

# **‘SamenZin’: Collaborative learning of chaplains ‘at home’ and general practice nurses mental healthcare**

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Funded by





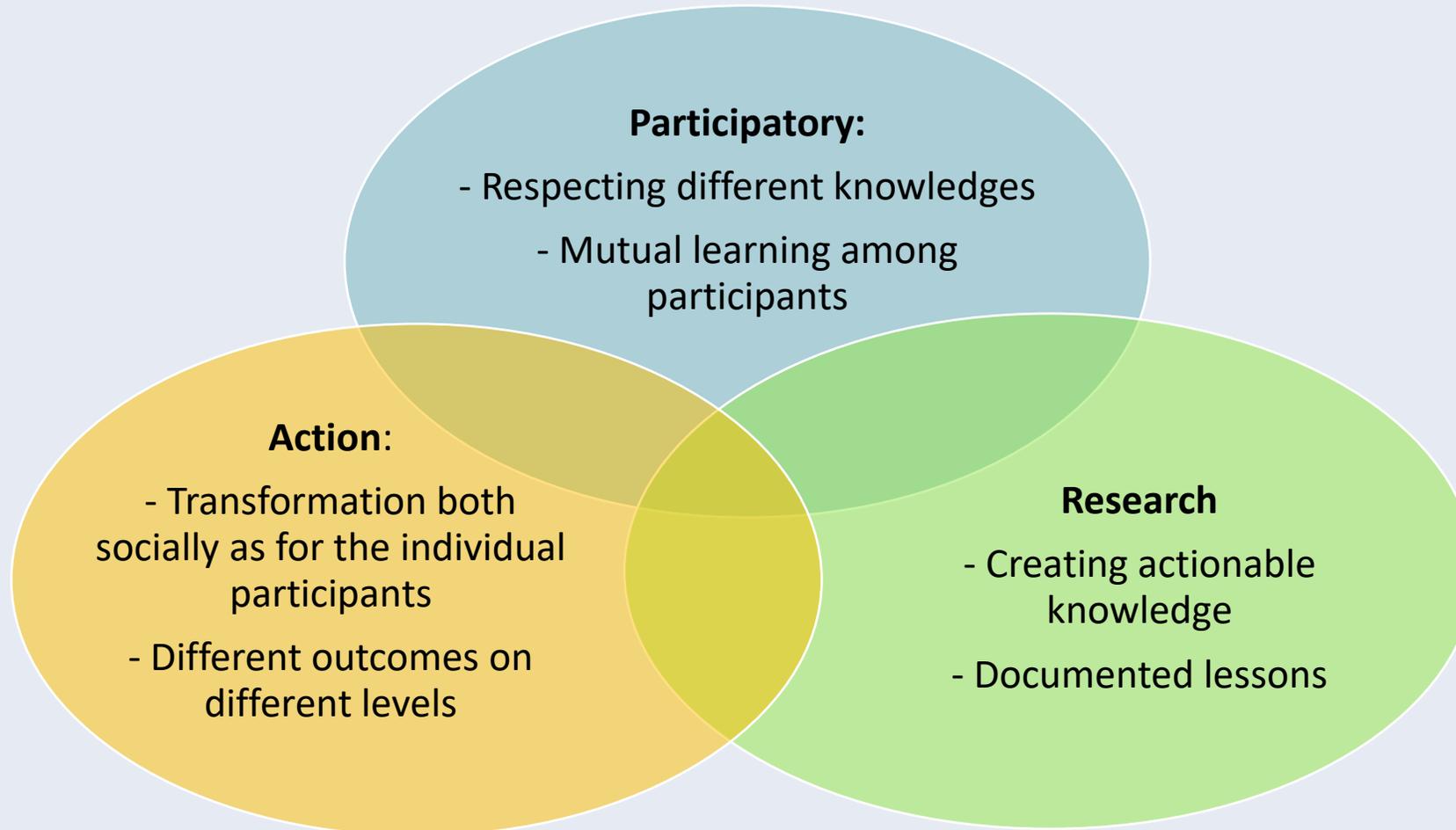
## Background

- In The Netherlands, healthcare chaplaincy is available by law for those people staying in healthcare institutions, e.g. hospitals, nursing homes and mental health institutes
- However, a growing area of healthcare and social care is provided for people living at home, such as the care by GPs, physiotherapists, social workers et cetera. This is financed by healthcare insurance or by the Social Support Act
- Up until recently, healthcare chaplaincy for people living at home was not available or financial compensation was difficult
- In 2019, a pilot has started with the funding of chaplaincy ‘at home’ including a research programme by the Netherlands Organisation for Health Research and Development

## Action research to stimulate the development of chaplaincy 'at home'

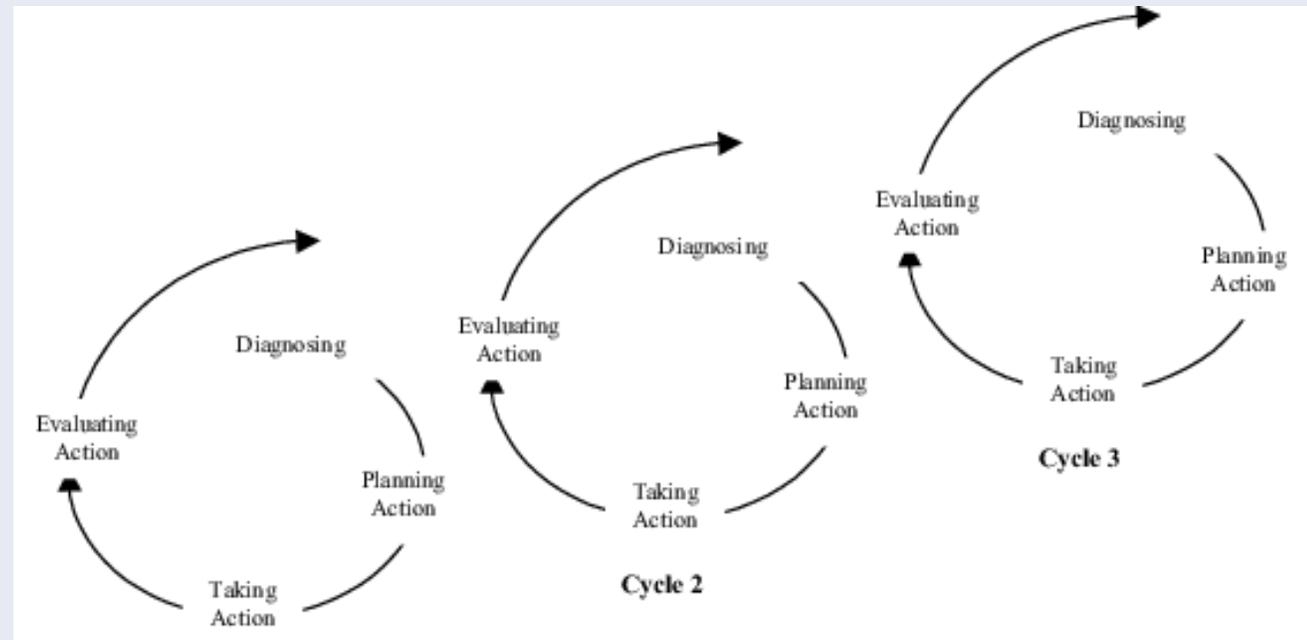
- Part of this research programme are 7 action research projects.
- **'SamenZin': a participatory action research (PAR) project** with chaplains and general practice nurses mental health care (GPN)
- **Problem statement:** People living at home have spiritual needs. However, GP's and other health and social care professionals are not familiar with spiritual care, including chaplaincy, and often are not competent in recognizing spiritual needs
- **Aim of this PAR project:** to strengthen collaboration between chaplains and GP practices by a collaborative learning programme on spiritual care

- **Methodology: Participatory Action Research** (Van Lieshout, Jacobs & Cardiff, 2021)



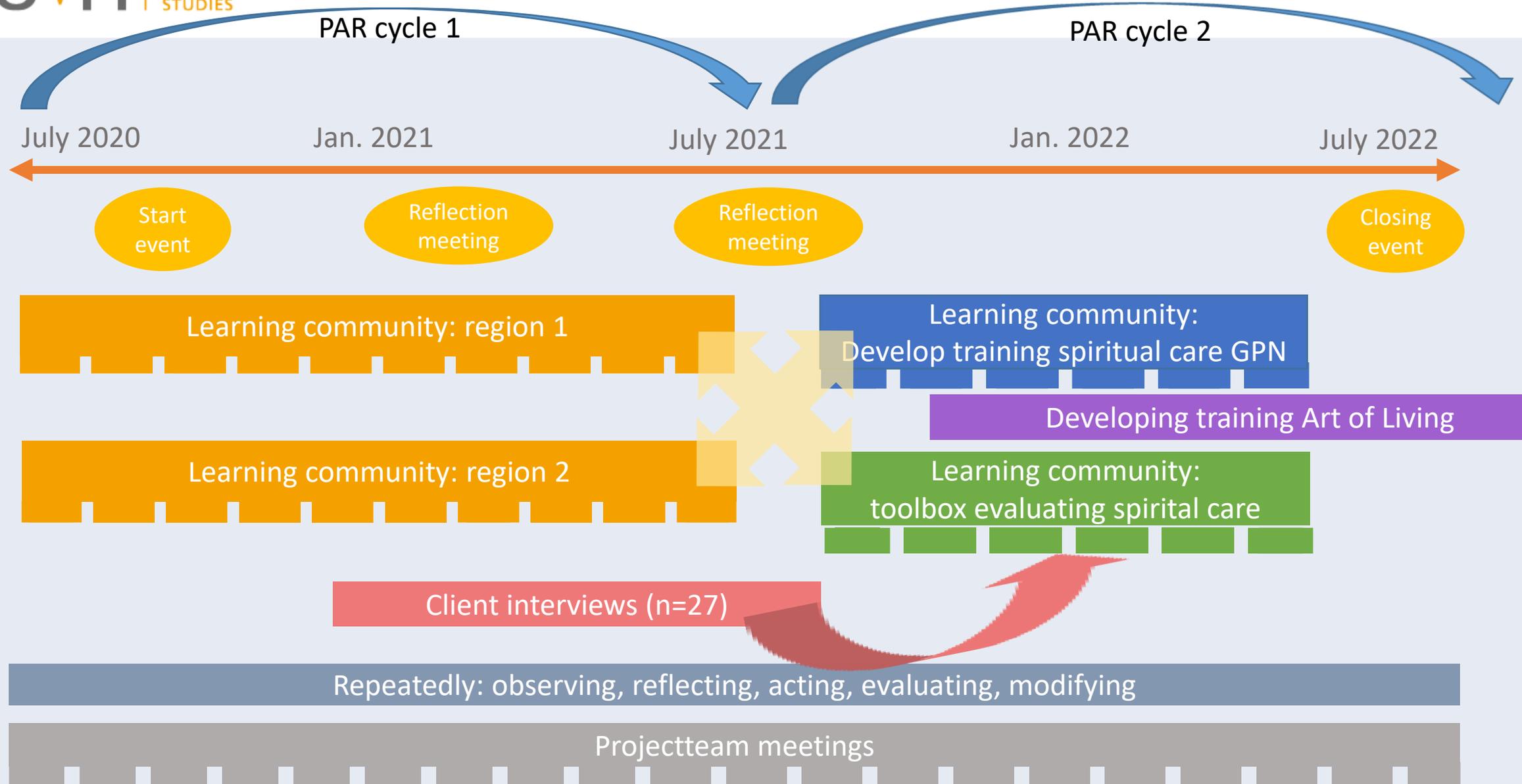
## Design

- Collaboration between university and two Centres for Spiritual Care (CSC) in the province of Utrecht.
- PAR as an open methodology with different activity-reflection-learning cycles
- Participants in projectgroup:
  - 2 action researchers (university)
  - 1 psychologist/educator GPN
  - 2 GPN
  - 2 chaplains (from CSCs)





# Project overview





## The training ‘Spiritual care in the GPN practice’

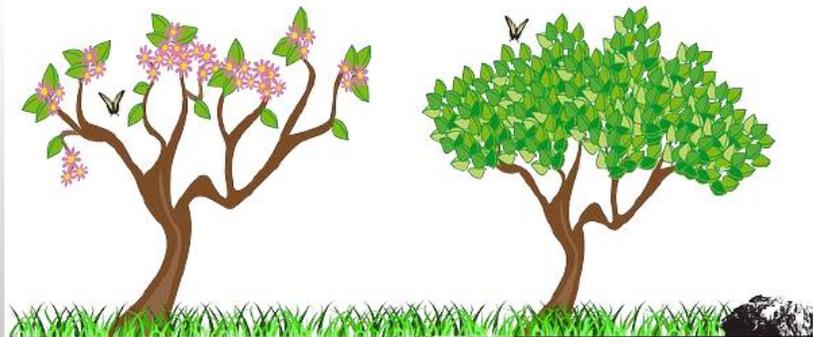
- Creative bottom-up proces: appr. 40 themes/angles (yr 1); 5 predominant:
  - 1. existential (self)reflection;
  - 2. definitions of meaning of life and how to communicate with patients;
  - 3. inner attitude;
  - 4. existential vs psychological perspectives;
  - 5. collaboration between GPN and chaplains.
- Training: 2 days, 4 themes (1-4) – 25th march/8th april
- Evaluation: positive. Adaptation: less theory and even more practise.
- Instruction manual in the writing.

A personal notebook, with theory, assignments and poems: 20 pages



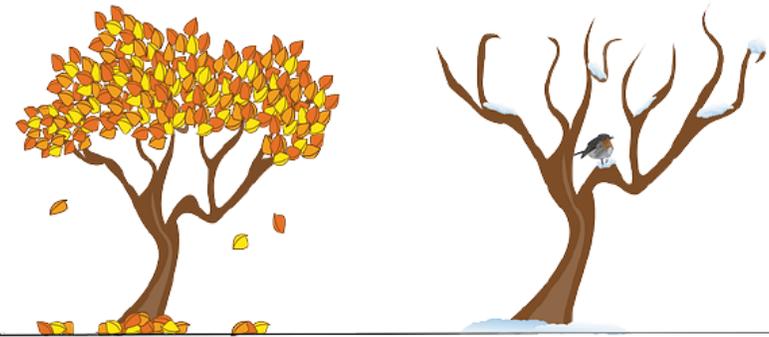
**Zin in Utrecht**

Centrum voor levensvragen



Zingeving in het werk  
van de  
Praktijkondersteuner  
Huisarts GGZ

Maart-april 2022



Naam:



## Background to the training 'Art of Living' for young people (18-30 years old)

Results from creative process:

1. GPN and chaplains want to work together by combining their skills and knowledge
2. GPN had a shared experience with young people
  - don't talk with peers about the challenges of being human
  - seek professional advice where this is not always necessary
  - Result: The Mental Healthcare system in the Netherlands is clogged so people with severe MH issues cannot get the help they need
3. GPN want to participate more in groupwork

Combination 'life skills' and 'existential perspectives' → training 'Art of Living'



## The training ‘Art of Living’ for young people

- Trainers Pilot: 1 GPN; 1 chaplain; 1 experience expert (young and participant)
- 6 meetings with professional guidance, topics: 1. introduction 2. meaning of life; 3. stress; 4. dealing with emotions and existential needs; 5. selfimage and selfcompassion; 6. values and personal qualities.
- 6 or more meetings guided by an experience expert (with professional supervision by chaplain/GPN). Group chooses new topics themselves.
- Every other week; ‘homework’ in between, solo and duo
- Working with a range of Youtube material and a personal notebook.
- First training started mid March and is ongoing. Second training starts May 31.
- Mostly girls (80%-20%), age 20-30; mostly students or first jobs; 50% referral by GPN; rest through education or other.

## Conclusion: looking towards the future

- The PAR project is finishing in June 2022; the learning communities have stopped already.
- It reached about 35 professionals directly and some more indirectly, in the province of Utrecht.
- Lasting outcomes are the training for GPN, the training for young people (and the toolbox)
- Next steps may include a train the trainer programme for chaplains to facilitate the learning programme for GPN
- More difficult is the collection and implementation of the ‘process knowledge’ built on collaboration between chaplains and GPN

## Questions for dialogue

- How do you collaborate as a chaplain with other healthcare professionals?
- Do you undertake activities to support spiritual care by other health care professionals? What are these activities and what is their impact?

**THANK YOU  
FOR YOUR  
ATTENTION**

