

## Community Case Report

## How to develop strategic and operational plan for research institute; a qualitative approach

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### Abstract

**Background:** Spiritual health is recognized as one of the dimensions of health in Iran and in recent years many studies are conducted in this field in the country.

This study aimed to review the experience of developing a five-year strategic plan and a one-year operational plan for the Spiritual Health Research Center (SHRC) of Iran University of Medical Sciences.

**Methods:** The study was conducted in three phases in a qualitative approach. first, researches on spiritual health in Iran, upstream documents, and stakeholders in this area were reviewed. Then the situation of SHRC was analyzed. Based on the information obtained in the previous phases, the center's strategic plan was developed including vision, mission, and values of the SHRC along with strategic objectives until 2023. The plan was presented during a focused group discussion meeting to the members of the research council of SHRC and finalized after receiving feedback.

**Results:** Totally, 23 strategic five-year objectives were set for the SHRC to be archived by 2023. Then, the specific goals, activities, outcomes and indicators for the evaluation for the first year were determined.

**Conclusions:** This study proposed a methodology for developing strategic and operational plan for research institutes. The methodology presented here can be applied to other national and international bodies and institutions.

### Keywords: Iran; Research; Spirituality; Strategic Planning.

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### Introduction

Various definitions have been mentioned concerning the concept of spirituality and spiritual health. Although these definitions are intertwined with religiosity and other values, there are four common concepts in most definitions: 1- purposefulness in life, 2- morality, 3- faith and trust in God, and 4- religious practices such as individual and communal religious rituals (1-3). It must be emphasized that spiritual health is prone to

the danger of pseudoscience (4). Therefore, preparing scientific documents has a great importance in this domain.

According to the World Health Organization (WHO) definition, health has three physical, mental and social dimensions (5). Although the spiritual dimension of health is studied and discussed in various meetings and workshops, and WHO published questionnaires for assessing spiritual, religious and personal beliefs within quality

of life (6), spirituality is not specifically included in the definition of health by the WHO and considering it as a dimension for health was left to the countries.

In the Islamic Republic of Iran, spiritual health is considered as one of the dimensions of health, and holistic approach to health, that includes all four dimensions (physical, mental, social and spiritual), is emphasized in national upstream documents such as the General Health Policies announced by the Supreme Leader of Iran (7).

This paper reviews the experience of developing a five-year strategic plan and a one-year operational plan for the Spiritual Health Research Center of Iran University of Medical Sciences (SHRC).

After nearly 30 years of continuous work on Islamic studies, the SHRC was established in 2017. The SHRC as a research center, considers the necessity to analyzing external and internal environment to make better use of external opportunities, to determine strategic objectives for the coming years, and to create a common view among its members and the stakeholders who are to use the research results.

## Methods

This study was conducted in three phases in a qualitative approach.

First, related documents were examined. In order to collect national researches conducted in the field of spiritual health in Iran, databases were searched by appropriate keywords using search engines. The extracted documents were examined in terms of relevancy (researches conducted in the field of spiritual health in Iran) and unrelated papers were excluded; then the selected papers were explored and classified. The purpose was not to conduct a review study, but to focus solely on exploring research topics in Iran and their thematic classification. In addition, the upstream documents including general policies announced by the Supreme Leader

(health, population and science, and technology), the Sixth National Development Plan and the National Comprehensive Health Map were examined, too. Institutions and organizations active in the area of spiritual health in Iran were also classified.

In the second phase, the situation analysis was conducted. The SWOT approach was used to determine the internal strengths and weaknesses, and external threats and opportunities (8).

The stakeholders' opinions were gathered in focused group discussion (FDG) meetings using a semi-structured questionnaire. The meeting lasted about two hours. The FGD meeting was guided by the research team as the discussion facilitator. According to the FGD standards, one member was assigned the task of note-taking as well as audio recording the discussions.

The questionnaires consisted of two parts. The first part covered four areas of the main processes of research management in research centers (knowledge generation, publishing, utilization, and supporting actions). The participants were asked to rate the items in these four areas from 0 to 3 according to the performance of SHRC during the past year. The purpose of this rating was not evaluating the activities of the center, but for directing and guiding the participants' thoughts to complete the second part of the questionnaire that determined the strengths/weaknesses and opportunities/threats. As determining whether a factor was internal or external could be difficult during the meeting, the two parts related to strength/weakness and opportunity/threat were merged to make things easier, and they were later separated from each other during analysis by the project team.

A thematic analysis was used to extract themes and subthemes that describe the SHRC situation (9). The primary rationale behind choosing thematic analysis was to have more freedom to allow for a comprehensive evaluation. no coding

framework was considered prior to analysis to fit the data into and the themes and subthemes were identified through an inductive analysis.

In the third phase, the strategic and operational plans were developed. Based on the information obtained in the previous two phases, the draft for the vision, mission, and values of SHRC along with strategic objectives until 2023 were prepared. Then, one-year interventions and operational objectives were developed for the first year based on strategic goals. The draft was then presented at a focused group discussion meeting by the project team and was finalized after receiving feedbacks from the members of the research council of SHRC.

## Results

### *Relevant researches and studies in Iran*

Reviewing the researches carried out in the field of spiritual health in Iran showed that these studies can be categorized into three main groups.

1. The largest group consisted of studies and theses that have measured spiritual health in a group of people mostly using the translated version of the questionnaire developed by Palutzian and Ellison or assessed its association with other factors such as anxiety (10-14).
2. Studies aimed at defining spiritual health, its determinants and indicators (15-20).
3. Studies focused on designing interventions, providing cares with a religious and spiritual approach, or developing programs and guidelines, and integrating spiritual health into training courses (3, 21-26).

### *Stakeholders*

In order to categories stakeholders in the field of spiritual health, first, all institutions and organizations that had activities in this area in Iran, or that had related duties in their job description, were extracted by the research team. Then they were categorized into five groups of (a) policymakers and managers, (b) researchers including research centers, (c) service providers

including health services, and education, (d) people and civil societies, and (e) resource allocators. Then they were further categorized into intra-organizational (inside the Ministry of Health and the affiliated Medical Universities) and extra-organizational (outside the Ministry of Health) sub groups. The complete list stakeholders are presented in Annex 1.

Regarding research and evidence production, “Spiritual Health Group of Academy of Medical Sciences of the Islamic Republic of Iran” is the most important institution in the country. In addition to research and publishing papers and documentation, this group held five national conferences on spiritual health so far.

Regarding policy-making, before February 2013 there was no specific unit for policy-making in the field of spiritual health in the Ministry of Health and scattered activities were carried out by various units and offices when needed. Ultimately, in February 2013, a department by the name of “Department of Spiritual Health” was established in the Family and School Population and Family Health Office of the Health Deputy of Ministry of Health. From the beginning, this department that was designed to aggregate and integrate interventions on this dimension of health, faced with problems such as lack of clarity of tasks and cooperation from other units in the Ministry of Health. Eventually, due to issues such as managerial changes, this office was closed in April 2018.

### *Situation Analysis*

Situation Analysis of SHRC is presented in Table 1.

### *Strategic goals and plan*

Goals and objectives were formulated based on the gathered data so that for each identified strengths, weaknesses, threats, and opportunities, corresponding interventions and operational objectives were defined. Then, these interventions and objectives were summed up in the form of strategic goals with respect to the main

Table 1. Strengths, weaknesses, threats, and opportunities of the Spiritual Health Research Center (SHRC)

Strengths	<ul style="list-style-type: none"> <li>• Having a statute and a defined structure</li> <li>• Public trust and the presence of experienced faculty members in the field of spirituality and spiritual health</li> <li>• An active system to judge and monitor the implementation of research projects</li> <li>• Concern, perseverance, seriousness, commitment, and determination of the members of the center to work in this field</li> <li>• Access to researchers and clients as a source of evidence generation</li> <li>• Attention to developing strategies for the center</li> <li>• Having an informing website</li> <li>• Determination of the members for documenting research, and documentation at the national level</li> <li>• Annual constant budget as well as financial support from charities</li> </ul>
Opportunities	<ul style="list-style-type: none"> <li>• The increasing number of postgraduate students in the fields related to the activities of the Center</li> <li>• Increased attention to spirituality and spiritual health at the national and international levels, along with increased interest in research on spiritual health</li> <li>• Academic position of Iran University of Medical Sciences and Department of Behavioral Sciences and Mental Health</li> <li>• Consistency of the concepts in the theoretical foundations of spiritual health with community culture</li> <li>• Possibility of communication, direction, production and scientific support of executive bodies such as the psychology and counseling organization of I.R.Iran, Ministry of Health, etc. in the provision of integrated services and emphasis on spiritual services</li> <li>• Lack of clinic, protocol, guideline, law and national standard for spiritual intervention</li> <li>• Relevant research centers at universities (for interdisciplinary collaboration)</li> <li>• Originality of the spiritual health field (e.g., serious lack of evidence-based native spiritual protocols and intervention programs)</li> <li>• An increasing trend in research and services fields related to spiritual health</li> </ul>
Weaknesses	<ul style="list-style-type: none"> <li>• Lack of specific mission statement</li> <li>• Lack of defined organizational communication with the beneficiary and relevant governmental and non-governmental entities</li> <li>• Weakness in the propagation and introduction of the center</li> <li>• Limited resources (human, financial, social powers, etc.)</li> <li>• The impossibility of attendance of all the members in all meetings due to their different responsibilities</li> <li>• Not knowing or using of all the experts, researchers and interested people in this field</li> <li>• Weakness in the idea production system</li> </ul>
Threats	<ul style="list-style-type: none"> <li>• Disagreements among experts on the definition of spirituality and spiritual interventions</li> <li>• Impression of some clients of similarity of spirituality with complete religiosity</li> <li>• Current scientific performance evaluation system in qualitative and in-depth works that lay the grounds for theorizing</li> <li>• Lack of stakeholders' need for the development of spiritual health research</li> <li>• Weakness of agreement between the scientific evidence produced in the field of spiritual health and the real needs of society</li> <li>• Spirit of polarization, interventionism, and taking leadership of the spiritual health domain by centers and individuals who have influence and power</li> <li>• Inconsistency and instability of the country's research policies</li> <li>• Inadequate funds in the field of spiritual research</li> <li>• Unwillingness of the private sector in research investment in the field of spiritual health</li> <li>• Poor teamwork culture and lack of clarity of processes and interdisciplinary collaboration</li> <li>• Researchers' low motivation due to lack of research funding and appropriate evaluation systems</li> <li>• Lack of participation in conferences</li> <li>• No system of marketing and sponsorship</li> <li>• Lack of impact assessment and validation of studies</li> <li>• Theoretical and technical limitations and challenges of some therapeutic approaches</li> </ul>

processes of research management in the research centers including knowledge generation, publishing, utilization, and supporting actions.

A total of 23 strategic five-year objectives were set for SHRC to be archived by 2023. Then, the specific goals of the first year,

activities, indicators, and outcomes of the evaluation were determined at the end of the first year for each of these objectives. The program was presented at the Research Council of the SHRC and finalized after receiving feedback. Strategic and operational objectives are presented in Table 2.

Table 2. Strategic goals, interventions and strategies for the first year of the Spiritual Health Research Center

	Strategic goals for 2023 (five years)	Specific goals for the first year
Knowledge generation	1. Systematic setting and updating of research center priorities with stakeholder participation	<ul style="list-style-type: none"> <li>Establishment of a systematic method for developing research priorities</li> <li>Formulating 20 research priorities using a systematic method and stakeholder participation</li> </ul>
	2. Conducting 100 research projects based on the priorities of the Center	<ul style="list-style-type: none"> <li>Determining the exact cost of each study, the amount and source of a specific budget provider, with an emphasis on increasing the share of funding from outside the university</li> <li>Promote the process of outsourcing studies through call for proposals for at least 5 research priorities per year</li> </ul>
	3. Preparing 10 practical products in the field of spiritual health of Iran	<ul style="list-style-type: none"> <li>Correction of the research assistant system tailored to the current research of the center (Currently, the research assistant system is more suitable for clinical and laboratory research)</li> </ul>
	4. Using the bank for updated ideas as one of the inputs for research priorities	<ul style="list-style-type: none"> <li>Conducting 15 priority research projects in the first year (increasing the number of projects within 5 years so that an average of 20 projects are performed per year)</li> </ul>
	5. Student participation in 30% of research projects under the responsibility of professors of the Center	<ul style="list-style-type: none"> <li>Preparing 1 practical product in the field of spiritual health of Iran in the first year</li> </ul>
	6. Holding spiritual health fellowship courses	<ul style="list-style-type: none"> <li>Formation of an idea bank and using it in research priorities</li> </ul>
	7. Holding a postgraduate course in spiritual health	<ul style="list-style-type: none"> <li>Implementation of student research and a program to provide student research results in a systematic way</li> </ul>
Publishing	8. Launching and updating an electronic library of all research reports and theses	<ul style="list-style-type: none"> <li>Formulating the curriculum framework for the course and determining the requirements for holding the course (in the first year) (Formulation and approval of the curriculum in law enforcement agencies for its implementation in the second year)</li> </ul>
	9. Publishing an annual report of the Center's work (including the list of designs and other research products done)	<ul style="list-style-type: none"> <li>Formulating the curriculum framework for the course and determining the requirements for holding the course (in the first year)</li> <li>(Formulation and approval of the curriculum in law enforcement agencies for its implementation in the second year)</li> </ul>
	10. Publishing all the research in the form of papers (preferably in English in international journals with high impact factor)	<ul style="list-style-type: none"> <li>Formulation of a process program and registration frameworks for documents including all research reports, papers, theses, etc. (Establishment of databases of reports, theses and researches of Iranian researchers in the field of spiritual health from the second year)</li> </ul>
	11. Implementation of 60 programs with the media to inform the public (an average of one per month)	<ul style="list-style-type: none"> <li>Publishing an annual report of the Center's work</li> </ul>
	12. Holding 5 specialized conferences (one conference per year)	<ul style="list-style-type: none"> <li>Preparation of a list of journals related to the research priorities of the center (including ISI, PubMed, and Scopus with high impact factor), along with their acceptable frameworks for publishing the papers. (Forming teams for completing paper drafts, methodological consult, etc. from the second year)</li> </ul>
	13. Holding 10 specialized training courses resulted from the research (two courses per year)	<ul style="list-style-type: none"> <li>Implementation of 10 programs with the media to inform the public of the activities of the center (an average of one per month)</li> </ul>
	14. Publishing 10 specialized books (two books per year)	<ul style="list-style-type: none"> <li>Hold a collaborative professional conference (Center's readiness for holding a conference independently from the second year)</li> <li>Holding two specialized training courses resulting from the Center's research</li> </ul>

	Strategic goals for 2023 (five years)	Specific goals for the first year
	15. Systematic contact with all stakeholders in the field of spiritual health research including research investors, users, and researchers	<ul style="list-style-type: none"> <li>• Preparation of a brochure with a simple language for gaining stakeholder support</li> <li>• Identifying stakeholders and preparing systematic communication programs with the stakeholders</li> </ul> (Implementation of the process of obtaining their support and opinion and using their opinions from the second year)
Research Utilization	16. Using at least 80% of the research results in policies, services and training the general public	<ul style="list-style-type: none"> <li>• Using at least 50% of the research results in the first year in policies, services and training the general public</li> </ul> (Formulation of a framework for Research Impact Assessment and evaluation of Center's past projects from the second year)
	17. Published 60 fact sheets specifically for policymakers and the audience with a practical language (one per month)	<ul style="list-style-type: none"> <li>• Published 10 fact sheets specifically for policymakers and the audience with a practical language</li> </ul>
	18. Holding regular meetings of using results with stakeholders (monthly)	<ul style="list-style-type: none"> <li>• Holding 10 meetings of using results with stakeholders</li> </ul>
Supporting Actions	19. Quadrupling the center's funding, considering the current inflation rate (about 30% increase each year)	<ul style="list-style-type: none"> <li>• Increasing the center's funding by 30% in the first year from external resources (after five years, this share shall reach 80%).</li> </ul>
	20. available potent human resource in the management of the research cycle	<ul style="list-style-type: none"> <li>• Familiarity of all personnel with research management</li> </ul>
	21. Establishment of the role of the spiritual intervention clinic as (1) providing evidence-based spiritual health counseling services; and (2) collecting necessary data for the research	<ul style="list-style-type: none"> <li>• Making spiritual intervention clinic activities systematic</li> </ul>
	22. Increasing personnel satisfaction	<ul style="list-style-type: none"> <li>• Increasing personnel satisfaction by 20% in the first year</li> </ul>
	23. Establishing a network of capable researchers and producing research products by this network	<ul style="list-style-type: none"> <li>• Drafting a framework of national research network regulations (development and approval of the network regulations in the second year)</li> </ul>

## Discussion

The purpose of this paper was to present the methodology used to develop strategic and operational program for the Spiritual Health Research Center. We tried to explain the methodology in way that it can be applied to other national and international bodies and institutions.

Any program promises some changes, which is why program implementers should be able to manage these changes and study the initial resistance due to changes and select the right strategies to cope with them. It is clear that the implementation of any program is more important than its development, and requires more time and effort (27-29), especially if the program requires collaboration and teamworking. Knight et al. referred to the term "implementation gap" in their book, the simple meaning of which is the distance between the ideas and wishes of program planners or policymakers and what has

been implemented in practice (28). The more the main custodians and policymakers perform a more accurate stakeholder analysis of opponents and advocates, have an effective sponsorship, and are provided appropriate executive platforms, the lesser this gap would be.

The ultimate goal of conducting research is to produce evidence for policy-making to eventually promote health indicators. Given that only one year has passed since the foundation of this research center, there is not much documentation about the impact of the center's research on audience groups.

Reviewing the literature showed that despite the publication of numerous papers and documentation in the field of spiritual health and presence of active research centers in this field, the shows the great capabilities of Iran, not much evidences has been published focusing policy-making in the field of spiritual health. Another point is

that despite studies and researches, it appears that due to the disagreements between policymakers, academics and cultural decision-makers in Iran, measurable indicators for spiritual health agreed by all stakeholders have not been developed. As a result, there has been no comprehensive national study to determine the status of spiritual health in Iran.

Currently, the Ministry of Health does not have a specific unit for policy-making in the field of spiritual health. There are also many policy-making institutions in the field of spiritual health which are outside the Ministry of Health. The contribution of these institutions to spiritual health policymaking is estimated to be higher than that of the Ministry of Health.

Therefore, for evidence-based policy-making to promote spiritual health in Iran, the following three steps are necessary: (a) Since it appears that the majority of stakeholders influencing policy-making on spiritual health in Iran are outside the health system, the Ministry of Health needs to engage properly with these stakeholders. Therefore, the exact identification of these institutions and the determination of the contribution of each is necessary; (b) Defining a set of national indicators for spiritual health agreed upon by all stakeholders, and preparing a report on the status of these indicators in Iran; (c) Formulation and implementation of a national comprehensive policy for the promotion of spiritual health, agreed by all stakeholders. This policy should be designed in such a way to (a) cover all three areas of education, research, and service at both individual and community levels; (b) clearly specifies the roles and responsibilities of each stakeholder.

#### **Authors' contribution**

SR initiated the study concept and design, and drafted the manuscript. JB participated in study design, revised the reports and the manuscript and contributed valuable comments.

EA and ZA helped with data analysis and interpretation, and revised the manuscript. NM contributed in data gathering, analysis and interpretation, and revised the manuscript

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#### **Conflict of interests**

There is no conflict of interest in this study.

#### **Informed consent**

Prior to the research, the approval of Ethics Committee of Iran University of Medical Sciences was obtained. At the beginning of the meetings, participants were asked to allow for recording the conversations and, with their consent, audio recording was performed.

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**Appendices:**

Annex 1. The stakeholders in the field of spiritual health in Iran.

	Intra-organizational (inside the Ministry of Health and the subsidiary universities)	Extra-organizational (outside the Ministry of Health)
1. Policymakers and managers	The Department of Spiritual Health in the Office in the Family and School Population and Family Health of the Health Deputy of Ministry of Health. (It is currently closed and it appears that the Council of Deputies is now in charge of policy-making in this area)	Islamic Culture and Communication Organization of Iran Islamic Propagation Coordination Council Policy Council of the Islamic Seminaries' Management Center Cultural deputies of Ministries and Organizations
2. Researchers (including research centers)	Spiritual Health Group of Academy of Medical Sciences of Islamic Republic of Iran Spiritual Health Research Center (Qom University of Medical Sciences) Health and Religion Research Center (Qom University of Medical Sciences) Research Center for Religion Studies and Medicine (Kerman University of Medical Sciences) Spiritual Health Research Center SHRC (Iran University of Medical Sciences) Research Institute for Islamic and Complementary Medicine (Iran University of Medical Sciences) Medical Ethics and History of Medicine Research Center (Tehran University of Medical Sciences) Center for Religion and Health Studies (Shahid Beheshti University of Medical Sciences) Research Center of Quran, Hadith, and Medicine (Shiraz University of Medical Sciences)	Research Institute of Hawzah and University (Qom Seminary) Research Institute of Islamic Thought Office (Qom Seminary) Research Center for Culture, Art and Communication (national survey of Iranians' values and attitudes) Iranian Students Polling Agency (ISPA) Statistical Research and Training Center of Iran
3. Service providers (including health services, and education)	Deputy of Treatment of Ministry of Health and its subsidiary units and treatment deputies of medical universities of Iran Deputy of Health of Ministry of Health and its subsidiary units and health deputies of medical universities of Iran Deputy of Education of Ministry of Health and its subsidiary units and education deputies of medical universities of Iran Medical Universities Expansion Council of the Ministry of Health	Social and Cultural Affairs Department of Municipalities Education Deputy of Islamic Seminaries Education Deputy of the Ministry of Science and its affiliated units Council for the Extension of Higher Education University of Religions and Denominations

4. people and civil societies	The Ministry of Health Public Participation Unit affiliated to the Social Deputy of Ministry of Health	Non-governmental organizations (NGOs) The media including visual media, written media, web sites and social networks
5. Resource allocators	Deputy of Development and Resource Management of the Ministry of Health Deputy for Research and Technology of Ministry of Health (budget for research centers) Health Charities Assembly of Iran General Directorate of Health Charities affiliated to the Social Deputy of Ministry of Health	Iran National Science Foundation (research grant) Office of Planning and Research Policy-making of Ministry of Science Vice Presidency for Science and Technology Charities

Annex 2. Strategic goals, interventions and strategies, operational objectives, and evaluation indicators and outputs at the end of the first year of the Spiritual Health Research Center (Complete)

	Strategic goals for 2023 (five years)	Specific goals for the first year	Activities	Evaluation indicators and outputs at the end of the first year
Knowledge generation	24. Systematic setting and updating of research priorities center with stakeholder participation	<ul style="list-style-type: none"> <li>Establishment of a systematic method for developing research priorities</li> <li>Formulating 20 research priorities using a systematic method and stakeholder participation</li> </ul>	<ul style="list-style-type: none"> <li>Formulation of research priorities based on two research cores of the center (spiritual interventions - spirituality and religions)</li> <li>Formulation of research priorities using a scientific approach such as the CHNRI model</li> <li>Active stakeholder participation, especially resource allocators, in the process of formulation of research priorities</li> <li>Review and update of priorities every three months</li> </ul>	<ul style="list-style-type: none"> <li>Center's research priority list including at least 20 priorities that have been reviewed and updated for three times</li> </ul>
		<ul style="list-style-type: none"> <li>Determining the exact cost of each study, the amount and source of a specific budget provider, with an emphasis on increasing the share of funding from outside the university</li> <li>Promote the process of outsourcing studies through call for proposals for at least 5 research priorities per year</li> </ul>	<ul style="list-style-type: none"> <li>Design and approval of the RFP form for the center</li> <li>Writing RFP for outsourcing 5 research priorities</li> <li>Development and implementation of research priorities and call for proposals by announcing RFP through the SHRC website</li> </ul>	<ul style="list-style-type: none"> <li>Available RFP forms designed and approved by the Center</li> <li>Available RFP forms filled-in and approved for each research priority</li> <li>call for proposals for 5 research priorities through the Center's website</li> <li>5 made contracts for outsourced studies</li> </ul>
		<ul style="list-style-type: none"> <li>Correction of the research assistant system tailored to the current research of the center (Currently, the research assistant system is more suitable for clinical and laboratory research)</li> </ul>	<ul style="list-style-type: none"> <li>Preparing a list of problems of the current research assistant system</li> <li>Negotiating and necessary follow-ups with the research assistant unit</li> </ul>	<ul style="list-style-type: none"> <li>Letter of recommendation for corrections to the university</li> </ul>
	25. Conducting 100 research projects based on the priorities of the Center	<ul style="list-style-type: none"> <li>Conducting 15 priority research projects in the first year (increasing the number of projects within 5 years so that an average of 20 projects are performed per year)</li> </ul>	<ul style="list-style-type: none"> <li>Preparing a list of supervisors</li> <li>Preparing, approving, and communicating the final standard report format conforming to the current research of the center, to the executives</li> </ul>	<ul style="list-style-type: none"> <li>Available final report approved by the supervisor for 15 designs</li> </ul>

Strategic goals for 2023 (five years)	Specific goals for the first year	Activities	Evaluation indicators and outputs at the end of the first year
26. Preparing 10 practical products in the field of spiritual health of Iran	<ul style="list-style-type: none"> <li>Preparing 1 practical product in the field of spiritual health of Iran in the first year</li> </ul>	<ul style="list-style-type: none"> <li>Selection of three of the Center's research priorities set for supplying a practical product</li> <li>Identify one the three above cases for the implementation and provision of the final product, which can include service provision guidelines or workshop holding guidelines, a national document, etc.</li> </ul>	<ul style="list-style-type: none"> <li>Available evidence indicating the production of a practical product (guidelines, training workshop, etc.)</li> </ul>
27. Using the bank for updated ideas as one of the inputs for research priorities	<ul style="list-style-type: none"> <li>Formation of an idea bank and using it in research priorities</li> </ul>	<ul style="list-style-type: none"> <li>Designing an idea production plan and implementing it</li> <li>Establishing a system for recording and maintaining research ideas using appropriate methods (including stakeholder needs, researchers' opinions, documentation examination, futures studies with the participation of interdisciplinary specialists and idea processing in group meetings, etc.)</li> <li>Designing a software to record and maintain research ideas, if necessary</li> </ul>	<ul style="list-style-type: none"> <li>Available idea bank in the Center</li> <li>Available software to record and maintain research ideas, if designed</li> </ul>
28. Student participation in 30% of research projects under the responsibility of professors of the Center	<ul style="list-style-type: none"> <li>Implementation of student research and a program to provide student research results in a systematic way</li> </ul>	<ul style="list-style-type: none"> <li>Considering 30% of the Center's research priorities as student research when prioritizing research</li> <li>Call for student groups to form a group and delegate related projects based on two research cores of the Center (spiritual interventions - spirituality and religions)</li> </ul>	<ul style="list-style-type: none"> <li>Final report approved by the supervisor for 4 student designs</li> <li>Documentation for holding 2 meetings for providing student research results</li> </ul>
29. Holding spiritual health fellowship courses	<ul style="list-style-type: none"> <li>Formulating the curriculum framework for the course and determining the requirements for holding the course (in the first year)</li> </ul>	<ul style="list-style-type: none"> <li>Formation of the curriculum formulation strategic committee</li> <li>Formulating topics and training programs and their resources</li> </ul>	<ul style="list-style-type: none"> <li>Documentation of the strategic committee (minutes, correspondence, etc.)</li> <li>Available curriculum framework for the course and the requirements specified for holding the course</li> </ul>

	Strategic goals for 2023 (five years)	Specific goals for the first year	Activities	Evaluation indicators and outputs at the end of the first year
		(Formulation and approval of the curriculum in law enforcement agencies for its implementation in the second year)	<ul style="list-style-type: none"> <li>• Formulation of requirements for holding courses</li> </ul>	
	30. Holding a postgraduate course in spiritual health	<ul style="list-style-type: none"> <li>• Formulating the curriculum framework for the course and determining the requirements for holding the course (in the first year)</li> <li>• (Formulation and approval of the curriculum in law enforcement agencies for its implementation in the second year)</li> </ul>	<ul style="list-style-type: none"> <li>• Formation of the curriculum formulation strategic committee</li> <li>• Formulating topics and training programs and their resources</li> <li>• Formulation of requirements for holding courses</li> </ul>	<ul style="list-style-type: none"> <li>• Documentation of the strategic committee (minutes, correspondence, etc.)</li> <li>• Available curriculum framework for the course and the requirements specified for holding the course</li> </ul>
Publishing	31. Launching and updating an electronic library of all research reports and theses	<ul style="list-style-type: none"> <li>• Formulation of a process program and registration frameworks for documents including all research reports, papers, theses, etc. (Establishment of databases of reports, theses and researches of Iranian researchers in the field of spiritual health from the second year)</li> </ul>	<ul style="list-style-type: none"> <li>• Designing the overall process of document registration and updating (according to the standard final report format)</li> <li>• Designing the relevant software, if necessary</li> </ul>	<ul style="list-style-type: none"> <li>• Available drafting of the document registration process and frameworks</li> <li>• Related software, if designed</li> </ul>
	32. Publishing an annual report of the Center's work (including the list of designs and other research products done)	<ul style="list-style-type: none"> <li>• Publishing an annual report of the Center's work</li> </ul>	<ul style="list-style-type: none"> <li>• Formulation and approval of the annual report format</li> <li>• Determining the responsible person for preparing the annual report</li> <li>• Final approval of the report by the head of the Center</li> </ul>	<ul style="list-style-type: none"> <li>• Approved annual work report of the Center</li> </ul>
	33. Publishing all the research in the form of papers (preferably in English in international journals with high impact factor)	<ul style="list-style-type: none"> <li>• Preparation of a list of journals related to the research priorities of the center (including ISI, PubMed, and Scopus with high impact factor), along with their acceptable frameworks for publishing the papers.</li> </ul>	<ul style="list-style-type: none"> <li>• Identification and preparation of a list of journals related to the research priorities of the center (including ISI, PubMed, and Scopus with high impact factor)</li> <li>• Formulating and providing a variety of acceptable frameworks for the publishing papers to the faculty members of the Center</li> </ul>	<ul style="list-style-type: none"> <li>• Available list of journals related to the research priorities of the center (including ISI, PubMed, and Scopus with high impact factor), along with their acceptable frameworks for publishing the papers.</li> </ul>

Strategic goals for 2023 (five years)	Specific goals for the first year	Activities	Evaluation indicators and outputs at the end of the first year
	(Forming teams for completing paper drafts, methodological consult, etc. from the second year)		
34. Implementation of 60 programs with the media to inform the public (an average of one per month)	<ul style="list-style-type: none"> <li>Implementation of 10 programs with the media to inform the public of the activities of the center (an average of one per month)</li> </ul>	<ul style="list-style-type: none"> <li>Formation of a media team</li> <li>Identifying and selecting relevant media</li> <li>Determining the goals and the content to be made public</li> <li>Meeting with media officials and arranging for participation in written, visual and audio media</li> </ul>	<ul style="list-style-type: none"> <li>Related media list</li> <li>Documentation of the implementation of 10 programs with the media (videos, reports, interviews, etc.)</li> </ul>
35. Holding 5 specialized conferences (one conference per year)	<ul style="list-style-type: none"> <li>Hold a collaborative professional conference (Center's readiness for holding a conference independently from the second year)</li> </ul>	<ul style="list-style-type: none"> <li>Motivating stakeholder for active participation in the conference</li> <li>Collaborative preparation of the main themes of the general objectives of the annual conferences in the first year</li> </ul>	<ul style="list-style-type: none"> <li>Documentations of holding a collaborative professional conference</li> </ul>
36. Holding 10 specialized training courses resulted from the research (two courses per year)	<ul style="list-style-type: none"> <li>Holding two specialized training courses resulting from the Center's research</li> </ul>	<ul style="list-style-type: none"> <li>Prioritizing two courses of the research priorities to be implemented in the first year</li> <li>Formulation of a related educational module</li> <li>call for the course, registration and holding the course</li> </ul>	<ul style="list-style-type: none"> <li>Documentations of holding two specialized training courses resulting from the Center's research</li> </ul>
37. Publishing 10 specialized books (two books per year)	<ul style="list-style-type: none"> <li>Publishing two specialized books</li> </ul>	<ul style="list-style-type: none"> <li>Determining the needs of the specialists to specialized books</li> <li>Prioritization to finalize two topics</li> <li>Negotiation with an international publisher for electronic or paper-based publication</li> <li>Forming a team for writing and translating books</li> <li>Determine the overall design of the book and the process of its printing and publication</li> </ul>	<ul style="list-style-type: none"> <li>Two published specialized books</li> </ul>

	Strategic goals for 2023 (five years)	Specific goals for the first year	Activities	Evaluation indicators and outputs at the end of the first year
	38. Systematic contact with all stakeholders in the field of spiritual health research including research investors, users, and researchers	<ul style="list-style-type: none"> <li>Preparation of a brochure with a simple language for gaining stakeholder support</li> <li>Identifying stakeholders and preparing systematic communication programs with the stakeholders</li> </ul> <p>(Implementation of the process of obtaining their support and opinion and using their opinions from the second year)</p>	<ul style="list-style-type: none"> <li>Designing a brochure to introduce the Center and printing it</li> <li>Identifying all stakeholders in the country's structure by five groups of (1) policymakers and managers; (2) researchers (including research centers); (3) service providers (including health services, and education); (4) People and community groups (NGOs, spiritual health volunteers, charities); (5) Resource allocators divided into intra-organizational (inside the Ministry of Health and the subsidiary universities) and extra-organizational (outside the Ministry of Health) categories</li> <li>Formulation of a program of systematic communication with stakeholders (including inviting them to annual conferences, participation in the Centre's programs, questioning, etc.)</li> </ul>	<ul style="list-style-type: none"> <li>A list of stakeholders in the field of spiritual health, divided by five groups</li> <li>A brochure with a simple language for gaining stakeholder support</li> </ul>
Research Utilization	39. Using at least 80% of the research results in policies, services and training the general public	<ul style="list-style-type: none"> <li>Using at least 50% of the research results in the first year in policies, services and training the general public</li> </ul> <p>(Formulation of a framework for Research Impact Assessment and evaluation of Center's past projects from the second year)</p>	<ul style="list-style-type: none"> <li>Determining the use of the results of each research</li> <li>Training all researchers about how to use the results</li> </ul>	<ul style="list-style-type: none"> <li>Available paragraph of Using the Results in all proposals</li> <li>Available dashboard for using the results of the research</li> </ul>
	40. Published 60 fact sheets specifically for policymakers and the audience with a practical language (one per month)	<ul style="list-style-type: none"> <li>Published 10 fact sheets specifically for policymakers and the audience with a practical language</li> </ul>	<ul style="list-style-type: none"> <li>Forming a team for writing abstracts specifically for policymakers and the audience</li> <li>Designing and preparing the framework of fact sheets</li> </ul>	<ul style="list-style-type: none"> <li>10 fact sheets specifically for policymakers and the audience with a practical language</li> </ul>

	Strategic goals for 2023 (five years)	Specific goals for the first year	Activities	Evaluation indicators and outputs at the end of the first year
			<ul style="list-style-type: none"> <li>• Publishing fact sheets and receiving feedback</li> </ul>	
	41. Holding regular meetings of using results with stakeholders (monthly)	<ul style="list-style-type: none"> <li>• Holding 10 meetings of using results with stakeholders</li> </ul>	<ul style="list-style-type: none"> <li>• Determining the list of results of priority projects to be presented at the meeting (including projects done out of the center)</li> <li>• Identifying and communicating with researchers active in the field of spiritual health</li> <li>• Designing a meeting framework and preparing six-month programs for the meetings</li> </ul>	<ul style="list-style-type: none"> <li>• Documentation for holding 10 meetings of using results with stakeholders including videos, photos, minutes, and reports on the results of meetings.</li> </ul>
Supporting Actions	42. Quadrupling the center's funding, considering the current inflation rate (about 30% increase each year)	<ul style="list-style-type: none"> <li>• Increasing the center's funding by 30% in the first year from external resources (after five years, this share shall reach 80%).</li> </ul>	<ul style="list-style-type: none"> <li>• Identifying resources sources in both public and private sectors</li> <li>• Formulating a systematic program to gain the support of the public and private sectors</li> <li>• Training all researchers about how to achieve grants</li> <li>• Preparing and submitting convincing documentation to the university with the aim of maintaining the budget and, if possible, increasing it</li> </ul>	<ul style="list-style-type: none"> <li>• Providing financial documentation indicating at least a 30% increase in the Center's funding from external sources</li> </ul>
	43. available potent human resource in the management of the research cycle	<ul style="list-style-type: none"> <li>• Familiarity of all personnel with research management</li> </ul>	<ul style="list-style-type: none"> <li>• Performing a needs assessment to determine the training needs of the members of the Center</li> <li>• Developing a curriculum based on the needs assessment</li> <li>• Organizing training courses according to the program developed for all researchers and faculty members of the educational center based on the needs assessment.</li> <li>• Program evaluation</li> </ul>	<ul style="list-style-type: none"> <li>• Needs assessment documentation</li> <li>• Documentation of the program and developed training courses</li> <li>• Program evaluation results</li> </ul>



Strategic goals for 2023 (five years)	Specific goals for the first year	Activities	Evaluation indicators and outputs at the end of the first year
44. Establishment of the role of the spiritual intervention clinic as (1) providing evidence-based spiritual health counseling services; and (2) collecting necessary data for the research	<ul style="list-style-type: none"> <li>• Making spiritual intervention clinic activities systematic</li> </ul>	<ul style="list-style-type: none"> <li>• Drafting the framework for guidelines of spiritual health services provision (outpatient)</li> <li>• Developing the guidelines for systematic recording of spiritual intervention clinic data</li> </ul>	<ul style="list-style-type: none"> <li>• Framework draft for guidelines of spiritual health services provision (outpatient)</li> <li>• Guidelines for systematic recording of spiritual intervention clinic data</li> </ul>
45. Increasing personnel satisfaction	<ul style="list-style-type: none"> <li>• Increasing personnel satisfaction by 20% in the first year</li> </ul>	<ul style="list-style-type: none"> <li>• A review of the experiences of research centers in and out of Iran to promote the motivation of researchers and staff</li> <li>• Personnel satisfaction assessment to determine the basic values and focus areas for interventions</li> <li>• Developing and implementing personnel motivation and satisfaction promotion programs</li> <li>• Program evaluation and determining satisfaction at the end of the first year</li> </ul>	<ul style="list-style-type: none"> <li>• Reports on two satisfaction assessments of the center personnel (at the beginning and end of the year) indicating increased satisfaction by 20%</li> <li>• Documentation of satisfaction promotion program in the first year</li> </ul>
46. Establishing a network of capable researchers and producing research products by this network	<ul style="list-style-type: none"> <li>• Drafting a framework of national research network regulations (development and approval of the network regulations in the second year)</li> </ul>	<ul style="list-style-type: none"> <li>• Identifying researchers and research centers (domestic and foreign) and inviting them to work with the center</li> <li>• Drafting the framework of regulations</li> </ul>	<ul style="list-style-type: none"> <li>• List of identified researchers and research centers (domestic and foreign)</li> <li>• Drafting the framework of the national research network regulations</li> </ul>

CHNRI: Child Health and Nutrition Research Initiative, RFP: Request for Proposal