

SPIRITUAL CARE PRACTICES OF NURSES IN PRIVATE HOSPITAL IN BALIWAG, BULACAN

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Abstract

Spiritual care practices include nurse-patient activities that rely on the provision of company or care, listening, or religious activities that correspond to patients' beliefs to help them to achieve better physical, mental, social, and spiritual health and comfort. While the provision of spiritual care and spiritual needs are important nursing function, nurses do not always engage in spiritual care with their patients hence, the study aims to determine Spiritual Care Practices of Nurses in Private Hospital in Baliwag, Bulacan. Utilizing Descriptive design, results revealed that in general, nurses are aware of the importance of providing spiritual care and are hindered by a lack of time and strategy about how best to implement such care. The most common spiritual care intervention by nurses include always staying and listening to patients who are experiencing pain, emotional suffering and other personal problems. On the other hand, some important spiritual practices that nurses seldomly perform include discussing spiritual resources around the community, offering prayer to clients, sharing inspirational writing or words from bible and arranging visit or referral to spiritual mentors or priest. The findings were attributed to lack of common protocol in the assessment and integration of spiritual care in the hospital where nurses work.

Keywords: spirituality, spiritual care, nursing

Spirituality is a relationship with a supreme being that directs one's beliefs and practices (Leininger, M). With the diverse spirituality or religion of the millions of people, there are situations where a person expects to receive mutual respect on their different religious beliefs, and this also applies to the nursing practices. Spirituality has been described as an umbrella term to denote the various meanings and interpretations of the term. Within nursing, definitions of spirituality have been seen to include elements such as a higher power, feelings of connectedness, purpose and meaning in life, relationships and transcendence. Regardless of the way it is defined or conceptualized, spirituality is reported to contribute to the health and wellbeing of individuals. Caring for clients is considered holistic because nurses help clients in every aspect. They are with them from womb to tomb. Our Nurses role is to touch every little aspect in the patient lives as they ask for God's guidance and healing hands. (O'Brien, 2014).

Spirituality in nursing practice is not just for the patients, but it is also for the nurses because we all know that it is one of the aspect that can help nurses to provide proper health needs, hopes for themselves ones how hard their work is and also for the patients to cope up with their illnesses. Spiritual care is the most important goal in nursing practice because it promotes health, and reduces stress and anxiety, It also helps the mental health state of the client to have a positive outlook in life. It helps the nurse to have a healthy state of mind, strengthens faith, provides a quality of care to the patient not only on the physical aspect but also in the spiritual aspect and I believe that spiritual care improves the client but most importantly it improves the humanity and psychological needs of a nurse. (Kharamah, Asayesh, Sharififard, & Alinoori, 2016).

Interventions to promote spiritual healing also involves helping patients to think positively on life and it is one of the things that nurses can do, because it will be the start of a therapeutic relationship to gain their trust and to

establish faith in God, helping them to realize that just because they have that illness is God punishing them and help them to realize that all the things that they did before that leads them to their condition. Sometimes having illness makes them realize and discover the people that values them and make them feel that they are important. (Wattis, & Rogers, 2015).

The patient's spiritual wellbeing is associated with a number of positive outcomes including a greater tolerance of the emotional and physical demands of illness amongst patients, decreases in pain, stress and negative emotions, and lower risk of both depression and suicide. Patients who receive adequate spiritual care are also reportedly more satisfied with their hospital care and treatment. On the side of the nurses, in order to provide proper spiritual nursing care, the nurse should have enough knowledge on it because it has a big impact on the patient. It influenced the health of patient in connection to the effect of their spiritual belief. The interaction between the nurse and the patient was affected by their opinion or their belief, having the same opinion about it will help the nurse to gain the cooperation of the patient for them to implement the practices or management that will help them to easily recover. (O'Brien, 2014).

Spiritual care is believed to be a major part of the nurse's role. This is consistent with the nurse's role as a multifaceted one, focusing on holistic care, incorporating the physical, psychological, social and spiritual needs of patients. Receiving spiritual care helps the patient to recover or reduce the factors that may worsen their condition. (Willemse, Smeets, Leeuwen, Janssen, & Foudraïne, 2017). Despite this, there is evidence that spiritual needs and assessment are not always well engaged with by nursing staff, with suggestion in the literature that engagement with the spiritual needs of patients does not consistently occur, thus, this study intends to determine the spiritual interventions most commonly performed and spiritual care that are least utilized by nurses in five private hospitals in

Baliwag.

Statement of the problem

The study aims to answer the following questions:

1. What are the perceptions of nurses about spirituality?
2. What are the different spiritual care practices being performed by nurses?
3. What are the different spiritual care practices that are not performed by nurses?
4. How do nurses provide spiritual care needs of the client?

Assumption of the Study

1. Nurses have different point of view when it comes to spirituality.
2. Nurses, being unique individual have their own different way of respecting patient spirituality.

Methods

The researchers used non experimental descriptive design. Participants were all the nurses working in Castro Maternity Hospital & Medical Center, Rugay Hospital, Marcelo Hospital and Sagrada Familia Hospital. The researchers decided to include all of the nurses with a total of 55 respondents.

Research Instruments

The instrument used for data collection has 37 closed ended question. The questionnaire is composed of four (4) parts. The first part reflected the profile of respondents as to; Name (optional), Gender, Age, Religion, Hospital working at, Year Graduated on Nursing, Years working in the hospital, School Graduated and Current Shift

Assignment. The second, third and fourth part consisted of statements in Likerts Scale about Spiritual Index of Well Being Statement based from Daaleman, T. P. & Frey, B. B. (2004), Spiritual Assessment Items based on Spiritual Assessment Scale by Jones and Bartlett and Vincensi Spiritual Care Interventions Tool (VSCIT)

The following tables represent the interpretation of computed weighted mean as cited in:

Spiritual Index of Well Being Statement [Daaleman, T. P. & Frey, B. B. (2004)]

Numerical Value	Descriptive Value	Interpretation
5	Strongly Agree	The respondents totally agree with what he/she feel about the statement.
4	Agree	The respondents most of the time agree with what he/she feel about the statement.
3	Uncertain	The respondents is not sure whether he/she agree or not about the statement.
2	Disagree	The respondents does not agree most of the time with what he/she feel about the statement.
1	Strongly disagree	The respondents totally disagree with what he/she feel about the statement.

Spiritual Assessment Items (Vincensi Spiritual Care Interventions Tool (VSCIT))

Numerical Value	Descriptive Value	Interpretation
3	Always perform	The respondents <u>most of the time</u> perform the given spiritual care practices.
2	Seldomly perform	The respondents <u>sometimes</u> perform the given spiritual care practices.
1	Never Perform	The respondents <u>did not</u> perform the given spiritual care practices.

Data Collection Procedure

The researchers submitted a letter seeking the approval for the conduct of the study to the office of the Dean of the College of Nursing. After the dean has approved the letter, another set of letters were distributed among the Chief Nurses of the Hospitals. The researchers personally facilitated the distribution of the questionnaires accompanied by a cover letter which explains the purpose and objectives of the study, what will be done to the gathered information and the confidentiality of the results.

Statistical Treatment of Data

The overall results of the questionnaires were presented using tabular form. Proportion expressed in percentage were primarily used and describe the different activities by the researchers and answer by the respondents.

The formula of percentage includes:

$$\% = f/N \times 100$$

Where: % = percentage
f = frequency
N = total number of respondents

$$\frac{\text{Highest number} - \text{Lowest number}}{\text{Total number of respondents}}$$

$$\text{Part II \& Part III.} \quad \frac{5 - 1}{5}$$

$$\text{Part IV.} \quad \frac{3 - 1}{3}$$

Results and Discussion

Summary of respondent's profile as shown in Tables 1-6. There are 80% or 44 out of the 55 female respondents and 20% or 11 male respondents. 60% of nurses working in private hospitals in Baliwag belong to age 20 to 30 years old and 36.36% of nurses age 31 to 40, while there are only 1.82% on both nurses age 41 to 50 and 51 to 60 years old. Nurses on four different hospitals had stayed for almost 1 – 3 years having 49.09% which is 27 out of fifty 55 respondents comparing to 5.45% which is only 3 out of 55 respondents have stayed for more than 10 years, this shows that nurses working in private hospitals are mostly newly graduates nurse. Most of the respondents were Roman Catholic having 87.27% or 48 respondents, Iglesia ni Cristo having 9.09% or 5 respondents, and 2 out of the 55 respondents are Christian. There are more respondents working on 7 – 3PM shift with result of 49.09% or 27 out of 55 respondents, 29.09% or 16 out of the 55 respondents from 3 – 11PM shift, and 10.91% or 6 out of the 55 respondents both from 11 – 7PM and 7AM – 7PM shifts. from 3 – 11PM, and 10.91% or 6 out of the 55 respondents both from 11 – 7PM and 7AM – 7PM shifts.

Table 1. Nurses Perception About Spirituality in Terms of How They Perceive Spiritual Quality of

Spiritual index of well-being statement	5 (F)	WM	4 (f)	WM	3 (F)	WM	2 (F)	WM	1 (F)	WM	Total	Interpretation
I am overwhelmed when I have personal difficulties and problems.	2	0.18	5	0.36	11	0.6	24	0.87	13	0.24	2.25	Disagreed
I can't begin to understand my problems.	1	0.09	0	0	9	0.49	26	0.94	19	0.34	1.86	Disagreed
I haven't found my life purpose yet	1	0.09	0	0	12	0.65	19	0.69	23	0.42	1.85	Strongly Disagreed
Often, there is no way I can complete what I have started.	0	0	1	0.07	7	0.38	29	1.05	18	0.33	1.83	Strongly Disagreed
I don't know how to begin to solve my problems.	0	0	1	0.07	7	0.38	26	0.94	21	0.38	1.77	Strongly Disagreed
There is not much I can do to make a difference in my life.	0	0	1	0.07	7	0.38	24	0.87	23	0.42	1.74	Strongly Disagreed
There is not much I can do to help myself	1	0.09	0	0	7	0.38	18	0.65	29	0.53	1.65	Strongly Disagreed

Table 1. Continuation

Spiritual index of well-being statement	5 (F)	WM	4 (f)	WM	3 (F)	WM	2 (F)	WM	1 (F)	WM	Total	Interpretation
There is a great void in my life at this time.	0	0	3	0.22	3	0.16	21	0.76	28	0.51	1.65	Strongly Disagreed
In this world, I don't know where I fit in.	0	0	1	0.07	4	0.22	24	0.87	26	0.47	1.63	Strongly Disagreed
I have a lack of purpose in my life	0	0	1	0.07	6	0.33	19	0.69	29	0.53	1.62	Strongly Disagreed
I am far from understanding the meaning of life.	0	0	2	0.14	2	0.11	21	0.76	30	0.54	1.55	Strongly Disagreed
I don't know who I am, where I came from, or where I am going.	0	0	1	0.07	1	0.05	24	0.87	29	0.53	1.52	Strongly Disagreed

As shown in Table 1. item number 1 having weighted mean of 2.25, nurses disagreed that they are overwhelmed when they are having difficulties or problems. Item number 2 having weighted mean of 1.86, tells that nurses strongly disagreed that they can't understand their own problems. Item number 3 with weighted mean of 1.85 which means strongly disagreed therefore nurses have found their purpose in life. Item number 4, according to the nurses, they always complete what they have started for they strongly disagreed in this item with a total weighted mean of 1.83. Item number 5 with total weighted mean of 1.77 shows that nurses know how to start solving their own problems in life. Item number 6 with total weighted mean of 1.74 entails that nurses can do more to make difference in their life. Item number 7 with total weighted mean of 1.65, nurses strongly disagreed that they can't do more to help their selves. Item number 8 with total weighted mean of 1.65, tells that at this moment there is no void in nurses life. Item number 9 having weighted mean of 1.63, shows that nurses know where they fit in, in this world we live in. Item number 10 having weighted mean of 1.62, entails that nurses know their full essence of purpose in life. Item number 11 with total weighted mean of 1.55, nurses understand the meaning of life for they strongly disagreed that they are far from understanding it. Item number 12 with total weighted mean of 1.52, shows that nurses from four different private hospital know to themselves, where they came from, and where they are going in life, for they strongly disagreed with total weighted mean of 1.74 and it entails that nurses can do more to make difference in their lives. In item number 7 with total weighted mean of 1.65, nurses strongly disagreed that they can't do more to help themselves. Item number 8 with total weighted mean of 1.65, tells that at this moment there is no void in nurse's life.

As shown on Table 1, nurses from four different private hospital strongly agreed there is Supreme Being or God, having this item number 1, 4.85 the highest total weighted mean among the rest of the item. Nurses strongly agreed they are at peace with God, having this item number 2

a total weighted mean of 4.79. They also strongly agreed that God is watching over them, and feel confident about this item number 3 have a total weighted mean of 4.79. Item number 4 with total weighted mean of 4.76 entails that through their spiritual beliefs they receive strength and comfort. Item number 5 with total weighted mean of 4.75 nurses strongly agreed that their spiritual beliefs gave them a positive image by being one of God family. Item number 6 with total weighted mean of 4.71 in terms of trusting God, nurses strongly agreed that God take care of our future. In all of our activities in life, nurses strongly agreed that God have interest on it, having this item number 7 total weighted mean of 4.67. nurses strongly agreed that thru personal prayer their relationship with God strengthened more, this item number 8 have total weighted mean of 4.63. Item number 9 is a new category of question which is religious practices of nurses. Nurses strongly agreed that they get support from colleagues, friends and family members who share religious beliefs, item number 10 with total weighted mean of 4.55. thru the use of reading books or bible/scriptures and thinking about religious or spiritual things nurses strongly agreed that this helped them communicate with God. This item number 11 have a total weighted mean of 4.51. item number 12, with total weighted mean of 4.5 tells that nurses strongly agreed that attending church or being on a faith group or group of people whom you have the same religion, is important part of their life. Item number 13 with total weighted mean of 4.44, entails that nurses strongly agreed they received comfort and support from their spiritual companion. Item number 14 with total weighted mean of 4.44 tells that nurses strongly agreed that other than attending worship services they also find satisfaction on other religious activities. Item number 15 with total weighted mean of 4.38 shows that nurses strongly agreed that thru participating on religious activities or worship services it gave them more strengths.

Table 2. Different Care Practices Mostly and Least Performed by Nurses

Spiritual Assessment Items	3 (f)	%	2 (f)	%	1 (f)	%	Total WM	Descriptive Analysis
I have stayed with client for quite a time who are experiencing pain, suffering and other problems.	30	1.64	23	0.84	2	0.04	2.54	Always Performed
I have listened to the verbalization of anxieties and hardship of the illness condition.	30	1.64	21	0.76	4	0.07	2.47	Always Performed
In the primary care settings, I have discussed with clients potential spiritual resources in the community to help meet their spiritual care needs.	17	0.93	33	1.2	5	0.09	2.22	Seldomly Performed
I have offered to pray with clients.	20	1.09	27	0.98	8	0.14	2.21	Seldomly Performed
I have allowed listening to worship songs.	20	1.09	25	0.90	10	0.18	2.17	Seldomly Performed
I have provided support for client's spiritual practices such as allowing to attend mass at the hospital chapel.	17	0.93	28	1.02	10	0.18	2.13	Seldomly Performed
I have encouraged clients to cop using spiritual devotional pictures (image of Christ/virgin Mary, etc.), item (rosary, crucifix, handkerchief, etc.)	14	0.76	33	1.2	8	0.14	2.1	Seldomly Performed
I have facilitated the receiving of sacramental practices like communion, anointing, etc.	14	0.76	23	0.84	18	0.33	1.93	Seldomly Performed
I have shared inspirational writings or words from the bible.	10	0.54	30	1.09	15	0.27	1.9	Seldomly Performed
I have arranged for a visit or made a referral to client's clergy or spiritual mentors or priest	7	0.38	23	0.84	25	0.45	1.67	Seldomly Performed

As shown on Table 2, item number 1 is the most performed intervention among the nursing care being given by nurses having weighted mean of 2.54, this means nurses always stay for quite some time with patient experiencing pain, suffering and other problems. Item number 2 having a weighted mean of 2.47 shows that nurses always listen to their client anxieties and hardships in life. Item number 3 with weighted mean of 2.22 tells that nurses seldom discuss with their client spiritual resources around the community to help in their spiritual care needs. Item number 4 with weighted mean of 2.21 entails that nurse's seldom offer or pray with the clients. Item number 5 having a weighted mean of 2.17 means that nurses seldom allow client to listen to a Worship songs while admitted. Item number 6 with weighted mean of 2.13 just shows that nurses seldom provide support in clients spiritual practices. Item number 7 with weighted mean of 2.1 tells that nurses seldom encourage clients to use spiritual scripture, images, or rituals to help in clients coping. Item number 8 having weighted mean of 1.93 means that nurses seldom facilitate sacramental practices such as communion or anointing. Item number 9 with weighted mean of 1.9 tells that nurses seldom share inspirational writings or words from bible. Item number 10 having a weighted mean of 1.67 shows that nurses seldom arrange visit or referral to spiritual mentors or priest to help client in their spiritual needs.

The researchers concluded that nurses from four different hospitals have the same point of view regarding spirituality. Most of the respondents have the same way of showing respect to patient's spirituality and they think that spirituality is vital in giving care.

Nurses know their spiritual care responsibilities and they know the worth of patient's religion and spirituality, however, these are the spiritual practices that is seldom done by the nurses. This is because of work overload, long duty hours and lack of staff.

In terms of how the nurses performed the spiritual care needs of the client, nurses always stay for quite some time with patient experiencing pain, suffering and other problems, and shows that nurses always listen to their client anxieties and hardships in life. Having done all of this practices shows that the nurses perform the spiritual care needs of the client.

Recommendations

Based on the results, the researchers recommend that hospitals should come up with protocols highlighting the importance of spiritual care interventions to patients. Nurses giving direct care to complicated cases should take time discussing with their client spiritual resources around the community to help in their spiritual care needs, offer or pray with the clients, allow client to listen to a worship songs while admitted, provide support in clients spiritual practices, encourage clients to use spiritual scripture, images, or rituals to help in clients coping, and facilitate sacramental practices such as communion or anointing, share inspirational writings or words from bible, arrange visit or referral to spiritual mentors or priest to help client in their spiritual needs.

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