Interdisciplinary Collaboration and Innovative Approaches in Supporting Patients' Spiritual Well-Being in Estonian Nursing Clinics

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Context & problem

- Estonian population is aging, shrinking, and mobile. Due to increased health awareness, improved diagnostic opportunities, and a generally higher standard of living, people are turning more frequently to healthcare providers, and expectations regarding the availability of high-quality healthcare services are also rising. **Higher demands are being placed on quality, safety, and personnel, while financial resources remain limited**. (Arenguseire Keskus, 2020).

- To enhance the **resilience of the healthcare system**, targeted investments are needed in health technology assessment, primary care, and **e-health solutions**. (Praxis, 2020).
- The growing need to provide **Person-Centred** care by **combining the digital health services with more traditional methods**. (Leonardsen, Baath, Helgesen et al, 2023).

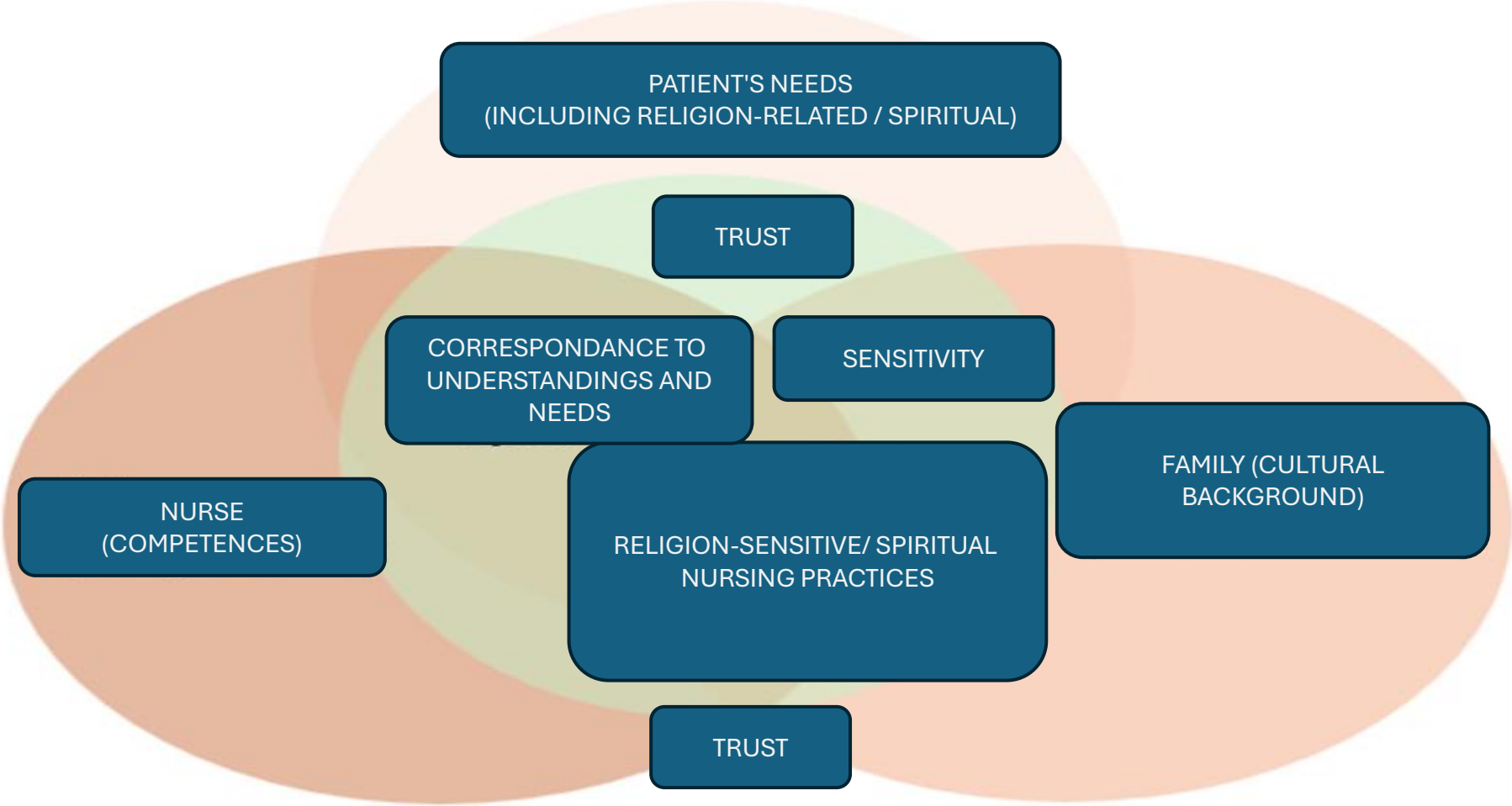
Supporting the different dimensions of patient well-being through modern nursing practices

- Although nurses **are aware** of patients' religion-related needs, this awareness is often not reflected in everyday nursing **practice.**

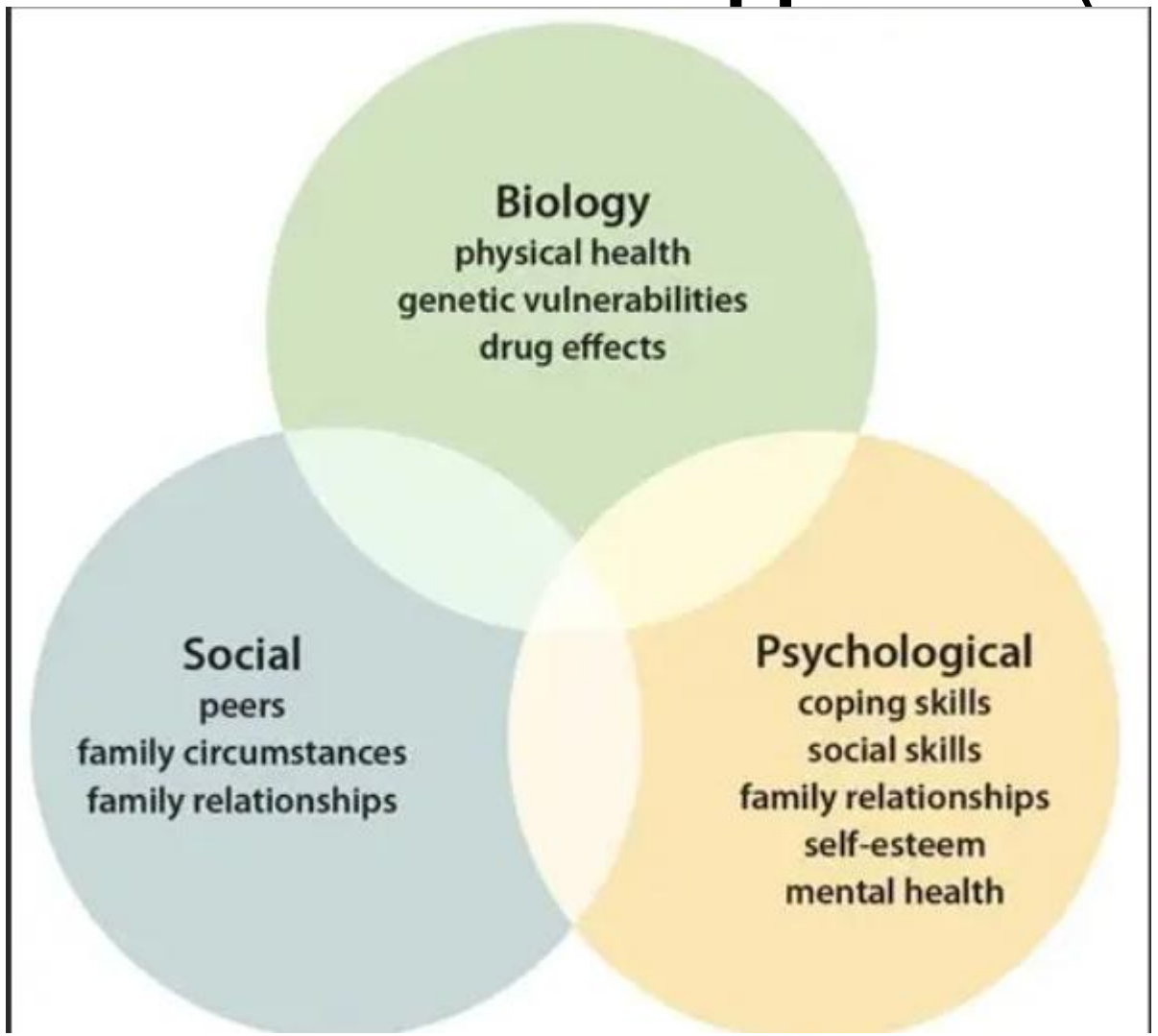
- Research shows that the lack of religion-related **knowledge and training** limits nurses' readiness to provide religious support.

- Supporting the patient's spiritual well-being **requires interdisciplinary cooperation**, particularly between nurses and chaplains.

Framework for religion-related nursing (Bangcola, 2021)



Biopsychosocial & holistic approach (Engel 1977)



Study (2024-2025)

- **The need to study** in detail the religion-sensitive / spiritual nursing practices to support patient's holistic wellbeing was identified in quantitative studies (1999, 2009, 2021) -> the study (2024-2025) by Ülle Ernits (supervised by Dr Kaido Soom) at University of Tartu.

- **The aim** of the qualitative study presented in this paper was to map nurses' experiences and attitudes towards supporting patients' religion-related needs and to assess possibilities for strengthening interdisciplinary cooperation, using the case of one Estonian nursing care clinic.

Empirical data and methods

- Thematic semi-structured interviews were conducted with nine nurses at the Nursing Care Clinic of West Tallinn Central Hospital.

- Participants' work experience ranged from 1.5 to 53 years, and their educational background ranged from vocational training to a master's degree.
- Data analysis methods: thematic analysis.

- Ethical principles. Limitations.

Results

Lack of resources (appropriate rooms, privacy etc) to provide religion-sensitive / spiritual support

Lack of knowledge and skills and organisational (incl managers' awareness and support)

Unclarity of role divisions – who and how should support patients's spiritual wellbeing? And how?

Lack of time

Chaplain's service availability /accessibility for the patients, their relatives and for the staff

Conclusions and Suggestions

- The results show that although nurses notice religion-related needs (e.g. the wish to pray, the valuing of religious symbols, the observance of religious practices), support is often intuitive and based on personal values. The study highlights the need for structured educational programmes, multidisciplinary discussions, and forms of cooperation involving both nurses and chaplains.
- Nurses are willing to integrate the support of religious needs more fully into nursing practice if they have the necessary knowledge and a supportive work environment.
- During the COVID-19 pandemic, spiritual support became predominantly virtual.
- The NANDA taxonomy of religion-related diagnoses can be addressed in greater depth in undergraduate and master's programmes, for example by creating an online course on nursing activities related to religion and on providing support to patients and their relatives.
- At the same time, nurses themselves must also be considered – nursing managers, when guiding the provision of religious care, need to take into account the personal beliefs of nurses. (Kevern, 2012)

Implications to Practice – at TTK

- In the teaching process and in the process of introducing the NANDA taxonomy in hospitals, it is necessary to keep the focus also on the use of spiritual care–related diagnoses.

- The e-course initially intended for midwives is planned to be extended to nurses and subsequently to other curricula.

- In simulation-based learning, a spiritual care dimension should be added to the simulation of nursing activities.

- It is necessary to launch an applied research study to explore the possibilities of interprofessional support, with nurses, chaplains, and social workers acting as providers of support.

An invitation to collaborate with our research group

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References

- Arenguseire Keskus. (2020). Eesti tervisekindlustuse tulevikustsenaariumite lähtekohad.
- Bangcola, A. A. (2021). The development of Spiritual Nursing Care Theory using deductive axiomatic approach. *Belitung Nursing Journal*, *7*(3), 163.
- Engel, G. L. (1977). The need for a new medical model: a challenge for biomedicine. *Science*, *196*(4286), 129-136.
- Ernits, Ü. (2025). (sup) Kaido Soom, Patsientide religiooniga seotud vajadused õendusprotsessis: religioosse heaolu toetamise võimalusi (Patients' Religious Needs in the Nursing Process: Opportunities to Support Religious Well-Being), University of Tartu, Faculty of Arts and Humanities, School of Theology and Religious Studies.
- Kevern, P. (2012). Who can give 'spiritual care'? The management of spiritually sensitive interactions between nurses and patients. *Journal of Nursing Management*, *20*(8), 981-989.
- Leonardsen, A. C. L., Bååth, C., Helgesen, A. K., Grøndahl, V. A., & Hardeland, C. (2023, May). Person-Centeredness in Digital Primary Healthcare Services—A Scoping Review. In *Healthcare* (Vol. 11, No. 9, p. 1296). MDPI.
- Praxis. (2020). Eesti tervisekindlustuse tulevik. Eesti tervisekindlustuse tulevik | Praxis