

Alister Bull, *Assessing and Communicating the Spiritual Needs of Children in Hospital: A New Guide for Healthcare Professionals and Chaplains* (London: Jessica Kingsley Publishers, 2017). 139 pp. ISBN 987-1-84905-637-3.

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Today's strive for a common language to outline spiritual needs in a multidisciplinary team is the starting point of Alister Bull's plea on assessing and communicating children's spiritual needs in hospitals. The goal of this book is twofold: empowering children to share their spiritual concerns by creating a safe space and developing a professional vocabulary to communicate children's spiritual needs. For that, a framework of connectedness as an alternative for the ambiguous term 'spirituality' is suggested by the author and illustrated through case studies. The practice-based evidence in this book is based on Bull's experiences of being a chaplain in pediatric healthcare in the UK. He is also Council Secretary for Mission and Discipleship at the Church of Scotland.

In the first part, Bull defines four dimensions of connectedness. Firstly, 'the momentum of connectedness' is formulated based on James Fowler's insights, and "signifies the energy a person is prepared to generate to reach their ultimate concern" (p. 19). Secondly, Jean Piaget's Cognitive Theory is used to point out 'the resilience of connectedness' to adjust to new situations such as hospital admission. The third dimension is 'the awareness of connectedness' based on the framework of Urie Bronfenbrenner stating that people are influenced by their environment. Lastly, 'the evaluative nature of connectedness' reassembles the way children see their own position in relationships.

The middle of the book focusses on building a safe encounter between the child and the healthcare professional to share experiences of (dis)connectedness. Based on The Zone of Proximal Development by Lev Vygotsky, Bull proposes a 'Zone of Proximal Connectedness'. This encompasses a hospitable and liminal space for children to dialogue with a significant other (the healthcare professional) and with openness for transcendence. Practical implementations are presented by the use of play and storytelling. In addition, themes of children's connectedness are listed such as relationships with others, with the community, with activities, and with the hospital setting.

The last part of this publication reflects on the language, identity, encounter and context of connectedness and stands out for its profound reflection on connectedness to describe “the nature of childhood spirituality in a pediatric healthcare setting” (p. 129). Simultaneously, this is the most difficult part of the book to understand. Given the many references to theological and philosophical frameworks, this last chapter seems to be written for academic researchers rather than caregivers.

Bull’s work is a fruitful contribution to the field of spirituality in childhood and offers an extensive overview on children’s need for connectedness. Bull’s emphasis on listening and understanding children’s needs based on their own expressions and not on caregivers’ presuppositions, forms the core of this book and is a compelling call for integrating these insights into healthcare.

The main strengths of this book are the integration of children’s perspectives through case studies and the researching role of the chaplain. Bull’s insights reflect the capacity of chaplains to contribute to the research field and to the professionalization of spiritual care, based on their own experiences. Moreover, this book can enrich other spiritual caregivers’ work and inspire them to reflect upon their own vocation to meet children’s needs.

Despite extensive use of case studies illustrating how needs of connectedness can be explored with children, there is a lack of a practical guide on how to communicate these needs. In other words, it is still unclear what the second part of the title of this book, namely the communication of the shared language of connectedness, could look like in a hospital setting.

In addition, the framework of connectedness can be questioned. On the one hand, the framework provides an interesting analysis of children’s spiritual needs and can be preferred instead of ‘spirituality’, which is too much affected by personal assumptions. On the other hand, the question still remains whether this construct captures the transcendent aspect of spirituality. Even though Bull points out the expectation of the transcendent as a dimension of connectedness in general, it is not acknowledged as a category of connectedness of children. Furthermore, children’s need to connect with the sacred, the divine or the transcendent remains underexposed.

Nevertheless, Bull’s way of thinking outside the box and providing a language to capture children’s meaning making process, encourages chaplains and healthcare professionals to think about the way spiritual care for children is embedded in their hospital

settings. Although the book is first and foremost recommended to healthcare professionals involved in the spiritual care for children in hospital settings, I am convinced that this book offers fruitful insights for everyone working with children. In practice, the framework of connectedness offers plenty of options to assess and communicate children's spiritual needs in a more accessible way, regardless of people's own view on spirituality or faith.

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