

Spiritual Health Education: Joy of Being through Restoration of Connectedness with the Transcendent

MANAMI OZAKI

Graduate School of Human and Environmental Studies, Kyoto University

The purpose of this research and practice is to teach students about spiritual health through regular college courses. In this study spiritual health is defined as joy of being through awareness of connectedness with others, with nature, and with the transcendent. First, I discussed the problems of spirituality as a psychological variable in a secular educational environment. Second, I proposed a curriculum to foster spiritual health. Third, using the curriculum I taught, observed, and evaluated courses in several universities. Finally, based on my analysis of classroom practices, I constructed a model and theory of spiritual health realization. The students showed joy of being through their improved awareness of connectedness, with gratitude and their sense of responsibility in participating in the world. The results suggest the possibility of cultivating spiritual health, joy of being through restoration of connectedness with the transcendent in regular secular college courses.

I. INTRODUCTION

Japan faces epidemic levels of social withdrawal which constitute spiritual as well as socio-economic problems today (Watts, 2002). Subclinical and atypical depressive syndromes which result in the lack of joy among students have been reported.

Traditional cognitive-behavioral and clinical psychological approaches focus on physical and mental dimensions of the human being. Cognitive-behavioral methods have contributed to behavioral modification in health education. The application of clinical psychology to education has promoted mental health by improving students' self-esteem and motivation. However the effects of these approaches have tended to limit only on physical and mental dimensions of the students. Some practitioners have noticed the phenomena called symptom shift, in which symptoms of other forms arise after the cure of the targeted symptoms. In order to realize the fundamental health, we need the holistic approaches including deliberate spiritual insight.

I have explored ways to cultivate spiritual health, joy of being, among secular Japanese college students. This study is limited to empirical fields such as positive psychology and holistic education. Spiritual health is expected to be independent from the individual's faith or belief, and focus on the fundamental joy of being. This study is based on the assumption that spiritual health

can be realized at any developmental level, and that spiritual health realization sheds light on the complicated physical, mental, and social health problems which must be related somehow to the spiritual dimension of health.

This paper begins with the discussion on the problems of spirituality as a psychological variable. Next, it introduces a programme to foster spiritual health, joy of being, through awareness of their holistic connectedness with others, nature, and the transcendent. Finally, based on an analysis of classroom practices, it proposes a model of spiritual health realization.

II. SPIRITUALITY AS A PSYCHOLOGICAL VARIABLE

As the respondent wrote spirituality itself resists being defined in a philosophical consideration. However the nature of spiritual development has been examined and several educators have proposed tentative definitions. In the United Kingdom Ofsted explained that the development of a pupil's 'spirit' was described as the development of 'soul' or 'personality/character' (Ofsted, 2004). In the United States the Search Institute proposed the three processes of spiritual development; awareness, connectedness, and a way of living (Benson and Roehlkepartain, 2008). According to these representative definitions of spiritual development, spirituality seems to have two dimensions; an essential and existential dimension, which is referred to as soul, awareness, and connectedness with the transcendent, and another dimension which is observed as personality, character, a way of living and connectedness with people and nature. Both dimensions of spirituality have their merits and demerits as a psychological variable in educational settings.

Soul is considered to be an essence of spirituality and sometimes the word is used in the same way as individual spirituality. Soul is invisible and not the object to be judged including both the yin and the yang. Emphasizing the dimension of soul as spirituality means to concentrate on non-material values. In the context of secular education this teaching possibly causes the students' tendency to focus only on the transcendent dimension neglecting the social value and responsibility in one's belonged world. Another risk for emphasis on soul is to expose the students to dangerous/unhealthy aspects of spirituality with its non judgmental character. This problem relates to the difficulty of the assessment of spirituality.

In order to determine the criteria of spirituality, another dimension of spirituality, personality, arises as an important variable. Personality can be assessed by observing one's behavior and is easier to assess comparatively to the dimension of soul. Personality maturity or character strength, in other words virtue, as a psychological variable of spirituality has a problem related to morality. Morality requires the will to grow. Emphasizing this dimension may cause the neglect of grace, which is related to spontaneous joy of being. Virtue or moral also is the context determined concept and is difficult to find in the universal standard. Both soul and character are important dimensions of spiritual development and each dimension compliments one another. Single use of soul or character as a variable of spiritual development has unavoidable problems described above.

The scientific study and the evaluation of the practice need a variable which includes both dimensions of spirituality, and which should be measurable, and free from values.

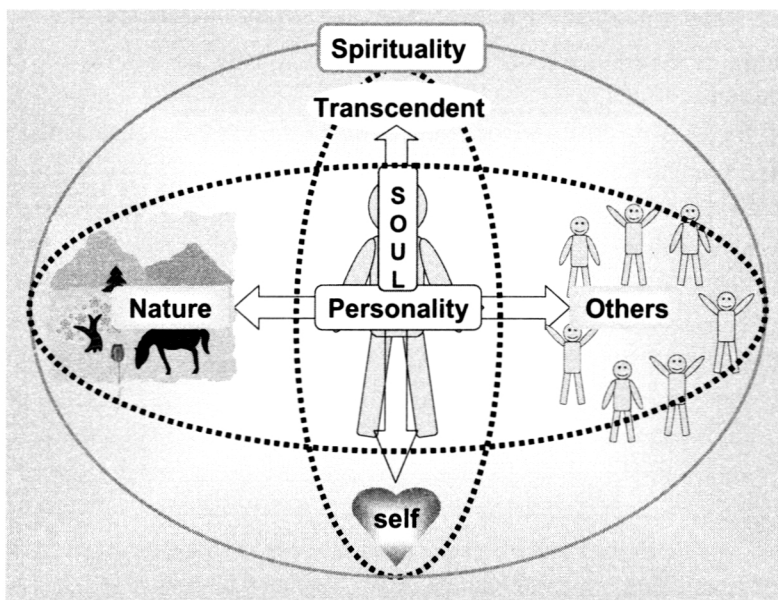


Fig. 1 Two-dimensional model of Spirituality

Connectedness itself is exclusive from a value system and that is why the scientists use the term 'connectedness' as a key word of spirituality in health science. Meta-physical connectedness which include soul's dimension is described as vertical connectedness, and physical connectedness which includes personality's dimension as horizontal connectedness in this model (Fig. 1). Connectedness, which has two dimensions of spirituality and is value-free, could be a useful variable of spirituality in a secular educational setting.

III. SPIRITUAL HEALTH

To avoid the endless discussions on the definition of spirituality I have decided to use the concept of spiritual health which offers comparatively clear operational definitions and has accumulated a body of empirical research in the field of health promotion.

The World Health Organization (WHO)'s proposal to include a spiritual dimension in the definition of health is well known (WHO, 1998). This narrow definition would define spiritual health as a fourth dimension of health. On the other hand, medical practitioners often use the term 'spiritual health' almost synonymously with holistic health. They might notice the phenomena by which spiritual matters are reflected in physical, mental, and social dimensions. Hawks' meta-analysis of studies reviewing spiritual health concludes that spiritual health emphasizes meaning or purpose through connectedness (Hawks et al., 1995). Connectedness appears to be the key word in his definition and supported by the other author (Bellingham et al., 1989). Miller (1988) in holistic education also wrote that spirituality was referred to connectedness with others, nature, and the transcendent. Yoshida holds that holistic approaches overcome cultural exclusivity from two directions: global/ecological and spiritual/aesthetic (Yoshida, 1999). Based on Yoshida's holistic education model, I developed a model of spiritual

health as a balanced realization of interconnectedness with others, nature, and the transcendent.

The purpose of spiritual health education is to help students to realize the fundamental joy of being through an increased awareness of connectedness with others, nature, and the transcendent.

IV. A SPIRITUAL HEALTH EDUCATION

A course of spiritual health education can be performed in a non-judgmental classroom context by selecting materials to expand and deepen students' awareness of spiritual connectedness. Three educational and psychotherapeutic programmes offer students knowledge and experiences to enhance their integrity and interconnectedness: Cosmology Education (Okano, 2002), Psychosynthesis (Assagioli, 1965), and the Life Skills Education Programme (WHO, 1994).

Cosmology Education provides students with a knowledge of Buddhist philosophy and contemporary science to restore their sense of connectedness with others and nature. Psychosynthesis uses guided imagery and 'acts of will' to explore spiritual connections between a personal self and the higher transpersonal self. The Life Skills Education Programme connects knowledge, attitudes, and values with action. The role of the Life Skills Education Programme in the spiritual health education curriculum is to translate students' inner changes into self-motivated daily behaviours. These three materials have been integrated to foster the connectedness among various learning experiences, such as cognitive/theoretical vs. behavioural/practical and scientific/intellectual vs. artistic/emotional. As a whole, the combined materials collectively correspond to the various spiritual health types. Artistic and body-focused work, and scientific explanations from Cosmology Education with image work from Psychosynthesis are selected for the development of soul and awareness. Cognitive and behavioural approaches from the Life Skills Education Programme are to foster another dimension of spiritual health, the character strength.

A private university in the Tokyo area employed me to conduct a three-hour-per-week one-semester psychology course for non-psychology majors. Among the 68 students who had enrolled in the spring semester of 2007, 65 students (30 women and 35 men; mean age 19.8 years) completed the course. Five undergraduates and one graduate student volunteered as teaching assistants. Each class session began with a short lecture, followed by icebreaking with jokes and funny games and/or relaxation techniques. Next, individual or paired activities involving meditation, writing, body work, and dialogue were concluded. Then small group discussions preceded group presentations to the whole class.

V. ASSESSMENTS

Assessment of the Students' Spiritual Health Realization

At the end of the course, all submitted progress reports, being told that it would not affect their grades. At the end of the term, eight students volunteered for half-hour-long semi-structured individual interviews with the lecturer, which were observed by the graduate assistant.

The students' comment sheets showed improved connectedness with others, nature, and the transcendent. Their realization of connectedness and acceptance fostered experiencing the fundamental joy of being. They appreciated the guided cosmology imagery, which was designed to mediate their connectedness with others and nature as a whole. The scientific logical explanations and quiet moments guided them to mysterious feelings of relief, peace, and joy, which some had never experienced before. Of 65 students, 53 (81.5%) expressed gratitude for feeling this connectedness, and 18 (28.0%) expressed their sense of responsibility to participate in the greater world. Although the majority of comments were positive, seven students expressed difficulties realizing relational cosmology during the work. The negative reactions were thought to have come from overwhelming awe. They showed resistance to experiencing naturally a deep realization of peace. This was considered a healthy reaction for individuals who were not ready to be exposed to the great unconsciousness. I explained that intellectual defense against the unconsciousness was important to protect the personal self, and that any experiences were necessary and suitable for each individual.

Many students' progress reports revealed personality development such as acceptance, openness, and altruism. At the semi-structured interview after the course, two of the eight students reported relief of symptoms of prior mental problems. One student described a detailed history of mental disorders including repeated hospitalization. Without any personal counseling or follow-up, he recovered greatly during the course. He maintained good health and passed the entrance examination to a graduate school. In fact, during the past five years, I have received several similar recovery reports through personal communications with students who have taken my course. Two others commented that the course enabled them to regard previously confusing spiritual experiences as a part of their process of self-realization.

Assessment of the Programme

The integration of Cosmology Education, Psychosynthesis, and the Life Skills Education Programme provided a balanced spiritual health education. The lecture, starting from scientific explanation of connectedness, reduced the students' cognitive and emotional defensiveness against spiritual issues. Ice breaking and relaxation techniques opened the students to focus attention on their inner selves and realize their interconnectedness with spirits. The non-judgmental atmosphere encouraged students' positive commitments to the work. Group discussion gave them the opportunity to be open and feel mutually connected. The improvisational flexibility led the class authentic.

The science-based lectures fostered their awareness of their connectedness with nature and others. Activities such as guided image work and body-work fostered their connectedness with the transcendent, which might be called inner and transpersonal selves. They expressed awe in realizing the connectedness. With awareness of this connectedness, the students showed the joy of being mediated by a sense of responsibility and gratitude.

The functions of soul and personality complemented each other in realizing spiritual health. Deeper or higher awareness took place with the enhancement of joy of being. The fundamental joy of being led personality growth. These processes were observed synchronically.

Future research is necessary related to pre-screening students for issues requiring professional psychiatric treatment, and on the applicability of this education to other age groups and other cultural groups.

VI. CONCLUSION

This programme of spiritual health education improved students' awareness of their connectedness with others, nature, and the transcendent. The connectedness fostered students' fundamental joy of being.

The results of this study suggest the possibility of cultivating spiritual health through regular college courses. Spiritual awakening might not be for everyone, but spiritual health, joy of being could be restored at any developmental level with this spiritual health education.

NOTES

The discussion is based on the following resources.

- Browning, D. S. & Cooper T. D. (2004) *Religious Thought and The Modern Psychologies* (Minneapolis, Fortress Press).
- Buck, H. G. (2006) Spirituality: Concept Analysis and Moral Development, *Holistic Nurse Practice*, 20 (6), pp. 288-292.
- Cummins, P. F. (2002) Can Spiritual Education Occur in Public Schools?, *Paths of Learning: Options for Families & Communities*, 12, pp. 9-12.
- Elkins, D. N., Hedstrom, L. J., Hughes L. L., et al. (1988) Toward a Humanistic-Phenomenological Spirituality: Definition, Description, and Measurement, *Journal of Humanistic Psychology*, 28, pp. 5-18.
- Ellison, C. W. (1983) Spiritual Well-Being: Conceptualization and Measurement, *Journal of Psychological Theology*, 11, pp. 330-340.
- Fetzer Institute (2003) *Multidimensional Measurement of Religiousness/Spirituality for Use in Health Research: A Report of the Fetzer Institute/National Institute on Aging Working Group* (Kalamazoo, MI, Fetzer Institute).
- Fredrickson, B. L. (1998) What Good Are Positive Emotions?, *Review of General Psychology*, 2(3), pp. 300-319.
- Goddard, N. C. (1995) 'Spirituality as Integrative Energy': A Philosophical Analysis as Requisite Precursor to Holistic Nursing Practice, *Journal of Advanced Nursing*, 22(4), pp. 808-815.
- Ishikawa, Y. (2004) Meaning and Challenge of Cosmology Education, *Sanguraga*, News Letter pp. 44-54. in Japanese.
- Maslow, A. H. (1971) *The Farther Reaches of Human Nature* (New York, Viking Press).
- Miller, J. (2000) *Education and the Soul: Toward a Spiritual Curriculum* (Albany, NY, Suny Press).
- Miller, J. & Nakagawa, Y. (eds) (2002) *Nurturing Our Wholeness: Perspectives on Spirituality in Education* (Brandon, VT, Foundation for Educational Renewal).
- Ozaki, M. (2004) Spiritual Health in Education. *Japanese Journal of Transpersonal Psychology and Psychiatry*, 5. pp. 8-14. in Japanese.
- Ozaki, M. (2005) Development of an Assessment Tool on Spirituality Explained by Three Domains, Will, Joy and Sense: From a Holistic Educational Approach, *Journal of International Society of Life Information Science*, 23 (2), pp. 365-369.
- Ozaki, M. (2006) A Spiritual Education Programme at a College General Course, *Japanese Journal of School Mental Health*, 9, pp. 79-85. in Japanese.

- Puchalsky, C. M., Kilpatrick, S. D., McCullough, M. E. et al. (2003) A systematic Review of Spiritual and Religious Variables in Palliative Medicine, *American Journal of Hospice and Palliative Care*, *Hospice Journal*, *Journal of Palliative Care*, and *Journal of Pain and Symptom Management*, *Palliative and Supportive Care*, 1, pp. 7-13.
- Vader, J. P. (2006) Spiritual Health: The Next Frontier, *European Journal of Public Health*, 16 (5), p. 457.
- WHOQOL Group (1995) The WHO Quality of Life Assessment (WHOQOL) Position Paper from the World Health Organization, *Social Science and Medicine*, 41, pp. 1403-1409.
- World Health Organization, Executive Board 101st Session, (1998) *Review of the Constitution of the World Health Organization: Report in Executive Board Special Group*, EB101.R2/Agenda item 7.3 (Geneva, WHO).

REFERENCES

- Assagioli, R. (1971) [1965]. *Psychosynthesis* (New York, The Viking Press).
- Bellingham, R., Cohen, B., Jones, T. et al. (1989) Connectedness: Some Skills for a Spiritual Health, *American Journal of Health Promotion*, 4(1), pp. 18-31.
- Benson, P. L. & Roehlkepartain E. C. (2008) Spiritual Development: A Missing Priority in Youth Development, in: *New Directions for Youth Development* (San Francisco, Jossey-Bass).
- Division of Mental Health World Health Organization. (1994) *Life Skills Education in Schools* (Geneva, WHO).
- Hawks, S. R., Hull, M. L., Thalman, R. L., et al. (1995) Review of Spiritual Health: Definition, Role and Intervention Strategies in Health Promotion, *American Journal of Health Promotion*, 9(5), pp. 371-378.
- Okano, M. (2002) *Psychology for Confidence in Life [Ikiru Jishin no Shinrigaku]* (Tokyo, PHP) in Japanese.
- Watts, J. (2002) Tokyo Public Health Experts Concerned about 'Hikikomori', *The Lancet*, 359 (9312), p. 1131.
- Yoshida, A. (1999) *Holistic Kyoiku-ron* (Tokyo, Nihon hyoronsha) in Japanese.