

Review

Alister Bull, *Assessing and Communicating the Spiritual Needs of Children in Hospital: A New Guide for Healthcare Professionals and Chaplains*. London: Jessica Kingsley, 2017, 139 pp. (Pbk). ISBN: 987-1-84905-637-3, £16.99.

Reviewed by: Kathryn Darby, Chaplain, Birmingham Women's and Children's Hospital, NHS Foundation Trust, Birmingham, UK
Email: kathryn.darby@nhs.net

Alister Bull worked as a paediatric healthcare chaplain for over 10 years. In this stimulating book, he urges healthcare professionals and chaplains to adopt a shared language of “connectedness” and move away from the “ambiguous language of spirituality”. Using story and play he explores a means of assessing needs in a relational way, creating a safe space for the child to share their experiences, hopes and needs. In a rigorously researched and lucid way, Bull builds a strong argument for using a “connectedness” framework both for understanding the needs of children who are sick and communicating with other professionals to enhance care. This book is a significant contribution to a debate about holistic care and will inspire and support professionals to listen to the voice of the child and let that voice be heard by others.

The book is divided into five main parts and concludes with a final statement of hope for paediatric healthcare. Bull challenges us to continue developing and working more effectively in different contexts to engage with the child and communicate within a multi-disciplinary team.

Part 1, titled Finding Another Way: Connectedness, throws down a challenge to “think outside of the box”. Bull questions the usefulness of “spirituality” as a shared language within healthcare, and introduces the idea of “connectedness” as an alternative.

In Part 2, Understanding Child Development through Connectedness, the ideas of Jean Piaget, Erik Erikson, Urie Bronfenbrenner and James W. Fowler are explored, each “like a light shining through a diamond” as a theoretical basis of his assertions. He highlights four aspects of connectedness: momentum (what drives a person to connect?); resilience (inner and external resources); awareness (the child's ability to make links within

their life map); and evaluative nature (how a child views themselves in relation to their surroundings). A case study vividly illustrates these aspects of connectedness.

In Part 3, *How Does a Child Connect?*, the author describes the place of storytelling and play as the tools of generating an intentional conversation between chaplain and child. Competencies needed for the professional, a case study and a description of methodology, using sorting cards – the Fruit Tree Exercise, the Likert Scaling Exercise and a storyboard – are described.

Part 4, *What Does the Professional Discover?*, provides extensive evidence and the arising themes, including relationships, community, school, activities, and hospital context particulars are outlined.

In Part 5, *The Next Steps: Naming the Voices*, Bull looks more broadly at other spheres of interaction, touching upon many interesting themes including identity and encounter. Compelling to his argument is the assertion that “connectedness” moves us to emphasize the communal, mutuality, and the relational while “spirituality” leads to individuality. “Connectedness” leads to an understanding of one’s own humanity in relation to the other, becoming meaning makers together with the child, entering a “dialectical dynamic”. In this discussion, Bull shares generously from his own experience of childhood health crisis, and loss in adulthood in a powerful way.

The key question – how do we support children in finding their voice, be attentive to that voice and then, crucially, communicate about the needs of the child with other professionals – is thoroughly examined and outlined in this book. The pivotal moment of the book for me was the description at the beginning of Chapter 4 where Bull describes being at a conference and presenting a film clip of a visit to a child. The film is met with stunned silence. People are left speechless as they witnessed children talking for themselves and realized the power of the tool to facilitate this sharing. The fact that the book weaves theory and evidence throughout is in itself an inspiring account of the effectiveness of this story and activity based approach.

“Connectedness” is a term of depth and scope in imagining the networks and aspects of life for a child, inner and outer, which might resource recovery. The illustration of a bridge carrying two-way traffic, just as two people find the meaning in two-way flow of a shared encounter, and also Bull’s highlighting of the “in-between” place of meeting, will live with me. Bull’s suggestions that we might helpfully abandon the language of spirituality in a healthcare context in favour of “connectedness” sparks a lively and important debate. The term spirituality is indeed ambiguous at times, but also points to a mystical depth and expanse that will necessarily be beyond us, will be elusive, yet the word reaches further, even within a health arena. I wonder, just as Bull has explored “connectedness” as a term of depth and

meaning, what other dimensions could be explored, such as “tenderness” as an outward expression of love.

I was most heartened by this lively book and Bull’s commitment to a child-centred methodology that takes the power dynamic seriously between child and adult and asks for an honest self-awareness on the part of the professional/chaplain/person, also on a journey. Bull’s willingness to reflect honestly about his own life journey was a moving and inspiring element of the book. My sense was that this book was indeed a labour of love and will enrich the reader in their practice. As Professor Anne Vanderhoeck said at the launch of the European Research Institute for Chaplaincy in Healthcare (ERICH) in June 2017, “we need more research by chaplains for chaplains”. Bull has made a passionate, well-crafted and carefully researched contribution to our field that I would highly recommend.