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Brown, Ruth, Brooks, Joanna, Chirema, Kathleen Dympna and Wattis, John

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# Nursing Spiritually: What do we know? How do we know?

» **Ruth Brown**

Dr Joanna Brooks

Dr Kathleen Chirema

Prof John Wattis

# In the beginning....There was a mental health nurse.....



# RCN Survey



# Why is M/H different?



# Phenomenology



# Sample



# Strengths and limitations



# Themes

- ▶ Life experience/History
- ▶ Professional attitudes
- ▶ What is spirituality?
- ▶ Impact on service user



# Discussion



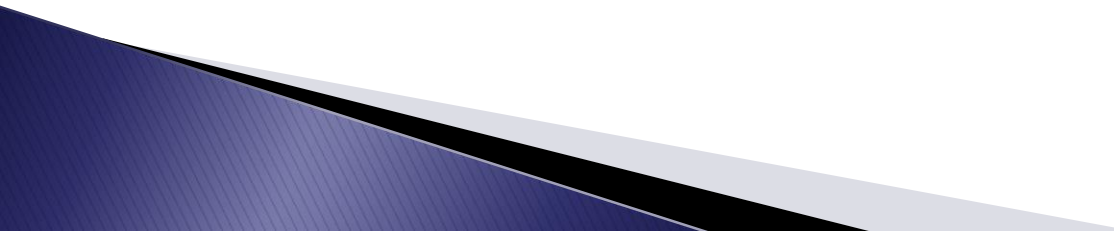
# Life experience

▶ “I was brought up a Catholic, errr , wasn’t  
Until I sort of became a free thinker as I got older  
and began to question rather than it just being errr  
force fed.... (Nick: CPN RAID)

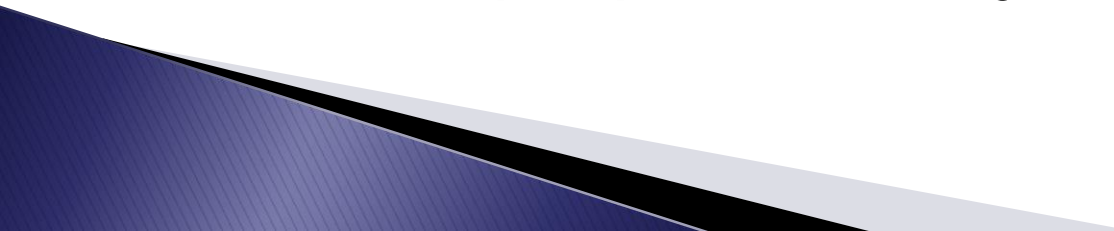
“ My family were devout Methodists. My mother  
died when I was 9 and the last place she when  
before she went into hospital was bloody chapel  
event though she was dying at that point. It was  
something she had to do” (Joe)

“Your family are massive in finding meaning and  
purpose in your life” (Isabel: Forensic inpatient)

# Professional attitudes

- ▶ “You get a vibe about what’s acceptable and what’s not and the different ways that people work” (Ann: Insight team)
  - ▶ Some (nurses) are more forthright than others in dismissing ideas that some people (other nurses) might have (Brendan: Substance misuse)
  - ▶ “My experience of colleague and mandatory training is that spirituality is presented almost wholesale as religion (Ben: CPN adult)
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# What is spirituality?

- ▶ “The obvious is religion but I think it’s more to do with your ethos or philosophy of life” (Harry: AOT)
  - ▶ “Spirituality to me is like something that everyone carries with them and individual and unique to the sort of person they are” (Freya: Adult acute inpatient)
  - ▶ “I would say it’s anything that a person finds meaningful... I don’t think I could define it any more than that” (Isabel: Secure care)
  - ▶ “In my experience it means different things to different people. It’s not just a religious thing”
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# Impact on service user

- ▶ “It’s the worst place ever. Some of the things we are made to do by the organisation, by society. Everyday we are expected to restrain, force medication, section people. It’s horrific” “Half the time we are just experimenting on people. How spiritual is that?” (Emma: Community Therapy)
- ▶ If someone needs time to go to the multi-faith room to reflect or whatever it’s like I’m sorry we don’t have enough staff.” (Dawn: Secure care)
- ▶ “How are we going to squeeze this round peg n to the square hole of services when it’s not what she values, it’s not how she connects with people” (Ann: Insight Team)

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