This book is dedicated to the many patients, family members, and caregivers, including nurses, physicians, chaplains, firefighters, and police officers, who so generously shared their beliefs and experiences in the hope of clarifying the importance of spirituality in nursing. Some have crossed over to a new life; others continue to live courageously, finding meaning and hope in the experience of illness or in ministering to those who are ill. Their words, quoted extensively in the following pages, are their legacy. I am privileged to be the storyteller.
God called to Moses out of the bush: “Remove the sandals from your feet, for the place on which you are standing is holy ground.”

Exodus 3:4–5

The nurse’s smile warmly embraces the cancer patient arriving for a chemotherapy treatment.
This is holy ground.

The nurse watches solicitously over the pre-op child who tearfully whispers, “I’m scared.”
This is holy ground.

The nurse gently diffuses the anxieties of the ventilator-dependent patient in the ICU.
This is holy ground.

The nurse tenderly takes the hand of the frail elder struggling to accept life in the nursing home.
This is holy ground.

The nurse reverently touches and is touched by the patient’s heart, the dwelling place of the living God.

This is spirituality in nursing, this is the ground of the practice of nursing, this is holy ground!
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In this third millennium, our society is looking more and more to its spiritual traditions and philosophies for understanding, guidance, and comfort. This is witnessed by the fact that the concept of spirituality, encompassing numerous definitions, is being widely explored in such media as books, newsmagazines, websites, and television documentaries. The nursing community, also, has experienced a resurgence of interest in spirituality, especially in relation to the spiritual needs of those who are ill.

The purpose of this text is to explore the relationship between spirituality and the practice of nursing from a number of perspectives, including nursing assessment of patients' spiritual needs, the nurse's role in the provision of spiritual care, the spiritual nature of the nurse–patient relationship, the spiritual history of the nursing profession, and the contemporary interest in spirituality within the nursing profession. The work is undergirded by the author's research in spirituality and nursing over the past three decades. The text's subtitle and theme, Standing on Holy Ground, which describes the nurse's posture in providing spiritual care, was derived from nursing studies of the spiritual needs of chronically and acutely ill adults and children experiencing the sequelae of such conditions as cancer (including leukemia and lymphoma), cardiovascular disease, diabetes, depression, arthritis, Alzheimer's disease, chronic renal failure, and HIV infection and AIDS. The research included both formal and informal interviewing and observing of patients at home as well as in hospital and long-term care settings. The spiritual needs of fragile patient populations—the poor, the elderly, and ventilator-dependent patients in the intensive care unit—were also explored. Data on the spiritual needs and concerns of patients' family members were obtained through interaction with significant others.

In order to expand the database of patient spiritual needs appropriate to nursing intervention, qualitative interviews were conducted with a cadre of contemporary nurses from a variety of clinical backgrounds, including medical–surgical nursing, perioperative nursing, critical care nursing, emergency nursing, community health nursing, psychiatric–mental health nursing, pediatric nursing, gerontological nursing, and parish nursing; the group included nurse clinicians, nurse educators, nurse administrators, and nurse researchers. In addition to providing data on patient spiritual needs, numerous reports of spiritual care provided by practicing nurses were documented. The data derived from patient, family, and nurse interviews are supplemented by materials excerpted from the author's journal maintained both during the research and while serving as a chaplain intern in a research-oriented medical center. Pseudonyms are used in all instances where naming of study respondents is warranted.

The text presents study findings and implications for care in chapters on nurse–patient interaction, the nurse's role in spiritual care, the spiritual needs of acute and chronically ill persons, the spiritual needs of ill children and the families of those
who are ill, the spiritual needs of the frail older adult, spiritual needs in mass casualty disasters, the spirituality of parish nursing, spiritual needs at the end of life, spiritual needs in death and bereavement, the spirituality of servant leadership in nursing, the importance of prayer in nursing, and the spirituality of nurses’ caring behaviors.

In this sixth edition of *Spirituality in Nursing: Standing on Holy Ground*, a new chapter has been added. Chapter 18 presents a lived experience of the spirituality of caring employing the ministry of Catherine of Siena, patroness of nursing, as exemplar. In this chapter, Catherine's tender compassion for the ill and infirm is documented through numerous case study examples of her care for the poor and the marginalized, especially those suffering from such diseases as leprosy and the plague. The relevance of Catherine's nursing ministry for contemporary caregivers is explained.

Chapter 1, “Spirituality In Nursing,” includes a new discussion of “Nursing as a Vocation: The Call to Serve,” and in Chapter 2, “The Spiritual History of Nursing,” both Old and New Testament Biblical roots of nursing are now explored, as well as the role of Jesus, as healer; also described are additional nursing role models in terms of both individuals and nursing communities. These include Florence Nightingale, Catherine of Siena, Patroness of Nursing, Veronica of Jerusalem, the Alexian Brothers Nursing Community, and Mary Breckinridge and the Frontier Nursing Service, among others. The chapter is grounded in the nursing and theological literature, documenting the historical role of the nurse in the provision of spiritual care.

Chapter 3, “Nursing Assessment of Spiritual Needs,” contains a Spiritual Assessment Scale with established validity and reliability, which can be used by nurses in both practice and research. Also included is identification of nursing diagnoses related to alterations in spiritual integrity. Chapter 3 also contains a subsection discussing the impact of contemporary HIPAA (Health Insurance Portability and Accountability Act) regulations on patients’ spiritual and pastoral needs.

In Chapter 4 there is a discussion of the construction of spirituality in nursing theory as well as commentary on the contemporary relevance of nursing theory in practice, research, and education and, in Chapter 6 myriad new literature citations document the value of the nurse's role in spiritual care as well as placing emphasis on this role in undergraduate nursing education. Chapter 8 provides new information on the spiritual needs of the mentally challenged person. Chapter 10 incorporates information describing the long-term care setting of the continuing care retirement community (CCRC), as well as the spiritual needs of CCRC residents. In Chapter 13, “Parish/Faith Community Nursing” a discussion of the recent title change (for some practitioners) from “parish nursing” to “faith community nursing” is explained. Chapter 13 contains information on the latest edition (2012, second edition) of the *Scope and Standards of Faith Community Nursing*, published by the American Nurses Association (ANA) in collaboration with the Health Ministries Association (HMA). Also included are criteria for certification in “Faith Community Nursing” as identified by the ANA and HMA (2014).

Chapter 14 contains descriptions of recent research on the spiritual needs of post-9/11 survivors and witnesses. A new section on spirituality and international terrorism has been added focusing on three recent events: the Boston Marathon Bombings, the Paris Terrorist Attacks, and the Brussels Multisite Explosions. Chapter 15 includes current nursing research on the concept of servant leadership in nursing and health care. Chapter 16 explores the concept of prayer in nursing. Prayer is described
as the catalyst for contemplative nursing; among the topics included are a history of prayer in nursing, finding time for prayer in nursing, and the ethics of praying with patients. Chapter 17 presents a newly developed “Sacred Covenant Model of Caring for Nursing Practice”; the spirituality of caring is explored both broadly and in terms of theory development for nursing practice.

New material and references have been added in all chapters in order to update the concepts in terms of current thinking on spirituality in nursing. Each chapter opens with a quote from a contemporary practicing nurse expressing his or her perceptions and/or experiences related to the spirituality of the nursing profession and the chapter topic.

It is understood that a text dealing with spiritual issues must, to a large degree, be influenced by the personal spiritual and religious élan of the writer. Thus, it is important to acknowledge that the author's Christian philosophy of life inspired, guided, and supported the writing of *Spirituality in Nursing*. Although an effort has been made to include examples of patient spiritual needs, supported by both data and literature, relative to other religious affiliations, the overall orientation of the work is derived primarily from the Judeo-Christian tradition. It is believed, nonetheless, that nurse readers whose spirituality is guided by another religious ethic will find meaning and inspiration in the poignant nursing examples of spiritual care and compassion as well as in the case examples of patients' spiritual needs.
Acknowledgments

The author's loving thanks is extended to the many patients and caregivers, both professional and family, who graciously and generously shared their thoughts and experiences, included in the text, in the hope of helping others who may one day tread a similar path.

Much appreciation must also be expressed to the editorial and production staff of Jones & Bartlett Learning, who have continued to support the work of preparing the revised and updated editions of Spirituality in Nursing: Standing on Holy Ground.

And, finally, my deepest and most abiding gratitude is to God, the source of my strength and the center of my life; to the Father who provides me with the courage and energy to write, to His Divine Son, Jesus Christ, whose care for the ill and infirm provides the model for ministry to the sick and to the Holy Spirit, without whose inspiration and guidance these pages would never have been completed.
Text Credits

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One section of Chapter 3, “Nursing Assessment of Spiritual Needs,” describing the patient spiritual assessment and care mandated by The Joint Commission, has been reprinted from A Nurse’s Handbook of Spiritual Care: Standing on Holy Ground, p. 15, Jones & Bartlett Learning, 2004, used with permission of the publisher.

Major sections of Chapter 4, “A Middle-Range Theory of Spiritual Well-Being in Illness,” have been taken from Chapter 5, “Conceptual Models of Parish Nursing Practice: A Middle-Range Theory of Spiritual Well-Being in Illness,” in Parish Nursing: Healthcare Ministry Within the Church, Jones & Bartlett Learning, 2003, used with permission of the publisher.


Major sections of Chapter 16, “Prayer in Nursing,” were taken from portions of Chapters 1, 3, 4, and 5 in Prayer in Nursing: The Spirituality of Compassionate Caregiving, Jones & Bartlett Learning, 2003, as well as one passage in Chapter 17, “The Spirituality of Caring,” taken from pp. 83–84, in Prayer in Nursing: The Spirituality of Compassionate Caregiving. Used with permission of the publisher.

Major sections of Chapter 18, “A Lived Experience of Caring in Nursing Practice: The Ministry of Catherine of Siena” have been taken from pages 162–188 in Catherine of Siena: A Sacred Covenant of Caring for the Sick, New Priory Press, 2015. Used with permission of the publisher.
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