

"Exploring the Soul of Care: A Cross-Sectional Study on Spirituality, Spiritual Care, and Perceived Spiritual Well-Being Among Nurses in Selected Hospitals of the UAE"

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Abstract:

Introduction

Spiritual care is an essential yet often overlooked aspect of holistic healthcare. Addressing patients' spiritual needs enhances emotional well-being, coping, and overall quality of care. Nurses play a key role in integrating spirituality into practice, making it important to understand their spirituality, perspectives on spiritual care, and spiritual well-being.

Objectives

The present study aimed to assess the levels of spirituality, perception of spiritual care, and perceived spiritual well-being among nurses in selected hospitals in the UAE; to determine the association between socio-demographic variables and spirituality and spiritual care perspectives; and to identify significant predictors influencing nurses' perception of spiritual care.

Method

A quantitative descriptive cross-sectional research design was adopted for the study. The research was conducted among 120 nurses working in selected hospitals in the UAE. Participants were selected using a convenience sampling technique. Data was collected using a structured questionnaire consisting of socio-demographic variables, the Spiritual Well-Being Assessment (SWBA), and the Nurse Spiritual Care Perspective Scale (NSCPS).

Results

A quantitative descriptive cross-sectional study was conducted among 120 nurses using the Spiritual Well-Being Assessment (SWBA) and Nurse Spiritual Care Perspective Scale (NSCPS). Most participants were female (82.5%), aged between 31 to 40 years, with more than 10 years of professional experience. The findings revealed that 81% of nurses had moderate to high levels of spirituality, while 91% demonstrated above-average spiritual well-being. The mean scores for Spirituality, Spiritual Care, and Spiritual Well-being were 83.6, 38.7, and 62.68, respectively. A statistically significant positive correlation was found between spirituality and perception of spiritual care ($p = 0.008$).

Conclusion

The study highlights the importance of integrating spirituality into nursing practice to enhance holistic patient care. Higher levels of spirituality among nurses are associated with better perceptions of spiritual care. Promoting

spiritual awareness and support within healthcare settings may strengthen emotional resilience among nurses and contribute to improved patient outcomes.

Keywords: Spiritual well-being, Spirituality, Spiritual Care perspectives, Nurses

1. Introduction

Spiritual care should be considered an important part of holistic and multidisciplinary care, and it has not been given much importance so far. We should begin with nurses, who will soon be clinicians, to find out about the potential of the nursing profession to put spiritual care into practice. Little is known about spiritual well-being, spirituality, and spiritual care perspectives among nurses.¹

Spiritual well-being has important implications for an individual's health and well-being. Whilst the provision of spiritual care and assessment of spiritual needs is a vital part of the nurse's role, literature suggests that nurses do not always engage in spiritual care with their patients or assess their spiritual needs. This review aims to ascertain wider reasons for this inconsistent spiritual care delivery by nurses to their patients^{2,3,4}

Over the years, the provision of spiritual care has been a primary aspect of holistic nursing care, but many principal medical educational systems have not yet encompassed spiritual care as part of their comprehensive or core curricula. Nurses conduct nursing assessments routinely, but a spiritual needs assessment is usually not done, and spiritual care is often neglected. The role of spiritual health care is accepted by health professionals.^{5,6,7}

The World Health Organization (WHO) announced that health needs should include spiritual well-being in addition to physical, mental, and social domains. If nurses can assess spiritual needs and develop interventions to help patients meet their spiritual needs, they will be able to help promote the quality of life and decrease the suffering of patients. Spiritual care, a central element of holistic and multidisciplinary care, is not often included in practice.^{8,9,10}

Spirituality is important for every nurse because it is related to nursing education and practice. When nurses are accurately educated about understanding the meaning of spiritual health, they may be expected to understand how to provide spiritual care and the role of spiritual interventions. This study aimed to assess the spirituality among Nurses in Varanasi. This was a cross-sectional study. A total of 100 nurses were selected. The questionnaires used were the spiritual health scale (SHS) and a demographic profile. The statistical analysis was performed using the SPSS software, version 25. Results revealed that both males and females were included in my study. Half of the Nurses trust in God, and there is a significant association between the status of spirituality and the experience of family death & personal health problems. There is no significant association between spiritual health and socio-demographic variables like age, gender, qualification of participants, domicile, type of family, and religious devotion. Conclusion: Nurses are aware of the impact of spirituality. Nurses are role models for a better lifestyle, including spiritual health.¹²

Nursing education programs are increasingly challenged to incorporate spirituality and spiritual caregiving into the curriculum. Nurses working in different areas filled out a survey that included a spiritual well-being scale and several open-ended questions. Overall, nurses had a strong awareness of personal spirituality and a high level of spiritual health. They identified several behaviors and characteristics of the nurse that facilitated spiritual nursing care.^{13,14,15}

Qualitative phenomenological research studies explore the perceptions and beliefs of undergraduate senior-level nursing students about spiritual well-being in relation to academic persistence and ultimately academic success as measured by timely graduation at a private women's university in the Midwest. By adding to the body of research and knowledge, nurse educators may better assist nurses to achieve academic success, which could potentially alleviate the national nursing shortage and decrease financial losses of academic institutions. Nine Bachelor of Science in Nursing (BSN) students at a private university in the Midwest participated in semi-structured, one-on-one interviews. Participants were in their senior year and had progressed through the nursing program without withdrawing or failing any nursing courses. Using NVivo 12 for data analysis, this researcher found that several themes emerged. Study findings indicated a correlation between spiritual well-being, academic persistence, and

academic success. Nurse educators are encouraged to explore opportunities to promote the spiritual well-being of nursing students. Further research should include quantitative measurements of spiritual well-being.^{16,17,18.}

Methods

This study employed a quantitative approach, utilizing a descriptive survey design. Data collection involved a convenient sampling technique that targeted 120 nurses spanning working in different areas. Those nurses who were unwilling or unavailable during the data collection period were excluded from the study. The tools used were Tool 1: Demographic proforma, Tool 2: Spirituality Assessment Scale, which is a Likert scale that ranges from strongly agree to strongly disagree. The score changes from 1-5, with 5 (Strongly Agree), 4 (Agree), 3 (Neutral), 2 (Disagree), and 1 (Strongly Disagree) is given to each question. Negative statements will be graded in the reverse direction. Total number of Items is 20. Tool 3: SWBA scale. (Spiritual Wellbeing Assessment Scale) which ranges from strongly agree to disagree. The score changes from 1-5,5 (Strongly Agree), 4 (Agree), 3 (Neutral), 2 (Disagree), or 1 (Strongly Disagree) are given to each question. Negative statements will be graded in the reverse direction. Total number of Items is 15, Tool 4: Nursing Spiritual Care Perspective Scale (NSCPS) is a perception scale developed to assess the perception towards Spiritual care. The scale has 10 statements related to spiritual care. The content validity of these tools was established, and data collection commenced after obtaining approval from the Institutional Review Board (IRB) at GMU. Furthermore, administrative approval from the hospital was secured, and informed consent was obtained from all participating nurses.

Data collection was executed by the research team using the Spirituality Assessment Scale (Likert scale), the Spiritual Wellbeing Assessment Scale (SWBA), and the Nursing Spiritual Care Perspective Scale (NSCPS). These tools were administered to nurses as a Google form to their email, who met the inclusion criteria and were willing to participate.

The collected data were meticulously summarized in a table, entered into an Excel spreadsheet, and subsequently subjected to comprehensive analysis using the R software. IRB approval obtained. We ensured that the research participants were not subjected to harm in any way whatsoever. Informed consent was obtained from the nurses. The information the participant provided was analyzed, and there will be no link between him/her and the results. Confidentiality of the information was respected, and only the research team will have access to the data.

Results

Section 1: Description of sample characteristics

Around 120 nurses participated in the survey, of whom 45% were in the age group of 31-40 years, and 82.5% were female nurses. The majority were staff nurses (78.33%), and with a year of experience of more than 10 (40.83%). The majority (30%) are working in wards, regarding family history of chronic conditions; the majority (57.5%) reported there was no history of illness in the family.

Table 1: Frequency and Percentage distribution of demographic variables of Nursing Students (n= 120)

Demographic Variables	Frequency(f)	Percentage (%)
Age		
21-30	36	30
31-40	54	45
41-50	24	20
Above 51	06	05
Gender		
Male	21	17.5

Female	99	82.5
Years of Experience		
Less than 1	03	2.5
1-5	37	30.83
6-10	31	25.83
More than 10	49	40.83
Job Position		
Staff Nurse	94	78.33
Supervisor	06	05
Nurse Educator	06	05
Others	14	11.67
History of Chronic Illness in the Family		
Yes	51	42.5
No	69	57.5

Section 2: Levels of Spirituality, Spiritual Care, and Perception towards Spiritual Well-being among Nurses

As indicated in Table 2, a significant majority of Nurses (79%) reported an above-average level of perception regarding Spirituality, with only a minimal (2%) reporting a below-average level. Similarly, in terms of Spiritual Wellbeing, (88%) of nurses reported an above-average perception, while a mere (3%) reported a below-average perception.

Moreover, when examining the data concerning severe perception of Spiritual Wellbeing, it is evident that 61% had an above-average perception, while just 4% had a below-average perception concerning Spiritual Care.

Table 3 reveals that the mean values for Spirituality, Spiritual Care, and Spiritual Wellbeing are (83.6, 38.70, and 62.68), with corresponding standard deviations of (± 8.45 , ± 4.90 , and ± 6.32), respectively.

Table 2: Frequency and Percentage distribution of Perception regarding Spirituality, Spiritual Care, and Spiritual Well-being among Nursing students (n=72)

Variables	Above Average (75 and above)		Average (60-74%)		Below Average (Less than 60%)	
	f	%	f	%	f	%
Spirituality	95	79	23	19	02	02
Perception towards Spiritual Care	73	61	42	35	05	04
Spiritual Wellbeing	106	88	11	9	01	03

Section 3: The Correlation between Spirituality, Spiritual Care, and Perception towards Spiritual Well-being among Nurses

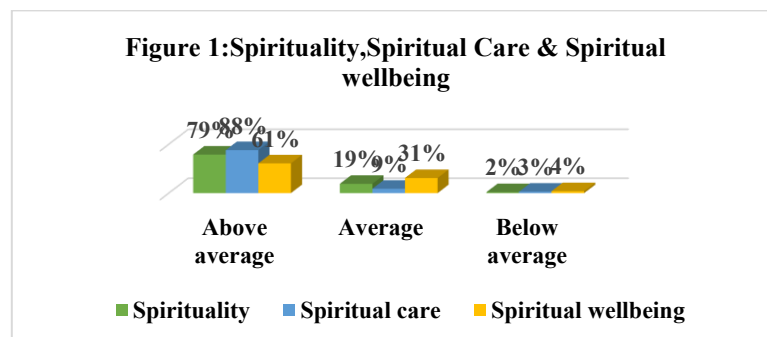
Table 4 reveals that nurses exhibited a positive correlation between spirituality and their perception of spiritual care, with a p-value of 0.008. Therefore, the null hypothesis, H0, that there is no significant relationship between Spirituality and perception towards Spiritual well-being among nurses, is rejected.

Table 3: Mean and standard deviation of Perception regarding spirituality, Spiritual care, and Spiritual wellbeing

ASPECTS (Impact during Covid)	Results	
	Mean	SD
Spirituality (Total Score 20-100)	83.68	± 8.45
Spiritual care (Total Score 10-50)	38.70	± 4.90
Spiritual Wellbeing (Total Score 15-75)	62.68	± 6.32

Table 4. Correlation between Spirituality, Spiritual Care, and Perception towards Spiritual Well-being

Variables	Results	
	Correlation coefficient	p-Value
Spirituality, Spiritual Care, and Spiritual Well-being	0.23	p = 0.008



Discussion

Spirituality, Spiritual care, and perception of spiritual well-being among Nurses:

Around 120 nurses participated in the survey, of whom 45% were in the age group of 31-40 years, and 82.5% were female nurses. The majority were staff nurses (78.33%), and with a year of experience of more than 10

(40.83%). The majority (30%) are working in wards, regarding family history of chronic conditions; the majority (57.5%) reported there was no history of illness in the family. Our study findings were supported by a study conducted by Kaddourah, Abu-Shaheen, and Al-Tannir among nurses. Of the respondents, 896 out of 978 (91.6%) were female, 631 (65.0%) were between 27–35 years of age, 871 out of 973 (89.5%) held a bachelor's or master's degree, and 854 out of 963 (88.7%) had 10 or fewer years of nursing experience¹⁹.

The study's findings indicated that a significant proportion of nurses, specifically 79%, reported an above-average level of perception regarding Spirituality, while only 2% reported a below-average level. In the realm of Spiritual Well-being, 88% of nurses reported an above-average perception, with merely 3% reporting below-average perception. The mean score of 83.68 (SD = 8.45) indicated that the participating nurses were oriented towards spirituality and recognized the importance of providing spiritual care to their patients. Similarly, previous studies examining nurses' perceptions of spirituality and spiritual care across different cultures revealed that nurses generally demonstrated an adequate understanding of spirituality and expressed willingness to provide spiritual care to their patients. A study conducted by Çetinkaya et al included 289 nurses from three hospitals in a province in the west of Turkey²⁰. The authors reported a raised perception of spiritual care among nurses. A study of Chinese nurses revealed similar findings. These nurses were highly aware of spirituality and had a keen interest in giving spiritual care to their patients. A study from Iran indicated a moderate level of perception of spirituality and spiritual care among 259 nurses.

With 88% of respondents reporting a good spiritual well-being, the mean score was 62.68 (SD = 6.32), reflecting a moderately high level of spiritual well-being and relatively low variability among participants. Examining the data on severe perception of Spiritual Wellbeing, it was observed that 61% of nurses had an above-average perception, whereas only 4% had a below-average perception regarding Spiritual Care. In terms of the mean values, the study revealed the following: the mean value for Spirituality was 83.6, for Spiritual Care it was 38.70, and for Spiritual Wellbeing, it stood at 62.68. Correspondingly, the standard deviations were ± 8.45 , ± 4.90 , and ± 6.32 , respectively. These statistics offer valuable insights into the nurses' perceptions in these critical domains of study.

The study findings were supported by the study **Barbara Pesut (2022)** conducted. The purpose of this study was to explore how students in a baccalaureate curriculum perceived their spirituality and spiritual health, and their perceptions of spiritual nursing care. Students in the first and fourth years of the program filled out a survey that included a spiritual well-being scale and several open-ended questions. Overall, students had a strong awareness of personal spirituality and a high level of spiritual health. They identified several behaviors and characteristics of the nurse that facilitated spiritual nursing care.²¹

Another study conducted by **Abbasi M, Farahani-Nia M, Mehrdad N, Givari A, Haghani H (2014)** as a systematic review to examine the concepts of spirituality, spiritual care, and the perception of spiritual well-being among nursing students. Nursing education plays a vital role in preparing students to recognize and address the spiritual needs of patients. Understanding the impact of spirituality on healthcare and the attitudes of nursing students towards spiritual care is essential for improving patient outcomes and promoting holistic nursing practice. The findings reveal that spirituality is recognized as a subjective and multidimensional construct, encompassing individuals' beliefs, values, and connections to the transcendent. Spiritual care involves providing compassionate support, facilitating religious or cultural practices, and addressing patients' spiritual needs. Nursing students generally express a positive attitude towards spirituality and acknowledge its significance in patient care. However, they often lack formal education and training in spiritual care, leading to challenges in integrating spirituality into their practice effectively.²²

A descriptive study on the Comparison of Perception on spiritual care of the nursing students at a public university and a religious-based university was conducted by **Anggun Frida, Enie Novieastari, and Tuti Nuraini (2019)**. The research used the descriptive-comparative method. 141 nurses were recruited through a consecutive sampling technique in a university in Depok, West Java, and a religious-based university in Jakarta, Indonesia. Data was collected using the Spiritual Care Giving Scale (SCGS) questionnaire. The result showed that the participants had a good perception of spiritual care with a mean score of 171.39. However, there was no significant difference in

perception regarding spiritual care between nursing students from the public university and the religion-based university (p -value=0.612). The perception of spiritual care of nursing students was similar regardless of the type of their university. This may be related to the comparable religious and cultural backgrounds in the two settings, as well as the nursing education curriculum implemented nationally, yet further studies to examine such factors.²³

Correlation between Spirituality, Spiritual Care, and perception towards Spiritual Well-being among nursing students: Students exhibited a positive correlation between spirituality and their perception towards spiritual care, with a p -value of 0.008. Consequently, the null hypothesis, H_0 , which posited that there is no significant relationship between Spirituality and perception towards Spiritual well-being among nursing students, is rejected.

The study results were supported by the study findings regarding nursing students' perceptions of spirituality and spiritual care, and their spiritual care competencies, and to investigate the relationship between these variables. The sample of this descriptive and correlational study consisted of 325 nursing students. The questionnaires used in the study were the Student Nurse Information Form, the Spirituality and Spiritual Care Rating Scale, and the Spiritual Care Competency Scale. The mean scores of the Turkish versions of the Spirituality and Spiritual Care Rating Scale and Spiritual Care Competency Scale were 3.90 ± 0.45 and 3.69 ± 0.68 . Importance of giving spiritual care to the patients in nursing care, willingness to receive training in spiritual care, and listening to patients to meet their spiritual requirements accounted for 17% of the spirituality and spiritual care perceptions of the students ($F = 16.118$, $P = .001$, $R = 0.17$). The participants' spirituality and spiritual care perception levels accounted for 14% of their spiritual care competencies ($F = 16.851$, $P = .001$, $R = 0.14$). It was determined that the students' perceptions of spiritual care competence were not at the desired level and that they should be improved. Therefore, it is recommended that changes should be made in the curricula and that training programs should be improved to strengthen nurses' spiritual care competency.²⁴

Dewi Gayatri1*, Khairunnisa2, Tuti Nuraini1, and Hanny Handiyani1(2023) assessed the Correlation of Spirituality and Implementation of Spiritual Care Among Nursing Students in Jakarta. Nurses play a role in providing nursing care, which includes spiritual care. Spiritual care can provide inner peace and bring new hope for patients who need it. Nursing students are the initiators who will later become nurses. This study aimed to identify the correlation between spirituality and the implementation of spiritual care among nursing students in the program profession. This study used a cross-sectional design with a purposive sampling technique. The sample in this study involved 208 nursing students in a professional program from 3 universities in Jakarta. The instruments used in this study were the Daily Spiritual Experience Scale (DSES) and the Nursing Spiritual Care Therapeutics Scale (NSCTS). The statistical analysis used a pooled sample T-test and a Chi-square test. The number of respondents aged < 40 years was 175 (84.1%) students, not yet working 109 (52.4%) students, Muslim 183 (88%) students, female 173 (83.2%) nurses, undergraduate program students who graduated from high school were 109 (52.4%), and have never attended spiritual care training 180 (86,5%). There was a significant relationship between the number of stages in the profession program and spirituality with the application of spiritual care ($p > 0.05$). The results of the study show that nurses have good spirituality but are still not good at implementing spiritual care. The recommendation of this research added material about spiritual care to their curriculum.²⁵

Conclusion

In conclusion, this study sheds light on the spiritual awareness and perceptions of nurses regarding spirituality and spiritual care. Spirituality and spiritual care are important aspects of nursing practice. Nurses who receive this education and training are better equipped to deliver holistic, patient-centered care, promote diversity and cultural competence, and contribute to improved patient outcomes. Moreover, they develop personal qualities and skills that enhance their own well-being and professional growth.

Ethical Approval.

The study titled “Organ Donation Literacy Among University Stakeholders: A Cross-Sectional Study in the UAE” was approved by the Institutional Research Board of Gulf Medical University on 25th NOV 2023 (Ref. no. IRB-CON-FAC-52-NOV-2023).

Authors’ Contribution

Vimala Varatharajan, Selva Titus Chacko, Soney Melath Varghese, and Soma Ibrahim Ali jointly contributed to the conceptualization and proposal development of the study. All authors participated in data collection. Manuscript drafting, review, and final approval were carried out collaboratively by all authors. All authors have read and approved the final manuscript and agree to be accountable for all aspects of the work.

Funding: This research did not receive any specific grant from funding agencies.

Conflict of Interest: The authors declare no competing interests.

Consent to participate

After a clear explanation of the study objectives and procedures, written informed consent was obtained from all participants via an attached consent form embedded in the Google survey. Participation in the questionnaire was permitted only after consent was provided; individuals who did not consent were unable to proceed with the survey.

Acknowledgement

The researchers acknowledged all the participants who participated in this study.

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