope with illness (Koenig, Moberg, & Kvale, 1988).

In another study, 44 percent of the patients reported that religion was the most important factor that helped them cope with their illness or hospitalization (Koenig, Hover, Bearon, & Travis, 1991).

In a study of women with breast cancer, 88 percent reported that religion was important to them and 85 percent indicated it helped them cope (Johnson & Spilka, 1991).

Similarly, 93 percent of women in a study of gynecological cancer patients reported that religion enhanced their sense of hopefulness (Roberts, Brown, Elkins, & Larson, 1997).

A study with breast cancer outpatients reported that 76 percent had prayed about their situation as a way to cope with their diagnosis (VandeCreek, Rogers, & Lester, 1999).
Studies demonstrate that spiritual well being helps persons moderate the following painful feelings that accompany illness: anxiety (Kaczorowski, 1989), hopelessness (Mickley, Soeken, & Belcher, 1992; Fehring, Miller, & Shaw, 1997), and isolation (Feher & Maly, 1999). Many patients expect chaplains to help them with such distressing feelings (Hover, Travis, Koenig, & Bearon, 1992).

Paragament (1997) cites many additional studies that demonstrate the importance of religious and spiritual coping for persons dealing with illness.

CONCLUSION: Persons turn to spiritual resources during illness and other painful experiences, finding them helpful. Professional chaplains are trained to encourage helpful religious coping processes.

3. Responding to Spiritual Distress

Studies point to the importance of spiritual distress, that is, unresolved religious or spiritual conflicts and doubts. This distress is associated with decreased health, recovery, and adjustment to illness (Berg, Fonss, Reed, & Vandecreek, 1995; Fitchett, Rybarczyk, DeMarco, & Nicholas, 1999; Fitchett, 1999a; Fitchett, 1999b).

CONCLUSION: Professional healthcare chaplains play an especially important role in identifying patients in spiritual distress and helping them resolve their religious or spiritual problems, thus improving their health and adjustment.

4. Enhancing Coping Strategies

Studies demonstrate that spiritual well being helps persons moderate the following painful feelings that accompany illness: anxiety (Kaczorowski, 1989), hopelessness (Mickley, Soeken, & Belcher, 1992; Fehring, Miller, & Shaw, 1997), and isolation (Feher & Maly, 1999). Many patients expect chaplains to help them with distressing feelings (Hover, Travis, Koenig, & Bearon, 1992).

CONCLUSION: Persons turn to spiritual resources in the presence of painful feelings and experiences. Professional healthcare chaplains are trained to help patients and families draw upon their spiritual and religious resources to cope with these feelings.

“Families rely on religious and spiritual resources to cope with ... distress during a loved one’s illness. A chaplain’s care for family members has a positive impact.”
5. Caring for Families

Often family members experience similar or more intense distress than their hospitalized loved ones. In some studies, patients have indicated that one of the most important chaplaincy functions is helping their family members with feelings associated with illness and hospitalization (Carey, 1973; Carey, 1985).

In one study, 56 percent of the families identified religion as the most important factor in helping them cope with their loved one’s illness (Koenig, Hover, Bearon, & Travis, 1991).

In another study, family members rated spiritual care from chaplains more highly than patients (Vandecreek, Thomas, Jessen, Gibbons & Strasser, 1991).

Compared to those whose spiritual needs were not being met, caregivers of Alzheimer’s patients who worshiped regularly and who felt their spiritual needs were being met reported greater well being and decreased stress (Burgener, 1999).

CONCLUSION: Families rely on religious and spiritual resources to cope with the high levels of distress during a loved one’s illness. A chaplain’s care for family members has a positive impact.

6. Patient and family satisfaction with the spiritual care provided by chaplains

Studies indicate that as many as 70 percent of patients are aware of one or more spiritual needs related to their illness (Fitchett, Burton, & Sivan, 1997; Moadel, Morgan, Fatone, Grennan, Carter, Laruffa, Skummy, & Dutcher, 1999).

Studies of patients in acute care hospitals indicate that between one third and two thirds of all patients want to receive spiritual care (Carey, 1985; Fitchett, Meyer, & Burton, 2000).

When chaplains help a patient’s family, the patient is more likely to choose that institution again for future hospitalization (Gibbons, Thomas, Vandecreek, & Jessen, 1991).

A large study (VandeCreek & Lyon, 1997) of patient and family member satisfaction with the activities of chaplains showed that:

- A large majority of patients were highly satisfied with the spiritual care provided by professional chaplains.
- The satisfaction with chaplaincy services by family members was even higher than that reported by patients.

- The chaplain’s visits "made the hospitalization easier" because the visit provided "comfort" and helped the patient relax.

- The chaplain helped patients "get better faster" and enhanced their "readiness to return home" because the visits helped them feel more hopeful.

CONCLUSION: Patients and family members are frequently aware of their spiritual needs during hospitalization, want professional spiritual attention to those needs, and respond positively when attention is given—indicating that it influences their recommendation of the hospital to others.

B. BENEFITS FOR HEALTHCARE STAFF

Healthcare professionals, including physicians and nurses, sometimes experience stress when working with patients and family members. This stress has increased recently because economic changes have led to fewer staff members providing care for more seriously ill patients. Chaplains can provide sensitive, supportive spiritual care to these patients and their families for extended time periods, thereby allowing other professionals to attend to other duties.

Professional chaplains play an important role in helping staff members cope with personal problems. Their supportive consultation can enhance morale and decrease staff burnout, thus reducing employee turnover and the use of sick time. One study reports that 73 percent of Intensive Care physicians and nurses believe that providing comfort for staff is an important chaplain role, and 32 percent believe chaplains should be available to help staff with personal problems (Sharp, 1991).

C. BENEFITS FOR HEALTHCARE ORGANIZATIONS

The services of professional healthcare chaplains benefit healthcare organizations in at least nine ways.

1. Chaplains help healthcare organizations meet patient expectations for competent, compassionate spiritual care services, thus enhancing the image of healthcare organizations. In an age of high technology medicine, brief hospitalizations, and shortened contacts with physicians and other health professionals, chaplains offer one of the few opportunities for patients to discuss their personal and spiritual concerns.
2. Chaplains who are certified as chaplaincy education supervisors through the national professional organizations conduct certified programs for religious leaders and laypersons seeking certification. Since participants in academic quarter-length programs usually do not receive stipends, their clinical services are free to the institution. (Students in one-year clinical pastoral education residencies typically receive a small stipend). Such programs increase the amount of spiritual care available at low cost to institutions.

3. Chaplains establish and maintain important relationships with the community clergy.

4. Chaplains play an important role in mitigating situations of patient/family dissatisfaction involving risk management and potential litigation. When patients or their caregivers become angry or threatening, professional chaplains can mediate these intense feelings in ways that conserve valuable organizational resources. Their presence can serve as a vehicle for reducing risk and potential litigation.

5. Chaplains can reduce and prevent spiritual abuse, acting as gatekeepers to protect patients from unwanted proselytizing. Codes of professional ethics stipulate that chaplains themselves must respect the diverse beliefs and practices of patients and families.

6. Chaplains help patients and family members identify their values regarding end-of-life treatment choices and communicate this information to other healthcare staff. Clarifying values and improving communication can reduce expensive, unwanted care (Daly, 2000).

7. Chaplains help organizations develop their mission, value, and social justice statements that promote healing for the body, mind and spirit. Especially for faith-based healthcare organizations, they promote mission awareness and enhancement.

8. Chaplains assist healthcare organizations in fulfilling a variety of accreditation standards, including those associated with patient's rights for spiritual care and support.

“...approximately three quarters of HMO executives surveyed reported that if spirituality... can have an impact on well being, then it can helpfully impact cost containment.”
9. Spiritual care provided by chaplains is cost efficient. The only published chaplaincy cost study reported that the services of professional chaplains range between $2.71 and $6.43 per patient visit (VandeCreek & Lyon, 1994-1995). Additionally, approximately three quarters of HMO executives surveyed reported that if spirituality (expressed through personal prayer, meditation and other spiritual and religious practices) can have an impact on well being, then it can helpfully impact cost containment (Yankelovich Partners, Inc., 1997).

D. BENEFITS FOR THE COMMUNITY

Healthcare institutions are increasingly sensitive about their relationship to the community and chaplains make unique contributions by providing many community services. These include:

- Leadership and participation in community wellness programs
- Leadership of support groups to help members of the community cope with loss or crisis and live with illness
- Leadership and participation in community responses to crisis and disaster including airline disasters, weather emergencies, and acts of violence
- Participation in a continuum of spiritual care that emphasizes connections to local clergy and faith groups, home health and hospice workers
- Guidance and support for parish nurse programs and other congregationally supported programs that enhance the health of community members
- Establishing educational programs for parish/synagogue volunteers who will engage in lay spiritual visitation and support for faith group members
- Maintaining active relationships with local clergy associations
- Providing community educational seminars on topics of spirituality, loss and illness, and coping with crisis

CONCLUSIONS: During the turmoil of healthcare reform, decision makers are constantly searching for ways to provide optimal patient services within financial constraints. They seek to retain quality caregivers and maintain positive relationships within the organization and community. Professional chaplains respond to these concerns in unique ways, drawing on the historic traditions of spirituality that contribute to the healing of body, mind, heart, and soul.