

## **Project Title**

Effects of Spiritual Care Education on Nurses' Knowledge of Spirituality and Spiritual Care

## **Project Lead and Members**

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## **Organisation(s) Involved**

National University Hospital; Ang Mo Kio- Thye Hua Kwan Hospital; Alice Lee Centre for Nursing Studies, Yong Loo Lin School of Medicine, National University of Singapore

## **Aims**

To assess nurses' knowledge and perceptions regarding spirituality and spiritual care before and after spiritual-care education in an acute care hospital

## **Background**

See poster appended/ below

## **Methods**

See poster appended/ below

## **Results**

See poster appended/ below

## **Conclusion**

See poster appended/ below

## **Project Category**

Care & Process Redesign, Healthcare Training & Education

**Keywords**

Care & Process Redesign, Healthcare Training & Education, Applied Research, Nursing, National University Hospital, Ang Mo Kio- Thye Hua Kwan Hospital, Alice Lee Centre for Nursing Studies, Yong Loo Lin School of Medicine, National University of Singapore

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# Effects of spiritual care education on nurses' knowledge of spirituality and spiritual care

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## BACKGROUND

- Spirituality is an important aspect of human health. Accordingly, caring of patients' spiritual well-being is important regardless of age group and illnesses.
- Spiritual care enables patients to better face and cope with their health issues.
- Nursing staff in the wards spend most of their time providing bedside care.
- Recognizing spiritual needs and appropriate spiritual care are important.
- Studies reported varied
  - spiritual care understanding and provision among different settings.
  - spirituality understanding amongst healthcare professionals.

## AIM

The study aimed to assess nurses' knowledge and perceptions regarding spirituality and spiritual care before and after spiritual-care education in an acute care hospital.



## RESULTS

- Response rate for nurses who completed all three surveys at different time interval for this study was 86.25% (n=138) (Table 1).
- In general the nurses had positive attitudes and accepting spirituality and spiritual care as part of nursing care.
- The mean total Spiritual Care-Giving Scale scores from pre-workshop to one month after the workshop were 162.41 (SD=17.70), 182.62 (SD=18.85) and 176.49 (SD =18.38) respectively out of a total score of 210
- There were statistical significance in the nurses' perceptions of spirituality and spiritual care before, immediately ( $p < 0.05$ ) and one month after ( $p < 0.05$ ) attending the educational workshop.
- Significant relationships were observed between nurses' spirituality and spiritual care with ethnicity, gender and age group.

## METHODS

<b>Study design</b>	A quasi-experimental research design
<b>Setting</b>	Singapore acute care hospital
<b>Sample</b>	Nurses from the general wards
<b>Intervention</b>	Attend education workshop
<b>Data collection instrument</b>	<ul style="list-style-type: none"> <li>• Well-validated 35-item Spiritual Care-Giving Scale (SCGS)</li> <li>• The SCGS uses a 6-point Likert scale with responses ranging from one (strongly disagree) to six (strongly agree).</li> <li>• SCGS is developed in an ethno-culturally diverse Asian society</li> <li>• Cronbach's alpha was 0.86 and with test-retest reliability was at (<math>r = 0.811</math>).</li> </ul>
<b>Data collection</b>	Self reported questionnaire 1.Pre-training 2.Immediately post training 3.One month after training
<b>Ethics</b>	Study approval obtained from the National Healthcare Group Domain Specific Review Board

## CONCLUSION

- Providing Spiritual Care educational workshop improved nurses' attitudes, knowledge and perceptions of spirituality, thereby enhancing holistic patient care.
- The study revealed that the multi-ethnic nursing staffs viewed spirituality and spiritual care as significant and necessary.
- As this study did not explore the type of support to reinforce nurses' spiritual care knowledge and application, future in-depth studies might be required.
- Recommendation for future studies include exploring how nurses provide spiritual care to patients in the wards

## TABLES

Table 1: Demographic Of The Participants Attended Education (N=160)

Demographic	n (%)	Before education		Immediate after Education		One month after education	
		N=160				n=138	
		F	p	F	p	F	p
<b>Gender</b>							
Male	8(5.0)	6.460	.012	4.077	.045	2.672	.105
Female	152(95.0)						
<b>Age (years)</b>							
21-30	102(63.8)	2.298	.105	3.599	.030	.619	.540
31-40	39(24.4)						
41-50	19(11.9)						
<b>Ethnicity</b>							
Chinese	76(47.5)	5.736	.000	3.502	.009	3.470	.010
Malay	12(7.5)						
Indian	11(6.9)						
Filipino	45(28.1)						
Others	16(10)						
<b>Marital Status</b>							
Single	105(65.6)	1.770	.174	1.644	.197	.192	.825
Married	51(31.9)						
Others	4(2.5)						
<b>Years Of Experience (Nursing)</b>							
< 5	83(51.9)	2.072	.130	2.327	.101	3.012	.053
6 to 10	49(30.6)						
≥11	28(17.5)						
<b>Faith-based groups</b>							
Buddhism	27(16.9)	2.146	.078	1.560	.188	.435	.783
Christianity & Roman Catholic	82(41.3)						
Islam	16(10.0)						
Hinduism	7(4.4)						
Others	28(17.5)						
<b>Attend religious/spiritual care activities</b>							
Yes	73(45.9)	8.402	.004	.000	.989	.854	.357
No	86(54.1)						
<b>Provide spiritual care activities</b>							
Rarely	89(56.0)	8.552	.000	.070	.932	2.748	.068
Occasionally	54(34.0)						
Frequently	16(10.1)						

Statistically significant when  $p$  value < 0.05

Table 2: Spiritual Care Giving Scale (SCGS)

Factor:	Before education and Immediately after education		Before education and one month after education	
	t(df)	p	t(df)	p
I.Spirituality Perspectives	-12.14(148)	.000	-6.61(129)	.000
II.Attributes for Spiritual Care	-9.81(154)	.000	-9.54(134)	.000
III.Defining Spiritual Care	-10.01(148)	.000	-6.03(128)	.000
IV.Spiritual Care Values	-13.80(157)	.000	-8.87(134)	.000
<b>Total Score</b>	-12.75(133)	.000	-8.55(117)	.000

Two-tailed paired sample t-test, statistically significant when  $p < .05$

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