

# Introducing a spiritual care training course and determining its effectiveness on nursing students' self-efficacy in providing spiritual care for the patients

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## ABSTRACT

**Introduction:** How to train nurses to provide spiritual care, as one of the basic competencies of nursing, based on patient's perception and culture has been considered highly important. Although nurses' training is recommended in this area, few researches have studied the format of such programs. This study is conducted with the aim of introducing the training course of spiritual care and determining its effectiveness on nursing students' self-efficacy in providing spiritual care. **Materials and Methods:** The method of this study was of a pre-post interventional research. Senior students ( $n = 30$ ) of the Shahrekord University of Medical Sciences, passing the training course in the field, were chosen as the studied sample. Study intervention was the implementation of the designed curriculum based on nursing books, focusing on providing the spiritual care for patients. The dependent variable of the study was the students' self-efficacy feeling in providing spiritual care to the patients. A researcher-made questionnaire, as well as the pre-post interventional tests, was used, then, to assess this variable. By means of Statistical Package for the Social Sciences software, data were analyzed, and the level of significance was considered at  $P < 0.05$ . **Findings:** The findings of the study showed that self-efficacy mean score of nursing students in providing spiritual care in the pretest was 13.74, showing the average level of perceived self-efficacy. The students' self-efficacy mean, after participating in the training spiritual care programs, however, changed to 21.1, indicating the increased level of self-efficacy. Results of paired  $t$ -test, also, showed that self-efficacy mean score of the study samples has significantly increased in the posttest, compared with the pretest. **Discussion and Conclusion:** According to these findings, it can be concluded that based on this designated curriculum, students have a chance of getting acquaintance with some concepts as: Spirituality and spiritual care, identifying the spiritual needs of patients, and designing a care plan to meet these requirements. These factors, therefore, have a great impact on students' effectiveness in providing spiritual care for patients.

**Key words:** Curriculum, nursing students, self-efficacy, spiritual care

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## INTRODUCTION

The World Health Organization has defined health as a complete physical, mental, emotional, social, and spiritual welfare. Systematically studying the conducted researches in the field of spirituality in nursing care shows that spirituality is what all people are concern about; in that, they consider it as an internal peace and strength, which is due to perceived relationship with God as an infinite power. Love, believing in God, hope, trust, and wish are the dimensions of spirituality which give meaning to life and are the reasons for the individual's existence, especially when the individual is faced

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with stresses, physical illness, or death. Uniquely defined by every individual, spirituality is highly influenced by every individual's culture, evolutionary level, life experiences, beliefs, and the values of life. The concept of spirituality begins to shape from the childhood and develops throughout the adulthood. Spirituality encompasses the totality of the individual and has control over mental, physiological, and socio-cultural dimensions.<sup>[1]</sup> Spirituality enables people to deal with the stressors of everyday life and help them to have a sense of peace, hope, faith, and comfort. Key elements of spirituality, being mentioned in different texts are as: Spiritual health, spiritual needs and spiritual awareness. Not only would the spiritually healthy people experience pleasure in their life, but also they would be able to forgive both themselves and the others. They, also, would accept difficulties and death, experience the increased quality of life, and have positive feelings toward their physical and emotional health.<sup>[2]</sup> While suffering from illness and stressful experiences, patients may face with a challenge and denial of spiritual beliefs; thus, their spiritual beliefs need to be reinforced. That is when care and spiritual support, provided by the nurses, seems to be very valuable. What health nursing focuses on is taking holistic and comprehensive care of the patients so as to meet the every need of them in a different healthcare environment. Florence Nightingale has emphasized the importance of spiritual care and its integration with other sorts of caring program.<sup>[3]</sup> Spiritual tension is a nursing diagnosis, causing a sense of loneliness. Recent studies have shown that patients with chronic or life-threatening diseases are suffered, more, from spiritual tension. They are consistently looking for the meaning of life and hope. This issue is due to uncertainty, vulnerability, disappointment, fear, depression, loss of one's roles and identity in life, and fear of death; whereas, it is the spirituality which gives meaning to life, illness, and even death.<sup>[4]</sup> What recent studies have shown is that the period of illness, choice of treatment, relationship with the family, and quality of healthy life are, all, highly affected by spirituality.<sup>[4]</sup> It is, also, confirmed by numerous studies that spiritually supporting the patient has a great impact on the quality of caring and life satisfaction.<sup>[5-9]</sup> Concerning the cancer patients, studies have shown that as the patients' spiritual healthy are reinforced, their mental health and clinical symptoms<sup>[10]</sup> as well as their emotional adaptations would get better.<sup>[2]</sup> Furthermore, cancer is less common among religious people, probably due to performing well at their health behaviors.<sup>[11]</sup> Therefore, spirituality has not just been considered as a coping mechanism; rather, it has been regarded as a dynamic and active response which has positive psychological impact on dealing with illness and stress in life.<sup>[2]</sup> In a number of studies, spiritual needs have been reported by patients. Patients did expect to be asked about their spiritual needs during the treatment.<sup>[4,5,12,13]</sup> Therefore, these are the nurses who have a vital role in helping patients to overcome this tension. By creating a healing environment and reinforcing spiritual health of the patients, the nurses can help patients to get better. These are, hence, the nurses who are in a key position to help the patients to reevaluate the life and achieve spiritual health. According to recent studies,

there are some evidences proving that this purpose, however, is not well-achieved and that is due to the lack of awareness among nurses about spiritual dimensions as the merging part of holistic nursing care, inadequate preparation of nurses in providing spiritual care for the patients during the education, negative attitude toward providing spiritual care, ambiguity about the roles of the nurses in providing spiritual care, and the lack of necessary competence in nurses for submitting this aspect of care to the patient.<sup>[1,14-18]</sup> Other studies also have reported the negligence of nurses in providing spiritual care. The reasons would be because of lack of time, inadequate feelings of nurses in providing spiritual care, and lack of receiving appropriate training in this field.<sup>[1]</sup> It is one of the essential competences for nurses to be trained on how to provide spiritual care according to the understanding of the patient and cultural factors. Although nurses' training is recommended in this area, few researches have been conducted to check out the format of learning. Davison reported in his paper that Pesut, in 2008, had investigated the contents of 10 books of nursing principles and pointed out that these books could be used as a starting point to introduce spirituality and spiritual care of the patients to the nursing students. Nursing educators, therefore, must provide for students the opportunity to assess their spiritual consciousness. They should help them to overcome the inconvenience of discussion on spirituality with the patients.<sup>[3]</sup> In spite of being as one of the significant competences of nursing, spiritual care has not, yet, being trained appropriately and even, it has been ignored to some extent.

This study has been conducted with the objective of "introducing the training course of spiritual care of the patient and determining its effectiveness on nursing students' self-efficacy in providing spiritual care to the patients."

## MATERIALS AND METHODS

This research was of a kind of pre-post interventional study. The intended samples were consisted of 30 nursing students in the 8<sup>th</sup> semester passing the clinical course. The study focused on the implementation of designed curriculum based on nursing books. The contents of the books were as: Understanding spirituality and spiritual care, being aware of spiritual tension during the illness, identifying the spiritual needs of patients as well as the psychological theories about stress and compatibility, identifying opposing spiritual strategies to be used by the patient during the illness, being aware of the spiritual needs and opposing spiritual mechanisms, designing holistic caring programs, providing spiritual needs for patients during the health nursing period, and studying about the effect of ethical issues on spiritual care. In order to perform the study, necessary allowance was obtained from the ethics committee of the Vice Chancellor for Research of the Shahrekord University of Medical Sciences.

In pretest stage, the students, at first, were asked to provide a holistic nursing process from the patients with chronic illness and submit it to the relevant teacher. Then, the

researcher-made questionnaire for evaluating the nurses' self-efficacy, once providing spiritual care, was completed by the students as the pretest. Validity of the questionnaire was determined by content validity along with a survey with the nursing faculties. Its reliability was, also, confirmed using Cronbach's alpha coefficient as 0.81. The research was performed in three stages. In the first stage, which was during the four sessions of 2 h, they were trained about the concepts of spirituality, spiritual tension, how to evaluate spiritual needs of the patient, the theories of psychological stress and compatibility, how to evaluate the patients' opposing mechanisms, the effect of ethical issues on spiritual care. They also were trained about how to design nursing process to solve spiritual tension. During these four sessions, the following teaching and learning methods, also, were used as: Speech, heuristic techniques such as brainstorming, analysis of spiritual stress scenarios, discussion in small groups, share of personal and clinical experiences and deep thinking exercises.

The second stage was practical and was conducted at the patient's bedside. The students had done a holistic assessment of the patient by attending at the bedside of cancer patients and patients with chronic diseases. Since the dependent variable in this study was the students' sense of self-efficacy in providing spiritual care for the patients, the main objective at this stage, hence, was to assess the spiritual health of the patients and to prepare the nursing process to provide spiritual care. It was expected that once passing the first stage, the students could assess their capabilities in evaluating and planning the spiritual care to patients. In order to examine the degree of spiritual health care of the patients, the spiritual health assessment criterion was used. Content validity was provided by the survey from the faculty members. Each student designed a care plan based on the learned contents in the classroom for the patient under his/her care.

In the third stage, the students participated in the fifth session of the training in small groups. They discussed about their prepared care plans. In the end, all of the nursing processes were handed over to the instructor. Then, as the posttest, the researcher-made questionnaire for evaluating self-efficacy of nurses in providing spiritual care was, again, completed by the students. The questionnaire contained eight statements based on the five-part Likert's scale from none to completely (from a minimum score of 0 to a maximum of 32). Its validity was determined through content validity and surveying from 15 members of nursing faculties. Its reliability was achieved by using Cronbach's alpha coefficient of 81%.

Statistical Package for the Social Sciences (SPSS version 16, Inc., Chicago, IL, USA) software. as well as descriptive statistics (mean and standard deviation) and inferential statistics (paired *t*-test) were used to analyze the data. The significance of data was considered as  $P < 0.05$ .

### Findings

The majority of people being studied in this research were female (21 females and 6 males) with the average age

of 21 years. Based on Kolmogorov–Smirnov's test, it is concluded that in both pre- and post-tests, there was a normal distribution. The mean score of nursing students' self-efficacy in offering spiritual care in the pretest was found to be 13.74, indicating that the perceived self-efficacy of students was between the low to moderate level. The mean score of students' self-efficacy, however, after students' participating in the training program raised to its high level to 21.1. What being resulted from the paired *t*-test is that the mean score of the samples' self-efficacy in the posttest significantly increased, compared with the pretest [Table 1].

## DISCUSSION

The findings of the present study showed that once passing the spiritual care training courses, the nursing students could remarkably increase their self-efficacy in providing spiritual care for patients. Before the intervention, the mean score of the students' feelings of efficacy, in the pretest, was in the range of low to moderate; whereas, following the intervention, it raised to its high level. It indicates that the students' perception of their own self-efficiency, before the intervention, seemed to be in the low to moderate level, but as long as passing the training courses, they found themselves more able to understand the concept of spirituality and spiritual health, to evaluate the spiritual needs of the patients, to identify the appropriate nursing diagnoses, to plan to provide spiritual care for patients, to evaluate the effects of the training program so as to decrease spiritual tension, and hence, to promote the spiritual health of the patients. Meanwhile, it had been confirmed by the studies that in spite of being as one of the topics of the nursing curriculum, spiritual care training had not been highly taken into consideration by the educators.

This problem caused the nurses' lack of familiarity with the concept of spiritual care and their lack of preparation in providing spiritual care for the patients.<sup>[15,19,23]</sup> No specific study has been done to show the effect of spiritual care training on the self-efficiency of nurses; however, a few studies have been conducted to indicate the positive effect of this type of training on other components as: The nurses' attitude, performance, and competence.

For example, van Leeuwen *et al.*, have studied about spiritual care training program including the concepts of spirituality, spirituality in the nursing process, communicating skills with patients with an emphasis on assessment of spiritual needs of the patient, and deep thinking on the personal experience about spiritual care at bedside of the patients. By using a researcher-made questionnaire, they, then, reported

**Table 1: Comparison of the mean and SD scores of self-efficacy of the nurses in pre- and post-tests**

Statistical indicator	Mean	SD	T	P
Before pretest	13.74	5.41	-7.6	<0.001
After posttest	21.11	2.56		

SD=Standard deviation

the positive effect of such programs on the competence of 97 nursing students in providing spiritual care for patients in The Netherlands.<sup>[24]</sup> The study of Vlasblom *et al.*, has, also, confirmed the positive impact of spiritual care training course on Dutch nurses' competence in providing spiritual care by using the patients' reported experiences about how receiving spiritual care by nurses. The Nurses, themselves, also have reported a positive change in their attitude, knowledge and clinical practice in providing spiritual care, after participating in the training program.<sup>[25]</sup> Baldacchino, by checking-out the nursing students' experiences after the passing the spiritual care training courses, has reported the willingness of the students to participate in this course and the positive impact on these courses on the individual attitudes, professional attitude as well as scientific knowledge.<sup>[17]</sup> One of the important factors to apply what being learned is the nurses' sense of self-efficacy. Not only can the spiritual care training courses, based on previous studies, have an effect on the attitude, competence, and scientific knowledge of students or nurses, but also, according to the results of this very study, it can increase the sense of self-efficacy amongst nursing students. Some studies, as well, have shown that short-term trainings courses could be effective in creating a sense of self-efficacy in reinforcing the nurses' communicative and careering skills, having compatibility with results of the present study.

For example, by means of a researcher-made questionnaire, Raica *et al.*, in a quasi-experimental study have reported the positive impact of an inter-professional relation training course on promoting the sense of self-efficacy of nurses in communicating with doctors.<sup>[26]</sup> Mullan and Kothe's study in Australia has also shown that once taking part in a 2 weeks training course, the nurses' social relationship have highly improved, focusing on communication skills by having presentation and discussion in small groups and interacting with simulated patients.<sup>[27]</sup> It, also, has been proven by the study of Larsen and Reif that a short-term inter-cultural care training courses, focusing on the competence of the students, have had a positive impact on improving self-efficacy feelings of students in providing inter-cultural care.<sup>[28]</sup> It, also, has been proven by Jordan and Church<sup>[29]</sup> that socio-mental activities have had a great impact on the nursing students' self-efficiency feeling. Considering the importance of a holistic approach in caring the patients with dementia, nursing students, during a 45 min class, had bedside caring practices.<sup>[3]</sup> Although this study did not evaluate the impact of the training program on the actual performance of nursing students in providing spiritual care to the patients, Baldacchino wrote that one of the problematic issues in caring is the feeling of nurse in being unable to perform the care.<sup>[17]</sup> Meanwhile, Mendes *et al.*, has acknowledged that learning how to provide spiritual care could be led to the positive self-efficacy feelings in nurses for submitting this aspect of care.<sup>[17,30]</sup> This point, also, can be found in the words of Louis and Alpert saying that there is a positive correlation between the perceived ability of nurses during the spiritual care training and their actual ability for providing spiritual care in real clinical environments.<sup>[31]</sup> In the present intervention, after passing the spiritual care training

course in four sessions of 2 h, the students experienced the actual performance in considering and understanding spiritual needs of the patient and providing a care plan to meet these needs in a real clinical environment. Then, their performance was reviewed and discussed in group. It should be considered that the reported feelings of self-efficacy by the students in the posttest have been due to the received feedback of their performance at bedside. After the intervention, having a high level of self-efficiency, the students were satisfied with their own ability to perform spiritual care for the patients. They felt that they had acquired the needed ability for providing spiritual care for the patient. Therefore, the provided content, during the training sessions, and the applied methods of teaching and learning in this study made them to be successful in conveying spirituality concepts and creating the feeling of preparation to identify the spiritual needs of the patients and to provide spiritual care.

## CONCLUSION

In order that nursing students can have more efficiency in providing spiritual care to the patients, their taking spiritual care training courses seems to be necessary. During such courses, the students are taught about the concepts of spirituality, spiritual care, how to identify spiritual needs of patients, and accordingly, how to meet these needs. They, then, have the opportunity to evaluate their performance in a real clinical environment and to discuss about it.

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