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ROLE OF COMMUNICATION SKILLS IN HOLISTIC NURSING

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ABSTRACT

This article attempts to dwell on English communication skills useful in holistic nursing. The key to understanding of communication skills would necessarily involve paying close attention to different aspects of holistic nursing. Though this approach is old it is introduced in nursing care in 1980's with a concept of treating a person on the whole –body, mind and soul. In an attempt to address the role of communication skills in holistic approach, it focuses on defining of holistic care and the features involved in providing holistic care to the patients. Various positive outcomes that result when applied to practice are discussed in the paper. Holism underlies the principle of understanding people by addressing the various factors that affect people in all situations. The goal of holistic nursing is to help patients integrate appropriate self-care into their lives. This will have positive effect on their recovery rate among many others. This research article will help the nursing students to develop a consciousness about the importance of holistic care with the aim of improving patient recovery rates.

Keywords: Holism, psychological care, spiritual care, holistic communication skills

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Background

Holistic healing requires attention to the psychological, social, and spiritual disturbances as well (Hatala, Andrew, 2012). Holism believes that physical repairing can be possible by attending psycho socio and spiritual needs of the patient. This type of approach is in need of different types of language skills to meet the requirements of the patients. This research paper is intended to highlight the type of communication skills useful in bringing out holistic communication. In a way to this there is a need to assess the relevance of holistic communication between a nurse and patients. This paper is aimed at highlighting how essential the communication skills are for establishing rapport, understanding the needs of the patients and planning effective intervention for meeting holistic health care. To be continually relevant, nurses have to improve their communication skills to meet the challenges of constantly changing roles and responsibilities. Thus its

basic purpose is to make them understand the importance of communication skills that suit the holistic care which will guide them in their work place.

Research methodology

Both the qualitative and quantitative analysis was made use of to analyze the role of communication skills in holistic nursing. The qualitative approach is applied by conducting interviews and observations whereas the quantitative approach applied the tool of questionnaire provided to nursing students. The information about understanding holistic care was collected from pre-existing scientific articles which were used to answer the research questions. The research questions were used as a guide in the study and the main aim was to find answers to the research questions in the study.

Analysis

The questionnaire is analyzed using SPSS (scientific package for Social Sciences). The interviews and observations made with different categories of people concerned with the research study are analyzed and interpreted in detail.

Findings

It is found and believed that hope and trust are the two important characteristics of holistic nursing. These elements insist the nurse to connect with another person at a deep psycho-social and spiritual level. This approach requires the tools of holistic communication which engages the nurses to empathize, sympathize and provide therapeutic care across their cultural, spiritual and social backgrounds. The literature review documents that much patient dissatisfaction and many complaints are due to breakdown in communication. The potential communication can well be established by regulating patient's emotions, feelings, ideas, perceptions and expectations. This study explored the psychosocial care and the potential barriers that come across during the nursing care. The researcher addresses the ways to establish holistic communication and impact of it on patients' recovery. Various issues were discussed and finally benefits of effective holistic communication are discussed. The research article concluded how to meet the challenges of establishing effective communication skills among nursing students.

INTRODUCTION

Nursing as a health care profession focuses on serving the needs of human beings. These needs may be physical, psychological, social and spiritual. In the beginning nursing care was delivered to physical level in the cadre of an assistant to a physician. But the extension of care to mind and soul has been traced in the present nursing profession. This has its roots in the various religious practices and philosophies. This type of approach has prompted the nurses to make use of a wide variety of communication skills in nursing. The purpose of the study is to examine the role of communication skills in holistic nursing. In a way to understand the role of communication skills it is necessary to understand the developments that have been taken place from time to time. These developments are attributed to many reasons like advancement of science and technology in medical profession and giving importance to the mind and soul which has effect on physical body.

The various developments evidenced the transformation of art of nursing into a profession. The professional practice requires not only scientific knowledge, but also interpersonal, intellectual and technical abilities and skills. Raya in one of her writings emphasized it in a different way that a nurse requires a composition of knowledge, clinical work and interpersonal communication. In a qualitative study communication is found as a vital element in nursing in all areas of activity and in all its interventions such as prevention, treatment, therapy, rehabilitation, education and health promotion. The nursing process moreover as a scientific method of exercise and implementation of nursing, is achieved through dialogue, through interpersonal environment and with specific skills of verbal communication.

As communication we can define the exchange of information, thoughts and feelings among people using speech or other means. Therapeutic practice involves the oral communication of other health care persons and nurses on the one hand and the patient or his relatives on the other. It is a two way process. As the nurses are in continuous touch with the patients and their relatives it is necessary for a nurse to maintain

thorough communicative activities with them. The patient conveys their fears and concerns to their nurse and helps them make a correct nursing diagnosis. The nurse takes the information and in turn transmits other information to the patient with discretion and delicacy as to the nature of the disease and advises with treatment and a rehabilitation plan for health promotion.

The review of past related literature states that importance of communication well can never be overstated for a successful nursing professional career, and the ability to communicate is an essential trait of a nursing professional. Following a course of action with proper communication skills can bring a vital success to a nurse.

The history evidenced the transformation of art of nursing into a profession. In the process of this new developments have come into existence in the nursing care. The nursing literature gives various reasons for these developments. The influence of changing trends on the healthcare system has increased professional standards which in turn increased accountabilities. The nurses are expected to recognize and respond to a plethora of new demands arising from an ever-changing and increasingly complex healthcare system. Today's politico-societal healthcare environments include growing shifts towards holistic nursing care where treating of a sick patient involves the physical, psychological and spiritual care. The key to understanding of communication skills would necessarily involve paying close attention to different aspects of holistic nursing.

Several religious practices and their philosophies have extended the care from physical to psychological care. Psychological care is a concept to deliver emotional support either for faster recovery or to manage their long run illness. Spiritual care is also in one way a part of psychological paradigm which provides a psychological support to the patients. Though this perspective is old it is introduced into nursing literature in 1980's by Rogers, Pares, Newmann and others. From then the psychosocial care was concurrently practiced with that of physical care. It is strongly believed by many theorists that body, mind and soul are interrelated and sound health is balance of these three elements. There is a notion that physical ailing will have effect on mind and vice versa. This paradigm has given forth to the "holistic approach" which promoted the concept of treating of a diseased person by attending his physical, psychological, social and spiritual needs. This new construct requires different communicative approaches to handle the patients' psychosocial and spiritual needs.

In fact, for nurses communication skills can come into play in any context. The old practice of nursing which is chiefly involved in serving the physical needs of the patients had undergone a great alteration to address the psychological, spiritual and social needs of the patients. To be clear a typical traditional nurse is meant to successfully carry out a series of routine procedures like taking a blood sample, dressing a wound or administering medication. In contrast, holistic nursing care involves in healing the mind and soul of the patients. It involves thinking about and assisting patients with the effects of illness on the body, mind, emotions, spirituality, religion, and personal relationships. To deal the issues related to their body, mind and soul nurses often take into consideration the social and cultural differences and preferences of the patients. These issues can be addressed and managed by means of effective communication. Here it is not simply making use of the words but the skill of analyzing, drawing interference and interpreting are to be established in the process of routine communication in the hospital settings.

Holistic care involves the nurses to be intervening with other persons concerned to the patient care (other healthcare professionals and members socially related to patients) Holism is more than certain actions performed or words spoken to a patient. This immense transformation requires a combination of clinical work and interpersonal communication. Generally communication skills in nursing are meant to give and take information in the process of treatment. But the holistic based communicative approach is encumbered with different communicative strategies. Patients suffering from chronic illness, terminal patients, psychiatric patients and their attendants deserve respect, care and attention together with compassion, competence, confidence and commitment. In light, 'holistic care' is loaded with the skill of empathizing, sympathizing, analyzing, drawing inference, maintaining contextual dialogues and so on. The verbal communication is

synthesized using certain language skills in an interpersonal environment to perform the above mentioned interventions to assist the healthcare to the patients

The nursing literature asserts certain views on ineffective communication. Communication with patients is the most important aspect of professional nursing whose failure can lead to ineffectiveness of nurses' (J. Liu, E, Wong, Xue, & Xu, 2007). Literature showed that good communication would increase patient satisfaction and trust among nurses, patients, and family members and also decrease the patients' blood pressure, pain, and anxiety during hospitalization. On the other hand, failure in communication could lead to stress, errors in diagnosis, decrease of patient participation in care plans and information exchange, poor outcomes, and even death (Meyer & Arnheim, 2002; Leonard, Graham, & Bonacum, 2005). In a recent study made by Xie and others (2013) it is proved that most medical errors were not caused because of defect in medical technologies or negligence of healthcare providers; rather, they were absolutely related to ineffective communication between patients and nurses.

The results of different researches showed that nurses were not successful in communicating with patients and families. The above literature review encourages the researcher to take up a study on nursing communication skills and address the importance of them for a successful nurse.

Holistic Approach in Nursing Care

This research article would like to address the role of communication skills in holistic nursing. The researcher would like to demonstrate the link between the communication skills and the psychosocial and spiritual needs of the patients. Before addressing the relation or impact of communication on holistic nursing care it is important to know the holistic approach developed in nursing care and how does it work in optimizing the patients' recovery from illness.

The basic need of humans is sound health which brings fitness and readiness to fulfill their goals. Maintaining balance among the biopsychosocial and cultural needs is a strong indicator of sound health (Berg GV, Sarvimäki A, 2003; Kostak MA, 2007). So, maintaining good health is not simply physical fitness but it is an entity of biological, psychological, social and spiritual attributes which are placed adequately to make a complete man. It can be inferred from this point that a man is complete when he is mentally satisfied with physical fitness. There are several factors that contribute to the sound mind of a human being. Again this sound mind is interrelated to the physical fitness of the body. Thus it is assumed that an ill person can be treated on holistic approach where it is a philosophy of understanding humans by addressing factors that affect humans in all situations. The various factors that affect human beings way of living are the patient's thoughts, feelings, culture, beliefs, and attitudes in harmony with his or her body, mind, and spirit. So, an ill person can be treated well by integrating the patient's physical, psychological, and emotional needs. Carlo Mariano in one of her writings on holistic nursing documented that this type of treating based on holism was promoted by Florence Nightingale that focused on unity, wellness, and the interrelationship of humans, events, and environment. This idea was first enrooted by Hippocrates in his inference theory, in which he proposed that the mind and body affect each other. So, in view of holistic care when a sick person is hospitalized it is responsibility of healthcare professionals to diagnose his sickness based on evaluation of his body, mind and soul.

The patient's physical, psychological, and emotional needs can be addressed by establishing and maintaining a healthy connection with his or her social and cultural beliefs. Generally feelings, thoughts, emotions and habits vary from one person to another person based on their culture, beliefs, traditions and spiritual practices. So, when a person is sick it is important to treat his body and mind wholly to bring him to normalcy. Since the patient is more connected to the nurse rather than the doctor it is important for a nurse to maintain a balance of body, mind, and spirit with which the person will achieve a healthier, happier, and more satisfied life. The nurse is the responsible person in facilitating the healing process by respecting the patient's subjective experience about health, health beliefs and values.

Patient's physical illness reflects their psychological stature which brings changes in their emotional and spiritual attitude. Their dependency on others make them feel insecure and inconsistency in their

behavior. This type of inconsistency will have an effect on their physical health as Hippocrates believed that body, mind and soul are interrelated and they affect each other. So, nurse holds the major share among other healthcare professionals to assist patients in making them view as an individual and motivates them to take self-care and self-responsibility for early recovery.

Use of Communication Skills in Psychosocial Care

As already mentioned the use of the term holism is based on the idea that a combination of factors are responsible for the well being of people, therefore emotional, spiritual, cultural, social, mental and material aspects of experience cannot necessarily be separated from one another. The term psychosocial is a combination of psychological and social aspects. Psychological aspects are those that affect mind at different levels of functioning and social aspects concern to relationships, family and community networks, cultural, traditions and economic status.

These two aspects are closely intertwined which impose effect upon each other in a cyclic manner. For instance the patient not having good relationships in a family will be psychologically disturbed leading to depression. Here, two possibilities can solve the problem such as by correcting the family relationship or providing psychological support by other means. In case of psychiatry patients it is necessary for care givers to instill psychological strength in the minds of the patients for their recovery. Even in case of a normal patient the provision of psychosocial support is part of the humanitarian relief and early recovery efforts.

The continuous physical sufferings, loss of hope in recovery, staying away from home and financial crises are some factors which affect the patients' way of thinking. Especially people suffering from chronic or acute diseases lose hopes on life and they expect somebody to listen and console them. Since nursing personnel are available most of the day it is convenient to open up a dialogue with them and can begin to understand how patients view themselves as individuals, what is important to them, and how their relationship with others may affect their decisions and their ability to live with those decisions during their treatment and beyond (Ellis et al 2006).

Some patients will have to come to terms with progressive illness and approaching death, others may be faced with the physical, emotional and social challenges of survival. In this way each patient will experience a range of psychological and emotional challenges as a result of their diagnosis and treatment-related adverse effects. Nurses play a unique role in supporting such patients by building dialogue with patients where they can begin to understand how patients view themselves as individuals, what is important to them, and how their relationship with others may affect their decisions and their ability to live with those decisions during their treatment and beyond (Ellis et al 2006)

Nurses strive to treat patients individually as each patient requires specific physical, symptomatic and psychosocial care (Watts, Botti and Hunter 2010). The provision of good psychosocial care has been shown to be beneficial for patients by reducing both psychological distress and physical symptoms through increasing quality of life, enhancing coping and reducing levels of pain and nausea with a consequent reduction on demands for hospital resources (Carlson and Bultz 2003).

Being a good listener is a key to providing patient-centered care that conveys empathy for the person as well as interest in his or her health problems and concerns. The patient feels that the nurse is an attentive listener who is comforted, reassured, and more likely to leave the encounter with a positive impression. Equally important, the nurse obtains essential information from the patient. The nurse should be amicable, putting up with good conversation, talking in an assertive manner avoiding imperative voice, listening patiently to the patient's physical, personal problems to build a congenial relationship. In a study, researchers found that only 12 percent of diagnoses were based solely on physical examination and only 11 percent on laboratory findings. Although the physical examination and laboratory investigations were instrumental in excluding some diagnoses and increasing the clinicians' confidence in the ones they reached, the patient history led to the final diagnosis in 76 percent of the cases studied.

Listening to the patient involves different sub-skills of four language skills like listening actively by nodding the head, making facial expressions, briefing the statements, paraphrasing the words of the patient

creating a belief that she is listening. For instance let us see a quoted example about a conversation between a Patient and nurse which is adapted from "A Quick Reference Guide for Clinicians- Communicating with Patients".

Patient: The headaches get even worse when I come home at night and still have work to do.

Clinician: So you're already exhausted when you get home, and the headaches get worse when you think about all you have yet to do.

Then posing a question in case of clarification of the patient's statement is also important.

Clinician: Are you saying that the pain is worse when.....?"

Nurse should be good at summarizing briefly what the patient has said as a way of clarifying, empathizing, and transitioning to a discussion of next steps, e.g., diagnostics and treatment.

Questioning is one of the important component in conversing with a patient. The way of questioning should be varied according to the context. Asking questions to yield information needed to make an accurate diagnosis and provide appropriate care is of one type and asking questions to offer support is a way of expressing interest and getting the patient's perspective on the health concern is of another type. The nurse should be clever enough framing the questions based on the types of information needed. Nurse should ask open-ended questions to engage the patient and learn more than a "yes" or "no" answer allows. – How would you describe the pain? – How often does this occur? – How have you handled this problem in the past? When closed-ended questions are required, try to alternate them with open-ended ones to keep the patient involved and avoid the appearance of rote or rushed approach. Nurse should be tactful enough in introducing a series of closed-ended questions by saying, "Now I'd like to ask you several questions that will give me some important information...."

It is important for a nurse to remember always that she is not totally meant to serve a patient fully on physical level. Very often there is a need to converse with them intellectually to satisfy their psychological needs. Center for Disease Control, USA, in 2005 declared that mental and behavioral health care plays a significant role in the prevention, diagnosis and/or treatment of the 15 leading diseases that causes death in the United States. The stress and anxiety released among patients will decrease the immune levels of the patients. This has been proved by studies made more than 300 on measuring the impact of psychological problems on immune system of a patient (Miller & Segerstrom, 2004)

Use of Communication Skills in Spiritual Care

Serious illness can have a disorientating and depersonalizing effect on a patient, making them vulnerable or powerless as events and suffering overtake them. In that phase of life questions of spiritual nature rises in the minds of patients regardless of their religious faith or no faith. This is especially the case when someone is approaching the end of their life or suffering from long illness. In hospitals or other care settings it is often nursing staff or caretakers who are presented with the signs of spiritual distress and so the ability to recognize this is essential in order to support the patient as meaningfully as possible. In such cases the purpose of a nurse is to identify spiritual need in their patients and to be able to provide it.

Generally people express compassion with sick people to console them. The conversations made with such persons involve spiritualistic conversations. It facilitates them to come out of their ill feelings and provides a mental comfort. Since nurses establish rapport with patients often deliver good spiritual care without realizing it and factors that enable this to happen include continuity of care, active listening and effective communication. A prerequisite for providing good spiritual care may be the presence of someone with a caring attitude so that patients, and their relatives or friends in certain situations, feel reassured.

In the periodical nursing literature spiritual care is considered as a recognized practice of holistic care and identified as an important practice to quality care. Patients' spirituality is interwoven with their religious beliefs and practices which are to be assessed and recognized by nursing professionals. In the process of this it is important that caregivers have an open mind and tolerance towards others' views and beliefs (Wilding, 2007). However a broad understanding of religious culture will assist in identifying the spiritual crisis the patient is facing. There will be some atheist patients who do not believe in God and some agnostic patients

who question the presence of God. To listen to their beliefs and give support to them is very challenging for a nurse.

Nurses can gain understanding of patients' spiritual needs during conversation, wherein they have to establish rapport with them. Establishing rapport means encouraging patients to recall memories and experiences that give them a sense of worth (Rumbold, 2007). It is important for a nurse to build the conversations towards their past and make them identify their achievements such as their job or family can all positively impact on patients' mood and sense of wellbeing. In such cases the patients become moody and don't want to reveal themselves. It becomes necessary for a nurse to probe questions and make a smooth conversation which would touch their heart and begins reciprocation. If the patients make incomplete sentences out of ill feeling, the nurse should be active enough to complete their sentences and keep a track of continuous conversation.

Here, listening is given more importance rather than hearing since the patients are to be convinced that they are attended by someone feeling that there is someone for them in this world. Attending to such philosophical attitude is very challenging for a nurse. Nurse should be equally demonstrative in paraphrasing the dialogues spoken by the patient making them feel that there is someone to listen to them.

Khan & Steeves in their study says that providing answers to the questions about the reasons for physical illness, or convincing a patient who has psychological distress is far easy than satisfying a patient who is spiritually distressed. Questioning about the reasons for his suffering is a common spiritual doubt arises in the patients irrespective of their religion or creed (Harrison, 1993). Characteristics of spiritual distress include questioning one's relationship with God, attempting to identify religious idols, guilt feelings and a variety of somatic relationships (Harrison, 1993). Questioning meaning and purpose of life, expressing anger toward God, refusing to participate in usual religious practices, considering illness as God's punishment, seeking spiritual assistance other than usual spiritual or religious support (Tucker, Conobbio, Paquette, & Wells, 1996, p.52) are some of the common internal conflicts the patients face during the period of illness.

Generally people feel discomfort to discuss about the spirituality since they see it as synonymous with faith based beliefs which differ from patient to patient. People are conservative in discussing about other faith or religious beliefs. But, being a nurse it is important to resolve the spiritual problems of their patients which bring them a kind of comfort and strength leading to positive effect on their physical illness. Since the primary responsibility of a nurse is to drive the patients towards recovery from illness, nurse should come forward to attend the spiritual problems of the patients which have affect on their recovery rate.

In many cases people do not know how to initiate the spiritual talk with the fear of being disrespectful or upsetting someone, but, nurse as a well wisher should interact with patients in an open way asking several open ended questions about their spiritual experience. There is an example provided in the article "Role of Spiritual Care" about how to initiate the spiritual talk with the patients is quoted below.

- Tell me a bit about yourself?
- How are you in yourself?
- How has this illness affected you or your family?
- Are their particular things that are on your mind at the moment?
- Is there anything or anyone that you find helpful in times of trouble?
- Is there anything that makes it more difficult to cope with (the pain, to sleep) at the moment?

It is important to recognize that patients come to hospitals to seek care for their medical condition. In delivering this care, physicians and nurses can be respectful and understand the spiritual dimension in patients' lives. Understanding of patient's spiritual dimension involves activities like practicing compassionate presence, listening to patients' fears, hopes, pain, and dreams, obtaining a spiritual history, at times providing in-depth spiritual counseling and so on. Research studies have also addressed this issue. In the *USA Weekend Faith and Health Poll*, 65% felt that it was good to speak with them about their spiritual beliefs⁴. A study of pulmonary outpatients at the University of Pennsylvania found that 66% agreed that inquiry about spiritual beliefs would strengthen their trust in the care; 94% of patients for whom spirituality was important

wanted to address their spiritual beliefs and be sensitive to their values framework. 50% of patients for whom spirituality was not an important felt to have inquiry about spiritual beliefs in case of serious illness⁵. There were some examples provided in the research article "*The Role of Spirituality in Nursing Care*" about the providing of spiritual care are discussed below.

A 28 year-old woman who had HIV refused to have treatment and kept referring to God and questioning herself why God was doing this to her. Then the in charge nurse probed the patient comment on her previous experiences. She proceeded to tell about being raped as a teenager and having an abortion. She believed that was wrong and said that: "I have been waiting for the punishment, and this is it." She did not want to discuss treatment or preventive care such as immunization. She had a series of counseling where discussions were held about her issues of guilt and punishment as well as some education about HIV. But it was not until one year later that she was willing to seek treatment. She needed time to work out her own issues of guilt before being able to accept her illness and deal with it. She tells that if nurse had not addressed her spiritual issues in that first visit, she would never have returned to take treatment. In many patients' lives, spiritual or religious beliefs may affect the decisions they make about their health and illness and the treatment choices they make. It is critical that the health care providers listen to all aspects of patients' lives and address them can affect their decision making and their coping skills.

Another incident is about a 42-year-old woman with irritable bowel syndrome had several signs of depression, including insomnia, excessive worrying and decreased appetite. Overall, she felt she had no meaning and purpose in life. She did not respond to medication and diet changes alone. She improved when meditation and counseling were added to the treatment regimen. As shown in the first case, some spiritual stances developed negative effects: more depression, poorer quality of life, and callousness towards others. This is seen when patients view a crisis as a punishment from God, have excessive guilt, or have absolute belief in prayer and a cure and then can't resolve their anger when the cure does not occur. But, at the same time if spiritual thoughts are guided by counseling in a right way there will be a positive coping. Patients seek control through a partnership with God, ask God's forgiveness and try to forgive others, draw strength and comfort from their spiritual beliefs, and find support from a spiritual or religious community. These actions lead to less psychological distress⁶. It is the responsibility of nurses to draw interactions with patients regarding the eternal force, appreciation of God's creation which instills a positive attitude towards life. They should be able to prolong the conversations to develop interest upon their lives.

Providing good psychosocial and spiritual care includes good communication skills, both verbal and non-verbal. Communication in this context of care includes conversational skills to convey empathy and support and to provide medical information that is understood and retained. Ritchie writing on importance of psychosocial care to cancer patients documents that a good relationship of nurses with patients is based on trust, being open and honest, understanding, being present, respect, setting mutual goals and providing social support (2001). This relationship can be an important support and buffer for life ending patients like cancer patients experiencing distress (Rodin et al 2009b). This type of relationship can be achieved by verbal communication. This is evidenced in an empirical study conducted by Rodin et al where it is inferred that verbal communication is crucial to build and maintain a congenial relationship, to transmit information, to provide support and to negotiate treatment decisions. Non-verbal communication is seen by patients as indicators for good or bad news just as much as the actual words spoken. It is essential for a nurse to understand the patients' needs and to create an environment in which the patient feels comfortable and safe to express their feelings. This therapeutic relationship plays a vital role to patients and their families to relieve their stress, and develops a feeling of being cared and looked after well. This type of therapeutic communication has shown the indication of higher recovery rates among patients especially in case of surgical patients.

Physical ailments lead to anxiety, depression, insecurity and feeling of isolation which can be encountered by effective communication skills through a feeling of security, empathy and encouragement to suffering patients. Different patients will have different requirements in different situations. It is the

responsibility of a qualitative nurse to explore and assess the type of needs the patients require and try to satisfy those needs. The age and gender of the patient can have an impact on the relationship built. For instance an old patient ailing with old age problems will expect a spiritual discourse which will provide him a soothing effect. In such cases the nurse should be able to recognize the patients' feelings and involve in a spiritual discussion. Even there will be a difference in tactics when discussing the same complex issues with patients of different ages. This view has been asserted in a study stating that it is important to provide informational support that consists of the availability and provision of concrete and age-appropriate information (Zebrack et al 2010).

Thus holistic nursing incorporates a sensitive balance between art and science, analytic and intuitive skills, and maintains a situational and context specific communication skills to make the patients satisfied physically, mentally and spiritually. It is not how long a nurse spends with a patient but how did she use that time. Nursing is a tough profession as it is physically, mentally, and emotionally draining at times as nurse has to deal with the patients physical, psychological and emotional needs of the patient.

Meet the Challenges of Holistic Care

So far the holistic care and its importance in nursing care is discussed. The different concepts underlying holistic care are discussed briefly. But, the concept of spiritual care is a daunting prospect for many nurses. The differing beliefs, requirements and expectations of patients stand out with a significant challenge. How can the nurse become more confident and better equipped to meet it? Many nursing interventions provide a degree of spiritual support. It is believed that the very essence of good nursing is to help a person attain or maintain wholeness in every dimension of their being. Being with clients, listen to their concerns, empathize and respond, is therapeutic when it comes to meet the needs of the human spirit - the need for love and relatedness, meaning and purpose, and hope. Often nurses fail to recognize and document this excellent and appropriate care.

Language class can inculcate moral, spiritual and ethical values among the students. So, students should be trained or taught in these lines by conducting the English classes during the course of their study. The textbook provides confidence and interest in learning. There are many nursing texts that give an overview of the religious/spiritual requirements of a number of major faiths. eg. Kozier and Erb's chapter on Spiritual Preferences in Fundamentals of Nursing, or Lippincott's Nursing and Spiritual Care (McGilloway and Myco eds.). These lessons can be adapted or adopted into English language textbooks which will be helpful in enhancing their cultural, spiritual knowledge. In addition to this there should be some exercises based on these concepts which would train the students to communicate in different contexts of care.

The English textbook should be a resource for them to learn the communication skills demanded by their profession. The various researches held on the communication skills for nursing profession discussed the range of communication skills available to health professionals. The different studies conducted by Harrison and Hart (2006), Northouse and Northouse (2004) and Robb et al (2004) in different places reveal a set of uniform points regarding the nursing communication skills such as the following. Nurses can facilitate successful and therapeutic patient contact through questioning, listening, summarizing, reflecting, paraphrasing, set induction and closure. In another study it is found that nurses use these skills on a daily basis to: gather information; reassure; facilitate patient expression; harness attitudes, views and opinions; encourage critical thinking; reduce anxiety; facilitate liaison with other disciplines; and promote continuity in patient care (Murray et al, 2006; Berry, 2007).

All the above skills are to be incorporated among nursing students during their training period. The language textbook should take care of these skills by introducing them in their content so that the students get optimum exposure to these skills. The activity based teaching should be carried out so that the students will have practical exposure to the skills. The teaching of English at this juncture should be to build up a knowledge base that will equip the nurses to understand the particular psychological, social, spiritual and religious needs of the patients. This knowledge is primarily obtained by providing group activities, pair activities role plays, dialogue writing among many others.

In many societies culture and religion are closely woven together. A working knowledge of major religions - especially their beliefs regarding issues such as health and illness, suffering and death - will be highly relevant to nursing care. Knowledge of customs, ceremonies, cleanliness/hygiene rules, and food laws will be of practical value. These concepts should be incorporated in their English textbook which will empower them with adequate knowledge and the skills of communication.

Language lab is also an important resource for making the students competent in holistic care. Showing the visual clippings on events concerned to holistic care brings them awareness towards such activities. Nursing student can visualize the various situations where the nurses develop conversations with patients and their family members under different contexts of psycho spiritual care. Even audio tapes will provide them the conversations of nurses with different patients in different contextual situations. They provide them good experience to the students and they are more effective rather than oral teaching in the classrooms.

Even various websites which are created for holistic care can be guided by the instructors in the language lab through which they can have a wide range of exposure to the concerned theme. Instead of sticking to a single prescribed textbook and limited teaching in the classroom the students can have a glance over a number of sites which derives more knowledge and experience about holistic care and approaches to implement it.

Providing real situations by conducting mock performances, role-pays, jam sessions, debates and workshops in the classroom will have a wider scope of learning since the students practically involve in them.

Finally the research paper concludes that promoting social, religious and spiritual encouragement by establishing appropriate educational, management systems will induce nurses to provide holistic care and ultimately improve the quality of their caring.

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