Editorial

Spiritual Care, Mental Health, Hearing Impairment and COVID-19

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Abstract: This issue of *Health and Social Care Chaplaincy* presents a wide range of topics relating to: (i) spirituality and spiritual care education, (ii) mental health care, (iii) hearing impairment, and (iv) COVID-19 in residential aged care. A number of book reviews are presented, as well as the annual overview of *HSCC*. Finally, we welcome a new *HSCC* Editor-in-Chief and remind readers of the upcoming European Conference on Religion, Spirituality and Health planned for 2024. Further, we provide advance notice of a forthcoming conference currently in planning – namely the inaugural International Moral Injury and Wellbeing Conference (IMIWC, 2024).

Keywords: chaplaincy, religion, spiritual care, hearing impairment, deafness, COVID-19

Introduction

This issue of *Health and Social Care Chaplaincy* once again covers a diverse range of topics: spiritual care, mental health, hearing impairment and COVID-19. An annual review of *HSCC* is provided, as well as information relating to the upcoming European Conference on Religion, Spirituality and Health (ECRSH) 2024. A farewell to the Editor-in-Chief is noted, and several book reviews are presented relating to military chaplaincy, ethics and spiritual care.

Spiritual Care

Over past decades and up to the present day, there has been, and continues to be, considerable research and evidence relating to the efficacy of pastoral care and its wide-ranging bio-psychosocial-spiritual applicability in assisting those of whatever spirituality who are in need. This is largely due to the substantial role that faith-based chaplaincy has provided over the centuries, and continues to provide, for those of any faith and for those of none – even in predominantly secular contexts (Layson, Carey & Best, 2023).

According to authors Erhard Weiher and Carlo Leget, however, there is very little research evidence specifically relating to the actual praxis of “spiritual care” and “spiritual accompaniment” from a humanist/secular perspective. Given this inadequacy, they therefore advocate in this issue of *HSCC* the need for conceptual guidelines which will develop secular spiritual care more precisely. They outline five philosophical theses for advancing more secular spiritual care for those living in “secular modernity”.

Ruth Aird, from NHS Education for Scotland, also explores spirituality by noting the dissonance between policies on the delivery of spiritual care to clients in institutions and the education required to perform that
delivery. The conclusion of Aird’s article is that spiritual care is embedded in human rights policy and government health and social care standards, and therefore the educational and professional governing bodies should be responsible for ensuring that spiritual care features in all healthcare training, which should include spiritual care assessment in the curriculum as a way of learning and endorsing knowledge. The recommendation is that specialist knowledge should either be available in colleges and universities, or through specialists brought in to deliver spiritual care education.

**Mental Health**

Margaret Gopaul (from the Department of Neurology, Yale University) and Deena Martinelli (from the Department of Pastoral Care, Manchester Memorial Hospital, USA) present a mental health care guide for chaplains who provide pastoral care to veteran patients in the United States. This guide is based on an evaluation by the US Department of Veterans Affairs and the US Department of Defense, which recognized the increasing utilization of chaplains by military veterans. However, given the prevalence of chaplaincy interventions, a need was identified for additional training among chaplains to further develop their skillset to care more effectively for patients with mental health issues. Their quantitative study of experienced healthcare chaplains working in New York, New Jersey and Connecticut confirmed the need for additional training and preparedness among chaplains who minister to veteran patients with mental health disorders. The results and empirical literature informed the development of a practical guide that includes ways to assist chaplains in providing comprehensive delivery of competent care to veterans, and which no doubt will serve as a guide beyond the military/veteran context.

**Hearing Impairment**

John Patrick Doherty (National Chaplaincy for the Deaf) and Daniel Nuzum (CPE Supervisor, Cork University Hospital and University College Cork, Ireland) present a topic which is without doubt a first for HSSC on two counts: (i) it is the first time an article has been published in HSSC relating to hearing impairment, and (ii) it is the first time an article in HSSC has included video clips. Their article, “Can you see what I say?” Beyond words: Pastoral care education and practice among the deaf and hard of hearing community” argues that empathic relational communication is a key competency in spiritual care for establishing a trusting pastoral relationship.
They advocate that ministry with people who are hearing impaired (deaf) and the profoundly deaf (Deaf) requires attentiveness to sign language, non-manual features, visual cues and facial grammar.

Among those specializing in hearing impairment (e.g. audiologists, teachers of the deaf, speech therapists, etc.), it is common knowledge that people who are d/Deaf experience higher than average healthcare barriers and associated psychosocial impacts, and therefore spiritual care is often warranted. Doherty and Nuzum argue that clinical pastoral education (CPE) provides a natural context to further develop the necessary and deeper relational skills for healthcare ministry with people who are d/Deaf. Doherty and Nuzum’s article draws on the lived experiences of a chaplain engaged in CPE and a CPE educator, in order to highlight current deficiencies in pastoral care for d/Deaf persons, and to explore how relational empathy and spiritual connection can be deepened with individuals who are d/Deaf by developing the appropriate competencies as part of CPE.

**COVID-19**

During the peak of COVID-19, *HSCC* published a special issue on the challenges of COVID-19 affecting the chaplaincy profession (Carey, Swift & Burton, 2020), supplemented by another issue that also reported on the same pandemic (Carey, 2021). In this issue, we continue to consider the effects of COVID-19 with an article by Hope Siesage, Lorna Sams, Naomi Ellis and Chris Swift, who present a longitudinal qualitative study exploring the changing experiences of chaplains employed in care and residential homes during the pandemic. Semi-structured interviews highlighted three key themes relating to their challenging experiences ministering in care homes during the crisis: (i) adapting work practices, (ii) mental health and well-being, and (iii) giving and receiving support. At times the verbatim material included in this article should remind the reader of a time when there was no end in sight for the COVID crisis, and the development of an effective vaccine was purely a theoretical proposition. Alongside other studies, this article provides important insights into the thinking and reflections of chaplains in a crisis which was, when the interviews took place, open ended.

**HSCC Review**

Commencing in 2022, a brief review of the progress of *HSCC* is now provided as part of the editorial. In addition to a number of strategic administrative
changes reported in the previous *HSCC* review (Carey, 2022), a substantial increase in the readership of *HSCC* articles was also reported, totalling approximately 60,000 article views by the end of 2021. Unfortunately, as a result of an ongoing upgrade to the *HSCC* website, the final statistics for internal user results are not available, and even when the user calculator is rectified, it is unlikely to be retrospective. Nevertheless, there are a number of external results to report.

**Citations**

*HSCC* has made exceptional progress since being formally acknowledged and registered as an international peer-reviewed journal with Scopus, and is subsequently accessible via CINAHL, PubMed, MEDLINE and other databases. Scopus is Elsevier’s abstract and citation database and covers approximately 36,377 titles, of which 34,346 are peer-reviewed journals in top-level subject fields from approximately 11,678 publishers. *HSCC* is assessed according to three thematic categories, namely, “Religious Studies”, “Health (Social Science)” and “Social Psychology”. *HSCC*’s overall citation score has increased rapidly since 2018 (CiteScore 2018: 0.3) to achieve a significantly higher citation score in 2022 (CiteScore 2022: 3.2) (see Figure 1).

**Ranking**

*HSCC*’s journal ranking has also improved substantially. In the category of “Health (Social Science)”, it has achieved an improved ranking of 117 (Scopus health ranking: $n = 117/344$). Likewise, in “Social Psychology”,

![Figure 1: Scopus results for Health and Social Care Chaplaincy citations score (2018–2022)](image_url)
HSCC’s ranking is now 131 (Scopus social psychology ranking: \( n = 131/302 \)). However, in the category of “Religious Studies”, HSCC has excelled and is now higher than most other well-known and long-standing journals in this category (Scopus religious studies ranking: \( n = 8/584 \)). HSCC is now ranked in the “Top 10” of religious studies journal publications (see Table 1). This is an exceptional achievement, of which the College of Health Care Chaplains and its affiliated associations should be proud. Given the right ongoing editorial leadership, HSCC should progress even further in its international reach.

### New Editor-in-Chief

Finally, a brief note to say farewell to HSCC Editor-in-Chief, Lindsay Carey, who is retiring from the EIC role as of January 2024. Dr. Carey was the first non-British editor appointed to HSCC, and during his seven years as a Co-Editor/Editor-in-Chief, he has been instrumental in helping to further
progress the HSCC journal to achieve international standards (see Carey, 2022, p. 5). Dr. Carey will continue as a Co-Editor to maintain editorial continuity and represent the Southern Hemisphere (in particular, Australia and New Zealand), as well as assisting the incoming Editor-in-Chief, Rev. Prof. Austyn Snowden, whom we are delighted to welcome.

Prof. Austyn Snowden is a Professor in Mental Health at Edinburgh Napier University. He has supported chaplain research since 2010 and is co-author of the Scottish Patient Reported Outcome Measures (PROMs), the first validated measure of the impact of chaplaincy interventions. He is Head of Research at the European Research Institute for Chaplains in Healthcare (ERICH) and a Visiting Professor at KU Leuven University, Belgium. He has published three books and 100 peer-reviewed articles, and is also a Co-Editor of Nurse Education in Practice.

Book Reviews

Thanks to the work of HSCC Book Review Editor, Fran Kissack, we conclude this issue with a number of book reviews:


Epilogue

ECRSH Congress 2024 (Salzburg)

“Spiritual Care Interventions in Modern Health Care” will be the topic of the 9th European Conference on Religion, Spirituality and Health (ECRSH), 16–18 May 2024, at the Paracelsus Medical University in Salzburg, Austria. Spiritual care as a scientific and clinical field is becoming further established in Europe, as well as worldwide, bringing together pastoral and medical care. Evidence-based spiritual care interventions are at
the edge of this development. The conference aims to present and discuss state-of-the-art interventions in spiritual care from a scientific and clinical point of view. For more information, see www.ecrsh.eu. The HSCC Editor-in-Chief, Assoc. Prof. Lindsay Carey, is one of the keynote speakers presenting at ECRSH 2024. Prof. Piret Paal is a member of the ERSCH 2024 Organizing Committee.

Another forthcoming conference is currently in the planning for chaplains and health care professionals – namely the inaugural International Moral Injury and Wellbeing Conference (IMIWC, 2024), Brisbane Convention and Exhibition Centre, Australia, 19–20 September 2024.

Open Access
All submissions to HSCC are initially published “advance online” and will be immediately available to current journal subscribers. Authors may wish to make their article publications available to a wider audience by choosing “open access”, which requires authors to pay an open access fee to Equinox Publishing, permitting free public access and a broader international readership.

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