

Journal of Kerman University of Medical Sciences https://jkmu.kmu.ac.ir i10.34172/jkmu.2023.32 Vol. 30, No. 3, 2023, 199-200

Short Communication



Spiritual Care or Caring Spiritually?

Akram Heidari¹⁰, Seyed Hasan Adeli^{1,2}, Morteza Heidari^{1,3*}

¹Spiritual Health Research Center, Qom University of Medical Sciences, Qom, Iran ²Department of Internal Medicine, School of Medicine, Qom University of Medical Sciences, Qom, Iran ³School of Health and Religion, Qom University of Medical Sciences, Qom, Iran

Citation: Heidari A, Adeli SH, Heidari M. Spiritual care or caring spiritually? *Journal of Kerman University of Medical Sciences*. 2023;30(3):199-200. doi:10.34172/jkmu.2023.32

Received: November 15, 2022, Accepted: January 3, 2023, ePublished: June 26, 2023

any healthcare providers have come to an understanding of the need for addressing the spiritual dimension of human beings. From a holistic view, human beings are first and foremost spirits and should be regarded as a whole, not merely their bodies (1). Contrary to the notion of looking at patients as cases of a disease occupying hospital beds and subject to different drugs or medical interventions, patients are more and more being recognized as humans who should be considered as a whole, including physical and spiritual dimensions that correlate with and influence each other. In view of the spiritual dimension overarching other dimensions of human beings (2) and the spiritual distress faced by many patients, the healthcare system should take care not to disturb the spirituality of patients but rather try to enhance and improve it (3). Spiritual care, in this way, can improve the effectiveness and quality of care services through reform in professional care by addressing spiritual needs as a part of holistic care (4).

Spiritual care or caring spiritually

To meet patients' spiritual needs, some healthcare institutions have recruited specialized personnel as chaplains or pastoral care providers (5). This approach to spiritual care is mainly targeted toward patients with particular needs including end-of-life care, critical care patients, or palliative care (6). With the recognition that every human being has spiritual needs, it seems necessary to extend spiritual care coverage to include all patients. This could be accomplished through integrating spiritual care and incorporating it with all healthcare processes, which requires the engagement of all healthcare providers. The appropriate attention of healthcare professionals to spirituality as a dimension of their professional activities requires a degree of capabilities and competencies of healthcare providers regarding spiritual care (7). The competencies encompass not only

a set of knowledge and skills but also all factors necessary to perform the expected tasks with excellence, including attitude, emotions, and motivation. Thus, a main part of the competencies of healthcare providers lies in the inner motivation, which comes from the personal spirituality of healthcare providers and is a significant determinant of effective spiritual care (8). In other words, those who are comfortable with their own spirituality are more likely to provide care spiritually. Therefore, the departure point in any movement towards spreading and consolidating spiritual care is the spirituality of healthcare providers, as it has been embodied in the charter of spiritual care for patients (9). This denotes that to radiate and spread spirituality to others, one should be blessed with spirituality, whereas the exchange between patients and healthcare providers could strengthen the spirituality of both parties. Within a culture of improved spirituality of healthcare providers, all the care is provided embedded with spirituality (10); therefore, there is an atmosphere of caring spiritually spread throughout the health centers.

Consequences of providing care spiritually

Healthcare embedded with spirituality is the embodiment of holistic care, and thus is an improved level of healthcare. Caring spiritually leads to different consequences associated with patients, healthcare providers, and the healthcare delivery system.

Patients: Caring spiritually is a means of promoting patient satisfaction. Patients, as a result of meeting their spiritual needs, confront less distress and find more empathy and compassion, and consequently, a higher quality of life (11).

Healthcare providers: It improves the inner spirituality of the care provider, which in its own way, leads to different consequences, including inner peace, transcendence, satisfaction, and improved professional performance. Moreover, spirituality prevents despair and





Figure 1. Consequences of providing spiritual care with religious attitude for spiritual care providers

disappointment in the cases of unsuccessful endeavors, and less burnout is followed (Figure 1).

Healthcare delivery system: Caring spiritually leads to better performance in the healthcare delivery system. The provision of services will be less affected by the unfavorable conditions of service providers and more stable. Caring spiritually is helpful in stressful, critical, emergency situations (12) that require acting beyond duty. It is also a means of avoiding conflict of interest and demonstrating proper professional behavior, especially with poor quality monitoring and unfavorable organizational conditions.

In conclusion, to provide optimum healthcare, it is needed to be delivered with a spiritual approach. In order to do so, spiritual attitude and motivation are required, and this should be taken into account in healthcare and medical education institutes.

Authors' Contribution

Conceptualization: Akram Heidari, Seyed Hasan Adeli, Morteza Heidari.

Data curation: Akram Heidari, Morteza Heidari.

Funding acquisition: Morteza Heidari.

Investigation: Akram Heidari, Seyed Hasan Adeli, Morteza Heidari. Project administration: Morteza Heidari.

Software: Morteza Heidari.

Supervision: Seyed Hasan Adeli.

Writing-original draft: Akram Heidari.

Writing-review & editing: Akram Heidari, Seyed Hasan Adeli, Morteza Heidari.

Competing Interests

Ethical Approval

The authors declare that there is no conflict of interest.

Not applicable.

Funding

This study was funded by the National Agency for Strategic Research in Medical Education. Tehran, Iran. Grant No. 972424.

References

- Ghorbani M, Mohammadi E, Aghabozorgi R, Ramezani M. Spiritual care interventions in nursing: an integrative literature review. Support Care Cancer. 2021;29(3):1165-81. doi: 10.1007/s00520-020-05747-9.
- 2. Heidari A, Yoosefee S. The relationship between spiritual health and other dimensions of health: presentation of a model. Health Spiritual Med Ethics. 2016;3(2):38-41.
- Afaghi Roveshty M, Shirinabadi Farahani A, Memaryan N, Rassouli M. Effect of spiritual care on hope and selftranscendence of mothers of premature neonates hospitalized in the neonatal intensive care unit. Iran J Neonatol. 2020;11(4):106-13. doi: 10.22038/ijn.2020.42178.1700.
- Baldacchino D. Spiritual care education of health care professionals. Religions. 2015;6(2):594-613. doi: 10.3390/ rel6020594.
- 5. Doehring C. The Practice of Pastoral Care: A Postmodern Approach. Presbyterian Publishing Corporation; 2014.
- Gijsberts MHE, Liefbroer AI, Otten R, Olsman E. Spiritual care in palliative care: a systematic review of the recent European literature. Med Sci (Basel). 2019;7(2):25. doi: 10.3390/ medsci7020025.
- Kalkim A, Sagkal Midilli T, Daghan S. Nursing students' perceptions of spirituality and spiritual care and their spiritual care competencies: a correlational research study. J Hosp Palliat Nurs. 2018;20(3):286-95. doi: 10.1097/ njh.000000000000446.
- Malik S, Riaz N, Nazir S. Personal spirituality and work attitudes among doctors. J Behav Sci. 2015;25(1):136-49.
- Heidari A, Kazemi A, Abbasi M, Adeli SH, Ahmari Tehran H, Eskandari N, et al. Developing a charter of spiritual care for patients. Int J Qual Health Care. 2021;33(1). doi: 10.1093/ intqhc/mzaa172.
- Pirkola H, Rantakokko P, Suhonen M. Workplace spirituality in health care: an integrated review of the literature. J Nurs Manag. 2016;24(7):859-68. doi: 10.1111/jonm.12398.
- Rassouli M, Zamanzadeh V, Ghahramanian A, Abbaszadeh A, Alavi-Majd H, Nikanfar A. Experiences of patients with cancer and their nurses on the conditions of spiritual care and spiritual interventions in oncology units. Iran J Nurs Midwifery Res. 2015;20(1):25-33.
- Willemse S, Smeets W, van Leeuwen E, Nielen-Rosier T, Janssen L, Foudraine N. Spiritual care in the intensive care unit: an integrative literature research. J Crit Care. 2020;57:55-78. doi: 10.1016/j.jcrc.2020.01.026.

© 2023 The Author(s); Published by Kerman University of Medical Sciences. This is an open-access article distributed under the terms of the Creative Commons Attribution License (https://creativecommons.org/licenses/by/4.0/), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.