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Mind and Body Via the

orgiving oneself (and others) can affect recovery

Wil

t is not uncommon for spiritual issues to arise for a patient during physical or occupational therapy sessions. Often, there are spiritual aspects of the injury or health problem that are impossible to separate from the physical or emotional aspects. As the therapist and patient work together, they establish an environment of trust. It is from this base of safety that some patients feel free to reveal their spiritual selves.

Spirituality is a broad term that encompasses all of an individual's beliefs, which sometimes evolve and change as one goes through life. Religion often is a component of spirituality, but the terms are not interchangeable. Religion generally describes doctrines, which at times may not match with a deeper knowing within the person. When any religious or spiritual beliefs have begun to foster feelings of guilt, it is necessary to bring these beliefs into the light of consciousness and to consider what effect they are having on one's health and overall life. Unless this can be accomplished, therapy can be undermined.

While hands-on therapists may feel limited in their ability to work with their patients' spiritual issues, there are a few simple guidelines to follow that will help the individual and enrich the therapy.

The best way to handle spiritual issues when they arise is simply to listen to the patient without judging or evaluating what he

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or she says. It's important not to lead the patient or to "get ahead" of that person in his or her process of expressing and examining current beliefs. To project any sort of outcome is a trap for both the patient and the therapist. If the therapist thinks he or she knows where the patient needs to go in this process and thus becomes invested in the outcome, then the discovery of truth by the patient will be hindered.

At times, it is valid to ask the patient an open-ended question

in four places and suffered head and neck injuries. In the years since the accident, she developed TMJ dysfunction, trigeminal neuralgia, degenerative arthritis and fibromyalgia. She believed the accident and the pain she was experiencing were a punishment from God. She often had considered suicide.

The therapy Jane received included physical and massage therapy, psychotherapy and CranioSacral Therapy. During this process, she began to look back at old beliefs that were barriers to her healing process.



"I used to believe in devils. But now I believe in angels."

- Jane, an accident victim

about spirituality, because those aspects of life are very much a part of who we are. I don't think it's any more unusual to ask the patient what he or she believes in, than it is to inquire about what burts

Spiritual beliefs from early in life can be distorted or erroneously recorded in the mind and body. It may be necessary for the patient to go back to the genesis of those beliefs, however they were recorded, and bring them into congruence with what the individual has learned. These early beliefs often are irreconcilable with what the person knows now. Perhaps a different course has been taken spiritually, different ideas have been accepted, and the patient is trying to live these out without knowing what is holding them back. A physical complaint may seem to be coming to a point of resolution, yet relief does not come. In going back to those beliefs and reconsidering them, the patient may find just the answer needed at that point in the healing process. Many times, however, the beliefs are irreconcilable with what the patient knows and chooses to believe now. These beliefs then can be worked through and released along with all the attending effects on the mind and body, which they have been prompting.

Many things — an accident, a loss, a dream or a moment of insight — can change a person's beliefs forever. How these beliefs affect the individual is of paramount importance. Each person is unique as is his or her spiritual journey. Whatever beliefs they choose to retain or release is their choice, not ours. The non-judgmental witness plays an important role here. As therapists, that is a role we can play.

Jane is a prime example of how this process unfolds. She was involved in a serious traffic accident in 1975. She broke her pelvis

Jane says, "I was searching to find some meaning for why I was alive. I thought that the accident was a punishment. Now I see it as almost a blessing. I developed personally in ways I might not have if the accident hadn't happened.

"I feel like a soldier who has been in a battle and come through it. I have found a belief in a Higher Power that I know will never leave me."

Today, Jane is continuing with her therapies. She has more mobility and she's able to do more things with her life. "I used to believe in devils," she wrote to a therapist. "But now I believe in angels."

In helping a patient with spiritual issues, it is not necessary for the therapist to be well versed in the various religions of the world. Again, religion is only a portion of a person's spiritual beliefs. Simply being open to listen to the patients talk about their beliefs and how they affect their lives and health is enough at times.

To allow and encourage the patient to express his or her feelings of anger, sadness, hatred, resentment or any emotion is a great help. Patients need to express these feelings as freely as possible. It can be very healthy for them to have someone who will listen to them and not rush them along in the process of expressing their feelings, acknowledging them and finding a resolution in forgiveness.

Must forgiveness happen? Of course not, but if it does, the rewards in terms of health for the body and mind are great. To go beyond seeing oneself as a victim to a perception of learning through all of our life experiences, no matter how inexplicable they may seem, is truly healing and worthwhile.

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The patient can stop at any point along the way, but if the therapist holds the intention in his or her own life to go beyond all limits — to true forgiveness — then he or she represents a choice that I think reaches the patient on an unconscious and a conscious level. If a therapist feels forgiveness is possible, this speaks to the patient without words.

To finally forgive the driver of the car that hit us or the person who hurt us is to take back our power and to live more fully than ever before. It is so tempting to hold on to that wound as a phantom protection from further hurts, or as a badge of valor—but relief from pain rarely occurs if one makes this choice.

While facilitating spiritual renewal for their patients, rehabilitation and acute care therapists may find themselves growing spiritually as well. To know ourselves better spiritually makes us a better resource for our patients. This does not mean to inflict our beliefs on others. But being comfortable with our own spirituality can help therapists remain clear and open to others. There are hundreds of roads to truth; it helps to have our own road in place. Whatever one's path, hopefully it will lead to self-forgiveness and inner peace.

While physical and occupational therapy may not focus on the spiritual health of the patient, these issues are an important part of rehabilitation. By being open and listening, the therapist can provide a safe, healing place for their patients. This quotation from the book "A Course in Miracles" offers an empowering thought: "You do not walk alone. God's angels hover near and all about. His Love surrounds you, and of this be sure; that I will never leave you comfortless."

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