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Brief Course Description:
This course examines the theological, research, and professional issues faced by religious and healing communities. Includes attention to medical ethical concerns and pastoral care to the sick.

Purpose and Perspective of Course:
Both American culture and Christian churches are re-awakening to the essential unity of the human self as expressed by an intense interest in “spirituality and health.” This course will study both theological and scientific understandings of this unity. The course will also examine implications for self-care, congregational ministries, and ministry in the medical culture.

The perspective of the course is rooted in the evolving and renewing theologies of mainline American Protestant communities and the medical scientific research that is open to mind-body-spirit wholeness.

Desired Outcomes:
• Increased understanding of the inter-relatedness of body, mind, spirit
  ✓ Application of this knowledge to the student’s own lifestyle for essential habits of nutrition, exercise, relaxation, and spiritual nourishment
• Substantive knowledge of the role of healing practices within faith traditions
  ✓ Increased knowledge of the student’s own tradition’s approaches to healing ministries
  ✓ Increased knowledge of a tradition’s approaches to healing ministries which differs from the student’s tradition
• Practical knowledge of how spirituality relates to healing, health promotion, and church ministries
  ✓ Explore the faith factors in healing
  ✓ Increased understanding of the meanings of illness and healing
  ✓ Knowledge of research which describes relationships between religion/spirituality and health/healing
  ✓ Knowledge of the church’s role in public health initiatives (smoking, firearms, hunger, violence, access to medical care)
  ✓ Develop pastoral assessment skills in discerning needs of persons for healing
  ✓ Develop pastoral intervention skills in use of religious resources for healing
• Increased understanding of the interface between the religious community and the healthcare industry and between theology and ethics
  ✓ Focused awareness of key principles and developing issues within bioethics
Course Methods and Requirements

1. **Lectures** will develop a core perspective and offer general principles.

2. **Class discussions** will illustrate, amplify, and challenge basic perspectives and principles. Reading and reflecting upon assigned texts as scheduled will facilitate responsible discussion. Be prepared to respond to questions such as: What was the most significant idea you encountered? What would you like to challenge or to discuss more thoroughly?

3. **Required Readings** will provide broad theoretical and practical perspectives.
   - Articles listed in the schedule have been placed on reserve in the library.
   - The *Dictionary of Pastoral Care and Counseling* is the core reference tool for the field. You will find numerous articles related to all class topics. I highly encourage your routine use of this tool. It is becoming somewhat dated, but is still an excellent resource.

4. Participate in the **Well Being Group**. 10 points.
   This experiential group will utilize the workbook *Anchoring Your Well-Being* to explore the personal dimensions of health and healing. Prepared participation is expected. Should a crisis require your absence, you will lose 1 point from your grade.

5. Write a **reading-reflection journal**. 15 points.
   This journal should track your thoughts and feelings in response to lectures, readings, discussions, and exercises. Summaries of key insights are to be submitted 3 times (2/9, 3/2, 4/13). Each summary should highlight one core principle learned or key question answered and one new question or puzzle discovered. Every required reading and each class should have at least one entry.

6. Participate in at least one **spiritual healing practice**.
   This should be a practice which you have never engaged before; e.g., walk a labyrinth, attend a yoga or tai chi class, attend a healing service, meet with a spiritual director. *Anchoring* includes numerous suggestions and ideas. Participation time should total at least three hours.
   A. Please submit your plan for this practice no later than February 23.
   B. Write a 3-page summary and reflection on your experience including relevant theoretical connections. Due on March 30. 15 points.
   C. Make a 10-minute presentation to class about your experience on April 6. 5 points.
7. Write a paper comparing one practice of religion and health in two traditions. Practices might include the role of the pastor with the sick, the place of the congregation in health education, practices related to sexuality or dying, teachings about some current moral issue such as stem cell research or health care access for the poor. Review key literature that describes your own tradition’s understanding of and practices for spirituality and healing. Choose one practice to explore in depth. Review key literature that describes another tradition’s understanding of and practices for spirituality and healing with a focus on the parallel practice from your tradition. 
A. Please submit your plan for this paper no later than February 16.
B. Write a 5 to 8 page paper which summarizes your key learning and which compares/contrasts the practices of the two traditions. Due on March 9. 20 points.
C. Present the above paper to the class. 5 points. Will be scheduled on March 16.

8. Write a research paper. This paper will demonstrate your theoretical understanding of one aspect of emotional pain (e.g., forgiveness, guilt and shame, tragedy, suffering) or of physical pain (e.g., becoming pregnant, chronic pain, access to care, care of dying). At least one citation from each of the required books and three of the required articles must be included. Your paper must be clear as to the issue or problem considered, the socio-cultural situation from and to which you are writing, and include implications for pastoral practice. You must also include your own definition of spirituality, health, and healing. An excellent paper will integrate perspectives from religion, medicine, ethics, and pastoral care into the discussion. 8 to 11 pages.
A. Please submit your plan for this paper no later than April 6.
B. Due at beginning of time period scheduled for final exam (week of May 2). 30 points.
C. Present your research in progress to the class. Will be scheduled on April 20.

⇒ Notes Concerning Assignments:
1. Grading Criteria: Responsiveness to stated assignments is essential. Writing skill or speaking skill and conceptual clarity are expected. Breadth and depth of understanding adds to your grade. Critical analysis and synthesis of material moves toward “excellence.” Creativity and risk taking will be rewarded.
2. Due Dates: Any late paper or presentation will have its assigned grade reduced by 2 grades per class period late (e.g., an ‘A’ becomes a ‘B+’ after 1 class, a ‘B-’ after 2 classes, etc.). Any time after the conclusion of a class period is considered late. Grace may be extended due to crisis events that are not predictable or within the student’s control (e.g., your printer running out of ink is considered within your control).
3. Format: Prepare all assignments in 12-point font, 1 to 1.5 inch margins, right margin unjustified. Document quotes and references via the in-line method (APA).
4. Consultation: Any paper can be submitted early for written feedback from the professor. If a paper is submitted early, it will be graded and that grade weighted as 20% of the final grade (e.g., 3 submissions graded C, B, and A will have a final grade weighted as C, B, A, A = B+). Each submission must include a “Comments Page” for my written feedback and each rendition of the paper must include all previous Comments Pages. Expect one-week turn-around time for consultation.
5. **Group study:** You are encouraged to study, discuss, and write in collaboration with others, especially around shared reading materials. However, all submitted assignments must be “unique” and demonstrate your own mastery of the materials.

**Tentative Course Schedule**

Note: This schedule may be amended due to student interests, availability of guests, or other emerging opportunities. Changes in required written assignments (either content or due dates) should not be expected; if changes occur, these will be published in writing.

**January 19**  Introduction to class and participants.
1. Overview of key agenda
2. Syllabus and course requirements
3. Participant introductions

**Section 1  Healthcare: Theological and Medical Values**
- Care and Cure from Faith Perspectives
- How do we understand the human person as a unity, not dualism? How does this link to the history of religion-medicine interaction; foundation for today’s linkages? How do the boundaries of science and religion coincide and diverge?
- Develop a operational definitions of “spirituality,” “health,” and “sickness.”
- What is difference in human models of medical – psychosocial – bio-psychosocial-spiritual?
- Care and cure in “scientific” medicine, “traditional” medicines, and “integrative” medicine.

**January 26**
1. Biblical and theological perspectives on health and healing
2. Discussion of Shea’s six dimensions
3. Well Being Group, Chapter 1

Reading: Shea, 1-68
Marty, “The Tradition of the Church in Health and Healing,” Second Opinion (Library)
DPCC: health, wholeness, suffering, illness, salvation.

**February 2**  **No Class.** “Comp time” for Spiritual Healing Practice Experience exercise.

**February 9**
1. Pastoral perspectives on health and healing
2. Spirituality: Does the word have meaning?
3. Well Being Group, Chapter 2

Reading: Shea, 69-112
“Invoking Spirituality in Medical Care,” Alternative Therapies (Library)
“Making a Place for Spirituality,” Harvard Health Letter (Library)
DPCC: spirituality, healing.

Due:  Reading-Reflection Journal 1
February 16
1. Medical and scientific perspectives on health and healing
2. Physician interview
3. Well Being Group, Chapter 3
Reading: “The Focus on Medical Care” and “Problems in the Medical Model,” Redeeming Marketplace Medicine (Library)
“Religion and Medicine: The Physician’s Perspective,” Health / Medicine and the Faith Traditions (Library)
Due: Proposal for Comparison of Religious Practices Paper

Section 2 Religion, Spirituality, and Health Outcomes
- Research on Mind-Body-Spirit Connectedness
- Research on Physical Health
- Research on Psychological Health
- How can faith and medical research be integrated?
- In what way is spirituality a dimension of health?

February 23
1. The health effects of religion
2. Well Being Group, Chapter 4
Reading: Levin, 1-69
DPCC: mind, body, spirit
Due: Proposal for Spiritual Healing Practice Experience and paper

March 2
1. The health effects of spirituality
2. Well Being Group, Chapter 5
Reading: Levin, 71-150
Due: Reading-Reflection Journal 2

Section 3 Churches’ Ministries for Care and Cure – Congregational Health Ministries
- Curative Acts
- Caring Acts
  ✓ What does the practicing pastor need to know about health and healing?
  ✓ How can the church adopt promoting health and preventing disease as one of its vital ministries?
  ✓ Appreciate the complex interaction of health factors: body (genetics, self-care), individual (life experience, unique personality), environmental (family, mentors), socio-demographic, organizational (religion, social services).
March 9
1. Congregational health ministries
2. Parish nurse interview
3. Well Being Group, Chapter 6
Reading: Levin, 151-223
   “Parish Nursing,” Responsive Communities at Work (Library)
   “The Vision of the Possible – What Churches Can Do,” Second Opinion (Library)
DPCC: congregation, wholistic health care
Due: Comparison of Religious Practices Paper

March 16
1. Faith communities, U.S. society, and the healthcare industry
2. Presentations of Religious Practices Papers (students)
3. Well Being Group, Chapter 7
Reading: Shea, 113-168
   “Topics at the Interface of Medicine and Theology,” Health / Medicine and the Faith Traditions (Library)
DPCC: health care delivery
Due: Research Paper Proposal

March 23 No Class. Easter Recess.

March 30
1. Pastoral care and the health of body-mind-spirit
2. Hospital chaplain interview
3. Well Being Group, Chapter 8
Reading: “Professional Chaplaincy: Its Role and Importance in Healthcare,” Journal of Pastoral Care (Library)
   “Study Suggests Shaken Faith Can Worsen Poor Health,” The New Times (Library)
DPCC: chaplaincy and associated articles
Due: Spiritual Healing Practice Paper

Section 4 Key Ethics Issues
- Public Health – abortion, genetics, euthanasia, allocation of scarce resources, priority for health promotion and disease prevention
- Individual choices – informed consent, end of life choices, reproductive choices
- Culture of science issues – human experimentation

April 6
1. Methods for bioethics thinking
2. Presentations of Spiritual Healing Practice Papers (students)
Reading: “Religion and Theology,” Methods in Medical Ethics (Library)
   “Religious Beliefs and Bioethics,” Notes from a Narrow Ridge (Library)
April 13
1. Key principles and difficult problems in bioethics
2. Medical ethicist interview
3. Well Being Group closure
Reading: “Bearing Witness: Religious Resistance and Meaning” Notes from a Narrow Ridge (Library)
   DPCC: moral dilemmas
Due: Reading-Reflection Journal 3

April 20
1. The pastor’s and church’s role in bioethics
2. Research Paper in progress summary presentations (students)
3. Concluding conversation
Reading: Kotva, “The Christian Pastor’s Role in Medical Ethics” Second Opinion (Library)

April 27  No Class. Reading Week.

May 2-6  Exam as Scheduled.
Due: Research Paper