

provide strength and promote connection between the family and the nurse, whereas unmet spiritual needs can result in spiritual distress and debilitation and challenge the nurse-family relationship (Yates, 2011). It is also important to remember children may have different spiritual needs across the illness experience. For example, Petersen (2014) notes that nurses can help seriously ill children meet their spiritual needs through assessment, helping children express feelings and strengthen relationships, helping the child with legacy work to be remembered by family and friends, and helping the child find meaning in the illness experience. In practice, application of the nursing process for spiritual care (Box 2-6) can enhance the spiritual well-being of both the child and the family.



**FIG 2-8** Soon after an infant is born, many families have special religious ceremonies.

### **Box 2-6**

## **Guidelines for Integrating Spiritual Care into Pediatric Nursing Practice**

- Respect the child and family's religious beliefs and practices.