

## Research Paper





# **Investigating the Relationship Between Spiritual Health and Ethical Sensitivity of Nursing Students**

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#### **ABSTRACT**

**Background and Objectives:** Spiritual health is one of the factors affecting the quality of nursing care provided to patients. Ethical sensitivity has been introduced as the basis of ethical performance and care in the nursing profession. The purpose of this study was to investigate the relationship between spiritual health and the ethical sensitivity of nursing students.

Methods: The present descriptive-analytical correlational study was conducted on 120 nursing students of the Islamic Azad University of Shahrekord in 2023 selected by the census method sampling. Data were collected using two standard questionnaires: Lutzen's moral sensitivity questionnaire and Palutzian and Ellison's spiritual well-being scale. Data were analyzed using descriptive and analytical statistics (Pearson correlation coefficient) by SPSS software, version 24

**Results:** The mean spiritual health score was  $86.42\pm16.78$  and was at the desired level, and the ethical sensitivity of nursing students was  $61.13\pm11.17$  at a moderate level. There was a significant positive relationship between the spiritual health score and the ethical sensitivity of nursing students (r=0.188, P<0.05).

**Conclusion:** Given the importance of spiritual health in relation to the ethical sensitivity of nursing students, it is suggested that spiritual concepts be introduced to nursing students through the implementation of workshops on spirituality and spiritual health, or through the incorporation of these concepts into the curriculum, to enhance the spiritual health and ethical sensitivity of nursing students.

### Keywords:

Spiritual health, Ethics, Nursing, Students

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#### Introduction

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piritual health, as the newest dimension of health, exists alongside other aspects of health, such as physical, mental and social health, characterized by stability in life, peace, and a sense of close relationships with oneself, God, society, and the environment [1]. Spiritual health has two

dimensions: Religious health and existential health. Religious health emphasizes the quality of one's understanding of health in spiritual life as it relates to a higher power, while existential health addresses the social and psychological concerns of individuals, focusing on how people adapt to themselves, society, or the environment [2].

Spiritual health is a dynamic hierarchy, in which one's insights, tendencies, and abilities are used in harmony with the overall purpose of the transcendence of the soul and closeness to the Almighty God, with behaviors that align accordingly [3]. Spiritual health is the sense of acceptance, positive emotions, and a feeling of positive interaction with a ruling and superior sacred power, as well as with others and oneself. This occurs through a dynamic and harmonious process involving personal, emotional, behavioral and consequential aspects [4]. Spiritual health embodies qualities, such as love, trust, honesty, integrity, respect, sacrifice, and compassion, leading to internal peace. The characteristics of spiritual health, such as forgiveness, hope, a sense of excellence, and interaction with the environment can improve psychological adaptation, improve coping skills, and increase resilience to psychological stress, thereby contributing to individual well-being [3]. One of the tasks of role specialist nurses is to pay attention to the spiritual needs of patients; addressing spiritual health, along with other nursing interventions, will help balance the body, mind, and spirit for holistic health. When nurses possess greater spiritual health, they are more likely to focus on the spiritual dimension of their patients [4]. A review of studies shows that spirituality and spiritual health are factors affecting nursing care, and there is a positive relationship between spiritual health and the clinical competence of nurses [5-8].

Professional ethics, especially in the nursing profession, is emphasized [9, 10] and indeed, the nursing profession is based on ethics [11]. Nursing Ethics is a set of rules or principles that guide nurses' decision-making and behavior [12]. The nursing care field has many challenges that require ethical decisions. Nurses have a direct and constant relationship with patients, who are often vulnerable; therefore, nurses are likely to face ethical

problems during daily work [13]. Ethical sensitivity as the basis of ethical performance, provides the basis for effective and ethical care of patients [14]. It refers to the capacity to understand the feelings of others, recognize their distress, be aware of how one's actions or reactions may impact them, and assume a sense of responsibility or obligation. A nurse must acknowledge that there is a moral condition prior to any argument or action [15]. Ethical sensitivity is an important factor in identifying ethical situations, making proper ethical decisions, and providing ethical care to patients. Ethical sensitivity is a combination of awareness of ethical results and the importance of moral issues, which helps nurses analyze moral conditions and identify moral challenges. It enables nurses to make the right ethical decisions [16-18]. Ethical sensitivity serves as a precursor to moral motivation and ethical performance, and it is closely intertwined with ethical care [19].

Research on the concept of ethical sensitivity of nursing students is important [20]. The concept of spiritual health in nursing students is also significant, as they encounter numerous stressful challenges in the workplace, including death, illness, work-related stress, emotional involvement, close contact with patients, high demands in their environment, lack of support, and various conflicts. Therefore, this study aimed to determine the relationship between spiritual health and the ethical sensitivity of nursing students.

#### **Methods**

This descriptive-analytical correlational study was conducted in the first half of the academic year 2023-2024 at Islamic Azad University, Shahrekord Branch.

The statistical population was all nursing students of Shahrekord Azad University. A total of 130 nursing students in semesters 2, 4 and 6 were selected by census sampling method. The inclusion criteria included adherence to the Islam religion and lack of mental disorders based on the individual report. The exclusion criterion was incomplete completion of the questionnaire. Finally, 120 questionnaires were completed. After obtaining a license from the Vice President of Research and Technology from the university and referring to the Faculty of Medical Sciences, the questionnaires were distributed.

Data collection tools included a demographic checklist assessing age, gender, and ethics education, and two standard questionnaires: The moral sensitivity questionnaire and the spiritual well-being scale.



Lutzen's moral sensitivity questionnaire (1994), containing 25 questions is scored on a five-point Likert spectrum: "Completely agree" (4), "Successful" (3), "Disagreement" (2), "Completely disagreement" (1) and "Noun opinion" (0). The highest possible score was 100, while the lowest score was 0. A score of 0-49 indicates low moral sensitivity, 50-75 indicates average moral sensitivity and 76-100 indicates high moral sensitivity. The validity and reliability of the moral sensitivity questionnaire were confirmed in the study by Nasiriani, with a reported Cronbach's  $\alpha$  coefficient of 0.82 [21]. In the present study, the reliability of the Questionnaire, as measured by Cronbach's  $\alpha$  coefficient, was 0.78.

Palutzian and Ellison's spiritual well-being scale includes 20 items with two dimensions: Religious health (10 items) and existential health (10 items). It uses a Likert scale with six options ranging from one to six (completely disagree, relatively disagree, neutral, relatively agree, agree, and completely agree), with negative items scored inversely. The total scores range from 20 to 120, where a score of 20-40 indicates low spiritual health, 41-70 indicates average spiritual health and 71-120 indicates high spiritual health. The validity and reliability of this tool have been approved in many studies in Iran, and in the study by Yousefi et al., its validity was approved, with a reported Cronbach's α coefficient of 0.72 [2].

Ethical considerations, such as completing a conscious consent form, voluntary participation, explaining the goals of the research, and the assurance of the confidentiality of the research information were observed.

Data analysis was performed with descriptive and analytical statistics (Pearson correlation coefficient) using SPSS software, version 22.

#### **Results**

The majority of the samples studied were female, with 86 (71.71%) participants, and 34(28.30%) were male. The mean age of nursing students was 21.56±2.22 years, and 62(51.6%) had received training in professional ethics, while the majority of nursing students, 58(48.3%), were in semester 2.

The mean spiritual health score of nursing students was  $86.42\pm16.78$  and their mean ethical sensitivity score was  $60.13\pm11.17$  (Table 1).

The results of the Kolmogorov-Smirnov and Shapiro-Wilk tests showed that the distribution of spiritual health data was normal, while the distribution of ethical sensitivity data was abnormal.

The results of the Pearson correlation coefficient showed that there was a positive and significant relationship between spiritual and religious health with ethical sensitivity (P<0.05). However, there was no significant relationship between the existential health dimension and the ethical sensitivity of nursing students (P>0.05) (Table 2).

#### **Discussion**

The findings of the present study showed that there was a positive and significant relationship between the mean score of spiritual health and the ethical sensitivity of nursing students. The findings of the study also showed that the ethical sensitivity of nursing students studied was moderate. Supporting these findings, Nasiriani et al. in Yazd, Borhani et al. in Qazvin, Kalantari et al. in Golestan and Shamsizadeh et al. showed the ethical level of nursing students at an average level [21-24]. In addition, Kobrai et al. Molaie et al. and Sharifi et al. also showed that nurses' ethical sensitivity levels are at a moderate level [25-27]. According to the results of the present study and similar studies, the ethical sensitivity

Table 1. Mean spiritual health score and dimensions and ethical sensitivity of nursing students

Variables	Mean±SD	Minimum	Maximum
Religious health	46.50±8.68	21	60
Existential health	39.91±9.56	18	60
Spiritual health	86.42±16.78	46	120
Ethical sensitivity	61.13±11.17	13	78





Table 2. Correlation coefficient between spiritual health and ethical sensitivity of nursing students

Variables		Religious Health	Existential Health	Spiritual Health	Ethical Sensitivity
Religious health	r	1	0.692	0.912	0.189
	Р	-	<0.001**	<0.001**	0.039*
Existential health	r	0.692	1	0.928	0.159
	Р	<0.001**	-	<0.001**	0.083
Spiritual health	r	0.912	0.928	1	0.188
	Р	<0.001**	<0.001**	-	0.040*
Ethical sensitivity	r	0.189	0.159	0.188	1
	Р	0.039*	0.083	0.040*	-

\*P<0.05, \*\*P<0.01.



of nursing students is considered medium. Given the importance of moral sensitivity in ethical decision-making, it is essential to reinforce nursing students' moral sensitivity within nursing education programs. Nursing students must understand the dimensions and issues of morality in their careers and develop sensitivity to ethical issues while providing nursing interventions.

The findings of the study showed a high mean nursing students' spiritual health score. In this context, the results of Taghizadeganzadeh et al. showed that the spiritual health status of nursing students is favorable [3]. Also, Shamsizadeh et al. and Naservand et al. showed that nursing students' spiritual health score was at a moderate level [7, 24], which confirms the results of the present study. According to the results of the present study and similar studies, it is not unexpected for Iranian society to be inclined toward religious and spiritual values. However, given the importance of spiritual health, there is a recognized need for further enhancement of students' spiritual health.

The results of the study also showed that there was a positive relationship between the mean score of spiritual health and the ethical sensitivity of nursing students. By increasing the level of spiritual health, the ethical sensitivity of the nursing students increased. Among the aspects of the spiritual health dimension, religious health was positively correlated with the ethical sensitivity of the students; however, there was no significant relationship between the existential health of the students and their ethical sensitivity.

In line with the present study, Shamsizadeh et al. showed that there is a positive and significant relation-

ship between the ethical sensitivity and spiritual health among nursing students in Hamadan [24]. Also, Sadeghian et al. showed that there is a positive and significant relationship between professional ethics and spiritual health and its dimensions (religious health and existential health) [4]. In this context, Ekramifar et al. and Jalili et al. showed that spiritual education has a significant positive effect on the ethical sensitivity of nursing students [28, 29]. Also, Rezaei et al. showed that spiritual care education has a significant impact on the moral sensitivity of nursing students, improving the moral sensitivity of nursing students [30]. Thus, spiritual health seems to be one of the factors affecting the ethical and moral sensitivity of nursing students.

According to the results of the study, it can be said that spirituality and spiritual health are closely linked to the ethics of nurse students. Spiritual growth occurs in the context of morality; it cannot be pursued simultaneously in both spirituality and morality. Individuals who adhere to a certain level of religion and spirituality tend to engage in more ethical behaviors. Therefore, spirituality and religion together include ethical concepts and all values of individuals. Given the role of spiritual health in enhancing the moral sensitivity of nursing students, it is recommended to strengthen this domain by fostering awareness of its positive aspects and its impact on nursing job performance.

#### **Conclusion**

The results of the present study showed that there was a significant positive relationship between the spiritual health and the ethical sensitivity of nursing students.



Professional performance in nursing requires an understanding of the ethical issues inherent in the profession and sensitivity toward patients. Ethical sensitivity as an infrastructure of nursing ethics must be taken into account from the beginning of nursing education. Given the influence of spiritual health on the moral sensitivity of nursing students, it is recommended to strengthen the spiritual health dimension by raising awareness among nursing students about spiritual health and highlighting the positive aspects of spiritual health and its potential impact on professional performance in nursing. Therefore, it is advisable to implement various methods of spiritual education within educational programs, including integrating the concepts of spirituality and spiritual health into the nursing curriculum. Promoting spiritual health is essential for enhancing the moral values and ethical sensitivity of nurses and nursing students, and this should be communicated to managers, planners, and nursing educators.

One of the limitations of this study is the use of nonrandomized sampling; therefore, caution should be exercised when generalizing the results to the broader community. Therefore, similar research is recommended in larger settings using a random sampling method, which may yield different results.

#### **Ethical Considerations**

#### Compliance with ethical guidelines

This study was conducted in line with the principles of the Declaration of Helsinki and approved by the Ethics Committee of Falavarjan Branch, Islamic Azad University (Code: IR.IAU.FALA.REC.1402.026). Before the study, the subjects were informed about the method of implementation and the purpose of the study, and informed consent was obtained. They were also assured that their private and personal information would be kept confidential.

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