Spiritual & Existential Care

**Spirituality** is based on the idea that there exists something, be it a state of mind, a being, or a place, that is outside the experience of our five limited senses. Spirituality is broader than religious belief, and can be independent of religion. **Religion** is an organized faith system of beliefs, practices, rituals and symbols designed to facilitate closeness to the sacred, God, high power or ultimate truth. **Existential distress** usually refers to suffering that is not relieved by the treatment of physical symptoms, or that occurs in the absence of such symptoms. Spiritual and existential suffering may be experienced by religious or non-religious persons.

**Spiritual distress** is a disruption in one’s beliefs or value system. It affects a person’s entire being. It upsets the basic beliefs of a person’s life. **Spiritual care** means being attentive to the whole person, including person’s sources of meaning, peace, hope and connection.

**Possible causes of spiritual distress**
- Distance from religious or spiritual community
- Lack of access to religious or spiritual rituals
- Need to reconcile with God, others, self

**Existential distress** or suffering has no clear definition, but is referred to as suffering that is not relieved by treatment of physiological symptoms or that occurs in the absence of physical symptoms. **Existential care** means attending to the distress.

**Possible sources of existential distress**
- The idea of death, loss of will to live
- Fear of a particular health crisis near death
- Alienation, loss of sense of dignity,
- Profound loneliness, intolerable emptiness, sadness
- Loss of meaning

Members of the Hospice/Palliative care team, specifically Registered Nurses or Physicians may do a spiritual assessment by asking certain questions to determine if the person is experiencing spiritual or existential distress. If issues are identified a referral is made to a chaplain or spiritual advisor. Spiritual distress and existential distress are issues that are best handled by a chaplain or spiritual advisor. Chaplains and spiritual advisor have specialized education to provide spiritual care and existential care. Other members of the hospice and palliative team may provide support as directed by the chaplain or spiritual advisor.
Spiritual Assessment – The practice of doing a routine spiritual assessment is a standard of practice and a key component of palliative care and hospice care. Spiritual Tools are to help the healthcare team address spiritual issues. The tools serve as a guide for conversations with the person and the family.

- May be completed by a registered nurse, physician, spiritual advisor, chaplain
- Provides a quick determination if a person is experiencing distress
- Involve short series of questions related to a acronym, such as FICA ©(1) or HOPE
  - F – Faith – “What do you believe in that gives your life meaning?”
  - I – Importance – “How important is your faith to you?”
  - C – Community – “Are you a part of a religious or spiritual community?”
  - A – Address – “How can we assist you in your spiritual care?”
  - H – Ask about sources of hope meaning, comfort, strength
  - O – Ask about affiliation with a organized religion
  - P – Ask about personal spirituality
  - E – Ask about the effects on medical care and end of life

If the person or the family has questions about specific religious issues or voices religious objection to treatment or care it is important to have a chaplain or spiritual advisor involved, sooner, rather than later, to address these issues.

Helpful Ways to Provide Spiritual and Existential Care

- Be aware not everyone has spiritual distress or existential distress
- Be aware that spiritual distress and existential distress requires a response
- Some persons may have specific practices and rituals for end-of-life care related to religious beliefs. It is important to respect and honor those beliefs. Ask the person and/or the family about rituals
- Report your concerns to the healthcare team. Chaplains and spiritual advisor have specialized education to provide spiritual care and existential care
- Provide a calm environment. Check for environment contributors such as noise or lack of privacy
- Provide the person and family with support. This may be listening or being present
- Support the persons beliefs (spiritual/religious) even if different from you own

Other HPNA Teaching Sheets are available at www.HPNA.org

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(1) FICA Spiritual History Tool©

References

Berlinger N. “Spiritual and Existential Care.” Presentation at 5th Annual Clinical Practice Forum, Hospice and Palliative Nurses Association; Sep 16-17, 2011; Pittsburgh, PA.


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