religions

MDPI

Review

Review and Characterization of Portuguese Theses, Dissertations, and Papers about Spirituality in Health

Joana Romeiro [1], Helga Martins [1], Sara Pinto [2] and Sílvia Caldeira [1,*]

[1] Centre for Interdisciplinary Research in Health, Institute of Health Sciences, Universidade Católica Portuguesa, Palma de Cima, 1649-023 Lisbon, Portugal; joana.m.romeiro@gmail.com (J.R.); helga.t.martins@gmail.com (H.M.)

[2] CINTESIS—Center for Research in Health Technologies and Services, Escola Superior de Saúde de Santa Maria, 4049-024 Porto, Portugal; sara.pinto@santamariasaude.pt

* Correspondence: scaldeira@ics.lisboa.ucp.pt; Tel.: +351-217-214-147

Received: 13 July 2018; Accepted: 5 September 2018; Published: 11 September 2018

Abstract: Research about spirituality has grown widely in the past decades and the interest in health care is also evident in Portugal. This literature review aims to identify and to characterize Portuguese theses, dissertations, and papers about spirituality in health, and to provide a systematic overview of the knowledge concerning this subject. The search was conducted in February 2017 and updated in January 2018. Four independent reviewers screened and analyzed all citations, and a total of 76 results were included. Publications started in 2002 and include master degree dissertations (n = 37), scientific papers (n = 31), and PhD theses (n = 8). Papers were published in 24 national and international journals. Most papers were psychology- and nursing-related and had a quantitative design (n = 55). Samples were mostly composed of patients living with a chronic disease (n = 20) or elderly (n = 11). The Spiritual Well-Being Questionnaire (SWBQ) was the most used tool. A multidisciplinary approach is regarded as foundational in implementing spirituality in the provision of health care and the results underline the interest on this topic from other disciplines rather than nursing. Further studies must provide a deeper understanding of spirituality in children, adolescents or families' perspective bringing new insights to advanced health practice.

Keywords: spirituality; health; literature review

1. Introduction

Spirituality is an individual dimension and a complex and universal phenomenon (Barber 2012). Several attempts to define the concept have been made based on the subjective nature of spirituality, and different conceptual approaches can be found in the literature throughout the years. Recently, spirituality has been defined as "a way of being in the world in which a person feels a sense of connectedness to self, others, and/or a higher power or nature; a sense of meaning in life; and transcendence beyond self, everyday living, and suffering" (Weathers et al. 2016, p. 93). The same authors identified connectedness, transcendence, and meaning in life as the main attributes of the concept (Weathers et al. 2016). Spirituality plays a critical role in human existence, on perceptions of health and well-being, and relates to patients' quality of life (Koenig 2012; Papathanasiou et al. 2014) from the beginning to the end of life (Crowther and Hall 2017; Romeiro et al. 2017a, 2017b). Closely related to challenging and unpredictable life events, spirituality was proven to be supportive and therapeutic during adverse health conditions (Koenig 2012; Timmins and Caldeira 2017). For example, chronic, terminal, and/or unexpected illness seems to trigger patients' and families' suffering and evoke spiritual coping mechanisms regardless religious affiliation (Weathers et al. 2016).

Since ancient times, spirituality has evolved side by side with health-related practices. For example, religious leaders were pioneers in hospitals' organization and were basilar in setting the foundations for current professional standards of health care (Koenig 2012; Theofanidis and Sapountzi-Krepia 2015). Nevertheless, over the years a fragmentation of care is often stated, based on the scientific advances, which led to a transformation in the way patients were treated, mostly reduced to the physical and biological aspects of treatments (Papathanasiou et al. 2014). This reductionist approach, and the implications on the assessment and the intervention towards patient's health, set in action a holistic and patient-centered care movement (Papathanasiou et al. 2014). Despite this new paradigm, health concept is currently and internationally defined as a state of well-being (physical, social, or mental) and not simply the absence of disease (WHO 2014). The spiritual dimension of health care seems to be kept absent, as critically pointed out by some authors, and is still a missing dimension of the health concept (Dhar et al. 2013).

One of the barriers of the absence of spirituality in health care is the subjectivity of the concept, and several measurement tools have been developed to measure its complex nature (Austin et al. 2018). These revealed the positive influence of religion and spirituality on the physical (e.g.,: immune system functioning, longevity, dementia, heart diseases, hypertension, among others), mental (like anxiety, depression, and suicidal ideation), lifestyle (e.g., physical activity, smoking, sexuality, and others) and social aspects (such as marital relationships, social interactions, and social support) of a person's life (Koenig 2012; Lucchetti and Lucchetti 2014). A recent review uncovered the existence of 75 tools from which 25 were found to be used in clinical environments (Austin et al. 2018). A synthesis of Brazilian literature found only two instruments translated into European Portuguese (Lucchetti et al. 2013). In addition, a review of 15 years of worldwide spiritual research in health has revealed a wide and growing interest regarding this phenomenon with major developments in mental health (Koenig 2012). The United States and England were the countries with the highest numbers of published papers (Koenig 2012). Moreover, in Portugal the only study aiming to map the scientific evidence related to spirituality in health comprised only nursing literature (Caldeira et al. 2011a). Therefore, this study aims a broader perspective as the goal is to characterize the Portuguese theses, dissertations, and papers about spirituality in health disciplines. The paper will provide a new insight of research about this phenomenon and highlight the development and knowledge gaps that may provide guidance to future research.

2. Materials and Methods

A literature review based on a systematic search was independently conducted by all four authors in February 2017 and updated in January 2018. The search was conducted on seven international databases (PubMed; CINAHL with full text; MEDLINE with full text; MedicLatina; Academic Search Complete; SciELO and Web of Science) and on Portuguese databases including RCAAP (Open Access Portuguese Scientific Repository) and repositories of three nursing schools: Lisbon (*Escola Superior de Enfermagem de Lisboa—ESEL*), Coimbra *(Escola Superior de Enfermagem de Coimbra—ESEnfC)* and Porto (*Escola Superior de Enfermagem do Porto—ESEP*). Search terms with truncation were searched with no time limit and included "spirituality", "religion" and "health". Additionally, some other related words such as "forgiveness", "hope" and "well-being" in English and/or Portuguese were used in accordance with each database (Table 1).

Table 1. Terms used in search per data base.

PubMed	CINAHL with Full Text; MEDLINE with Full Text; MedicLatina; Academic Search Complete	SciELO	Web of Science	RCAAP	*ESEL*	*ESEnfC*	*ESEP*
Spirit * AND Portug * (all fields)	Spiritual (abstract) AND health (text) AND Portugal (text)	Espiritualidade AND Portugal (all fields)	Spirit * AND Portugal (all fields)	Espirit * OR Relig * AND Saúde (theme)	Spiritual (all fields)	Espirit * (title)	Espiritualidade (title)
Relig * AND Health AND Portug * (all fields)	Forgive * (abstract) AND Health (text) AND Portugal (text)	Espiritual AND Portugal (all fields)	Relig * AND Health AND Portugal (all fields)	Perdão AND Saúde (theme)	Espiritualidade (all fields)	Espirit * (theme)	Espiritualidade (theme)
Hope AND Portug * (all fields)	Hope (abstract) AND Health (text) AND Portugal (text)	Religião AND Portugal (all fields)	Forgive * AND Portugal (all fields)	Espiritualidade AND Saúde (theme)	Religião AND Religiosidade (all fields)	Relig * (title)	Religião (title)
Forgive * AND Portug * (all fields)	Religious (abstract) AND Health (text) AND Portugal (text)	Religiosidade AND Portugal (all fields)		Espiritual * (title) AND Saúde (theme)	Perdão (all fields)	Relig * (theme)	Religião (theme)
(((Spirit * OR Relig *) AND Portug *) NOT brazil *) (all fields)	Religion * (abstract) AND Health (text) AND Portugal (text)	Perdão AND Portugal (all fields)		Bem estar spiritual (title) AND Saúde (theme)	Esperança (all fields)	Perdão (title and theme)	Perdão (title)
		Esperança AND Portugal (all fields)		Esperança (title) AND Saúde (theme)		Esperança (title)	Esperança (title)
		Esperança AND Portugal (all fields)		Espiritual (title)		Esperança (theme)	Esperança (theme)

* Truncation searching.

Papers considered eligible were primary studies, articles, PhD theses and masters dissertations, available in a full-text format, conducted by Portuguese researchers (as first authors) in national samples and in a health context, regardless of the health discipline. Editorials, opinion articles, reports, and literature reviews were excluded. The search and protocol strategy followed the PRISMA guidelines (Figure 1). Initial search retrieved a total of 5308 results. Then, 48 duplicates were removed and 5260 studies remained. Reviewers screened those results and from the 138 obtained documents, 62 were excluded with reasons after reading the full text. Discrepancies in results were solved through joint discussion. Finally, a total of 76 results were included in this review.

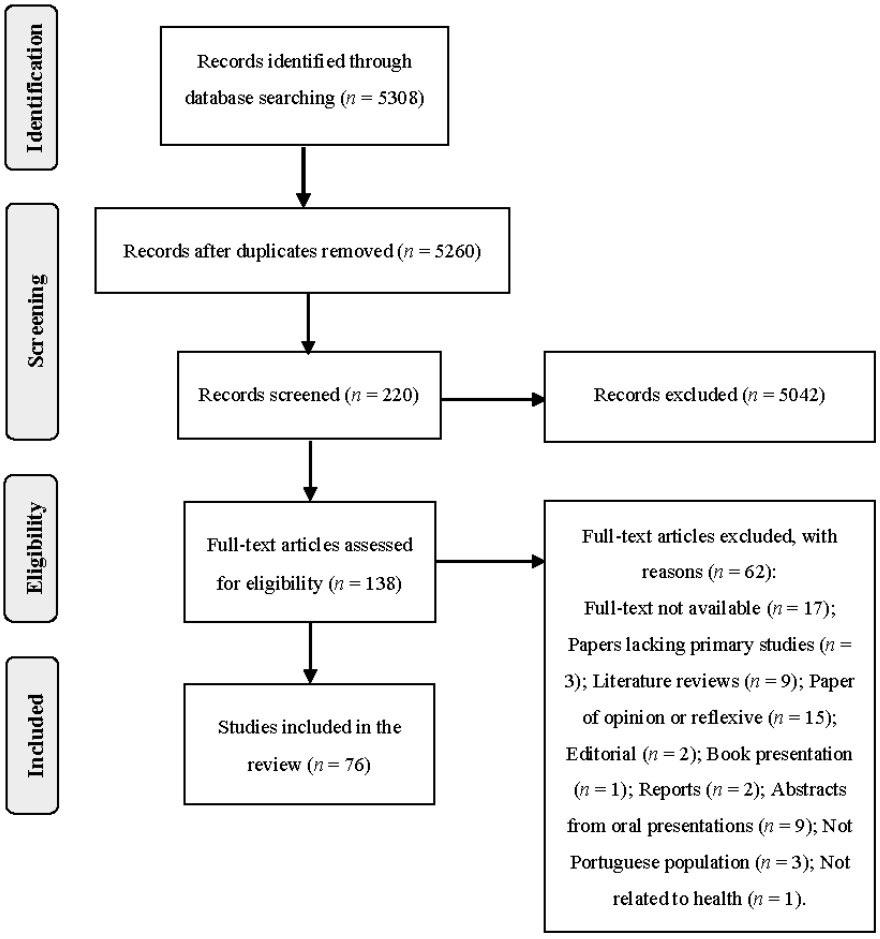

Figure 1. PRISMA flow diagram of this systematic review.

Data was gathered and extracted to a pre-defined Excel sheet comprising author(s), title, theme of study, type of publication, discipline, university or journal of publication, design, sample, aim, spiritual instruments used, results, limitations, and suggestions.

3. Results

A total of 76 Portuguese studies about spirituality have been included (Table 2). The first paper was published in 2002 (Caldeira 2002). Moreover, a growing interest in this theme led to the increasing publication of papers through time, and most studies were published in 2015 (n = 14), 2014 (n = 11), and 2016 (n = 10).

Table 2. References included in this review.

Author(s) Year	Author(s) Year
(Albuquerque 2009)	(Marques 2014)
(Alves 2011)	(Marques 2012)
(Andrade 2014)	(Marques et al. 2013)
(Araújo et al. 2017)	(Martinho 2016)
(Azevedo 2016)	(Martins 2011)
(Branco 2015)	(Martins et al. 2015)
(Brito 2014)	(Melo 2015)
(Caldeira 2002)	(Mendes 2013)
(Berenguer 2013)	(Moreira 2011)
(Caldeira et al. 2017a)	(Neves 2017)
(Caldeira et al. 2017b)	(Pacheco 2012)
(Caldeira et al. 2014)	(Paredes and Pereira 2017)
(Caldeira et al. 2016a)	(Pedro 2015)
(Caldeira et al. 2016b)	(Pereira 2012)
(Caldeira et al. 2011b)	(Pereira and Marques 2015)
(Carneiro et al. 2014)	(Pereira 2014)
(Castro 2016)	(Pereira et al. 2016)
(Catré et al. 2014)	(Pestana et al. 2007)
(Conceição 2014)	(Pimenta 2010)
(Correia 2017)	(Pimenta et al. 2014)
(Cruz 2012)	(Pinto 2012)
(Dias 2015)	(Pinto and Pais-Ribeiro 2007)
(Ermel et al. 2015)	(Pinto and Pais-Ribeiro 2010)
(Ferreira 2011)	(Pinto et al. 2012)
(Ferreira and Neto 2002)	(Queiroga 2013)
(França 2009)	(Rego 2008)
(França 2010)	(Rego et al. 2009)
(Freire et al. 2016)	(Rodrigues 2013)
(Garrett 2010)	(Roldão 2015)
(Gouveia 2011)	(Santos 2014)
(Gouveia et al. 2012)	(Sapage 2015)
(Gouveia et al. 2009)	(Silva 2015)
(Humboldt et al. 2013)	(Da Silva and Pereira 2017)
(Jesus 2015)	(Simões and Simões 2015)
(Jorge et al. 2016)	(Soares and Amorim 2015)
(Junior 2012)	(Teixeira 2016)
(Lopes 2014)	(Travado et al. 2010)
(Mangia 2015)	(Verbisck 2010)

Although 76 documents were identified, a total of 111 different authors were listed (Table 3).

Table 3. First authors and authorship of studies included in this review.

Authors	First Author		Authorship
	Yes/No	*n*	*n*
Acácio Catré	No	-	1
Alexandrina Simões	Yes	1	1
Amélia Figueiredo	No	-	1
Ana Calapez Gomes	No	-	1
Ana Cristina Rego	Yes	1	2
Ana Melo	Yes	1	1
Ana Cruz	Yes	1	1
Ana Marques	Yes	1	1
Ana Paredes	Yes	1	1
Ana Paula da Conceição	Yes	1	2

Table 3. *Cont.*

Authors	First Author		Authorship
	Yes/No	*n*	*n*
Ana Verissímo Ferreira	Yes	1	1
Anabela de Sousa Soares	Yes	1	1
Anabela Pereira	No	-	1
Andreia Garrett	Yes	1	1
Andreia Filipa Jesus	Yes	1	1
Andreia Pereira	Yes	1	2
Andreia Raquel Martins	Yes	1	1
Arménio Rego	Yes	1	1
Cândida Pinto	Yes	1	2
Carla Moleiro	No	-	1
Catarina Sapage	Yes	1	1
Catarina Ramos	No	-	1
Célia Ermel	No	-	1
Constança Paúl	No	-	1
Cristina Canavarro	No	-	1
Cristina Martins	No	-	1
David Estevens	No	-	1
David Rosmarin	No	-	1
Diana Jorge	Yes	1	1
Dulce Pereira	Yes	1	1
Emilia Campos de Carvalho	No	-	4
Erika Chaves	No	-	1
Félix Neto	No	-	1
Filipa Pimenta	Yes	1	2
Filomena Pereira	Yes	1	1
Fiona Timmins	No	-	3
Francis Carneiro	Yes	1	1
Francisco Gil	No	-	1
Francisco Pimentel	No	-	1
George Junior	Yes	1	1
Graça Esgalhado	No	-	1
Henrique Pereira	No	-	1
Inês Brito	Yes	1	1
Isabel Azevedo	Yes	1	1
Isabel Albuquerque	Yes	1	1
Isabel Leal	No	-	3
Jaclin' Freire	Yes	1	1
Jeremias Teixeira	Yes	1	1
Joana Bairradas	No	-	1
Joanna Mitchel	No	-	1
João Mendes	Yes	1	2
Joao Maroco	No	-	1
João Paulo Pestana	Yes	1	1
João Silva	Yes	1	1
Joaquim Ferreira	No	-	1
José Carlos Martins	No	-	1
José Eduardo Silva	Yes	1	1
José Pais-Ribeiro	No	-	4
Joseph Conboy	No	-	1
Katia Lopes	Yes	1	1
Lia Araújo	Yes	1	1
Lia Rodrigues	Yes	1	1
Lia Ventura	No	-	1
Liliana Roldão	Yes	1	1

Table 3. *Cont.*

Authors	First Author		Authorship
	Yes/No	*n*	*n*
Luigi Grassi	No	-	1
Luzia Travado	Yes	1	1
Maik Castro	Yes	1	1
Manuela Frederico	No	-	1
Marco Pereira	No	-	1
Margarida Vieira	No	-	6
Maria Graça Pereira	No	-	1
Maria Isabel Amorim	No	-	1
Maria João Gouveia	Yes	3	3
Maria João Andrade	Yes	1	1
Maria Marques	Yes	1	1
Maria Nazarete Catré	Yes	1	1
Maria Zita Castelo Branco	Yes	1	1
Mariana Marques	No	-	1
Mariana Neves	Yes	1	1
Marilena Verbisck	Yes	1	1
Marina Ferreira	Yes	1	1
Marina Cunha	No	-	1
Marta Martinho	Yes	1	1
Marta Marques	No	-	2
Miguel Pina Cunha	No	-	1
Monique Correia Alves	Yes	1	1
Nuno Correia	Yes	1	1
Oscar Ribeiro	No	-	1
Patrícia Pacheco	Yes	1	1
Paula Mangia	Yes	1	1
Priscilla Midori Furuta	No	-	1
Regina Célia Ermel	Yes	1	1
Sandra Dias	Yes	1	1
Sandra Moreira	Yes	1	1
Sara Pinto	Yes	2	2
Sérgio Pimenta	Yes	1	1
Shane J. Lopez	No	-	1
Sílvia Caldeira	Yes	8	9
Sofia França	Yes	1	1
Sofia Von Humboldt	Yes	1	2
Solange Souto	No	-	1
Sónia Simões	No	-	1
Susana Marques	Yes	1	1
Susana Queiroga	Yes	1	1
Teresa Pessoa	No	-	1
Tereza Laís Zutin	No	-	1
Thaís Tavares	No	-	1
Tiago Santos	Yes	1	1
Valdemar Pedro	Yes	1	1
Vânia França	Yes	1	1
Vilma Martins	Yes	1	1

Academic documents (PhD theses and master's dissertations) (n = 45), and scientific papers (n = 31) were identified in this study. In addition, a wide range of health disciplines was dedicated to the study of spirituality (Table 4) with the highest number of published papers on this topic presented by psychology (n = 38) and nursing (n = 23).

Table 4. Health disciplines of studies included in this review.

Health Discipline	Total	
	n	%
Psychology	38	50.00
Nursing	23	30.26
Palliative Care	7	9.21
Bioethics	1	1.32
Health Management	1	1.32
Intercultural Relationships	1	1.32
Medicine	1	1.32
Mental Health	1	1.32
Physiotherapy	1	1.32
Sociology	1	1.32
Not explicit	1	1.32
Total	76	100.00

Most studies used a quantitative (n = 55), qualitative (n = 7), or mixed design (n = 6). Although there was a tendency to use a quantitative approach, the number of qualitative studies increased between 2010 and 2012 (Figure 2).

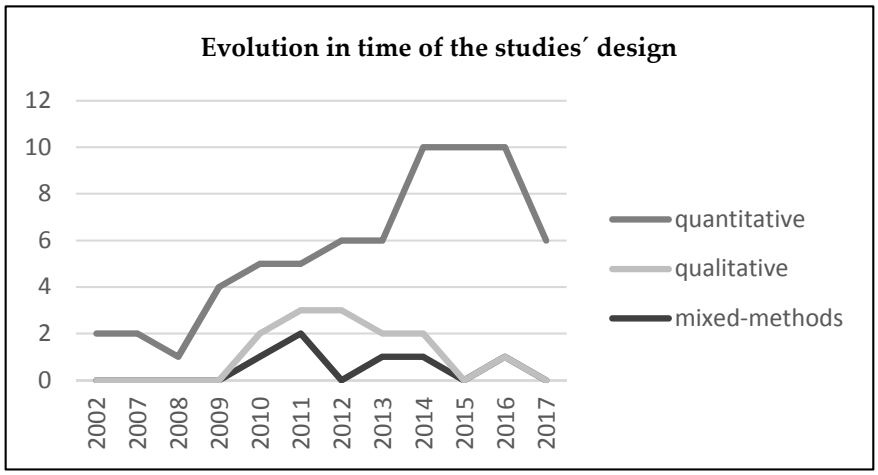

Figure 2. Evolution in time of the studies' design included in this review.

Samples ranged from eight (Garrett 2010; Martinho 2016) to 1876 participants (Gouveia 2011). Participants shared similar characteristics, but some studies included both adolescents and their parents (Simões and Simões 2015), physicians and nurses (Alves 2011), people with chronic or acute illness (Branco 2015), health professionals, clients and caregivers (Catré et al. 2014), health professionals (Albuquerque 2009; Pereira 2014), individuals with different religious backgrounds (Freire et al. 2016; Garrett 2010), palliative care professionals and volunteers (Martins 2011), and working and retired individuals (Verbisck 2010). Patients with chronic disease (n = 20), elderly (n = 11), and adults (n = 9) (Table 5) were the most frequent participants.

According to the aim of each study, it was possible to list 76 different themes (Table 6). Links between spirituality and oncology (n = 14), mental health (n = 9), and instruments' validation (n = 7) were found to be more frequent in the selected studies.

Table 5. Characteristics of participants included in the studies.

Participants	Total	
	n	**%**
People with a chronic illness	20	24.39
Elderly	11	13.41
Nurses	9	10.98
Individuals	9	10.98
Adults	9	10.98
Health professionals	6	7.32
Adolescents	2	2.44
Caregivers	2	2.44
Meditative practitioners	2	2.44
People with psychiatric disorders	2	2.44
Students	2	2.44
Volunteers	2	2.44
Key-informants	1	1.22
Parents	1	1.22
People with acute illness	1	1.22
Spiritual leaders	1	1.22
Teachers	1	1.22
Not explicit	1	1.22
Total	82	100.00

Table 6. Main themes of the studies included in this review.

Participants	Total	
	n	**%**
Oncology	14	17.07
Mental health	9	10.8
Validation of scales	7	8.54
Education	5	6.10
Hospital care	4	4.88
Meditative practices	4	4.88
Religiosity/religious practices	4	4.88
Palliative care	3	3.66
Spiritual care	3	3.66
Spiritual distress	4	4.88
Death	2	2.44
Diabetes	2	2.44
Diagnostic validation	3	3.66
End of life	2	2.44
Psychopathological symptoms	2	2.44
Caregivers of the elderly	1	1.22
Emotions/resilience	1	1.22
Faith	1	1.22
Health centers and family health units	1	1.22
Health contexts	1	1.22
Hope	1	1.22
Hospitalized patient	1	1.22
Institutionalized and community-based elderly	1	1.22
Loneliness	1	1.22
Management	1	1.22
Menopause	1	1.22
Organizations	1	1.22
Parents and teenagers/ shame/ anxiety	1	1.22
Retirement	1	1.22
Total	82	100.00

Quantitative or mixed-method research used a wide range of instruments to measure spirituality (Table 7), in a total of 78 tools. The Portuguese version of the Spiritual Well-Being Questionnaire (SWBQ) was the most used to measure spirituality (n = 25).

Table 7. List of instruments used in the studies included in this review.

Instruments (Short Name) (n = 78)	Total	
	n	%
Spiritual Well-being Scale; Spiritual Well-Being Questionnaire (SWBS; SWBQ; SWBQp)	25	16.89
Satisfaction with Life Scale (SWLS)	6	4.05
Positive and Negative Affect Schedule (PANAS)	5	3.38
Spiritual Assessment Scale (SAS)	5	3.38
Medical Outcomes Study 36—Item Short—Form Health Survey (MOS SF-36); SF-36v2 (version 2)	4	2.70
Spirituality Assessment Scale (ES)	4	2.70
Spiritual Health and Life-Orientation Measure (SHALOM)	4	2.70
Escala de Avaliação da Espiritualidade de Pinto & Pais-Ribeiro (EAE)	3	2.03
Psychological Well-Being Scale (PWB)	3	2.03
Geriatric Anxiety Inventory (GAI)	3	2.03
Geriatric Depression Scale (GDS)	3	2.03
Integrated Spiritual Intelligence Scale (ISIS)	3	2.03
Spirituality and Spiritual Care Rating Scale (SSCRS)	3	2.03
The World Health Organization Quality of Life—BREF (WHOQOL-BREF)	3	2.03
Brief COPE	2	1.35
Dispositional Flow Scale-2 (short version) (DFS-2)	2	1.35
European Organization for Research and Treatment of Cancer Core Quality of Life Questionnaire (EORTC-QLC-C30)	2	1.35
Functional Assessment of Cancer Therapy General (FACT-G)	2	1.35
Hospital Anxiety and Depression Scale (HADS)	2	1.35
Minnesota Multiphasic Personality Inventory-2 (MMPI-2)	2	1.35
Older Americans Resources and Services (OARS)	2	1.35
Peace of Mind Scale (PoM)	2	1.35
Scale for Assessment of Spirituality in Health Contexts (EAECS)	2	1.35
The World Health Organization Quality of Life—SRPB (WHOQOL-SRPB)	2	1.35
Affective Well-Being Scale (AWB)	1	0.68
Assessment Questionnaire of Self-care activities with Diabetes	1	0.68
Beck Depression Inventory (BDI-II)	1	0.68
Brief Scales of Perspectives on Death	1	0.68
Brief Symptom Inventory (BSI)	1	0.68
Cancer Worries Inventory (CWI)	1	0.68
Center of Epidemiological Studies Depression Scale (CES-D)	1	0.68
Children's Hope Scale (CHS)	1	0.68
Death Attitude Profile-Revised (DAP-R)	1	0.68
Duke University Religion Index (DUREL)	1	0.68
Emotional Expressivity Scale (EEE)	1	0.68
Escala de Ansiedade Estado/Traço para crianças	1	0.68
Escala de Vergonha Externa	1	0.68
Fordyce Emotions Questionnaire	1	0.68
Francis Scale of Attitude Towards Christianity	1	0.68
Functional Assessment of Chronic Illness Therapy-Spiritual Well-Being Scale (FACIT-Sp)	1	0.68
Herth Hope Index-PT (HIHI-PT)	1	0.68
Indecisiveness Scale (IS)	1	0.68
Inventory of Subjective Experiences of Suffering in Diseases (IESSD)	1	0.68
Loneliness Scale—UCLA	1	0.68
Measure of subjective happiness	1	0.68
Meditative Experience Effects (MEE-DM)	1	0.68
Menopause Symptoms' Severity Inventory (MMSI-38)	1	0.68
Mental Health Inventory (MHI)	1	0.68

Table 7. *Cont.*

Instruments (Short Name) (n = 78)	Total	
	n	%
Mini Mental State Examination (MMSE)	1	0.68
Mini-Mental Adjustment to Cancer (Mini-MAC)	1	0.68
Multidimensional Measurement of Religiousness and Spirituality	1	0.68
Neecham Confusion Scale	1	0.68
NEO-Five Factor Inventory (NEO-FFI)	1	0.68
Philadelphia Geriatric Center Morale Scale (PGCMS)	1	0.68
Posttraumatic Growth Inventory (PTGI)	1	0.68
Questionário de Bem-Estar Espiritual dos Pais (BEE)	1	0.68
Questionário Sobre Necessidades Espirituais (instrumento português) (QSNE)	1	0.68
Questionnaire of the Five Facets of Mindfulness (QCFM)	1	0.68
Religion and Religiosity by Quaresma Scale	1	0.68
Religious Practices' Questionnaire	1	0.68
Resilience Scale for Adults (RSA)	1	0.68
Santa Clara Strength of Religious Faith Questionnaire (SCSRFQ)	1	0.68
Scale to assess flourishing	1	0.68
Self-Compassion Scale (SELFCS)	1	0.68
Short-Form with 12 items (SF-12)	1	0.68
Social Support Questionnaire (SSQ6; SSQ6p)	1	0.68
Spiritual and Religious Attitudes in Dealing with Illness (SpREUK)	1	0.68
Spiritual Care Competence Scale (SCCS)	1	0.68
Spiritual Coping Questionnaire (SCQ)	1	0.68
Spiritual Intelligence Self-Report Inventory (SISRI-24)	1	0.68
Spiritual Well-Being Scale Score	1	0.68
Spirituality (Visual Analog Scale 0–10)	1	0.68
Spirituality at work scale	1	0.68
Students' Life Satisfaction Scale (SLSS)	1	0.68
The Resilience Scale	1	0.68
The World Health Organization Quality of Life (WHOQOL)	1	0.68
Valuation of Life Scale	1	0.68
Vocational Certainty Scale (ECV)	1	0.68
Total	148	100.00

Regarding the time frame, only one study was found to be longitudinal (Marques et al. 2013), and aimed to determine the relationship between hope, spirituality, religious practice, and life satisfaction in Portuguese students. All remaining studies were cross-sectional.

Specific characteristics of the articles and theses/dissertations included in this review are presented as follows.

3.1. Articles

Thirty-one primary studies were published in 24 different journals (11 national and 13 international journals) (Table 8). Although studies included Portuguese participants, papers were published in journals from the United States (n = 8), followed by Brazil (n = 3), Japan (n = 1), the Netherlands (n = 1), England (n = 1), and Switzerland (n = 1). The highest number of papers were published in Portuguese-written journals (n = 16) when compared to English-written journals (n = 15) (Table 8). Indexed journals were most chosen (n = 21).

Table 8. Characteristics of journals within the studies were published.

Journal	*n*	Written Language	Country
Journal of Religion & Health	5	English	United States
Análise Psicológica	2	Portuguese	Portugal
Psicologia, Saúde & Doenças	2	Portuguese	Portugal
Revista de Enfermagem Referência	2	Portuguese	Portugal
Arquivos de Medicina	1	Portuguese	Portugal
Cadernos de Saúde	1	Portuguese	Portugal
Cancer Nursing	1	English	United States
ConsCiências	1	Portuguese	Portugal
CuidArte Enfermagem	1	Portuguese	Brazil
International Journal of Nursing Knowledge	1	English	United States
Journal of Happiness Studies	1	English	Netherlands
Japanese Psychological Research	1	English	Japan
Journal of Occupational Health Psychology	1	English	United States
Open Theology	1	English	United States
Palliative and Supportive Care	1	English	England
Psychological Reports	1	English	United States
Psychology, Community & Health	1	English	Portugal
Religions	1	English	Switzerland
Revista Latino-Americana de Enfermagem	1	Portuguese	Brazil
Revista Nursing	1	Portuguese	Portugal
Revista Portuguesa de Enfermagem de Saúde Mental	1	Portuguese	Portugal
Revista Portuguesa de Investigação Comportamental e Social	1	Portuguese	Portugal
Revista Portuguesa de Saúde Pública	1	Portuguese	Portugal
REUOL. Revista de Enfermagem UFPE On Line	1	Portuguese	Brazil

Evidence related to spirituality started to be published by Portuguese authors in 2002 (Table 9). However, only since 2007 a consistent number of studies started to be published, and in 2016 the highest number of papers was published (n = 6). Not surprisingly, psychology (n = 16) and nursing (n = 12), were the health disciplines most found in this review.

3.2. Academic Documents

Theses and dissertations were developed as a requisite of either master degree (n = 37) and doctoral (PhD) degree (n = 8). The first study published in 2009 was a master's dissertation (Table 9). Masters' dissertations registered a consistent approach to spirituality throughout the years. Still, PhD research on the same topic started no later than 2011. The *Instituto Superior de Psicologia Aplicada* (*ISPA*) was the academic institution with more documents (n = 10), and the highest number of doctoral studies were conducted in *Universidade Católica Portuguesa* (*UCP*) (n = 6). Findings also revealed that research about spirituality conducted within PhD programmes was only found in *UCP*, *ISPA*, and *Instituto Universitário de Lisboa* (*ISCTE-IUL*), and masters' dissertations were identified in 12 national academic institutions (Table 10). Psychology (n = 21), palliative care (n = 6), and nursing (n = 5) revealed a higher number of authors and most documents were masters' dissertations. Nevertheless, health advanced studies, such as PhD theses in nursing (n = 6), were the most frequent when compared to other disciplines.

Table 9. Year of publication, health-related disciplines and design of the studies.

Year	*n*	%
2002	2	6.45
2007	2	6.45
2008	1	3.23
2009	3	9.68
2010	1	3.23
2011	1	3.23
2012	2	6.45
2013	2	6.45
2014	4	12.90
2015	3	9.68
2016	6	19.35
2017	4	12.90
Total	31	100.00
Health Disciplines		
Psychology	16	51.61
Nursing	12	38.71
Mental Health	1	3.23
Not explicit	1	3.23
Palliative Care	1	3.23
Total	31	100.00
Methodological approach		
Quantitative	27	87.10
Mixed-methods	2	6.45
Qualitative	1	3.23
Not explicit	1	3.23
Total	31	100.00

Table 10. Characteristics of academic studies and comparison between master dissertations and PhD theses.

Year	Master Dissertations		PhD Theses		Total	
	n	%	*n*	%	*n*	%
2009	2	5.41	0	0.00	2	4.44
2010	4	10.81	0	0.00	4	8.89
2011	5	13.51	1	12.50	6	13.33
2012	4	10.81	1	12.50	5	11.11
2013	1	2.70	3	37.50	4	8.89
2014	6	16.22	1	12.50	7	15.56
2015	9	24.32	2	25.00	11	24.44
2016	4	10.81	0	0.00	4	8.89
2017	2	5.41	0	0.00	0	0.00
Total	37	100.00	8	100.00	45	100.00
University/Institute/School						
Escola Superior de Enfermagem do Porto (ESEP)	2	5.41	0	0.00	2	4.44
Escola Superior de Enfermagem de Lisboa (ESEL)	1	2.70	0	0.00	1	2.22
Escola Superior de Tecnologia da Saúde de Lisboa (ESTeSL-IPL)	1	2.70	0	0.00	1	2.22
Universidade Aberta (UAB)	1	2.70	0	0.00	1	2.22
Universidade do Algarve	1	2.70	0	0.00	1	2.22
Universidade Católica Portuguesa (UCP)	2	5.41	6	75.00	8	17.78
Universidade de Coimbra (UC)	2	5.41	0	0.00	2	4.44
Universidade Lisboa (UL)	6	16.22	0	0.00	6	13.33

Table 10. *Cont.*

Year	Master Dissertations		PhD Theses		Total	
	n	**%**	***n***	**%**	***n***	**%**
Universidade Lusófona	3	8.11	0	0.00	3	6.67
Universidade Porto (UP)	5	13.51	0	0.00	5	11.11
Instituto Superior de Psicologia Aplicada (ISPA)	9	24.32	1	12.50	10	22.22
Instituto Superior Miguel Torga (ISMT)	4	10.81	0	0.00	4	8.89
Instituto Universitário de Lisboa (ISCTE-IUL)	0	0.00	1	12.50	1	2.22
Total	37	100.00	8	100.00	45	100.00
Health Disciplines						
Bioethics	1	2.70	0	0.00	1	2.22
Health Management	1	2.70	0	0.00	1	2.22
Intercultural Relationships	1	2.70	0	0.00	1	2.22
Medicine	1	2.70	0	0.00	1	2.22
Nursing	5	13.51	6	75.00	11	24.44
Palliative Care	6	16.22	0	0.00	6	13.33
Physiotherapy	1	2.70	0	0.00	1	2.22
Psychology	21	56.76	1	12.50	22	48.89
Sociology	0	0.00	1	12.50	1	2.22
Total	35	100.00	8	100.00	45	100.00
Methodological approach						
Quantitative	24	64.86	4	50.00	28	62.22
Qualitative	5	13.51	1	12.50	6	13.33
Mixed-methods	2	5.41	2	25.00	4	8.89
Not explicit	6	16.22	1	12.50	7	15.56
Total	37	100.00	8	100.00	45	100.00
Participants						
Meditative practitioners	1	2.56	0	0.00	1	2.13
Key-informants	1	2.56	0	0.00	1	2.13
People with a chronic disease	6	15.38	4	50.00	10	21.28
People with acute illness	0	0.00	1	12.50	1	2.13
Elderly	6	15.38	0	0.00	6	12.77
Adults	6	15.38	1	12.50	7	14.89
Adolescents	1	2.56	0	0.00	1	2.13
People with psychiatric conditions	1	2.56	0	0.00	1	2.13
Caregivers	1	2.56	0	0.00	1	2.13
Nurses	3	7.69	2	25.00	5	10.64
Health professionals	4	10.26	0	0.00	4	8.51
Parents	1	2.56	0	0.00	1	2.13
Spiritual leaders	1	2.56	0	0.00	1	2.13
Students	4	10.26	0	0.00	4	8.51
Individuals	1	2.56	0	0.00	1	2.13
Volunteers	2	5.13	0	0.00	2	4.26
Total	39	100.00	8	100.00	47	100.00
Themes						
Caregivers of the elderly	1	2.44	0	0.00	1	2.04
Death	2	4.88	0	0.00	2	4.08
Diabetes	1	2.44	1	12.50	2	4.08
Diagnostic validation	0	0.00	1	12.50	1	2.04
Education	2	4.88	0	0.00	2	4.08
Elderly	3	7.32	0	0.00	3	6.12
Emotions/resilience	1	2.44	0	0.00	1	2.04
End of life	1	2.44	1	12.50	2	4.08

Table 10. *Cont.*

Year	Master Dissertations		PhD Theses		Total	
	n	%	*n*	%	*n*	%
Health centers and family health units	1	2.44	0	0.00	1	2.04
Health professionals	1	2.44	0	0.00	1	2.04
Hospital care	0	0.00	1	12.50	1	2.04
Hospitalized patient	0	0.00	1	12.50	1	2.04
Institutionalized and community-based elderly	1	2.44	0	0.00	1	2.04
Loneliness	1	2.44	0	0.00	1	2.04
Meditative practices	2	4.88	1	12.50	3	6.12
Mental health	5	12.20	0	0.00	5	10.20
Oncology	6	14.63	0	0.00	6	12.24
Organizations	1	2.44	0	0.00	1	2.04
Palliative care	3	7.32	0	0.00	3	6.12
Parents and teenagers/shame/anxiety	1	2.44	0	0.00	1	2.04
Psychopathological symptoms	1	2.44	0	0.00	1	2.04
Religiosity/religious practices	1	2.44	0	0.00	1	2.04
Spiritual care	1	2.44	1	12.50	2	4.08
Spiritual distress	2	4.88	1	12.50	3	6.12
Validation of scales	2	4.88	0	0.00	2	4.08
Volunteers	1	2.44	0	0.00	1	2.04
Total	41	100.00	8	100.00	49	100.00

The quantitative design was the most used (n = 28) in masters' dissertations and in PhD theses, followed by qualitative design (n = 6) and mixed-methods (n = 4). People with chronic health conditions were the most frequent participants (n = 10). A general analysis of the findings (Table 10) highlighted oncology (n = 6), mental health (n = 5), geriatrics (n = 3), palliative care (n = 3), and spiritual distress (n = 3) as the main themes addressed in the academic studies. Diagnostic validation, hospital care, and hospitalized patients were singular aspects found to be studied in PhD studies and not on masters' dissertations. Still, diabetes, end of life, meditative practices, spiritual care, and spiritual distress were studied in both academic degrees.

4. Discussion

This review focused on characterizing Portuguese theses, dissertations, and papers about spirituality in health. It brings a new insight towards the academic literature as it identified 76 Portuguese scientific documents related to spirituality research in health disciplines. The findings revealed that Portuguese publication about spirituality in health started in 2002. Interestingly, Portuguese and Brazilian studies about spirituality and religion were most published in 2003–2004 (Damiano et al. 2016).

Overall, these results have contributed to the acknowledgement that Portuguese studies are expanding and are not only limited to nursing (Caldeira et al. 2011a). In fact, this study points to a primary evidence that clearly extrapolates the four studies reported in one nursing review conducted between the years of 1990 and 2010 (Caldeira et al. 2011a), and reinforces the multidisciplinary interest also previously addressed in an international review conducted between 1999 and 2013 (Lucchetti and Lucchetti 2014).

While psychology was the discipline that gathered the highest number of results in this Portuguese review, psychiatry was in a Brazilian review (Damiano et al. 2016). Nevertheless, nursing was found important in this type of research (Damiano et al. 2016).

Samples, such as elderly and adult patients suffering from chronic illness, such as cancer, have predominated, confirming previous statements of the lack of research on a national level related to the study of spirituality in people with nononcologic health issues (Ferreira et al. 2016), and in

different phases of lifespan (Romeiro et al. 2017a, 2017b). On the other hand, mental health and spirituality revealed a significant relationship, which has been underlined in literature (Koenig 2012).

Although three types of methodological approaches were used, the quantitative approach was the most frequent. This may be due to the primary need to firstly quantify, measure, and generalize a phenomenon before understanding the subjective nature and the deep meaning (Ferreira et al. 2016), which is critical in spirituality. In this regard, 78 instruments were identified in Portuguese research with predominance of the Spiritual Well-Being Questionnaire (SWBQ) (Gommez and Fisher 2003), translated and validated to the Portuguese population (Gouveia et al. 2009). From the 76 Portuguese studies that were conducted, seven were used to validate spiritual tools to a national context, which reflects the lack of instruments available to authors and transculturally adapted to the Portuguese population, not only to the specificities of this sample but to particular settings.

When analyzing the time frame, a scarce number of studies adopted a longitudinal design. Longitudinal studies have been considered necessary in the study of spirituality to decrease the gap of knowledge related to patients' spirituality across time (Martins et al. 2017).

Regarding the nature of the scientific papers, it was possible to determine the recurrence of PhD theses and masters' dissertations (n = 45) when comparing with published articles (n = 31). Most of the international selected journals derive from the USA which goes in line with previous findings of a review of 15 years of publications on spirituality and religion (Lucchetti and Lucchetti 2014). Portuguese authors seemed to prefer Portuguese-written and English-written journals, although the majority chose national or Brazilian to other journals. This might be explained by the closeness between both languages when compared to other foreign idioms. The journals had a specific scope, related to the theme, such as religion, psychology, and nursing.

Since this is an original review, there is no comparison with other Portuguese reviews related to master dissertations and doctoral theses addressing spirituality and religion. Yet, a palliative care and bibliometric nursing study conducted in 2016 discloses the existence of a higher number of academic masters degrees when compared to doctoral degrees (Damiano et al. 2016). This might also justify the higher number of masters' dissertations (n = 37) when compared with PhD theses (n = 8) in this review.

Furthermore, it is of no surprise that *ISPA*, traditionally dedicated to psychological research and education, was the university that presented the highest numbers of masters' dissertations related to spirituality. However, most nursing doctoral theses were conducted at the *UCP*. Doctoral research included essentially samples of adults, and this interest of nurses has been reported before (Basto 2012). In addition, the number of theses exceeds the number of published articles which may indicate that Portuguese PhD findings are still not being properly disclosed (Basto 2012).

These findings should be analyzed considering some limitations, such as the possibility of some theses/dissertations being available only in print and the delay between the viva and the publication in online repositories, which might have compromised the analysis and extraction of significant information. Moreover, it was also acknowledged the possibility of some documents, mainly theses, not being listed in the universities repositories and being only available in a hand or physical search in libraries.

5. Conclusions

This study provides the characterization of Portuguese theses, dissertations, and papers about spirituality in health, mapping the scientific knowledge development that has occurred in the country. It is evident the growth of interest related to this phenomenon in health disciplines, although with a still slow progression when compared to worldwide research on the topic. A multidisciplinary approach is foundational in implementing spirituality in health care and the results underline the interest in this topic from other disciplines, rather than only nursing. Most studies are quantitative, cross-sectional, and descriptive or focused on theoretical concerns. Further studies must provide a deeper and closer understanding of spirituality in patients' or families' perspective that could bring new insights to practice. Also, including children and adolescents as participants in the research about spirituality

in these health-care disciplines could provide a broad understanding of the phenomenon across the lifespan and in a wide variety of sets and health-related experiences other than chronic illness.

Despite the limitations, the study provides an innovative insight into the development of Portuguese health disciplines and exerts the need for further studies, namely with a qualitative and longitudinal design. This would allow forthcoming synthesis and meta-synthesis capable of gathering and generalizing findings to the Portuguese population. Finally, advanced studies are claimed, and publication of results in other journals than Portuguese-written might propel national research to an international level and contribute to the understanding of the spiritual dimension and implications in health.

Author Contributions: Conceptualization, J.R., S.P., S.C.; Data extraction and analysis, J.R., S.P., H.M., S.C.; Writing—Original Draft Preparation, J.R.; Writing—Review & Editing, J.R., S.P., H.M., S.C.

Funding: This research received no external funding.

Conflicts of Interest: The authors declare no conflict of interest.

References

Albuquerque, Isabel Garcia da Fonseca e Faro de. 2009. A Espiritualidade No Desempenho dos Centros de Saúde e das Unidades de Saúde Familiar. Master's Thesis, Instituto Superior de Ciências do Trabalho e da Empresa (ISCTE), Lisboa, Portugal.

Alves, Monique Correia. 2011. A Espiritualidade e os Profissionais de Saúde em Cuidados Paliativos. Master's Thesis, Universidade de Lisboa Faculdade de Medicina, Lisboa, Portugal. Available online: http://repositorio.ul.pt/handle/10451/4178 (accessed on 21 February 2017).

Andrade, Maria João Rodrigues. 2014. Bem-Estar Espiritual e Flow Disposicional em Práticas Meditativas. Master's Thesis, ISPA—Instituto Universitário, Lisboa, Portugal. Available online: http://repositorio.ispa.pt/handle/10400.12/3633 (accessed on 21 February 2017).

Araújo, Lia, Oscar Ribeiro, and Constança Paúl. 2017. The role of existential beliefs within the relation of centenarians' health and well-being. *Journal of Religion and Health* 56: 1111–22. [CrossRef] [PubMed]

Austin, Philip, Jessica Macdonald, and Roderick MacLeod. 2018. Measuring spirituality and religiosity in clinical settings: A scoping review of available instruments. *Religions* 9: 70. [CrossRef]

Azevedo, Isabel Sofia Simões. 2016. Qualidade de Vida Espiritual, Bem-Estar Subjetivo e (in)Decisão Vocacional de Alunos No Ensino Secundário. Master's Thesis, Faculdade de Psicologia e de Ciências da Educação, Universidade de Coimbra, Coimbra, Portugal. Available online: https://estudogeral.sib.uc.pt/handle/10316/32935 (accessed on 21 February 2017).

Barber, Chris. 2012. Spirituality and religion: A brief definition. *British Journal of Healthcare Assistants* 6: 378–81. [CrossRef]

Basto, Marta Lima. 2012. Qual o objecto de estudo das teses de doutoramento em enfermagem das universidades portuguesas? Uma análise do resumos. *Pensar Enfermagem* 16: 2–25.

Berenguer, Sílvia Maria Alves Caldeira. 2013. Validação Do Diagnóstico de Enfermagem Angústia Espiritual. Ph.D. Thesis, Universidade Católica Portuguesa, Lisboa, Portugal. Available online: https://repositorio.ucp.pt/handle/10400.14/15386 (accessed on 23 February 2017).

Branco, Maria Zita Pires Castelo. 2015. Bem-Estar Espiritual da Pessoa Doente Hospitalizada. Ph.D. Thesis, Universidade Católica Portuguesa, Porto, Portugal. Available online: https://repositorio.ucp.pt/handle/10400.14/19364 (accessed on 23 February 2017).

Brito, Inês Nunes de. 2014. Relação Entre o Bem-Estar Espiritual e Sintomas Psicopatológicos na População Adulta Portuguesa. Master's Thesis, ISPA—Instituto Universitário, Lisboa, Portugal. Available online: http://repositorio.ispa.pt/handle/10400.12/3646 (accessed on 23 February 2017).

Caldeira, Sílvia. 2002. Cuidar do homem face à dimensão espiritual. *Nursing* 163: 17–22.

Caldeira, Sílvia, Maria Zita Castelo Branco, and Margarida Vieira. 2011a. A espiritualidade nos cuidados de enfermagem: Revisão da divulgação científica em Portugal. *Revista de Enfermagem Referência ser* 3: 145–52. [CrossRef]

Caldeira, Sílvia, Ana Calapez Gomes, and Manuela Frederico. 2011b. De um novo paradigma na gestão dos enfermeiros: A espiritualidade no local de trabalho. *Revista de Enfermagem Referência ser* 3: 25–35. [CrossRef]

Caldeira, Sílvia, Emília Campos de Carvalho, and Margarida Vieira. 2014. Entre o bem-estar espiritual e a angústia espiritual: Possiveis fatores relacionados a idosos com cancro. *Revista Latino-Americana de Enfermagem* 22: 28–34. [CrossRef] [PubMed]

Caldeira, Sílvia, Amélia Simões Figueiredo, Ana Paula da Conceição, Célia Erme, João Mendes, Erika Chaves, Emília Campos de Carvalho, and Margarida Vieira. 2016a. Spirituality in the undergraduate curricula of nursing schools in Portugal and São Paulo-Brazil. *Religions* 7: 134. [CrossRef]

Caldeira, Sílvia, Emília Campos Carvalho, and Margarida Vieira. 2016b. Nursing diagnosis of "spiritual distress" in women with breast cancer: Prevalence and major defining characteristics. *Cancer Nursing* 39: 321–27. [CrossRef] [PubMed]

Caldeira, Sílvia, Fiona Timmins, Emília Campos de Carvalho, and Margarida Vieira. 2017a. Clinical validation of the nursing diagnosis spiritual distress in cancer patients undergoing chemotherapy. *International Journal of Nursing Knowledge* 28: 44–52. [CrossRef] [PubMed]

Caldeira, Sílvia, Fiona Timmins, Emília Campos de Carvalho, and Margarida Vieira. 2017b. Spiritual Well-Being and Spiritual Distress in Cancer Patients Undergoing Chemotherapy: Utilizing the SWBQ as Component of Holistic Nursing Diagnosis. *Journal of Religion and Health* 56: 1489–502. [CrossRef] [PubMed]

Carneiro, Francis, Sofia von Humboldt, and Isabel Leal. 2014. Bem-estar subjetivo em idosas com e sem cancro da mama em remissão. *Psicologia, Saúde & Doenças* 15: 192–201. [CrossRef]

Castro, Maik Souza dede. 2016. Espiritualidade: Relação Com as Atitudes Acerca da Morte e a Solidão em Adultos. Master's Thesis, Escola de Psicologia e Ciências da Vida, Universidade Lusófona de Humanidades e Tecnologias, Lisboa, Portugal. Available online: http://recil.grupolusofona.pt/handle/10437/7133 (accessed on 21 February 2017).

Catré, Maria Nazarete Costa, Joaquim Armando Ferreira, Teresa Pessoa, Marco Pereira, Maria Cristina Canavarro, and Acácio Catré. 2014. O domínio SRPB (Spirituality, Religiousness and Personal Beliefs) do WHOQOL: O estudo com grupos focais para validação da versão em português europeu do WHOQOL-SRPB. *Análise Psicológica* 32: 401–17. [CrossRef]

Conceição, Ana Paula de. 2014. A Competência Para o Cuidado Espiritual em Enfermagem. Ph.D. Thesis, Universidade Católica Portuguesa, Lisboa, Portugal. Available online: https://repositorio.ucp.pt/bitstream/10400.14/18292/1/TESE%20DE%20DOUTORAMENTO%272014.pdf (accessed on 23 February 2017).

Correia, Nuno. 2017. Espiritualidade No Processo de Coping: Adaptação e Validação do Spiritual Coping Questionnaire na População Portuguesa e a sua Relação Com o Bem-Estar Espiritual. Master's Thesis, ISPA—Instituto Universitário, Lisboa, Portugal. Available online: http://repositorio.ispa.pt/handle/10400.12/5806 (accessed on 30 June 2018).

Crowther, Susan, and Jenny Hall. 2017. *Spirituality and Childbirth: Meaning and Care at the Start of Life*. New York: Routledge.

Cruz, Ana Elisabete de Jesus Alves da. 2012. Qualidade de Vida e Espiritualidade em Idosos Institucionalizados e em Comunidade. Master's Thesis, Instituto Politécnico de Lisboa, Escola Superior de Tecnologia da Saúde de Lisboa, Lisboa, Portugal. Available online: https://repositorio.ipl.pt/handle/10400.21/2686 (accessed on 21 February 2018).

Da Silva, João P., and Anabela M. S. Pereira. 2017. Perceived spirituality, mindfulness and quality of life in psychiatric patients. *Journal of Religion and Health* 56: 130–40. [CrossRef] [PubMed]

Damiano, Rodolfo F., Lucas A. Costa, Marcos Túlio S. A. Viana, Alexander Moreira-Almeida, Alessandra L. G. Lucchetti, and Giancarlo Lucchetti. 2016. Brazilian scientific articles on "spirituality, religion and health". *Archives of Clinical Psychiatry (São Paulo)* 43: 11–16. [CrossRef]

Dhar, Neera, Santosh Kumar Chaturvedi, and Deoki Nandan. 2013. Spiritual health, the fourth dimension: A public health perspective. *WHO South-East Asia Journal of Public Health* 2: 3–5. [CrossRef] [PubMed]

Dias, Sandra Cristina Romão. 2015. A Relação Entre Depressão, Menopausa e Religiosidade em Mulheres de Baixo Nível Sóciocultural. Master's Thesis, Faculdade de Psicologia, Universidade de Lisboa, Lisboa, Portugal. Available online: http://repositorio.ul.pt/handle/10451/23044 (accessed on 21 February 2017).

Ermel, Regina Célia, Margarida Vieira, Thaís Ferrarini Tavares, Priscilla Midori Furuta, Tereza Laís Zutin, and Ana Cristina Caramelo. 2015. O bem-estar espiritual dos professores de medicina e de enfermagem. *Revista de Enfermagem UFPE on Line* 9: 158–63. [CrossRef]

Ferreira, Marina Arlete Alves. 2011. Estudo Clínico Sobre o Impacto Psio-Funcional e Espiritual No Estatuto de Sobrevivente Oncológico. Master's Thesis, Universidade Católica Portuguesa, Braga, Portugal. Available online: https://repositorio.ucp.pt/bitstream/10400.14/8596/3/Disserta%C3%A7%C3%A3o.pdf (accessed on 21 February 2017).

Ferreira, Ana Veríssimo, and Félix Neto. 2002. Psychometric properties of the francis scale of attitude towards christianity among portuguese university students. *Psychological Reports* 91: 995–98. [CrossRef] [PubMed]

Ferreira, Maria Amélia Leite, Alexandra Manuela Nogueira de Andrade Pereira, José Carlos Amado Martins, and Maria do Céu Barbieri-Figueiredo. 2016. Palliative care and nursing in dissertations and theses in Portugal: A bibliometric study. *Journal of Nursing School USP* 50: 313–19. [CrossRef] [PubMed]

França, Vânia Clara Morais. 2009. Benefícios Psicológicos da Prática de Yôga: Bem-Estar Espiritual e Flow Disposicional. Master's Thesis, Faculdade de Psicologia, Universidade de Lisboa, Lisboa, Portugal. Available online: http://repositorio.ispa.pt/handle/10400.12/4258 (accessed on 23 February 2017).

França, Sofia Alexandra Franco. 2010. O Sofrimento Espiritual Do Doente Adulto com Leucemia Aguda Internado. Master's Thesis, Faculdade de Medicina de Lisboa, Universidade de Lisboa, Lisboa, Portugal. Available online: http://repositorio.ul.pt/handle/10451/4180 (accessed on 21 February 2017).

Freire, Jaclin, Carla Moleiro, and David H. Rosmarin. 2016. Calling for awareness and knowledge: Perspectives on religiosity, spirituality and mental health in a religious sample from Portugal (a mixed-methods study). *Open Theology* 1: 681–99. [CrossRef]

Garrett, Andreia Filipa Alves. 2010. A Influência da Religião-Espiritualidade na Saúde: Apoio Social e Estratégias de Coping Como Variáveis Mediadoras. Master's Thesis, Faculdade de Psicologia, Universidade de Lisboa, Lisboa, Portugal. Available online: http://repositorio.ul.pt/handle/10451/2637 (accessed on 23 February 2017).

Gommez, Rapson, and John W. Fisher. 2003. Domains of spiritual well-being and development and validation of the spiritual well-being questionnaire. *Personality and Individual Differences* 35: 1975–91. [CrossRef]

Gouveia, Maria João Pinheiro Morais. 2011. Flow Disposicional e o Bem-Estar Espiritual em Praticantes de Actividades Físicas de Inspiração Oriental. Ph.D. Thesis, ISPA—Instituto Universitário, Lisboa, Portugal. Available online: http://repositorio.ispa.pt/handle/10400.12/1226 (accessed on 23 February 2017).

Gouveia, Maria João, Marta Moreira Marques, and José Luís Pais Ribeiro. 2009. Versão portuguesa do questionário de bem-estar espiritual (SWBQ): Análise confirmatória da sua estrutura factorial. *Psicologia, Saúde & Doenças* 10: 285–93.

Gouveia, Maria João Pinheiro Morais, José Luís Pais Ribeiro, and Marta Moreira Marques. 2012. Estudo da invariância fatorial do questionário de bem-estar espiritual (SWBQ) em praticantes de atividades físicas de inspiração oriental. *Psychology, Community & Health* 1: 140–50.

Humboldt, Sofia von, Leal Isabel, and Filipa Pimenta. 2013. Does spirituality really matter: A study on the potential of spirituality for older adult's adjustment to aging. *Japanese Psychological Research* 56: 114–25. [CrossRef]

Jesus, Andreia Filipa Gabriel de. 2015. Sabedoria em Adultos Idosos que Frequentam Universidades Seniores: Um Estudo Correlacional com a Abertura à Experiência, a Qualidade de Vida e o Bem-Estar Espiritual. Master's Thesis, Faculdade de Psicologia e de Ciências da Educação, Universidade de Coimbra, Coimbra, Portugal. Available online: https://estudogeral.sib.uc.pt/handle/10316/32384 (accessed on 23 February 2017).

Jorge, Diana Filipa Oliveira, Graça Esgalhado, and Henrique Pereira. 2016. Inteligência espiritual: Propriedades psicométricas da escala de inteligência espiritual integrada (EIEI). *Análise Psicológica* 34: 325–37. [CrossRef]

Junior, George Shinagawa. 2012. "Os Cuidados Paliativos e a Organização da Assistência Espiritual e Religiosa No Sistema Nacional de Saúde" FMUP—Tese de Mestrado em Cuidados Paliativos. Master's Thesis, Faculdade de Medicina da Universidade do Porto, Porto, Portugal. Available online: https://sigarra.up.pt/fmup/pt/teses.tese?p_aluno_id=105926&p_processo=17344&p_lang=0 (accessed on 21 February 2017).

Koenig, Harold G. 2012. Religion, spirituality, and health: The research and clinical implications. *ISRN Psychiatry* 2012: 278730. [CrossRef] [PubMed]

Lopes, Kátia. 2014. O Bem-Estar Espiritual e Resiliência em Doentes Oncológicos. Master's Thesis, ISPA—Instituto Universitário, Lisboa, Portugal.

Lucchetti, Giancarlo, and Alessandra Lamas Granero Lucchetti. 2014. Spirituality, religion, and health: Over the last 15 years of field research (1999–2013). *International Journal of Psychiatry in Medicine* 48: 199–215. [CrossRef] [PubMed]

Lucchetti, Giancarlo, Alessandra Lamas Granero Lucchetti, and Homero Vallada. 2013. Measuring spirituality and religiosity in clinical research: A systematic review of instruments available in the Portuguese language. *Sao Paulo Medical Journal = Revista Paulista de Medicina* 131: 112–22. [CrossRef] [PubMed]

Mangia, Paula. 2015. *"Estudo Transcultural de Validade do SHALOM, um Instrumento de Bem-Estar Espiritual" (Estudo Transcultural de Validade do SHALOM, um Instrumento de Bem-Estar Espiritual)*. Lisboa: ISPA—Instituto Universitário, Available online: http://repositorio.ispa.pt/handle/10400.12/4536 (accessed on 21 February 2017).

Marques, Maria Nazaré. 2012. Pluralidade Religiosa e Assistência Hospitalar: Estudo de Caso: Projecto Inter-Religioso No Hospital de São João. Master's Thesis, Universidade Aberta, Porto, Portugal. Available online: https://repositorioaberto.uab.pt/handle/10400.2/2136 (accessed on 23 February 2017).

Marques, Ana Filipa Vieira Brites. 2014. Bem-Estar Espiritual e Comportamentos de Controlo da Diabetes Tipo II. Master's Thesis, ISPA—Instituto Universitário, Lisboa, Portugal.

Marques, Susana C., Shane J. Lopez, and Joana Mitchell. 2013. The role of hope, spirituality and religious practice in adolescents' life satisfaction: Longitudinal findings. *Journal of Happiness Studies* 14: 251–61. [CrossRef]

Martinho, Marta Ferreira. 2016. A Dimensão Espiritual na Pessoa com Doença Oncológica em Fim de Vida: Intervenções de Enfermagem. Master's Thesis, ESEL, Lisboa, Portugal. Available online: https://comum.rcaap.pt/handle/10400.26/17176 (accessed on 21 February 2017).

Martins, Vilma Raquel Ferreira. 2011. Caracterização e Abordagem das Necessidades Espirituais Do Doente em Final de Vida: Visão Integrada dos Profissionais de Cuidados Paliativos. Master's Thesis, Universidade de Lisboa Faculdade de Medicina, Lisboa, Portugal. Available online: http://repositorio.ul.pt/handle/10451/6290 (accessed on 21 February 2017).

Martins, Andreia Raquel, Sara Pinto, Sílvia Caldeira, and Francisco Luís Pimentel. 2015. Tradução e adaptação da spirituality and spiritual care rating scale em enfermeiros portugueses de cuidados paliativos. *Revista de Enfermagem Referência ser* IV: 89–97. [CrossRef]

Martins, Helga, Joana Romeiro, and Sílvia Caldeira. 2017. Spirituality in nursing: An overview of research methods. *Religions* 8: 226. [CrossRef]

Melo, Ana Cristina Miranda Romano Fontes Pereira de. 2015. Espiritualidade e Saúde Mental na Pessoa com Diabetes Tipo 2: Sipirituality and Mental Health of the Person with Type 2 Diabetes. Ph.D. Thesis, Universidade Católica Portuguesa, Lisboa, Portugal. Available online: https://repositorio.ucp.pt/handle/10400.14/20713 (accessed on 21 February 2017).

Mendes, João Manuel Pedro Galhanas. 2013. A Dimensão Espiritual Do ser Humano: O Diagnóstico de Angústia Espiritual e a Intervenção de Enfermagem. Ph.D. Thesis, Universidade Católica Portuguesa, Lisbon, Portugal. Available online: https://repositorio.ucp.pt/handle/10400.14/10561 (accessed on 23 February 2017).

Moreira, Sandra Maria de Jesus. 2011. Espiritualidade, Bem-Estar e Qualidade de Vida de Pessoas Idosas Que Vivem Sós No Domicílio Habitual. Master's Thesis, Escola Superior de Enfermagem do Porto, Porto, Portugal. Available online: https://comum.rcaap.pt/handle/10400.26/9214 (accessed on 23 February 2017).

Neves, Mariana. 2017. *Bem-Estar Espiritual, Sintomas Depressivos e Ansiosos nos Idosos*. Coimbra: ISMT. Available online: http://repositorio.ismt.pt:8080/jspui/handle/123456789/724 (accessed on 30 June 2018).

Pacheco, Patrícia Alexandra. 2012. Espiritualidade nas Organizações Ligadas ao Desenvolvimento: Uma Abordagem Etnográfica Transcultural. Master's Thesis, Escola Superior de Enfermagem do Porto, Porto, Portugal. Available online: https://comum.rcaap.pt/handle/10400.26/9342?locale=pt_PT (accessed on 23 February 2017).

Papathanasiou, Ioanna V., Melachrini Sklavou, and Lambrini Kourkouta. 2014. Holistic nursing care: Theories and perspectives. *American Journal of Nursing Science* 2: 1. [CrossRef]

Paredes, Ana, and Maria Graça Pereira. 2017. Spirituality, Distress and Posttraumatic Growth in Breast Cancer Patients. *Journal of Religion and Health*, 1–12. [CrossRef] [PubMed]

Pedro, Valdemar Dias da Silva. 2015. A Espiritualidade nos Voluntários. Master's Thesis, Universidade Lusófona de Humanidades e Tecnologias, Lisboa, Portugal. Available online: http://recil.grupolusofona.pt/handle/10437/7153 (accessed on 23 February 2017).

Pereira, Filomena Moreira Pinto. 2012. Bem—Estar Espiritual, Qualidade de Vida e Coping na Fase Final de Vida. Ph.D. Thesis, Universidade Católica Portuguesa, Lisboa, Portugal. Available online: https://repositorio.ucp.pt/handle/10400.14/14973 (accessed on 21 February 2017).

Pereira, Dulce Marlene da Silva. 2014. Perspetivas de Morte e Bem-Estar Espiritual em Profissionais de Saúde que Cuidam de Doentes Terminais. Master's Thesis, Faculdade de Medicina da Universidade do Porto, Porto, Portugal. Available online: http://repositorio-aberto.up.pt/handle/10216/73460 (accessed on 21 February 2017).

Pereira, Andreia Vanessa Domingues, and Mariana Orientadora Marques. 2015. Inteligência Espiritual, Bem-Estar Psicológico, Sintomas Depressivos e Ansiosos, Saúde Mental e Física em Idosos em lar e Centro de Dia. Master's Thesis, Instituto Superior Miguel Torga, Coimbra, Portugal. Available online: http://repositorio.ismt.pt:8080/jspui/handle/123456789/525 (accessed on 23 February 2017).

Pereira, Andreia, Mariana Marques, Sónia Simões, and Marina Cunha. 2016. Relação entre a inteligência espiritual e a saúde mental e física em idosos. *Revista Portuguesa de Investigação Comportamental e Social* 2: 38–52.

Pestana, João Paulo, David Estevens, and Joseph Conboy. 2007. O papel da espiritualidade na qualidade de vida do doente oncológico em quimioterapia. *Cons-Ciências* 3: 125–58.

Pimenta, Sérgio Miguel Magalhães. 2010. A Enfermagem e o Sofrimento Espiritual do Doente em Fase Final de Vida. Master's Thesis, Faculdade de Medicina da Universidade do Porto, Porto, Portugal.

Pimenta, Filipa, João Maroco, Catarina Ramos, and Isabel Leal. 2014. Menopausal symptoms: Is spirituality associated with the severity of symptoms? *Journal of Religion and Health* 53: 1013–24. [CrossRef] [PubMed]

Pinto, Sara Maria Oliveira. 2012. *A Espiritualidade e a Esperança da Pessoa com Doença Oncológica: Estudo Numa população de Doentes em Quimioterapia*. Porto: Faculdade de Medicina da Universidade do Porto. Available online: http://repositorio-aberto.up.pt/handle/10216/63765 (accessed on 23 February 2017).

Pinto, Cândida, and José Luís Pais-Ribeiro. 2007. Construção de uma escala de avaliação da espiritualidade em contextos de saúde. *Arquivos de Medicina* 21: 47–53.

Pinto, Cândida, and José Luís Pais-Ribeiro. 2010. Avaliação da espiritualidade dos sobreviventes de cancro: Implicações na qualidade de vida. *Revista Portuguesa de Saúde Pública* 28: 49–56.

Pinto, Sara, Sílvia Caldeira, and José Carlos Martins. 2012. A espiritualidade nos pacientes com cancer em quimioterapia. *Cuid'Arte* 6: 8–14.

Queiroga, Susana. 2013. *Saúde, Espiritualidade e Sentido: Produção de Cuidados em Contexto Hospitalar*. Lisboa: ISCTE. Available online: https://repositorio.iscte-iul.pt/handle/10071/6588 (accessed on 23 February 2017).

Rego, Ana Cristina Caramelo. 2008. O processo de avaliação dos níveis de bem-estar espiritual: Um contributo para a sua validação. *Cadernos de Saúde* 1: 199–204.

Rego, Arménio, Solange de Oliveira Souto, and Miguel Pina e Cunha. 2009. Does the need to belong moderate the relationship between perceptions of spirit of camaraderie and employees' happiness? *Journal of Occupational Health Psychology* 14: 148–64. [CrossRef] [PubMed]

Rodrigues, Lia Carina Proença. 2013. A Mulher Idosa Institucionalizada: Saúde Mental e Bem-Estar Espiritual. Master's Thesis, ISPA—Instituto Universitário, Lisboa, Portugal.

Roldão, Liliana Isabel Faria. 2015. Espiritualidade e Bem-Estar Subjetivo em Familiares Cuidadores de Idosos com Dependência Física. Master's Thesis, Universidade Católica Portuguesa, Lisboa, Portugal. Available online: https://repositorio.ucp.pt/handle/10400.14/18058 (accessed on 23 February 2017).

Romeiro, Joana, Sílvia Caldeira, Vivienne Brady, Jenny Hall, and Fiona Timmins. 2017a. The Spiritual journey of infertile couples: Discussing the opportunity for spiritual care. *Religions* 8: 76. [CrossRef]

Romeiro, Joana, Sílvia Caldeira, Vivienne Brady, Fionna Timmins, and Jenny Hall. 2017b. Spiritual aspects of living with infertility: A syntheses of qualitative studies. *Journal of Clinical Nursing* 26: 3917–35. [CrossRef] [PubMed]

Santos, Tiago Filipe Raposo dos. 2014. Saúde Mental e Bem-Estar Espiritual da Pessoa com Doença Oncológica. Master's Thesis, ISPA—Instituto Universitário, Lisboa, Portugal. Available online: http://repositorio.ispa.pt/handle/10400.12/3632 (accessed on 23 February 2017).

Sapage, Catarina Filomena Massano. 2015. Espiritualidade No Cuidar: Percepções dos Enfermeiros Face ao Cuidado Espiritual. Master's Thesis, Faculdade de Medicina da Universidade do Porto, Porto, Portugal.

Silva, José Eduardo Ramadas da. 2015. Mindfulness, Autocompaixão e Bem-Estar Espiritual na Depressão Crónica. Master's Thesis, Instituto Superior Miguel Torga, Lisboa, Portugal.

Simões, Alexandrina do Rosário Lopes, and Sónia Orientadora Simões. 2015. Bem-Estar Espiritual dos Pais e Experiências de Ansiedade e Vergonha em Adolescentes. Ph.D. Thesis, ISMT, Coimbra, Portugal. Available online: http://repositorio.ismt.pt:8080/jspui/handle/123456789/478 (accessed on 23 February 2017).

Soares, Anabela de Sousa Ferreira, and Maria Isabel Amorim. 2015. Qualidade de vida e espiritualidade em pessoas idosas institucionalizadas. *Revista Portuguesa de Enfermagem de Saúde Mental (SPE2)*, 45–51. [CrossRef]

Teixeira, Jeremias d'Alva. 2016. O Impacto da Espiritualidade nas Emoções e na Resiliência. Master's Thesis, Universidade Lusófona de Humanidades e Tecnologias, Lisboa, Portugal. Available online: http://recil.grupolusofona.pt/handle/10437/7219 (accessed on 23 February 2017).

Theofanidis, Dimitrios, and Despina Sapountzi-Krepia. 2015. Nursing and caring: An historical overview from ancient greek tradition to modern times. *International Journal of Caring Sciences* 8: 791–800.

Timmins, Fiona, and Sílvia Caldeira. 2017. Understanding spirituality and spiritual care in nursing. *Nursing Standard* 31: 50–57. [CrossRef] [PubMed]

Travado, Luzia, Luigi Grassi, Francisco Gil, Cristina Martins, Cidália Ventura, Joana Bairradas, and Southern European Psycho-Oncology Study Group. 2010. Do spirituality and faith make a difference? report from the southern european psycho-oncology study group. *Palliative & Supportive Care* 8: 405–13. [CrossRef]

Verbisck, Marilena Bestetti Gonçalves. 2010. A Saúde Subjectiva de Pessoas na Transição Para a Reforma: Contributos Do Suporte Social Percebido e Do Bem-Estar Espiritual. Master's Thesis, UAL, Algarve, Portugal.

Weathers, Elizabeth, Geraldine McCarthy, and Alice Coffey. 2016. Concept analysis of spirituality: An evolutionary approach. *Nursing Forum* 51: 79–96. [CrossRef] [PubMed]

WHO. 2014. Mental Health: A State of Well-Being. Available online: http://www.who.int/features/factfiles/mental_health/en/ (accessed on 8 April 2016).