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Abstract Spirituality

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Title

Nursing spiritually; what do we know? How do we know?

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Abstract

The Office of National Statistics (ONS)(2011), produced figures from the census and shows that here in the United Kingdom (UK) we have a more diverse community than any other country in Europe, contributing to the richness of spiritual understanding. However this diverseness also creates differences of understanding. The last three decades have shown a significant increase in recognising the importance of spirituality and how caring for a person's spiritual needs can have a positive impact on their mental well-being (Narayasamy, 1999; Pesut et al., 2007). The Chief Nursing Officers Review (2006) recommended mental health nurses act in response to identified spiritual or religious needs of the individual. However, this is still approached with uncertainty by some nurses who are reluctant to engage with it despite professional requirements to address this aspect of care (McSherry, 2011). Swinton (2006) suggests this reluctance is a fear of imposing their views on a person who is already vulnerable. This may be exacerbated because nurses are often unaware of what constitutes spiritual need and are unprepared to recognise it in others (Castledine, 2005; McSherry, 2011).
Religion and spiritual beliefs particularly in these sensitive times are often difficult topics and coupled with mental health needs may even make it an almost taboo area to address. Serious mental illness often runs hand in hand with diminished capacity, mental health act applications, possessiveness and fixed beliefs which has the propensity of distorting what could actually be an expression of spiritual need (Barker,2004). A mental health nurse may fear misinterpreting the spiritual needs of the service user with symptoms of mental illness which may cause a reluctance to provide spiritual care (Barker 2004; McBrien, 2006). Cohen et al, (2000) states with the absence of a single scientific definition of spirituality, boundaries of providing spiritual and religious care have been blurred. Swinton, (2001) suggests this dichotomy has not helped in terms of how a mental health nurse can provide spiritual care for service users without fear of imposing personal beliefs on them.

The Royal College of Nursing (RCN) (2010) commissioned an online survey to try and establish the understanding and attitudes of nurses towards spirituality as a concept and the provision of spiritual care. The findings of the mixed method analysis revealed that despite nurses recognising spirituality as a fundamental aspect of nursing care, many of the respondents felt that they in turn needed support and education to enable them to feel confident in providing it. However the study did not differentiate the responses in relation to the fields of nursing.

This presentation will highlight the progress so far on the research I am currently facilitating as part of a Professional Doctorate, which is; an exploration of mental health nurses' understanding of spiritual needs of service users. One of the outcomes of the research is to consider how mental health nurses may be educated and supported to identify and address spiritual needs and improve the service user experience.

1. To evaluate how providing spiritual care is currently facilitated in nurse education
2. To discuss how different this is in terms of mental health nurse education

3. To consider how pre and post-reg M/h nurses may be educated in supporting spiritual needs of service users whilst practicing the principles of the '6 C's'

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