

A STUDY TO ASSESS THE PERCEPTION OF SPIRITUALITY AND SPIRITUAL CARE AS A PART OF HOLISTIC NURSING CARE AMONG NURSING OFFICERS WORKING AT SELECTED HOSPITALS IN JAIPUR

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ABSTRACT

Spirituality is a dynamic and intrinsic aspect of humanity which gives a sense of peacefulness, meaning and purpose of life and balance among the physical emotional, social and spiritual aspect of life. Spiritual care is fundamental aspect of nursing and attending to spiritual needs of the patients and families that may improve the health care outcomes. A holistic nurse adopt mind-body- spirit- emotion environment approach to the practice of nursing, Perception of nurses can influence how they act in the delivery of spiritual care. A quantitative approach and descriptive research design was adopted. The study was conducted among nursing officers working at SMS hospital, Jaipur (Raj) to assess the perception of spirituality and spiritual care as a part of holistic nursing care. Hundred nursing officers using Non probability convenient sampling technique has participated in the study. Modified spirituality and spiritual care rating scale (SSCRS) was used to collect the data from samples, after getting consent analyzed using descriptive and inferential statistics. The findings revealed that majority 81% of nursing officers have moderate level of perception 12% have high level of perception and 7% have low level of perception regarding spirituality and spiritual care as a part of holistic nursing care. The mean score of nursing officers was 49.02, mean percentage was 65.36 and standard deviation was 0.69 that it is deviation of score from their centre point. The level of perception of nursing officers was associated significantly with socio demographic variables of age and involvement in religious activity and there were no significant association with gender, professional qualification, years of working experience, background of living, marital status, and type of family The findings concludes that nurses were oriented to spirituality, and respected the importance of providing spiritual care to the patients as a part of holistic nursing care.

Keywords: Perception, Spirituality, Spiritual care, Holistic nursing care, Nursing officers.

INTRODUCTION

Nursing is an integral part of health care. Nursing history too is rooted in spiritual background, from Ancient to modern times. With the introduction of important changes in health care system nurses use the concept of holistic in patient care and spiritual aspect of healthcare recognizing and integrating the principles and modalities of holistic healing into daily life and practice is steadily gaining importance.

Spirituality is primarily defined as the core essence of the self capable of experiencing inner peace and interconnectedness with a higher power, personal quality of being concerned with human spirit. It is the Unifying life force that integrates the biological, psychological, and social Components. According to American Holistic Nurses Association Holistic care is a comprehensive model requiring attention to all dimensions of an individual, focuses on healing the whole person and helping individuals and groups, find harmony in body, mind, spirit and environment. Holistic care provides an in-depth understanding of patients and has been referred to as the heart of the science of nursing. Spiritual nursing care supports spiritual health, activities and ways bringing spiritual quality of life and the balance between biopsychosocial and spiritual sides of a person providing a well-being and integrity feeling.

Holistic care is mandated by the nursing and medical standards of care. The World Health Organization (WHO) notes that the spiritual aspect of a patient is inseparable from the whole person. The provision of spiritual care by health-care providers can lead to positive health outcomes such as improved coping, recovery, well-being, quality of life, a greater tolerance of the demands of illness and more satisfied with care. Optimal spiritual care depends on the nurse's perception of spirituality and spiritual care. Only when nurses are sensitive enough to them they can identify the spiritual needs of patients timely and accurately and take corresponding measures to meet them. At the same time, the successful implementation of spiritual care helps nurses gain job satisfaction, maintain a positive attitude toward their work, and affirm their personal and professional value

Nurses equipped with essential competencies, resources and opportunities can effectively provide spiritual care as an integral element of holistic nursing thus, it is significant to assess how well nursing officers are prepared for their spiritual care role by assessing their perception regarding spirituality and spiritual care and levels of understanding which may affect their ability to provide a consistent quality of care

A descriptive study was conducted on Nurses spiritual care perception in Ethiopia. The study was conducted on 390 nurses using a simple random sampling method. Data was collected

by Spirituality and Spiritual Care Rating Scale (SSCRS). The findings showed that the mean score for nurses' perception of spiritual care for patient was moderate, that is, 3.11 ± 0.78 . Age ($p < 0.05$), clinical experience ($p < 0.05$), educational status ($p < 0.05$), and religion ($p < 0.05$) were significantly associated with spiritual care perceptions. The study concluded that Nurses' perception of spiritual care was moderate.

OBJECTIVES

- To assess the perception of spirituality and spiritual care as a part of holistic Nursing care among Nursing Officers Working at Selected Hospitals in Jaipur.
- To determine the association between spirituality and Spiritual care as a part of holistic nursing care among Nursing Officers with their selected socio demographic variables.

HYPOTHESIS

All hypothesis will be tested at 0.05 level of significance.

- **H₁** - There will be a significant association between spirituality and spiritual care as a part of holistic nursing care among Nursing Officers Working at Selected Hospitals in Jaipur with their selected socio demographic variables
- **H₀** - There will be no significant association between spirituality and spiritual care as a part of holistic nursing care among Nursing Officers Working at Selected Hospitals in Jaipur with their selected socio demographic variables

MATERIALS AND METHODS

The present study used a Quantitative research approach and Non-Experimental Descriptive Research Design to assess the perception regarding spirituality and spiritual care as a part of holistic nursing care. The study was conducted at SMS Hospital, Jaipur (Raj.). A Non-Probability Convenient Sampling Technique was used to select the sample of 100 nursing officers working at SMS hospital, Jaipur (Raj.) who were available and willing to participate for the study. The tool for data collection was a 5 point likert scale Modified spirituality and spiritual care ratingscale (SSCRS) with 2 sections , The socio-demographic variables consists of 8 items were Age (in years), Gender, professional qualification, years of working experience

background of living, marital status, involvement in religious activity and type of family. Section 2 includes The Modified spirituality and spiritual care rating scale (SSCRS). It consists of 15 set of positive and negative declarative statements. The statements has 5 options indicating the degree of agreement and disagreement. Among 15 statements, 2 statements were conversely scored. Responses were elicited on a 5- point likert scale with 1 indicating strongly disagree, 2 indicating disagree, 3 indicating uncertain, 4 indicating agree and 5 indicating strongly agree. The participants have to choose one option. The tool was validated by 8 experts to establish the content validity. Based on the suggestions shared by the experts, necessary modifications were made. The pilot study was conducted among 10 Nursing officers working at accessory units of SMS hospital Jaipur to check the feasibility in conducting the main study. The study was deemed to be feasible and progressed on to the main study. The reliability of the tool was established by using Chronbach's Alpha method. The data was collected after obtaining the formal permission from competent authority and ethical committee. The informed consent was taken from the participants verbally by ensuring that confidentiality will be maintained throughout the research process. Code numbers were given to the subjects to maintain confidentiality. After self-introduction Nursing officers were provided with the tools by direct face to face interaction and by explaining the purpose of the study. Nursing Officers were encouraged to ask for any kind of clarification in items, if needed. The schedule took 40-45 minutes for each individual to answer. At the end of successful data collection, conveyed thanks to the participants. The collected data was analyzed by using descriptive and inferential statistics.

RESULTS

The study findings are as follows-

A) Frequency and percentage distribution of socio-demographic variables of nursing officers

Table no- 1 **N=100**

S.N.	SOCIO-DEMOGRAPHICAL VARIABLES		FREQUENCY (f)	PERCENTAGE (%)
1	Age in years	Less than equal to 25 Years	0	0%
		25-35 years	39	39%
		35 years or above	61	61%
2	Gender	Male	56	56%
		Female	44	44%
3	Professional Qualification	GNM	77	77%
		B.Sc. Nursing	20	20%
		M.Sc Nursing	3	3%
4	Years of working experience	Less than 5 years	15	15%
		5-10 years	33	33%
		More than 10 years	52	52%
5	Background of living	Rural	36	36%
		Urban	64	64%
6	Marital status	Married	77	77%
		Unmarried	12	12%
		Widow /Widower/Separated	7	7%
		Divorced	4	4%
7	Involvement in religious activity	Yes	88	88%
		No	12	12%
8	Type of family	Nuclear family	45	45%
		Joint family	42	42%
		Extended family	13	13%

B) Frequency and percentage distribution of level of perception regarding spirituality and spiritual care as a part of holistic nursing care among nursing officers

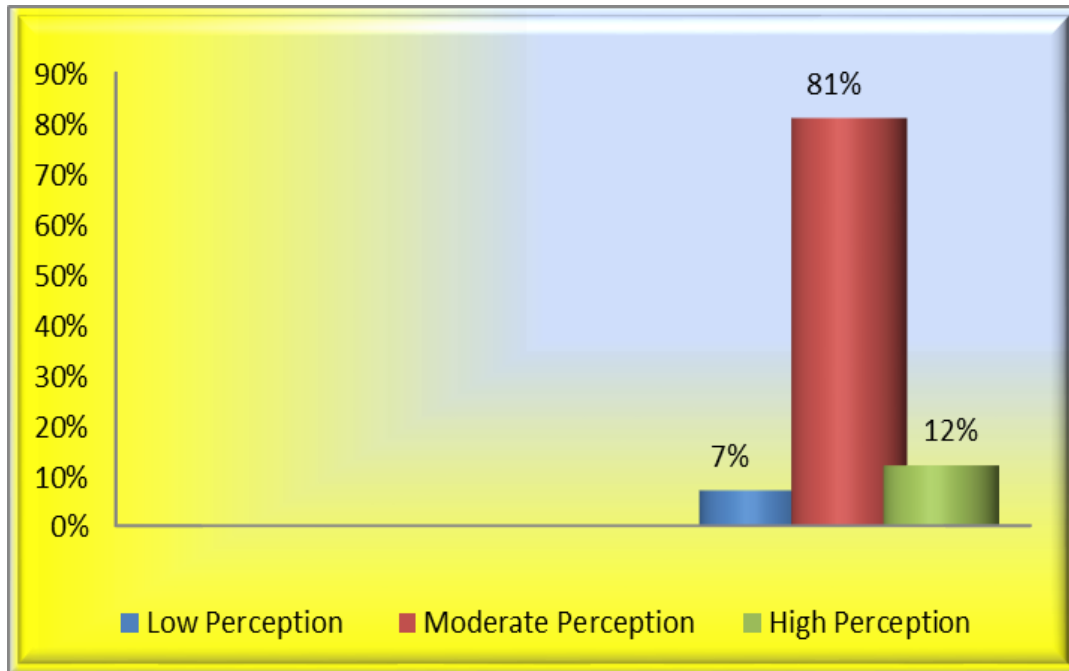


Figure-1 Distribution of level of perception regarding spirituality and spiritual care as a part of holistic nursing care. Among nursing officers

C) The mean, mean percentage and standard deviation in aspect of level of perception of nursing officers regarding spirituality and spiritual care as a part of holistic nursing care.

Table no- 2 **N=100**

S.No.	Maximum score	Mean	Mean percentage	Standard deviation
1	75	49.02	65.36	0.69

D) Chi square test was used to find out the association between level of perception regarding spirituality and spiritual care with socio demographic variables among nursing officers.

Table no -3

N=100

S. N	Demographic variables	Categories	Frequency	Level of perception			Calculated value	Degree of freedom	Tabulated value	L.o.s. @0.05
				Low	Moderate	High				
1	Age in years	25-35 years	39	2	34	3	9.58	2	5.99	S
		35 years or above	61	5	47	9				
2	Gender	Male	56	5	43	8	1.47	2	5.99	NS
		Female	44	2	38	4				
3	Professional Qualification	GNM	77	5	65	7	5.01	4	9.49	NS
		B.Sc. Nursing	20	2	13	5				
		M.Sc Nursing	3	0	3	0				
4	Years of working experience	Less than 5 years	15	2	12	1	2.15	4	9.49	NS
		5-10 years	33	1	28	4				
		More than 10 years	52	4	41	7				
5	Background of living	Rural	36	4	29	3	1.96	2	5.99	NS
		Urban	64	3	52	9				
6	Marital status	Married	77	4	62	11	5.21	6	12.59	NS
		Unmarried	12	2	10	0				
		Widow /Widower/Separated	7	1	5	1				
		Divorced	4	0	4	0				
7	Involvement in religious Activity	Yes	88	1	75	12	39.24	2	5.99	S
		No	12	6	6	0				
8	Type of family	Nuclear family	45	4	37	4	1.83	4	9.49	NS
		Joint family	42	3	33	6				
		Extended family	13	0	11	2				

S = significant at 0.05 level of significance

NS = non-significant at 0.05 level of significance

L.O.S. = level of significance

DISCUSSION

The study showed that Majority of nursing officers i.e., 61 (61%) belonged to 35 years or above age group, 56 (56%) belonged to the male, 77 (77%) of nursing officers educated upto GNM, 52 (52%) were having more than 10 years of working experience, 64 (64%) belonged to urban background of living., 77 (77%) belonged to married ,88 (88%) belonged to be involved in religious activity and 45 (45%) of nursing officers belonged to nuclear family The level of perception regarding spirituality and spiritual care as a part of holistic nursing care among nursing officers in terms of pre decided categories i.e. majority (81) 81% of nursing officers have moderate level of perception ,(12) 12% were found to have high level of perception and only (7) 7% had low level of perception. The mean score of nursing officers was 49.02, mean percentage was 65.36 and standard deviation was 0.69 that it is deviation of score from their centre point. There is a significant association between the level of perception of nursing officers and the socio demographic variables of age in years and involvement in religious activity and no significant association with gender, professional qualification, years of working experience, background of living, marital status, and type of family.

The findings are also supported by study conducted by **Zhao Haomei ,et al. (2022)** a cross-sectional study on Correlations among spiritual care competence, spiritual care perceptions and spiritual health of Chinese nurses in China. The findings revealed the total scores of spiritual care competence, spiritual care perceptions, and spiritual health were 58.25 ± 16.21 , 144.49 ± 16.87 , and 84.88 ± 10.57 , respectively, which both were moderate. Spiritual care competence was positively correlated with spiritual care perceptions ($r = 0.653$, $p < 0.01$) and spiritual health ($r = 0.587$, $p < 0.01$). And spiritual health played a mediating role between the other two variables (accounting for 35.6%)

Melissa Neathery, et.al. (2019) conducted a descriptive correlational cross-sectional study on Spiritual Perspectives, Spiritual Care, and Knowledge of Recovery among Psychiatric Mental Health Nurses. The findings revealed that Participants scored high on measurement of spiritual perspectives, moderate on measurement of knowledge about recovery-oriented practice, and indicated a moderate degree of frequency of provision of spiritual care. Nurses who viewed themselves as “spiritual and religious” provided more frequent spiritual care and

had higher levels of spiritual perspectives than those who viewed themselves as “spiritual but not religious. The study concludes that Nurses’ spiritual perspectives, religiosity, and years of experience are factors that influence spiritual care.

Kaddourah Bayan et al. (2018) conducted a study on Nurses’ perceptions of spirituality and spiritual care at five tertiary care hospitals in Riyadh, Saudi Arabia. The findings showed that the mean SSCRS score was 3.8 ± 0.5 (the spirituality and spiritual care statements fell within the „agree „category). A statistically significant difference was found only between perceptions of spirituality and spiritual care among nurses and their nursing experience duration

RECOMMENDATIONS

- A similar study may be replicated on a large sample & in different settings.
- The same study can be conducted with some more socio demographic variable like religion.
- The same study can be conducted as comparative study by using two different settings.
- An observational study can be done on practice of nurses regarding spiritual care as a part of holistic nursing care.

NURSING IMPLICATIONS

Following implications from the studies were drawn of vital concern in the field of nursing practice, nursing education, nursing administration and nursing research.

NURSING EDUCATION

- As a nurse educator, there is an abundant opportunity for nursing professionals to educate regarding holistic nursing care.
- Nurse educator need to lay emphasize on holistic nursing care to be added in nursing curriculum and orient the nursing students about holistic nursing care.

NURSING ADMINISTRATION

- The nurse administrator can periodically organise in service education and continuing education for nursing officers regarding holistic nursing care which enables them to

provide high quality of care to patients.

- Nurse administrator should make a regular plan and allow nursing officers to practice spiritual care as a part of holistic nursing care.

NURSING PRACTICE

- The finding of the study implies that there is more need for continued effortsto ensure the nurses perception regarding spirituality and spiritual care to improve the quality of holistic nursing care.
- Imparting awareness about spirituality and spiritual care as a part of holistic nursing care among nursing officers should be done.

NURSING RESEARCH

- The study implies that research and evidence based study should focus on improving in giving spiritual care as a part of holistic nursing care.
- The study implies that there is also a need to conduct study to find out factors affecting perception regarding spirituality and spiritual care as a part of holistic nursing care.
- There is a need for extensive research to assess spiritual care practices by nursing officers as a part of holistic nursing care.

CONCLUSION

The study concludes that. majority (81) 81% of nursing officers have moderate level of perception ,(12) 12% were found to have high level of perception and only (7) 7% had low level of perception and there is significant association between the level of perception of nursing officers and the socio demographic variables of age in years and involvement in religious activity. The primary responsibility of a healthcare professional is to create self- awarenessand to provide necessary information which will help in developing positive perception and providing holistic nursing care to patients. However, effective strategies and programs to strengthen their commitment to the value of spirituality and spiritual care as a part of holistic nursing care are needed. Researchers have confirmed that hospital patients rank Spiritual care as a priority in their recovery and see adequate spiritual care as Integral to overall satisfaction with care during hospitalization. Spiritual care is an important aspect in holistic healthcare to improve patient well being. It can also be referred as emotional first aid kit. As spirituality is an essential element of health so it should be focused for providing holistic care to the patients

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DECLARATION BY AUTHORS

Ethical Approval: Approved

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