POSITION STATEMENT

Faith Community Nursing and Spiritual Care Nursing

Distinct and Complementary Nursing Specialties Advancing Whole-Person Care Across the Continuum of Health and Healing

Position Statement of the Westberg Institute

Approving Body	Westberg Institute for Faith Community Nursing
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Introduction

As healthcare increasingly recognizes spirituality as an essential dimension of whole-person, person-centered care, nursing continues to expand its capacity to address the spiritual needs, strengths, and resources of individuals, families, and communities (American Nurses Association [ANA], 2021; Burkhart & Hogan, 2008; Puchalski et al., 2014). This evolution has led to increased interest in nursing roles that intentionally integrate spirituality into professional nursing practice. Along with this growth has come questions regarding the relationship between Faith Community Nursing and Spiritual Care Nursing.

Although both specialties intentionally integrate spirituality into nursing practice, they developed from different historical contexts, are guided by distinct philosophical foundations, and serve complementary roles across the continuum of health and healing. Faith Community Nursing emerged from the wholistic health movement initiated by the Rev. Dr. Granger E. Westberg and is primarily practiced within faith communities, where it integrates health and faith through professional nursing practice (Tubesing et al., 1977; American Nurses Association & Health Ministries Association [ANA & HMA], 2024). Spiritual Care Nursing emerged in response to the growing recognition that spirituality is an essential dimension of healthcare and prepares registered nurses to provide evidence-based spiritual nursing care within healthcare organizations and other clinical settings serving increasingly diverse populations (Burkhart & Hogan, 2008; Puchalski et al., 2014; Ferrell et al., 2020).

The purpose of this position statement is to clarify the relationship between these two nursing specialties by describing their historical development, philosophical foundations, distinguishing characteristics, and complementary contributions to professional nursing. It affirms that Faith Community Nursing is an established nursing specialty and that Spiritual Care Nursing is an emerging nursing specialty. While each specialty has a distinct professional identity, both share a commitment to whole-person care, respect for human dignity, evidence-informed practice, interdisciplinary collaboration, and the ethical integration of spirituality into nursing care (ANA, 2021; ANA & HMA, 2024).

The Westberg Institute further affirms that Faith Community Nursing and Spiritual Care Nursing strengthen continuity of spiritual care across the continuum of health and healing. Neither specialty replaces professional chaplaincy. Rather, Faith Community Nurses, Spiritual Care Nurses, and professional chaplains contribute complementary expertise that expands the capacity of faith communities and healthcare organizations to provide compassionate, coordinated, and whole-person care (Cadge & Sigalow, 2022; Massey et al., 2015).

By clarifying the unique and complementary contributions of these specialties, this position statement seeks to support healthcare organizations, faith communities, nurse leaders, educators, researchers, and policymakers in advancing collaborative models of care that promote health, healing, and human flourishing.

Position Statement

The Westberg Institute affirms that **Faith Community Nursing** is an established nursing specialty and that **Spiritual Care Nursing** is an emerging nursing specialty. Although these specialties developed from different historical contexts and serve distinct roles within professional nursing, both intentionally integrate spirituality into nursing practice to promote whole-person, person-centered care.

Faith Community Nursing and Spiritual Care Nursing are characterized by distinct philosophical foundations, competencies, and practice contexts that contribute uniquely to the health and well-being of individuals, families, and communities. Together, they strengthen continuity of spiritual care across the continuum of health and healing while advancing the nursing profession's commitment to addressing the physical, psychological, social, cultural, and spiritual dimensions of health.

The Westberg Institute affirms that these nursing specialties are complementary rather than competitive. Faith Community Nurses and Spiritual Care Nurses collaborate with one another, the interdisciplinary healthcare team, and community partners to promote health, healing, hope, resilience, meaning, and human flourishing.

The Westberg Institute further affirms that neither Faith Community Nursing nor Spiritual Care Nursing replaces professional chaplaincy. Professional chaplains remain essential members of the interdisciplinary spiritual care team, contributing specialized expertise that complements the professional nursing roles of both specialties. Through mutual respect, clearly defined responsibilities, interdisciplinary collaboration, and appropriate consultation and referral, Faith Community Nurses, Spiritual Care Nurses, and professional chaplains together expand the capacity of faith communities and healthcare organizations to provide compassionate, coordinated, and whole-person care.

The Westberg Institute encourages healthcare organizations, faith communities, educators, researchers, professional nursing organizations, and healthcare leaders to recognize and support the complementary contributions of Faith Community Nursing, Spiritual Care Nursing, and professional chaplaincy in advancing whole-person care across the continuum of health and healing.

Historical Development of Faith Community Nursing

Faith Community Nursing emerged from the wholistic health movement initiated by the Rev. Dr. Granger E. Westberg during the 1970s (Tubesing et al., 1977; Westberg, 1990). At a time when healthcare was becoming increasingly specialized and disease focused, Westberg envisioned a more integrated approach that recognized the inseparable relationship among the physical, emotional, social, and spiritual dimensions of health (Tubesing et al., 1977). He believed that faith communities could play an important role in promoting health, supporting healing, and caring for individuals throughout the lifespan (Westberg, 1990).

This vision led to the development of the Wholistic Health Centers, where professional nurses worked in partnership with physicians, clergy, mental health professionals, and community volunteers to provide comprehensive, person-centered care (Tubesing et al., 1977). Rather than separating health from faith, Westberg proposed that individuals experience health and healing most fully when these dimensions are intentionally integrated within supportive communities (Tubesing et al., 1977; Solari-Twadell & McDermott, 2006).

From this foundation, the Parish Nurse movement was established during the early 1980s. The specialty prepared registered nurses to practice within faith communities, integrating professional nursing with the beliefs, values, traditions, and life of the congregation while promoting health, supporting individuals experiencing illness, coordinating care, and strengthening connections between faith communities and healthcare organizations (Solari-Twadell & McDermott, 2006; ANA & HMA, 2024).

As the specialty expanded across diverse religious traditions and settings, the title *Faith Community Nursing* gradually replaced *Parish Nursing* to more accurately reflect practice beyond Christian congregations while preserving the specialty's historical foundations and professional identity (ANA & HMA, 2024).

Today, Faith Community Nursing is recognized as an established nursing specialty. Guided by the *Faith Community Nursing: Scope and Standards of Practice* (ANA & HMA, 2024), the specialty continues to advance whole-person care through professional nursing practice that intentionally integrates health and faith within the context of faith communities. Faith Community Nurses serve individuals, families, congregations, and communities through health promotion, disease prevention, care coordination, education, advocacy, and support across the continuum of health and healing (ANA & HMA, 2024).

Historical Development of Spiritual Care Nursing

Spiritual Care Nursing emerged from the growing recognition that spirituality is an essential dimension of whole-person, person-centered nursing care and that registered nurses require advanced knowledge and competencies to intentionally integrate spiritual care into professional nursing practice (Burkhart & Hogan, 2008; Puchalski et al., 2014; ANA, 2021). While nurses have long addressed the spiritual needs of patients as part of compassionate nursing care, increasing evidence, expanding healthcare complexity, greater religious and cultural diversity, and the growing emphasis on whole-person care highlighted the need for a more specialized nursing role (Taylor, 2012; Ferrell et al., 2020).

Building upon the nursing profession's longstanding commitment to holistic care, Spiritual Care Nursing developed as an emerging nursing specialty focused on providing evidence-based spiritual nursing care across diverse healthcare settings. The specialty integrates nursing science, contemporary spiritual care research, ethical practice, and interdisciplinary collaboration to assess spiritual strengths and concerns, implement evidence-based spiritual nursing interventions, develop Spiritual Nursing Plans of Care, evaluate patient outcomes, and coordinate care with other members of the healthcare team (Burkhart & Hogan, 2008; Puchalski et al., 2014).

Unlike Faith Community Nursing, which is practiced primarily within faith communities, Spiritual Care Nursing developed within healthcare organizations to address the spiritual dimension of health across increasingly diverse patient populations. The specialty emphasizes respectful, person-centered care that honors each individual's beliefs, values, culture, worldview, and sources of meaning while remaining within the professional scope of nursing practice (Puchalski et al., 2014; Ferrell et al., 2020).

Today, Spiritual Care Nursing continues to evolve as an emerging nursing specialty through ongoing scholarship, competency development, educational programs, clinical implementation, certification pathways, and research. The specialty seeks to strengthen the nursing profession's capacity to provide evidence-based, ethical, and culturally responsive spiritual care while working collaboratively with professional chaplains and the interdisciplinary healthcare team to advance whole-person care across the continuum of health and healing (Burkhart & Hogan, 2008; Ferrell et al., 2020; Ziebarth, 2026).

Philosophical Foundations of Faith Community Nursing

Faith Community Nursing is grounded in the discipline of professional nursing and is distinguished by its intentional integration of health and faith within the context of faith communities. Emerging from more than four decades of professional practice, scholarship, and the wholistic health vision of Rev. Dr. Granger E. Westberg, the specialty has continued to evolve while remaining rooted in its original commitment to whole-person care. Its continued maturation is reflected in the development of nursing theory, expanding research and scholarship, professional education, and the ongoing refinement of professional standards that collectively strengthen the specialty's knowledge base and practice (Westberg, 1990; Solari-Twadell & McDermott, 2006; ANA & HMA, 2024). Guided by the *Faith Community Nursing: Scope and Standards of Practice* (ANA & HMA, 2024), the specialty recognizes spirituality as an essential dimension of health and affirms that whole-person care is best achieved through attention to the physical, psychological, social, cultural, and spiritual dimensions of life. Building upon this historical and professional foundation, the philosophy of Faith Community Nursing is characterized by four foundational concepts.

1. Integration of Health and Faith

Faith Community Nursing intentionally integrates health and faith through professional nursing practice. Faith Community Nurses assist individuals, families, and communities in connecting their faith, beliefs, values, and spiritual practices with health promotion, illness, healing, recovery, and well-being. This integration recognizes that faith and

health often influence one another throughout the human experience (Westberg, 1990; Solari-Twadell & McDermott, 2006; Ziebarth, 2014; ANA & HMA, 2024).

2. Spirituality as Central to Health and Well-Being

Faith Community Nursing recognizes spirituality as an essential dimension of whole-person health. Spirituality influences meaning, purpose, hope, relationships, resilience, coping, and decision-making throughout the lifespan. Faith Community Nurses provide care that respects each person's beliefs, values, traditions, and spiritual journey while honoring human dignity and individual autonomy (ANA & HMA, 2024; Burkhart & Hogan, 2008; O'Brien, 2014; Ziebarth, 2014).

3. Wholistic Health and Healing

Faith Community Nursing embraces a wholistic understanding of health that considers the interconnectedness of body, mind, and spirit within families and communities. The specialty emphasizes health promotion, disease prevention, healing, self-care, advocacy, education, care coordination, and compassionate presence, recognizing that healing may occur even when cure is not possible (Westberg, 1990; Solari-Twadell & McDermott, 2006; ANA & HMA, 2024; Solari-Twadell & Ziebarth, 2020; Ziebarth, 2016).

4. Faith Community Relationships

Faith Community Nursing is practiced within the life of faith communities where long-term relationships foster trust, belonging, service, and mutual support. Faith Community Nurses partner with clergy, congregational leaders, volunteers, healthcare professionals, and community organizations to strengthen individual and community health while promoting compassionate care across the continuum of health and healing (Solari-Twadell & McDermott, 2006; ANA & HMA, 2024; Ziebarth, 2014).

Together, these four philosophical foundations distinguish Faith Community Nursing as a professional nursing specialty that integrates health and faith through evidence-informed nursing practice, collaborative relationships, and a sustained commitment to whole-person care within faith communities.

Historical Theological Foundations of Faith Community Nursing

Westberg defined wholistic healthcare as:

> *"...the metaphysical affirmation of body, mind, and spirit integrated in a whole, independent of and greater than the sum of its parts..." (Tubesing et al., 1977, p. 219).*

The theological assumptions underpinning Wholistic Health Centers and the subsequent development of Parish Nursing (now Faith Community Nursing) continue to inform the specialty today (Tubesing et al., 1977, p. 224):

1. Place Matters – The faith community serves as a symbolic and practical place of healing and ministry.
2. The Nature of the Person – Every person possesses inherent dignity and is an integrated unity of body, mind, spirit, and soul.
3. Sickness and Health – Illness affects the whole person, and healing may occur even in the presence of chronic or terminal illness.
4. Healing Agents – Healing is a shared responsibility among individuals, healthcare professionals, communities, and faith communities, with God recognized as the ultimate source of healing.

These principles were later expanded through the philosophical work of Solari-Twadell and McDermott (1999, 2006), who articulated Faith Community Nursing as a professional nursing specialty integrating nursing science, spirituality, faith traditions, health ministry, and community outreach.

The philosophy of Faith Community Nursing is rooted in the belief that health and healing are inseparable from spirituality and are nurtured within relationships with God, self, others, and creation. The faith community serves as both the context and the community of care, providing a foundation for health ministry, spiritual support, education, advocacy, and compassionate service. While grounded in a particular faith tradition, Faith Community Nursing extends beyond the faith community to promote health, healing, and social justice within the broader community.

Defining Faith Community Nursing

As Faith Community Nursing has matured as a professional nursing specialty, its definition has likewise evolved through professional standards, theoretical development, and scholarly inquiry. The following definitions illustrate this progression from professional practice to theoretical refinement and concept analysis.

Faith Community Nursing Scopes and Standards of Practice:

Faith Community Nursing is a specialized nursing practice that emphasizes intentional care of the spirit, promotion of whole-person health (body, mind, and spirit), and prevention or minimization of illness within faith communities and other community settings (American Nurses Association & Health Ministries Association, 2024.

Theoretical Definition:

Faith community nursing is a method of healthcare delivery that is centered in a relationship between the nurse and client (client as person, family, group, or community). The relationship occurs in an iterative motion over time when the client seeks or is targeted for wholistic health care with the goal of optimal wholistic health functioning. Faith integrating is a continuous occurring attribute. Health promoting, disease managing, coordinating, empowering, and accessing health care are other essential attributes. All essential attributes occur with intentionality in a faith community, home, health institution, and other community settings with fluidity as part of a community, national, or global health initiative (Ziebarth, 2014).

Philosophical Foundations of Spiritual Care Nursing

Spiritual Care Nursing is grounded in the discipline of professional nursing and is distinguished by its intentional integration of the spiritual dimension into the nursing process across diverse healthcare settings. Emerging from advances in spiritual care scholarship, nursing science, interdisciplinary collaboration, and growing recognition of spirituality as an essential dimension of whole-person care, the specialty continues to mature through theory development, research, competency-based education, and evidence-informed practice (Burkhart & Hogan, 2008; Puchalski et al., 2014; Ferrell et al., 2020; Ziebarth, 2026). Building upon this historical and scholarly foundation, the philosophy of Spiritual Care Nursing is characterized by four foundational concepts.

1. Pluralism

Spiritual Care Nursing affirms that every person possesses a unique spiritual identity shaped by beliefs, values, culture, worldview, life experiences, relationships, and sources of meaning. Spiritual Care Nurses provide respectful, person-centered care that honors this diversity without promoting or privileging any particular religious tradition, belief system, or worldview (Puchalski et al., 2014; Burkhart & Hogan, 2008).

2. Humanism

Spiritual Care Nursing recognizes the inherent dignity, worth, and uniqueness of every person. Human beings are understood as whole persons whose physical, psychological, social, cultural, and spiritual dimensions are interconnected. Nursing care seeks to preserve dignity, foster hope, support resilience, and promote healing throughout health, illness, suffering, and the end of life (Watson, 2008; Eriksson, 2007; ANA, 2021).

3. Phenomenology

Spiritual Care Nursing values the individual's lived experience as the foundation for understanding spiritual needs, strengths, and concerns. Rather than making assumptions about meaning, suffering, or spirituality, Spiritual Care Nurses seek to understand how each person experiences illness, healing, hope, loss, purpose, and transcendence within the context of their own life (Parse, 1998; Benner, 1984).

4. Ethics of Care

Spiritual Care Nursing is grounded in compassionate presence, authentic relationships, professional accountability, and ethical nursing practice. Spiritual Care Nurses cultivate therapeutic relationships characterized by deep listening, empathy, cultural humility, respect for autonomy, and appropriate professional boundaries while collaborating with

patients, families, professional chaplains, and the interdisciplinary healthcare team to promote whole-person care (Mayeroff, 1971; Watson, 2008; ANA, 2021).

Together, these four philosophical foundations distinguish Spiritual Care Nursing as an emerging nursing specialty dedicated to integrating the spiritual dimension into evidence-based nursing practice while advancing compassionate, ethical, and person-centered care across the continuum of health and healing (Ziebarth, 2026).

The Spiritual Care Nursing Model

The Spiritual Care Nursing Model (Ziebarth, 2026) is a concept analysis-based prescriptive conceptual framework that:

- Defines Spiritual Care Nursing.
- Defines the role of the Spiritual Care Nurse.
- Identifies the antecedents, attributes, and consequences of the specialty.
- Specifies expected competencies and outcomes.
- Identifies organizational requirements necessary for successful implementation.

The model provides the theoretical and practice foundation for defining, implementing, evaluating, and advancing Spiritual Care Nursing as a specialized area of professional nursing practice.

Definition: The Spiritual Care Nurse

A Spiritual Care Nurse is a registered nurse who has completed specialized education and demonstrated competency in conducting a Whole-Person Nursing Assessment that intentionally includes the spiritual dimension of health, developing a Spiritual Nursing Plan of Care, implementing evidence-based spiritual nursing interventions, evaluating patient outcomes, documenting nursing care, collaborating with the interdisciplinary healthcare team, and facilitating referrals when patient needs extend beyond nursing practice.

Shared Commitments

Although they developed from different historical contexts, Faith Community Nursing and Spiritual Care Nursing share several foundational commitments reflected throughout the nursing and spiritual care literature (American Nurses Association, 2021; American Nurses Association & Health Ministries Association, 2024; Burkhart & Hogan, 2008; Puchalski et al., 2014; Ziebarth, 2026). Both specialties:

- Integrate intentional spiritual care into professional nursing practice.
- Provide whole-person, person-centered care that addresses spiritual, physical, psychological, and social dimensions of health.
- Respect diverse spiritual beliefs, values, cultures, and worldviews.
- Promote healing, hope, meaning, resilience, and well-being.
- Utilize therapeutic relationships characterized by compassion, presence, listening, and trust.
- Collaborate with interdisciplinary teams and community resources.
- Uphold ethical nursing practice that honors patient autonomy and human dignity.

Despite these shared commitments, the specialties differ in their primary practice settings, relationships, professional focus, and methods of delivering spiritual care.

Distinctive Characteristics of the Two Specialties

Faith Community Nursing and Spiritual Care Nursing provide complementary nursing services across the continuum of health and healing. Individuals frequently move among faith communities, homes, outpatient settings, hospitals, rehabilitation facilities, long-term care, hospice, and community environments. Throughout these transitions, both specialties contribute to continuity of spiritual care by providing specialized nursing care within their respective practice settings and collaborating when appropriate (American Nurses Association & Health Ministries Association, 2024; Puchalski et al., 2014; Ziebarth, 2026). Together they strengthen nursing's ability to accompany persons and families through wellness, illness, suffering, healing, and human flourishing.

Despite these common principles, the specialties differ in their primary context of practice and professional focus.

Dimension	Faith Community Nursing	Spiritual Care Nursing
Primary Setting	Faith communities as the primary setting, with outreach into homes, community settings, and healthcare organizations	Primarily healthcare settings, including hospitals, clinics, long-term care, hospice, home health, and other clinical environments
Philosophical Orientation	Integrates health and faith through professional nursing practice and long-term relationships within faith communities.	Integrates the spiritual dimension into the nursing process for persons of all beliefs, faith traditions, and worldviews
Primary Relationship	Long-term relationships with individuals, families, congregations, and communities	Therapeutic nurse-patient relationships established during healthcare encounters and sustained according to patient needs and transitions in care
Primary Focus	Health promotion, disease prevention, whole-person health, care coordination, and strengthening the health of faith communities	Assessment, planning, implementation, and evaluation of evidence-based spiritual nursing care for patients experiencing health, illness, suffering, and transition

Note. Adapted from the *Faith Community Nursing: Scope and Standards of Practice* (American Nurses Association & Health Ministries Association, 2024), the Spiritual Care Nursing conceptual framework (Ziebarth, 2026), and the authors' synthesis of the nursing and spiritual care literature.

Continuity Across the Continuum of Care

Faith Community Nursing and Spiritual Care Nursing are complementary nursing specialties that contribute to whole-person care across the continuum of health and healing. Rather than functioning as competing or interchangeable specialties, each serves a distinct role within professional nursing while addressing the spiritual dimension of health in different practice contexts. Together, they strengthen continuity of care as individuals and families move among faith communities, homes, outpatient services, hospitals, rehabilitation facilities, long-term care settings, hospice, and community environments (American Nurses Association & Health Ministries Association [ANA & HMA], 2024; Puchalski et al., 2014; Ziebarth, 2026).

Faith Community Nursing developed from the wholistic health movement and has evolved into an established nursing specialty practiced within diverse faith traditions. Its professional identity is grounded in the intentional integration of health and faith through professional nursing practice, fostering long-term relationships that promote health, support healing, coordinate care, and strengthen the well-being of individuals, families, congregations, and communities (Westberg, 1990; Solari-Twadell & McDermott, 2006; ANA & HMA, 2024, Ziebarth, 2014; 2016).

Spiritual Care Nursing emerged within contemporary healthcare to address the growing need for evidence-based spiritual nursing care in increasingly diverse and pluralistic clinical environments. The specialty integrates the spiritual dimension into the nursing process by assessing spiritual strengths and concerns, implementing evidence-based spiritual nursing interventions, coordinating interdisciplinary care, and evaluating outcomes that promote meaning,

hope, healing, connection, and spiritual well-being during health, illness, suffering, and healthcare transitions (Burkhart & Hogan, 2008; Puchalski et al., 2014; Ferrell et al., 2020; Ziebarth, 2026).

When appropriate and with the individual's consent, Faith Community Nurses and Spiritual Care Nurses collaborate across healthcare organizations, homes, faith communities, and community settings to promote continuity of spiritual care. Such collaboration strengthens communication, supports transitions in care, reinforces personal and community resources, and reduces fragmentation during illness, recovery, chronic disease management, and end-of-life care (ANA & HMA, 2024; Puchalski et al., 2014; Ziebarth, 2026). By contributing their distinct expertise within their respective practice settings, both specialties enhance nursing's ability to provide coordinated, compassionate, and whole-person care across the continuum of health and healing.

Collaboration with Professional Chaplaincy

Professional chaplains, Faith Community Nurses, and Spiritual Care Nurses each contribute unique expertise to whole-person care. Professional chaplains provide specialized chaplaincy care for patients, families, and staff whose spiritual, religious, existential, or ritual needs require advanced preparation beyond the nursing scope of practice. Spiritual Care Nurses integrate evidence-based spiritual nursing care into the nursing process within healthcare settings, while Faith Community Nurses extend whole-person care through health promotion, spiritual support, long-term relationships, and community outreach (Cadge & Sigalow, 2022; Massey et al., 2015; ANA & HMA, 2024; Ziebarth, 2014; Ziebarth, 2026).

These professions are complementary rather than hierarchical. Effective collaboration is characterized by mutual respect, clearly defined professional roles, bidirectional referral pathways, shared commitment to patient-centered care, and coordinated support for individuals and families across the continuum of health and healing (Cadge & Sigalow, 2022; Massey et al., 2015; Ziebarth, 2026).

Conclusion

Faith Community Nursing and Spiritual Care Nursing are distinct yet complementary nursing specialties that strengthen the nursing profession's ability to provide whole-person, person-centered care. Together, and in collaboration with professional chaplains and the interdisciplinary healthcare team, they expand access to compassionate, evidence-based spiritual care across the continuum of health and healing while honoring the dignity, beliefs, values, and lived experiences of every person.

As healthcare increasingly recognizes spirituality as an essential dimension of health and well-being, both specialties continue to mature through professional practice, scholarship, research, education, and innovation. Their complementary contributions strengthen continuity of care, foster interdisciplinary collaboration, and enhance nursing's capacity to address the physical, psychological, social, cultural, and spiritual dimensions of health.

The Westberg Institute affirms that the continued advancement of Faith Community Nursing and Spiritual Care Nursing will depend upon ongoing scholarship, evidence-informed practice, professional education, leadership, and collaborative partnerships. By building upon their distinct histories, philosophical foundations, and shared commitment to whole-person care, these complementary specialties are well positioned to advance health, healing, human flourishing, and the future of professional nursing.

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