

A Concept Analysis of Spiritual Health

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Abstract Spiritual health is an important dimension of health and forms part of a comprehensive care. This study was conducted to redefine and clarify the components of spiritual health based on different worldviews through Walker and Avant's concept analysis method. Being given a life and a soul and having beliefs are the antecedents of spiritual health. The attributes of this concept include a morality-oriented intellectual connectedness with the self, others, and the universe guided by a connection with the Transcendent and Superior being in order to create meaning in life and find its purpose in the context of culture and religion; transcendence is ultimately the consequence of spiritual health. Using the attributes appeared in this conceptual analysis, nurses can evaluate the spiritual health of their clients and help them create positive outcome by providing appropriate interventions.

Keywords Spiritual health · Concept analysis · Nursing

Introduction

Spiritual health helps people live better lives and have a more effective interaction with their surrounding world. Contrary to the past, today, there is a consensus on spirituality as a real phenomenon (Fisher 2011; Moberg 2002). Despite the numerous definitions provided for this concept in literature, there is still no unanimous definition for spirituality and

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spiritual health in the academia (Buck 2006; Hawks et al. 1995). Ribaldo and Takahashi (2008) conducted a meta-analysis of historical trends in spiritual studies over a 60-year period from 1944 to 2003 and emphasized the inconsistencies in the definitions of spirituality (Ribaldo and Takahashi 2008). In spite of the field's nursing has deep-rooted and long-standing links with spirituality recently increased interest to spirituality and spiritual health over the past two decades (Friedemann et al. 2002). Modern nursing has a holistic view of the human being, and comprehensive care is a unique feature of the nursing profession (Erickson 2007). Nurses therefore require a unanimous perception of the concept of spiritual health as a dimension of comprehensive care (Pesut et al. 2008).

The redefinition of a concept, such as spiritual health, hinges upon many factors, including the clarification of those aspects of the concept that have not previously been manifested, the change into the relationship between the features of the concept and the redefinition of the antecedents and consequences of the concept, and, more importantly, the statement of its definition according to the culture and diversity of nurses' views. In this regard, Fawcett states that the consideration of the diversity of views in nursing is what nursing is in need of (Fawcett 2006). Therefore, it seems necessary to redefine the concept of spiritual health according to the nature of the variables.

There are several methods for the analysis and redefinition of concepts. One of these methods is the Walker and Avant's method, which is usually used in the cases that have been introduced, defined, and partially expressed in the history and literature of nursing. However, through this analysis, they will be led to a higher level of development and advancement (Rodgers 2006). It is also necessary to clarify the concept or to add new aspects to the concept, or to clarify the relations between the features, antecedents, and consequences, more than ever. Considering the fact that the concept of spiritual health contains all these characteristics, the Walker and Avant's method to concept analysis was used here. This method provides the possibility of the systematic review of independent concepts (Powers and Knapp 2010).

In a recently published article, Jaber et al. (2017) have carried out a conceptual analysis of spiritual health. Referring to Draper and Meshery (2002), they asserted that it cannot be assumed that the Western structure is meaningful for all cultures in the domain of spirituality. Then, they recommended conducting a study with different philosophical perspectives and worldviews (Jaber et al. 2017; Kirkham et al. 2004). Therefore, this study is an attempt to pay attention to spiritual health from different perspectives and worldviews.

Conceptualization is always under the impact of the researchers' own opinions (Pesut et al. 2008), and this evolutionary movement requires that the cultural, historical, and methodological features of different communities be involved and necessitate diverse studies in different communities (Meleis 2007). Analyzing the concept from different perspectives and within different cultures reveals further common features and helps achieve a clear definition of spiritual health (Larsen 2012; Weathers et al. 2015). This study was conducted to analyze the concept of spiritual health based on a review of literature and to provide a summary of the definitions provided.

Materials and Methods

The concept analysis was conducted based on Walker and Avant's (2011) method through the following eight steps: (1) selecting a concept, (2) determining the aim of the analysis, (3) defining related words and terminology, (4) determining the defining attributes of the

concept, (5) constructing a model case, (6) constructing additional cases, (7) identifying the antecedents and consequences of the concept, and (8) defining empirical referents (Walker and Avant 2011).

The following text search method has been used to conduct the fourth step.

To access articles on the subjects of spirituality and spiritual health, an extensive review of papers indexed in OVID, PubMed, Scopus, and Wiley databases was carried out. Due to the increasing interest in spirituality over the past two decades, keywords such as “health,” “spirituality,” and their derivatives (i.e. “spiritual health,” “spiritual well-being”) were searched in the title and abstract of all the articles published between 1995 and 2015. The inclusion criteria consisted of the quantitative and qualitative article being a concept analysis, concept development, and systematic review, presenting definitions or explanations on spirituality or spiritual health, providing researchers with full access to the paper and the paper being written in English. Non-peer-reviewed articles and letters to editors were excluded. The initial search led to the retrieval of 4549 articles, 140 of which met the inclusion criteria and were thus analyzed. The articles selected were thoroughly studied, and 14 were excluded. Finally, a total of 119 articles and three published dissertations and four books were included in the concept analysis (Fig. 1).

1. Selecting a concept

The lack of a clear definition among the many diverse definitions available for spiritual health motivated the researchers to select spiritual health as a very important and widely applicable concept in nursing. According to the researchers’ recommendations and the results of the available studies (Mahlungulu and Uys 2004; Smith and McSherry 2004; Buck 2006; Pesut et al. 2008; Cohen et al. 2012; Weathers et al. 2015; Jaberri et al. 2017). The research team clarify and redefine the components of spiritual health based on different worldviews.

2. Determining the aim of the analysis

The purpose of this concept analysis was to clarify the meaning of spiritual health as associated with health and nursing through identifying important attributes and details of the concept and to present a definition of spiritual health based on the data analysis.

3. Definitions of the concept

Health and spirituality were the components investigated when studying spiritual health.

Health is a key concept in nursing that is affected by the degree of awareness in the community and the dominant attitudes depending on the geographical and cultural context in question. Health is a dynamic concept whose definition changes over time (Edlin and Golanty 2012). Although different definitions have been provided for this concept, the consensus remains on the World Health Organization’s comprehensive definition that describes health as the state of physical, mental, and social well-being and not merely the absence of disease or infirmity (World Health Organization 2016). This definition consists of three dimensions to which the spiritual dimension can also be added (Sadat Hoseini et al. 2015).

The next step was to explore the concept of spirituality. What is spirituality? There are 24 meanings for *spirit* in the Oxford dictionary that are concerned with the non-physical realm, the vital and reviving principle of life, the beyond matters and mechanics, the supernatural creature, and the individual’s non-physical part (Fisher 2011). “Spiritual” is derived from “spirit” (Monareng 2012). Spirituality is commonly defined in dictionaries as

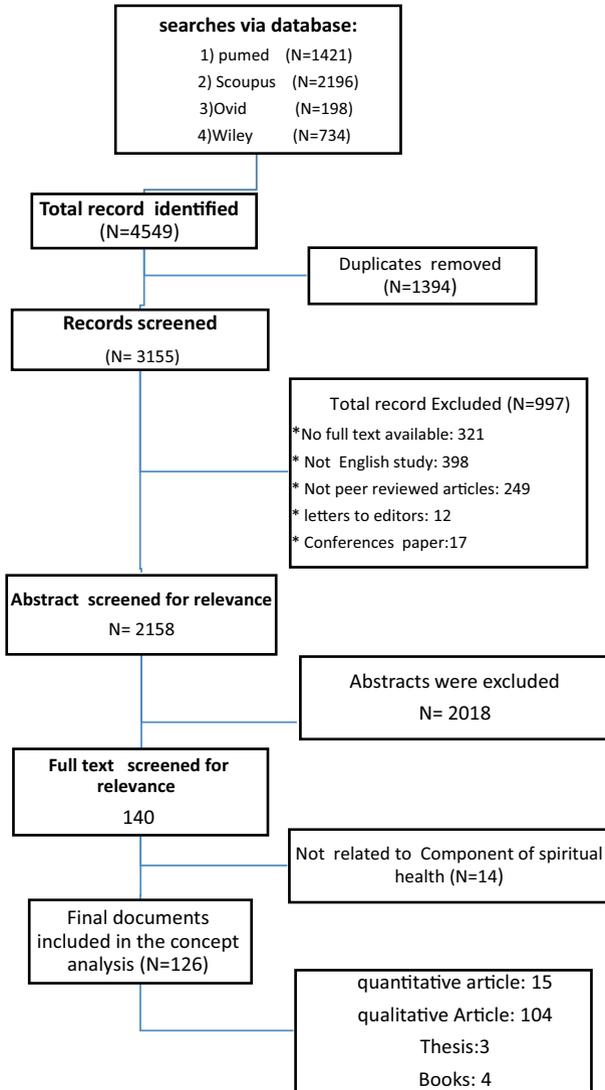


Fig. 1 Process of literature identification and selection

an immaterial, supernatural, and spirit-associated phenomenon in connection with the main essence and nature of human (Brown 1993; Fisher 2009; Monareng 2012).

Spiritual health is heavily dependent on the individual's worldview (Hawks et al. 1995). Indeed, the worldview engenders the clarification of the individual's understanding of life goal and of the condition he/she is living in (Hawks 2004). According to Fawcett (2006), people's worldview directs the development of models and conceptual theories (Fawcett 2006). Thus, the concept of spirituality in all models and conceptual theories reflects the worldview of those models and theories.

Koenig et al. (2001) described five types of spirituality that can also be divided into three groups, including theistic, secularist emphasizing the environment or nature, and

humanist emphasizing human's potential or achievements (Moberg 2002; Bash 2004; Pesut et al. 2008; Larsen 2012; Ramezani et al. 2016) (Table 1). According to Table 1, the basic difference among these views lies in the relationship between spirituality and religion, the meaning of life and connection with the Transcendental being.

The spiritual dimension of human nature, which ideally manifests itself as spiritual health, is important owing to its interaction with other dimensions (Como 2007). A serious issue is that many references fail to differentiate between spiritual health and spirituality. Definitions of spiritual health and spirituality logically overlap such that spirituality is considered the general construct that is manifested in spiritual health (Darvyri et al. 2014). Individuals in a state of well-being and balance who possess a supernatural entity can easily discover their identity and thus be said to have spiritual health (O'Brien 2013). Overall, spiritual health depends on one's perception of and attitude toward the universe and its governing forces.

4. Determining the defining attributes of the concept

Attributes provide a profound insight into the concept in question and differentiate it from its surrounding concepts (Walker and Avant 2011).

Spiritual health has two major attributes that are particularly different in terms of the three perspectives noted in connection with the Superior power and the search for meaning (Table 2).

4-1) Relationships or connections are considered an important attribute of spiritual health (Hungelmann et al. 1996; Tanyi 2002; Daly 2005; Delgado 2005; Miner-Williams 2006; Sessanna et al. 2007; Edwards et al. 2010; Fisher 2011; Weathers et al. 2015). Connections refer to how one is connected with the self, others, the world and the goal, Supreme meaning or Superior power (Mahlungulu and Uys 2004).

4-1-A) Connection with the self is enabled through self-awareness and introspection (Oh and Kang 2005). Self-relationship involves introversion, rethinking, inner reflection and contemplation, self-reflection and honest self-discovery (Vachon et al. 2009; Weathers et al. 2015), self-belief or inner belief in abilities, and judgment about the self, self-acceptance, and life (Awan and Sitwat 2014). Other aspects of honest self-relationship include self-righteousness (Chiu et al. 2004), inner harmony, and alertness (Dhar et al. 2012).

4-1-B) Connection with others or interconnectedness is formed to help with the growth of the communicating parties and the discovery of meaning in human experiences (Martsolf and Mickley 1998). Interconnectedness manifests itself in intimacy, commitment, sacrifice, caring, peace and love (Edwards et al. 2010), kindness, sympathy and empathy, expression of love, and sensitivity to others' needs and pain (Piedmont 1999). Community spirituality (Rovers and Kocum 2010) and communal spirituality (Fisher 2011) are the equivalent concepts of interconnectedness. Connection does not denote a stereotypical extroversion or a link to the community or socialization; rather, it is a more profound feeling and a sense of belonging to a community, the world or an individual (Ingersoll and Bauer 2004). Social connections are therefore rooted in altruism and love (Rovers and Kocum 2010) while devotion and self-sacrifice are the culmination of these connections (Davis et al. 2013).

4-1-C) Connection with the universe is a sense of wonder before the nature (Fisher 2011; Edwards et al. 2010) and comprises of the interaction between individuals and the environment or an awareness of the human–environment integrity (Chiu et al. 2004). Unity with the universe lays the groundwork for human's growth and transcendence (Larsen 2012).

Table 1 Spirituality within three paradigms

Paradigm	Theocentric	Humanist perspective	Non-theocentric (secular)
Relationship between spirituality and religion	<p>“Religion” is an inclusive concept, spirituality is its subcategory and comes as the other of “secularism” (Koenig 2012)</p> <p>Religion is the means of understanding spirituality (Burkhardt and Nagai-Jacobson 2002) and gives content to it. It presents a spiritual path for human’s prosperity and determines his lifestyle. Religion is the foundation of spirituality (Pesut et al. 2008)</p> <p>Spirituality is very superficial without an underlying religious view (Büssing et al. 2010)</p>	<p>Spirituality is beyond religiosity. The spiritual person seeks inspiration, honor, astonishment, meaning, and purpose even if he does not believe in God (McBrien 2006)</p>	<p>Spirituality is distinguished from religion (Chiu et al. 2004; Harris 2013)</p> <p>Referral to God, worship, supernaturalism, and religion centeredness are eliminated (Moberg 2002)</p>
Meaning of life	<p>People seek meaning and purpose in life by accepting God in this worldly life and in the afterlife (Rassool 2000). Religious beliefs help find the meaning of life and create a sense of meaning and purpose in conditions of suffering, health, disease, and harsh living (Heydari et al. 2016; Rovers and Kocum 2010) and thus help unify all the dimensions of human existence (King and Koenig 2009)</p>	<p>This view emphasizes individualism in such a way that one should be able to make the best use of all his personal and internal spiritual resources against and in line with the doubts, concerns, and questions raised (Monareng 2012). Concocting meaning is a search for the meaning of life in the norms and expectations ahead based on personal experiences and insight (de Jager Meezenbroek et al. 2012)</p>	<p>Searching for meaning and purpose in life and for the absolute truth using one’s senses and mind and as distinct from mere adherence to a religious system (Rovers and Kocum 2010)</p>
Connection with God	<p>The world is created by God, who is the source of love, the good and beauty (Pike 2011)</p> <p>Human beings have a Divine origin, i.e., the Transcendental being, God or Allah, JHW, Tao, Brahman, Prajna, Unity (Büssing et al. 2010)</p> <p>God-orientation is irrevocable from the concept of spirituality (Memaryan et al. 2016)</p>	<p>Although connection with the Transcendental being is considered a feature of spirituality, the definitions do not necessarily discuss religion and the connection with God. The Transcendental being is interpreted very differently by these scholars (Büssing et al. 2010). There viewed it as the Divine nature that is sometimes defined as the Superior being, the cosmic force, concerns, or ultimate issues (Fisher 2011)</p>	<p>Holiness and Transcendental concepts such as God or the Superior power are rejected in this view (Moberg 2002). Transcendence is exemplified by force/power and energy (Chiu et al. 2004). There is energy and connections of energy within the individual, but their definitions do not revolve around Transcendence or a belief in God (Bash 2004)</p>

Table 2 Defining the attributes of the concept of spiritual health

Attribute	Sub-attribute
Connection with the self	Introspection, deliberation, introversion, rethinking, reflection, speculation, effort to achieve self-actualization, inner belief in one's capability for self-judgment, honesty, accepting oneself and life, complying with one's commitments, existential development using one's internal resources such as internal power, a way of thinking and feeling about oneself
Connectedness	Love and belonging, ethical foundations such as justice, accountability, conscientiousness, generosity, and trust, social contributions based on culture and religion, performing social-religious customs, having harmony with the society and feeling a sense of unity with other members of the community
Connection with the universe	Having harmony with the nature, being one with the environment, feeling astounded by the environment, admiration, environmental concerns
Connection with God	The nature of the Superior being, internal search for God or holiness, worship, engaging in religious activities, living according to the teaching of a holy book, leaving concerns to the Transcendent reality or the Superior power, intentional effort to connect with the Sacred being
Finding and creating meaning in life	Dynamic nature of exploration, having reasons for life, purposeful living, interpreting life experiences and spiritual experiences, being hopeful, trying to respond to questions that biology is unable to respond to, rethinking fundamental values

4-1-D) Connection with the Sacred or Transcendent being refers to one's connection with whatever is beyond the human level, e.g., the ultimate issues, the cosmic forces, the Transcendent reality or God (Moberg 2002; Fisher 2009; Gall et al. 2011), and describes one's need for connecting to an infinite existence (Larsen 2012), and involves the belief in and the worshiping of the source of mystery and power in the world (Fisher 2011).

The quality of this connection changes with the individual's conditions, worldview, and beliefs and his culture and religion (Hawks 2004; Johnson et al. 2005). This type of connection is therefore called intellectual connectedness, as one adjusts these sorts of relations based on the noted factors as well as his own heartfelt and subjective beliefs, i.e., spiritual health antecedents. In addition to emotional issues, cognitive foundations such as wisdom, which are manifested in one's behavior, also play a key role in the formation of spiritual health (McSherry and Cash 2004; Miner-Williams 2006; Edwards et al. 2010; Buck and Meghani 2012).

Ethical issues are also raised in relation to this connectedness. Giacalone and Jurkiewicz (2003) showed that enhanced spiritual health, which is associated with an increased attention to the effects of one's actions on others, enables a more accurate judgment of one's ethical behavior in his relations (Giacalone and Jurkiewicz 2003). Moreover, one who is more spiritually healthy pays more attention to the effects of his activities on the nature (Fernando and Chowdhury 2010).

4-2) Finding or creating meaning or purpose in life (Clarke 2009; Tanyi 2002; Vachon et al. 2009; Sessanna et al. 2007; Vandover and Pfeiffer 2012; Cohen et al. 2012) also denotes an existential spirituality (Rovers and Kocum 2010) that means becoming (Büssing et al. 2012). It is, in other words, a method by which one creates meaning, goal, and hope (Rovers and Kocum 2010). An intellectual (meaningful) connection ultimately leads to a more profound meaning in life (McBrien 2006). Meaning is thus not formed in vacuum, but is created in an individual within an objective, communicative, and social context.

External stimuli have a great impact on one's life and prosperity and finally on finding meaning in life (Rovers and Kocum 2010; Edwards et al. 2010). As the attributes of spiritual health, intellectual connectedness, and finding meaning are reciprocally associated with each other, intellectual connectedness gives new meanings to life and one organizes his intellectual connectedness based on the new meanings one acquires, and this cycle is repeated in life to form the consequences of spiritual health (Rovers and Kocum 2010; McBrien 2006).

The Context for Shaping Spiritual Health: Culture and Religion

Spiritual health is characterized by the values that guide human life (Fisher 2011). These values are adopted from people's beliefs and morality (Larsen 2012; Miner-Williams 2006), which in turn stem from cultural processes or religious perspectives (Delgado 2005). Culture and religion can be considered a groundwork on which all the components of spiritual health are founded; in other words, spiritual health is interwoven into the religion and culture of the community (yang and wu 2009; Weathers et al. 2015; Ajam Zibad et al. 2016).

Spiritual health is influenced by cultural, social, and religious structures (Edwards et al. 2010). Culture is defined as a complex structure that has been made up of knowledge, belief, and shared behavior (Buck and Meghani 2012). Culture affects all dimensions of spiritual health and shapes them. An individual defines him/herself in relation to his/her culture and with reference to it (Johnson et al. 2005). Culture builds the form and framework of the "self", that is, how people think and feel about different aspects of their lives. The individualized cultures, found mainly in Europe and North America, support the prioritization of individual experience, and seriously orient their attention to referral to the inner self. The oriental culture about the "self" differs from the perception of the North Americans of the "self." The East Asian perspective toward the "self" is that the person finds identity and existence in relation to others and is inextricably linked with others by affective relations (Diener et al. 2003).

The experience of how to communicate with others is also culturally shaped (e.g., roles and expectations (Edwards et al. 2010). For instance, the Islamic culture presents patterns, rules, and rituals for many human relationships up to the point that even spiritual transcendence regards the quality and desirability of the person's social communication. A large part of Islamic ethics, such as self-sacrifice, forgiveness, humbleness, compassion, and kindness, is practicable only in the social life and interpersonal relations (Rassool 2000).

Culture also affects the relationship with nature and the world (Johnson et al. 2005), and this is a two-way influence. In a society like the West, people's beliefs about the environment are diverse, and some people have environmental concerns rather than a deep connection and/or a sense of wonder and unity with the environment (Fisher 2011). In some other cultures, music is considered a kind of relationship with nature and an entity that sublimates the soul (Edwards et al. 2010). In NANDA's conceptual definition, art, music, and literature have been mentioned as examples of spirituality (Larsen 2012). In the Islamic culture, spirituality affects art and music (Nasr 1997).

In addition, communication with the Transcendental being whether in the form of humanism, monotheism or theism, or atheism is dependent on culture (Johnson et al. 2005).

Culture also influences the discovery and creation of the meaning of life. The meaning of life in religious-based cultures where it is believed in the afterlife and the continuation

of life in eternity will be very different from the creation of meaning in a culture that views death as the end of life. Undoubtedly, this difference of opinion and view about life will considerably influence the review of the howness of life, planning on life, and how to tackle the sufferings, difficulties, and crises of life (Rassool 2000; MacLaren 2004; Cohen et al. 2012).

Culture plays a decisive role in the type of the consequences of spiritual health, as well. For example, one of the important consequences of spiritual health is to achieve calmness and inner peace, but what is important in the Western culture about the concept of inner peace is different in the Islamic culture. In the Western culture, uncertainty and pleasure are symbols of calmness; in other words, inner peace is equivalent to the maximum enjoyment of pleasures (Engebretson 2004). In religious teachings, tranquility is a concept beyond mere pleasure. What is perceived in the religious culture of the concept of inner peace is to strive for attaining the Transcendental goals and the correct encounter with challenges, even if it is not accompanied by apparent pleasures (Ramezani et al. 2016).

According to what was mentioned above, it is implied that the conceptualization of spiritual health, which is based on the cultural realities of the population, facilitates a deeper understanding of the spiritual experiences of various groups and improves the quality of acquiring information and designing interventions (Speck 2016).

5. Constructing a model case

Mother Teresa once said, “By blood, I am Albanian. By citizenship, an Indian. By faith, I am a Catholic nun. As to my calling, I belong to the world. As to my heart, I belong entirely to the Heart of Jesus.” Her whole life was under the influence of her faith and religion. God and faith were the engine behind Mother Teresa’s great achievements and her persisting Divine and humane love. Her view of the universe and the world around her was one of love and awareness. She had a profound personal bond to Jesus Christ. Early in her youth, she felt that serving others is a key principle of the teachings of Jesus Christ. Upon hearing this inner voice, she changed her life and made great efforts for eliminating poverty in India. She took a strict stance against abortion, the death penalty, and divorce. She was one of those who were able to significantly inhibit the Ethiopia drought and also helped the 37 besieged children in the midst of the Israel–Lebanon war. She did not focus solely on material poverty, but deemed spiritual poverty even more important. She once said, “Have a heart full of God’s love for God to help you.” By 1996, Mother Teresa had performed 517 missions in more than 100 countries and won the Nobel Peace Prize in 1979 for her humanitarian services and even spent her prize money on helping the poor. The Missionaries of Charity that she trained gradually grew from 12 into the thousands. By 2013, these missionaries were operating in 700 locations in more than 130 countries across the world. She is remembered as the Hero of Spirituality.

This model case comprises all the attributes of spirituality, including belief in the Superior power, search for meaning in life, hope in the future, creating new meanings in the face of crises, and a profound connectedness with the self, the others, the universe and God.

6. Constructing additional cases

6-A) Ascetic is a special term for describing people who practice long and hard bodily and physical endurance and deeply focus on spiritual and physical forces and thus acquire strange powers that astound others. These practices do not require any special faith or religious beliefs. The man who strengthens his own will gain the power to affect things and

phenomena. This is part of the cause and effect system governing the world and indicates the strength of the human soul. For example, the ascetic can stop the train by his glance, walk on water, or survive a long time without food and water even in a place with no room for breathing.

In this example, the ascetic has certain features of spiritual health such as a deep connection with the self and the environment. Connection with God could be or not be, yet the connection with others is interrupted. The objective and purpose of life is not determined in this kind of life, and the meaning of life is seriously ambiguous. Despite seeming supernatural, these practices do not lead to transcendence and spiritual development and are therefore not considered part of spiritual health.

6-B) A contradictory model: This model is indicative of a soulless relationship lacking in beliefs and unable to establish an intellectual connectedness and no meanings can be attributed to this model.

7. Identifying the antecedents and consequences of the concept

7-A) Antecedents

The arrangements that need to be made before spiritual health can be achieved include:

1. Life (from birth to death), especially important life events such as disease, stimulate awareness, and spiritual growth (Tanyi 2002; Frey et al. 2005). Spiritual health is a dynamic identity, meaning that the accuracy and efficiency of one's worldview and beliefs are tested by the challenges presented to him in life (Fisher 2009). According to Engebretson (2004), deeper thinking and reflection on the meaning of life occur in times of loss, grief, pain, and despair (Engebretson 2004).
2. Spiritual health is associated with the human soul and inner life (McCarroll et al. 2005) as the inherent aspect and main foundation of his existence (McSherry and Cash 2004; Miner-Williams 2006; Tanyi 2002).
3. Beliefs and faith (Chiu et al. 2004; McSherry and Cash 2004; Hodge and McGrew 2006; Vachon et al. 2009): Spiritual health depends on the individual's worldview, beliefs, and experiences in life (Fisher 2011). Theists believe that spirituality exists within the human nature (FETRAT) (Sadat Hoseini et al. 2015), while humanists identify spirituality to be caused, regardless of beliefs, by human's experiences in the world (Delgado 2005). Therefore, it can be inferred that spirituality entails the formation of a belief system (based on religion or otherwise). This faith can include belief in the Superior power or God. In addition, there is the possibility that there is a belief in one's self-chosen values or belief in the world without God's acceptance (Tanyi 2002).

Jaberi et al. (2017) have referred to faith and belief as the attributes of the spiritual health. At the same time, it has been mentioned in their explanations that faith and belief are the basis of life, meaning and hope in life (Jaberi et al. 2017). On the other side, Cavendish (2000) regards the belief system as an introduction and a framework for life choices (Larsen 2012). Thus, due to what was mentioned, faith and belief are the introduction and antecedent of spiritual health, not its attributes. For example, people have some beliefs about the nature of the world in which they live and they may view the world logical, orderly, or chaotic. These beliefs guide and direct both the individual's thoughts and actions. Based on these beliefs, they search for meaning and purpose in their lives (Delgado 2005). In this regard, Ajam Zibad et al. (2016) in the analysis of the concept of spiritual health in the elderly in the Islamic culture of Iran showed that the elderly having spiritual belief enter the path of spiritual growth and these beliefs have a profound effect on

their attitude and behavior about themselves and their relationships with other people, and they have found the purpose and meaning of life, and achieve spiritual health.

7-B) Consequences:

The consequences of spiritual health include improved health in different dimensions, greater hopefulness, improved quality of life, and spiritual transcendence.

There is a significant correlation between spiritual health and its different dimensions, including physical and psychosocial dimensions (Hill and Pargament 2008), i.e., higher levels of spirituality improve wellness and physical health (Boswell et al. 2006; Sirois et al. 2013; Visser et al. 2010). Studies show that spiritual health causes feelings of happiness (Engebretson 2004) and security and reduces anxiety (Lee and Lee 2015), depression (Toussaint et al. 2012) and treatment-related fatigue (Lewis et al. 2014), improves resiliency (Kim and Esquivel 2011), optimism in stressful situations (Krause 2006), adaptability and stress management (Livneh et al. 2004), increases internal energy and self-control (Koenig 2012), and leads to a higher satisfaction with life (Trevino et al. 2010) and a greater hopefulness (Crocetti et al. 2009). Spiritual health improves social functioning and support (Koenig 2012), self-efficacy, and academic achievements (Duggleby et al. 2009). Improved quality of life is only another outcome of spiritual health (Ali et al. 2015; Bai and Lazenby 2015; Jahani et al. 2012) while the ultimate outcome is the transcendence of the soul (McSherry and Jamieson 2013; Weathers et al. 2015).

Defining Empirical Referents

There are no specific tools for measuring spiritual health (Gray 2010) given the lack of a global consensus on its nature (Monod et al. 2011).

The Spiritual Health Scale (SHS) developed by Dhar assesses the parameters of spiritual health on three levels, including cognitive, affective, and behavioral functioning, according to a checklist and consists of six constructs and three domains, including self-evolution, self-actualization, and transcendence. Researchers believe that the SHS can be universally applied provided that its validity and reliability are reconfirmed in different groups (Dhar et al. 2012).

Fisher (2011) developed a 20-item Spiritual Health and Life-Orientation Measure (SHALOM) to examine each individual's connection with the self, others, the environment and/or God in terms of Personal, Communal, Environmental, and Transcendental domains of spiritual well-being. These four domains reflect the quality of one's connection with the self, others, the environment, and God or the Superior power. The SHALOM was developed for healthy people and provides a unique way of assessing spiritual well-being, as it compares each person's ideals with their lived experiences and thus provides a measure of spiritual harmony or dissonance in each of the four domains (Fisher 2011). It has two components. First, the Life-Orientation Measure (LOM) to elicit people's "ideals" for spiritual health in four sets of connections, including connection with the self, others, the environment and/or God. Second, the Spiritual Health Measure (SHM) to ask people to reflect on their lived experiences/how they feel each item best reflects their personal experiences (Fisher 2010). The validity and reliability of this tool have been confirmed for use in Christian societies, and its application to other religions is therefore limited.

The 20-item spiritual well-being (SWB) scale developed by Ellison (1983) is an old tool for assessing spiritual health that offers the maximum number of empirical references and is arranged within two subscales: (1) existential well-being, consisting of the individual's perception of life satisfaction and the purpose of life without referring to a particular religion (EWB) and (2) religious well-being (RWB), which measures healthy people's

perception of a healthy spiritual life in connection with the Superior power (Monod et al. 2011).

The 21-item relation-based JAREL (1996) is a tool developed to examine spiritual well-being but does not take account of the environment and measures only domains such as belief-faith, life-self responsibility, satisfaction with life, and self-actualization on a six-point Likert scale (Hungelmann et al. 1996).

Statement of Purpose

The purpose of the present study was to provide a clear and comprehensive definition of the concept of spiritual health, which seems to be a subjective and dynamic concept concerned with the nature and essence of human being and is a unique dimension that unifies all the other dimensions of health. The components of spiritual health include a morality-oriented intellectual connectedness with the self, interconnectedness with others or the community, and connection with the universe, all of which are influenced by one's connection with the Transcendent and Superior being. These relations are formed to give meaning to life and help find its purpose in the context of culture and religion. Spiritual health, which is subject to being given a life and soul and having beliefs, causes physical and psychosocial health, improves the quality of life, fosters hopefulness, and ultimately leads to transcendence and spiritual growth (Fig. 2).

Discussion

Research findings indicate that the concept of spiritual health is heavily dependent upon the underlying worldview of individuals and can lead to the generation of orientations in life (Büssing et al. 2007). For a more precise explanation of this concept, it is required to classify these worldviews. Therefore, the components of spiritual health fell within the three categories of theism, humanism, and secularism according to different worldviews held by selected scholars. The results showed that the relationship between religion and spirituality, the relationship with the Transcendent being and God as well as the concept and type of search and finding the meaning of life are the most important factors in the variety and diversity of views about the concept of spiritual health. On the other hand, there are six common aspects in these worldviews as follows: (1) Spirituality is a kind of quest for meaning; (2) spirituality is a relational process; (3) spirituality is a Transcendental process; (4) spirituality contains such manifestations as love, peace, wisdom, wonder, and so on; (5) spirituality is based on beliefs and is shaped in the context of culture and religion; and (6) spirituality is a metaphysical phenomenon and is rooted in intangible concepts. In addition, spiritual health is one of the aspects of health and is considered as the coordinator of other dimensions.

Recently, the definitions of the concept of spiritual health have been heavily influenced by existentialism and postmodernism. Here, the nature of spirituality and its final source have been described on the basis of the subjective experiences of individuals (McGrath 1997). However, the nature of spiritual health and all its components get related with transcendence and God in the definitions of this concept based on the theistic concept. This sense of relationship or connection with a Superior power or force is more than a mere quest for the meaning or than a sense of unity with others (Bash 2004). From this perspective, religion is an integral part of spirituality, provides the content of spirituality, and

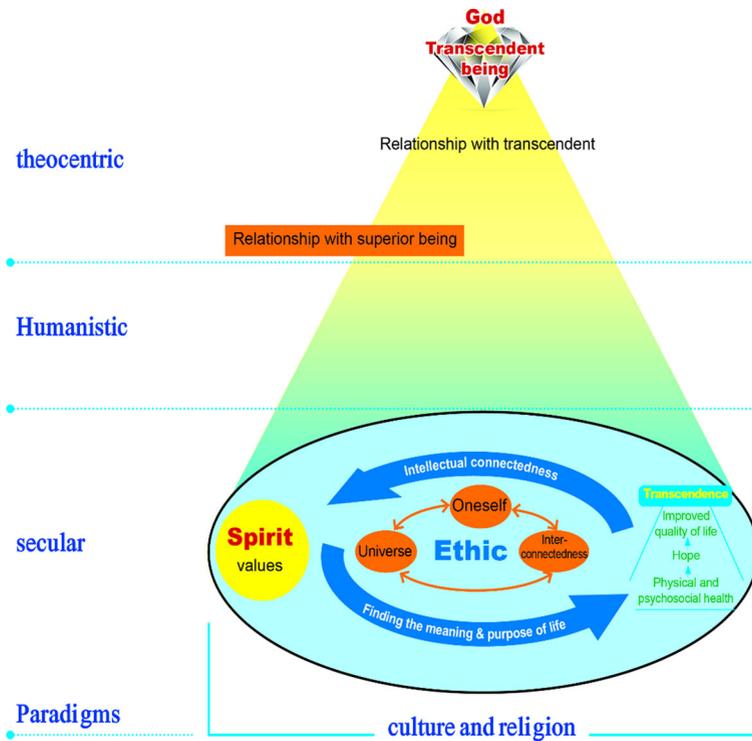


Fig. 2 Spiritual health model based on three paradigms

provides a spiritual path for human happiness and lifestyle. In other words, religion is the foundation of spirituality (Pesut et al. 2008). Individuals seek the meaning and purpose of life in the worldly life and, then, in the hereafter with the acceptance of God (Rassool 2000).

From the theistic worldview, God is the center of the universe and every truth, and the value base of any truth is referred to God. At the same time, human being is considered to be the Supreme creature of the universe in the hierarchy of the system of being; however, the modern Western culture and the secular and existential worldviews regard human being at the center of the universe, the foundation of each truth returns to mankind, and the human being becomes the base and the reference of any value. Thus, the human proportions and equations also undergo fundamental changes by turning the central point of the cosmic system from God to humans. In this way, the modern human being establishes their new relation with the self and the surrounding world. In this new attribution, a new system is established between mental tendencies and belongings, mental perceptions and episteme, and human behaviors (Khayy Qaramlaki 2014). In Islamic societies (e.g., Iran), relationship with God first step on the path to a meaningful and spiritual life (Ajam Zibad et al. 2017).

Individualism is a view that governs the definitions of spiritual health and which holds that human is a unique creature independent of external powers on whom all affairs center. People should make the best use of all their personal and internal spiritual resources against and in line with the doubts, concerns, and questions raised (Monareng 2012; Sawatzky and

Pesut 2005). The question is whether the spirituality adopted from one's personal experiences can encompass a holistic approach and attend to all the dimensions of human existence. The breadth of vision does not go beyond the understanding power of the existing human, who is limited in time and cannot master the entire world and the afterlife. Human's experiences are therefore limited and imperfect, restricting spirituality within a materialistic circle. Consequently, it is impossible for humans to form a profound spirituality that comprises each and every dimension of his existence irrespective of materials (Baghgoi et al. 2015). If spirituality is to be based on personal perceptions and understanding, how can one guarantee not to divert from the path of health and safety and not fall into the abyss of misunderstandings and misinterpretations? (Best 2008).

Jaberi et al. (2017) have referred to self-relationship as the spiritual awareness and as an antecedents of spiritual health, while a large number of studies have considered self-relationship as one of the attribute of spiritual health and a subset of relational components (Mahlungulu and Uys 2004; Chiu et al. 2004, Delgado 2005; Miner-Williams 2006; Vader 2006; Fisher 2009; Larsen 2012; Dhar et al. 2012; de Jager Meezenbroek et al. 2012). Self-awareness has been considered as the driving force or Transcendental aspect of human soul regarding self-seeking for identity and value; therefore, it is a feature of spiritual health (Tanyi 2002; Fisher 2011). In the monotheism worldview, Self-awareness is the key to theology and ontology (Ajam Zibad et al. 2017).

Dissociating spiritual health from mental health is the most important issue in this research. A unique attribute of spiritual health is that it is associated with a Superior being. The type and style of this connection significantly affect other attributes of spiritual health (Fisher 2012). The restless spirit in search of meaning in life finds something superior to itself (Miner-Williams 2006), and the connection with God or the Transcendental being forms a basis for this meaning (Delgado 2005). Finding meaning in life guided by the connection with the Transcendent is therefore the most important defining feature of spiritual health. When people become involved in crises and tragedies or suddenly face death, they are caught in the crisis of absurdity and begin to seek a meaning for their life. Connecting with a being beyond the material or with God can save human from this crisis of meaning. Psychologically speaking, according to the attachment theory proposed by Hill and Pargament (2003), human can improve his physical and mental health by further approaching God. According to the attachment theory proposed by Peterson (1992), having a strong relationship with the source of power provides people with a permanent feeling of security as well as support against stresses (Proeschold-Bell et al. 2014). There are two viewpoints on the type of connection with the Superior being: One, this connection is classified just as other relations; second, it is a vertical connection disassociated from other horizontal relations. Many studies have demonstrated the effectiveness of having a relationship with God in the formation and persistence of one's other relations (e.g., with the self, others, and the world) as well as in giving meaning to life (Edwards et al. 2010; Fisher 2012; Gall et al. 2011; King et al. 2013; McBrien 2006; Rovers and Kocum 2010; Ajam Zibad et al. 2017; Heydari et al. 2016). This connection can be considered a pyramidal relation affecting other components of human existence.

Fisher considered connection with the nature a dimension separate from spiritual health, but he did not clarify how it affects and improves spiritual health. Connection with the universe seems to be important due to its special causal effect on the formation of meaning in life and how it makes the entire human life become meaningful in a special context, namely the universe, which cannot be neglected when finding meaning for life. If one believes in a kind of intelligence, rationality, and objectivity in the universe, he will also find himself taking a special position in this perspective. In contrast, if the universe is taken

as something without a beginning or an end and with no deliberate motives, then talking about the meaning of human as a small part of this infinite collection is meaningless (Cottingham 2004). Studying the philosophy of the creation makes one notice that the wisdom behind his own creation is linked to the wisdom behind the creation of the entire world; this experience ultimately leads to the creation of meaning in life (AliZamani 2007). In Jaberri et al.'s (2017) concept analysis, the importance of this relationship has not been addressed, and it has only been mentioned there (Jaberri et al. 2017). Further studies are recommended to further investigate the connection between the human and the world.

Based on the definition provided in this study, finding meaning in life is an attribute of spiritual health. Fisher and Reed, however, did not consider this concept independently and regarded it instead as a subcategory of connection with the self. They found meaning to be acquired with no external sources and instead stemming from human's determination, selection, and personal commitments. Spirituality is found in this type of life experience regardless of all the external criteria and simply by following one's internal views, emotions, and experiences. The criteria for giving meaning to life stem from human choices and conventional agreements. In contrast, there is a viewpoint holding that meaning is discoverable and creatable and that it has both external and internal dimensions. That is, one can internally enjoy it, feel comfortable with it, and actualize his talents (AliZamani 2007; Heydari et al. 2016). Reed and Fisher believe that meaning is limited to the connection with the self, while the concept analysis performed in the present study showed that meaning is formed through the connection with the self, interconnectedness and connection with the universe and the Superior being or God. It can therefore be concluded that the discussed internal and external dimensions create a more profound and stable meaning that is not alterable with the changes in one's emotions.

Spiritual transcendence is a consequence of spiritual health that implies breaking the barrier of individuality and obtaining a vision beyond one's own (Pesut et al. 2008). Some experts define spirituality in opposition to ego. As one moves toward a higher form of spirituality and takes a step further than the ego trap, one experiences fewer emotional fluctuations and negative emotions and instead experiences more peace, happiness, vitality, and satisfaction (with the consequences of spiritual health) in his relations and life. In fact, selfishness is the opposite of spiritual health (Emmons 2000). From a phenomenological perspective, people of different faith traditions who have experiences of spiritual transcendence often report a greater sense of unity with the world, an increasing sense of connection with the ultimate truth and at the same time exhibit a diminished sense of self (Johnstone et al. 2016). It is worth noting that spiritual transcendence is associated with humans' spirit while transcendence as self-actualization is associated with mental health. These two concepts should therefore not be considered the same. According to the self-transcendence theory by Reed, self-transcendence is meant to expand one's frontiers and make him aware of dimensions beyond the self. Reed found self-transcendence to affect spiritual health (Reed 2008), while the present study identified spiritual transcendence as a consequence of spiritual health. Spiritual transcendence is also mentioned in nursing theories. According to Watson's theory of human caring, transcendence forms the basis of the perceptions and efforts of the patient, their family, and the nurses regarding self-awareness and healing (Watson 2011). Transcendence is also regarded in Newman's theory as a time and place beyond disease and as enhancing consciousness. In other words, transcendence causes the growth and actualization of human's potential talents, thoughts, and feelings (Reed 1996). Nursing theories also seem to identify transcendence as an effective factor for both spiritual health and its outcome; in other words, transcendence

affects the power to cope with and adapt to problems, and problems themselves are thus taken to cause the evolution of meaning in life and thereby transcendence.

This component of spiritual health is one of the differences between the present analysis and Jaber et al.'s analysis. Jaber et al. (2017) have referred to transcendence as one of the features of spiritual health. What authors have put forward in the description and definition of the concept of transcendence is the meaning of life and the relation with the Transcendent being. While these items, independently of transcendence, are among the features of spiritual health. In the present study, transcendence is the ultimate outcome of spiritual health. In other words, when one manages to establish a clever relationship with God and others and the universe and, then, manages to create the meaning of his/her life, he or she will reach spiritual transcendence. In fact, transcendence is the product of the becoming process. Memaryan et al. (2016) in analyzing the concept of spiritual health in the Islamic perspective, expressed the closeness to God is the ultimate manifestation of transcendence. McSherry points out "It transcends intellectual capability, elevating the status of all of humanity to that of the sacred (McSherry and Jamieson 2013).

The most important attribute of spiritual health therefore seems to be the successful attainment of meaning in life and connection with the Transcendent being, which is manifested in their own special ways according to different researchers. There is still no consensus on whether this transcendence is the attribute or the consequence of spiritual health. If the connection with the Superior being and the meaningfulness of life are considered the attributes of spiritual health, then spiritual transcendence can be regarded as its consequence, i.e., life events cause transcendence in life. The many different theories and definitions proposed by researchers on the effects of the connection with the Superior being on the other dimensions of existence necessitate further research. Overall, spiritual health needs to be more clearly defined within the following domains:

(1) Is human's connection with himself and with others based on his own experiences or based on the guidance of the Superior being? How can we ensure that human's experiences lack negative effects and provide people with meaningful life? (2) How does the concept of spiritual health change in life based on human's experiences? Are life experiences formed necessarily in line with transcendence or is it the other way around?

The conceptualization and definition of spiritual health contribute to the clinical performance of nurses and the development of the body of nursing knowledge. This concept analysis provides nurses with a subjective image of the concept of spiritual health that plays an important role in the nursing process with regard to the perception of phenomena. This is associated a rational, organized, and easy understanding of the concept (Ridner 2004). In addition, with the achievement of a relative agreement on the definition of spiritual health by considering the commonalities of the components of this concept in various analyses, nurses will have the same understanding in the applications of this concept in different sections of care (Walker and Avant 2011).

Nurses must be able to evaluate the spiritual health of their clients, and this is not only necessary to maximize their health but also required to maintain professional integrity (McBrien 2006). Using the features and antecedents appeared in this conceptual analysis, nurses can evaluate the spiritual health of their clients and help them create positive outcome by providing appropriate situations (Como 2007).

Newman acknowledges that "the spirit empowers the client system toward well-being by positively directing spiritual energy for use by the mind and then by the body." Therefore, nurses must be able to understand the concept of spiritual health firstly and can evaluate the patient secondly in order to help him/her reach the system balance (Lowry

2012). This concept analysis helps nurses get a common understanding of this concept and can assess their client.

Spiritual health is affected by the knowledge and worldview of the society and is also influenced by different religions and cultural conditions because each culture defines spiritual health from its own point of view (Ramezani et al. 2016). The definition of spiritual health pertains to the spiritual values, norms, and doctrines that govern the society. Moreover, the needs of healthy and ill clients, as unique individuals, are heavily influenced by their cultural beliefs (René et al. 2007). Therefore, it is crucial to consider the culture and religion of individuals in the assessment of spiritual health.

Based on the results of this study and with regard to common issues in different worldviews about the concept of spiritual health, health systems, and health-care providers can succeed in the design of more appropriate spiritual interventions with new approaches in the domains of education, policy-planning, care, and research.

This conceptual framework presented a subjective image and structure of the definition of this phenomenon, its components, and the relationship between the characteristics of the concept of spiritual health, which was displayed in the form of a model. In this model, the relationship between all the components of spiritual health in three paradigms has been shown.

Limitations

This article does not discuss spiritual distress, spiritual challenges, and what spiritual health is *not*—each of which can be the subject of a whole other research.

Despite accurately decoding many dimensions of spiritual health, the literature existing on these subjects seems to need further scientific studies into other new dimensions of the concept. Moreover, given that this concept is defined in the context of culture and religion, different communities necessitate their own distinct studies so that a broader view of the subject is obtained and so that spiritual care can be provided more effectively and properly with this comprehensive definition.

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Compliance with Ethical Standards

Conflict of interest The authors declare that they have no conflict of interest.

Ethical Approval This article does not contain any studies with human participants or animals performed by any of the authors.

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