

31<sup>st</sup> January 2022

To the Select Committee on *Measuring what Matters*,

Thank you for the opportunity to make this submission to your inquiry. This is a joint submission, made by the **Spiritual Health Association**, researchers in the sociology and anthropology of religion at **Deakin University** and **The University of Melbourne**, and scholars from the **Contemplative Studies Centre** within the School of Psychological Sciences at **The University of Melbourne**.

The Spiritual Health Association is the peak body for spiritual care in the health sector. Its focus is on advocacy for and promotion of compassionate, person-centered spiritual care in health services. Together with Spiritual Health Association, researchers Halafoff, Gould, Singleton, Van Dam, and Galante have a demonstrated track record of excellence in the fields of sociology, anthropology, contemplative studies, psychology, psychiatry, mindfulness, and public health, evident in our extensive list of publications, media commentary, international collaborations, and grant success to date.

### **Spiritual Wellbeing**

The central argument of this submission is that a robust measure of Australia's economic, social, and environmental progress and wellbeing should include a **Spiritual Wellbeing dimension**. The importance of Spiritual Wellbeing is well-supported by decades of research as well as frameworks for social development and social determinants of health.

Spirituality has long been a critical factor of wellbeing for First Nations and religious Australians, and more recently, for growing numbers of “spiritual but not religious” Australians (Grievies 2009; Singleton et al. 2021). For example, a nationally representative survey of teenagers (13-18), funded by the Australian Research Council (Worldviews of Australia’s Generation Z project), found 38% of young Australians identified as spiritual (Singleton et al. 2021). The recent [SHA study](#), also found that Australians believe spirituality is connected to mental (55%), relational (43%) and physical wellbeing (41%). Spiritual Wellbeing, in the Australian context, has been equated with a sense of relational interconnectedness with, and

belonging to, a greater whole that includes persons and the entire natural world (Grieves 2009; Tacey 2000). Research has also demonstrated how Australians turned to many spiritual supports during the Covid-19 pandemic, including meditation and yoga, and spending therapeutic time in nature (Halafoff et al. 2020, 2021).

Beginning in 1995, many heads of state signed the *Copenhagen Declaration on Social Development*, affirming their commitment to “political, economic, ethical and *spiritual* vision for social development”. In his seminal commentary on the social determinants of health in 2005, Prof Michael Marmot flagged “capability, *spiritual*, or psychosocial needs” as playing a comparable role to material physical needs in determining health and wellbeing. Moreover, under the *Geneva Charter for Wellbeing*, adopted in 2021, the WHO recognizes spiritual wellbeing as a component of ‘health integrating physical, mental, *spiritual* and social wellbeing’ dimensions.

Spiritual health correlates highly with established measures of mental (Brooks et al., 2018) and general health (Michaelson et al., 2016b). It is recognized and protected as a fundamental right in the *UN Convention on the Rights of the Child* (UN General Assembly, 1989) and has been particularly adopted as a measure of adolescent and child health (Michaelson et al. 2021).

Despite this strong and growing evidence base, Spiritual Wellbeing is yet to be included and assessed among major health and wellbeing initiatives in Australia. This is something that needs to be addressed, given the international best practices of wellbeing cited above, and particularly given Australia’s worldview diversity which includes a significant and growing proportion of Australians who declare themselves to be spiritual, including First Nations peoples and young Australians (Singleton et al. 2021).

### **Measuring Spiritual Wellbeing**

There are several methods that might be adopted to measure Spiritual Wellbeing within Australia. Internationally, several countries have integrated Spiritual Wellbeing into measures of progress and wellbeing. For example, in New Zealand, Spiritual Wellbeing features as part of the *Living Standards Framework (LSF) 2021* and their 2019 “Well-being Budget” highlighted Spiritual Wellbeing in the objective: “people are able to lead fulfilling lives with purpose, balance and meaning to them”.

Multiple validated scales also exist for measuring Spiritual Wellbeing. Notably, the WHO Quality of Life Instrument, continuously in use since 1998, measures spirituality as one of six domains of psychological wellbeing. First developed in the 1970s (Ellison et al.) the [Spiritual Well-Being Scale](#) (SWBs) is also one of the most widely used and best-validated measures of well-being. It has been translated into at least 20 different languages and cited at least 125,000 times in academic research (Bufford et al. 2022).

At the current time, there are no established indicators or routine data collection occurring in Australia to measure Spiritual Wellbeing. For this task, we recommend that an Australian-specific scale or set of indicators, which are sensitive to our history, cultural diversity, and Indigenous knowledges, is developed to capture this vital dimension of Australian progress and wellbeing. The Spiritual Health Association and the below signed researchers are ideally placed to assist in the implementation of such a recommendation, and in the development of Spiritual Wellbeing indicators for the Australian context. We would be happy to offer and share our expertise in moving this project forward, and ultimately, with supporting Spiritual Wellbeing, as part of broader prosperity and wellbeing in Australia.

Kind Regards,

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