

**Workshop on 'Wisdom & Science, Compassion & Caring:
Spiritual and Material Values in Psychiatry'**

Held at the Royal College of Psychiatrists Annual Meeting 9th July 2001.

Workshop conductors:

Dr Larry Culliford with Dr Sarah Eagger and Dr Nikki Crowley

Reported by Larry Culliford

The title was chosen to match the title of this conference, '**2001 - A Mind Odyssey: Science and Caring**'. Our primary aim was to get spirituality and spiritual values in psychiatry onto the agenda of the College. Our stated aim was *'To introduce and facilitate a discussion about spiritual and material values in psychiatry, then to offer suggestions on finding a balance between them'*. On the same day we gave a companion workshop on *'Meditation Techniques: An Introduction for Psychiatrists'*.

To foster a safe, intimate atmosphere, we offered only 20 places. In the event, the workshop was heavily over-subscribed.

We began by introducing ourselves, recommending the SIG and describing its work. Participants were then invited to introduce themselves, and to say what had attracted them to the workshop. Here are some of the comments:

'Spirituality seems important in the training of psychiatrists (but is omitted).'

'I feel I have a vital personal stake in spiritual issues within the profession.'

'Faith helps patients. How to acknowledge and make use of this?'

'I decided to attend on the spur of the moment (thinking, there must be more to psychiatry than this!).'

'I want to know how to retain my sanity - and bring peace to my team.'

'I am seeking advice about self-disclosure: how much do I say about my spirituality, religious practice and beliefs?'

'I have problems with the prevailing attitudes of materialism and consumerism, and want the opportunity to discuss them with colleagues, and receive advice.'

After a statement about the usefulness of stillness and silence, Larry introduced a brief meditative pause. He then prepared the ground for the two sets of small group discussion by offering a definition of spirituality: *'A quality that goes beyond religious affiliation, that strives for inspiration, reverence, awe, meaning and purpose even in those who do not believe in God. The spiritual dimension tries to be in harmony with the universe, strives for answers about the infinite, and comes especially into focus in times of emotional stress, physical (and mental) illness, loss, bereavement and death'*.

The first small group discussion focused on identifying *patients'* spiritual requests and requirements: how firstly to assess and secondly to meet these? Groups of five or six, including presenters, met for 30 minutes and then gave plenary feedback, some of it as follows:

'We should acknowledge that psychiatry is changing (listening more to what patients actually want. Taking more account of spiritual issues, of 'healing' as

well as 'cure'.)

'Spirituality is about recognising and valuing an aspect of timelessness about things'.

'There is pressure to do more in less time, so there is a need to establish limits: these should be based on genuine limitations'.

'One way to cope is to seek to benefit from, even enjoy the struggle. (Imagine Sisyphus smiling!)

'Noting the value of humour, we should not always take things so seriously.'

'Why not seek the middle way, the way of wisdom? This means always doing something – enough, but not too much'.

After another meditative pause, and to introduce the second set of small groups, focused more on *practitioners*, Larry read a poem, *'The Invitation'*, by Oriah Mountain Dreamer, a Native American Elder, dated May 1994 (quoted in *'A Passion for the Possible'* by Jean Houston, Thorsons, London, 1998, and in *'SQ - Spiritual Intelligence'* by Danah Zohar and Ian Marshall, Bloomsbury, London, 2000).

The poem begins *'It doesn't interest me what you do for a living. I want to know what you ache for'*. It ends, *'I want to know you, what sustains you from the inside, when all else falls away. I want to know if you can be alone with yourself; and if you truly like the company you keep in empty moments'*. It challenges people to reflect deeply on our values, our aims and deepest motives, and served in the workshop to introduce the topic of 'spiritual skills'. What are they? How may they be relevant to psychiatrists? How may they be acquired and developed?

After a lengthy discussion, we had another pause, followed by a general plenary discussion. We had to admit that we had too little time to do full justice to a huge subject, spirituality, one that is important since it pervades so much of life.

Larry reminded people about the handouts available, which included suggestions about patients' spiritual needs, also the declared benefits of spiritual care. He mentioned other resources available, such as websites and books (including his own), also a prototype leaflet, *'Healing From Within'*, generated by Larry with Stuart Johnson (chaplain to South Downs Health NHS Trust) for use in Brighton. This leaflet, which contains the Murray and Zentner definition of spirituality, is aimed at helping mental health professionals assess and gently explore the religious and spiritual aspects of people's lives. Also listed in the handouts were spiritual skills and attributes useful for psychiatrists.

Both Larry and Sarah recommended *meditation* as a reliable method of improving emotional equanimity, spiritual skills and awareness. Another of the handouts reproduced two articles on this subject by Larry from *'Psychiatric Bulletin'* – *Meditation* 1991, **15**, 295, and *Meditation: Bringing the Mind Home* 1994, **18**, 366.

After a final brief silence, the 90-minute session ended on time. People were invited to complete and return feedback forms. 11 (55%) did so. These were uniformly favourable, showing much about what people brought to the workshop and what they thought they had gained, such as a rekindled interest in spirituality, an appreciation of its relevance to our work, a wish to join the

SIG, the value of stillness and silence, new ideas to try out and the support of like-minded people.

My impression is that, even when encouraged to focus on patients, people naturally spoke a lot about themselves. It was a useful opportunity to share our stories, to give them meaning in the context of the work of the College, and so increase our sense of belonging. This was very satisfying. We are aiming to repeat the workshops in Cardiff next year.

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