Spiritual Care – Working Together to Support People in Challenging Life Situations

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Background

Spiritual Care identifies the spiritual dimension as a fundamental component of human health and coping with life. Implementing Spiritual Care in healthcare practice means that all professional groups assume joint responsibility for spiritual support. The pilot project by the University of Witten/Herdecke and Alexianer GmbH explores how Spiritual Care can be sustainably embedded in a complex healthcare system and what impact this has on patients and employees in the facilities. To this end, employees from three selected Alexianer GmbH sites were trained in spiritual/existential care, and the interprofessional integration of spiritual support into the care of stressed, sick, and dying people was scientifically monitored and evaluated.

Aim

Integrating Spiritual Care into routine care: The project explores how Spiritual Care can become a regular part of caring for stressed, ill, and dying people.

Impact of targeted training: It examines whether Spiritual Care training can sustainably strengthen the spiritual awareness and skills of interdisciplinary teams and improve quality of life, well-being, and collaboration.

Methods

The intervention is based on training courses following the curriculum “Spiritual/Existential Care interprofessionell”, comprising 40 teaching units. Its effectiveness is evaluated by accompanying scientific research in a two-phase pre-post design. Standardized survey instruments are used before and three months after the training, both for the training participants and for the people they accompany.

Figure 1: Level of Spiritual Care Competencies Among Trainees

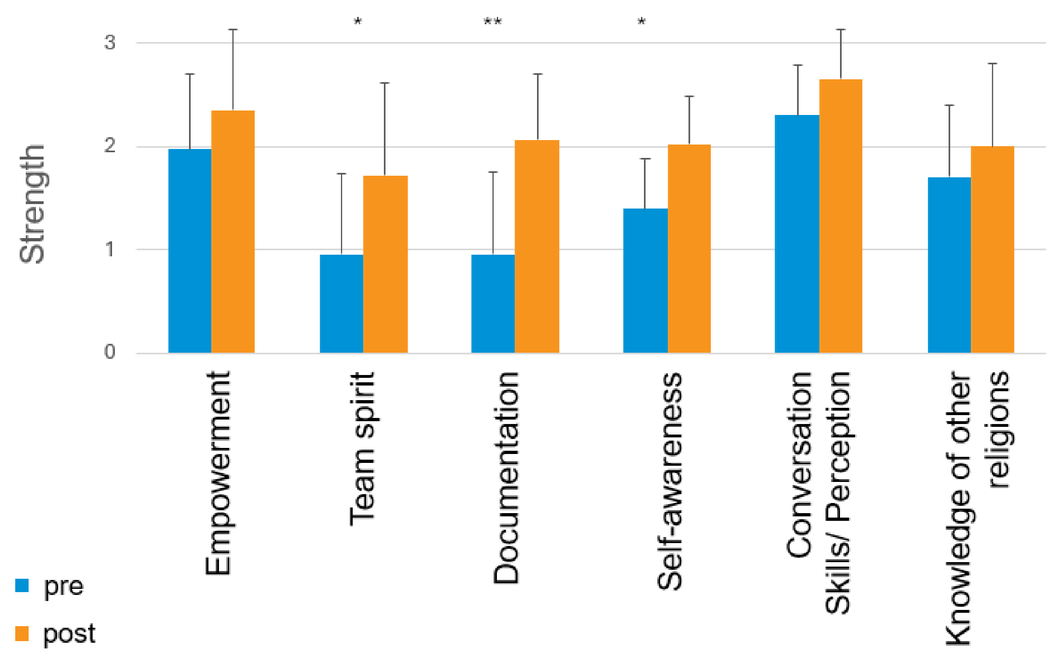

Table 1: Level of well-being among those receiving support

		Well-being (WHO-5)	Support Satisfaction (BMLSS-S)	Spiritual Well-being (FACIT-Sp)			
				Total-Score	Meaning	Peace	Faith
		[0-100]	[0-100]	[0-4]	[0-4]	[0-4]	[0-4]
Pre (n=54)	MW	12,12	73,88	2,57	3,13	2,45	2,11
	SD	6,57	24,43	0,94	1,03	0,96	1,45
Post (n=49)	MW	14,51	79,77	2,69	3,19	2,63	2,23
	SD	6,18	17,89	0,81	0,91	0,89	1,24
Total (n=103)	MW	13,28	76,68	2,63	3,16	2,54	2,17
	SD	6,47	21,67	0,88	0,97	0,93	1,34
p-value		0,063	n.s.	n.s.	n.s.	n.s.	n.s.
Eta^2-value		0,035	0,019	0,001	0,005	0,009	0,002

Results

Training participants:
Sample: 16 pre-training and 15 post-training data sets; 13 women, 3 men, mean age 47 ± 9 years (31–64).

Spiritual Care competencies (→ Figure 1):
- Conversation, perception, and empowerment competencies were already high at the outset; no relevant increases.
- Knowledge of other religions: unchanged.
- Team spirit, documentation, and self-awareness competencies were initially moderate; significant improvements after training (Documentation skills Eta² = 0.390, Team spirit Eta² = 0.182, Self-awareness Eta² = 0.129).

Confidence in addressing spiritual needs:
- 74% would like more time for discussions about spiritual needs.
- 87% discuss spiritual topics significantly more often after training.
- 27% very confident, 67% somewhat confident, 7% unsure when addressing spiritual needs.

Accompanied participants:
Sample: 54 participants (54 pre/49 post); 60% women, 40% men; age 75 ± 17 years (24–103).
Facilities: 53% nursing homes, 14% palliative care, 10% hospice, 24% other.
Health status: moderate (50 ± 16); high stress (58 ± 19).

- Support for spiritual needs: 44% very good, 25%. somewhat, 14% not really, 16% not at all.
- Spiritual needs (0–30): stable (Pre 11.39 → Post 12.08); no significant changes.
- Distress: slight decrease, not significant.
- Well-being (→ Table 1):
  - WHO-5 (0–100): Pre 12.12 → Post 14.51 (p=0.063).
  - Satisfaction with support (BMLSS-S): Pre 73.88 → Post 79.77.
  - FACIT-Sp Total (0–4): Pre 2.57 → Post 2.69.

The results show a slight increase in general well-being following the SpECi training (WHO-5, p = 0.063). Although satisfaction with support (BMLSS-S) and spiritual well-being (FACIT-Sp) remain stable overall, the trend points to positive effects of the improved companion competencies.

Conclusions

- The SpECi training program equips interdisciplinary teams with essential skills in Spiritual Care, resulting in improvements in documentation, team spirit, self-awareness, and increased engagement in conversations about spiritual needs.
- The consistent needs of those receiving care, coupled with a trend toward greater well-being, underscore the program’s effectiveness in enhancing the quality of relationships.