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*Existential intervention in a Secular, though Multi-Religious, Context*

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Background: Research in the last decades shows that the existential/spiritual dimension accounts for an important part of health-related quality of life (HQoL). Simultaneously, according to the World Values Survey the Nordic region is the most secularised in the world. WHO announced in 2002 a trans-cultural questionnaire (WHOQOL-SRPB) for measuring HQoL including the existential dimension. This Spirituality, Religiousness and Personal Beliefs facets [SRPB] consist of eight aspects. To meet the needs a model for existential health promotions and preventions was developed. It combines the SRPB aspects, Public health and object relations theory.

Aim: Introducing a non-confessional existential based intervention model for supporting HQoL.

Method This mixed-methods study includes development and evaluation the model in clinically settings e.g. upper secondary school pupils, healthcare staff, self-help groups, persons on long-time sick leave and suicidal patients. The evaluation follows a classic before and after design with the WHOQOL-SRPB and focus group interviews.

Findings: The preliminary results are promising, overall the participants emphasized the existential aspects as important for their HQoL. The quantitative improvement varies between different groups.

Conclusion: The results show that this model can be used for HQoL intervention and that existential aspects needs to be included in a systematic way.

Key words: Existential; Public Health; Spiritual care; SRPB; Quality of life; WHOQO