Chapter 17

Spiritual Needs: Spiritual Caring and Religious Differences

Chapter 17

Lesson 17.1

Learning Objectives

1) Differentiate between spirituality and religion.
2) Identify the difference between the spiritual and emotional dimensions of individuals.
3) Discuss the practical/vocational nurse's role in providing spiritual care to the patient and the family.

Learning Objectives (cont'd)

4) Discuss nursing interventions that can be used to meet the spiritual needs of patients.
5) List members of the health care team who can help provide spiritual care for patients.
6) Discuss personal religious and/or spiritual beliefs, or the absence of them, and how these beliefs will influence nursing practice.

Spirituality and Religion (p. 211-212)

- Spirituality has to do with experience.
- Religion has to do with giving form to that experience.
- Spirituality focuses on what happens in the heart.
- Religion tries to make rules and capture that experience in a system.

Spiritual Dimension vs. Emotional Dimension (p. 212)

- Spiritual dimension—refers to the relationship of a person to a higher power and gives insight into the meaning of life, suffering, and death
- Emotional dimension—refers to how a person responds to and deals with feelings of joy, anger, sorrow, guilt, remorse, love, etc.

Importance of Spiritual Care (p. 212)

- Involves helping patients develop awareness of and maintain the following:
  - Inner strength
  - Self-awareness
  - Life's meaning and purpose
  - Relationship to others
  - Relationship to a higher power

Who Needs Spiritual Care? (p. 212)

- Patient situations that may intensify the need for spiritual care
  - Hospitalization
  - Patients who are in pain
  - Patients who have a chronic or incurable disease
  - Patients who are dying
  - Families who have experienced the death of a loved one
  - Patients who are facing an undesirable outcome of illness, such as an amputation
  - Patients who have lost control of themselves

Gathering Data for Spiritual Issues (p. 212)

- First Step
  - Providing spiritual care for patients is to strive to be personally comfortable with spiritual matters.
- Second Step
  - Become aware of your own spirituality and the spirit that is the essence of you.

Meeting the Spiritual Needs of Patients and Their Families (p. 213)

- Ask questions
- Show interest
- Listen with an understanding attitude
- Respond naturally to spiritual concerns
- Help patients face reality with hope
- Encourage patient’s active involvement
- Allow families to participate in care
- Avoid false assurances
- Be supportive and empathetic with the dying

Spiritual Care Interventions (p. 213)

- Ask open-ended questions
- Actively listen, make eye contact
- Be nonjudgmental
- Avoid giving advice or lectures
- Avoid trying to change a person’s beliefs
- Be aware of the patient’s nonverbal messages
- Understand the patient’s feelings

Spiritual Care Interventions (cont'd) (p. 213)

- Expect to learn from patients
- Stay with the patient after unfavorable diagnosis
- Pray with the patient if asked
- Read to the patient if asked
- Assist with the patient's participation in religious/spiritual rituals
- Protect the patient's religious/spiritual articles

Pastoral Care Team (p. 213)

- Made up of ministers, priests, rabbis, consecrated religious women, representatives of other religious organizations, and laypersons
- Educated to meet spiritual needs, in addition to religious needs, in a health care setting

Personal Religious and Spiritual Needs (p. 214)

- Spiritual Practices
- Religious Rituals and Practices
- Atheists and Agnostics
- Spiritual Distress

Patients' Spiritual Practices (p.214)

- Help individuals develop awareness of self, understanding of the meaning and purpose of life, and their relationship to a higher power
- Examples
  - Gardening
  - Reading inspirational book
  - Listening to music
  - Meditating
  - Watching select TV shows and movies
  - Communing with nature

Religion and the Patient (p. 214)

- The religious self refers to the specific beliefs held by an individual in regard to a higher power
- Religious Denomination
  - An organized group of people who share a philosophy that supports their particular concept of God or a higher power, as well as worship experiences
- Agnostics
  - Hold the belief that the existence of God can be neither proved nor disproved
- Atheists
  - Do not believe that the supernatural exists, so they do not believe in God
- Christians may find comfort and solace in their refuge in God, including passing into another life after death

Value of Rituals and Practices (p. 214)

- Rituals are a series of actions that have religious meaning
  - Bring the security of the past into a crisis situation
  - Concrete symbols such as pictures, icons, herb packets, rosaries, statues, jewelry, and other objects can affirm the patient's connection with a higher power
- The value of patients' rituals and religious practices is determined by their faith

Patient and Prayer (p. 214)

- Prayer is a spiritual practice of some individuals whether or not they are members of an organized religion
  - Can put a patient in touch with a personal God
  - Can decrease anxiety as effectively as a drug
  - Helps some patients cope with their illness or situation

Question 1

Which amendment of the U.S. Constitution guarantees the free exercise of religion?

1. First
2. Second
3. Third
4. Fourth

Question 2

Which of the following is the oldest faith that has a belief in one God?

1. Buddhism
2. Judaism
3. Christianity
4. Islam

Chapter 17

Lesson 17.2

Learning Objectives

7) Discuss the general beliefs and practices that account for the differences among various Western, Middle-Eastern and Eastern religions, philosophies, and groups in the United States and Canada.

8) Describe nursing interventions/considerations of patients of various religions, philosophies, and groups.

Who Is the Religious American? (p. 214)

- Hindu
- Jew
- Buddhist
- Muslim
- Lutheran
- Catholic
- Eastern Orthodox
- Quaker
- Presbyterian
- Methodist
- Church of Christ
- Mennonite
- Seventh-Day Adventist
- Assembly of God
- Mormon
- Baptist
- Wiccan
- Jehovah’s Witness
- Episcopalian
- African Methodist Episcopalian
- Christian Science
- United Church of Christ
- Moravian, Evangelical
- Salvation Army
- Nondenominational

Religion in the United States (p. 215)

- 2000 Religious Congregations and Membership Study conducted
  - All Protestant denominations accounted for 66 million members
- 2005 Yearbook of American and Canadian Churches
  - Identified the Catholic Church as the largest single denomination in the United States with over 67 million members
- The World Christian Encyclopedia
  - 5.6 million Jews comprise the largest non-Christian, organized religion
- World Christian Encyclopedia
  - Identified 4.1 million Muslims

Avoiding False Assumptions and Stereotypes (p. 215)

- It is a false assumption to expect that all individuals of a specific religion or belief system will believe exactly the same just because they are members of that religion or belief system.
- Individual differences occur within every religious or belief systems group.
- Clarify with the patient the specific beliefs and practices that offer comfort to them, and are preferred by them.

Judaism (p. 215-216)

- The oldest of faiths that have a belief in one God
- The holy books of the Jews are the Torah and the Talmud
- Jewish clergy are called *rabbis*
- Worship in buildings called *temples* or *synagogues*
- Major divisions
  - Orthodox, Conservative, and Reformed

Christianity (p. 216-219)

- General beliefs of Christians
  - The Bible is the sacred book of Christians
  - Baptism is the rite of admission to the Christian community
  - Communion is partaking of consecrated (blessed) elements of bread and wine

Christianity (cont'd) (p. 219-220)

- Major divisions of Christianity
  - Catholicism
    - Western
    - Catholics of Eastern Rites
    - Orthodox Eastern Churches
- Protestantism

Islam (p. 220-222)

- Followers of Islam are called Muslims
- Muslims believe in one God, Allah
- Qur'an (Koran) is the holy book, contains the words of Allah as he spoke to Muhammad
- Believe in paradise, hell, final judgment, prayer, fasting, and giving to the poor
- Two main divisions
  - Sunni and Shi'ite sects

Hinduism (p. 223-225)

- Based on a vast body of scriptures, including the Vedas and the Bhagavad-Gita
- More a way of life than a religion
- Belief in reincarnation
  - One is reborn to a higher or lower level of existence based on one's moral behavior in the prior phase of existence

Buddhism (p. 225)

- A religion, a philosophy, and a way of life
- Much of Eastern beliefs have evolved from Buddhism
- Originated in India
- Spread to China, Japan, Korea, Tibet, Burma, Sri Lanka, Laos, Cambodia, and Vietnam.
- As it spread, the core beliefs were adapted to the culture of the host country.

Nursing Interventions for Eastern Religions/Philosophies (p. 225)

- Develop awareness that not everyone sees the world as you do
- Avoid stereotyping individuals and considering them all the same

Question 3

You are admitting an Amish patient. Which of the following is true regarding Old Order Amish?

1. They worship in churches.
2. They believe in health insurance.
3. They believe in social security.
4. They rely on mutual aid in time of need.

Question 4

Kristy is taking care of a Jehovah's Witness patient. All of the following are true regarding Jehovah's Witnesses except:

1. they refuse to take whole blood products, including plasma.
2. communion occurs once a year.
3. cremation is unacceptable to them.
4. they believe the Second Coming has begun.

Question 5

Gabrielle has delivered a stillborn baby. She is Catholic and requests that you baptize the baby. You should do all of the following except:

1. baptize the baby as requested.
2. allow water to flow over the stillborn while stating, “I baptize you in the name of the Father, the Son, and the Holy Spirit.”
3. report the baptism to the pastoral care team and family.
4. do not document it in the chart, as this is not the baby’s chart.