Supplementary Files 1

The Spiritual Comfort Framework and Population health: Stimulating spiritual involvement among
African Americans within the context of depression
Abstract, Approval Letter and Photograph Consent

The Spiritual Comfort Framework and Population health: Stimulating spiritual involvement among African Americans within the context of depression

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Outreach Initiative

This initiative aims to explore the impact of the Spiritual Comfort (SC) framework (Figueroa, 2008) designed to: 1) increase spiritual comfort levels among nurses and other health care professionals within their practice; 2) stimulate spiritual involvement on indicators of population health (National Institutes of Health, 2018) for African Americans within the context of depression.

Problem Statement/Background

Despite extensive evidence demonstrating the impact of spirituality on African Americans' health, research suggest that health care professionals feel uncomfortable incorporating spirituality in therapy (Cone & Giske, 2016; Figueroa, 2012, Peavy, Garrett, Doyle & Donovan, 2017). This maybe a problem in providing culturally competent care for African Americans within the context of depression. Moreover, there is a gap in the literature on testing strategies to increases spiritual comfort levels of nurses striving to incorporate spirituality into their practice when caring for African Americans within the context of depression.

African American families with members between the ages of 17 and 85 (N = 30; n = 63) and diverse groups of mental healthcare nurses between the ages of 29 and 68 (N = 30) spiritual perspectives and spiritual comfort levels were investigated for significant differences within the context of depression (Figueroa, 2009). The nurses reported working with individuals who had an Axis I diagnosis of clinical depression. The families included members who self-reported an Axis I diagnosis of clinical depression and no other mental illnesses. All participants lived in the Hampton Roads, Virginia, area at the time of the study. A descriptive statistical quantitative design and Colaizzi's (1978) phenomenological qualitative method were used. Participants' spiritual perspectives were measured by Reed's (1986) spiritual perspective scale (SPS), and spiritual comfort levels were measured by Figueroa and Baker's (2009) spiritual comfort level indicator (SCLI). A two-part semi-structured interview guide facilitated participants' descriptions of spiritual perspectives and experiences of spiritual activity within the context of depression. The SPS and the SCLI reported having internal consistency reliability (Chronbach's alphas = 0.92 & 0.88 respectively). Content validity was establish for the interview guide. Findings indicated the families and nurses had high scores on the SPS. However, the families scored significantly higher on the SCLI. Implications for nursing practice and research included using the SC framework by Figueroa (2008) to help increase comfort levels of nurses incorporating spirituality into their practice.

Hypotheses for this study

There is a difference in the spiritual comfort levels as measured by the spiritual comfort level indicator (SCLI) of nurses who were trained to incorporate the SC framework in population health and nurses who were not trained to incorporate the SC framework in population health for African Americans within context of depression.

Methodology

Participants will consist of diverse groups of mental healthcare nurses and nursing students. A descriptive statistical quantitative design and the Colaizzi's (1978) phenomenological qualitative method will be used to examine participants' spiritual comfort levels and perceptions regarding spiritual involvement in population health for African Americas within the context of depression. Results, and interpretation are pending.

https://www.eventbrite.com/e/sowing-the-seeds-of-health-equity-growing-healthy-connected-communities-tickets-48715040999? aff-ebdssbdestsearch

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Supplementary Files 2

NORFOLK STATE UNIVERSITY DEPARTMENT OF NURSING AND ALLIED HEALTH NORFOLK VIRGINIA 23504

CONTRIBUTOR CONSENT FORM Image/Photograph

By signing this consent form, you are approving and granting permission to use a duplicate/copy of your image/photograph taken at the Health Equality Conference: Think Tank in Richmond Virginia on October 18, 2018. The image/photograph will be used in a research report as a figure or as a supplementary file. The report will serve as a scholarly article disseminating information regarding the research project: Spiritual Perspectives and Comfort Levels of African American Families and Mental Health Nurses in the Context of Depression . This article will be submitted for publication no later than January 18, 2019. The purpose of this study was to compare spiritual perspectives and comfort levels of African American families with mental health nurses within context of depression. You have been given information verbally and in written format about the project and the use of your image/photograph and assured that your name will be kept private by the primary investigator. There is no cost to you or the investigator for using the image/photograph in the article during the submission, review, approval, or publication processes.

By signing below, you are agreeing that the information has been explained to your satisfaction. However, if you have any questions regarding this process you may contact Dr. Lydia Figueroa, the study's primary investigator, at (757) 561-3747. This Consent Form is valid only if it has been signed by the primary investigator.

Signature of Primary Investigat	or	Date
Signature of Contributor		Date

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