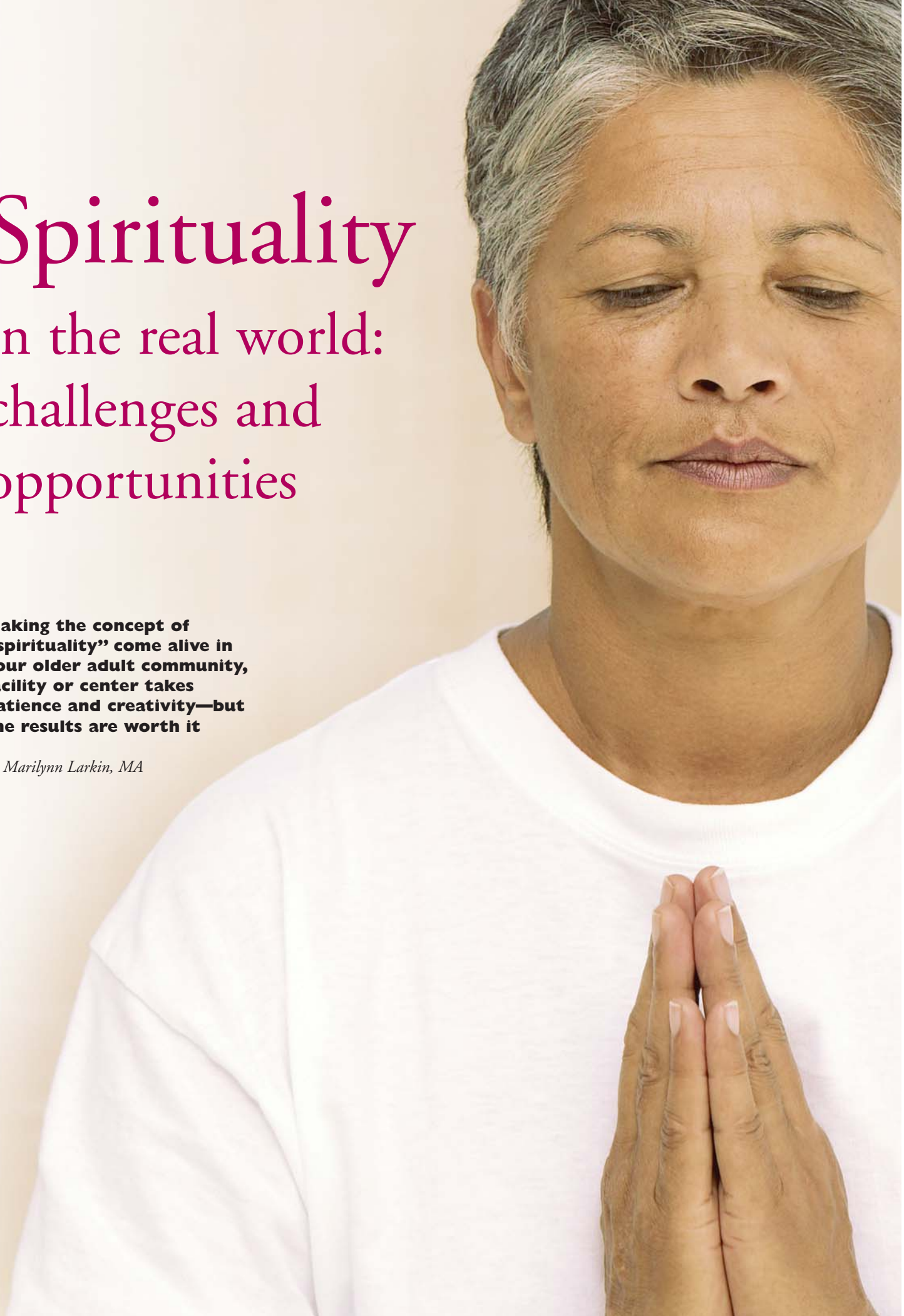


# Spirituality

in the real world:  
challenges and  
opportunities

**Making the concept of  
“spirituality” come alive in  
your older adult community,  
facility or center takes  
patience and creativity—but  
the results are worth it**

*by Marilyn Larkin, MA*



The holiday season, perhaps more than any other time of the year, brings the concept of *spirituality* to the fore. Yet, among the 6 dimensions of wellness that many active aging professionals strive to foster in their environments, the spiritual dimension seems to present the most challenges.

There is little consensus about what spirituality means in the context of older adult settings, how to make the vision a reality, or who should spearhead these efforts. But as managers and staff grapple with these issues, they share at least one thing in common: recognition that integrating the spiritual dimension of wellness is important. With that in mind, we asked wellness experts as well as leaders in various types of organizations to share their insights into what hasn't worked, what is working, and what they've learned in the process.

### Defining spirituality

Part of the difficulty in implementing *spirituality* stems from the term itself, according to our interviewees. "Many people think spirituality is religion; that it's about following the creeds and doctrines of a particular faith," says wellness consultant John Rude, president and CEO of Age Dynamics Inc. in Eugene, Oregon. "Many faith-based organizations take this view, as opposed to viewing spirituality as part of the whole-person concept of wellness that includes the physical, social, mental, emotional, vocational, and spiritual dimensions."

"We've found that when we use the word *spirituality* to express the spiritual dimension of wellness, our members don't really know what we're talking about," agrees Elizabeth Bernat, director of leisure and learning at Lowcountry Senior Center in Charleston, South Carolina. "Here, in the Bible Belt, people automatically think we're

talking about religion, and they say, 'Well, I already go to church.' Or they're turned off by religion and don't want anything to do with the concept of spirituality."

To bring the broader concept of spirituality to their constituents, providers and management should think of it more as a "world view," observes Reverend Don Koepke, who directs the Center for Spirituality and Aging in Anaheim, California. "Our function is not to foster religious practice," he says. "Rather, the focus should be on whether or not people's religious practices are helping them—and if not, what are they doing to help themselves make sense of the world?"

"Everyone has a perception of who they are and a way of putting life together," states Koepke. "This *world view* is what the person has feelings and opinions about. And this is what we mean when we talk about spirituality."

### Start with discussions

Many organizations find that residents or members resist participating in *spiritual programming*. Sometimes, it's because they equate spirituality with religion, as noted above. But individuals have also called such programs "intrusive," making the point that spirituality is personal, and doesn't lend itself to a class or lecture.

"If spirituality is deeply personal, then communities should start by asking, 'What does spirituality mean to you?'" asserts former wellness consultant Jan Montague. "We wish everyone would move away from the concept of a spirituality *program* and instead offer opportunities for group discussions and self-inquiry," adds Montague, now vice president of wellness initiatives at Lakeview Village continuing care retirement community (CCRC) in Lenexa, Kansas.

Koepke also advocates group discussions, triggered by such questions as:

- What do you know now that you wish you had known 40 years ago?
- What do you know now that you could only know today at age 85?
- What are the advantages of being as old as you are?

"These are all *belief* questions that relate to spirituality," says Koepke. "As people begin to respond, you ask 'What helped you come to these conclusions?' For some, it's listening to Maria Callas sing *Madame Butterfly*; for others, it's their prayer life; some will talk about volunteerism; others, the times they were the family caregiver."

Cynthia Hampton, director of spiritual services at Episcopal Retirement Homes' Deupree Community in Cincinnati, suggests that if individuals feel their spiritual beliefs are private, professionals shouldn't "start the discussion by asking flat out a question like 'How do you view God?' That doesn't work at all." According to Hampton, a better approach is "to ask them to tell stories about their lives, about what has been important to them. Then you start to see what their values are and can help them find meaning in their life today," she says. "You want to tease it out in a more indirect way."

Even the word *religion* has a broader meaning than we might think, notes David Cottrill, Episcopal Retirement Homes' spiritual director. "Religion comes from the Latin word *religiare*, which means ligaments—what holds the body together. So what we're doing with spirituality is asking 'What holds you together?' This enables you to start from where the person is," he explains, "rather than any preconceived notion of where he or she is or should be."

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## Use mind-body techniques

Some of our interviewees felt that specific types of programs can foster older adults' connection to themselves and help provide meaning to their lives. Age Dynamics' Rude believes that while all the dimensions of wellness overlap and go together, the spiritual and vocational dimensions are especially intertwined for people living in retirement housing.

"When people retire, they're often viewed as obsolete, and this is a difficult pill to swallow," says Rude. "This is particularly true for men, because they tend to wrap their egos around work. If males haven't prepared themselves for their retirement years, they often feel unacknowledged and undervalued; females, on the other hand, are more socially connected and have many more transitional skills that help them adapt," he observes. "Males have difficulty trying to find meaning and purpose in their lives, which often leads to depression. So I link spirituality with vocation," Rude says, "because I think one of our responsibilities in programming is to help older adults rediscover their passions, and that relates to meaning and purpose. It goes beyond bingo and Bible studies," he emphasizes. "It must be much deeper than that."

Rude advocates instruction in yoga, tai chi and qi gong, which he believes are "excellent formats for bringing mind and body together and creating spiritual energy." Some communities easily embrace these mind-body activities; however, "others are suspicious and think they're part of Eastern cult religions," notes Rude. "If I have clients who are frightened by these terms, then we simply change the words. We call the classes stress reduction or deep-breathing exercises.

"There are other strategies that help individuals get in touch with spiritual

energy, such as hiking mountains and streams or visiting shrines and temples," Rude explains. "Or they can heighten their connection to spirit by viewing great art, listening to inspirational music or simply sharing quality time with a valued friend."

At Episcopal Retirement Homes, "we do discussions, programs and one-on-one experiences to foster spirituality," states Kathy Ison, vice president of organizational development and technology. "We integrate spirituality in very traditional ways with services [for all faiths], Bible studies and one-on-one visits. But we also offer classes that combine fitness and mindfulness, as well as special events such as discussions on how to savor the holidays with older loved ones. There's a spiritual component," she adds, "even if you're not saying the word *God*."

## Don't intimidate

Discussion groups and programs that require individuals to reveal their thoughts and feelings can intimidate participants, even when leaders succeed in establishing an environment of trust, our interviewees agreed. However, certain strategies can reduce the pressure while still encouraging participation, advises Faye Krejci, vice president of marketing and community relations at the Rappahannock Westminster-Canterbury CCRC in Irvington, Virginia. The community's Voyages program combines lecture, physical activity, meditation, and discussion in a half-day event that happens several times a year. During the session that involves life review, "some of the exercises are actually written," says Krejci. "Participants then have an opportunity to come together in smaller groups and share some of what they've written, if they choose to."

After some trial and error, the Rappahannock Westminster-Canterbury

## Lessons learned

Finding ways to make the spiritual dimension of wellness *come alive* in active adult communities, seniors centers, and other settings clearly is an ongoing process. Here are some key lessons learned from those who have taken on the challenge:

- **Take a broad view.** Make it clear that spirituality is not the same as religion, but rather about one's world view—what the individual considers meaningful and important.
- **Offer a variety of opportunities** that require varying levels of commitment, introspection and sharing. These may include discussion groups, one-on-one talks with a staff member, and mind-body and creative activities tied to spiritual encounters.
- **Start with the person,** not preconceived notions. Allow the person to express as much—or as little—as he or she wants. Don't force participation or put anyone on the spot.
- **Hire staff members who are sensitive to the spiritual dimension of wellness** and knowledgeable about working with older adults to support that dimension. Or educate your current staff in these areas. Don't assume an outside expert is needed; you may already have resources within your community.
- **Don't measure success by numbers alone.** If everyone's spiritual needs are met because you offer appropriate programs and opportunities, then you are succeeding.

staff decided that the program worked best when held on a single day from the morning to shortly after lunch. “Originally, we had set it up as a 4-part series, but it was difficult for residents to commit to multiple sessions so there was no continuity,” Krejci explains. “This way, it’s easier to commit the time, and by including coffee and lunch, we actually create opportunities for interaction among residents and staff.” Nevertheless, “the program is still in its infancy, and each time we do it, we refine it,” she says. “We’ve gone from 3 or 4 participants to close to 50, so people seem to be finding meaning in it.”

At Lowcountry Senior Center, Bernat and her colleagues make participation in spiritual endeavors less intimidating by offering programs that are not identified as spirituality programming per se. “We’ll use a book such as *The Artist’s Way* to stimulate discussion about how the author sees spirituality as a way to help in the creative process. Or we’ll discuss ways to overcome writer’s block and open yourself up to new ideas—again, related to spirituality, but not identified as such,” says Bernat. “We’re also trying to slowly educate people by, for example, having a speaker come in and talk a bit about the spiritual dimension of wellness and how it relates to aging—a kind of soft sell.” [Ed. *The Artist’s Way* appears in the list of resources on page 30.]

“When it comes to spiritual care, the bottom line is that you can lead someone to water, but can’t make them drink,” adds Koepke. “If someone doesn’t want to participate, it’s okay; don’t try to force them. As professionals, we can offer opportunities. Then it’s up to the person whether he or she wants to take advantage of these opportunities.”

### **Hire the right staff**

Often, staff play a key role in determining whether residents or members want to participate in spiritual

programs or experiences. “We’ve learned that staff must be comfortable dealing with issues with a spiritual dimension, such as death and dying; otherwise their discomfort will carry over to the residents,” says Hampton. Episcopal Retirement Homes educates its staff about these issues and suggests strategies for having conversations about these topics.

Krejci notes that when the Voyages program started several years ago under a mandate from the board of trustees’ ethics committee, Rappahannock Westminister-Canterbury brought in outside consultants to give presentations—for example, an attorney who focused on elder law. “The response was minimal, and we found that we were not satisfied with outside speakers,” she recalls. “They had their own agendas and didn’t really respond to the needs of our residents.” The community decided to bring the program in-house—and hasn’t looked back.

“I’d say that most communities have the resources within to develop programs that address spiritual issues,” says Krejci. “Our social worker, wellness coordinator, and chaplain already have the trust and respect of our residents, and established relationships,” she points out. “So I’d say to other communities, give yourself credit for probably having the talent and built-in trust and respect that are crucial if you’re going to be helpful to people in this way.”

Some people feel that spiritual discussions can work better when led by mature people. “Experiencing the various life stages has an impact on spirituality,” states Montague, “which is why it’s important for older adults to have a voice in this area.” However, she believes that “encounters are likely to be more effective if led by individuals who, regardless of age, understand the connection of spirit and what it means to truly be a spiritual person.”



Cottrill suggests that credentials and trustworthiness are more important qualities than age. “We don’t wait for all of our surgeons to be 90, so that they understand what’s going on with their older patients,” he says. “Young people should have the appropriate training and prove themselves, to show that they can be trusted. If we reject someone out of hand because he or she is younger, it’s reverse ageism,” he contends.

Koepke comments that whenever he leads worship in a skilled care center, “I’m very aware that there are 30 people in front of me who are 90 years-old—that’s 2,700 years of experience with life and with God, and all I have is 65 years. Therefore, I don’t go in as the answer man,” he says. “I don’t lecture or guide; I evoke. What is evoked is important,” Koepke stresses, “not how old you

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are or whether or not you pass on information.”

Rude emphasizes that “spirituality is not about a particular program; rather, it’s about imbuing existing programs with a spiritual context, so the wellness director isn’t the only one encouraging spiritual growth or influencing social connectedness. Other departments are also responsible for those 6 dimensions of wellness,” he continues. “And if an organization buys into these guiding principles, then you have a more dynamic and cooperative spirit focused on all 6 dimensions.”

## No easy answers

Even with the right leaders, addressing spirituality across the continuum of older adult communities and in other settings can be slow going. “Part of the difficulty in getting participation is the content of the discussions,” says Bernat.

“Talking broadly about images of aging and the qualities people work for in order to feel wise is easy,” according to Bernat, as such topics don’t require individuals to do a lot of self-evaluation. “But once you start talking and doing exercises about things like looking back on your life and forgiving other people and yourself, or facing your own mortality, people start dropping out, because these are difficult things to deal with,” she explains. “If, for example, you really haven’t resolved your issues about a spouse who died and you come to class and these emotions are brought up, it can be very challenging.”

Bernat “hears a lot of people talk about spirituality and how great it is, and how we all need to do more of it, because once you face your fear of dying, you’ll live a richer life. But to get to that place, you have to go through some very dark places,” she says, “and I think that’s why

spiritual programming hasn’t taken off ... People touch it and say, ‘I don’t want to go there.’ But you have to go there yourself in order to successfully do this kind of programming.”

Rude acknowledges that human aging is a paradox of both losses and gains, and suggests a strategy for turning some of the darker feelings around. “Older adults often move into a retirement community because they’ve had some type of loss—for example, death of a spouse, a hip fracture, or they no longer drive an auto. They get caught up in the loss and dwell on it. But a loss can also be stimulus for new growth, if people are encouraged to move forward with that notion,” he comments. “That alone can be a huge spiritual opportunity—to learn how a loss can be turned into a gain; to discover new friends after they’ve lost some of their own.”

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## Resources

### Internet

Age Dynamics Inc.

[www.agedynamics.com](http://www.agedynamics.com)

Center for Spirituality and Aging

[www.spiritualityandaging.org](http://www.spiritualityandaging.org)

Episcopal Retirement Homes

[www.episcopalretirement.com](http://www.episcopalretirement.com)

Lakeview Village

[www.lakeviewvillage.org](http://www.lakeviewvillage.org)

Leadership Greater Hartford’s Third Age Initiative

[www.leadershipgh.org/new/thirdage.html](http://www.leadershipgh.org/new/thirdage.html)

Lowcountry Senior Center

[www.ropersaintfrancis.com/seniorcenter](http://www.ropersaintfrancis.com/seniorcenter)

Rappahannock Westminster-Canterbury  
[www.rw-c.org](http://www.rw-c.org)

Shepherd’s Centers of America

[www.shepherdcenters.org](http://www.shepherdcenters.org)

### Print

*The Artist’s Way: A Spiritual Path to Higher Creativity* by Julia Cameron.

Published in 2002 by Tarcher/Putnam.

More information available at [www.theartistsway.com](http://www.theartistsway.com)

*The Creative Age: Awakening Human Potential in the Second Half of Life* by Gene D. Cohen. Hardcover published in 2000 by William Morrow & Company. Also available in paperback

*From Age-Ing to Sage-Ing: A Profound New Vision of Growing Older* by Zalman Schachter-Shalomi and Ronald S. Miller. Published in 1997 by Warner Books

*Man’s Search For Meaning* by Viktor E. Frankl. First published in 1946. Various editions available

*The Mature Mind: The Positive Power of the Aging Brain* by Gene D. Cohen. Hardcover published in 2005 by Basic Books

*Spiritual Passages: Embracing Life’s Sacred Journey* by Drew Leder. Published in 1997 by Tarcher/Putnam



**THE INSTITUTE FOR PREVENTIVE FOOT HEALTH IS PLEASED TO ANNOUNCE THAT IT HAS BECOME ICAA'S PARTNER AND MAJOR CONTENT PROVIDER FOR THE FOOT CARE SECTION OF THE ICAA WEBSITE (WWW.ICAA.CC)**

The Institute for Preventive Foot Health (IPFH) exists to promote awareness of, and the need for, preventive foot health as a key to long-term quality of human life, and also to promote research and education dedicated to preventive foot health practices, products and procedures that contribute to the general well being of the human foot. The need for the Institute arises from the realization that the human foot in industrialized society undergoes a process of normal degradation over

the course of a lifetime. The need for the Institute also derives from the significant lack of awareness of proper preventive foot health practices among the general population (and even the medical community). Perhaps most importantly, the need for the Institute arises from the recognition that overall quality of human life is directly related to people's ability to be mobile – which itself is directly related to the condition of their feet.

*“Preventive Foot Health” is defined as the practice of taking proactive measures to protect and care for the feet to reduce the probability of incurring serious problems as the feet age over the course of a person’s lifetime. Preventive foot health is necessary in all sports and activities as well as in daily work and home routines. It is a vital and critically important practice in persons with chronic health problems such as diabetes, arthritis, and circulatory disease where small problems can be magnified into both limb and life threatening conditions.*



[www.thorlo.com](http://www.thorlo.com)

Thorlo is the founding sponsor of IPFH and a preferred vendor to ICAA members.



[www.icaa.cc](http://www.icaa.cc)

ICAA: Changing the Way We Age

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## Measuring success

Given the difficulty of working the spiritual dimension into a wellness strategy, and the creativity required to do so, how do organizations assess whether their efforts are bearing fruit? Going strictly by the number of participants “may not be the best way to evaluate,” says Koepke.

“Activities such as bingo or a lecture will draw participants because there’s nothing demanded of them, and there’s nothing wrong with that,” affirms Koepke. “However, for the people who want to move forward, there needs to be something else. For example, when I was a chaplain in a retirement community, we had a celebration of life week that included an ICAA seminar, as well as

crafts and other creative activities revolving around the theme. But, we also had a meditation/prayer group,” he adds, “where we would sit and talk about spiritual life and then spend 20 minutes in total silence. We had 150 people attending the celebration of life, and I had 3 people in the meditation/prayer group. But I would say that both were successful.”

The key, says Koepke, is “looking at the whole picture of your programming and making sure you have options for everyone. Some people are ready for deeper commitments, and may express this spiritual readiness in very small groups or on a one-on-one basis. If your community provides opportunities for them, as well as for people who feel

comfortable in less demanding activities, then you are succeeding,” Koepke concludes. ☺

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Hettler, B. (1976). The Six Dimensions of Wellness. Retrieved from <http://www.hettler.com/sixdimen.htm>.

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## Shepherd’s Centers of America: fostering life’s meaning and purpose

Started by the Reverend Elbert C. Cole in 1972 in Kansas City, Missouri, the Shepherd’s Centers movement has a unique way of providing opportunities for adults ages 50-plus to find or maintain meaning and purpose in life—a hallmark of the spiritual wellness dimension. This model involves collaborating with congregations and other existing organizations to decide what the needs are in a specific setting and how best to serve them.

“We’re not bricks and mortar; we’re virtual centers,” explains Executive Director Kay Wallick. “We partner with other organizations and use their buildings to do education and activities that are run by older adults themselves.”

Across the United States, there are currently 75 Shepherd’s Centers in 21 states, and “no 2 are alike,” says Wallick. “Some are centers of learning, with poetry and art classes; others run meals

on wheels and other programs to give back to the community. The centers are 501(c)(3) organizations led by independent boards of trustees,” she says, “and volunteers work to get commitments from their local congregations to support their mission.” Centers also work with local area agencies on aging to help determine what the gaps are in a community and how the centers can help without duplicating existing services.

“Community bridge-building” is at the heart of Shepherd’s Center activities, according to Wallick, and this makes it an especially good model for organizations that serve active older adults. “People who live in the neighborhood, which may include residents in a retirement community, do outreach to various faith-based groups and service organizations, trying to build coalitions,” she says.

However, “we’re cautious about religion,” states Wallick, adding that the Shepherd’s Centers movement is inclusive and welcomes all faiths. “We emphasize self-actualization, giving back, socialization, and living a life that matters. The *spiritual* part is what happens inside each of us as we do what makes us feel good.”

But even the pioneering Shepherd’s Centers of America are in transition, largely in anticipation of the influx of Baby Boomers. “The Shepherd’s Center of Arkansas recently changed its name to LifeQuest,” observes Wallick. “We’re also looking at Leadership Greater Hartford’s Third Age Initiative as a model. We know that Boomers approach life differently from earlier generations,” she adds, “and we want to be prepared to help them maintain meaning and purpose in their own way.” ☺