

**Faith and Discovery**  
July–December 2023 Vol:1, Issue:2  
ISSN(p): 3007-0643  
ISSN(e): 3007-0651

## **ROLE OF SPIRITUALITY IN HEALTH CARE**

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**ABSTRACT:** With the development of multi-disciplinary approach in different domains of life the distance between spirituality and health is gradually disappearing and their relationship is becoming more significant with the passage of time. It is true not only for mental but also for physical health. Various methodologies are used to achieve mental and physical health. When these were used with the support of spirituality it gives more positive results. To understand and discuss this subject the more relevant areas are; the relationship, distance and differences between Spirituality and psychiatry, the fundamental principles of spirituality that can be effective and useful for Health, Spirituality and effective psychotherapy and the role of spirituality in the treatment of different diseases, especially mental illness. The spirituality, especially spiritual beliefs and practices have impact and significance in curing in the illness and other stressful conditions of medical as well as psychiatric patients. The spiritual tradition of East especially Muslim Spirituality indicates that the effects of spirituality have been functional in Emotional, Physical and Social domains of life.

Spiritual traditions, beliefs and practices are also considered effective for curing diseases. These include both medical and psychological illnesses. In such situations of life when one feels under pressure, spirituality helps as a force. Research shows that people who are more spiritual have better mental health and those who are less spiritual are more likely to suffer from health problems. Spirituality influences treatment outcomes in mental illnesses and other problems. (Rosmarin, et al, 2020: 300)

With the development of multi-disciplinary approach in different domains of life the distance between spirituality and health is gradually disappearing and their relationship is becoming more significant with the passage of time. It is true not only for mental but also for physical health. Various methodologies are used to achieve mental and physical health. (Hartz, 2005: 93)

When these were used with the support of spirituality it gives more positive results. To understand and discuss this subject at least following four areas are more relevant:

1. The relationship, distance and differences between Spirituality and psychiatry
2. The fundamental principles of spirituality that can be effective and useful for Health
3. Spirituality and effective psychotherapy
4. The role of spirituality in the treatment of different diseases, especially mental illness

The relationship between spirituality, spiritual behaviour and health has been established by many researches which cover various of its dimensions. The research in the area of religion, public health, psychiatry, psychology, counselling, nursing, social sciences

medicine and rehabilitation support and appreciate the role of spirituality in health. These research findings discuss the essential role of spirituality and reinforce its integration in the mechanism of curing patients to provide high quality cure for achieving health. (Puchalski, 2001: 352–357)

The spirituality, especially spiritual beliefs and practices have impact and significance in curing in the illness and other stressful conditions of medical as well as psychiatric patients. The spiritual tradition of East especially Muslim Spirituality indicates that the effects of spirituality have been functional in:

- a. Emotional,
- b. Physical and
- c. Social domains of life.

If the practices of spirituality are used in accordance with its defined discipline, it can deliver to mental health as well as physiological well-being. It can also decrease the risk of diseases and enhance the outcomes of treatment (Udermann, 2000: 194–197).

Before heading towards discussion of effects of spirituality in treatment of diseases, it is important to highlight and discuss the practical implications of integrating the spirituality with clinical practice. This fact cannot be ignored that the temperament, mental approach and the atmosphere which constitutes the emotional, intellectual and physical background of the patient is much important for treatment of his medical or psychological illness. (Koenig, 2012) If spirituality is a part of such background then the spiritual needs of the patient cannot be left unaddressed. The unaddressed spiritual urges and needs can complicate the diseasing condition of the patient. Resultantly the medical, social and physical measures may lose their effectivity in the process of treatment (Garcia-Navarro, 2022: 227).

The relationship between spirituality and health is growing rapidly and spirituality is now part of the mainstream of health. Physicians must be aware of how to integrate spirituality into patient care practices to provide better health care. That is, an ideal method of treatment is the one in which the whole personality of the patient, i.e. body, mind and spirit, is given priority in the health care of the patients. (Smolowe, et al, 1982:155)

When we consider spirituality to be effective in treating patients, it is important to be aware of its clinical implications that may affect the way patients are treated.

It should always be kept in mind that whether the patient is suffering from medical illness or mental illness it is always indispensable to fulfill his spiritual needs. If the psychological needs of medical and psychiatric patients, or even the general public, are neglected, the problems they face can become more complex. When spiritual needs are neglected, especially when they are part of illness, it can adversely affect the patient's health and increase the rate of mental, physical or social diseases. (O'Brien, 2014: 4)

Research shows that spirituality affects a patient's ability to cope with illness. Generally, the majority of hospitalized patients use religion to help them cope with their illnesses. If the treatment regimen is not comprehensive, it can have adverse effects, which can increase the patient's hospital stay and increase the mortality rate. (Holland, 2015: 159)

Spiritual beliefs influence patients' medical decisions, may conflict with medical treatments, and may affect compliance with those treatments. Studies show that spiritual beliefs influence medical decisions in people with serious medical illness and especially in those with

advanced cancer or HIV/AIDS. (Kelly, et al, 2022:125-134)

Physicians' spiritual beliefs influence their medical decisions and affect the type of care they provide to patients, including decisions about pain medication, abortion, vaccinations, and contraceptive use. (Korup, et al, 2019)

Spirituality is associated with both mental and physical health and potentially influences clinical outcomes. If so, health professionals need to know about such effects, just as they need to know whether a person smokes or uses alcohol or drugs. Health care providers need to be aware of all the factors that affect the patient's health and health care. (Lucchetti, et al, 2019: 155)

Research shows that failure to address patients' spiritual needs increases health care costs, particularly toward the end of life. This is when patients and families may demand medical care that is too expensive even when continuing treatment is futile. In such a situation, the patient or the family may be praying for a miracle. If health care professionals do not take a patient's spiritual history so that the patient/family feels comfortable discussing such issues openly, not only the patient but also the patient's family may suffer from problems due to use due to indefinite length of treatment and costly medical resources. (Koenig, et al, 2017)

Health professionals should therefore take a brief spiritual history of the patient. This should be done for all new patients at their first diagnosis, especially if they have serious or chronic illnesses, and when a patient enters a hospital, nursing home, home health agency, or other health care setting. The goal is to learn about the patient's religious background, spiritual beliefs or practices that play a role in coping with illness (or cause suffering), beliefs that may influence decisions about

medical care. are, or may conflict with, the patient's level of participation in the spiritual community and whether the community is supportive, and any spiritual needs that may exist. It is the health professional, not the clergy, who is responsible for this two-minute “screening” assessment. If spiritual needs are identified, the health professional will refer to animal care services to meet the needs. The spiritual history (and any spiritual needs that are addressed by chaplain services) should be documented in the medical record so that other health professionals know that it has been done. Although the notes do not need to be detailed, enough information should be recorded to alert other hospital staff of necessary problems. (Canfield, et al, 2016:206–11)

Spiritual beliefs of patients revealed during spiritual history should always be respected. Even if the beliefs contradict the medical treatment plan or seem strange or pathological, the health professional should not challenge the beliefs (at least not initially), but adopt a neutral approach. And ask the patient questions to gain a better understanding of the beliefs. Challenging patients' spiritual beliefs is almost always followed by patient resistance, or silent noncompliance with the medical plan. (Sessanna, et al, 2011:1677–94) Instead, the health professional should consult a chaplain and either follow their advice or refer the patient to a chaplain to deal with the situation. If the health professional is aware of the patient's spiritual beliefs and the beliefs appear to be generally healthy, however, it may be appropriate to actively support those beliefs and to adjust the health care provision to accommodate the beliefs. (Berg, et al, 2013: 24–7)

Without spiritual education, most health professionals do not have the skills or training to meet the spiritual needs of patients or provide counselling on spiritual matters, whereas spiritualists have extensive training in this area. This often involves years of study

and experience dealing with spiritual issues. Problems He is a real expert in this field. For any but the simplest spiritual needs, then, patients should be referred to the clergy to resolve the problem. (Best, et al, 2016: 519–31)

The basic ethics of inquiring about a spiritual history or considering spiritual intervention is that it should be tailored to the patient's wishes. A health professional should never do anything spiritual that involves coercion. The patient should feel in control and free to divulge information about their spiritual lives or not or to engage in spiritual practices (i.e. prayer etc.). In most cases, health professionals should not ask patients if they would like to pray with them, but leave the initiative to the patient to request prayer. However, the health professional may inform spiritual patients (based on spiritual history) that they are willing to pray with patients if that is what the patient so desires. (Koenig, 2013) The patient is then free to initiate a prayer request at a later or future visit, should he or she desire prayer with the health professional. If the patient requests then a short help prayer can be said aloud, but quietly, with the patient in a private setting. However, before praying, the health professional should ask the patient what he or she wants to pray for, recognizing that each patient will be different in this respect. Alternatively, the therapist may simply ask the patient to pray but with an approved discipline of spirituality (Narayanasamy, et al, 2008:394-8).

Spiritual beliefs or lack of belief by health professionals should not influence spiritual history taking and patients' spiritual beliefs. It should aim to take care of the patient's spiritual needs and not be dominated by the physician's preferences. If there is a lack of personal spiritual involvement and a lack of appreciation for the importance and value of the spiritual element in treatment, it will be a hindrance

rather than a support for the patient. (Koenig, et al, 2024: 512)

If spiritual needs are identified and spiritual counselling is initiated, also ensure that the spiritual needs are adequately met by the spiritual counsellor. Generally, spiritual needs are unlikely to be met during a short hospital stay. Therefore, a formal plan of spiritual care will need to be developed by the hospital social worker in consultation with the spiritual specialist, which may include liaison with the patient's faith community to ensure that the patient's spiritual needs are being met (Timmins, et al, 2019: 133)

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