

## Review

Paul Nash, Madeleine Parkes and Zamir Hussain, *Multifaith Care for Sick and Dying Children and their Families: A Multidisciplinary Guide*. London: Jessica Kingsley, 2015, 224 pp. (Pbk). ISBN: 978-1-84905-606-9, £15.44.

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The latest book co-written by Paul Nash, one of the country's most experienced paediatric chaplains, is an excellent resource for all chaplains and other health care professionals working in a multifaith environment in a paediatric setting. The book starts with a good introduction and a chapter exploring the "values" and "objectives" for multifaith care. This is an important chapter as it sets the foundation for the rest of the book. A major theme that runs throughout this first chapter is how different chaplaincy is to parochial ministry especially with regard to multifaith work and the different faiths and complex situations a chaplain regularly encounters. The following six chapters look at the care of a child and family for each of the six major world faiths. These include a brief introduction to the faith, its beliefs and rituals, the concept of worship within the faith, names and greetings and language. Each chapter also explores health-related issues such the faith's viewpoint on suffering, perspectives on healing and medicine, bedside support and the whole dying experience. Chapter eight uses a case study of one family's experience to explore differences between spiritual and religious care. Chapter nine is a Buddhist mother's reflection on her experience of hospitalization. Before the conclusion, which offers core principles for best practice, chapter ten explores 'Engaging Health and Religious Care Together' and in many ways brings the book to a natural conclusion.

In setting out values and objectives chapter one makes use of the "star fish" story. Although familiar, it has renewed freshness when explained through the five principles of:

1. Creative, focused competence
2. Global, inclusive connectivity
3. Courageously challenging

4. Sustaining, accessible compassion
5. Celebrating and championing diversity.

With each principle the writers associate a value which they have labelled “Underbelly”. For the first principle, “creative, focused competence” the underbelly is “secure vocational identity”. In this example it recognizes that we all bring our own story to a situation and the importance of self-awareness. Asking ourselves questions like, “Why am I doing this, what am I doing” or perhaps slightly more uncomfortable questions like, “Do I have areas of bias?” are really important if we are to work honestly in multifaith settings and support other faiths outside our own.

A point that the reader is reminded of throughout the book is that children and young people do not go to hospital for religious care, they go there for medical care; however important religious care may be it is not the main reason the patient or relative is there. Realizing this is significant in understanding how unique the ministry of chaplaincy is and the need for the chaplain to be secure in this setting. I personally think that many priests that I come across are not comfortable with this; they do not know how to be secondary, yet give first class spiritual, pastoral and religious care.

Another aspect of this book that I found helpful was the use of personal stories. The Buddhist mother’s reflection on spiritual and religious care in chapter nine was both informative and deeply moving. Not only was I given a better understanding and knowledge around her faith, but I felt as I read her story, that I was part of her journey almost sharing her pain. The reflection is around childbirth and the writer is brutally honest and says becoming a mother was not a joy but a horror story explaining her suffering and reality. Personally, I think it is worth reading this book simply for this chapter; it highlights good and bad health care, gives a real insight into the type of situation that a chaplain may have to work with and the balance between religious care in relation to the person’s faith and what is just good chaplaincy and health care. The writer of the reflection knows about her own faith but also is able to communicate her own thoughts and feelings. She is not frightened to challenge the system. For example when referring to premature babies she says that science may say that their physical body does not feel pain, but asks the question what is the psychological impact on the baby and the mother?

Overall this is a well-written book that is easy to refer to when needed and can be used by any level of chaplain or health care professional. Having been a chaplain for several years and worked and specialized in paediatric settings I found this book refreshing, educational and both uplifting and encouraging. I know I will be re-reading it again and again in my work.