



Explanation of Swirl Model of Patient's Journey with a Spiritual Care Practitioner

In the attached graphic, we sought to present a symbolic outline of a patient's journey with a Spiritual Care Practitioner (SCP), through a healthcare crisis. Our model of a *Patient's Journey with Spiritual Care* begins with a disruption of relative order and proceeds into uncertainty. One way that Spiritual Care Practitioners are distinct from other healthcare professionals is our degree of ability to deeply connect with patients as they sit at the edge of the unknown. We do not usually aim to solve the patient's problems, instead we typically facilitate through presence the transformation of *one's relationship to a problem including the crisis of illness*. At times this can provide sufficient strength to cope and possibly return to one's original orientation with altered or transformed perspective.

Having experienced the unknown and integrated a new part of their unconscious awareness, the hope is that the patient will transform their crisis into a new hope. Practitioners do not always get to follow patients all the way through this journey, and not all patients are fortunate enough to return to **Conscious Awareness** with **Hope** and **Order** again. Nevertheless this is our hope and to varying degrees it is a frequent outcome. Such a journey represents a triumph of the human spirit even when there may be no medical triumph. Accordingly, this graphic functions both as a map and as a symbol that points beyond itself to a greater truth.

The Outer Model at a Glance: Movement

At a glance, the outer model presents the movement and dynamic of the patient experience at a relatively more observable outer level. This Diagram begins with relative stability characterized by **Hope and Order**. Spiritually speaking, the word "hope" may be thought of in this context as confidence amidst the uncertain. We all live with uncertainty at various levels, and before a crisis, the unknown is always present but not in our immediate focus. The word **Order** represents some relative capacity for predictability and the known. The blue color represents calm and relative peace as life is together and stable. The movement is from the top following the circle and arrows heading left, then down, and moving right and upward in counter clockwise fashion. Practitioners do not always follow patients through this full circle journey. The Model as such represents a rather full and complete journey with a Spiritual Care Practitioner.

The Descent and Ascent: Arrows

Due to life's unpredictability and humanity's mortal fragility, a person falls into a crisis – descending from their current regular and daily order into a sense of un-confidence amidst the unknown.

Confidence consists of two parts *con* meaning "with" and *fide* meaning "faith" or "trust". Together they mean "with trust." After a crisis, a new unknown emerges disconnecting the patient from their current resources of meaning and purpose. **Chaos and Uncertainty** reign at this stage as patients find



themselves confronted and flooded by the **Unconscious**. The Role of the Spiritual Care Practitioner is written in black type here, outside the event supporting the patient in the midst of the crisis through **containment achieved by building rapport** and providing **empathetic presence**. Through presence, patients may experience acceptance, leading to a transformation of their predicament and new trust (Faith) in their transcendent source and their journey with their crisis. This can lead to **reconnection** and possibly new resources of **meaning and purpose**. The Practitioner first contains the patient's crisis, and then when appropriate, **explores**, and offers **interpretation** – a new perspective on their current *relationship with their illness or predicament*. Lastly, the practitioner may sensitively summon (Challenge) the patient to integrate their experience. The challenge is to once again embrace a world of order and hope while acknowledging future unknowns including any as yet undetermined aspects of their future healthcare needs.

The Inner Parts of the Model

The inner part of the model is not directional like the outer arrows. The movement is more of an interplay that moves back and forth, in and out. Yet these rings of Self experience are at the same time very much a part of the movement represented by the directional arrows. Essentially the Spiritual Self is experiencing inward and outward movement while simultaneously experiencing the movement shown by the arrows that represent the outer crisis of illness.

There are 3 Rings and a Centre Sphere

At the more outer level ring, all patients experience **Thoughts, Feelings, Desires, Beliefs, and Bodily Sensations** as they face new **Facts**. In this model, the repetition represents a range of subjective and deeply personal phenomena which the patient is often stuck cycling within, if there is no SCP to help them sort their experience.

This leads us to the second of the inner rings, the "**Transpersonal Self**," which can have many meanings. For some, it's their core Self: calm, clear, connected, courageous, centered, curious, compassionate, and creative. It could represent a core identity that expresses who we are as human beings at our deepest level. For others, it may represent Purusha (Consciousness/spirit) Atman (non-dual Self) or even Anatta (no-self). The Transpersonal Self is where people have, dreams, inspirational moments,, self-awareness, witness, mystical, and ancestral experiences, hauntings, or out-of-body experiences,. Here, the SCP functions as a grounding touchstone.

The third inner ring, the **Numinous**, comes from the Latin "numen," meaning "arousing spiritual or religious emotion; mysterious or awe-inspiring" or as Immanuel Kant's *noumenon*, a Greek term referring to "an unknowable reality underlying all things." While patients experience *phenomenological* realities through their senses, the numinous represents experiences outside of one's physical senses, something beyond the usual experience. Here the SCP provides help with processing any personal meaning the patient may wish to see in the experience.

The sphere at the center of the model, is the place of the **Transcendent**. For some, the transcendent simply refers to having an experience that exceeds usual limits, and that goes beyond the boundaries of the ordinary. We can also refer to Transcendence as a Process, or a Principle, and it can also represent G-d as sentient or Personal. As a Process, transcendence encapsulates a "climbing" over one's intra-psychic and interpersonal boundaries. Any emotional, physical, social, or mental process that exceeds one's ability to reflect meaningfully may fall into this category of requiring Transcendence as a means of processing or coping. These patients may speak of transcending their circumstances. They may or may not desire assistance from a SCP to rise to the occasion. Alternatively when one considers **The Transcendent** as a Principle it has more to do with what happens when someone believes that there are fixed laws or facts about life that are unchangeable. At times of crisis we often experience Existential distress because what

we thought was unchangeable appears to have changed. At such moments, Existence presents itself to us as "life out of control," and we cannot cope as we once did. Finally, for some, the transcendent may be a personable force, "the Universe, Fate, G-d," or some other Higher Power. Some Patients with this spiritual orientation may experience their predicament as an overwhelming event caused by a divine person. If this is their world view they may need assistance from a SCP to integrate their recent experience into their new normal or they might instead see the divine personal as assisting or healing them from a temporary aberration. In all the above a SCP may be helpful in exploring new perspectives as to what is or is not unchangeable.

Ways to Use this Model: Assessing by Mapping Patient's Spiritual Health

Students and Supervisors may use the Model/Map for basic assessment by asking:

- Where is this patient right now in their journey with their healthcare crisis?
- What type of intervention or support should I primarily focus upon at this point in the journey: Rapport, Empathetic Presence, Containment, Exploration, or Challenge
- What are the thoughts, feelings, sensations, and facts the patient needs to sort and process?
- What is the Transcendent for them? (Process, Principle, and/or Personal)
- What signs of the numinous if any are they experiencing (dreams, out-of-body, inspiration, self-awareness, mystical, experiences like synchronicity)?
- What is the state of their Transpersonal Self and how connected are they to it according to their spiritual orientation (Atman, Buddha Nature, Anatta, Imago Dei, etc.)

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