



April 2022

Exploring Spirituality of Elders Relocating into Long-Term Care Facilities

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Recommended Citation

Tsai, K., Chang, P. J., Mathew, A. J., Richard, C., Davidson, H. A., & Hersch, G. I. (2022). Exploring Spirituality of Elders Relocating into Long-Term Care Facilities. *The Open Journal of Occupational Therapy*, 10(2), 1-11. <https://doi.org/10.15453/2168-6408.1959>

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Exploring Spirituality of Elders Relocating into Long-Term Care Facilities

Abstract

Background: Spirituality is recognized as an important contributor to quality of life, particularly for older adults. Yet, limited research has been conducted to examine spirituality of older adults relocating to long-term care facilities (LTCFs). The intent of this mixed methods study was to cull data from a parent study to explore different aspects of spirituality among residents newly admitted to LTCFs.

Method: Qualitative and quantitative data of six participants from a parent study including interviews and scores from the religious and existential well-being sections of the Spiritual Well Being Scale (SWBS) were analyzed and triangulated.

Results: Descriptive analysis of the demographic data including age, gender, ethnicity, and spirituality scores was conducted. Emerging themes from the qualitative interviews included: hope/hopelessness for the future; sense of belonging in the LTCF; contentment/discontentment with life; and personal religious beliefs. These themes, in turn, were triangulated with and supported by the SWBS scores

Conclusion: The findings have the potential of developing recommendations for spiritually-based interventions to facilitate successful relocation to LTCFs. Clinical implications for occupational therapy and future research are discussed.

Keywords

residential care, transition, values

Cover Page Footnote

We would like to acknowledge award number R21NR008932 from the National Institute of Nursing Research for supporting the project. The content delivered in this paper is solely accountable to the authors and may not portray the official views of the National Institute of Nursing Research or the National Institutes of Health. We wish to convey a special thank you to all the residents who participated in this research project and to the facilities for providing the opportunity to conduct the study at their sites. Sincere appreciation is extended for the diligent work of our statistician, Kathleen B. Watson; our librarian editor Marilyn M. Goff, MLS, AHIP-D; and our graduate research student, Anila Jose Mathew and the contribution of her professional paper on spirituality.

Credentials Display

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DOI: 10.15453/2168-6408.1959

Relocation to a long-term care facility (LTCF) presents many challenges and can be a difficult process for older adults as well as their family members. A study by Komatsu et al. (2007) found that the morbidity rate was likely to increase after an older adult was relocated to a LTCF and that there is an increased likelihood of older adults experiencing negative effects post move. Evidence of such detrimental effects on the older adult supports the need to develop interventions that will transform relocation into a more positive experience.

Lowis et al. (2005) found the psychological and physical benefits of religion and spirituality among older adults can be used to mediate the effects of a life changing event, such as relocation to a LTCF. Spirituality was also related to life satisfaction and increased coping ability among the older population (Lowis et al., 2005). Even though spirituality is such an important component of a person's quality of life, limited research has been conducted to examine the influence of spirituality among newly admitted long-term care residents and the ways in which occupational therapists can foster spirituality to enhance the quality of life among this population.

Older adults make a number of transitions during their lifetimes; one of the most challenging is relocation to a LTCF. If given an option, they would prefer to live in their own homes, but they may need to relocate to a residential facility at some point in their lives because of decisions made by family members, unsuitable living circumstances, or health-related concerns. The entire moving process elicits varied feelings from older adults when leaving behind the comfort of their own home, lifestyle routines, and friends.

As older adults relocate to LTCFs, positive as well as negative feelings are experienced post move. Heliker and Scholler-Jaquish (2006) discussed the feelings experienced by older adults in a LTCF. The study population consisted of 10 newly admitted residents from both the skilled nursing and nursing home units. Based on interviews, the following themes emerged: becoming homeless, getting settled and learning the 'ropes,' and creating a place. Even though the participants were not homeless, the word had its own connotation. The word "home" has been described as something that provides one with self-meaning, purpose, and identity. To some, removal from home is as demeaning as becoming homeless.

Findings from a study by Wallace and O'Shea (2007) noted the importance of incorporating spiritual care as an intervention in nursing home settings. Based on the premise that spirituality provides a sense of purpose and meaning to the lives of older adults and helps them to cope with life changing events, these researchers administered the Spirituality and Spirituality Care Rating Scale (McSherry et al., 2002) to determine the importance of spirituality in residents' lives. They found that participants used spirituality as a framework for choosing between good or bad and as nurturing a sense of peace in themselves. The residents emphasized the need of nurses to incorporate spiritual care by showing kindness, listening, and providing for resident needs. Expanding on the idea of how spirituality impacts the life of older adults, Lowis et al. (2005) conducted a study to investigate the mediatory role of older adults' religious and spiritual beliefs on their transition to residential care. Spirituality was determined by using the questionnaire INSPIRIT (Kass et al., 1991), with one of the questions consisting of a checklist of 12 types of spiritual experiences. The results from the 50 participants showed that there was a positive correlation between the subjective dimensions of spirituality with life satisfaction and coping ability.

Such studies reinforce the importance of spirituality to an older adult's sense of being. According to Kane (2001), a strong association exists between spiritual well-being, psychological health, and social well-being among older adults. The founding philosophy of occupational therapy incorporates this same holistic view that mind, body, and spirit are dependent on each other (Meyer, 1977, original work

published 1922; Schwarz & Cottrell, 2007). As such, the basic underpinnings of our profession support the idea that therapists should not only focus on providing for the physical needs of the clients but also incorporate spirituality as a part of the therapy process to facilitate a therapeutic relationship. Occupational therapists should hold an ethical obligation to respect the client's spirituality and provide opportunities for the person to connect to their spiritual issues.

Recognizing the importance of spirituality in clients' lives became a part of the occupational therapy professional language as documented by Puchalski et al. (2009), who defined religious and spiritual expression as "the way individuals seek and express meaning and purpose and the way they experience their connectedness to the moment, to self, to others, to nature, and to the significant and sacred" (p. 887). According to the 4th edition of the *Occupational Therapy Practice Framework* (AOTA, 2014), spirituality is defined as "a deep experience of meaning brought about by engaging in occupations that involve the enacting of personal values and beliefs, reflection, and intention within a supportive contextual environment" (Billock, 2005, p. 887).

In recognition of the importance of spirituality in the lives of clients, our profession recently published a textbook entitled *Spirituality and Occupational Therapy: A Model for Practice and Research*, by Humbert (2016). This book provides a comprehensive description of the use of spirituality in client care and highlights the significance of fostering this personal value when providing therapeutic services to clients. Expressing one's spirituality can be actualized through many meaningful occupations, including engaging in religious or spiritual activities, organizations, and practices for self-fulfillment; finding meaning or religious or spiritual value; establishing connection with a divine power, as is involved in attending a church, temple, mosque, or synagogue; praying or chanting for a religious purpose; engaging in spiritual contemplation; giving back to others; and contributing to society or a cause and to a greater purpose (World Health Organization, 2008).

To further strengthen the connection between spirituality in the lives of clients, Schwarz and Cottrell (2007) explored the perspectives of five elders in regard to the integration of spirituality by occupational therapists into their rehabilitation services. The common themes from the participants' reflections on spirituality during rehabilitation included finding meaning and purpose in life, using coping strategies and acquiring a positive outlook, increasing self-reliance during illness or injury, providing comfort and consolation when faced with challenges, providing hope for recovery, and solidifying therapeutic rapport with their respective occupational therapists. This study emphasized the importance of understanding the client's spiritual needs and implementing this important client factor into practice.

Since minimal research has been conducted studying the relationship of older adults' transitions to LTCFs with spirituality as a means of intervention by occupational therapists, the aim of this mixed methods study was to explore spirituality of newly admitted residents in LTCFs. By understanding the impact of spirituality on the residents' lives, potential avenues for intervention might be developed to bring meaning and purpose to the older person.

The research question for this study was: What interpretation can be given to spirituality scores measured by the Spirituality Well-Being Scale (SWBS; Paloutzian & Ellison, 1982) as they relate to participant responses to qualitative interview questions about adaptation to a LTCF?

Method

Design

This study conducted a secondary analysis of data from a 2-year quasi-experimental nonequivalent control group study using pre and posttests (Hersch et al., 2012). According to Hinds et al. (1997), a secondary analysis includes the use of existing data that were collected for a specific purpose to acquire an alternative perspective of the original question. Using a mixed methods approach, the intent of this current study was to focus on the exploration of spirituality of newly admitted residents during their transition into a LTCF. Both qualitative and quantitative data collection and analysis were done concurrently; this type of mixed methods approach is termed the convergent parallel design according to Creswell and Clark (2011). The researchers of the original study obtained approval from the institutional review board (IRB) at the university at the initiation of the study. This current study obtained IRB approval as an addendum to the original study; all participants signed informed consents.

Participants

In the original funded study, 23 older adults from six different LTCFs were interviewed over a period of 7 months. These 23 participants were recruited by purposive sampling, i.e., the intent was to target those residents who had recently relocated to the facility. To be included in this current study and participate in an interview, individuals were aged 60 years and older, recently relocated to a LTCF within the last 6 months or less, English speaking, and obtained a score of 5 or less on the Short Portable Mental Status Questionnaire (Pfeiffer, 1975). Six participants were selected to be in the secondary study.

Data Collection Procedures and Instruments

Data in this current study were derived from the parent study where data were collected through a combination of qualitative and quantitative methods. Trained graduate research assistants administered two qualitative interviews: (a) The Life Narrative Interview Guide (adapted from Gubrium, 1975/1995) that addressed resident perceptions of life in general and the meaning of home, family, and aging, and (b) The Cultural Heritage Interview that targeted cultural elements of the elder's life prior to relocation and now to the current residence. Some examples of interview questions are:

- Everyone has a life story. Tell me about your life. Begin wherever you'd like and include whatever you wish.
- If you could live your life over, what would you do differently?
- Describe a typical day in your life now.
- How do you feel about growing older?

The interviews were audio taped, transcribed verbatim, and uploaded into the qualitative software program NVivo (QSR International, 2015) to manage the data analysis. Based on a coding scheme developed by the research team, a list of significant statements addressing the personal experiences of the participants on the phenomenon of relocation to a LTCF was identified and grouped into meaningful themes (Hutchinson et al., 2011). One of the major themes that emerged was the importance of spirituality, which then became the focus of this secondary analysis. As such, codes and themes that were identified that specifically related to components of spirituality became the basic data of this current study for analysis.

The SWBS is a quantitative tool that is used to measure both the religious well-being (RWB) as well as existential well-being (EWB) of a person. The SWBS is a 20-item self-report instrument consisting of two subscales. The RWB subscale has 10 items and measures well-being in relation to God. The EWB

subscale also contains 10 items and measures the dimension of well-being in relation to a sense of purpose and life satisfaction. Test-retest reliability ($r > 0.85$) and internal consistency ($r > .84$) of the SWBS instrument suggest adequate reliability (Paloutzian et al., 2012). In addition, studies with the SWBS have demonstrated good face validity and both subscales; the EWB and RWB have been positively correlated with several indicators of well-being, including self-concept, finding meaning and purpose in life, high assertiveness, good physical health, and emotional adjustment (Paloutzian et al., 2012). Participants are asked to rate the 20 items on a 6-point Likert scale that ranges from 1 (*strongly agree*) to 6 (*strongly disagree*) where higher scores indicate a better relation to God and better sense of purpose and life satisfaction. Most of the participants were able to complete the SWBS independently; when help was needed, the graduate research assistants provided assistance.

Data Analyses

Using SPSS (19th ed.), the SWBS was analyzed to determine average scores for older adults and any relationship between those scores and gender, age, and ethnicity. To analyze the qualitative interviews, six participants were purposefully selected from the 23 participants to represent a range of age, gender, and ethnicity. The six selected interviews were transcribed and coded by the student researcher in collaboration with her research advisory committee. NVivo (QSR International, 2015) was used to identify codes, and then these data were inductively analyzed into increasingly more abstract units of information to develop meaningful themes highlighting different aspects of spirituality. Using deductive thinking, the spirituality scores obtained by the six participants were checked against the themes derived from the qualitative interviews to obtain a comprehensive understanding of their experience of spirituality. This inductive-deductive logic process supported the triangulation of the mixed data (Creswell, 2013).

Methods of Trustworthiness

To ensure credibility, codes related to spirituality developed by the student researcher were reviewed, compared, and redefined by the research team. The entire research team discussed the codes extensively until reaching consensus. The spirituality scores of the six participants were compared with the emergent themes from the qualitative interviews. This triangulation of the quantitative data with the qualitative findings was done to ensure the trustworthiness of the data and the analysis.

Results

Demographics and SWBS Scores

The demographics of the six participants represented by pseudonyms are described in Table 1. The age range of the six participants varied from 62–93 years with both gender and two racial groups equally represented in this subset of the study. SWBS scores (religious and existential) are presented in Figure 1.

Themes from the Qualitative Interviews

The themes evolved through analysis and synthesis of the qualitative interviews from both semi-structured interview guides. The student researcher and her advisory team spent extensive time reviewing and coding the participants' interviews and came to a mutual agreement of interpretation to develop four themes related to spirituality. These themes highlighted different aspects of spirituality relating to overall quality of life and matters related to life and death. The identified themes obtained from the six participants' interviews were also compared to their respective spirituality scores to ensure triangulation of data. Table 2 illustrates the triangulation process used to seek support between the qualitative themes and quantitative scores.

Table 1
Participant Demographics

Name	Age	Gender	Ethnicity	Religious well-being score	Existential well-being score	Total score
Benita	62	F	AA	60	45	105
Beatrice	93	F	AA	60	57	117
Leon	88	M	AA	60	54	114
Una	89	F	CAU	55	41	96
Chad	87	M	CAU	47	40	87
Willy	75	M	CAU	54	59	113

Figure 1
Participant SWBS Scores

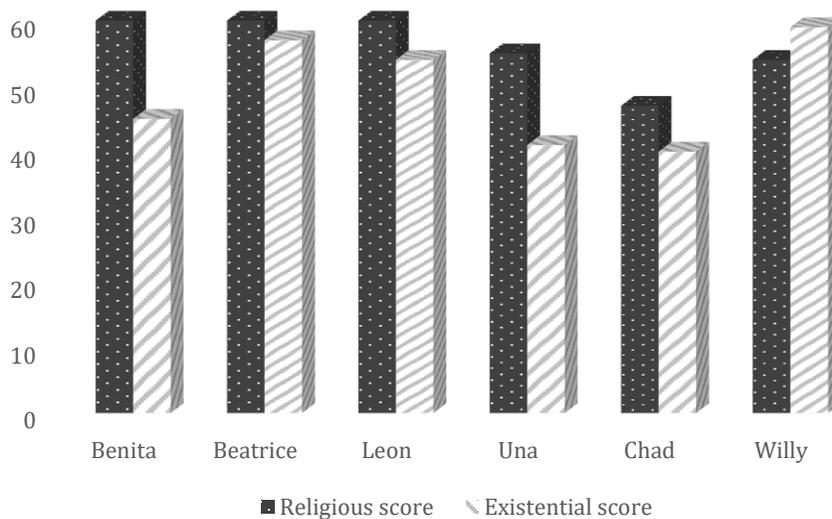


Table 2
Triangulation of SWBS Scores with Themes and Representative Quotes

Pseudonyms	Themes	Related Quotes	SWBS Scores
Benita	“Time is winding down for me”	“I just want to go home . . . home to heaven”	105
Beatrice	Hope for the future	“So, you’ve got to look forward . . . if you don’t look forward, you’re lost.”	117
Leon	Contentment with life	“Just happy to be in the land of the living.”	114
Una	“No life here”	“I want it to change, I don’t like living here. I’d rather have a house on my own.”	96
Chad	Hope/hopelessness for the future	“It (life) looks pretty bleak right now. I’ve got to get strength to get back up the third floor.”	87
Willy	Contentment with life	“It’s a good life . . . living a good life. You eat good in restaurants, travelling is good, staying in motels is nice.”	113

Theme 1: Hope/Hopelessness for the Future

Discussions of hope and hopelessness for the future appeared related to the participants’ past lived experiences and current perspectives of life in the LTCFs. Some of the participants experienced a sense of hope even after relocating to a LTCF, while some of the participants seemed resigned to the fact that the future did not look sufficiently promising. Age, as perceived by some of the participants, seemed to play a major factor in their hopes for the future. Some of the participants ceased to think about their future because of their increasing age. Beatrice explained: “I feel at the age of 90, I’m not gonna be here many more years.” Similarly, Chad’s hopes seemed to be compromised because of his age. He stated, “When

you're 87, you don't have plans." Benita referred to her life becoming "hopeless" after relocating to the LTCF. Her future seemed questionable as she elaborated on her plans for the future: "Well, what I think of . . . is will I ever get out, you know? And will I get around better . . . I don't make plans for the future." When asked about how life looked from where he was now, Willy responded, "Looks good if I can get out of here."

Chad, an 87-year-old male, hoped to gain enough strength to return to an assisted living facility: "I've got to get strength to get back to the third floor. I've got a room up there." He was still hopeful about the future as he responded to the question about life a year from now, "I hope it will be better than it is now." Most of the interviews provided clear evidence that older adults would rather live independently and that relocating to a LTCF was their last resort. Willy traveled for a major part of his life and still hoped to get his strength back so that he could "hit the road again." Beatrice was optimistic about her future and believed: "You've got to look forward. If you don't look forward, you're lost."

Theme 2: Sense of Belonging in the LTCF

The sense of belonging theme related to the participants' current perceptions of life in the LTCF after relocation. The participants frequently talked about how the LTCF did not feel like home. Some of the participants indicated their dissatisfaction with their current living situation and hoped to go back to their previous living arrangements. Una, an 89-year-old participant, exhibited her dissatisfaction with her current living situation and explained, "I want it to change, I don't like living here. I rather have a house on my own." Benita reiterated the same frustration about living in a LTCF: "This place don't feel like home. It feel like something wrong with it."

For the participants, home signified a "house full of kids," "family," "comfort," "traveling," and a "place of rest." These positive associations of home were incongruent to life in a LTCF. Una believed that changes made to the decor of the hospital room can never compare to her own home as she explained, "It's a hospital room. I just leave it like it is."

However, Leon attached positive feelings to relocation and appreciated the treatment and care he received in the nursing home. He elaborated, "Well if they let me stay here, I will be just as happy here as I was at home." Both Beatrice and Willy considered living in a LTCF not as a part of life but different from it; Beatrice compared living in a LTCF to living in a "playhouse," where one was required to go with the "flow." Even though the LTCF did not meet her expectations, she still believed it was like home and expressed: "It don't feel like the one I had planned on, but it's a nice place." She found satisfaction with living in a LTCF because she was able to meet her daily needs in terms of food and basic necessities of life through the help of others.

In contrast, Willy explained why the LTCF did not feel like home: "Because I've lived so much traveling. This is killing me being tied down like this." However, Chad had come to terms with the fact that living in a nursing home was a part of life and that it was the only home that would be known to him. He tried to find contentment with his living situation and hoped to regain the strength to go back to the assisted living facility.

Overall, the participants expressed dissatisfaction with their current living conditions in the LTCF. However, they maintained a sense of hope that things would turn out to be favorable in time.

Theme 3: Contentment/Discontentment with Life

Although the participants were generally content with life, two of the participants showed dissatisfaction with life in terms of the choices they had made and the unforeseen challenges they faced. Chad expressed his only regret in life in terms of the career choice he made: "I would have been an

engineer instead of a cowboy.” Overall, he was content with his accomplishments in other arenas of life, including his family and woodworking. An additional discontentment that was expressed concerned disability; for instance, Chad referred to his change in quality of life with the remark, “I had a good life until I had this stroke.”

When asked about what they would have done differently if given an opportunity to live their lives again, Beatrice replied: “I would like for life to be like it is, not all the sadness and everything, but some of things like having a job and be free to do things you want to do.” She did not express any regrets with life despite the fact that she underwent a great deal of hardship raising her son after being widowed at an early age.

Overall, satisfaction with life was closely linked to taking pride in children’s accomplishments, being able to take care of family, indulging in pleasurable life activities, and being thankful for the gift of life.

Theme 4: Personal Religious Beliefs

This theme related to the participants’ contemplation about getting older and coming to the end of their lives. Most of the participants seemed prepared to accept death graciously. Leon explained: “I am ready. I feel I would be better off. I just don’t think about it.” His financial ability to pay for all burial expenses allowed him to not have to think about it.

Chad reflected on his old age and felt debilitated. He stated, “I’m just an old man that’s down on his back.” On the other hand, Leon felt good about getting older as he explained, “If God will let me live to get older, and I can stay close to Him, and I feel like now, I’ll be happy.” His close relationship with God seemed to help him cope with the changes that had occurred with increasing age.

Some of the participants associated death with religious beliefs and their personal relationship with God. Benita referred to death as “home,” stating, “I just want to go home . . . home to heaven.” Beatrice believed in accepting the will of God: “So whenever God is ready for me I’m here.” She added, “I am not afraid to die. Sometimes I ask him (God) to please come get me while my son is living so somebody will be there to see me.”

In summary, the four themes that emerged from the data analysis provide a life perspective of older adults who had transitioned from home to residential living. Their direct quotes vividly reflect what life had become for them. Hearing their thoughts and feelings gives insight into what brings meaning at this point in their lives. As occupational therapists, we have a responsibility to acknowledge and respect our clients’ perspectives of spirituality and, when appropriate, incorporate those ideas into meaningful interventions.

Discussion

Convergent parallel design analysis of the quantitative and qualitative data allowed exploration of different aspects of spirituality from residents newly admitted to LTCFs. The following discussion is guided by the research question of this study: What interpretation can be given to spirituality scores measured by the SWBS as they relate to the participant responses to qualitative interview questions about adaptation to a LTCF?

The spirituality scores of the six participants ranged from 87–117 points with an average score of 56 in the religious subscore and 49 in the existential subscore; these scores were consistent with the 23 participants in the original study. For the most part, the spirituality scores listed in Table 1 are indicative of the participants’ stated perceptions of spirituality in their lives. The participants with relatively high spirituality scores tended to report a better quality of life as evidenced by the themes found in the

interviews. Religious beliefs and faith in God were instrumental in providing hope and overall satisfaction to nearly all of the participants, despite the challenges faced in their lifetime.

Analysis of the qualitative interviews suggests that the residents perceived spirituality in different ways. It was evident in the first theme that spirituality gave them hope to get better and to look forward to the future. The theme of hope supports other research findings that spirituality plays an important role of instilling hope in institutionalized older adults. Touhy (2001) reported the importance of inner strength and deepening one's connectedness with a higher power to assist one in maintaining hope in the face of losses, especially those experienced during relocation. In an exploratory study of older adults' perspectives of spirituality, Williams (2008) found that spirituality was instrumental in creating purposefulness and an adaptive response to life's challenges.

The second theme, "sense of belonging in a LTCF," sheds light on the living situation of the selected newly admitted residents in the LTCF. The participants were generally dissatisfied, yet accepting of their lives in the residential facility. Those who turned to their religious beliefs tended to be more satisfied with their living situation. Even though these participants were not subjected to any external oppression, relocation itself was a life altering change for them.

The third theme about finding "contentment/discontentment with life" illustrated how the participants found satisfaction or dissatisfaction in their previous occupational roles and goals they had set for themselves. Even though spiritual beliefs were not significantly used to verbalize contentment, spirituality appeared to facilitate the participants' successes in their occupational roles; furthermore, they helped the participants find meaning and purpose in those desired roles. The National Interfaith Coalition on Aging (1975) defines spiritual well-being as "An affirmation of life in a relationship with God, self, community and environment that nurtures and celebrates wholeness." Based on this definition, overall contentment with life seems closely associated with spiritual well-being.

The last theme of "personal religious belief" revealed that for some of the participants their relationship with God was the primary motivation throughout their lives to face challenges, including transitioning to living in a LTCF. For others, spirituality was a source of contentment with life in general. The participants also reflected on aging and dying. Those with a strong belief in God, which emerged as a strong aspect of spirituality, seemed to accept this inevitable outcome.

Implications for Occupational Therapy Practice

Both existing literature and the participants in this study affirmed that relocation to a LTCF is a life altering decision. However, a common thread among most of the participants' reflections was that they had come to terms with their lives in a LTCF. Because spirituality is recognized as an instrumental ADL and an important component of client factors in the *OTPF*, occupational therapists need to understand that residents have left not only their homes, but also a part of their personal existence when they relocated. They can assist residents to recall the adaptive strategies and spiritual supports that have been most helpful to them in the past and encourage them to continue these strategies during their adjustment to the new environment. Occupational therapists should be cognizant of the residents' psychological needs post relocation and assist them to engage in meaningful occupations that bring about satisfaction in their lives. Occupational therapists could explore with clients the potential value of activities that offer meaning and purpose in their otherwise routine life in the LTCF. To reiterate, enhancing one's quality of life via participation in meaningful occupations is an important aspect of spirituality.

Spirituality has been shown to be associated with greater psychological health and well-being;

therefore, it becomes imperative for occupational therapists to nurture rapport with clients to enhance their overall well-being by understanding where their clients are in their “journey of spirituality over time” (Maley et al., 2016). Maley et al. (2016) recommended an interdisciplinary approach in addressing clients’ spirituality work, but also emphasized that specific attention should be paid to “the meaning of spirituality as it relates directly to occupational engagement” (Maley et al., 2016, p. 7004260010p4).

Another focus area for occupational therapy is consideration of the person’s sociocultural background and its influence on one’s spirituality and participation in various occupations. Being aware of a client’s culture can assist therapists in initiating conversations, building rapport, and setting appropriate treatment goals that support the client’s own personal goals.

McColl (2000) highlights different methods through which occupational therapists can incorporate the spiritual component in the therapy process. The use of narratives connecting a client’s story to positive thinking can be developed to elicit a spiritual experience. Rituals can be used to transform everyday activities of clients into activities that hold special meaning and purpose. Helping the client appreciate nature can provide a transcendent experience and be used to evoke spirituality. Another therapeutic approach is promoting creativity of clients through participation in valued activities that assist in experiencing transcendence through self, time, and place. Such treatment strategies highlight meaningful ways of fostering spirituality among older adults who are transitioning to long-term care, making the process as positive as possible.

Recommendations for Future Research

Many studies have addressed the underlying reasons that lead older adults to relocate to a LTCF. However, there are limited studies demonstrating interventions that incorporate spirituality into the therapeutic practice in long-term care settings. Further research studies need to be conducted to examine how occupational therapy interventions that use spirituality could facilitate an older adult’s adaptation to a LTCF (Maley et al., 2016). Potential future questions might include: What is the relationship between spirituality and the adaptation process? Which aspect of spirituality is more influential on the adaptation process? and What therapeutic methods are best to enhance or promote spirituality? In addition, future research should include a larger and more diverse sample of older adults to increase the generalizability of findings. In this study, the SWBS was used as the quantitative tool to determine spirituality of newly admitted residents. Further research could focus on other quantitative tools to incorporate different aspects of spirituality. Two such tools have been studied which explore ways in which occupational therapists may incorporate spirituality in their practice. As noted by Gray (2015), the OT-Quest Assessment by Schulz (2008) explores five key spiritual factors in a person that could be used to document clients receiving occupational therapy. A second tool used by Mthembu et al. (2016), Spirituality in Occupational Therapy Scale, is designed to examine occupational therapists’ perceptions regarding spirituality. Conducting research with both clients and occupational therapists using such tools seems warranted to validate the importance of spirituality in the lives of our clients and to offer approaches to implementing meaningful interventions.

To create a guide that incorporates spiritual competent care for occupational therapy practice, Jones et al. (2016) conducted a concept analysis of spirituality as described in eight studies. The end result was the development of a framework that operationalizes the components of spiritual care highlighting these three components: the occupational therapist understanding his/her own spiritual beliefs and needs; developing an effective therapeutic relationship sensitive to the client’s experiences; and providing person-centered engagement that gives meaning to purposeful occupations. It would be beneficial to our

profession's research agenda and of practical value to occupational therapists to study and implement this framework to enhance spiritual competent care.

Limitations

For research studies that have older adults as participants, several difficulties in recruitment arise, including medical frailty, reluctance to participate (citing time demands and privacy concerns), and withdrawal of participants during the study. The findings of this study are limited by the small number of participants who were recruited for the primary study. There was also underrepresentation of ethnic groups, and the scale used for measuring spiritual well-being might have limited how spirituality is defined and understood.

Conclusion

Newly admitted residents experience a multitude of challenges as they undergo the transition from home to a LTCF. Secondary analysis of existing data from the parent study provided insight into the perceptions of spirituality among newly admitted residents. This study serves as a preliminary look at what the spiritual needs are of residents relocating to a LTCF and the potential for developing adaptive strategies as they adjust to their new home. The themes from the qualitative interviews appear to support the need for incorporating spirituality in the lives of these residents. Different aspects of spirituality influenced how the participants dealt with everyday challenges presented to them in the facility and the ways in which they found meaning and purpose in life post move. This study reinforces the importance of discovering the meaning of an individual's spirituality and incorporating spiritual beliefs and practices into occupational therapy interventions to ease the transition process of older adults relocating to LTCFs.

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