IJACT 19-6-6

What do Female College Students think about Spiritual Values?

Jungae Kim

Nursing Department, Chodang University¹ <u>jjosha6615@hanmail.net</u>¹

Abstract

The purpose of this study was to examine the meaning and structure of the experience of female college students. For this purpose, 22 female college students, regardless of age, participated in the interview three times in total. Interview data were processed through the analysis and interpretation process using the phenomenological research method, Giorgi method. As a result, 34 semantic units were derived, then divided into 14 subcomponents, and then divided into 6 categories. As a result of analysis, the spiritual value of female college students was composed of "family", "friendly person", "professional person", "empathy", "reflection" and "trust". Based on the above meaning, the structure of the spiritual value of female college students can conclude that they were a continuation of life that forms a strong sense of value and empathy and trust with patience with family and friends. Based on this, intervention on spiritual well-being of female college students suggests that intervention to form values based on empathy and trust based on family and close friends is implemented.

Keywords: College student, Giorgi Method, Phenomenology, Spiritual value.

1. Introduction

Recently, college students have reported the seriousness of the mental problems caused by the difficulty of employment, heterosexuality, interpersonal relationship, and appearance [1]. In general, women have a relationship-oriented characteristic of empathy sharing and emotional support through intimate interpersonal relationship and interaction [2]. According to the results of the community health survey conducted from 2008 to 2012, 66.6% of women thought of suicide and 62.7% of suicide attempts, while 33.4% of men thought about suicide and 37.3%, and women appear to be twice as likely as men [3]. At the stage of development, female college students are in a phase of establishing self-identity by exploring the values, such as love, profession, and world view, career and career choices, and marriage and the possibility of future family life [4]. Hope, confidence, and a strong identity for the future formed during this period could be said to overcome the difficult times of the future [5-7]. The spiritual realm, which is the essence of man, integrates the physical and psychosocial domains and promotes inner harmony and shalom, which potentially signify health [8], the spiritual realm is also a conscious, unconscious belief in the meaning of being in relation to oneself and the environment [9], therefore, spirituality would help find the solid identity of female college students.

In a study of female college students, depression, isolation, and psychological factors of stressful life events

Manuscript received: April 20, 2019 / revised: May 10, 2019 / Accepted: May 25, 2019 Corresponding Author: jjosha6615@hnmail.net Author's affiliation
Nursing Department, Chodang University

in their 20s reported that they lead to suicide [10-11]. From a philosophical point of view, Socrates defined the soul as the source of humanity, the soul is the moral aspiration of spiritual perfection, the source of life that brings the ability to breathe in the body and restore the spirit [12]. And Jung emphasized that the world is dominated by the unconscious rather than the self, and active imagination promotes the dialogue between self and unconsciousness and helps us to become conscious of the reality of the inner world (soul) [13]. Recent developments in science have extended the life span of people and free many people from the pain of disease. But on the one hand, the opposite phenomenon of giving up on your own life was ironic. This phenomenon could be thought of as a problem that occurs as a result of spiritual failure.

Spiritual well-being includes the state of well-being, that is, religious spiritual well-being, in the relationship with existential well-being, which focuses on the meaning and purpose of life for man, with the capacity to develop human spiritual nature as much as possible [14]. Groom emphasizes that spirituality is made human by focusing on the formation of man and the inner life, thereby integrating life and running a balanced life [15]. Spirituality is a concept that is derived from the Christian background as a term containing 'serious reflection on the universal mentality of man' [16]. However, it has been used extensively in almost all religious life and cultural areas in modern society, and the Spirit is being accepted as enlivening the direction and order of life and synthesizing the whole personality [17]. In other words, the spiritual dimension is understood not to exist separately from the human mind (psyche), the body (soma), but to provide an integrated force.

In recent research on spirituality, there has been a study in which social support and spirituality have a moderating effect on partners' abuse and depression [18]. There have been studies emphasizing the need for spirituality in social welfare practice [19], and there have been a number of studies on spiritual nursing [20-22]. The nurse's spiritual well-being had a positive effect on the attitude toward death [23], It was reported that spiritual well-being improves ego-resilience of nursing college students and positively affected adaptation to college life [24]. In particular, spiritual well-being was reported to be an opportunity to reflect seriously on the attitude toward death [25]. As mentioned above, in the field of nursing, spiritual value derived from confirming its value by applying it to clients close to dying. Addition to long term care [26] and spirituality, palliative care has been shown to be of great help [27]. According to Brun. M et al., A person with a negative attitude toward death has a high degree of anxiety about death and acts to avoid death [28]. In other words, death could be a question that makes the meaning of spirituality serious. It is the basis for the mediation of spiritual well-being to identify how they perceive spirituality as a unique entity, not a sum of all. However, there have been many studies on the effects of spiritual well-being. However, there is still a lack of research on the spiritual value of oneself when it comes to death. Confirming spiritual values by reflecting upon their own thoughts when they are near to death can provide basic data for preparing spiritual well-being interventions. The purpose of this study was to find out the spiritual value of female college students through the following questions. First, if I am at the end, who do I know who will look after me? Second, what personal qualities do you think are most valuable in life?

2. Method

2.1. Participants

A non-random sample was used to find participants who could provide a great deal of insight into the phenomenon in selecting research participants [29]. Specifically, the following process was performed. In order to elucidate specific aspects of the phenomenon, a number of female college students who were currently enrolled in college have been selected to voluntarily participate in the study, And a person who was able to respond positively to the interview in order to select the person who will provide a lot of information about the topic. The specific criteria of the participants were as follows. First, the research participants were college students attending college at the time of the survey. Second, thoughts on spiritual values were found in the spiritual care of the terminal patient [30], the mind and spiritual discrimination of the Korean [31], the spiritual well-The effects of emotional aging on empowerment [32], spiritual sensitivity in artificial intelligence [33]. Third, it was limited to those who explained the research purpose of this study, understood it, and were able to express their opinions frankly positively. Fourth, as an opportunity to look back on themselves through this

research process, this study was selected as a confirmed participant who believes that this study will help spiritual growth of participants. Fifth, this study was aimed at 22 female college students who promise to make the abbreviation of things that would be difficult because their personal life is revealed, and to express their intention to participate in understanding and realizing them. The characteristics of the study participants are shown in Table 1.

Table 1. Participants

Variable	Example	N(%)
	21-25	12(54.5)
	26-30	4(18.2)
	31-35	3(13.6)
Age	36-40	1(4.5)
	41-15	0(0)
	† 4 6	2(9.1)
Religion	Protestant	3(13.6)
	Catholic	1(4.5)
	Buddhism	1(4.5)
	None	18(81.8)
Favorite Subject	Nursing Science	6(27.3)
	Basic Nursing	4(18.2)
	Adult Nursing	4(18.2)
	Geriatric Nursing	1(4.5)
	Medical Term	2(9.1)
	Physical Education	1(4.5)

2.2. Data collection

For the preparation and process of the interview, the researchers regularly attended qualitative research meetings and examined research papers on how college students think about spiritual values. Participants were studying at G and J universities. The researchers selected 22 participants who expressed their intention to participate in the research. The process of preparing the interview questionnaire used in this study was as follows. In order to construct a research question, the spiritual sensitivity of female college students [34], the study of spiritual wellbeing [35], the idea of spiritual value [36], and the spiritual discernment of Koreans [31] were reviewed before making the questionnaire. As a result of the above literature review, the open-ended indepth interview consisted of the question about who will take care of themselves when they are terminal cancer patients and what are the most valuable individual qualities in life. Interviews were conducted three times per participant from December 1, 2018 to December 20, 2018, and took an average of 1 hour or more per session. All interviews were recorded with the participant's consent. The interview process was centered on semi – structured questionnaires made by the researchers. After completion of the first and second interviews, it was confirmed that there was no difference between the participants and the participants. The collected data were confirmed and supplemented by the participant. In addition, the personal characteristics of the research participants, the linguistic and nonverbal expressions observed during the interviews, and the feelings of the behaviors were recorded in the field notes, and the points to be noted in the analysis of the research and the data needed for analysis were summarized in the study journal.

2.2. Data analysis

This study used Giorgi's phenomenological analysis method which focuses on explaining the meaning of living experience through in-depth interview with the participants' technology. Giorgi's research method was composed of 'whole recognition', 'semantic unit classification', semantic unit into 'academic terms', and integration into structure. In this study, the following analysis was conducted according to the context. First, In order to get a feeling from the data, it was repeated as it was, and the subject's technique was read and pondered. Second, the ambiguous part of the technical inquiry was asked again to confirm the exact meaning. Third, the natural meaning unit of the expressive form or vocabulary was different from the expressive form of the participant. Fourth, the themes that could represent the participants' vivid experiences in each unit have been identified. Fifth, in order to materialize the subject, the focus meaning that the subject's experience means was identified in the language of the researcher. Sixth, the meaning of experience from the viewpoint of the participants by integrating the central meaning has been put into place structural description. Finally, the statement was reintegrated into a general structural description of the experience meaning from the perspective of all participants.

3. Result

3.1. If I am at the end, who do I know who will look after me?

The questions to know spiritual values were constructed based on the results of Trant AA et al [37] and Kirby ER at al. [38]. As a result, three components (family, friends, professional), six sub-components and twelve semantic units were derived (Table 2). The family was a person who wanted to be the closest to his death, to be a person to the end, to be with me forever, and to be a resting place in the heart. The closest person was that his boyfriend and husband gave him laughter and comfort. The people who thought that they were experts have a deep feeling that they did not want to burden others and a desired to face death quietly. The specific description is as follows.

Elemental Factors		Semantic Unit
	Parents	I want to be nearest
Family	Sister	Together to the end
	Grand parent	Eternal inner
Closest person	Boy friend/Husband	Laugh, Ease
	Expert	I want to go quietly, I do not
Expert		want to be burdened
	Nurse	Consideration
		Comfort of mind

Table 2. If I am at the end, who do I know will look after me?

Component 1. Family

If I am a terminal cancer patient, my family will look after me, especially my mother seems to care the most. The closest person to me is my family, and I think that my mom is the best person to know me and can make me comfortable. I think that there are only my family who want to see the family as the first thing to think about it and want to be together until the end.

I do not feel real, but if I am a terminal cancer patient, I have only parents who can take care of me. I do not want to be a burden to my parents, but even if there are a lot of people around, there will be only one family left after all. And I feel very sorry to my parents, I couldn't even make one's body. I was so depressed and heartbroken when I imagined that my country would have added loads.

My grandmother will take care of me. Because my grandmother always took care of me whenever I was

sick, and because my grandmother takes care of me from my perspective, it is the person who can feel most comfortable and dependable. My parents seem to be coming often because they have to pay hospital expenses.

My sister, who is usually one of the families, has a love affair with others.

I think my parents and my sister will look after them. It is more likely because it is the nearest being living in the same house and living together. However, because of livelihood and work problems, my parents seem to have to go to work.

Component 2. Closest person

In my situation right now, I think my boyfriend takes care of me.My boyfriend is very worried if I get sick, so if I am a terminal patient my boyfriend will take care of me. And not every day, but my friends around me will come and make me laugh. At this time, my husband seems to have looked after me. My husband is closer than my parents.

Component 3. Expert

I do not think there is a chance to live already, so I think I will pray together to go to a good place.

I would like a professional nurse to take care of me if there is a nurse around me.

I would like to go to the hospice ward and stay with people who are in terminal stages and be cared for there.

I think people around me, but they too can not dare to pour their precious time on me because they have their own lives.

I want to go quietly while living my life, thinking that I have just opened another life during the term.

If I have children, I do not want my children to care for me.

I want them to live their lives without me, to plan their future and to live for the future.

3.2. What personal qualities do you think are most valuable in life?

The question of qualitative qualities in life as a question of spiritual value was based on the work of Fitch MI et al. [39] and Groninger H et al. [40]. As a result, three components of the most valuable personal qualities in life were derived (empathy ability, reflection on oneself, confidence in others), 8 subcomponents and 22 semantic term (Table 3). The first component of personal qualities in life was expressed by empathy, the subordinate components by will, effort, sincerity, and communication ability. The second component is reflection, and subcomponents were self-knowledge, value. The third component was trust, and the sub components were personality and honesty. As mentioned above, the most valuable qualities in life were the ability to give trust to others and to empathize with others through reflection on oneself.

Table 3. If I am at the end, who do I know will look after me?

	Elemental Factors	Semantic Unit
Empathy	Will	Mind, Self-realization

	Effort	Opponent position, Understand
	Sincerity	Experience, Value, Steadfastness, Patience
	Communication ability	Mutual exchange, Problem solving, Recognition
		of difference, Human relations
Reflection	Self-knowledge	Self-understanding, Beautiful life, Reflection
	Value	Motivation, Solid heart, Courage
Trust	Personality	Great humanity, Looking at others positively
	Honesty	Life must be connected, Trust must be

4. Conclusion

The purpose of this study was to analyze the spiritual value of female college students according to Giorgi's phenomenological analysis procedure. The six components, 14 subcomponents, and 34 semantic terms are derived from the general statement and described as phenomenological writing.

Participants thought that if they were terminally ill, family, friends, and professionals would look after them. The family thought that they would be the closest thing to their deaths, that the family would be with them to the end, and that they would care for them when they were at their most difficult because they were with them forever. In particular, their grandparents thought that when their parents had to make money, they would take care of themselves as a sanctuary in their hearts. For the participants, the family was largely situated spiritually. Also, as a friendly person, their boyfriend and husband would care for them, because they gave them laughter and comfort. This was similar to the results of [41]. In addition, those who think that the specialist will take care of themselves were deeply troubled and desperately desiring to die.

The valuable qualities in life were the ability to sympathize, to reflect on oneself, to give reliance to others. Life was viewed as a field of self-realization and should be patient with self-realization. The results were the same as those of the spirituality study [42]. Since humans are social animals, in order to live together, they need to know how to interact with each other with patience and effort to understand each other. It was said that this was achieved through the formation of a strong sense of value through continuous self-understanding through self-reflection. The characteristics of these participants were very similar to those of women in JA Kim [43] program for young women. In addition, life continues to be connected, and participants were constantly thinking that it was a worthwhile life to give trust to others.

Based on the above research results, it could be concluded that the female college students' value of spirituality was empathy and trust with patience with family and close friends. Based on this result, intervention on spiritual well-being of female college students suggests that intervention to form values based on empathy and trust based on family and close friends is implemented.

References

- [1] Korea Health and Welfare Department, Central Suicide Prevention Center, Korea Suicide Prevention Association, White Paper on Suicide Prevention, Seoul: Central Suicide Prevention Center, 2014.
- [2] Straiton, M. L., Roen, K., & Hjelmeland, H. Gender roles. Suicidal ideation, and self-harming in young adults, Archives of Suicide Research, Vol. 16, No. 1, pp. 29-43, 2012.
- [3] Korea Health and Welfare Department, Central Suicide Prevention Center · Korean Suicide Prevention Association 2014.
- [4] Arnett, J. J. Emerging adulthood: A theory of development from the late teens through the twenties. American Psychologist, Vol. 55, No. 5, pp. 470-480, 2000.
- [5] Beck, A. T. Hopelessness as predictor if eventual suicide, Annals of New York Academy of Science, Vol. 487, pp. 90-96, 1986.
- [6] Brown, G. K., Beck, A. T., Steer, R. A., & Grisham, J. R. Risk factors for suicide in psychiatric outpatients: A 20-year prospective study. Journal of Consulting and Clinical Psychology, Vol. 68, No. 3, pp. 371-377, 2000.
- [7] Jobes, D. A., Managing suicidal risk: A collaborative approach. NY: Guilford Press, 2006.

- [8] Stoll RI, The essence of spirituality, In: Carson VB, editor, Spiritual dimension of nursing practice, Toronto: W. B Saunders Co; pp. 4-23, 1989.
- [9] Banks R. Health and the spiritual dimension: relationships and implications for professional preparation programs. Journal of School Health, Vol. 50, No. 4, pp. 195-202, 1980.
- [10] Baca-Garcia, E., Perez-Rodriguez, M. M., Mann, J. J., & Oquendo, M. A. Suicidal behavior in young women. Psychiatric Clinics of North America, Vol. 31, No. 2, pp. 317-331, 2008.
- [11] Stephenson, H., Pena-Shaff, J., & Quirk, P, Predictors of college student suicidal ideation: Gender differences. College Student Journal, Vol. 40, No. 1, pp. 109-117, 2006.
- [12] HR Yang, Western Philosophy for College Students, Jipmoondang, pp. 40, 2017.
- [13] Adam Brillig, Celebrating Soul-Studies in Jungian Psychology by Jungian Analysis #84, Lawrence W. Jaffe's Books, 1999.
- [14] Poloutzian R. F. & Ellision, C. W, Loueliness, Spiritual well-being and the quality of life, In L.A. Peplau D. Perman (Eds), Loneliness: A sourcebook of current theory research and therapy, pp. 224-236, 1982.
- [15] DI, Kim, Education for Life, Seoul: Korean Presbyterian Publishers, 2001.
- [16] Randall Colburn, "Can the New Wave of the faith-based film making transcend propaganda?" http://www.avclub.com/article/can-new-wave-faith-based-filmmaking-transcend-prop-234051.AV Club.
- [17] Ellison CW, Spiritual well-being; Conceptualization and measurement, Journal of Psychology and Theology, Vol. 11, No. 4, pp. 330-34, 1983.
- [18] HB Gang, A Study on the Partnership Abuse and Depression of Women in Korea and America: Focusing on the Moderating Effect of Social Support and Spirituality, Yonsei University Master's Thesis 2008.
- [19] SJ Do, Integrity The need for spiritual social welfare practice, spirituality and social welfare, Vol. 4, No. 1, pp. 21-56, 2013.
- [20] HS Park, YH Gang, A Study on the Spiritual Well-Being of Nursing Students, Korean Hospice Association Vol. 7, No. 1, pp. 5-14, 2007.
- [21] ES Ahan, GM Kim, Factors Affecting Spiritual Care-Giving Among Nursing Students, Journal of the Korean Data Analysis Society, Vol. 19, No. 6, pp. 3403-3416, 2017.
- [22] MO Yoon, The Spiritual Well-being and the Spiritual Nursing Care of the Nurses for Cancer Patients, The Korean Journal of hospice and palliative care, Vol. 12, No. 2, pp. 72-79, 2009.
- [23] OH Jo, subjective Health Status, Attitude toward Death and spiritual Well-being of Nurses, The Korea contents Society, Vol. 13, No. 10, pp. 375-384, 2013.
- [24] SY Yoon, SH Min, Effects of ego-resilience and spiritual well-being on college life adjustment of nursing college students, Journal of Digital Convergence, Vol. 12, No. 12, pp. 395-403, 2014.
- [25] SY Yu, Spiritual Well-Being and Attitude to Death of Cadets in Armed Forces Nursing Academy, Vol. 31, No. 2, pp. 65-76, 2013.
- [26] McDonald PE, Wykle ML, Hilton GL, Spiritual Needs of Older Adults in Long-term Care: The Nurses's role, J Natl Black Nurses Assoc, Vol. 29, No. 2, pp. 29-35, 2018.
- [27] Hssankhani H, Rahmani A, Taleghani F, Sanaat Z, Dehghannezhad, Family support liaison in the witnessed resuscitation: A phenomenology study, Palliative Care Models for Cancer Patients: Learning for Planning in Nursing(Review), J Cancer Educ, doi:10.1007/s13187-019-01532-3, 2017.
- [28] Braun. M., Gordon, D., & Uziely, B, Associations between oncology nurses' attitudes toward death and caring for dying patient. Oncology Nursing Forum, Vol. 37, No. 1, pp. 43-49, 2010.
- [29] Patton, M. Q. Qualitative evaluation and research methods. Newbury Park, CA: Sage. 1990.
- [30] YH Ji, Spiritual Care and Autonomy for the Terminal Patient, Personal Ethics Bioethics, Vol. 1, No. 1, pp. 55-84, 2011.
- [31] JH Lee, Korean mind, spiritual discernment, theology practice, Vol. 59, pp. 293-319, 2018.
- [32] YS Bang, JG Kim, The Effect of Baby Boomer's Spiritual Well-Bing on Self Empowerment and Emotional Retirement Planning, Local welfare policy, Vol. 27, pp. 11-35, 2016.
- [33] NY Kim, Spiritual Sensibility in Artificial Intelligence Era, Korea Journal of Christian Studies, Vol. 1, No. 106, pp. 283-312, 2017.
- [34] Michaelson V, King N, Inchley J, Currie D, Brooks F, Pickett W, Domains of spirituality and their associations with positive mental health: A study of adolescents in Canada, England and Scottland, Pre

- Med, doi: 10.1016/j.ypmed.2019.04.18., 2019.
- [35] Jones KF, Simpson G, Briggs L, Dorsett P, Anderson M, A study of whether individual and dyadic relations between spirituality and resilience contribute to psychological adjustment among individuals with spinal cord injuries and their family members, Clin Rehabil, doi: 10.1177/0269215519845034, 2019.
- [36] Miler K, Crawford P, Edgley A, Hare-Duke L, Slade M, The experiences of spirituality among adult with mental health difficulties: a qualitative systematic review, Epidemiol Psychiatr Sci, doi: 10. 1017/S2045796019000234, 2019.
- [37] Trant AA, SzeKely B, Mougalian SS, DiGiovanna MP, Sanft T, Hofstatter E, Siber A, Adelson KB, Chagpar A, Killelea B, Horowitz N, Lannin D, Park T, Corso M, Abraham G, Pollard-Murphy K, Sturrock T, Knill-Selby E, Western A, Servodidio C, Tasoulis MK, Healy B, Hatzis C, Pus z tai L, The impact of communication style on patient satisfaction, Breast Cancer Res Treat, doi: 10.1007/s10549-019-05232, 2019.
- [38] Kirby Er, Kenny KE, Broom AF, Oliffe JL, Lewis S, Wyld DK, Yates PM, Parker RB, Lwin Z, Response to a cancer diagnosis: a qualitative patient-centered interview study, Support Care Cancer, doi:10.1007/s00520-019-04976-z, 2019.
- [39] Fitch MI, Bartlett R, Patient Perspectives about Spirituality and Spiritual Care, Asia Pac J Oncol Nurs, Vol. 6, No. 2, pp. 111-121, 2019.
- [40] Groninger H, Knapik M, Twelve-Step Programs and Spiritual Support at the End of life, Am J Hosp Palliat Care, doi:10.1177/1049909119832809, 2019.
- [41] Hovland CA, Kramer BJ, Barriers and Facillitator to Preparedness for Death: Experiences of Family Caregivers of Elders with Dementia, J Soc Work End Life Palliat Care, Vol.15, No. 1, pp. 55-74, 2019.
- [42] Lina Mahayati S, Allenidekania, Happy H, Spirituality in adolescents with cancer, Enferm Clin, doi:10.1016/s1130-8621(18)30032-9, 2018.
- [43] JA Kim, Development and Effect Analysis of Pregnancy Recognition improvement Program, JCCT, Vol. 4, No. 4, pp. 77-87, 2018.