To Capture Personnel Spiritual Belief of the Nursing Students

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The meaning of spirituality and spiritual care among nurses is culturally constituted and influenced by many factors such as the nurse's ethnic background, religious affiliation, level of education and clinical experience. Spiritual care is a recognized field in nursing (Bald acchino 2006) and an element of quality nursing care (Mc Even 2005). Many scientific studies have shown that when meditation and chanting is done in groups it has more benefits than when done individually. (Dr. K.K Aggarwal, 2017).

Keywords: *spiritual belief, lived experience, nursing students.*

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Strictly as per the compliance and regulations of:

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The meaning of spirituality and spiritual care among nurses is culturally constituted and influenced by many factors such as the nurse's ethnic background, religious affiliation, level of education and clinical experience. Spiritual care is a recognized field in nursing (Bald acchino 2006) and an element of quality nursing care (Mc Even 2005). Many scientific studies have shown that when meditation and chanting is done in groups it has more benefits than when done individually. (Dr. K.K Aggarwal, 2017)

Method: This study capture lived spiritual experience of 50 self selected nursing students who identified spiritual belief and needs in patient using a phenomenological approach data is collected by five open ended question through Interview schedule. Participants were first Year nursing student's novice to profession, studying the diploma course in nursing was chosen as the study sample.

Results: Analysis of the data indicated that spiritual experiences could occur in a range of four themes-Spiritual beliefs, providing spiritual care, meeting Spiritual needs and emphasis of spiritual initiative into Nursing Education could be triggered by catalysts such as nature or newness, evoked responses including awe and appreciation, and led to outcomes of connection, awareness, growth and freedom.

Conclusion: In the present study, the nursing student had shown acceptance towards spiritual health and understanding the experience of spiritual belief in nursing students can help to improve the comfort level in meeting patient needs and has impact on quality patient care.

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I. Introduction

Spirituality is the untying life four biological psychological and social components which include or exclude the religious component according to individual belief system (Baldacchino 2010). Spirituality is not alternative medicine. If demonstrate sensitivity to an integral part of the whole person, a part that exists independently from consideration of Health and Illness (Dara E. King). Spiritual development is an ongoing continuous component of overall learning.

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Chung Wangschan 2007 agrees that research exploring nursing students' preparations and perceptions of education in the spiritual health are rare. Spiritual development is an ongoing, continuous component of overall learning. The identification of a student's spiritual perspectives is part of the educational journey and contributes to holistic personal development.

Langdridge (2007) defines phenomenology as a discipline that "aim to focus on people's perception" of the world in which they live in and what it means to them; a focus on people live experience. She further clarifies that phenomenology as a qualitative method focus on human experience as a topic in its own right. It concern with meaning and the way in which meaning arise in experience.

II. Purpose

This study is to capture the personnel spiritual belief of the nursing students.

III. Material & Method

Design: This study capture lived spiritual experience of 50 self selected nursing students who identified spiritual belief and needs in patient using a phenomenological approach participants were first Year nursing student's novice to profession, studying the diploma course in nursing was chosen as the study sample.

Instrument: A data sheet was designed to collect information on participant's demographics including age, gender, educations, Religious, Occupation, Personal Habits and Source of Information. And To capture nursing student's personal spiritual belief on the basis of open ended questionnaire with time period- 15 minutes.

The interview will be video type and transcript and based on following five open ended questionnaire. (Table 1)

Table 1: Focus group questions

S.No.	Questions
1.	Would you briefly describe your spiritual belief?
2.	How do you engage in any religious rituals that support your nursing activities? Attendance at spiritual place Spiritual reading temple/ church Meditation Prayer
3.	Describe some instances of providing spiritual care for patient care like showing empathy. Praying with a patient (and/ or family), praying for a patient (and/ or family), listening to a patient talk about his or her pain.
4.	How do you make it sure that you meet your patient spiritual needs
5.	Would you comment on how much emphasis was placed on spiritual care for patients and families thus far in your nursing education? Please explain.

a) Data Collection method and Analysis

The majority of studies on spiritual belief of nursing students are quantitative: thus the researcher saw a need to examine the issue from a richer qualitative perspective. To capture a true understanding of unique experiences of the spiritual belief of nursing students experienced during their nursing education, the researcher presumed it was important to hear directly from them. Prior to data collection institutional review board approval was obtained from institutional authorities. Participants then were recruited and focus group are scheduled on each institutions to make attendance more convenient for the participants.

Using a phenomenological approach, the study revealed complex descriptions of spiritual experiences where individuals simultaneously felt, acted, thought and were aware. The interview has 5 open-ended questions developed to evoke students' responses. Interviews were conducted until saturation was met. The research question guiding this phenomenological study was: Do the spiritual beliefs of nursing students' affect their comfort level in meeting their patients' spiritual needs? Interviews were conducted at a time convenient for participants. Interviews were conducted in an uninterrupted quiet conference room and lasted 60-90 minutes. All gave permission to be video recorded. When notes were taken, they were transcribed as soon as possible after the interview to ensure accuracy. A digital video recorder was used and the data from the interviews were transcribed verbatim. Transcriptions were reviewed against the video recording to verify the accuracy of the transcribed text. The researcher analyzed the data by first reading the transcripts several times to obtain understanding and feeling of the experience.

All video recordings are transcribed. Lines of text were numbered. Once the transcription is completed, the researcher read it while viewing the recording and done the following: corrected any spelling and other errors; numbering of the respondent is done. Inserted notations for pauses, laughter, looks of discomfort; inserted any punctuation, such as commas and full stops (periods), and included other contextual information that have affected the participant (e.g., temperature or comfort of the room).

Dealing with the transcription of a focus group was slightly more difficult, as multiple voices are involved. The focus group had 2 facilitators, whose respective roles will help in making sense of the data. While one facilitator guided participants through the topic, the other made notes about context and group dynamics.

b) Reading between the Lines

During the process outlined above, the researcher can begin to get a feel for the participant's experience of the phenomenon in question and can start to think about things that could be pursued in subsequent interviews or focus groups (if appropriate). In this way, one participant's narrative informs the next, and the researcher can continue to interview until nothing new is being heard.

Data analysis revealed themes that were present in the experiences shared by the participants. These themes displayed an in-depth description of the phenomenon. Four themes emerged from the data analysis that described the students' experience assessing and providing spiritual care to their patients: (a) spiritual beliefs, (b) providing spiritual care (c) meeting spiritual needs and (d) Emphasis of Spiritual initiative into Nursing Education in assessment.

Verification was achieved through adhering to the phenomenological method, conducting a literature search, bracketing past experiences of the researchers, using an adequate sample, identification of negative cases, and interviewing until saturation of data was achieved. Validity was achieved by having the research based on trustworthiness and external reviews.

Phenomenology allows researchers to describe "the common meaning for several individuals of their lived experiences of a concept or phenomenon" (Creswell & Poth, 2018, p.75) and is an appropriate approach to understand the lived experiences of spiritual belief of nursing students. Additionally,

phenomenological focus groups have the advantage of enriching the data "as a result of participants reflecting on and sharing their experiences" (Bradbury-Jones et al., 2009, p.667).

A phenomenological analysis of the interview transcripts was conducted to develop a textural description of the experiences of the participants (what they experienced), a structural description of their experiences (how it was experienced in terms of the conditions, situation or context) and a combination of the textural and structural descriptions to convey an overall essence of the experience. The process was cyclic, as each stage built on its predecessor in all cases. Specifically, following psychological phenomenologist guidelines, the systemic data analysis can be summarized as follows:

1. The first step in the data analysis process was reading each interview transcript separately to get an overall sense of the participants lived experiences. All interviews were read several times until a sense of immersion in the material had been obtained

2. Meaning units ("significant statements" or quotes that provided an understanding of how the participants experienced the phenomenon) were highlighted and identified by line by line reading. This method enabled insights to be conceptualized by asking the following questions: "What processes and meanings are evident in each line, sentence and paragraph? How, when and why are they conveyed? In what context does each theme arise?"

3. Meaning units were integrated into core themes, reflecting a higher level of abstraction and allowing for comparison between different texts.

4. The themes were examined to find connections and interrelations. Themes were then clustered to construct a description of the participant's experience. The process of analysis was concurrent with data collection, constituting a cyclic process that involved continual reflection.

IV. Result Analysis Framework

Analysis of the data indicated that spiritual experiences could occur in a range of four themes-Spiritual beliefs, providing spiritual care, meeting Spiritual needs and emphasis of spiritual initiative into Nursing Education (Table 2).

Table 2

Theme	Subtheme	Quote
Spiritual Belief	Would you briefly describe your spiritual belief? How do you engage in any religious rituals that support your nursing activities" Attendance at spiritual place Spiritual reading temple/church Meditation Prayer	"Strongly belief of almighty and believed extreme spirituality & going to temple" –Respondent No. 1 & 6 "Mediation gave me satisfaction" "Spiritual person will be always health" –Respondent No. 2, 5 & 7
Providing Spiritual Care	Describe some instances of providing spiritual care for client/patient care like showing empathy. Praying with a patient (and/or family), praying for a patient (and/or family), listening to a patient talk about his or her pain.	"Met a handicapped person when 15 years old near temple he was sad but he was relaxed when singing prayers" –Respondent No. 4 "Relived the pain of the patient and called doctor" –Respondent No. 5 "Can save the life of patient by giving spiritual care" –Respondent No. 6 "If patient demand to pray before taking medicine & I allowed him to take medicine." I met a 15 years old boy in medicine ward whose case of chronic renal failure (both kidney were affected). She prayed and provided spiritual need to family and her mother agreed to give kidney to her son" –Respondent No. 15 "Empathy towards patient problem & need" –Respondent No. 47& 48 "Spiritual needs of sick and need of critical care person" –Respondent No. 44 & 49 "Assess the spiritual need of surgical patient" –Respondent No. 37
Meeting Spiritual	How do you make it sure that you	"Singing By prayers & Meditation"

| Needs | meet your patient spiritual needs.

Would you comment on how much emphasis was placed on spiritual care for patients and families thus far in your nursing education? Please explain. | –Respondent No. 1, 2 & 3
"No idea of spiritual need"
–Respondent No. 16 & 18
 talking politely was meeting spiritual need"
–Respondent No. 50
"Young lady died at the age of 20 years left her one year child & prayer for her baby and look after as he was sick"
–Respondent No. 20
Relieved the pain of patient suffering from spiritual need to be met for patient near to death"
"Pain was relieved by meeting spiritual need in hemorrhage patient." -Respondent No. 42 |
| Emphasis of Spiritual initiative into Nursing Education in assessment (By adding Spiritual History) | | "Deeply commented & recommended spiritual curriculum in Nursing Education" –Respondent No. 1
"Emphasis on spiritual needs"
"Emphasis on spiritual care as it make health professional more responsible and can have more health outcome"
"How much spirituality can add up in nursing education" – Respondent No. 11
"Fully emphasis on Nursing Education"
–Respondent No. 12
"Politely speaking to god"
–Respondent No. 22
"Through spirituality family members can be communicated" –Respondent No. 9 |

V. Discussion

In the present study four themes were identified - *Spiritual beliefs, providing spiritual care, meeting Spiritual needs and emphasis of spiritual initiative into Nursing Education* by using the phenomenological approach which was supported by the study by Belinda Deal (2010) on Nurses' Experience of Giving Spiritual Care in which five themes were identified: spiritual care is patient-centered, spiritual care is an important part of nursing, spiritual care can be simple to give, spiritual care is not expected but is welcomed by patients, and spiritual care is given by diverse caregivers and also supported by a study by Cone and Giske (2013), explored teachers' understanding of spirituality, and how to prepare undergraduate nursing students to recognize spiritual cues, and learn to provide spiritual care and found that 'Journeying with Students through Maturation' resolved their main concern. This involved raising awareness of the essence of spirituality, assisting students to overcome personal barriers, and mentoring students' spiritual care competency.

VI. Limitations

The primary limitations of the study were the difficulty in capturing the real spiritual experiences and dealing with the transcription of a focus group was slightly more difficult, as multiple voices are involved.

A potential additional limitation is that researchers are educators at the institutions where the study was conducted. This raises the issue of power between researchers and participants (Creswell & Creswell, 2018), so it is possible that participants felt uncomfortable disclosing their feelings about their experiences in the nursing program.

VII. Implications and Conclusion

The finding of this study added to the limited body of knowledge on spiritual health in order to assess the need of the patient and strongly emphasized on integration of spiritual curriculum in nursing education. Although few of the themes that emerged in this study are specific for the nursing students, mostly the themes are applicable to the general nursing professionals in rendering clinical and community setting care.

In the present study, the nursing student had shown acceptance towards spiritual health and interest in meeting the spiritual needs of the patients. Spiritual care is an integral part of nursing as documented by Kociszewski (2003). To maintain the balance between the academic and clinical practice, having the curriculum on spirituality is an additional help. The study clearly shows that the spiritual experiences could occur in a range of four themes-Spiritual beliefs, providing spiritual care, meeting Spiritual needs and emphasis of spiritual initiative into Nursing Education could be triggered by catalysts such as nature or newness, evoked responses including awe and appreciation, and led to outcomes of connection, awareness, growth and freedom and overall the study concluded a positive experience of spiritual belief of the nursing students.

Acknowledgment

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Conflicts of Interests
The authors declare that there are no conflicts of interest

Data availability statement
The data that support the findings of this study are available from the corresponding author upon reasonable request.

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