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### Exploration of Nurses' Experience in Spiritual Care Needs: A Qualitative Study

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#### Abstract

Spiritual care is an integral and fundamental aspect of care where the nurse shows concern for the patient. Spiritual care nurses focus on respecting patients, being friendly, showing sympathetic interaction, listening attentively and giving strength to patients in the face of their illness. One example of the implementation of spiritual care in patients in Islamic perspective is provide the patients to pray, recite Al-Qur'an, guide and direct patients. This study aims to explore the experience of nurses in applying spiritual care consisting of the role of nurses and the obstacles of nurses in applying spiritual care. This study is qualitative study by using a phenomenological design. The data collection method used

in-depth interviews. Participants in this study were implementing nurses in the Inpatient Ward and Intensive Care Unit of eight participants selected by purposive sampling technique. Data were collected in the form of interviews and field notes analyzed using the Colaizzi method. The results of this study found two themes, namely the active role of nurses in applying spiritual care, and obstacles for nurses in spiritual care needs. The role of nurses in spiritual care needs in this hospital is still not optimal due to lack of training, no rewards and inadequate infrastructure for the implementation of spiritual care.

**Keywords:** Experience, Nurses, Spiritual Care, Need, Hospital

#### Introduction

The competency of nurses is a very urgent for the success of services in hospitals. The competence of nurses could provide satisfaction to patients in obtaining optimal nursing care services. The competence of nurses in the context of spiritual care is parallel to the nursing process, namely conducting studies, formulating diagnoses, compiling nursing plans and interventions and evaluations the spiritual needs of patients (Arini, Mulyono & Susilowati, 2016)<sup>[2]</sup>.

The nurses are health workers at the forefront of providing comprehensive nursing services including biological, psychological, sociocultural and spiritual. The American Association of Colleges of Nurses (AACN) requires nurses to be able to assess patients' spiritual needs and recognize the importance of spiritual aspects to health care (Nurida & Yodang, 2020)<sup>[11]</sup>. Spiritual nursing care needs provided in the hospital is an important role of palliative care that cannot be ignored in the patient's healing process (Jones, Paal, Symons, & Best, 2021)<sup>[9]</sup>. However, it is often overlooked in daily practice in every setting of health care and nursing. This could be caused by various factors including personal, professional and social factors in the provision of spiritual nursing care (Cheah, Andrews, Chew, Moloney, & Verhaagen, 2016)<sup>[3]</sup>. Spiritual nursing is palliative care that requires an interdisciplinary team collaboration approach and team collaboration is required. For the application of the need for spiritual care is the need for collaboration between nurses and clergy. The knowledge and experience of nurses in spiritual care is still limited, where nurses must play an active role in providing spiritual care to patients according to their religion (Taylor, 2018)<sup>[13]</sup>.

The results of a study conducted in a hospital in the United States by Ferrel cited in the study (Musviro, 2017)<sup>[10]</sup>. Shows that 77% of patients want to talk about the problem of their spiritual needs, even 50% of patients ask doctors to pray for them, yet 6% of patients receive spiritual care from doctors, while 13% receive spiritual care from nurses. Meanwhile 50% of health services do not provide spiritual services or no ability to provide spiritual services.

The research conducted by Wardah, Febtrina, & Dewi, (2017)<sup>[15]</sup>, at RSUD Sukoharjo, it shows that nurses still have low knowledge (62.24%) of providing spiritual nursing care to patients. Meanwhile, the results of the research conducted by (Estetika & Jannah, 2018)<sup>[5]</sup>, in one of the hospitals in Banda Aceh City, the results of the implementation of spiritual care in the hospital were not good, namely (59.7%). However, according to research (Husna, Yahya, Kamil, & Tahlil, 2021)<sup>[8]</sup>.

The results of research on nurses' knowledge in meeting spiritual needs showed that the majority of respondents were well knowledgeable, namely (84.2%).

**Methods**

This study was a qualitative research with a phenomenological study design. The study was conducted at Meuraxa general hospital in Banda Aceh, Indonesia. Participants in this study were the nurses in the inpatient ward and intensive care unit (ICU) of eight participants selected by purposive sampling technique. The inclusion criteria in this study were nurses who have worked for more than 2 years, and are not on leave or study assignments. Data collection used the in-depth interview method. Each participant was interviewed twice with a duration of 45-60 minutes. The data collection tool in this study was the interview guidelines consist of ten questions related to roles and obstacles, smart phones and field notes. Data analysis using the Colaizzi method with six steps, namely: researchers make verbatim from the interview results, read over and over again the interview transcript to get the focus of the analysis, identify important statements or keywords related to the phenomenon or statement of participants so

that data saturation is obtained, carry out a coding process to obtain theme suitability, describe the phenomenon completely by integrating all findings, and validate participants by accurately ascertaining the circumstances experienced by participants as the final validation stage and conclusions are drawn about the nurse's experience in applying spiritual care need. The researchers conducted a member checking after the sub-themes and themes found.

**Ethical considerations**

The study has been approved by an ethical consideration from the Nursing Research Ethics Commission (KEPK) of the Faculty of Nursing, Universitas Syiah Kuala with the number 112021230422.

**Results**

The study was conducted in June-July 2022. Interviews were conducted on eight participants. The themes produced in this study are the active role of nurses in applying spiritual care, and Obstacles for nurses in applying spiritual care.

Based on the results of data analysis, the researchers obtained two themes described in the following table:

**Table 1:** Analysis of nurses' experiences in applying spiritual care needs

Meaning unit	Coding	Sub themes	Themes
<i>"Activities that are always carried out wearing a headscarf and tidying up clothes, if there is a sound of azan remind the patient to pray, the patient cannot go to the bathroom with tayamum teach his tayamum and if he wants to give therapy to read bassmallah" (P2)</i> <i>"Every time you do the action is praying, When the patient is painful we tell istifar, recommend wearing a headscarf (P6)</i>	Activities carried out by nurses in providing spiritual care	The role of the nurse in spiritual care professionally	The active role of nurses in spiritual care
<i>" The patient will feel calm with the way we Eemm Guide and direct that pain is an ordeal so must be patient and steadfast"(P2)</i> <i>"Provide spiritual support so that the patient is more patient, and the nurse also leads the patient to be calm in the face of the disease"(P7)</i>	Support the emotional system in the application of spiritual care	The role of nurses in providing support to patients spiritually	
<i>"There are already in the nurse's room like tayamum powder and the usual Qur'an but it's still lacking. prayer posters and qibla directions are also not in this room"(P4)</i> <i>"Prayer posters are lacking in our room, yes, and tayamum powder is still very lacking if it is used with 1 patient other patients must wait, the direction of the qibla is not all there yet"(P6)</i>	Hampered implementation of spiritual care due to limited infrastructure	Inadequate facilities and infrastructure	Obstacles in spiritual care
<i>"At least training is more contingent, huh... training at least training on spiritual care"(P2)</i> <i>"The hope is that there is actually a training camp on spiritual care, so that we can really apply it to the patient"(P6)</i>	Hampered implementation of spiritual care due to lack of continuation training for nurses	Unsustainable training	
<i>"There is no reward yet, hoping for the best prize or award but there is not either"(P5)</i> <i>"Until now, no one has received a good reward, there is a prize given so that in the future everyone will do that according to the SOP"(P8)</i>	Hampered implementation of spiritual care due to lack of reward	Lack of Rewards	

**The active role of nurses in applying spiritual care**

The nurse should seek to help meet the spiritual needs of the patient. The spiritual well-being of the individual can affect the patient's level of health and behavior. The explanation of the sub-theme based on the predetermined theme is as follows:

**The role of the nurse in spiritual care professionally**

In this sub-theme, participants revealed that one of the roles performed by nurses in implementing spiritual care is to carry out spiritual care activities. This is in accordance with the participants' statements as follows:

*"Activities that are always carried out such as wearing a headscarf and tidying up clothes, if there is a sound of azan remind the patient to pray, the patient*

*cannot go to the bathroom assisted by tayamum, teach the tayamum and if you want to provide bassmallah reading therapy." (P2)*

Other activities carried out by nurses in applying spiritual care were expressed by participants, namely as follows:

*"Every time you do the act of praying, When the patient is sick we tell istifar, if the patient does not wear a hijab, there are other things too, for example, prayer, it is time to be reminded." (P6)*

**The role of nurses in providing support to patients spiritually**

In this sub-theme, participants revealed another role played in implementing spiritual care, namely providing emotional

system support, motivation to patients according to their needs. This was expressed by the participants as follows:

*"Patients will feel calm in our way... Guiding and directing that pain is a trial so must be patient and steadfast." (P2)*

*"Provide spiritual support to make the patient more patient, and the nurse also leads the patient to be calm in the face of the disease." (P7)*

### **Obstacles in spiritual care**

This theme explains the obstacles that occur to whatever nurses need to the implementation of spiritual care in the hospital, as for the explanation of the sub-theme based on the predetermined theme is as follows:

#### **Inadequate facilities and infrastructure**

In this sub-theme, nurses revealed that they need facilities and infrastructure to support spiritual care activities, this is expressed as follows:

*"There are already in the nurse's room like tayamum powder and the usual qur'an but it's still lacking. prayer posters and qibla directions are also not in this room"(P4)*

*"Prayer posters are lacking in our room, yes, and tayamum powder is still very lacking if it is used with 1 patient other patients must wait, the direction of the qibla is not all there yet"(P6)*

#### **Unsustainable training**

This sub-theme explains the state of nurses who need training for the implementation of spiritual care. It is expressed as follows:

*"At least training is more contingent, huh... training at least training on spiritual care"(P2)*

*"The hope is that there is actually a training camp on spiritual care, so that we can really apply it to the patient"(P6)*

#### **Lack of reward**

This sub-theme explains the positive rewards that should be obtained by implementing nurses. This was expressed by the participants as follows:

*"As long as I work here, there is no reward, I want there to be a prize or something, as long as there is a reward for morale" (P3)*

*"Until now, no one has received a good reward, there are prizes given so that in the future everyone will do it according to the SOP"(P8)*

### **Discussion**

Nurses as health professionals have the greatest opportunity to provide health services, especially comprehensive nursing care including bio-psycho-social-spiritual. The nurse should seek to help meet the spiritual needs of the patient, in addition to helping his physical needs. The spiritual well-being of the individual can affect the level of health and behavior of the patient (Husna *et al.*, 2021)<sup>[8]</sup>.

Nurses in paying attention to patient needs will look at various aspects, by taking a holistic approach nurses can pay attention to the spiritual aspects of the patient that will affect

the patient's prosperous state. Nurse competence is very important in carrying out spiritual care for patients, nurse competence in the spiritual care cortex is in line with the nursing process, namely conducting studies, formulating nursing diagnoses, compiling nursing plans and interventions, implementing and evaluating the spiritual needs of patients (Timmins & Caldeira, 2017)<sup>[14]</sup>.

This study is in line with the research conducted by Elyas, Yona & Waluyo, (2022)<sup>[4]</sup>, The role of nurses in patient care is very important because nurses are always near patients to carry out care monitoring. Nurses are also required to be able to provide holistic and spiritual nursing care. The ability to provide spiritual nursing care reveals the role of a professional nurse.

Spiritual care is a procedure performed by the nurse on the patient to meet his spiritual needs, a trusting relationship between the nurse and the patient can be created with openness so that the patient's expectations in healing can increase. This can help patients face the future (O'Brien, Kinloch & Barbara, 2019)<sup>[12]</sup>.

The spiritual aspect of care is a purely aspect of nursing where the care is given to the patient with the aim of providing spiritual care and assisting the patient in meeting his spiritual needs in terms of his relationship to god and believing in his recovery (Elyas *et al.*, 2022)<sup>[4]</sup>.

The nurse's attitude towards positive spiritual care tends to have a better professional commitment and care, nurses who are able to do spiritual care are those who understand the meaning of spirituality in the problems faced by the patient, and the role of the nurse in every patient's spiritual care (Jones *et al.*, 2021)<sup>[9]</sup>.

Studying, diagnosing, planning, implementing and evaluating the spiritual needs of patients is something that must be done by a nurse, she is not only able to understand the importance of the patient's spiritual needs that must be met but that understanding requires a real application in a health service (Nurida & Yodang, 2020)<sup>[11]</sup>. Nurses in performing spiritual care for patients aim to increase the patient's understanding of his or her identity, develop self-confidence, reduce anxiety, depression and loneliness, increase self-esteem and self-motivation and help patients find their purpose in life (Wibawa & Nurhidayati, 2020)<sup>[16]</sup>. Spiritual care that is most often given by nurses is offering to have faith, documenting the spiritual care provided, inviting patients to pray and inviting patients to tell stories about the spiritual challenges of life and their illnesses (Taylor, 2018)<sup>[13]</sup>.

The nurses could provide facilities for patients to pray, think, recite Quran, guide prayers, and guide all these activities in Islamic perspective. However, in providing services, all nurses must pay attention to the spiritual care needs that have been set by the hospital. Other interventions that could be carried out include therapeutic communication, encouraging patients to participate or interact with family or close friends, providing privacy and time for spiritual activities, using *shalawat* (pray for Mohammad prophet) and providing worship equipment (Jones *et al.*, 2021)<sup>[9]</sup>.

According to the studies conducted Estetika & Jannah (2018)<sup>[5]</sup>, The nurse in providing a spiritual care needs will listen to complaints and teach prayers, remind the patient of the prayer time and if the patient who usually does the prayer on time the patient will ask the nurse to help himself when going to prayer, such as giving *tayamum* (dust) powder for the patient do not provide *wudhu* (ablution) so

that the patient could do *tayammum*, if there is a patient who will face dying process the nurse asks the family to accompany the patient and the nurse also participates in the patient's mentality.

In carrying out the role of spiritual care, nurses also experience obstacles in their implementation and have an effect in the implementation of spiritual care activities such as spiritual needs which could have a negative impact on patients who need the spiritual care process so that if these needs are not achieved it will have an impact on the implementation of spiritual care. The provision and competence of spiritual care is influenced by the training obtained by nurses about spiritual care itself (Adriana, Gani, Hidayah & Mazriani, 2021)<sup>[1]</sup>.

Adding an understanding of spiritual care to nurses is essential in building the soul of a nurse who provides holistic care. This is needed to build self-awareness in humans as beings who have beliefs, so that by providing training or guidance on spiritual care skills to nurses will provide good enthusiasm and support in applying it to patients. It is found that with knowledge spiritual care skills will be a strong predictor to improve spirituality in patients in hospitals setting.

This is in line with the research conducted by Estetika & Jannah, (2018)<sup>[5]</sup>, mentioned that the phenomenon that occurs in health services, the implementation of spiritual care has not been optimally running both in terms of direct application to patients and in terms of documentation. When the nurses in hospitals have provided forms of spiritual care applications, however it turns out that they do not have the ability to document properly.

Spiritual care is important role and needed by all patients, however, many nurses feel unprepared and lack confidence, lack of competence, and lack the skills to recognize, assess and deal with spiritual care issues for patients, it is strongly influenced by the training followed, and the daily habits of nurses. The nurses working in ICU need more information about spiritual care needs. Several of the efforts that have been made in meeting spiritual needs include: spiritual support for families and critical patients who are treated in the ICU. One thing to providing of caring and spiritual care to critically ill patients in the ICU such as assisting patient worship activities, involving family and religious leaders, and encouraging to have spirit (Husna & Elvania, 2020)<sup>[7]</sup>.

The main obstacles that caused the nurses to be unable to provide the spiritual needs of patients include nurses lacking the time they feel, due to excessive workload, assuming that spiritual needs are not the nurse's job, lack of education or training, lack of clarity or difficulty building relationships with others about spiritual care needs. The negative perception of spiritual care causes nurses to be less able to carry it out, especially if the facilities and infrastructure do not support the implementation of spiritual care, so that nurses are confused about what to do. Health care facilities need to set policies to support nurses in providing spiritual care (Green, Kim-Godwin & Jones, C, 2020)<sup>[6]</sup>.

According to research conducted by Nurida & Yodang (2020)<sup>[11]</sup>, spiritual care skills for nurses are very important for nurses who have more time with other health workers, need to support by education or training program for fulfill spiritual care for nurses in caring patients. When the spiritual competence of nurses increases, it could related to the provision of spiritual care needs optimally to patients.

Based on the results of this study, the experience of nurses in applying spiritual care needs is very associated with the implementation of spiritual care. This is shown by how nurses carry out spiritual care to patients such as conducting initial assessments, guiding spirit and motivating patients to show their spiritual life to increase their quality of life.

### Conclusion

The experience of nurses in applying spiritual care need in this hospital consisted of two themes, namely the active role of nurses in spiritual care needs and the obstacles for nurses to apply the spiritual care. It is an important to policymakers in the hospitals should meet the infrastructure and conduct continuous training and to increase the knowledge of nurses in applying spiritual care needs.

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