THE NEED OF NURSES ON SPIRITUAL PREPAREDNESS AS A RELIGIOUS COPING MECHANISM DURING A DISASTER RESPONSE

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INTRODUCTION

During missions, Muslim scholars were involved to provide religious support.

"So, we even get people like imam (leader) or Ustaz (religious teacher) to follow us on a difficult mission and they do play a role." (113-114)

Izzul (DRY-04)

Imran (SNY-40)

During their time in a chaotic situation, they recite Al-Quran and pray to strengthen their spirit.

> "Usually, we strengthen our motivation through our religious practices. We established the activity of Al-Quran recitation and performed congregational prayer [solah]. Then, we sat down and discussed the current situation." (102-104)

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Sustaining Nurses in a Disaster: A Constructivist Grounded Theory

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SUSTAINING NURSES IN A DISASTER

- An important point was highlighted by the nurses in this study in regard to the importance of religion.
- This has been noted in the previous literature, but this is the first time it has been identified amongst nurses as a coping mechanism during a disaster.
- This is an original contribution to the existing body of knowledge in regard to disaster response.



METHODOLOGY & METHODS

Study setting	Peninsular Malaysia
Study design	Qualitative approach
Methodology	Constructivist grounded theory
Population and sample	30 nurses involved in any types of disaster
Ethical approval	MOH, IIUM, EPU
Data collection	Interview and field notes
Data analysis	Manual (by hand)



WHAT WAS THE ISSUE?

Most of the nurses that had worked in a disaster area mentioned the lack of spiritual support given to them during a disaster situation, yet, small number did receive spiritual and religious support, and the application of religious practices as a support intervention could help them to manage themselves instead.



WHAT HAS BEEN DISCUSSED?

- Gillard and Paton (1999) explored the influence of religion on the populations (followers) of various religions Christian Fijians, Indian Muslims and Indian Hindus following a hurricane.
- Schmuck (2000) studied the acceptance and survival strategies of people in Bangladesh who are frequently affected by natural disasters.
- In Indonesia, Islam (2012) surveyed the role of religion for the individual survivor and the implications posed by the risk of a volcanic eruption on the religious sensitivity of survivors.
- Ha (2015) focused on the role of religion Christianity, Buddhism and Confucianism – on care-oriented and mitigation-oriented disaster management in Korea.



WHAT HAS BEEN DISCUSSED?

- Joakim and White (2015) discussed the integration of religious elements into the disaster risk reduction programmes of the organisations involved in disaster response following the earthquake in Yogyakarta.
- McGeehan and Baker (2017) examined the role played by four different faiths amongst Hawaiian communities in terms of their disaster experiences.
- Gianisa and De Le (2018) investigated the religious coping mechanisms amongst followers and leaders within the affected population following the 2009 earthquake in Padang, Indonesia.



WHY RELIGIOUS SUPPORT IS NEEDED?

- Religious practices are common in Malaysia amongst the Malay population and it plays a role amongst the population, including nurses who are involved in a disaster response team.
- Religion shapes people's beliefs and way of thinking and can both have a positive and negative influence on its believers, notably when they are involved in a disaster.



WHAT THEY DID?

- During their time in a chaotic situation, they recite Al-Quran and pray to strengthen their spirit.
- In addition, some of the nurses stated that congregational prayer helped them when in a group (disaster team) and helped them to get to know each other very well.
- Nurses involved in disaster response remain practicing the Islamic ways of life, such as Al-Quran recitation, solah (prayer), du'a (prayer) and zikr (devotional acts).



HOW THEY FEEL?

- Support in religious aspects could offer calmness and reduce their anxiety.
- For them, involvement in a disaster created a feeling of being close to God as it taught them to be grateful for the privileges they had and for helping those who were underprivileged.



WHY IT IS IMPORTANT?

- Religious coping shows a positive correlation with psychological modification to stressors with the enrichment of faith based social support (Ano and Vasconcelles, 2005).
- Few studies have revealed the positive effect of religion in people's lives, especially during disasters, with one such example being to keep them from suicidal thoughts (Fujiwara, 2013; Stratta et al., 2014).



WHAT CAN WE LEARN?

- One of the prominent findings in this study is the role of religion as a coping mechanism for nurses while responding to a disaster.
- This current study adds to the body of knowledge on nurse's experiences in which some respondents have mentioned that religious practices helped them to calm and soothe while facing such catastrophic events.
- This is useful if the role of religion as a coping mechanism for nurses, as well as other healthcare professionals, could be further investigated in the future.



WHAT WOULD BE THE SOLUTION?

- The involvement of various religious groups during a disaster is an important coping approach that can be observed by the nurses as they respond in the disaster area.
- The speeches delivered by a religious teacher, who in some circumstances will be deployed together with a disaster team, to the team of nurses in this study were helpful in controlling their emotion and promoting calmness when working in a hostile environment.
- The findings on religious coping mechanisms amongst nurses who have been involved in disaster response suggest that they require assistance with regard to religious provision.



CONCLUSION

- Most of the nurses that had worked in a disaster area mentioned the lack of spiritual support given to them during a disaster situation.
- Application of religious practices as a support intervention could help them to manage themselves instead.
- The involvement of various religious groups during a disaster is an important coping approach that can be observed by nurses as they respond in the disaster area.







Figure 4.3: Subcategories of getting support



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