

## The Importance of Spiritual Care in Nursing\*\*

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### ABSTRACT:

Although the concept of spirituality is highly individualized and defined by patients in a variety of ways, religious beliefs and values exert a deep influence on how patients perceive illness, make decisions, cope with the burden of the disease, and adhere to treatment. When a person confront disturbance in faith and merit system which have signify life, provides hope and power, boredom appears. The person who has mental health disturbance has problems such as hopeless, powerless, uneasiness with life, disturbance in self-respect and finding life is meaningless. One of the duties of nurses is to support patients to cope with patience experiments and find meaning for life with holistic approach when knowledge and power of patients are fallen short. Spiritual concept, which is one of fundamental concept of holistic care, is as important as person's physical, emotional, social aspect. Research on spiritual well-being has suggested that it can directly impact physical and emotional outcomes, and is of great importance to patients. However, by nurses blinding importance of spiritual maintenance, lack of presentation ability for this maintenance, messing religion and spirituality, undesirability of spiritual care or considering an unscientific approach causes ignoring of spiritual care. In this article, there are informations about importance of spiritual care for psychiatry nursing, spiritual needs of individuals, knowledge levels of psychiatry nurses about spiritual needs and psychosocial abilities to give spiritual maintenance.

**Keywords:** Spirituality, care, nursing

## Spiritüel Bakımın Hemşirelikteki Önemi

### ÖZET:

Spiritualite kavramı hastalar tarafından çeşitli şekillerde tanımlanmasına ve oldukça yüksek bir biçimde bireyselliği yansıtmalarına rağmen genel olarak hastanın hastalık algısını, kurallarını, hastalıkla baş etme becerilerini ve tedavilerine uyumlarını içeren dini inanışlar ve değerlerden oluşmaktadır. Kişi, yaşama umudunu ve gücünü kaybederse hayatın anlamına ve inanç sistemine yönelik sıkıntı yaşamaya başlar. Ruh sağlığı bozuk bireylerde de umutsuzluk, güçsüzlük, öz saygıda azalma, yaşamın anlamsızlaşması gibi sorunlar vardır. Burada hemşirelerin temel görevlerinden birisi, bilgisi ve gücüyle bireye yaşamlarından anlam bulmaları için destek olmaktır. Spiritüel bakım, bütüncül bakımı oluşturan kavramlardan fiziksel, sosyal ve duygusal bakım kadar önemli bir kavramdır. Spiritüel bakımla ilgili yapılan araştırmalar spiritüel bakımın fiziksel ve duygusal yönden olumlu çıktıları olduğunu savunmaktadır. Fakat yapılan çalışmalara göre hemşireler, manevi bakımı din görevlilerinin işi olduğunu düşünmeleri ya da bu konuda bakım verecek kadar bilgi sahibi olmamaları nedeniyle bireylerin spiritüel yönleri olduğunu göz ardı etmektedirler.

Bu çalışma, psikiyatri hemşireliği için spiritüel bakım vermenin önemi, bireylerin spiritüel gereksinimleri ve bireylere bu bakımı sunmada psikiyatri hemşirelerinin sahip olması gereken beceriler hakkında bilgiler sunmaktadır.

**Anahtar Kelimeler:** Spiritüel bakım, hemşirelik

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**INTRODUCTION**

Spirituality involves religious beliefs and values pertaining to a certain patient’s perception of illness, his rules, and his capacity to deal with and adapt to treatments although it is described in a variety of ways by the patients and reflects a great deal of individuality (Delaney and Barrere, 2008).

English word “spirit” is derived from “spiritus”, a Latin word which means air, breath, life or courage in Latin. Spiritus, in turn, was derived from the Greek word pneuma which means air or breath. Spirit has been identified as everything that enables us to function in life. Spirituality, on the other hand, has been conceived of as all the things that give meaning to one’s life (Baker, 2003; Turan and Karamanoglu, 2013; Lepherd, 2014; Khairunnisa, 2014).

Spirituality has also been defined as the individual quality related to one’s soul or religious values. This individual quality is composed of a series of concepts and belief systems. These belief systems include search for hope, determination to preserve one’s individual unity, and the type and quality of his relationship with himself and his surroundings (Monod et al., 2010; Montoyne and Calderone, 2010; Onslow, 2009; Sulmasy, 2009).

Spirituality has been used with many different meanings throughout history. While it was used to describe the psychological, rather than the physical, side of the human life in the 12th century, it was

regarded as an indication of one’s piety in the 15th and 16th centuries. It was first used with its modern meaning in France in the 17th century. Though it lacked a satisfactory definition, it was commonly used with and without religious connotations in the 20th century. Interest in the concept of spirituality increased in 1960s, particularly following the World War II. Currently, it has been considered as a broad concept beyond one’s devotedness to the traditional religion (Dyson et al., 1997; King and Koenig, 2009; Yilmaz, 2011; Jaber et al., 2019). Nowadays, it is emphasized, spirituality has a larger dimension than the concept of religion, which includes religion but is not limited to religion, that it is a concept that includes searching for the meaning and purpose of life (Narayanasamy and Owens, 2001; Erol, 2020).

In literature, among the reasons for the surge of interest in spirituality are shown (a) the fact that material things do not bring happiness, (b) the inability of modern science to account for the loss of meaning in people’s lives after pain and death of a significant one, (c) the fact that many problems such as suffering cannot be treated solely by medical approaches, and (d) the search for an answer to the increasing number of social and cultural problems such as violence, and for peaceful and meaningful life and relationships. Common definitions of spirituality are given in Table 1 (King and Koenig, 2009).

**Table 1.** Common definitions of spirituality

Constructs of the Definition	
Belief	Believing in a spiritual and holy body that transcends the material world.
Practice	Includes moral practices such as contemplation, praying and meditation
Awareness	There is an intellectual and emotional awareness.
Experience	One’s experiences of dramatic events that threaten his ego or challenge his limits can direct him to things other than the material ones.

The concept of spirituality cannot always be used interchangeably with religion. Although many patients regard it in terms of religious beliefs but others think it involves selfhood which hardly embraces religious beliefs (Hollywell and Walker, 2008).

**The Concept of Spirituality in Nursing**

Nursing is a profession which treats each individual

as unique. Nurses are in constant interaction with individuals of all age groups and with different experiences and are faced with crisis situations in which individuals question the meaning and value of life (Erol, 2020). Helping an individual to acquire, preserve, and maintain all aspects of his existence is fundamental to a worthwhile nursing care. As a result of this wholistic approach to medical care, the spiritual aspect, like other aspects (physical,

emotional and psychosocial) has begun to be taken into consideration within the scope of health care (Cox, 2003).

Today, spiritual care has become a fundamental part of health care (Wong and Yau, 2010). Determination of the spiritual needs of the patients and providing the appropriate care in accordance with those needs constitutes an essential part of the nursing processes (Kostak, 2010). In hospitalized care, patients could be assisted in dealing with their loneliness, anger, suffering, and pain (Dzul-Church et al., 2010; Montoyne and Calderone, 2010; Narayanasamy, 2001). To this aim, the nurses should be aware of the significance of the spiritual care. In the literature (Chandramohan and Bhagwan, 2016; Kalkım et al., 2019; Tuzer et al., 2020) the nurses were not sufficiently trained about the spiritual needs of the patients during their professional education and that they lacked the necessary qualification in terms of spiritual care in designating the appropriate nursing care plan. While spiritual care has been emphasized in nursing, particularly in psychiatric nursing, it has also been established that spiritual care is a challenging task which calls for a good deal of knowledge and experience.

Spiritual aspects become prominent especially at times when a certain individual's values and beliefs are threatened through emotional stress and loss of a significant other, or at times when he undergoes an

existential crisis in which he tries to seek answers to some fundamental questions such as life and eternity, and in the event that he is unable to find meaning in and inspiration for life (Arslan and Konuk, 2009). The reason why spirituality becomes prominent in these cases is that it helps the patients accept their illnesses and make plans for the future (Kostak, 2007). In such challenging cases when one experiences a lack of harmony among his mind, body, and soul, it is reported that spiritual care practices (a) lead to a betterment in an individual's physical and psychosocial comfort, (b) increase one's quality of life, (c) have positive effect on recovery as it triggers physiological, psychological, and mental well-being and communication, and that nurses' friendly demeanor helps the patients not feel hopelessness in the face of uncertainties in their lives (Wong and Yau, 2010).

### Research on Spirituality and Nursing

There is a very limited amount of research on the issue of spirituality and nursing in Turkey and most of these studies are in the form of literature reviews and compilations. In other countries, on the other hand, there is a good deal of descriptive research done in addition to literature reviews. Research conducted about spirituality and nursing are summarized in Table 2 and Table 3 below.

**Table 2.** Distribution of the research on spirituality and nursing in Turkey

Year	Researchers	Topic	Purpose	Conclusions
2020 <sup>18</sup>	Tüzer H. Kırca K. Özveren H.	Investigation of Nursing Students' Attitudes Towards Death and Their Perceptions of Spirituality and Spiritual Care	The aim of this descriptive study was to investigate nursing students' attitudes towards death and their perceptions of spirituality and spiritual care.	It is recommended that different teaching methods be integrated into the curriculum to help nursing students develop more positive attitudes towards death and improve their perceptions of spiritual care.
2019 <sup>19</sup>	Kalkım A. Dağhan Ş. Midilli S.	Nursing Academicians' Perceptions of Spirituality and Spiritual Care and Their Competence in Spiritual Care	The aim of this study was to describe nursing educators' perceptions of spirituality and spiritual care and their spiritual care competence, and to determine the relationship between them.	A need was felt for developing both perceptions of competence in providing this care and perceptions of spirituality and spiritual care.
2010 <sup>20</sup>	Kostak A. M. Çelikkalp Ü. Demir M.	Nurses and Midwives' Opinions About Spirituality and Spiritual Care.	To determine nurses' and midwives' opinions about spirituality and spiritual care, and the factors affecting their views, to increase awareness on the issue.	The findings of the research indicate that the knowledgeability of the nurses and midwives about spirituality and spiritual care is not sufficient.

**Table 3.** Distribution of the research on spirituality and nursing in other countries

Country (Year)	Researchers	Topic	Purpose	Conclusions
Pakistan <sup>21</sup> (2017)	Kanwal N. et al.	Assess Spirituality and Spiritual Care in Nursing Practice in Public Hospital Lahore	The purpose of the research study assesses spirituality and spiritual care in nursing practice in public hospital Lahore, Pakistan.	Education is warranted to improve nurses, more consciousness related to patient spiritual needs. Spiritual education considerate these needs that provide to nurses with these opportunities to address spirituality and spiritual care that reflect the nurses- patient rapport.
Jordan <sup>22</sup> (2016)	Melhem GAB. et al.	Nurses' Perceptions of Spirituality and Spiritual Care Giving: A Comparison Study Among All Health Care Sectors in Jordan	This study aimed to describe nurses' perceptions of spirituality and spiritual care in Jordan, and to investigate the relationship between their perceptions and their demographic variables.	Jordanian nurses' gender made a difference in their perceptions of spirituality and spiritual care. They had satisfactory levels of perception of spirituality and spiritual care. Enhancing nursing care by integrating standardized spiritual care into the current nursing care, training, and education should also be emphasized.
South Africa <sup>23</sup> (2016)	Chandramohan S. and Bhagwan R.	Utilization of Spirituality and Spiritual Care in Nursing Practice in Public Hospitals in KwaZulu-Natal, South Africa	This study explored the views of professional nurses in KwaZulu-Natal, South Africa regarding the role of spirituality and spiritual care in nursing practice and investigated whether professional nurses utilize spiritually based care in nursing practice.	Nurses need to be effectively prepared to deal with the complexity of providing ethically based personalized spiritual care in an increasingly diverse society.
Palestine <sup>24</sup> (2016)	Abu-El-Noor N.	ICU Nurses' Perceptions and Practice of Spiritual Care at the End of Life: Implications for Policy Change	This study examined how Palestinian nurses working in intensive care units understand spirituality and the provision of spiritual care at the end of life.	Nurses used both communication and observation to identify spiritual needs of patients and provide relevant spiritual care.
United Kingdom, Netherlands Norway Malta <sup>25</sup> (2014)	Ross L. Leeuwen R. Baldacchino D. and et al.	Student Nurses Perceptions of Spirituality and Competence in Delivering Spiritual Care: A European Pilot Study	To describe undergraduate nurses'/midwives' perceptions of spirituality/spiritual care, their perceived competence in delivering spiritual care, and to test out the proposed method and suitability of measures for a larger multinational follow-on study.	Students held a broad view of spirituality/spiritual care and considered themselves to be marginally more competent than not in spiritual care. They were predominantly Christian and reported high levels of spiritual wellbeing and spiritual attitude and involvement.
Singapore <sup>26</sup> (2013)	Tiew L H. Creedy D.K. Chan M F.	Hospice Nurses' Perspectives of Spirituality	To determine student nurses' perceptions of spirituality and spiritual care.	It was determined that the student nurses were aware of the fact that patients needed spiritual care for their mental comfort.
Iran <sup>27</sup> (2010)	Bagheri F. Akbarizade F. Hatami H.	The Relationship Between Nurse's Spiritual Intelligence and Happiness in Iran	a) To investigate the relationship between the spiritual intelligence levels of the nurses and their happiness in life. b) To determine the relationship between the spiritual intelligence levels of the nurses and happiness in life with their demographic characteristics.	It was determined that there is a positive correlation between the spiritual intelligence levels of the nurses and their happiness in life.
Netherlands <sup>28</sup> (2010)	Vlasblom JP. Van der Steen JT. Knol DL. Jochemsen H.	Effects of a Spiritual Care Training for Nurses	To determine the effect of spiritual care training on nursing care.	It was determined that training on spiritual care had a positive effect on the patients.

### **Models Used to Evaluate a Patient's Spirituality:**

There are many models used to evaluate a patient's spirituality. One of them is the HOPE (Sources of hope, Organized beliefs, Personal spirituality practices, Effects of these behaviours in health care etc.) model. Another one is the BELIEF (Belief system, Ethical values, Lifestyle, religious and societal Ingredients, Education, and Future events etc.) model (Sulmasy, 2009; King and Koenig, 2009). Spirituality Distress Assessment Tool (SDAT) is particularly useful in assessing an individual's negative feelings. This tool is specifically suitable for the assessment of the spirituality experiences of the elderly (Sulmasy, 2009).

The principles to be taken into account by the psychiatric nurses while giving spiritual care are listed below:

1. It is necessary for the nurses to get to know about spirituality and the other concepts in relation to it. This knowledge should be constantly applied to the spiritual care and should be shared with other colleagues.
2. It is very important for the nurses to acknowledge spiritual facts expressed by the patients in an emphatic and respectful manner. It is also necessary for them to observe the spiritual needs not overtly expressed by the patients.
3. The nursing diagnosis regarding a patient's spiritual needs should be aimed at describing the strengths of the patients as well as current and potential problems.
4. The prior aim of the nurses in giving the spiritual care should be to trigger the spiritual sources of the individual.
5. The nurses should be aware of the fact that spiritual care is practised to meet the needs of the patients rather than changing their points of view or beliefs.
6. Spiritual diagnosis and care should be based upon a relationship of mutual trust and sensitivity between the nurse and the patient. This care should be planned in consideration of the cultural, social and spiritual sources of the individual as well as his religious practices. The nurse, on the other hand, should be aware of her limitations and knowledge while giving information to others involved in spiritual care.

7. The nurse should be aware of the importance of including the spiritual care in written form as part of the nursing care. This will ensure the systematicity and sustainability of the care given.

### **A Special Area For Spiritual Care: Psychiatric Nursing**

The holistic approach in the maintenance of nursing services is an approach that deals with the individual in the most comprehensive way. In this approach, the existence of the individual is possible by protecting the integrity of the physical, mental, emotional and psychosocial dimensions and ensuring their continuity (Baldachino, 2006; Bayındır and Biçer, 2019). With the adoption of the holistic approach in the provision of health services, the importance of the spiritual needs of individuals has become clear has arrived and a new care area has emerged (Erol, 2020).

In Watson Human Care Model, which is one of the nursing models, Watson attaches importance to taking a holistic approach to the individual. In Watson's model, it is seen that nursing is removed from mechanics and interpersonal relationships are at the forefront ( Watson Caring Science Institute, 2020). This model is consistent with the principles of the features in psychiatric nursing (Babacan,2013). The spiritual dimension gains more importance especially in times of crisis and stress that individuals experience, when their values and beliefs such as physical illness or death are threatened, when people question the meaning of life and experience despair (Yılmaz, 2011). Psychiatric nurses are usually faced with cases in which they have difficulty finding meaning in life, in which feel hopeless or weak. For this reason, they should be professionally competent to give spiritual care, and should be aware of their own points of view about spiritual care (Ergül and Bayık, 2004).

With regard to the principles a psychiatric nurse should comply with before giving spiritual care to patients, it can be proposed that she should be aware of her attitudes toward spirituality care in order to give an efficient nursing to the patient. Following this, determination of the spiritual needs of the patients forms an important part of the nursing process. If the nurses want to provide

spiritual assistance to their patients, they are responsible for providing a peaceful environment to them to read religious books and do their prayings. But the previous research on spiritual care indicate that the nurses are incapable of meeting the spiritual needs of the patients (Ergül and Bayık, 2004).

## CONCLUSION

Human is a holistic creature with many biological, psychological and spiritual dimensions. The quality of health care provided to people can only be achieved with a holistic approach. However, according to the results of the studies, the spiritual dimension in nursing care is not at a sufficient level. Consequently, the nurse's ability to provide quality spiritual care that possible with sufficient knowledge of spirituality. For that reason, it can be suggested to give information about the concept of spirituality and spiritual care during basic nursing education, to reinforce this knowledge with in-service trainings to be given in hospitals, national and international scientific activities, and to conduct evidence-based research to improve spiritual care.

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There is no conflict of interest between the authors.

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