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Existential communication in post-secular societies among psychologists and chaplains

Abstract: Psychologists and chaplains often find themselves working within the field of boundary situations as defined by Karl Jaspers, in which existential communication is needed. We argue that we are living in a post-secular society, meaning that despite a heavy secularisation of the modern society, spirituality and religion are still present and continue to influence culture and the way individuals understand themselves. This becomes relevant for psychologists and chaplains to consider when navigating in boundary situations in either therapy or spiritual care, because negotiations between secular and non-secular worldviews may be necessary when helping the client. However, psychologists and chaplains may approach existential communication differently due to different ontological and epistemological views on the secular and non-secular.

Aim: In this paper we investigate how Danish psychologists and chaplains approach existential communication. Further, it is investigated how post-secular negotiations in therapy and spiritual care are experienced and navigated by both professions.

Methods: The data material consists of 4 focus group interviews with 22 participants (11 chaplains and 11 psychologists), which is transcribed verbatim and analysed using thematic analysis and the framework of post-secular negotiations.

Results: We found one over-arching theme "Professional identity in existential communication", and three subthemes: "Life-orientation", "Mandate and agenda", and "Professional boundaries and true meetings". We found there are profound differences between the two professional groups in their understandings of how to provide existential communication, particularly with regards to religious/spiritual issues.

Conclusion: We argue that both professions could profit by adopting principles from the post-secular negotiation in practice in order to facilitate existential communication.

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Background

Every human being will sooner or later find himself/herself facing existential groundings or what the German psychiatrist Karl Jaspers described as *boundary situations* (EE). *Boundary situations* refer to existential states or moments in life that confront the individual with fundamental questions about existence, meaning, and the limits of human understanding and control. Jaspers described five specific boundary situations, namely suffering, struggle, death, chance, and guilt. Although unavoidable, these boundary situations may hold the potential for the individual to discover hidden possibilities in themselves, leading to a profound recognition of our being and being-in-the-world (*Dasein*) (PW). Jaspers argued that boundary situations force the individual to confront their own existence, thereby transcending the mundane to achieve a deeper understanding of themselves and their existence. In essence, Jaspers viewed boundary situations as necessary for the existential development of individuals, which is the process of personal growth and self-understanding aiming for a more authentic life. Existential communication plays a central role in Karl Jaspers' concept of boundary situations and existential development. To Jaspers, existential communication enables individuals to share and process their experiences and feelings about these situations with others in order to become themselves and live a more authentic and meaningful life. Existential communication takes place, when two existences meet. Here a "meeting" (*Begegnung*) may unfold that leaves both existences changed in a search for truth (EPE). That requires both parties to meet with authenticity and openness, in which both parties must be willing to reveal their true selves without hiding behind social masks or preconceived notions. Authentic communication involves being honest with oneself and the other person, as well as listening with empathy and without judgment (EE).

In professional settings, existential communication may manifest across various contexts where professionals are sought out by individuals grappling with profound life challenges, navigating boundary situations. One group of professions involves *chaplains*, who operate in diverse environments including hospitals, psychiatric wards, military bases, prisons, and social NGOs.

Similarly, *clinical psychologists*, practicing in settings ranging from private practices to hospital environments and psychiatric clinics, also engage in existential communication. Both professions aim to alleviate suffering and promote healing, but their methods and perspectives are shaped by their distinct disciplinary backgrounds and philosophical foundations. Psychologists are rooted in a secular, scientific tradition, whereas chaplains in the Danish tradition are clergy and appointed by the Church of Denmark (CoD). As such, they hold a degree from a The-

ological Faculty of one of the two universities in Denmark offering theological education.

Both professions work to alleviate human suffering and provide emotional support. Psychologists do so through structured assessment and psychotherapy, which is a professional and structured process aimed at helping individuals to manage and overcome psychological issues, emotional difficulties, or behavioural problems. Psychologists use various evidence-based techniques and approaches, such as cognitive-behavioural therapy (CBT), psychodynamic therapy, or humanistic therapy, depending on the individual's needs and the psychologist's training. The process typically involves talking sessions where the psychologist and the client work together to explore thoughts, feelings, and behaviours, identify patterns, and develop strategies for change and coping. The ultimate goal of therapy is to enhance the individual's well-being, improve mental health, and help them lead a more fulfilling life.

Chaplains are providing spiritual care regardless of the client's religious background. Spiritual care encompasses the support provided to individuals in addressing their spiritual needs, which may include exploring their beliefs, values, and sense of purpose. Pastoral care is the specific aspect of spiritual care, often delivered by trained clergy or spiritual leaders, focusing on providing emotional and spiritual support, guidance, and nurturing relationships within the context of faith. Accordingly, this article will understand both 'spiritual and existential care' and 'pastoral care' as just 'spiritual care'. Chaplains are often consulted about general existential themes rather than specific religious or spiritual themes (Damberg Nissen et al. 2019a; Strang & Strang 2001). Psychologists have, to a lesser extent, been trained to address spiritual and existential concerns of the individual (Nieuwsma et al. 2015; Vieten et al. 2013); however, an increased awareness of the necessity of addressing this is arising (American Psychological Association 2017; Mandelkow et al. 2022). Chaplains do not keep a journal, unlike psychologists. Being clergy, they might perform rituals. Like psychologists, they are expected to be part of an interdisciplinary team collaborating with other professionals. Both psychologists and vicars/chaplains offer interviews on a confidential basis. A major difference between the two professions is the often unspoken expectation of availability on behalf of parish priests and chaplains regardless of ordinary working hours. Both chaplains and psychologists are expected to adhere to professional guidelines and ethical standards and to keep themselves informed and updated on developments within their respective fields.

Thus, the overlap in their working area is evident, especially when it comes to how the two professions understand and provide existential communication in meetings with individuals challenged by diverse boundary situations. However, the ontology and epistemology of the two professions are grounded differently

in the secular and the non-secular, which may have implications on how the professionals view themselves, how they meet the individual help-seeker, and how they approach a potential interdisciplinarity.

The need for mutual learning or collaboration between the two professions on existential communication may be more relevant than ever since Western societies to a large extend are becoming post-secular, meaning that societies are moving beyond traditional secularism, and instead acknowledge a resurgence or continuing presence of religion in the public sphere and in people's personal lives (Habermas 2008). This development can be seen as a response to globalisation, migration, and the complex social and cultural dynamics of the 21st century, which challenge the traditional boundaries between the secular and the religious (Taylor 2007). Thus, there is a need for professionals, such as psychologists and chaplains, to be able to navigate in both secular and non-secular realms, and practice *post-secular negotiations* (Nissen & Andersen 2022; Andersen & Nissen 2025). *Post-secular negotiations* take a point of departure in three theoretical underpinnings: 1) societies as social constructions (Berger 2016) recognises the diversity of subjective worldviews, 2) existential theory (Buber 1923/1992; Kierkegaard 1849/1962) deepens the significance for human beings of relating to existential conditions, and 3) the phenomenological concept of epoché (Husserl 1931; Pedersen 2020) clarifies the need for professionals to bracket own worldviews to meet the other. This theoretical background enables the professional to approach the subjective lifeworld of the individual, including non-secular aspects, without compromising the professional grounding be it in a secular or non-secular discourse. Existential communication may represent a post-secular negotiation and has in a Scandinavian context been defined as a conversation about *the existential conditions and the different subjective approaches to existence* (Andersen et al. 2022). It is argued that in post-secular societies, existential communication includes a negotiation between secular scientific approaches and non-secular approaches to existence, such as spirituality or religion (Andersen et al. 2024).

To investigate possibilities for interdisciplinarity between clinical psychologists and chaplains, we conducted the present study, in which we investigate how Danish psychologists and chaplains understand and practice existential communication when meeting individuals challenged by boundary situations. Further, we investigate how the two professions navigate in these conversations, taking point of departure in negotiations between the secular and non-secular realm. We discuss the findings in relation to Jaspers' concept around existential communication and principles for post-secular negotiations.

The study aims to explore existential communication as a concept and practice in post-secular societies informed by two groups of professionals engaging in boundary situations.

Methods

Data generating

Summing up, four focus group interviews were conducted as part of a seminar for psychologists and chaplains. This method was chosen to gain a rich and deep understanding of how the participants perceive the topic of existential communication, and the format also facilitated possibilities for explicit post-secular negotiations between the two professions during the interviews. The group conversations were recorded and transcribed verbatim, and participants filled in a short questionnaire on basic information around education and years of clinical practice.

Participants

Participants where 13 theologians and 11 psychologists participating in the seminar. All participants were ethnic Danes aged between 28 and 70 years. Theologians were clergy in a local church in the Danish Lutheran Church. Some were hospital- or hospice chaplains, and military chaplains. Most of the clergy had a part-time obligation serving as chaplains. This is the reason why we use the notions 'chaplain', 'vicar', and even 'pastor' interchangeably in the text. All theologians reported to have taken part in continued education, e.g. a master's degree in pastoral care or a psychotherapeutic education. They reported to have between 5 and 55 years of experience in providing spiritual care. Psychologists were either in private practice, psychiatry, or at a specialised hospital department. Most were licensed psychologists or held a specialised education in psychotherapy, and one was newly educated and held no clinical experience. Thus, psychologists had between 0 and 30 years of clinical experience.

FACT BOX

A chaplain traditionally is a clergy. In an international context, the chaplain nowadays might also be a rabbi or any other representative of a religious or philosophical tradition. In the Danish context, however, in most cases, chaplaincy would imply ordained clergy within the Church of Denmark (CoD: the Evangelical Lutheran Church of Denmark also known as the Danish Folk Church). Since Denmark has only recently embarked on the journey towards a multi-ethnic, -cultural and -religious society, the premodern dominating Christian culture is still prevalent and thus motivates the dominating presence of clergy affiliated with the CoD working as chaplains.

Setting and preparation

The setting around the interviews was a seminar stretching over two days, held at "The Church of Denmark's Knowledge- and Education center" (Folkekirkens Uddannelses- og Videncenter) in Løgumkloster, Denmark. The theme of the seminar was "What is Spirit/spirit" and consisted of presentations from three theologians, one psychologist, and one philosopher, all presenting different perspectives on the concept of 'Spirit/spirit'. To facilitate the conversation between the two professions in the focus group for the present study, the organisers of the seminar had planned elements in the program to facilitate an atmosphere of safety and curiosity between professions. This was done by allocating time on the first day for a walk-and-talk exercise (W&T) between psychologists and theologians (2–3 persons per group) lasting one hour. Before attending the seminar, participants had been instructed to prepare a case from their own practice in which existential themes were present. Participants were encouraged to share the case during the W&T elaborating on why they considered this a conversation on existential themes and how they approached it. Participants were invited to take a curious stance towards the other and were instructed not to discuss content critically during the W&T but to stay open as much as possible and ask more questions. In the evening, time was allocated for informal networking between psychologists and theologians. On the second day, more than half-way into the seminar, the focus group interviews were conducted. The interview guide can be found in the Appendix.

Ethics

Participants had received written information about the aim of the interviews before attending the seminar and were informed orally at the seminar on the purpose of the interviews. All were informed that participation was voluntary. Ethical approval was issued by the National Committee on Health Research Ethics, Central Region, Jutland, Denmark, NO. 1–10–72–109–23. Data was stored according to rules in GDPR in the database REDCap at Aarhus University and the project was registered at Aarhus University, 2022–0367531, nr. 3238.

Analysis

When analysing the data, we chose to analyse text bites on the direct and more indirect post-secular negotiations around existential topics between the two professions. The data were coded thematically (Braun & Clarke 2006; 2023). Thus, the

first inductive reading and listening to the interviews was done by two of the authors (LLE and HFP) to familiarise themselves with the material. Next, a preliminary inductive coding of themes was done independently on one interview by LLE and HFP, and then compared and aligned before coding the rest of the interviews. Codes and text extracts to exemplify themes from this first round of coding were discussed with the rest of the research group, and codes were rephrased and informed by the framework of the post-secular negotiation. Then, a second round of coding was conducted in which relevant text bites representing post-secular negotiations were chosen for further analysis, which was conducted by HFP, AHA, RDN and LLE. Codes were analysed and condensed into themes by all members of the research group. We used the theoretical framework behind post-secular negotiations and Jaspers' concept of existential communication when analysing the data.

Reflection and research-team

The research team consisted of licensed psychologists (HFP, AHA), a psychology student (LLE), an anthropologist (RDN), and a hospital chaplain (KFT). The idea of this project was founded by the first and the last author (HFP and KFT): Both have a research interest and experience in existential themes in clinical practice, and have been working at Danish hospitals as clinical psychologists or chaplains, and both as researchers. Both had observed that psychologists and chaplains have had very little if any collaboration in Denmark. Furthermore, both had been part of research networks in Denmark and Scandinavia emerging since 2008 and following the research in themes like faith and health, psychology of religion, and spiritual care. This formed the basis for the idea of inviting chaplains and psychologists to a seminar and applying the research to this environment. AHA and RDN were the authors of the theoretical framework of post-secular negotiations and contributed to the project with this framework for setting up the research questions and analysing data. Authors HFP, KT, AHA and RDN each led as interviewers one of the four focus groups. LLE participated in the phase of transcription and the coding and analysis of data. All researchers participated in the analysis and interpretation of the data and used the logbook, as described as part of a double loop self-reflection in the post-secular negotiation method, in order to enhance self-reflection and buffer potential bias in analysing and interpreting data.

Results

Two of the 24 invited participants chose not to participate, leaving 11 theologians and 11 psychologists to participate in the focus groups. Themes are illustrated by representative excerpts from data.

We found one over-arching theme *"Professional identity in existential communication",* and three sub-themes: "Life-orientation", "Mandate and agenda", and "Professional boundaries and true meetings".

"Professional identity in existential communication"

1) Life orientation

The perception of chaplains and psychologists regarding how and where they experienced being present with their profession and personal life orientations were very different at some points. For chaplains, there was a marked coherence between their professional identity and their personal life orientation. One of the participants described that she/he could not differentiate between her personal beliefs and her profession.

> Chaplain: *"I am a clergy in and out of office. When people bring questions to me on how to settle difficult things in life, like acceptance – and being – and questions of 'Why…', then, I really cannot understand the question(s) without taking into account my Christian identity. I am a Christian all the time."*

The integration of professional and personal identity may enhance the feeling of integrity of the chaplain. However, when professional identity and personal identity become so closely intertwined, it also means that boundaries become blurry when a chaplain is at work and acting on behalf of the profession, or acting on behalf of oneself as a private person. A chaplain described the boundlessness of his/her profession in the following way:

> Chaplain: "… people are super quick to open up when they find me hanging there at the fridge in the local supermarket. They see [recognise] a clergy and then suddenly goes: 'We need to talk about this….' There is no opening. We are not very well equipped to create a setting, where things can happen in a controlled and decent fashion…on the other hand we are super good at the fridge-situations, and situations like 'death' where we are required to handle the situation here and now."

The blurry boundaries may result in a couple of problematic circumstances for both the professional and the confident: The chaplain describes that she/he may potentially be at work non-stop, since the need for spiritual care can appear everywhere at any time and as supermarket situations are accepted as within the professional boundaries. Interestingly, this may be understood as an example of a post-secular negotiation initiated by the help-seeker, since the meeting between the secular and the non-secular is taking place in the public sphere. For both the chaplain and the help-seeker, ethical issues may arise, if the setting for the conversation is blurry, since the help-seeker might not be aware that she/he is putting themselves in a vulnerable situation opening up for personal themes in public, and the chaplain does not fully have control of the context and situation. What might happen if an outsider intervenes, for instance? In this asymmetric relationship, it is up to the chaplain to set the stage for a controlled environment. However, it may be complicated to make a contract if the chaplain perceives her/his private life orientation (being a Christian) as inseparable from the profession and thereby at work all the time and accepting public situations along the lines of the supermarket incident.

Psychologists did not express the same kind of blurry boundaries around their professional identity and private person, which may be caused by the fact that psychologists are situated in clinical practice with a clear physical setting for their practice. However, when covering themes of religious or spiritual character in therapy, some psychologists were more uncertain about the boundaries between their professional identity and personal life orientation.

> Psychologist: *"I don't include God, since I am a psychologist. I am not strong enough in my own faith to bring it up, but if the client mentions it, then I am able to contain it and see it as a part of their lives... and sometimes I mention, that I think the client should speak to a pastor. So, I try to stay within my field [as psychologist]."*

This citation points to an understanding among psychologists that the professional needs to be clear about his/her own life orientation or attitude towards specific religious/spiritual problems, in order to be able to talk about this in the psychological practice. This implicates that the client would not receive any help from the psychologist if it depended on the faith of the psychologist.

2) Mandate and agenda

Chaplains critically discussed how their own profession (theology) and praxis (spiritual care) was influenced by psychology as a discipline rooted in a secular

science. On one hand, chaplains highlighted some concrete methods like narrative methodology that was considered helpful in pastoral care. This method was able to put the narrative of the help-seeker into perspective to religious narratives of e.g. Biblical persons, and thereby making religious content relevant to the help-seekers current life. On the other hand, they criticised the fact that chaplains themselves were undermining their foundation in a non-secular science by tapping into methods inspired by psychological praxis. Specifically, they questioned whether a focus on the individual and his/her subjective experiences and truths ever was a good thing, which they considered to be a key feature in psychological praxis. In contrast, they mentioned that theology as a discipline is centred around seeking truth, if only in the sense of a religious understanding of life and death. Moreover, it was suggested that pastoral care could be seen as a pointing towards core values of Christian faith as being part of a faith community and 'something greater', thus distancing pastoral care from the individual foci subscribed to psychology and societal mainstream tendencies, in which 'all things are relative'.

In the following, a chaplain contrasts his/her agenda and professional foundation to the professional agenda and foundation of the psychologist and the psychologist responds.

> Chaplain *(to the psychologist): "I think it was beautiful to hear you talk about the way you work by containing [the suffering of the client]. And it seems you don't involve stuff of your own. You know… (expanding on the stream of thought), that totally receiving role you put yourself in, and which your profession might also put itself in. But we as chaplains have something else to do. We need to get the people a god, right? And some of them come to us and say 'I don't believe, but I wish I did'. Then you have to say 'Should I help you find a God?'.*
>
> *[…]*
>
> Psychologist *(responds to the chaplain): "You know, there is a lot of opportunities in our society today, since norms and values are somewhat relativised… Religion is one opportunity for finding moral and ethical guidelines… there really are no set guidelines… Once, I had [a client] who said 'Why don't you just tell me what to do?'. But I don't want to, because the thing I would do in the client's situation, the client wouldn't be able to do […] e.g. the client has another sex than me. There is no way to transfer [my experience to the client]… I don't have the solution, but I would like to help you [the client] to unfold the palette. There are opportunities, but I can't decide on behalf of you, and I can't bear the responsibility for you […]."*

In these citations, there is an explicit negotiation going on between the two professions around the mandates of the profession. In the example above from the conversation between a chaplain and a help-seeker, the chaplain is expressing a mandate allowing she/he to become both directive and normative. This is notable when it comes to the religious dimension in expressing faith in either ritual, prayer or in a conversation, thereby encouraging the help-seeker to believe and keep

faith. Of course, one has to keep in mind that chaplaincy in the post-modern era is a question of a double expectation: to embrace confession (church) and profession (chaplaincy) in a transparent way.

The psychologist positions herself/himself in the secular realm and argues with reference to the societal level that "everything is open", meaning that the secular society is not guided by specific religious norms. The consequence for the practice of the psychologist is that she/he is not able to make use of any normative directions but are grounded in a secular 'neutral' stance-taking towards the help-seeker. A common concern for both psychologists and chaplains in the context of a conversation is to be supportive of the help-seeker's autonomy and his/her own process of finding the answers, thereby supporting the help-seeker to take responsibility for his/her own choice.

In the case of the psychologist, it becomes apparent that he/she is practising epoché by critically reflecting that the psychologist's experiences must be bracketed, as they are not transferable to the person seeking help. With an eye on the double mandate as touched upon previously, this is also a common experience in chaplaincy: as a chaplain, one has to differentiate between the denominational affiliation and the (in the understanding of the chaplain) diaconal orientation towards a pluralistic life orientation which is also to be sustained.

The conversation in the interview, as such, reflects a negotiation between the two professions. It shows that due to different groundings in the secular and non-secular, there might be different mandates and opportunities for intervening and, not the least, a tension between the secular and the non-secular in the identity of the two-fold mandate of chaplaincy. One might even say that this double mandate is an example of post-secular negotiation itself.

The material also revealed a professional insecurity on how to take on this mandate in praxis among parish vicars in a post-secular world.

> Vicar: "[I wonder...] when do we dare to be as pastors not attempting to be psychologists, which we are not, as we lack the professional foundation for that?[...] Maybe we don't utilize the source available to us[...]? We do it in our rituals, and when performing in our role [as a parish vicar in the church] and when wearing our cassock [...] but when we are exposed as normal human beings in a conversation [...] then it becomes difficult."

Here a vicar points to the fact that the physical framework like a religious ceremony or wearing a uniform like the cassock, is somehow setting the stage for pastors/chaplains to take on their mandate as a religious professional operating as a non-secular representative in a secular world. The society gives credibility to this praxis and mandate since the pastors are situated in a Christian culture in which the society supports the Church of Denmark stated in the constitution (Grundloven). When acting as a 'normal person', the chaplain is aware that a different

kind of implicit negotiation is required to undertake the same mandate, namely to ensure that the legitimacy of the church, secured by post-secular society, follows the chaplain into the individual encounter with a person seeking help.

There were examples of chaplains being clear about their mandate and what to expect of themselves, like a hospital chaplain describing that she/he had become more aware that he/she was not a therapist treating people.

> I have become increasingly aware that I am not treating people, because that would be quackery [...] nurses or doctors fight to get people out of 'the hole"'. A chaplain's task is to walk along into the hole.

This may be a result of hospital chaplains working in interdisciplinary teams and being exposed to the mandate and boundaries of the different professions at a hospital or in psychiatry at a daily basis, whereas a pastor or vicar may be more of a generalist, not necessarily working together with other professions on a daily basis. The hospital chaplain outlines a clear differentiation between the two disciplines here, namely that the psychologist is in the meeting to help in the sense of secular curing, while the chaplain is in the meeting to walk along with the help-seeker without an explicit aim of curing but rather offering companionship.

3) Professional boundaries and true meetings

The question around how chaplains and psychologists conceptualise existential communication revealed that chaplains tended to define every meeting and every conversation between two people to be existential by nature. Meeting the other as *a human being* was described as an important part of providing spiritual care and facilitating existential communication for chaplains, and even described as a methodology. 'Being human' was described as entailing an attitude of equality between the chaplain and the help-seeker. It could be obtained by consciously choosing to lay down all intentions, as described in the following by a chaplain, who tells a story about meeting a female patient som years ago:

> *"I often sit still in my car [telling myself] 'Now, you have to put aside all your intentions and just go to the patient' – and sometimes you can't, but you can try.*
>
> *Then I enter, and when she [the patient] sees me, she says 'Hi there. You, I would like to speak to you. You don't have any intentions with me.' Her experience is that everyone who enters the front door has an intention with her. They want her to do this and that...and she is a very sensitive women [...] and just as I had said to myself sitting there in the car 'I don't have any intentions with her', she says to me 'You don't have any intention with me'.*

> *Ha ha – but I do, right? […] We have a really great relationship today […] But I don't think she would have liked to meet me 10 years ago, because at that time I did not have that [mindset]."*

In this case the chaplain describes that she/he is aware of owning an agenda ("but I do, right"), but actively uses what could be identified as an epoché to bracket this agenda, and in this case, it facilitated a legitimacy to visit the patient, which resulted in a "great relationship". Another example of aiming for equality, was to bring in personal experiences into the conversation, as means to create equality:

> Chaplain: "It's a question of credibility, when involving oneself. And very much a question of equality regarding matters about faith, for example. In principle, we are equal. One is not an expert just because you hold an education in theology […] for me it is really important, that patients, who speak to a lot of experts, get the feeling that now they speak to a fellow human being […] and that is something else than speaking to the psychiatrist or the psychologist or the doctor or the nurse."

The chaplain communicates an intention to relativise potential power relations between the help-seeker and the chaplain by being intentional around creating equality, and the means for this goal is to involve oneself in the conversation and appear as a fellow human being. This is the attempt to momentarily suspend power relations and enter epoché and meet the help-seeker as a fellow human being. It is, however, an epoché, and sooner or later the role-relationship and power structures will once again be in place. As such, chaplains described existential communication in Jaspersian terms by highlighting that the existential conversation needs to be authentic, touch upon themes that apply to both parties and could potentially change both parties. Specifically in situations of tremendous suffering or crisis, the chaplains argued, that you have to lay away the profession in order to meet the Other, as described by Buber (Buber 1923/1992).

> Chaplain: *"You can't access [the boundary situation] with another human as a profession. The profession simply vanishes, and instead you are a fellow human being […] and there you have to take care of yourself, because in my profession you are confronted with difficult conversations all the time."*
>
> Psychologist: *"But in way that is the outer edge of existence?"*
>
> Chaplain: *"No, that is even farther away, as a leap of faith into the deep sea as Kierkegaard said."*

The chaplain is demonstrating what could be defined as epoché at a secondary level, not only bracketing own life orientation, but even the profession in itself. However, as the chaplain states, in this intense meeting, the professional person needs to take care of themselves. Not only due to the demanding emotional task

of meeting the Other, but it may also call the professional person into a reflection on one's own 'boundary situations' and thereby invite the professional into transcending his/her own existence, potentially in every conversation or therapy. This can be too existentially demanding if you don't have a 'professional shell' as protection that can help the professional decide when, where and with whom they really want to become authentic.

Psychologists were to a larger extend defining existential communication to be characterised by the individual reflecting upon his/her existence as a conscious activity in a controlled, professional environment. They took a more direct point of departure in existential philosophy by referring to the concept of 'thrownness' (*Geworfenheit*) as described by Heidegger, existential givens as described by Yalom, or applying van Deurzens concept of four life worlds including the spiritual dimension.

> Psychologist: *"I always start with the concept of thrownness. What kind of family did you come from? What were you born into? I believe, and think, that this is deeply, deeply existential."*

They did, to a lesser extend underscore the need for mutual exchange as important for existential communication, although they also recognised the importance of establishing 'true meetings' between human existences, as exemplified here:

> Psychologist: *"[…] the type of clients I have, they quickly become engaged when you have a problem and then turn it around. So, they become engaged in helping me. But if I do it in a way where I say 'Oh, I know that feeling well'. It can provide immediate relief without them becoming engaged with me. But I understand the importance of striving for equality, so that I don't sit there as the expert, but that we are two people having a conversation, and I have some professional knowledge which means there is still a kind of asymmetry, but humanly speaking, there can still be equality, or what you might call it."*

As such, the professional 'shell' of the psychologist may both protect the professional, but could potentially represent a barrier towards entering 'true meetings', if the psychologist gets caught up by regulations of his/her profession, and thus hinder existential communication in a Jaspersian sense to take place. They highlighted, e.g., that societal demands, like an insurance company paying for the therapy, could point to different agendas and thereby represent a barrier for providing good therapy, and in the end, for existential communication.

Discussion

In this study we investigated how chaplains and psychologists approached existential communication when meeting individuals facing boundary situations. We found profound differences in how psychologists and chaplains perceive, negotiate, and practice their professional identity when approaching existential communication. We found three subthemes covering different aspects of existential communication, namely how the two professions navigated their private *life orientations* in relation to practicing existential communication, how they viewed the *mandate and agenda* between themselves and help-seekers, and what kind of *professional boundaries* they perceived to have when setting the stage for existential communication and creating *true meetings.* The following section discusses how the application of principles for post-secular negotiation in practice can strengthen the ability of both professions to offer existential communication.

Existential communication among psychologists

We found that psychologists in some instances practised existential communication as post-secular negotiations (Andersen & Nissen 2024). There was a tendency that psychologists advocated for setting an explicit framework for existential communication, either by asking for existential topics, for example 'thrownness', life values, or how the individual relates to existential givens. In this understanding of existential communication, it is a prerequisite that the professional is able to bracket his/her own predefined thoughts/life orientations/values etc. in order to meet the Other. Here, there is no search for the ultimate truth in a normative religious sense, but the professional may help the Other to find true meanings in his/her life situations by offering his/her presence, listening and profession.

However, when it came to asking for and integrate clients' religious/spiritual life orientation, our study suggests that psychologists may be at risk of marginalising the religious/spiritual worldview of the Other either because they felt uncomfortable around specific ethical or moral issues in relation to religion or because they did not feel 'strong enough' in their own faith to be of support. This has also been found and described among Danish psychiatrist as a process of subalternation, meaning that the professional is (unintentionally) marginalising the patient's religious worldview in favour of his/her own, thereby leaving out the possibility of integrating important resources like positive religious coping or existential and spiritual care (Nissen et al. 2019b). This finding highlights the need for education among psychologists and other non-religious professionals

on how to practice post-secular negotiations more systematically when covering religious or spiritual themes that may interfere with personal life values, in order to be of better help to the client. Both professions could draw inspiration from the theoretical foundations of post-secular negotiations, which embrace the concept of the epoché in which professionals must be able to overcome their own life orientations and preconceptions in order to be able to help the person seeking help. Doing that would allow the psychologist and chaplain to be of service to the help-seeker despite a lack of faith or a clash between private moral attitudes if these were reflected upon before the conversation. Then the professional would to a larger extend be able to investigate the problem of the help-seeker in an open way.

Existential communication among chaplains

The chaplains were explicit about their grounding in a non-secular discourse, i. e. the church, and at the same time, being part of a secular discourse as chaplains in the public sphere. This is the double chaplaincy mandate, so to speak. The question arises as to what agenda this means for pastoral care when pastoral care practices existential communication. As chaplains find themselves in a post-secular society, we argue that they apply principles from post-secular negotiation to the practice of chaplaincy in order to facilitate existential communication in a non-transgressive and ethical manner. We further argue that this could include making an explicit post-secular negotiation, so that the help-seeker is fully aware that the non-religious is a part of chaplains' professional groundings and a welcome theme in the conversation. Furthermore: The mandate is – as stated previously – twofold: given by society (to be a hospice chaplain, a public office) and by the church (pointing towards a holistic view of being human and therefore to a holistic concept of [spiritual] care) and at that same time has the mandate to speak religiously about faith, hope, identity, etc.

Finally, if chaplains don't make explicit negotiations around the agenda, mandate, and framework of the conversation, they may be at higher risk for burnout or stress reactions since the boundaries around their professional lives are, to a large extent, blurrier than for psychologists. This may be especially true for pastors in a local society, but is also reported from hospital chaplains, where the individual chaplain may be expected to carry and facilitate difficult emotions at any time of the day. Thus, there may be a need for chaplains to reflect upon this issue, and also to have access to supervision or support groups supervised by therapists in order to become aware of potential sources of stress. However, our results also suggest that chaplains have a unique opportunity to be a link between the help-

seeker and health professionals like psychologists, since help-seekers may, to a higher degree, expect chaplains/pastors to be neutral and without any specific agenda, as also found by Klitzman et al. (2022).

Does the professional setting limit the possibility for 'true' Jaspersian existential communication?

The material poses the question whether the professional setting in which both the psychologists and the chaplains work limits the possibility to facilitate authentic existential communication as understood by Jaspers' concept of 'Begegnung', or what we call 'true meetings' in the analysis. True meetings as understood by Jaspers, represent an authentic and open meeting between two unmasked existences that leave both changed in a search for truth (EPE). It involves being honest with oneself and the other person, as well as listening with empathy and without judgment (EE). Our material suggests that 'true meetings' may be hampered by factors such as power relations, time pressure, or agendas on behalf of the client or confident. This may apply to both professions if not being consciously aware of this. However, for psychologists it may to a higher degree be difficult to practice 'existential communication' as understood by Jaspers, since the profession is regulated to a much higher degree by societal demands on 'fixing' the patient and cognition, behavior and emotions are of greater focus in the educations than existential themes and how to conduct an epoché. This may invite the psychologist to hide behind a social mask or the shell of a professional identity. For chaplains, there seemed to be more natural embracement of Jasper's concept of existential communication, as they defined, to a large extent, their main task as chaplains to be 'a fellow traveller' or a 'fellow human being' in difficult life circumstances, or boundary situations. Yet, as discussed above, even for chaplains there might still be an agenda besides 'being human', and without a more explicit negotiation around this, true meetings might not be able for chaplains either. However, if applying principles from the post-secular negotiations, both professions would be able to facilitate authentic existential communication. This meeting can happen when the help-seeker and professional, for a moment, relate to each other with a presence, where the goal becomes the meeting and presence in itself (Andersen et al. 2019). Such a meeting moment bears the possibility for existential healing since human beings fundamentally are relational (Andersen & Nissen 2024), and may represent an example of Jaspers' concept of '*Begegnung*'.

Limitations

This study is one of the first investigating chaplains and psychologists in a Danish context and this may lay the ground for future study and development of collaboration. The study provides in-depth insights into the need for post-secular negotiation between disciplines and in the encounter between a professional and a person seeking help, and may be transferable to other professionals in post-secular contexts. The diversity of the research group supported critical reflective discussions and the different professional perspectives.

However, this study also has some limitations. Choosing the FUV for the seminar and focus-groups may affect the interaction between the participants. It is likely, that psychologists representing a secular profession would be more reluctant to participate due to the location, since it would require a negotiation of own values and professional identity to whether the individual would be willing to participate in a seminar on the theme "What is Spirit/spirit" in an institution founded on religious values. During the interviews, several of the psychologists revealed that they themselves were either religiously or spiritually oriented. They may therefore represent a specific group of psychologists who are more aware of and positively minded about religious and spiritual issues.

Conclusion

We found profound differences in the understanding and practice of existential communication between Danish psychologists and chaplains in terms of how the two professional groups integrate or disintegrate their own life orientation, how they see the agenda and mission of their profession when offering existential communication, and how each professional group sees the possibility of creating genuine encounters as a means of facilitating existential communication. The ground for collaboration between psychologists and chaplains in a Danish, post-secular setting may need some preparation, but opportunities exist for mutual learning and collaboration. Post-secular negotiation can serve as a method for facilitating this process in practice by providing a common language and understanding of what existential communication can be and how to facilitate it in a way that is most beneficial to the client.

References

American Psychological Association (2017) Ethical principles of psychologists and code of conduct (citation date: 10. 05. 2024), available at https://www.apa.org/ethics/code.

Andersen AH, Assing Hvidt E, Hvidt NC, Illés ZL, Handberg G, Roessler KK (2019) Conversation or non-versation? Physicians' communication about existential, spiritual and religious needs with chronically ill patients – protocol for a qualitative study. European Journal for Person Centered Healthcare 7:9.

Andersen AH, Nissen RD (2025) Existential communication as a post-secular negotiation: In Research and Practice. Journal of Humanistic Psychology, 0(0), 00221678251339218. https://doi.org/10.1177/00221678251339218.

Berger PL, Luckmann T (2016) Den Sociale Konstruktion af Virkeligheden – En vidensociologisk afhandling. Copenhagen: Akademisk Forlag.

Braun V, Clarke V (2006) Using thematic analysis in psychology. Qualitative Research in Psychology 3:77 – 101.

Braun V, Clarke V (2023) Is thematic analysis used well in health psychology? A critical review of published research, with recommendations for quality practice and reporting. Health Psychology Review 17:695 – 718.

Buber M (1923/1992) Jeg og Du [I and Thou]. Oslo: JW Cappelens Forlag AS.

Habermas J (2008) Notes on a post-secular society. New Perspectives Quarterly 25:17 – 29.

Husserl E (1931) Ideas: general introduction to pure phenomenology. London: Macmillan.

Kierkegaard S (1849/1962). Sygdommen til Døden. En christelig psychologisk Udvikling til Opbyggelse og Opvækkelse [The sickness unto death: A Christian psychological exposition for upbuilding and awakening]. Copenhagen: Gyldendal.

Klitzman R, Garbuzova E, Di Sapia Natarelli G, Sinnappan S, Al-Hashimi J (2022) Hospital chaplains' communication with patients: Characteristics, functions and potential benefits. Patient Education and Counseling 105:2905 – 2912.

Mandelkow L, Frick E, Büssing A, Reme SE (2022) Norwegian psychotherapy: Religiosity gap and spiritual care competence. Journal of Spirituality in Mental Health 24:359 – 380.

Nieuwsma JA, Walser RD, Farnsworth JK, Drescher KD, Meador KG, Nash WP (2015) Possibilities within acceptance and commitment therapy for approaching moral injury. Current Psychiatry Reviews 11:193 – 206.

Nissen RD, Andersen AH (2022) Addressing religion in secular healthcare: ExistentialcCommunication and the post-secular negotiation. Religions 13:34.

Nissen RD, Gildberg FA, Hvidt NC (2019a) Approaching the religious patient in forensic psychiatry, with special focus on ethnic minority patients. Mental Health, Religion & Culture 22:694 – 710.

Nissen RD, Gildberg FA, Hvidt NC (2019b) Approaching the religious psychiatric patient in a secular country: Does "subalternalizing" religious patients mean they do not exist? Archiv für Religionspsychologie / Archive for the Psychology of Religion 41:123 – 140.

Pedersen MA (2020) Anthropological Epochés: Phenomenology and the ontological turn. Philosophy of the Social Sciences 50:610 – 646.

Strang S, Strang P (2001) Spiritual thoughts, coping and 'sense of coherence' in brain tumour patients and their spouses. Palliative medicine 15:127 – 134.

Taylor C (2007) A secular age. Cambridge, Massachutes: Harvard University Press.

Vieten C, Scammell S, Pilato R, Ammondson I, Pargament KI, Lukoff D (2013) Spiritual and religious competencies for psychologists. Psychology of Religion and Spirituality 5:129 – 144.

Appendix

Interview guide

I would like to hear about your experiences with incorporating existential topics in conversations with the clients and informants you encounter in your practice.

I have some general questions that I will introduce along the way, but otherwise, focus groups work in such a way that you talk, supplement, and discuss among yourselves. So, specifically, even though I ask the questions, talk to each other about it, look at each other instead of looking at me, just as if you were sitting around the dinner table or somewhere else discussing the topic. If it gets off track, or not everyone is heard, someone from the group usually addresses it – and if not, I will step in.

I am interested in your experiences and insights – all experiences are equally important and there is no right or wrong; all experiences are equally valid.

1. What is an existential conversation in your view? How would you define it? What makes it special compared to other conversations? When does the need for an existential conversation arise?
2. When you conduct a conversation where existential themes come into play, what is your professional foundation? What do you base it on? Do you use your own experiences, theory, specific methods? Is there anything you absolutely would not do?
3. Where do you experience challenges or feel limited by your expertise and methods when dealing with existential topics? Do you see any interfaces with other professions where you might need collaboration or input from other fields?