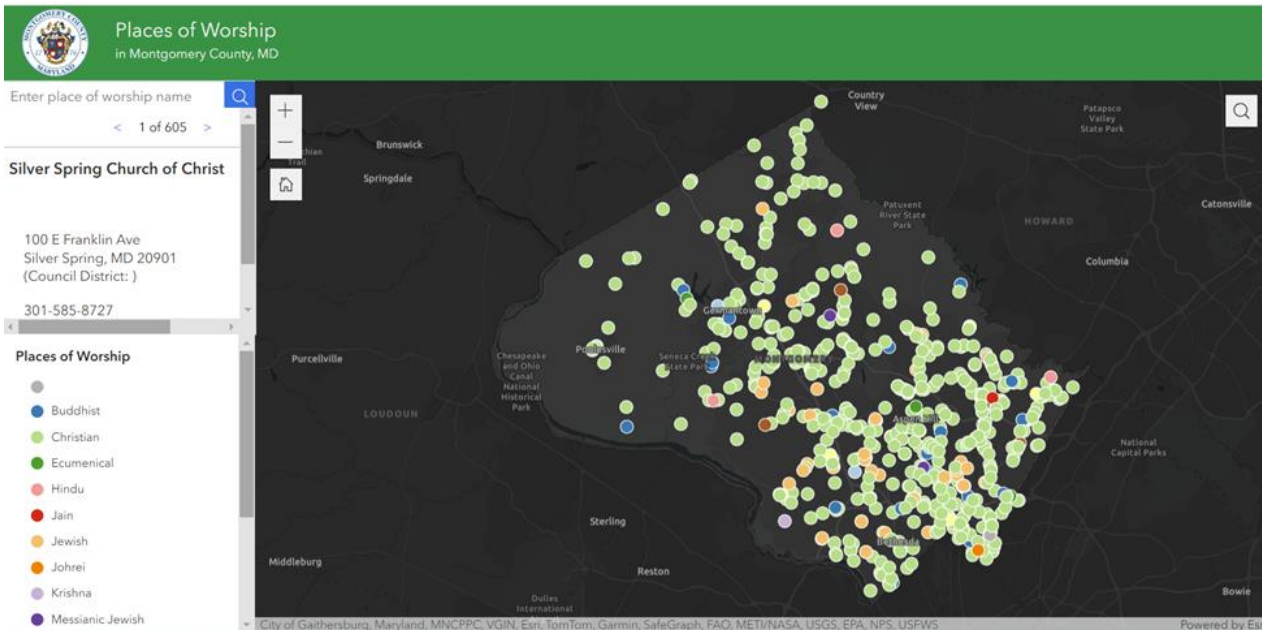


Connecting with the local faith community to support the spiritual aspect of palliative care

3/19/24



Montgomery County is fortunate to have a large, diverse faith community. The County's [Faith Community Advisory Group](#) lists over 600 houses of worship.

[A 2016 study out of England found that:](#)

- Community clergy are well placed to work alongside healthcare professionals and chaplains to meet spiritual needs. Creating opportunities for clergy and palliative care staff to meet and undertake shared training will enhance the quality and level of care for people dying at home who wish to receive spiritual support. Enabling clergy to develop links with local palliative care centers will enhance confidence for both clergy and staff.

Supporting the Spiritual Aspect of Palliative Care

Lack of understanding of the beliefs of patients and families can potentially damage the patient-provider relationship. [The Importance of Cultural Competence in Pain and Palliative Care - StatPearls - NCBI Bookshelf \(nih.gov\)](#)

Faith communities can facilitate – and normalize – conversations about values, goals, and wishes for care in advance of a diagnosis. They also raise awareness among providers of how sacred texts and spiritual traditions can inform attitudes about death and dying ([Conversation Project](#)).

A 2018 study found that frequency of service attendance was positively associated with Advanced Directive completion for both White and African American participants ([Koss, 2017](#)).

Faith communities also have an important role in providing practical, day to day support to their fellow worshipers as well as members of the community who are navigating serious advancing illness, end of life, and grief ([Pew Charitable Trusts](#)).

For Providers:

The [National Consensus Project \(NCP\) Clinical Practice Guidelines for Quality Palliative Care](#) identifies Spiritual, Religious, and Existential Aspects of Care as one of the eight (8) domains of care for those with serious illness or facing end of life.

- The “gold standard” interdisciplinary palliative care team consists of doctors, nurses, social workers, chaplains and other disciplines who work together with a patient’s other doctors and community service providers to provide an extra layer of support.

A recent study exploring [views of hospice and palliative care professionals on the significance of religion, belief, and spirituality](#) found that spirituality can help patients and their loved ones find a sense of comfort and security; make meaning of their experience; help provide closure.

Connecting to community can supplement Palliative Care spiritual support, including cultural competence.

For Patients, Caregivers, Community Members:

Advance Care Planning

A 2017 faith based outreach initiative by the [Maryland Department of Health](#) found that:

1. Advance care planning is relevant and important to faith groups
2. Faith leaders serve as trusted and credible messengers
3. Faith groups are receptive to electronic advance directives.
4. Advance care planning involves spiritual, medical, and legal considerations.
5. Advance care planning is a process, not a checklist item

According to the [Pew Charitable Trust](#), faith communities can play a crucial role for patients in planning in advance for end of life care:

- Faith communities are a natural, appropriate venue for advance care planning.
- For people of faith, advance care planning can be simultaneously a theological, medical, and legal process.
- Some faith communities can clarify how end-of-life decisions align with spiritual beliefs and practices.
- Many faith communities can be valuable partners who facilitate advance care planning. Examples include: offering sermons to provide guidance and/or encourage members to create an advance care plan; hosting trainings, workshops, book discussion groups, film screenings, or even board games that increase community understanding and comfort with this topic.

Palliative Care:

Faith communities are positioned to support people with serious illnesses and their families, as well as clinicians who care for the seriously ill. According to the [Administration for Community Living](#), faith-based organizations have a

meaningful role in the spiritual and emotional wellbeing of the individuals within their congregations and communities. Examples include:

- Create or expand “family ministries” to include family caregiving as a special focus.
- Hold special “caregiver outreach and recognition days” for their congregants at which local service providers can provide information about available services and supports. [68]
- Many (non-medical) social and community support programs are based out of local faith communities (i.e. Meals on Wheels, Rebuilding Together).

Resources:

[Montgomery County Faith Community Advisory Group](#)

[Maryland Department of Health - Advance Directive Outreach and Education with Faith-Based Organizations, White Paper, November 2018](#)

[CaringMatters Virtual Caregiver Support Group](#)

[CaringMatters Caregiver Resources List](#)

[The Conversation Project: Getting Started Guide for Faith Communities](#)

[The Role of Spirituality in Palliative Care](#)

[Spiritual Care in Palliative Care](#)

[The Interface Between Psychology and Spirituality in Palliative Care](#)

[Palliative Professionals’ Views on the Importance of Religion, Belief, and Spiritual Identities Towards End of Life](#)