

## Chaplaincy work in hospitals and prisons is in a state of flux, and there are a number of tensions in policy and practice

Chaplains have long been present in public institutions like hospitals and prisons. Historically they have mainly been Christian, with the Anglican Church being the key provider in England and Wales. But this situation is changing rapidly, and changing policy and regulations both reflect and in some cases exacerbate the tensions which arise in the process. One is that between 'secular' professionalism and traditional religious and pastoral roles and responsibilities. Another is between different faiths, and their respective chaplains, in a policy framework which recognizes some but not all religious communities. And a third is that between 'religious care', which may be confessional and tradition-differentiated, and 'spiritual care' which is often seen as non-institutional and more universal, having to do with 'general' human needs.

The state and its institutions may often be described as 'secular', but they nonetheless continue to finance, support and regulate religious professionals delivering religious and spiritual care to patients and prisoners. Surprisingly, given that the National Health Service has had spiritual care as a part of its healthcare package since its establishment in 1948, there is no single piece of legislation which sets out a legal right to spiritual and religious care in hospitals. Nonetheless, it is stated in more recent charters that the NHS must respect the patient's religious, spiritual and cultural needs and 'nine major world faiths': Christianity, Judaism, Islam, Buddhism, Hinduism, Zoroastrianism, Bahá'í, Jainism and Sikhism are recognised. In contrast, there is a clear legal right for all prisoners in England and Wales to access the services of a chaplain.

Layla Welford set out to investigate this mixed policy picture and its impact on chaplaincy practice in healthcare (with comparison to the prison service) in a PhD funded by [the Religion and Society Programme](#) between 2007 and 2010, supervised by the Revd Dr Andrew Todd and the Revd Dr Peter Sedgwick at Cardiff University. She analysed relevant legal and policy documents and used questionnaires, interviews and observation. Layla found that the legal and social policy framework does shape the practice of chaplaincy, but that both chaplains and policy makers are often unaware of the full extent of this effect – some chaplains are even ignorant of the immediate policy framework they are working within. Seen or unseen, the policy framework has a number of effects on chaplaincy. One is an ongoing pressure towards professionalization, because the employment and status of chaplains from various faith groups is enhanced when they have undergone accredited training and can claim the same rights as other professionals. Another effect is a shift towards patient-centred care with a focus on choice, dignity and compassion. A further issue the research highlighted was the significance of the fact that nurses are now officially required to provide 'spiritual care'. Not only is there some debate as to what this involves, but it can create collaborations – as well as tensions – between nurses and chaplains. This research shows that the line between the religious and the spiritual isn't clear, though there may be more focus on rites with the former and existential questions in the latter.



*Image from the UK Board of Healthcare  
Chaplaincy homepage*

The research discovered some areas where policy developments can have a negative impact. For example, data protection legislation means that the religious affiliation of patients cannot be passed on to the hospital chaplaincy team, without explicit permission. Although patients should be asked whether they would like to see a chaplain on admittance, this often doesn't happen. Christian provision continues to dominate in chaplaincy, but is fast being supplemented or even replaced with other forms of chaplaincy, including Muslim representatives in most local health trusts and prisons. Provision for other religious groups is context dependent and groups other than the recognised nine are being discriminated against.

Thus the law can be seen helping to ensure that the spiritual and religious of individuals from some religious groups are met in times of crisis when in public institutions. Yet, healthcare chaplaincy is a contested and changing area continually impacted by changes in the structures and governance of healthcare in the UK, as well as shifts in religious and spiritual contexts and policy, and the opportunities for fruitful engagement between spiritual care and health are not being fully exploited. Religion is too often the junior partner in a world of 'secular' frameworks which impact upon it in unpredictable ways.

Layla's thesis was examined by Dr David Lyall and Professor Norman Doe in December 2010 and passed with no corrections.

### Find out more...

- Read the paper Layla presented at the 2008 Plymouth Postgraduate Symposium about this research: <http://www.ppgs-research.org/2008%20Proceedings.pdf>
- Contact Andrew Todd: [http://www.cardiff.ac.uk/share/contactsandpeople/academicstaff/P-T/todd-andrew-rev-dr-overview\\_new.html](http://www.cardiff.ac.uk/share/contactsandpeople/academicstaff/P-T/todd-andrew-rev-dr-overview_new.html)

### You might also be interested in...

- Sophie Gilliat-Ray's Religion and Society funded project about Muslim chaplaincy also based at Cardiff: <http://www.cardiff.ac.uk/share/research/centres/csi/research/muslimchaplaincyproject/index.html>
- Chris Philo's Religion and Society funded project on the everyday urban spiritual: [http://web.me.com/jennifer.simmonds/Everyday\\_Urban\\_Spiritual/Welcome.html](http://web.me.com/jennifer.simmonds/Everyday_Urban_Spiritual/Welcome.html)
- The Cardiff Centre for Chaplaincy Studies which hosted the project: <http://www.stmichaels.ac.uk/chaplaincy-studies.php>
- The UK Board of Healthcare Chaplaincy: <http://www.ukbhc.org.uk/>
- The Multi-faith Group for Healthcare Chaplaincy: <http://www.mfghc.com/>



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## Project Details

### Award Title

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**Spiritual Health and Public Policy**

### Team

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### Research Partners

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The Revd Edward Lewis (Chief Executive and Director of Training, Hospital Chaplaincies Council)

The Multi Faith Group for Healthcare Chaplaincy

The Revd Christopher Jones (Church of England Board for Mission and Public Affairs)

### Award Type

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Phase 1 Collaborative PhD Studentship

## Key terms

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chaplaincy, healthcare, spirituality, NHS