

SPIRITUALITY AND SPIRITUAL CARE, THE VIEW OF KEY STAKEHOLDERS: NIGERIA A CASE STUDY



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Introduction

- Spiritual care is an aspect of holistic care that is designed to reach the deep but intangible human needs that are important for the promotion of good health, such as inner strength and peace (Hsiao, Chiang & Chien, 2010).
- The concept of holistic nursing care thus requires that nurses should understand the interconnectedness of the physical, psychological/emotional, social, cultural and spiritual realms and that this understanding informs their approach to the treatment of their patients (Freshwater & Maslin-Prothero, 2005; Meyer, 2003).
- Spiritual nursing care is a valued and integral component of quality, holistic nursing care for both acutely and chronically ill patients (McEwen, 2005).

Introduction Cont'd .

- In Nigeria, the issue of meeting spiritual needs of the patients as a component of holistic nursing care is underutilized. There is huge confusion among the nurses regarding the meanings of spirituality and because of this confusion, the sensitivity of religion in the nation generally, no nurse wants to talk of the spiritual needs of the patients. However, without the spiritual care components of care, holistic nursing care will always be incomplete.
- Therefore, in order to provide spiritual care, nurses need to understand the meaning and interpretation of spirituality and spiritual care from patient's perspective.



Objectives

- To describe the extent to which nurse educators, nurse clinicians and nursing students understand the concept of spiritual care within the context of holistic nursing care.



RESEARCH METHODOLOGY

- A quantitative approach using descriptive survey was used .
- The study was carried out in the Federal Republic of Nigeria. Nigeria is divided into six geo-political zones and there are 23 accredited Departments of Nursing Science in the country. A purposive sampling technique was used to pick one accredited department of nursing per geopolitical zone except the North-Eastern zone which could not be used owing to security challenges.
- A total of five accredited departments of nursing science were used and 215 nurse educators, nurse clinicians and fourth and fifth year nursing students were purposively selected from these Departments of Nursing but only 210 questionnaires were retrieved and analysed using SPSS.

Research Methodology Cont'd .

Inclusion criteria: All nurse educators and nurse clinicians, regardless of their qualifications, years of experience, gender, religion, ethnicity and place of primary assignment were eligible for inclusion in the study. Every participating nurse educator, administrator was expected to have a current practicing nursing license, and all the nursing students had to be bona-fide students of their institutions, and have official school identification cards indexed by the Nursing and Midwifery Council of Nigeria.

Exclusion criteria : All other health care professionals or educators who were not nurses were excluded in the study.

Two adapted structured standardized instruments namely: The Role of Spirituality in Nursing Practice and Spirituality and Spiritual Care Scale (SSCS) were used to collect data from the participants. The instrument contains 35 items that examined the participants' understanding of the concept of spiritual care within the context of holistic nursing care.

Research Methodology Cont'd .

- In order to ensure the reliability of the research instrument, it was pilot tested with five (5) nurse educators, five (5) nurse clinicians and six (6) nursing students. Testing was done at two-week intervals using a test-retest method with a reliability co-efficient of 0.80 which showed that the instrument was reliable.
- A Statistical Package for the Social Sciences (SPSS) Version 22 was used to analyse the data collected. Descriptive statistics in the form of frequency distributions were used to summarise bio-data of the participants. Chi-square and Pearson's correlation were used to determine the correlation between role of spirituality in nursing practice, spirituality and spiritual care and participants' socio-demographic characteristics and level of significance was set at 5% .
- All information concerning the research was thoroughly explained to the participants and freedom of withdrawal at any point was also emphasized. Respondents' consent were obtained. Information given by the participants were treated with utmost confidentiality and anonymity was maintained

Table 1 Biodata of the participants (n=210)

Variable	Frequency (F)	Percentage(%)
Gender		
Male	58	27.6
Female	152	72.4
Age range in years		
18 – 22	10	4.8
23 – 27	60	28.6
28 – 32	24	11.4
33 – 37	39	18.6
38 – 42	5	2.4
43 – 47	21	10.0
48 – 52	24	11.4
53 – 57	27	12.8
Religion		
Christianity	142	67.6
Islam	65	31.0
Others	3	1.4
Tribe		
Yoruba	105	50.0
Igbo	54	25.7
Nupe	9	4.3
Hausa	22	10.5
Fulani	4	1.9
Others	16	7.6
Marital Status		
Single	70	33.3
Married	131	62.4
Divorced	5	2.4
Widowed	4	1.9

Results Cont'd

- Table 1 above showed that the majority 152 (72.4%) were females and 60 (28.6%) of the participants were between 23 and 27 years.
- 142 (67.6%) were Christians
- Participants were from different ethnic groups within Nigeria, with the majority 105 (50.0%) been Yoruba.
- Majority 31% had registered nurse/midwife certificates with the lowest unit of 1.9% having Masters degrees in Nursing Science.

Table 2 :Opinions of the participants on the concept of spirituality in nursing practice.**FREQUENCY AND PERCENTAGE**

Variable	Completely Disagree	Disagree	undecided	Agree	Fully Agree
Spirituality is a basic aspect of being human	2 (0.9%)	4 (1.9%)	17 (8.0%)	85 (40.5%)	100 (47.6%)
Spiritual concerns are outside the scope of nursing practice	60 (28.6%)	104 (49.5%)	22 (10.5%)	22 (10.5%)	1 (0.5%)
Nursing practice with a spiritual component has a better chance of empowering clients than practice without such a component	6 (2.9%)	16 (7.6%)	25 (11.9%)	100 (47.6%)	61 (29.1%)
Knowledge of patient's spiritual beliefs is important for effective nursing practice	2 (0.9%)	7 (3.3%)	6 (2.9%)	100 (47.6%)	93 (44.3%)
The use of spiritual language and spiritual concepts in nursing practice is inappropriate	38 (18.1%)	77 (36.7%)	40 (19.1%)	42 (20.0%)	13 (6.2%)
The spiritual backgrounds of patients do not particularly influence nursing practice	45 (21.4%)	96 (45.7%)	33 (15.7%)	25 (11.9%)	11 (5.2)
A nurse's use of scripture or other spiritual texts in nursing practice is inappropriate	18 (8.6%)	35 (16.7%)	41 (19.5%)	84 (40.0%)	31 (14.8%)
It is against nursing ethics to ever pray with a patient	78 (37.1%)	79 (37.6%)	23 (11.0%)	24 (11.4%)	4 (1.9%)



Results Cont'd

- Table 2 presents the opinions of the participants on the concept of spirituality in nursing practice.
- 69% of the participants were of the opinion that spirituality is a basic aspect of being human and that nursing practice with a spiritual component has a better chance of empowering clients than practice without such a component



Table 3: Spirituality in nursing practice in relation to participants' socio-demographic characteristics

Variables (dependent)	Participants' socio-demographic characteristics					
	Gender	Religion	Tribe	Marital Status	Years of Experience	Professional Qualifications
The role of spirituality in nursing practice	0.463	0.938	0.932	0.116	*0.000	*0.000
Spirituality and spiritual care	0.634	0.098	0.038*	0.877	*0.036	*0.002

- Only professional qualifications and years of experience of the participants were found to be significantly associated with the role of spirituality in nursing practice and spiritual care in nursing practice, with p-value < 0.05. This implies that professional qualifications and years of experience are key factors in providing spirituality and spiritual care in nursing practice.

Discussion of Findings

- Most of the participants viewed spirituality as a basic aspect of being human and agreed that spiritual care is an important part of nursing care that is concerned with a belief and faith in a God. It was also viewed by majority (85%) as a unifying force which enables individuals to be at peace with themselves and the world through the need to forgive and be forgiven. Some were of the opinion that it has to do with finding meaning in the good and bad events of life while others were of the opinion that it has to do with one's religion and belief.
- However, a significant 21.5% of the participants were of the opinion that spirituality only involves going to church or place of worship and does not apply to those who are unsure of God or do not believe in God.
- Participants generally attached multiple meanings to spirituality and spiritual care. This affirmed the statement of Van Leeuwen and Cusveller (2003) that it is difficult to tie the concept of spirituality and spiritual care to a single meaning, and rather than having one fixed meaning, the notion of spirituality seems to refer to a 'family' of different yet connected meanings.

Discussion of Findings

- The participants expressed the opinion that different terms and languages are often used to describe concepts and views related to spirituality and spiritual care. Puckalski et al., (2014) affirmed that a consensus definition of spirituality was a great challenge because terms such as ‘history’, ‘transcendence’, and ‘sacred’ were suggested as elements of spirituality, some participants objected to them because of their specific interpretations and meanings in their unique cultural contexts. Others pointed out the difficulty of viewing spirituality in strict abstract terms, because it is not a product but an experience that emerges from engagement in life. It is a quality that is not simply produced but emerges over time.
- The study also revealed an association between professional qualifications, years of experience of the participants and the role of spirituality in nursing practice and spiritual care, indicating that the better qualified a nurse educator, nurse clinician or nursing student, the better was their understanding of the concept of spiritual care in nursing. It would seem that more years of experience of nursing practice may lead to a better understanding of the concept of spirituality and spiritual care in nursing. This may be due to the fact that qualifications may determine the knowledge while years of experience may determine their professional exposure to spiritual nursing practice.

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Conclusion

- Spiritual nursing care is crucial and critical to rendering holistic care to patients and families. Efforts have been made to give biopsychosocial care to clients/patients with little emphasis on the spiritual component of holistic nursing care. Spiritual care in nursing represents a unique component of holistic nursing care and if nursing care is to be effective and efficient, special attention must be paid to this aspect of the care.
- Therefore it is crucial that for the knowledge of the nurses in Nigeria either as educators or clinicians or nursing students on spirituality and spiritual care to improve, there must be a review of training curriculum for integration of spiritual care into it for both training and retraining programmes, so that adequate knowledge, skills and positive attitude toward patients' spirituality which will lead to improved competence and better outcomes in spiritual nursing care will be achieved.

**Thank you for
listening**

