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Spiritual Care: The Nurse's Role (Book Review)

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Spiritual Care: The Nurse's Role, by Sharon Fish and Judith Allen Shelly, InterVarsity Press, 1983, 190 pp., paperback. \$6.95. Reviewed by Aaldert Mennega, Professor of Biology and Director of Pre-nursing Program at Dordt College.

The *Nurses Christian Fellowship* has seen the need for a text on spiritual care, and commissioned this book to be written to help nurses relate to the problems patients may have due to persistent and unresolved spiritual needs that affect their total body function as well as their progress toward normal health.

Chapter 1 deals with "Responsible Nursing," in which three case histories are presented, indicating our need for knowing God as a personal, caring God, and emphasizing that nurses must see the patient as a "physical, psychosocial and spiritual being," a theme re-emphasized throughout the book. A number of study cases are interwoven in the text, making the discussion a very practical one.

In the second chapter, called "What Is Human?," the authors, both Christian nurses, indicate that answers to basic questions about who man is must come from the Bible, which indicates that God requires obedience and dependency from us, but also bestows on us dignity and honor. The authors stress that a person must always be dealt with as an integrated whole, rather than focusing solely on the physical aspect.

The third chapter asks the question, "What Are Spiritual Needs?" The authors indicate that the spiritual needs of people are basically very similar. Each person must have a good relationship with God, others, and self. We must all clearly know that God is in control of all of life, and that we must have an eternal relationship with God through Jesus. The three major needs pointed out are (1) for meaning and purpose (2) for love and relatedness and (3) for forgiveness. "A person who is experiencing God's love is able to see himself as a person of worth. This frees him to love God, himself, and other people" (p. 48). This chapter gives a good idea of what spiritual problems and needs one can meet.

The fourth chapter spends 45 pages on the topic of "Spiritual Needs and the Nursing Process." Because patients are particularly vulnerable during their illness, nurses have a special opportunity to meet their spiritual needs. Nurses are always there, while chaplains and ministers may come at an inopportune time. Nurses have the "responsibility to care for the whole person, including his personal needs" (p. 59).

There are several steps in the nursing process: observing, interpreting, planning, implementing, and evaluating. It is important to focus on a patient's relationship with God. But the nurse herself must also have a positive relationship with God before she can assist the patient in his spiritual needs. *The process in action* (p. 72ff) relates two cases, showing in a practical way how Christian nurses can make a great difference in the life of a patient. At the end of the chapter is a three-page summary of spiritual needs and the nursing process.

"The Use of Self" is discussed in chapter 5. Two quotes will give the essence of this chapter:

In using ourselves therapeutically, we affirm that each patient is a person of value who is worthy of our time and involvement. This requires that we have a degree of self-understanding and a sense of self-worth which come from a relationship with God. (p. 95)

Listening, empathy, vulnerability, humility and commitment—the key elements in the therapeutic use of self—are skills which must be acquired through faith, education and practice. (p. 96)

Chapter 6 talks about "The Use of Prayer." During illness it may be difficult for patients to pray because they feel isolated. It may be helpful to pray for and with patients, but we must know both when and how to pray.

Chapter 7 deals with "The Use of Scripture" in a constructive way. "The Bible can provide hope in crisis and meet spiritual needs because it focuses our attention on a stable, dependable God. . . . It tells us that God the Father is in complete control of the world and that He gives meaning and purpose to all of life, including suffering, old age and death" (p. 120). The chapter discusses both the when and the how of using Scripture.

"Referral to the Clergy" is the title of the eighth chapter. Its essence is reflected in the following statements:

For nurses and the clergy to function together effectively, several conditions must exist. First, there must be the common goal of caring for the whole person. Second, there must be a clear distinction of roles. Third, there must be an open channel of communication. (p. 137)

Nurses are distinct from the clergy in four major areas: (1) availability, (2) involvement, (3) education and experience, and (4) context and authority. (p. 138)

Chapter 9 deals with "The Nurse's Personal Spiritual Resources," indicating that nurses must meet their own needs before they can help others. It states that

Nurses can only continue to meet the needs of other people if their own needs are being met. Unless we are constantly refreshed, spiritual care can be so personally draining that we either collapse in exhaustion or withdraw from the people who need us. (p. 146)

At the end of the book are three appendices. The first discusses the research done with questionnaires and some of the resultant data. It gives insight into the question of nurses entering into spiritual care. The summary of this appendix indicates that

Females verbalize more spiritual needs than males; that the clergyman is the preferred person with whom patients prefer to speak about spiritual needs; that relief from fear of death, a knowledge of God's presence, expression of caring and support from another person, and receiving the sacraments were ranked the four most important spiritual needs by patients; and that patients appreciate

concern and kindness from nurses and desire to be allowed to talk and to be listened to by nurses. (p. 176)

It also includes a list of unpublished master's theses related to spiritual needs of patients.

In the second appendix there is a brief discussion of the origin, development, and purpose of Nurses Christian Fellowship (a department of IVCF). The last appendix is a list of fifteen study guides for nurses, explaining briefly the essence of each.

I recommend this book highly for all those who are involved with health care because it gives good insight into the spiritual needs of those who are ill.

The Translation Debate: What Makes a Bible Translation Good?, by Eugene H. Glassman. Downers Grove, IL: Intervarsity Press, 1981, 133 pp., no price listed. Reviewed by John M. Zinkand, Professor of Greek and Theology.

This is not a book to buy if you want a *Consumer Reports*-type evaluation of the more than seventy English translations of the Bible (or parts of it) which have appeared in this century. There are no "Acceptable" or "Best Buy" ratings in Glassman's handy volume. But Glassman, a translator himself, does provide the tools for do-it-yourself Bible critics to make their own, better-informed judgments.

Translating, we are reminded, is a thankless task, not only because recognition is hard to come by, but because the public is so often more concerned with what is familiar than with knowing the truth. Through the centuries most translators and translations alike have been appreciated only in retrospect.

A notion, popular among Evangelicals (or "Conservatives"), is that a literal translation is to be preferred to a paraphrase. (Some booksellers promote "literal translations" for those ministers who are deficient in the original languages of the Scriptures.) Glassman shows that literal translations are often not worthy of the designation *translation*, and that *paraphrase* deserves to be elevated from its pejorative status. Even the King

James Version includes paraphrastic sections; "God forbid!", found about a dozen times in the KJV New Testament, is a translation of two words, neither of which actually means "God" or "forbid."

Literal translations stress *form*, often at the expense of *meaning*. Extreme paraphrases skew the message by capricious additions or deletions. But a good translation/paraphrase—the golden mean—restructures the form so that the meaning is preserved in the language in which the translation is being made.

Missionaries have often struggled to make clear the Word of God to people of languages quite different from our Indo-European heritage. "How would you say that in your own language?" is continually asked. And this has provided the key for communicating the gospel in English as well. Finally, English-speaking Christians are beginning to see that we who were raised on the King James Version (and to some extent this also applies to the ASV and RSV) have been oblivious to the awkwardness of our "Christianspeak."

Glassman's book deserves to be read, especially by those who read but one version of the Bible.