

## A comparison of spiritual health of male and female students in the Ilam University of Medical Sciences

Hamed Tavan<sup>1\*</sup>, Hamid Taghinejad<sup>2</sup>, Seyyed Rahmatollah Mousavi Moghadam<sup>3</sup>, Kouroush Sayehmiri<sup>4</sup>, Iman Mohammadi<sup>1</sup>

<sup>1</sup>Faculty of Nursing and Midwifery, Psychosocial Injuries Research Center, Ilam University of Medical Sciences.

<sup>2</sup>Faculty of Nursing and Midwifery, Ilam University of Medical Sciences Ilam, Iran.

<sup>3</sup>Faculty of Ilam University of Medical Sciences, School of Medicine and director of the Islamic Education.

<sup>4</sup>Department of Community Medicine, Faculty of Medicine, Psychosocial Injuries Research Center, Ilam University of Medical Sciences.

\*Corresponding Author: email address: [hamedtavan@gmail.com](mailto:hamedtavan@gmail.com) (H. Tavan)

### ABSTRACT

There is a strong relationship between spiritual development of nursing students and their ability to provide patients with spiritual care. Therefore, present research aims to explore spiritual health in nursing students of the Ilam University of Medical Sciences, in Iran for both boys and girls. Spiritual health of students is determined using the Palutzian and Elison questionnaire which consisted of three parts. 10 questions were related to demographic data of students and 20 questions were examined religious health and existential health of students. Eventually, spiritual health of nursing students is classified into four groups and first group who received the grade of 20-40 has poor state of spiritual health. The groups that obtained total grades of 41-70, 71-99 and 100-120 are assigned as low-moderate, high-moderate and high status of spiritual health, respectively. Data analysis is conducted using ANOVA, Two-way analysis, and Factor analysis. The sample included 39% girls and 61% boys. Poor status of spiritual health between participants was not observed and correlation coefficient between scales of spiritual health is found to be 84.3% which represents as the score of religious health increases existential health score enhances. In order to promote spiritual health of nursing students, it is recommended that the course of spiritual health should be added as a part of the curriculum for medical students due to this fact that capability of student nurses for providing spiritual care is related to their spirituality and their education in spiritual care.

**Keywords:** Spiritual health; Students; Nurses.

### INTRODUCTION

Spiritual health is a complex and intricate concept. Based on our finding, the concept of spiritual health is the basis of a humane, qualitative, meaningful and guaranteed life in which humans' calm of the mind depends on quitting all meaningless and vain deeds [1]. In recent years, some practitioners of medicine, psychology, health education, nursing, and sociology have recognized that spirituality can have a substantial effect on many aspects of medical care [2, 3]. It is found that spiritual health has a positive impact on patients' health and there is a significant relationship between spiritual health and some aspect of well-being [4-6]. Enhancing self-awareness of spirituality and

exploring the status of spiritual health are important issues in nursing education. Although, it has reported that there is a strong relationship between the spiritual development of student nurses and their ability to provide patients with spiritual care [4]; few studies have investigated the spiritual health of nursing students [2] and literature related to spirituality in nursing educators is sparse. Also, in the case of just spiritual health of girl students is discussed. Therefore, the purposes of this study are to examine spiritual health in nursing students of the Ilam University of Medical Sciences for both boys and girls, and to explore the factors affecting spiritual health, using the standard Palutzian & Elison questionnaire.

## **METHODS**

The present paper is a descriptive-comparative study that evaluates spiritual health of fresh, sophomore and junior nursing students' of the Ilam University of Medical Sciences in the period of September 2011- September 2012 in Ilam, Iran. It is worth mentioning that each academic year includes two semesters and participants are studying in 1<sup>st</sup> semester till 5<sup>th</sup> semester. Appropriate permissions from the schools of the participants are obtained before conducting this study. Based on statistician opinion and sample size formula, we examine 100 students that met the study criteria and randomly selected and invited to participate, in this study. All participants agreed to enroll in this survey, and they informed that their participation is both voluntary and anonymous. In addition, nursing students are asked to fully complete the questionnaire and a questionnaire is considered invalid if answers were missing for 1 or more questions.

The required data about spiritual health of nursing students are gathered using the questionnaire, in present research. The questionnaire included two parts; one part which reported on demographic characteristics and latter one that consisted of spiritual health scales (SHS) of Palutzian and Elison. The demographic characteristic questions requested information on personal variables such as age, gender, and education status, religious affiliation, living with parents or living in dormitory and marriage status. SHS included 20 items that and each item is rated on a six-point Likert-type scale. The SHS is divided into two subscales i.e. religious health and existential health that each scale includes 10 questions. The score of each scale falls into a range of 10 to 60, and the overall score ranges from 20-120, based on the defined two scales. Eventually, spiritual health of nursing students is classified into four groups and first group who received the grade of 20-40 possesses poor state of spiritual health. The groups that obtained total scores of 41-70, 71-99 and 100-120 are assigned as low-moderate, high-moderate and high status of spiritual health, respectively. In the other word, it can be said that the higher scores indicate higher levels of spiritual health implying that the respondents believe in God and are very clear in

their own religious affiliation and practiced are religion.

Data analysis is conducted using SPSS (IBM Co, SPSS) version 19.0 and reliability analysis of the questionnaire is performed using the Cronbach's coefficient,  $\alpha$ . Cronbach  $\alpha$  for the whole sample is considered. 87.9% which acceptable for internal reliability. Correlation coefficient of religious health and existential health subscales is found to be 84.3%. Hence, higher level of religious health yields to higher status of existential health. The T-independent and one-way ANOVA tests are utilized to found the statistical association between demographic variables with the spiritual health subscales.

## **RESULTS**

Results from the analysis of demographic indexes show that the sample consists of 61 boys (61%) and 39 girls (39%). 24 persons (24%) are living in the age range of 18-19, 49 of participants (49%) are in the age range of 20-21 (the highest proportion) and 22 persons (22%) are in the age range of 22-23 and 5 persons had more than 23 years old. 8, 24 and 29 of nursing students are studying in the first, second and third semesters, respectively. 17 of participants are studying in fourth semester and rest of them (22 persons) were in fifth semester. Also, it is found that 68 of nursing students (68%) are living in dormitories of the Ilam University of Medical Sciences and 88 of the sample were single. Total score of spiritual health of nursing students is divided into four parts and none of the participants received the score of 20-40. 14 and 60 of nursing students are obtained the scores of low-moderate (41-70) and high-moderate (71-99), respectively. Rest of students (26 persons) received high scores (100-120) as illustrated in Figure 1. The highest spiritual health score of students is related to the girls who live in dormitories and then the non-dormitory boys and non-dormitory girls, respectively. The lowest score is found for the group of boys who live in dormitory. Hence, it can be concluded that there is a relationship between gender of students and their living place. Generally, the results showed that the overall spiritual health score of boys is more than girls and the participants who live in dormitories have

poor status of spiritual health in comparison with other. The boys who have higher old of 23 received more spiritual health score and then the groups of boys in the age ranges of 20-21 and 22-23 possessed higher level of spiritual health, respectively. The lowest spiritual health score of boys was related to boys with 18-19 years old. Also, the girls with the age ranges of 20-21, 18-19 and 22-23 are received higher scores, respectively. Another comparison in the views of marital status and academic semester is also

conducted and it is observed that the highest scores was related to single boys and then single girls, married boys and married girls, respectively. Moreover, it is seen that girls in the second semester are received higher scores and rest of this comparison is tabulated in Table 3. Also, detailed comparison between two subscales of spiritual health is given in Table 3. It is seen that almost the same trend is appeared for religious health and existential health subscales in comparison with total spiritual health status.

**Table 1.** Demographic data of nursing students

Gender	Living place	religious health score	Existential health score	Spiritual health score
		Mean average score	Mean average score	Mean average score
Boy	dormitory	42.2	41.32	83.54
	non dormitory	46.5	45.8	92.3
	overall	43.62	42.8	86.4
Girl	dormitory	47.78	46.81	92.59
	non dormitory	42.42	45.42	87.83
	overall	44.74	46.38	91.13
Boy (Age)	18-19	39.93	39.5	79.43
	20-21	44.35	44.23	88.58
	22-23	44	42.36	86.36
	23<	48.4	44	92.4
Girl (Age)	18-19	44.3	45	89.30
	20-21	46.78	48.5	95.28
	22-23	41.82	44.18	86
	overall	44.75	46.38	91.13
Boy	First semester	46.33	50.33	96.67
	second semester	48.11	47.17	95.28
	third semester	40.33	38.9	79.24
	fourth semester	43.5	46.25	89.75
	fifth semester	41.82	38.45	80.27
	overall	43.61	42.79	86.39
Girl	First semester	37.6	40.2	77.8
	second semester	51.5	51.5	103
	third semester	37.5	41.88	79.38
	fourth semester	43	45.11	88.11
	fifth semester	51	50.73	101.73
	overall	44.74	46.38	91.13
Boy	single	43.58	42.96	86.54
	married	44	40.25	84.25
	overall	43.61	42.79	86.4
Girl	single	46.1	47.23	93.33
	married	39.5	43.13	82.63
	overall	44.47	46.38	90.85

**Table 2.** Responds of students to the Palutzian-Elison questionnaire

Totally agreed %	Agreed %	Relative agreed%	Relative disagreed %	Disagreed%	Totally disagreed%	List of the Questions proposed byPalutzian-Elison
16	9	5	17	14	39	1- I'm not very satisfied with the Lord in prayer and solitude
12	8	10	15	27	28	2-I do not know who I am, where I came from and where I go
55	24	9	3	4	5	3-I believe that God loves me and cares for me.
33	25	24	11	2	5	4- I feel life is a positive experience.
9	5	9	7	19	51	5- I believe that the Lord is non-visualize and God has no care to me and my daily life
14	5	18	14	27	22	6- I feel like I'm uncertain future.
27	27	24	8	7	7	7- I have a relationship with God
15	13	35	19	12	6	8- I have reached the limit of life and life satisfaction.
14	10	7	10	24	35	9- I do not get a lot of strength and support from God
30	35	24	5	1	5	10-I'm feeling good about the path of life ahead.
42	28	10	9	5	6	11-I believe that God is concerned with my problem
11	14	20	18	24	13	12-I do not have a lot of fun with my life.
10	9	21	19	18	23	13- I do not have a satisfactory personal relationship with God.
24	37	23	8	3	5	14- I feel good about my future.
44	28	16	3	6	3	15- My relationship with God helps me not feel alone.
21	20	23	13	14	9	16-I feel life is full of hardships and disappointments joy
45	28	14	6	4	3	17- When a close relationship with God, I feel complete
10	7	9	19	30	25	18- Life does not have much meaning.
47	32	12	4	2	3	19-I feel in relationship with God
51	19	18	3	4	5	20- I believe there is a purpose for being alive.

**Table 3.** Factor analysis of the Palutzian-Elisonquestionnaire.

Cumulative %	% of Variance	Total	Factor name using the questionnaire	Question No.	Factor No.
24.421	24.421	4.884	Live enjoying by connection to God	12 و 13 و 18 و 9 و 2 و 6 و 1 و 5	1
35.660	11.239	2.248	Healthy feeling by connection to God	19 و 17	2
46.351	10.691	2.138	Seeking a goal in life by connection to God	20 و 4	3
56.331	9.980	1.996	loneliness by connection to God	7 و 15	4
63.586	7.254	1.451	Life problems	16	5
70.574	6.989	1.398	solving problems by connection to God	8 و 11	6

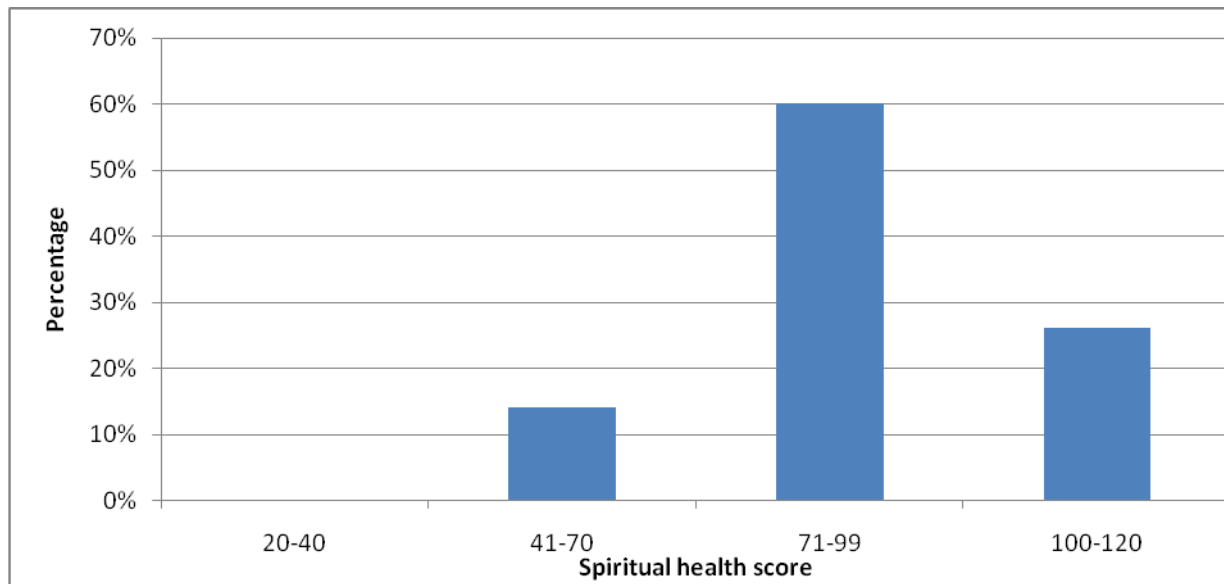


Figure 1. Classifications spiritual health scores of student in to four groups.

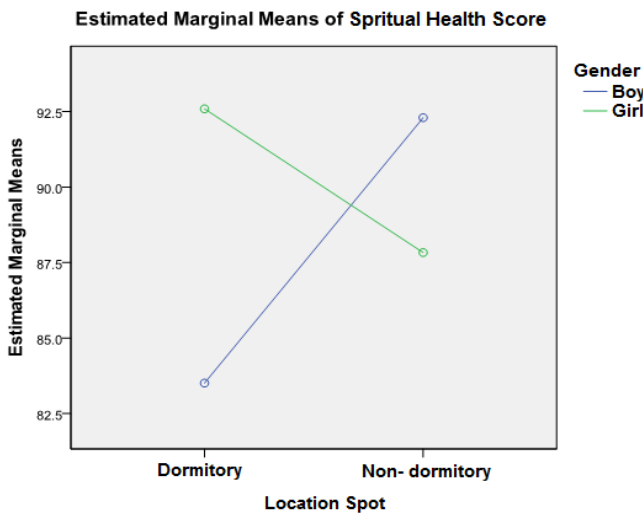


Figure 2. Comparison of Spiritual health Score of non-dormitory&dormitory nursing students.

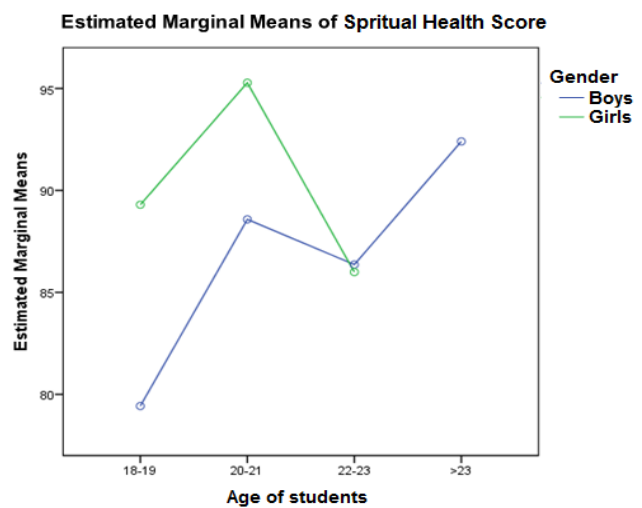


Figure 3. Comparison of Spiritual health of boy& girls regards to their age.

Two- way variance showed that no association is existed between gender, living place and religious beliefs of nursing students. One –way ANOVA and t- tests are used to discover statistical relationship among religious health and existential health with demographic variables. Although, a significant association between age of students and existential health is found ( $P < 0.05$ ); no relationship between other scales of spiritual health versus demographical variables is observed ( $P > 0.05$ ). Correlation coefficient between two

subscales of spiritual health is calculated to be 84.3% which shows this matter that as score of religious health is increased score of existential health favors. All responds of nursing students to questions are listed in Table 1. The factor analysis showed that the 20-item questionnaire of Palutzian-Elison is consisted of six factors that are shown in Table 2. Also, Figures 2 and 3 show total scores of spiritual health of nursing students in the Ilam University of Medical Sciences, based on two-way variance analysis.

## DISCUSSIONS

The result of this study related to the status of spiritual health is moderate to good, and the results are similar to previous studies [2, 6,7]. So, it can be said that the nursing courses include caring, hospice, and clinic practice in the hospital. These factors encourage them to face and consider relevant subjects in life, and may create better realizations leading to a better score of spiritual health [2] and Clemen-Stone et al [8]. (1995) claimed that good score of nursing student in the subject of spiritual health is attributed to their development stage. Because students are in their first period that is the transitional period (ages 18–25) and this period provides a bridge between adolescence and full maturity. It includes understanding and accepting one's self, having a social conscience, continuing to search for truth and wisdom. In addition, the capability of student nurses for providing spiritual care is related to their spirituality and their education on the aspects of spiritual care[9].It is worthwhile that Iran is a religious country and almost anyone in Iran believes in God. Hence, it seems that providing spiritual nursing cares will be successful in Iranian hospitals and nursing educators are truly recommended to pay more attention to spiritual care, because they have a vital role in improving patients [10].

In this study, it is found that total spiritual health scores of non-dormitory nursing students is higher than dormitory students due to this fact that non-dormitory nursing students are living in a town and almost live with their parents in which this group does not experience problems of being away from home that lead to higher level of spiritual health. Moreover, it can be noted that we should consider factor of family which promotes spiritual health of student.

Also, this study compares spiritual health of boys versus girls and their living location which is not reported in literature, yet. It is observed that non-dormitory boys have higher spiritual health compared to dormitory boys due to the same reasons that presented above. In contrary to boys, spiritual health of dormitory girls was more than that of non-dormitory girls due to that dormitory girls are more restricted by the dormitory conditions, in Iran. However, total score of girls

was more than nursing boys which is in fair agreement with open literature [2]. Also, the lowest and highest score of spiritual health were related to the age ranges of 18-19 and more than 23 for boys and 22-23 and 20-21 for girls, respectively. Education grade also played a great role on spiritual health of students. Generally, students who were in second and third semesters obtained the highest and lowest spiritual health scores, respectively. Among boys, the students in first and third semesters received the highest and lowest spiritual health scores, respectively. Among of girls, it is seen that the girls in third and second semesters have the lowest and highest scores of spiritual health, respectively. However, the difference between the score of spiritual health and semester was not significant, at all. So, it is concluded that spiritual health of students is not governed by academic education that encourage us to say this that it is vital to promote spiritual health among students by adding spiritual health as a part of the curriculum.

The marital status of students showed that score of single students is more than married students and the same results also obtained for boys and girls, in this regards. Our findings about religious health and existential health indicated that there is no significant difference for these scales in relation with gender of students, as confirmed by [11, 12]. Also, existential health score of participants was more than religious health scale which is in agreement with the case of [12]. Though, no significant association between SHS and demographic data is found, in this study ( $P>0.05$ ); a relationship between existential health scale and age of students was observed ( $P<0.05$ ). Results of present research also indicated that as score of religious health increases existential health is also enhanced which is in agreement with Gabler (2004) findings [13]. It needs to notice that spiritual beliefs are almost personal and psychic affairs that it is necessary for students to declare their beliefs in the safe and peace environment. Moreover, it is accepted that a relationship is existed between internal spiritual and spiritual cares. So, strong nursing internal spiritual leads to more spiritual cares and patients heal faster as reported by Fehring (1997) for cancer patients [14].

## CONCLUSIONS

Spiritual health of nursing students was in the range of high-moderate (71-99) and no correlation among demographic information and SHS is found, in this study. The results also showed that no significant association is existed between education grade and spiritual health level. It implies that academic education has no effect on spiritual health of nursing students and in order to promote spiritual

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health among students, it is recommended that the course of spiritual health be added as a part of the curriculum for medical students.

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