As individual practitioners we support a wide variety of different views on spirituality. This is reflected in the manner in which we as mental health professionals acknowledge (or ignore) this aspect in our patients’ narratives. This module should have helped you to develop your awareness of patients’ spiritual health needs and enabled you to consider your own spiritual development. Exploring this highly personalised area, which means different things to different people, can have potential pitfalls. This module has acknowledged the possible dilemmas that a clinician may face, and identified effective ways of addressing these challenges.

What is spirituality and why is it important?

- We associate certain experiences or ideas with spirituality. Even those of us who do not feel ‘religious’ hold certain beliefs about our place in the world.

- Spirituality and religion are often used interchangeably. Despite being closely connected, they do mean different things. Generally, spirituality can be seen as a broader, more inclusive term than religion; one that relates to ‘meaning-making’ or the search for the sacred or divine. Religion is often identified as a structure that supports the expression of certain belief systems usually practised collectively.

- Mental ill health is a factor that is likely to prompt spirituality, beliefs and practices to come into focus, be questioned and/or bring a renewed sense of meaning to people's lives. There is evidence that service users and carers view spirituality as extremely important in helping them cope with the challenges of mental ill health.

- There is now substantial epidemiological research of improving quality, suggesting that while fewer than 10% of studies report negative effects, 80% identify spiritual/religious beliefs and practices as beneficial.

Taking a spiritual history

- Assessment provides a guide and a systematic approach to identifying the spiritual needs of patients.

- A patient's spiritual needs can be assessed during initial screening, as a part of the admission process/first assessment, or as part of an ongoing process.

- The assessment could be carried out by a chaplaincy service, doctors or nurses; however all professionals have the opportunity – and the responsibility (especially with the new equality act) – to enquire into this area of their patients’ lives.

- Taking a spiritual history requires empathic engagement with the patient. A gentle unhurried approach is recommended.

Engaging with patients’ spiritual concerns

- Spiritual care is about helping people whose sense of meaning and worth may be challenged by illness. The presence of a mental health professional enabling and encouraging a patient to reflect is a central factor involved in spiritual care.

- Spiritual care is important to all people, not only those who express a religious belief. It has been found that patients have a constant need to make sense of their circumstances; to find meaning in the events of their day, their relationships and their life during periods of illness and hospitalisation.

- Taking a spiritual history can help to clarify psychotic symptoms, and may be able to distinguish psychotic symptoms from ‘spiritual emergence’ and mystical experiences, which can be positive.
Exploring spirituality with people who use mental health services

Potential dilemmas in addressing spiritual aspects of patient care

- Exploring spirituality could be more problematic if the patient and psychiatrist come from different spiritual backgrounds; however, even when the patient comes from a similar background it is possible to get things wrong and assume a greater sharing of values than actually exists.

- The greatest dilemma associated with spiritual assessment is related to the definition of spirituality. Since it is not strictly defined, it can mean different things to different people.

- Spiritual factors can also have harmful effects on people and communities. However, it can be challenging to distinguish between healthy and harmful spiritual groups and faith-related practices.

- As mental health professionals, we should always show respect for patients’ religious and spiritual beliefs and practices, which help them to make sense of their life experiences.

Further reading


Royal College of Psychiatrists (2013) *Recommendations for psychiatrists on spirituality and religion (Position Statement PS03/2013)* [PDF]