Spirituality in the Medical Encounter: The Grace of Presence

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Dr. Sutherland: It is easy to think of spirituality as a domain that is distinctly separate from the practice of medicine. If spirituality is considered to have a place in the medical setting at all, it is usually envisioned as a discussion between doctor and patient where the doctor gingerly approaches the topic of the patient’s religious beliefs to better assess the patient’s available social support. Sometimes, this discussion takes place when the doctor feels s/he has reached the limits of medical knowledge and doesn’t know what else to do, as with a patient facing the diagnosis of a terminal disease or other life crisis. The goal of the discussion may then be to refer the patient to a chaplain or other religious expert.

While this type of discussion is vital and admirable, it is possible for the doctor-patient relationship itself to be a profoundly spiritual encounter, even if the topic of religious beliefs is never broached. I lived within a spiritual community for several years where meditation and introspective work were built into a rigorous schedule. The real emphasis of the practice, however, was that spirituality is grounded in everyday life, not separate from it; that, by our nature, we are spiritual beings, and that connection is, in a sense, the fundamental unit of life. The practice involved becoming aware of this connection and consciously serving it. In the medical setting, spirituality can be defined as the practice of cultivating awareness of a larger and larger context. This may sound like a kind of “off-label” use of the term spirituality, but when we practice cultivating awareness of a larger context, in essence we take a step back and begin to contemplate both ourselves and the patient, each as a whole person. Practicing medicine as a spiritual encounter is really a lifelong work of meditation and introspection, which can be expressed as three steps:

1. Cultivating awareness of wholeness within oneself
2. Seeing wholeness in another
3. Connecting from the sense of wholeness within oneself to the sense of wholeness one perceives within another.

The language may sound abstract, but if connection is a constant principle of life, then we are just acknowledging and consciously participating in that connection process. A way to step into practicing medicine as a spiritual encounter is to listen for the meaning of a patient’s experience, instead of listening only for the reporting of symptoms. Think of this as our attention span, not how many minutes we can concentrate with our minds, but how far we can open our hearts and simply behold ourselves and another person in a given moment. This is deep listening, a facet of spirituality with concrete benefits.

Deeply listening is not just a nice...
thing to do. It is in itself an agent of healing and transformation. Deep listening is an internal orientation of you, the doctor, that becomes experience and then a state you transmit to the patient. (See Sidebar: The Benefits of Listening Deeply.) It may feel like doing nothing, but it can make all the difference in the world. Knowing one is truly heard and understood gives a sense of self-value and a greater ability to bear whatever is going on. The culture of medicine has become so fraught with time constraints, performance measures, and litigation that it loses sight of the two people who are in the room participating in an experience together. Medical training essentially trains doctors to take the person (that is, themselves and the patient) out of medicine. To help bring the person back into medicine, consider two concepts:

The First Law of Theo-Dynamics
Sometimes, the least is what you know; the most is who you are.

The Second Law of Theo-Dynamics
How much time you actually spend with the patient is less important than the quality of your presence.

I use Theo here to represent the spirit and creative power of wholeness or completeness that resides within each of us. Being present and deeply listening brings the person, the humanity, back to the medical encounter and turns it into a therapeutic relationship. The practice of medicine is a spiritual encounter in which the doctor as person is an integral part of the medicine, acting as a catalyst in the therapeutic relationship to reconnect the patient with his/her inherent capacity to be whole. Spirituality in the medical context is about the doctor as expert human being rather than religious expert. This can take the form of holding for patients the vision of their wellness when they are unable to connect with it themselves. It can mean realizing that fear of giving the patient false hope may in fact be directing the patient toward false despair.

How to Practice Medicine as a Spiritual Encounter

Begin every visit with a spiritual orientation toward your patients. This means wanting to know the meaning their experience has for them. (It may help to hold inside of yourself the thought: “I want to know who you are.”) Begin with an invitation: “How can I help you?”

If a patient reports to you what is in his/her medical records, redirect: “I know all of that. I want to know what is going on for you.” A patient may cry because this is the first time anyone has ever asked this. If the person cries, it is actually a good sign. You don’t have to do anything. Just wait a few seconds. The patient will tell you what is really going on, making connections s/he has perhaps not understood until now.

In the presence of your deep listening, you have created the space for self-awareness. Stop talking. Listen. Listen beyond the mere reporting of symptoms. Remember, listening from your heart is a state of deep acknowledgment that you will transmit to your patients.

Even if you only have a few minutes, the patient will feel heard, hopeful, and understood because you have deeply listened. Get comfortable doing nothing. Get comfortable letting a patient leave without a prescription. Listening may be all the medicine your patient needs in that moment.

Conclusion

Spirituality is found in the human condition; it’s in the connection between people. It takes a relatively small investment to connect. It’s not the time spent; it’s the quality of your presence. Connection is the human face of medicine; the human face of medicine is spiritual medicine. Listening beyond the reporting of symptoms will transform your practice and will transform you as a person.

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The time will come
When, with elation,
You will greet yourself arriving
At your own door, in your own
Mirror,
And each will smile at the other’s welcome

— From “Love after Love,” by Derek Walcott 1

Reference