

FAITH INTEGRATION IN NURSING

Teresa Wood

Faith integration is not a new concept to professional nurse education or praxis. Nurses focus on the physical, psychosocial, spiritual, and cultural attributes of people to provide holistic care. Embodied in holistic care is the relationship between faith and healing. Evidence of the belief in a connection between faith and healing began with the profession's early founders. Even so, methods of faith integration in nursing curriculums differ across time and educational programs. Most often, these differences reflect popular views in society. Historically, the concept of holism was modified as nurses fought to establish nursing's legitimacy among competing ideas about the nature of being and the ways of understanding the human experience. The postmodern era has observed a shift in the concept of holism and, in some cases, a denial of the supremacy of human beings as having been made in the image of God, and therefore unique in the created order (Gen. 1:27-30). As humans created in God's image, we have responsibility to care for and protect all of His creation (Heb. 5-9). According to Wesley, only human beings are "capable of God."⁴⁹ This truth makes urgent the need to provide nurse education within the context of a Wesleyan perspective. The Wesleyan viewpoint offers an alternative to secular concepts of holism influenced by the revival of many pagan religions and traditions. Integrating the core values of the Church of the Nazarene's doctrinal statement into professional nurse education programs provides a firm foundation for nurses and helps to preserve our great traditions.

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Nurse education programs are subject to strict accreditation guidelines and state licensing approvals. Recently a state licensing board challenged the view of humanity as created in God's image as "too Christian." The notion that a program, developed to glorify God and seeking to fulfill His charge to care for all of His creation, somehow violated the First Amendment of the Constitution of the United States, is of concern. In this case, the Office of the Attorney General in the state overturned the ruling. Even so, there remains a subtle pressure to refute the idea of monotheism in favor of the belief that all gods are equal, and the exclusive claims of Christianity are false. A Christian nurse can both believe in a sovereign God and respect the choice of people who do not share this belief.



Wesleyan core values are expressed in nurse education through theories that describe beliefs about the metaparadigm of concern to nurses: persons, health, environment, and nursing. What is possible to know about these concepts comes through empirical, personal, ethical, and aesthetic methods.⁵⁰ The Wesleyan quadrilateral is a theological method helpful for framing a dialogue among Christian traditions to define the context of Wesleyan thought. Although Wesley himself did not use this term, many find the method useful in understanding what we know about God.⁵¹ Wesley espoused the authority of scripture, along with reason, tradition, and experience of the Christian life as ways we can know about God. Much as the Wesleyan quadrilateral intends to guide thinking about the doctrinal statements of the Nazarene Church,⁵² the four patterns of knowing identified by Barbara Carper guide nurses in thinking about how to best care for the health of individuals and communities. As theological scholars debate the hierarchical nature among the authority of scripture, tradition, experience, and reason, nurse theorists debate the authoritative predominance of Carper's ways of knowing. Knowledge about persons, health, environment, and nursing revealed through the Bible is a form of personal and ethical knowing. Aesthetic knowing

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is informed by tradition, experience, and reason, while empirical knowing has its roots in reason. All these methods of knowing contribute to advance the science and art of nursing. Nursing faculty in Nazarene colleges and universities help students understand which method they should apply to questions asked or problems in need of solutions. For example, the therapeutic relationship between the nurse and patient can positively influence patient care outcomes. Knowledge of the healing brought about by the nurse's presence is described best through aesthetic interpretation rather than empirical testing.

Knowledge about the nature of humans is best found in the Bible. As a Christian people, we recognize that human beings are created in the image of God. Our concept of

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God and created humans informs each interaction between the patient and nurse. In our curriculum, persons are viewed from a holistic perspective as physiological, psychological, sociocultural, and spiritual beings created for the purpose of serving a loving God and building a relationship with Him. This is sometimes difficult in a world with diverse ideas about the nature of God and humanity. One of the greatest challenges of Christian nurse educators is the new concept of wholeness championed by many nurse theorists. While the idea of persons as holistic beings is not challenged today in nursing theory, some theorists are repudiating the existence of a transcendental dimension of humanity even to the point of being antagonistic.⁵³ Student nurses at Nazarene colleges and universities are encouraged to contrast the Wesleyan view of humans in the created order with secular and pagan views of humanity as “an energy field, not distinct from the environment.”⁵⁴ Knowledge of humans from a Wesleyan

view requires students to respect all people and honor them as important because of their relationship and position with God. In contrast, an energy-field view devalues humanity and reduces humans to a biological collection of cells and electron potentials. The two views differ greatly and have significant implications when deciding about quality of life and intervention needed at the beginning and end of life. A life of holiness dictates an understanding of the relationship between humanity and God.

Holiness is integrated throughout the program's curriculum with a focus on service and comfort care and a view of health as harmony with God, self, others, and the environment. Inherent in this view is the ability to forgive and receive forgiveness. Program policies reflect Wesleyan values of the optimism of grace and the transformed life. Student nurses are encouraged to grow in grace, being perfected in love, and to fulfill a life consecrated to Christ. Assignments aimed at self-awareness and recognition of the student's personal values and how these values influence the therapeutic use of self in patient care interactions are found throughout the curriculum. Students are asked to write reflective journals and identify their feelings about patient care interactions they have. Students reference scripture to gain a deeper understanding of their personal relationship with Christ as a part of these reflective activities. The clinical journal is designed to build connections and richer understanding of the clinical day. Students learn how their care of the patient is a part of their service to Christ, and faculty members help them to develop deeper faith through obedience in serving others. Faculty help students grow in Christ by role modeling godly living and Christian values of justice, morality, and self-sacrifice. Thus, students learn to advocate for others and provide care as an expression of worship and godly living. Advocacy takes many forms from bedside care to coordinating care among members of the interdisciplinary health care team, speaking for equality in resource allocation, and political activism aimed at improving health care delivery and access.⁵⁵

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Our mission focus is evident in our faith actions aimed at improving the quality of life and health for all people. Students learn to provide compassionate care to all who suffer and to offer hope even to those for whom recovery is not possible. We help others recognize the need for Christ according to their openness to receiving spiritual counsel. Our commitment to Christ is evident in our daily work and in our attitudes of service to others. Our attitudes toward service come from thankful hearts and recognition of our relationship with all peoples through Christ. Students are taught to view self as an intercessor between God and humanity through reflective activities and journal entries aimed at connecting routine clinical experiences with the larger purpose of fulfilling God's call on their lives. Our Wesleyan heritage calls us to obedient service to God, evidenced by our love for all people as we live out our faith through the profession of nursing. ■

ENDNOTES

- ⁴⁹William M. Greathouse and H. Ray Dunning, *An Introduction to Wesleyan Theology* (Kansas City: Beacon Hill, 1989).
- ⁵⁰Barbara A. Carper, "Fundamental Patterns of Knowing" in *Advances in Nursing Science* 1 (1978).
- ⁵¹Winfield Bevens, "A Pentecostal Appropriation of the Wesleyan Quadrilateral" in *Journal of Pentecostal Theology* 14, no. 2 (2006).
- ⁵²Ted A. Campbell, et al., *Wesley and the Quadrilateral: Renewing the Conversation* (Abingdon Press: Nashville, 1997).
- ⁵³John N. Brittain, "Theological Foundations for Spiritual Care" in *Journal of Religion and Health* 25, no. 2 (1986).
- ⁵⁴Judith Allen Shelly and Arlene B. Miller, *Called to Care: A Christian Worldview for Nursing* (Downers Grove, IL: Intervarsity Press, 2006), 65.
- ⁵⁵Teresa Wood, MVNU Conceptual Framework, 2005.

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