Welcome!

We will begin momentarily

Spiritual Care Community of Practice Series 2

How psychotherapy modalities can facilitate spiritual care in the palliative care context



Facilitator: Diana Vincze, Pallium Canada

Presenter: Gord Alton, MDiv, RP

Date: August 20, 2024

Territorial Honouring



The Palliative Care ECHO Project

The Palliative Care ECHO Project is a 5-year national initiative to cultivate communities of practice and establish continuous professional development among health care providers across Canada who care for patients with life-limiting illness.

Stay connected: www.echopalliative.com

The Palliative Care ECHO Project is supported by a financial contribution from Health Canada. The views expressed herein do not necessarily represent the views of Health Canada.





Santé Canada





LEAP Core

- Interprofessional course that focuses on the essential competencies to provide a palliative care approach.
- Taught by local experts who are experienced palliative care clinicians and educators.
- Delivered online or in-person.
- Ideal for any health care professional (e.g., physician, nurse, pharmacist, social worker, etc.) who provides care for patients with life-threatening and progressive life-limiting illnesses.
- Accredited by the CFPC and Royal College.



Learn more about the course and topics covered by visiting

www.pallium.ca/course/leap-core

Overview of Sessions

Session #	Session Title	Date/ Time
Session 1	How psychotherapy modalities can facilitate spiritual care in the palliative care context	August 20, 2024 from 1-2pm ET
Session 2	Cultural sensitivity: how to approach the conversation around spirituality	October 22, 2024 from 1-2pm ET
Session 3	Spiritual nature of living our losses part 1	November 26, 2024 from 1-2pm ET
Session 4	Spiritual nature of living our losses part 2	January 21, 2025 from 1-2pm ET
Session 5	Spirituality of Grief and Bereavement	February 18, 2025 from 1-2pm ET
Session 6	MAID Bereavement	April 8, 2025 from 1-2pm ET

Welcome and Reminders

- Please introduce yourself in the chat!
- Your microphones are muted. There will be time during this session when you can unmute yourself for questions and discussion.
- You are welcome to use the Q&A function at any time to ask questions.
- Remember not to disclose any Personal Health Information (PHI) during the session.
- This session is being recorded and will be emailed to registrants within the next week.



Disclosure

Relationship with Financial Sponsors:

Pallium Canada

- Not-for-profit
- Funded by Health Canada

Disclosure

This program has received financial support from:

- Health Canada in the form of a contribution program
- Generates funds to support operations and R&D from Pallium Pocketbook sales and course registration Fees

Facilitator/ Presenter/Panelists:

Diana Vincze: Palliative Care ECHO Project Manager, Pallium Canada.

Gord Alton, RP, MDiv: nothing to disclose

Sheila Atkinson, RP, MDiv: nothing to disclose

Oceanna Hall: nothing to disclose

Christine Enfield: nothing to disclose

Peter Barnes, D.Min, CCC, SEP: nothing to disclose



Disclosure

Mitigating Potential Biases:

 The scientific planning committee had complete independent control over the development of course content

Introductions

Presenter:

Gord Alton MDiv, RP Supervisor-Educator (CASC), Community Counselling of London, London, ON Spiritual Care Provider (Lead) Lisaard and Innisfree Hospice (Kitchener) and Ontario Health at Home (Waterloo and Wellington Regions)

Panelists:

Peter Barnes, D.Min, CCC, SEP

Psychospiritual Therapist Spiritual Pathways, Private Practice. CASC/ACSS (certified) CCPA (certified)

Oceanna Hall, M.Div., M.Ed., RCH

Spiritual Health Practitioner, Certified CASC Clinical Specialist End of Life, Palliative, MAiD and Bereavement Spiritual Health Practitioner, Island Health Authority, Saanich Peninsula Hospital Vancouver Island, BC

Sheila Atkinson, RP, MDiv

Certified Spiritual Care Practitioner (CASC), Registered Psychotherapist (CRPO), Grief Support Coordinator, Pathways Grief Support Program, Paediatric Advanced Care Team (PACT), SickKids, Toronto, ON

Christine Enfield, M.Div.

Spiritual Health Practitioner, Tertiary Palliative Care Unit, Covenant Health, Edmonton, Certified Spiritual Care Practitioner (CASC/ACSS)



Session Learning Objectives

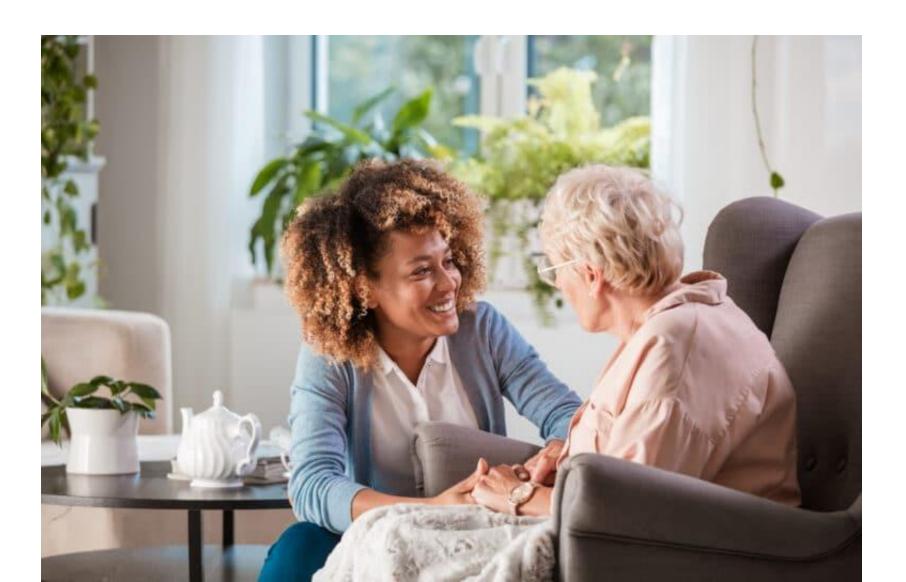
Upon completing the session, participants will be able to:

- See how clients/us have the qualities of Self/Essence at the core of their Soul based on the Diamond Approach and Internal Family Systems.
- See how clients/us have ego structures/parts that interfere, distort, or block these qualities from manifesting in our clients' lives.
- See how the essence of spiritual care is to break the merge between the client's sense of Self and their parts/ego structures.
 - When this merge is broken, clients have access to the spiritual resources within their soul.
- See how Self psychology, Solution Focused Therapy, Narrative Therapy, and Somatic Experiencing all have strategies that are designed to help clients break the merge with their parts and gain access to their spiritual resources to help them care for their parts.

How psychotherapy modalities can facilitate spiritual care in the palliative care context



How Psychotherapy Modalities help us work at Spiritual Care in the Palliative Context



Previous Session Spiritual Care Framework (Approach: outside-in)

Defining an Inclusive Spiritual Care Framework



Spiritual Care Assessment of Issues and Themes



Therapeutic Relationship



Spiritual Care Interventions

Spiritual Care Framework (Approach: Starting from inside)

Spiritual Direction Framework

What I was looking for: how psychospiritual therapy could be a spiritual practice? **Spiritual practices** Prayer, contemplation, Client's experience conscious examen, and issues meditation, mindfulness, consolation, desolation discerning of spirits, praying with scripture, etc.

Spiritual Care Framework (Approach: Starting from Inside)

What I was taught by CASC (2001-2006)

Spiritual Direction Framework

Theological Reflection



Therapeutic Relationship



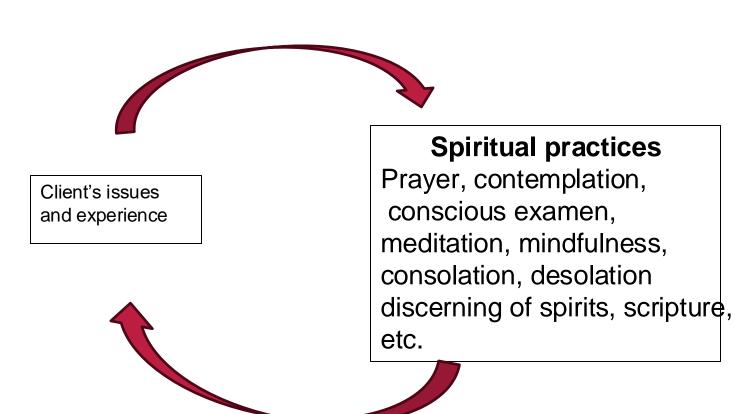
Psychotherapeutic Assessment



Psychotherapeutic Interventions



Theological Reflection





Diamond Approach





Karen Johnson and A.H. Almass (A. Hameed Ali, 1944 -) Co-developers of the Diamond Approach

Internal Family System

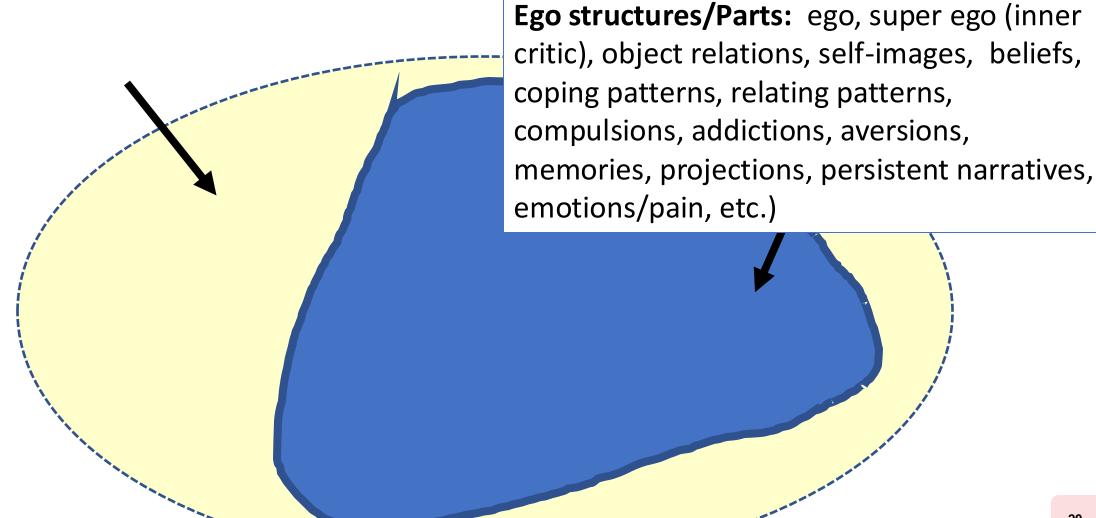


Dick Schwartz (1949 -)

Model of Human Soul

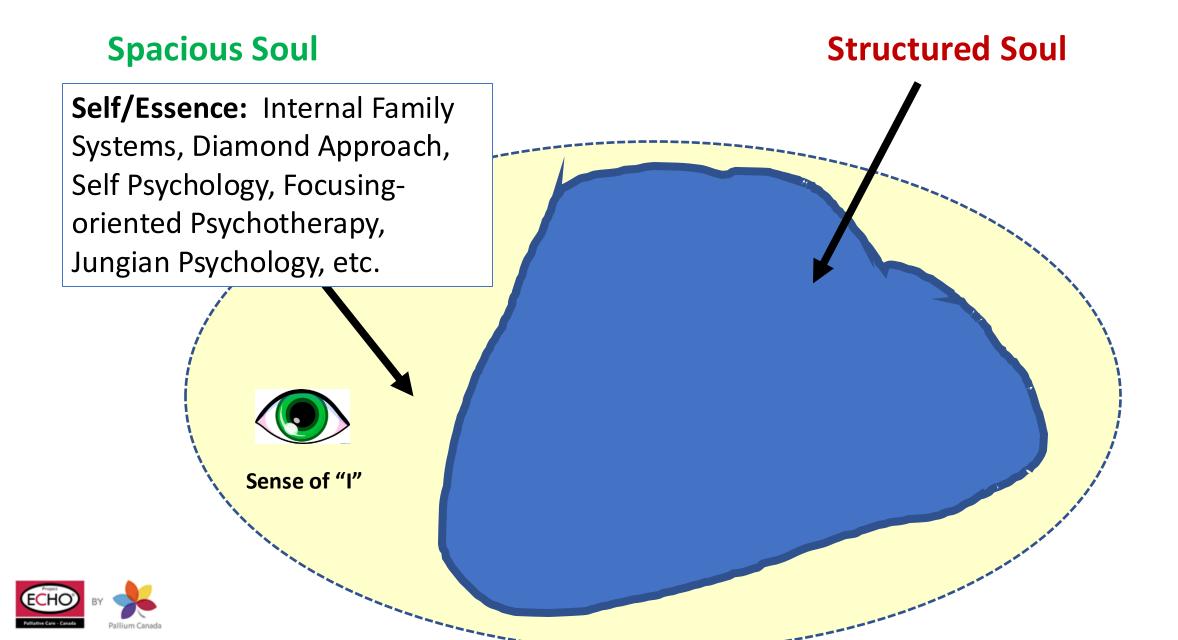
Spacious Soul

Structured Soul





Model of Human Soul



Experiences of Self/Spirit within Soul

Spacious Soul





Diamond Approach

Common: Awareness, Unity, Dynamic, Spaciousness, Knowingness

Qualities: Compassion, Truth, Love, Strength, Joy, Inner Support,

Power, Value, Grace, Spaciousness, Freedom, etc.

Internal Family Systems

8 C's: Compassion, Curiosity, Courage, Clarity, Creativity, Connectiveness, Confidence, Calm, (Choice)

5 P's: Presence, Perspective, Patience, Playfulness, Persistence



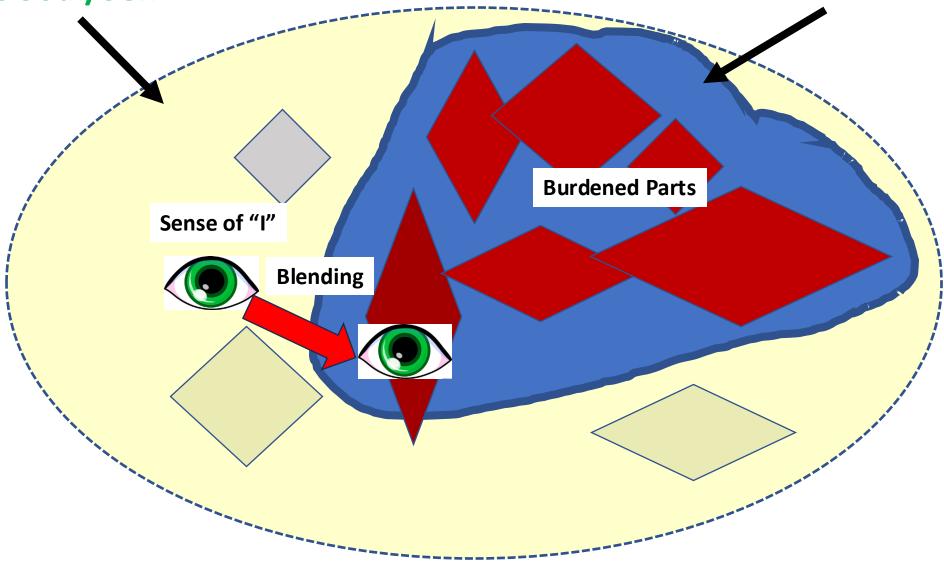
IFS Parts within Structured Soul

Structured Soul Spacious Soul/Self Unburdened Part Sense of "I" **Burdened Parts Unburdened Part** Unburdened Part



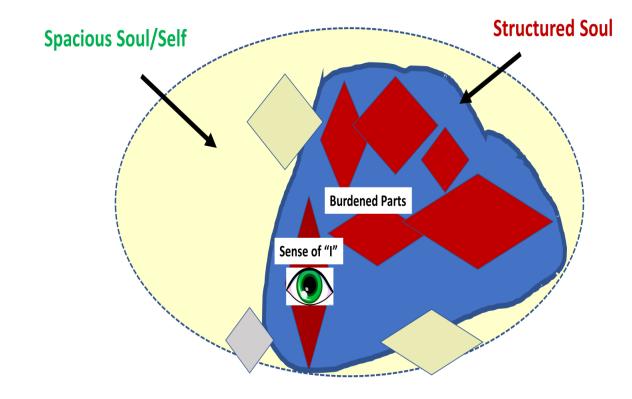
IFS's Theory of Blending

Spacious Soul/Self Structured Soul

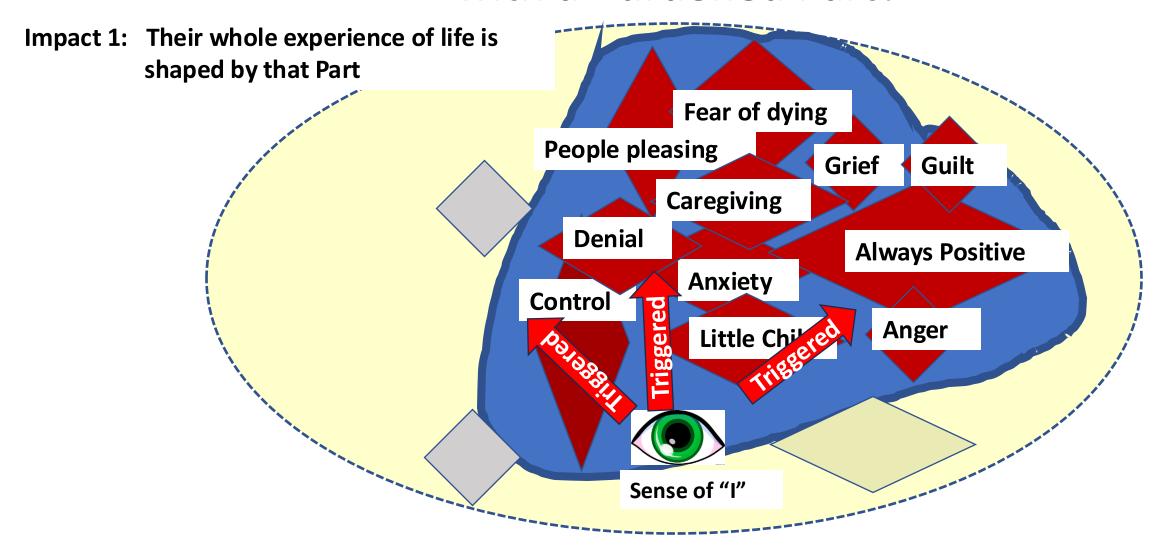


Burdened parts that appear in Palliative Care

- Regret/guilt (broken relationships never mended)
- Anger (unfairness)
- Fear of afterlife (judgemental God)
- Rejection, loneliness
- Grief/sadness
- Lack of purpose (doing part)
- Feeling like burden
- Anxiety
- Caregiving (hard to accept help)
- Fear of losing control/shame
- Despair/depression
- Fear of unknown
- Fear of dying
- Scared little child (regression)
- People pleasing
- Always positive



What happens when a Palliative Client merges with a Burdened Part?





What happens when a Palliative Client merges with a Burdened Part?

Impact 2: The parts of the client trigger parts within their partner or supporting community which can create complex dynamics



What happens when a Palliative Client merges with a Burdened Part?

Impact 3: They lose access to the qualities of Self (IFS) or our experience of the essential qualities becomes distorted/block



Diamond Approach

Common: Awareness, Unity, Dynamic, Spaciousness, Knowingness

Qualities: Compassion, Truth, Love, Strength, Joy, Groundedness,

Power, Value, Grace, Spaciousness, Freedom, Resilience, etc.

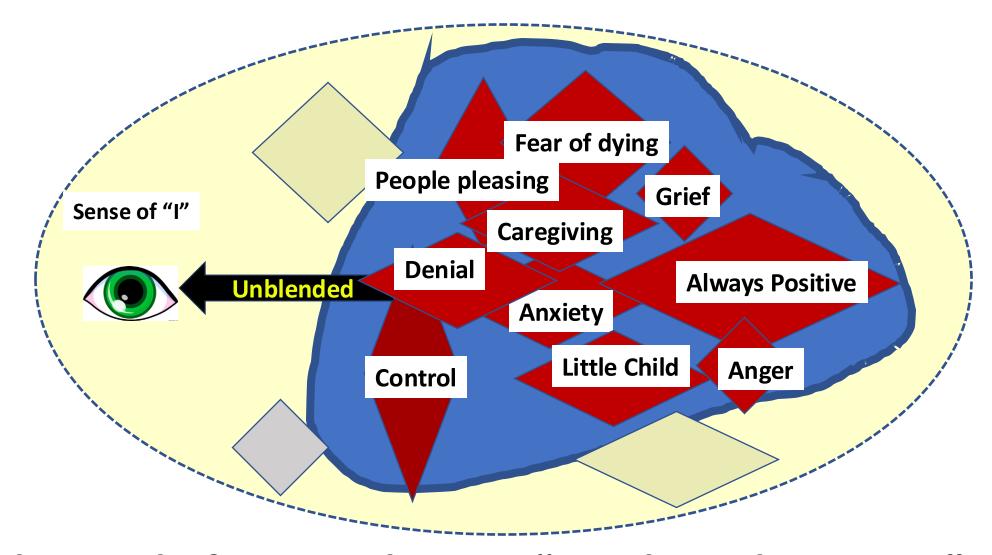
Internal Family Systems

8 C's: Compassion, Curiosity, Courage, Clarity, Creativity, Connectiveness, Confidence, Calm (Choice)

5 P's: Presence, Perspective, Patience, Playfulness, Persistence



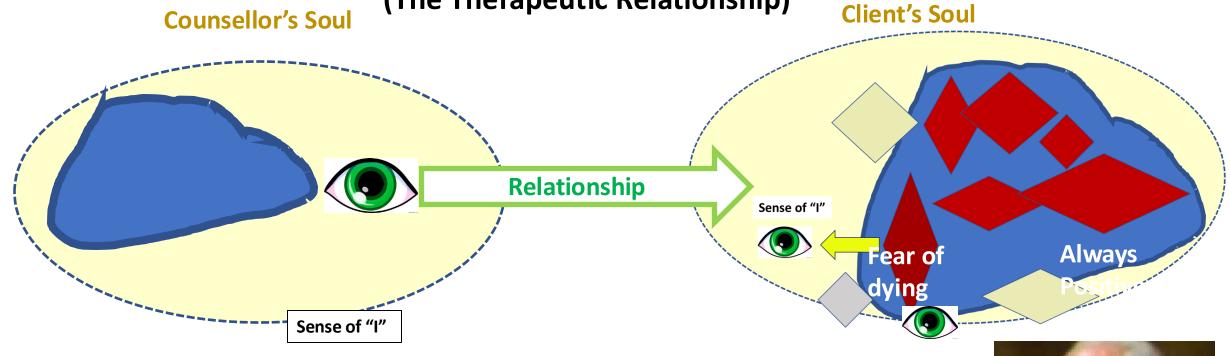
The Importance of Unblending





The Goal of Spiritual Care: "Breaking the Merge"

(The Therapeutic Relationship)



Self-object (attachment) needs

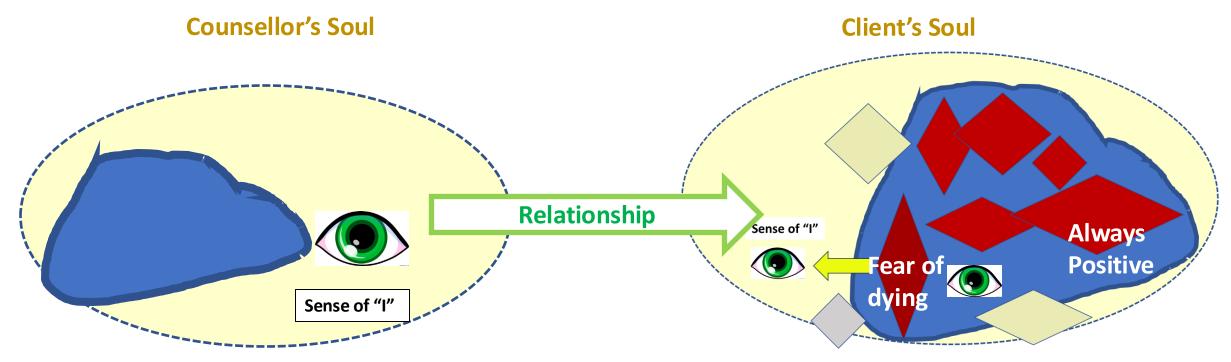
- 1. Mirroring (the need to seen/heard)
- 2. Idealizing (the need to be validated)
- 3. Twinning (the need for others to feel what they do)







(The Therapeutic Relationship)



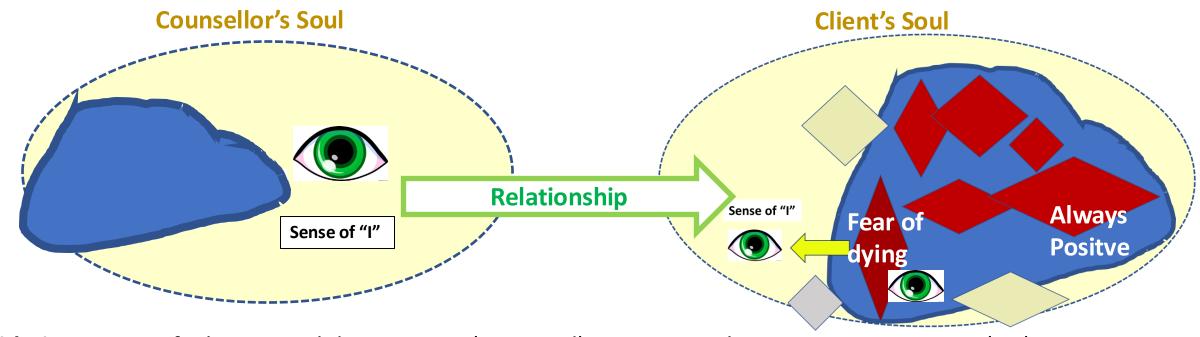
Mirroring: When you mirror, you want to begin to separate out the client's sense of Self from their part so the issue or problem is not them...but a part within them.

- "So there is a part of you that fears dying." "Can you say more? What does this fear feel will happen?"
- "So you have a habit of always stressing the positive. Can you say more about this habit?"
- "So you have a lot of fears around dying. Can you share more about these fears?"





(The Therapeutic Relationship)



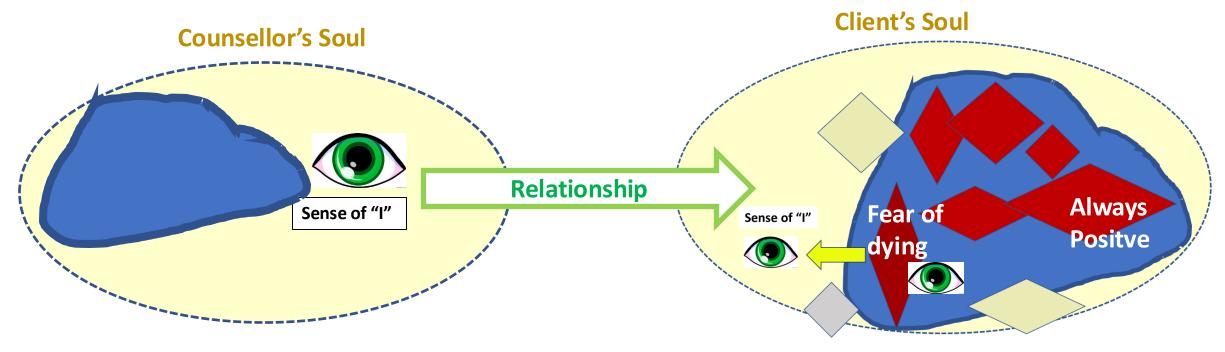
Validating: Every feeling is a valid expression (Diamond). Every part has a positive intention (IFS).

- "it makes sense that that "fear of dying" would be scary. That is what you saw with your father's death"
- "I get it. That sense of breathlessness would trigger a lot of fear inside"
- "No wonder there is a part of you that wants to stress the positive. You have seen how your partner gets loss in their depression"





(The Therapeutic Relationship)



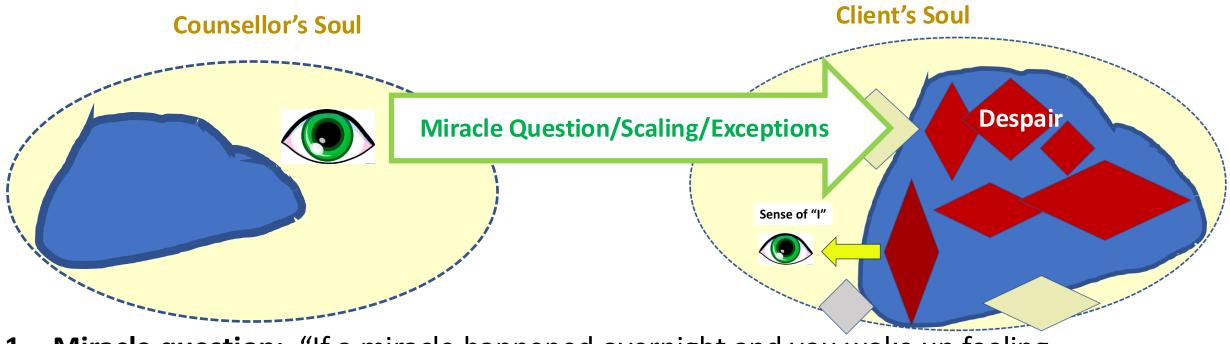
Twinning: We share with our client that we feel a little of what they are experiencing.

- "As you describe your fear, I can sense that fear within me too."
- "That temptation to be positive is one that I have struggled with too."
- "As you talk about that terror, I can feel that terror within the counselling field. It is pretty powerful."





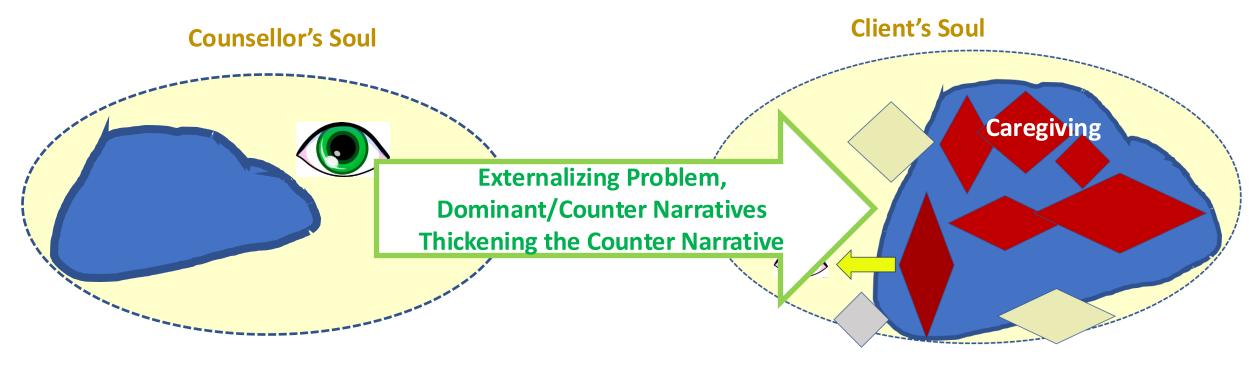
Solution Focused Therapy as a Spiritual Practice



- 1. Miracle question: "If a miracle happened overnight and you woke up feeling no despair, what would that look/feel like?"
- **2. Scaling:** Ask the client to scale their feeling of despair ("0" no despair, "10" too much despair). Consider a lower rating of despair. What would be different?
- **3. Exception:** Explore times when they were not experiencing despair? What was different? What caused the shift...to more despair, to less despair?



Narrative Therapy as a Spiritual Practice

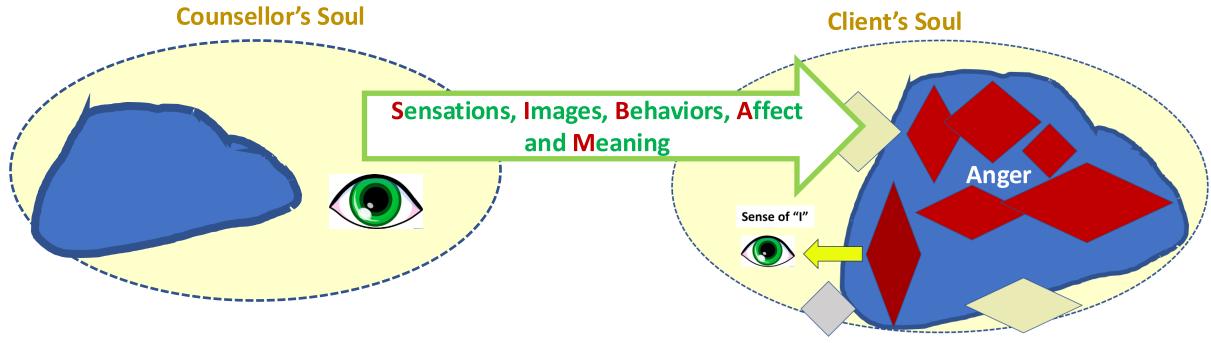


- **1. "Externalizing problem and discovering the dominant narrative" -** spouse is burned out. "Would you be willing to explore this caregiving pattern that is tiring you out? Develop the dominant narrative. Where did they learn this pattern? Why? When?
- 2. "Looking for the counter narrative and thickening it." Explore times self care happens. When? Why? How? Who else knows this self care story? What supports do you need so you can set more boundaries and do more self care?





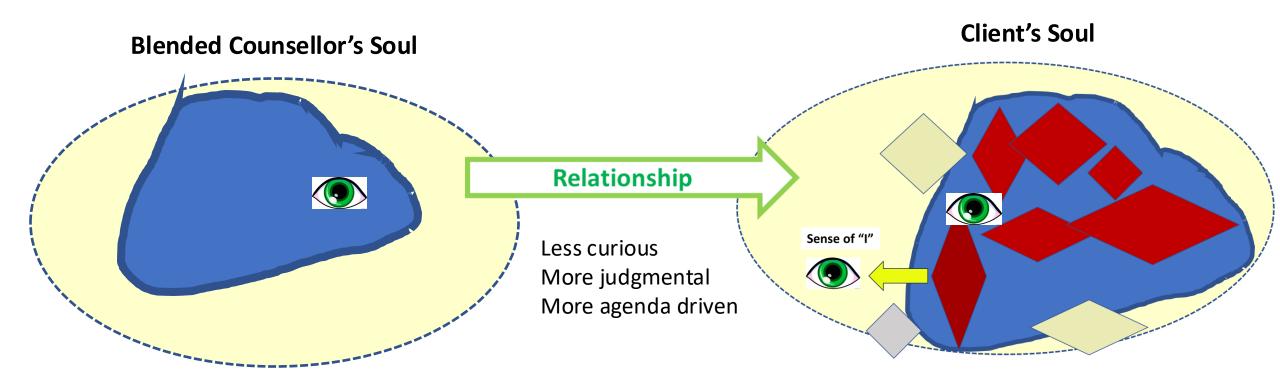
Somatic Experiencing as a Spiritual Practice



- 1. Where do you sense anger in your body? What does it feel like?
- 2. As you be with your anger, what images or memories arise for you?
- 3. How does this anger flow into your **behavior**, body language, posture?
- 4. How does this anger **affect** your emotions and other aspects of you?
- 5. How do you interpret and bring **meaning** to your experience of anger?



Safe Effective Use of Self

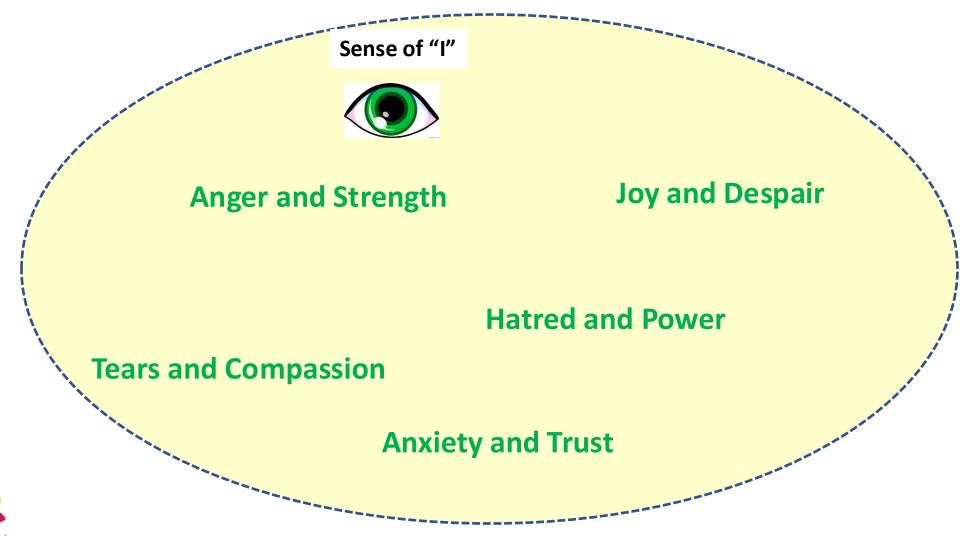


If the Spiritual Care Provider is merged with one of their parts, it will negatively affect their relationship with their client and interfere with their effectiveness in providing spiritual care. It is hard to help a client break a merge with one of their parts if the Spiritual Care Provider is blended with one of their parts.



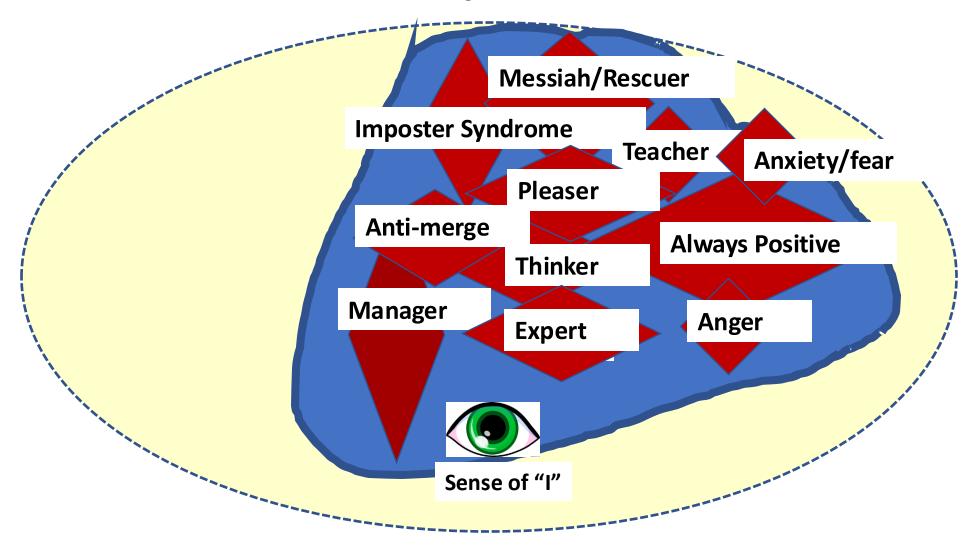


Safe Effective Use of Self: Holding Experiences Within a Diamond Approach Lense

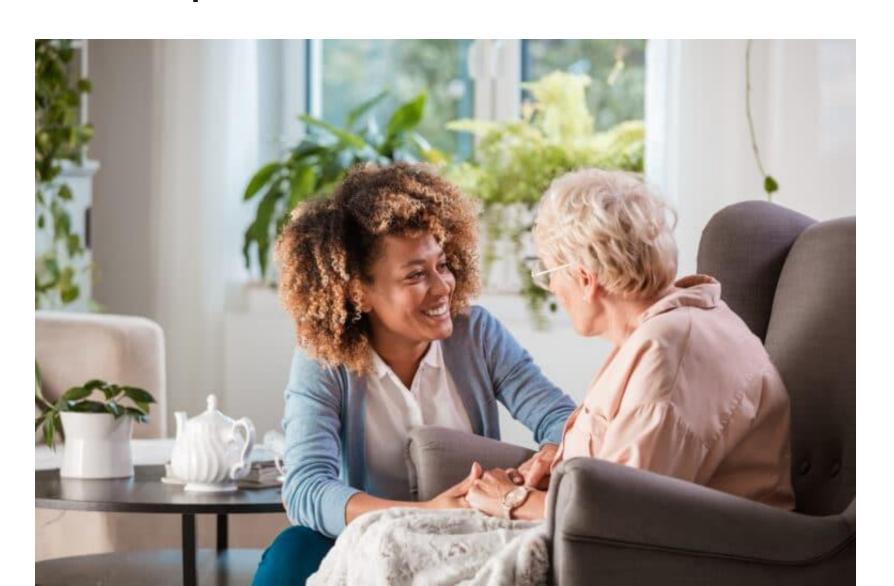




Safe Effective Use of Self: IFS Parts within a Spiritual Care Provider



How Psychotherapy Modalities help us work at Spiritual Care in the Palliative Context



Questions?

Session Wrap Up

- Please fill out our feedback survey, a link has been added into the chat.
- A recording of this session will be emailed to registrants within the next week.
- Thank you for your participation!

Thank You



Stay Connected www.echopalliative.com