Spiritual Wellbeing Among Elderly

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Abstract:

Background:

Spiritual well-being is a key dimension of psychological and social health in later life, reflecting individuals' values, beliefs, and search for meaning. It has been linked to quality of life and resilience among older adults.

Objective:

This study aimed to assess the level of spiritual well-being among elderly individuals residing in Harisiddhi-28, Lalitpur Metropolitan City, Nepal.

Methods:

A cross-sectional descriptive study was conducted among 72 purposively selected elderly participants. Data were collected using a structured interview schedule, ensuring validity, reliability, and ethical compliance. Statistical analysis was performed using SPSS version 16, applying descriptive and inferential methods.

Results

The mean age of respondents was 73 ± 4.3 years, with a majority being female (69.4%). Most participants (68.1%) reported unsatisfactory to moderate levels of spiritual well-being, while 23.6% demonstrated high levels. A statistically significant association was observed between spiritual well-being and religion (p = 0.010), highlighting the role of religious affiliation in shaping spiritual health among the elderly.

Conclusion:

Spiritual well-being among older adults in the study area was generally moderate, and religious factors were significantly associated with outcomes. Interventions to promote spiritual health may contribute to improved quality of life in old age

Key Word: Awareness, Spiritual, Wellbeing, Elderly

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I. Introduction

Spiritual well-being (SWB) is increasingly recognized as a vital dimension of overall health, complementing the physical, psychological, and social domains. It reflects personal beliefs, values, and the search for meaning and purpose in life, encompassing one's relationship with self, others, and a higher power (1). At its foundation, spirituality provides individuals with a sense of meaning, belonging, and resilience in times of difficulty. For older adults, SWB serves as a powerful coping mechanism in the face of illness, stress, and loss, enabling acceptance and inner peace during life transitions (2).

Healthy aging requires more than medical care—it involves psychosocial adaptation and engagement with life. In this context, SWB has emerged as an important determinant of psychological resilience and quality of life (5,6). Elderly individuals with strong SWB demonstrate better adaptation to chronic illness, lower psychological distress, and improved self-rated health (7). Religious and spiritual practices such as prayer, meditation, worship, and participation in faith communities provide not only spiritual comfort but also protection against depression and anxiety (8,9). Recognizing its importance, the World Health Organization (WHO) has acknowledged spirituality as a dimension of health that enhances resistance to stress and illness (10).

The influence of SWB, however, may vary across cultures. While most studies demonstrate its positive role in reducing psychological distress, some findings, such as those from Iran, suggest differing outcomes due to cultural interpretations of spirituality (10). Nepal provides a unique context for exploring this relationship. As a predominantly Hindu country with deeply rooted spiritual traditions, daily practices such as prayer, fasting, pilgrimage, and devotional music play an integral role in the lives of elderly people. These practices are thought to foster peace, hope, and resilience, contributing positively to well-being (11,12).

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In conclusion, spiritual well-being is a critical aspect of healthy aging, helping older adults adapt to physical, psychological, and social challenges. Exploring SWB in the Nepalese cultural context offers valuable insights into holistic approaches for improving the quality of life among the elderly. (10)

II. Material And Methods

The study was conducted in Harisiddhi-28, Lalitpur Metropolitan City, Bagmati Province of Nepal. The setting was accessible and appropriate for the researcher as there was availability of elderly people having common religious practices and seemed satisfied. No study had been done in the topic till date in that area; therefore the researcher was interested to choose setting. The study population was elderly people, both male and female of age 68 years and above.

Study Design: A cross-sectional descriptive study design was used to fulfill the objectives of the study.

Study Location: The study was conducted in Harisiddhi-28, Lalitpur Metropolitan City, Bagmati Province of Nepal.

Study Duration: 19th February 2024 to1st March 2024

Sample size: 72 elderly people (68 years and above)

Sample size calculation: The sample size was calculated using Solvin's Formula¹⁵:

The formula for sample size is $n = N/1 + Ne^2$

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Where.
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Total Population (N) = 250 (Source: Ward record) Margin of error (e) = 10% = 0.1Now, $n = N/1+Ne^2$ = $250/1+250 (0.1)^2$

=250/1+2.5

= 250/3

= 71.4

Therefore, the calculated sample size was 72

Subjects & selection method: Non-probability purposive sampling technique was used to select the respondents. Elderly individuals aged 68 years and above, residing permanently in Harisiddhi-28, Lalitpur, and able to respond were included. Those with severe illness or unwilling to participate were excluded. The respondents were identified with the help of local authorities and selected purposively according to the inclusion criteria until the desired sample size was achieved.

Inclusion criteria:

- 1. Elderly people (68years and above)
- 2. Either sex
- 3. Aged- 68 years and above

Exclusion criteria:

- 1. Those elderly who were not willing to participate in the study.
- 2. Those elderly who had hearing and speaking problem.
- 3. Those elderly who were severely ill.
- 4. Those elderly who had problem with understanding language.

Procedure methodology

Permission to conduct the study was obtained from the Research Committee of Alka Hospital Pvt. Ltd. (College) and approval was further taken from the authority of Harisiddhi-28, Lalitpur. The objectives and purpose of the study were clearly explained to each participant before data collection. Participation was voluntary, and respondents had the right to withdraw at any time without providing a reason. Confidentiality and anonymity were maintained, and the collected information was used only for research purposes.

A structured interview schedule was developed on the basis of research objectives and review of literature. The tool was prepared in English, translated into Nepali, and back-translated into English by two

independent translators to ensure consistency. The instrument consisted of three parts: Part I included socio-demographic variables; Part II consisted of the Spiritual Well-Being Scale (SWBS) developed by Paloutzian and Ellison (1982); and Part III included subscales of Religious Well-Being (RWB) and Existential Well-Being (EWB).

The SWBS contained 20 items on a six-point Likert scale (1 = strongly disagree to 6 = strongly agree). Positively worded items (3, 4, 7, 8, 10, 11, 14, 15, 17, 19) were directly scored, while negatively worded items (1, 2, 5, 6, 9, 12, 13, 16, 18) were reverse scored. The total SWB score ranged from 20–120, with 20–40 indicating low well-being, 41–99 moderate well-being, and 100–120 high well-being. RWB was measured by odd-numbered items (range: 10–60), and EWB by even-numbered items (range: 10–60).

Validity of the instrument was ensured through expert consultation, literature review, and advisor feedback, while reliability was tested by pretesting the tool on 10% of the sample at Badegaun-14, Lalitpur. Data were collected using a face-to-face interview method with written consent from participants.

The data were checked for completeness, coded, and analyzed using Statistical Package for Social Science (SPSS) version 16. Descriptive statistics (frequency, percentage, mean, and standard deviation) were used to describe the variables, while inferential statistics (chi-square test) were applied to find associations between selected variables. Findings were presented in appropriate academic tables.

Statistical analysis

The data were analyzed and interpreted according to the objective and nature of the research questions. All completed data were overviewed, checked for the completeness and accuracy. Collected data were coded and analyzed with the help of Statistical Package for Social Science (SPSS) version 16. Collected data were calculated using suitable descriptive statistical methods such as frequency, percentage, mean, and standard deviation. Association between the variables was determined using non-parametric chi square test. The findings were presented in different academic tables.

III. Result

This section deals with data analysis and interpretation of the responses given by respondents. Table 1 represents respondents' background information. Table 2 represents respondents' response on religious well-being. Table 3 represents respondents' response on existential well-being. Table 4 represents respondents' level of religious well-being. Table 5 represents respondents' level of existential well-being. Table 6 represents respondents' level of overall spiritual well-being. Table 7 represents association between selected background variables and level of spiritual well-being.

Table 1 shows 81.9 percent of the respondents were from 68-77 age group. The mean age standard deviation 73± 4.3 years. Likewise, 69.4 percent of the respondents were female. Likewise, 62.5 percent of the respondents were Janajati/Dalit, where 58.3 percent of the respondents were from Hindu/Buddhist religion. Likewise, 73.6 percent of the respondent's educational status was illiterate to primary level. Likewise, 66.7 percent of the respondents were married and 70.8 percent of the respondents were home maker and farmer. Likewise, 68.1 percent of the respondents belong to joint/extended family and 84.7 percent of the respondents' economic status was enough to extra saving where 94.4 percent of the respondents' source of income was old age allowance and pension. Similarly, 90.3 percent of the respondents had family support and 56.9 percent of the respondents were suffering from chronic illness.

Table no 1: Respondents' Information on Background Information

n = 72Variables Frequency(N) Percentage (%) Age* 68-77 years 59 81.9 78 and above 13 18.1 Sex Male 30.6 50 Female 69.4 Ethnicity 2.7 37.5 Brahman/Chhetri 45 62.5 Janjati, Dalit Religion Hindu, Buddhist 42 58.3 30 41.7 Christian Education Informal* 53 73.6 Formal* 19 26.4 Marital status 48 66.7 Married

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| Widow/widower | 24 | 33.3 |
|-----------------------------|----|------|
| Occupation | | |
| Home maker/Farmer | 51 | 70.8 |
| Retired, Business | 21 | 29.2 |
| Family type | | |
| Single | 23 | 31.9 |
| Joint / Extended | 49 | 68.1 |
| Economic status | | |
| Insufficient to spent | 11 | 15.3 |
| Enough to extra saving | 61 | 84.7 |
| Source of income | | |
| Old age allowance/pension | 68 | 94.4 |
| House rent/ Business | 31 | 43.1 |
| Presence of family support | 65 | 90.3 |
| Presence of chronic disease | 41 | 56.9 |

Table 2: shows that, majority (38.9%) of the respondents strongly agreed on God loves and cares and agreed that they felt most fulfilled when in close communion with God. Likewise, 36.1 percent of the respondents moderately agreed on relation with God contribute to sense of well-being. Similarly, 34.7 percent of the respondents strongly agreed on having personally meaningful relationship with God. Furthermore, 33.3 percent of the respondents strongly agreed on that God is concerned about the problems.

Table no:2 Respondents' Responses on Religious Well-Being

n = 72SA MA D MD SD Α Items N (%) N (%) N (%) N (%) N (%) N (%) I don'tfind much satisfaction in 5(6.9 10(13.9) 10(13.9) 17(23.6) 14(19.4 16(22.2) private prayer with God 28(38.9) 23(31.4) I believethat God loves me and 19(26.4) 1(1.4) 1(1.4) cares about me. 8(11.1) I believe that God is impersonal 5(6.9) 19(26.4) 14(19.4) 21(29.2) 5(6.9) and not interested in my daily situations. I have a personally meaningful 25(34.7) 16(22.2) 25(34.7) 1(1.4) 1(1.4) 4(5.6) relationship with God. I don't get much personal strength 2(2.8) 9(12.5) 10(13.9) 23(31.9) 6(8.3) 22(30.6) and support from my God 24(33.3) 19(26.4) 16(22.2) I believe that God is concerned 4(5.6) 3(4.2) 6(8.3) about my problems I don't have a personally satisfying 3(4.2) 8(11.1) 10(13.9) 19(26.4) 11(15.3) 21(29.2) relationship with God. My relationship with God helps me 23(31.9) 23(31.9 19(26.4) 3(4.2) 2(2.8) 2(2.8) not to feel lonely. I feel most fulfilled when I'm in 19(26.4) 20(27.8) 28(38.9) 1(1.4) 3(4.2) 1(1.4) close communion with God My relation with God contributes 15(20.8) 26(36.1) 17(23.6) 2(2.8) 5(6.9) 7(9.7) to my sense of well-being

SA=Strongly Agree MA=Moderately Agree A=Agree D=Disagree MD=Moderately Disagree SD=Strongly Disagree

Table 3 shows that, majority (38.9%) of the respondents agreed on very fulfilled and satisfied with life and also agreed on life is full of conflict and unhappiness. Likewise, 37.5 percent of the respondents agreed on feeling good about future. Similarly, 36.1 percent of the respondents strongly agreed on life is a positive experience and moderately agreed on feeling a sense of well-being about the direction life is headed in. Furthermore, 34.7 percent of the respondents were agreed on that there is some real purpose for life.

Table no3: Respondents' Responses on Existential Well-Being

| _ | 7 | 1 |
|----|---|---|
| 1= | / | 2 |

| Items | SA | MA | A | D | MD | SD |
|--|----------|----------|----------|----------|----------|----------|
| | N (%) |
| I don't know who I am, where I came from, or where I'm going. | 6(8.3) | 8(11.1) | 18(25) | 17(23) | 6(8.3) | 17(23.6) |
| I feel that life is a positive experience. | 26(36.1) | 18(25) | 22(30.6) | - | 3(4.2) | 3(4.2) |
| I feel unsettled about my future. | 9(12.5) | 6(8.3) | 13(18.1) | 19(26.4) | 18(25) | 7(9.7) |
| I feel very fulfilled and satisfied with life. | 19(26.4) | 20(26.4) | 28(38.9) | 1(1.4) | 3(4.2) | 1(1.4) |
| I feel a sense of well-being about the direction my life is headed in. | 15(20.8) | 26(36.1) | 17(23.6) | 2(2.8) | 5(6.9) | 7(9.7) |
| I don't enjoy much about life. | 1(1.4) | 9(12.5) | 15(20.8) | 12(16.7) | 21(29.2) | 14(19.4) |
| I feel good about my future. | 20(27.8) | 18(25) | 27(37.5) | 2(2.8) | 1(1.4) | 4(5.6) |
| I feel that life is full of conflict and unhappiness. | 12(16.7) | 7(9.7) | 28(38.9) | 8(11.1) | 8(11.1) | 9(12.5) |
| Life doesn't have much meaning | 3(4.2) | 7(9.7) | 11(15.3) | 22(30.6) | 10(13.9) | 19(26.4) |

SA=Strongly Agree D=Disagree MA=Moderately Agree MD=Moderately Disagree

A=Agree SD=Strongly Disagree

Table 4 shows that, majority (68.1 %) of the respondents' level of religious well-beingwas unsatisfactory relationship with God to moderate sense of religious well-being. Similarly, 31.9 percent of the respondents' level of religious well-being was positive view of one's relationship with God.

Table no:4 Respondents' Level of Religious Well-Being

n=72

| Items | Frequency (N) | Percentage (%) |
|---|---------------|----------------|
| Unsatisfactory relationship with God to Moderate sense of religious well- being(10-49) | 49 | 68.1 |
| Positive view of one's relationship with God (50-60) | 23 | 31.9 |

Total score =60

Table 5 shows that, majority (82 %) of the respondents' level of existential well-being was low satisfaction with one's life to moderate level of life's satisfaction and purpose. Similarly, 18 percent of the respondents' level of existential well-being was high level of life satisfaction with one's life and a clear sense of purpose.

Table no 5: Respondents' Level of Existential Well-Being

n = 72

| Items | Frequency (N) | Percentage (%) | |
|--|---------------|----------------|--|
| Low satisfaction with one's life to Moderate level of life satisfaction and purpose(10-49) | 59 | 82 | |
| High level of life satisfaction with one's life and a clear sense of purpose (50-60) | 13 | 18 | |

 $Total\ score = 60$

Table 6 shows that, majority (76.4 %) of the respondents' level of overall spiritual well-being was low to moderate. Similarly, 23.6 percent of the respondents' level of overall spiritual well-being was high.

Table no:6 Respondents' Level of Overall Spiritual Well-Being

n=72

| Items | Frequency (N) | Percentage (%) |
|---|---------------|----------------|
| Low overall spiritual well-being to Moderate spiritual well-being (20-99) | 55 | 76.4 |
| High spiritual well-being (100-120) | 17 | 23.6 |

Total score=120

Table 7 shows that there was no significant association between selected background variable; age, sex, marital status, family type, economic status, family support, chronic disease and level of anxiety. Whereas, there was significant association between religion and level of spiritual well-being as chi-square is 0.01, p value is 0.01, df is 1

Table no: 7 Association between Selected Background Variables and Level of Spiritual Well-Being

1=72

| Variables | Low overall spiritual well-being to moderate spiritual well-being | High spiritual well-being | χ2 | df | <i>p</i> -value |
|------------------------|---|------------------------------|-------|----|-----------------|
| Age | | | | | |
| 68-77 years | 44 | 15 | 0.72 | 1 | 0.35 |
| >78 years | 11 | 2 | | | |
| Sex | | | | | |
| Male | 15 | 7 | 0.36 | 1 | 0.21 |
| Female | 40 | 10 | | | |
| Religion | | | | | |
| Hindu, Buddhist | 36 | 5 | 0.01* | 1 | 0.01* |
| Christian | 19 | 12 | | | |
| Marital status | | | | | |
| Married | 34 | 14 | 0.14 | 1 | 0.09 |
| Widow/widower | 21 | 3 | | | |
| Familytype | | | | | |
| Single | 16 | 7 | 0.38 | 1 | 0.25 |
| Joint/extended | 39 | 10 | | | |
| Economic status | | | | | |
| Insufficient to spent | 8 | 14 | 0.71 | 1 | 0.51 |
| Enough to extra saving | 47 | 3 | | | |
| Presence of Family | 49 | 16 | 1.00 | 1 | 0.47 |
| support | | | | | |
| Presence of Chronic | 32 | 9 | 0.78 | 1 | 0.45 |
| disease | | | | | |
| | | | | | |

^{*}Significant at < 0.05

IV. Discussion

Background Variables

The present studies showed that, majority (81.9%) of the respondents were from 68-77 age groups. Here, mean age \pm standard deviation $73\pm$ 4.3 years minimum age 68 years and maximum 86 years. Likewise, 69.4 percent of the respondents were female. Likewise, 62.5 percent of the respondents were Janajati and Dalit, where 58.3 percent of the respondents were from Hindu and Buddhist religion. Similarly, 73.6 percent of the respondents' educational status was illiterate to primary level. In addition, more than half (66.7%) of the respondents were married and 70.8 percent of the respondents were home maker and farmer. Similarly, 68.1 percent of the respondents belong to joint and extended family and 84.7 percent of the respondents' economic status was enough to extra saving where, majority (94.4%) of the respondents' source of income was old age allowance and pension. Furthermore, 90.3 percent of the respondents had family support and 56.9 percent of the respondents were suffering from chronic illness.

Discussion on Respondents' Level of Spiritual Well-Being

Present study showed that, majority (76.4%) of the respondents had low overall spiritual well-being to moderate spiritual well-being which is supported by the study done in Iran, according to which all participants scored moderately on spiritual well-being. ²²Likewise, study done in Jordan revealed that the majority of the participants were found to have low level of spiritual well-being. ²⁶

Similarly, present study showed that 23.6percent of the respondents had high spiritual well-being which is supported by the study done in Tamilnadu, India revealed that more than half (53%) of the elderly showed extremely high level of spiritual beliefs. Likewise, study done in Zahedan revealed that majority of the participants (94%) had moderate or high-level spiritual well-being.²⁵

Discussion on association between Selected Background Variables and Level of Spiritual Well-Being

The present study showed, selected background variables like age had no significant association with spiritual well-being where p value 0.355, which was significant at p value <0.05 that is in contrast to another study which showed age had significant association with spiritual well-being.⁷ Likewise, the present study showed sex had no significant association with spiritual well-being where p value 0.214, which was significant at p value <0.05 that is in contrast to another study which showed sex had significant association with spiritual well-being.²²

Moreover, according to present study religion had significant association with spiritual well-being where p value 0.010, which was significant at p value <0.05 that is similar to another study which showed religion had significant association with spiritual well-being. ²⁶ Likewise, the present study showed marital status had no significant association with spiritual well-being where p value 0.099, which was significant at p value < 0.05 that is in contrast to previous study which showed marital status had significant association with spiritual well-being.²⁵

Furthermore, according to present study family type had no significant association with spiritual wellbeing where p value 0.259, which was significant at p value <0.05 which is in contrast to another study which showed family type had significant association with spiritual well-being.³¹

Likewise, present study showed economic status had no significant association with spiritual wellbeing where p value 0.510 respectively, which was significant at p value <0.05 which is in contrast to another study which showed economic status had significant association with spiritual well-being.³²

Similarly, present study showed presence of family support had no significant association with spiritual well-being where p value 0.472, which was significant at p value < 0.05 which is in contrast to another study which showed family support had significant association with spiritual well-being.³¹

Additionally, present study showed presence of chronic disease had no significant association with spiritual well-being where p value 0.457, which was significant at p value < 0.05 which is in contrast to another study which showed chronic disease had significant association with spiritual well-being. 16

Conclusion

The present study concluded that nearly three-fourths of the respondents had a moderate level of spiritual well-being. A significant association was found between spiritual well-being and religion.

Based on the findings, it is recommended that similar studies be conducted on a larger population to enhance generalizability. Further research among other groups, such as middle-aged adults who face dual responsibilities toward children and parents, may provide valuable insights, particularly in relation to anxiety and spiritual health.

In addition, periodic community-based religious and spiritual programs may be beneficial for promoting the overall well-being of the elderly, given the observed association between spirituality and religion.

The study was limited to a small population within one community, which may restrict the wider applicability of the results.

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