REVIEW ARTICLE

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The Application of Mary White's Spiritual Self-Care Model on Health Behaviors: A Review Study

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Abstract

Introduction: Mary White's theory of spiritual self-care is derived from Orem's theory. This theory defines spiritual self-care as a set of practices based on spirituality that are defined in order to promote recovery and health. Therefore, since spirituality is considered one of the pillars of nursing care, this study was conducted with the aim of applying Mary White's model of spiritual self-care on health behaviors. **Methods:** This review study examined articles related to the self-care pattern based on the keywords of spiritual self-care, spirituality, and Mary White's self-care theory within the time frame of 2010 to 2025. 17 articles were thoroughly reviewed. **Results:** The results demonstrated the effectiveness of the spiritual self-care model on psychological variables such as resilience, care burden, self-efficacy, anxiety and physiological variables such as sleep quality, insomnia severity, and diabetes complications control. **Discussion:** Spiritual self-care is an important dimension of physical, mental, and social health that can help reduce stress, improve quality of life, and strengthen the immune system. Based on the available findings, it is recommended that individuals and health professionals pay more attention to this dimension of self-care and provide practical strategies to improve it.

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Introduction

Nursing theories have always played an important role in the development of nursing science (1). Most nursing theories are considered as a document and guide for nurses in providing clinical care (2). Since spirituality is an important part of nursing care. The focus of several major nursing theories, including Parse, Neuman, Watson, and Orem, is on this concept (3). Accordingly, Mary White's theory of spiritual self-care complements Orem's theory (4). Therefore, Mary White's theory of spiritual self-care is derived from Orem's theory (5). This theory defines spiritual self-care as a set of practices based on spirituality that are defined in order to promote healing and health (6). Orem stated in 2001 that people's spiritual experiences such as happiness, pleasure, and satisfaction with life are considered part of spiritual self-care (3).

Spiritual self-care activities include listening to inspirational music, meditation, yoga, attending religious services, reading sacred texts, walking, and enjoying nature (7, 8). Spiritual self-care is based on the connection of a person's mind, spirit, and body,

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upbringing, ethical and religious background, and life experiences that result from faith, feelings, and emotions (4). Examples of spiritual self-care activities include building social networks or volunteering, listening to inspirational music, meditation, and creating a sense of inner peace and comfort (7). In fact, their ultimate goal of spiritual self-care activities is to promote physical, spiritual, and health well-being (5). Spiritual self-care is the most important form of self-care. It is an act in which a person uses their spiritual beliefs and teachings as a source of behavioral control. With its help, they maintain their health (4). Spiritual self-care is a patient-centered and family-centered health model that resolves patients' internal disturbances, pains, and problems (9). Spiritual self-care as an internal supportive attribute in the nursing profession can play an important role in stress control, increasing resilience, and strengthening cognitive skills (4). It is necessary to pay attention to health behaviors, cultural beliefs, and lifestyles such as eating habits and physical activities in self-care behaviors (10). Mary White's theoretical framework of spiritual self-care is based on attention to the individual dimension, interpersonal relationships, spiritual actions, and beliefs.

Numerous studies have demonstrated the impact of spiritual self-care on reducing depression (11), improving sleep quality (12), increasing quality of life (13), promoting comfort and well-being (14), alleviating caregiving burden (15), and fostering resilience (16). Spiritual self-care is influenced by the culture, values of each ethnic group and region, which nurses, by identifying the beliefs and values of each culture, provide education for individuals (17). Accordingly, spiritual self-care education should be based on cultural differences, and religious, family, eating habits, health behaviors, and privacy of individuals should be considered (18). Spiritual self-care considers the nurse's positive physical, mental, and spiritual actions that help promote the nurse's resilience and health and well-being in response to stress in the system or life (19). Since spirituality is an important part of nursing care (3), nurses, as professionals in the health team, are directly involved in the health of individuals in the community. Using these patterns and nursing theories will play a very important role in improving the quality of nursing care (4, 20, 21). Mary White's spiritual self-care model, as one of the methods of complementary medicine, can have an effective impact on nursing care (22, 23). Therefore, since no review study has been conducted on the application of Mary White's self-care model so far. This study was conducted with a systematic approach to investigate the application of Mary White's spiritual self-care model on nursing care.

Method

This review article was conducted based on articles published under the title of Mary White's spiritual self-care model from 2011 to 2025, as well as articles related to spiritual self-care from 2000 to 2025.

Literature searches were conducted using the following databases: PubMed, Google Scholar, Scopus, ScienceDirect, and ProQuest. Search terms were based on the Medical Subject Headings (MeSH) thesaurus and included the terms "spiritual," "spiritual self-care," and "Mary White."

The inclusion criteria for this study were articles related to Mary Whyte's model of spiritual self-care that directly utilized the framework of Mary Whyte's self-care model in the research methodology of published studies. All articles were published in either Persian or English. Self-care articles that were not based on the framework or were based on other models of spiritual care were excluded from this study. In the first step, a search was conducted based on the research questions, resulting in approximately 32 Persian and English articles. In the second step, related studies were identified. After reviewing the titles, the researcher selected 28 articles that were more relevant to the topic of this research. In the third step, after reviewing the abstracts of the articles, 23 articles related to the title were selected. Then, after evaluating the quality of the articles based on the Gifford scale, articles that met the necessary quality conditions were selected. At this stage, 20 articles were fully reviewed, and 17 articles were directly related to the research title. In the fourth step, the information obtained from these 17 related articles was summarized. In the fifth step, the findings were reported in this article (Box 1). All articles studied were entered into Endnote statistical software before being summarized. In terms of research ethics, the materials used in this article were based on references and in compliance with research ethics.

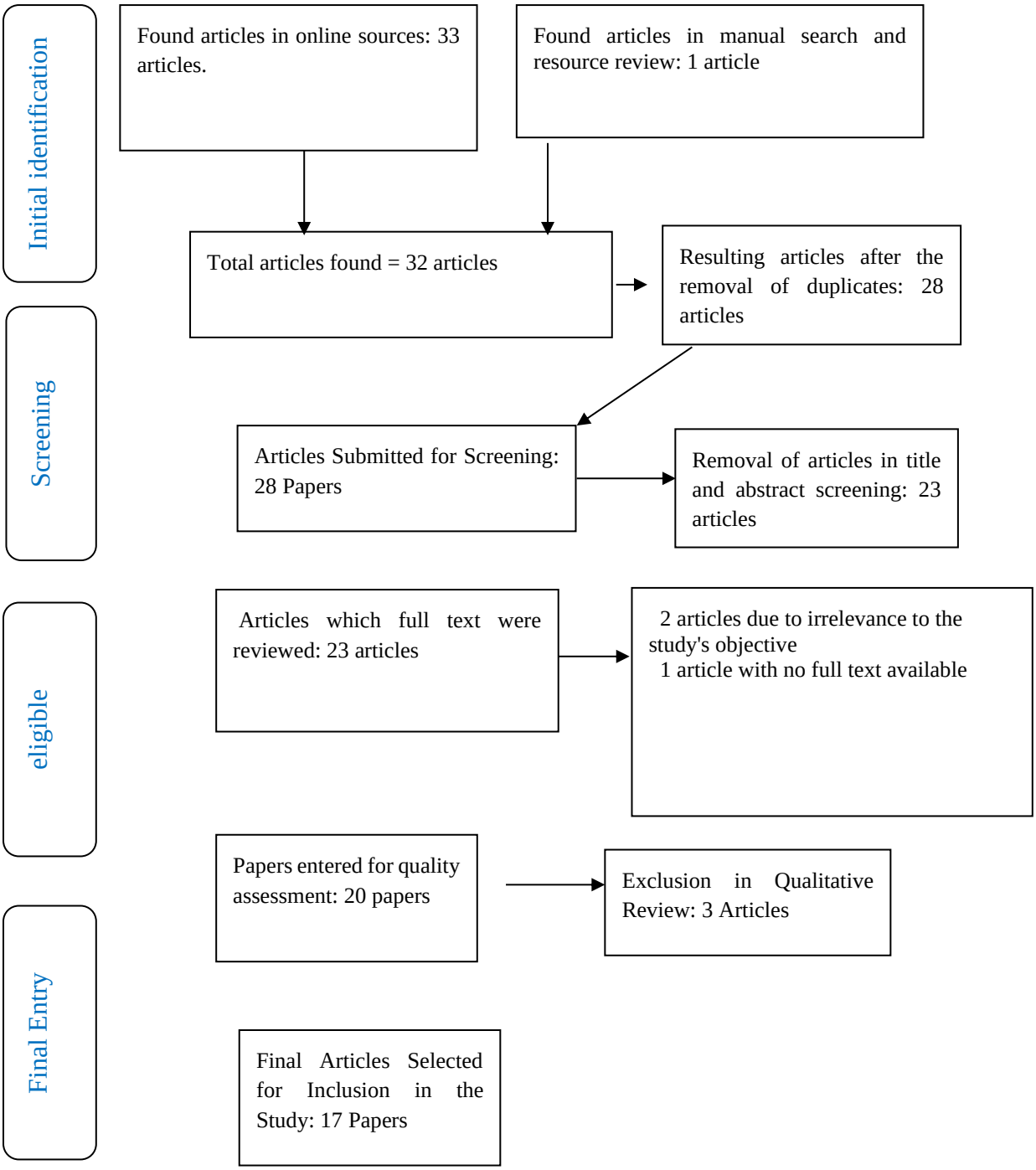
Results

In the results of this research, 17 articles related to the topic of spiritual self-care were examined. The results showed the following.

Mary White et al. (2013): A Study titled "Psychometric Properties of the Spiritual Self-Care Scale" was conducted in African American patients with heart failure. This study completed a questionnaire to 142 African American patients with heart failure to complete the data. Four factors extracted from factor analysis include individual spiritual practices, spiritual practices, spiritual physical practices, and spiritual interpersonal relationships. The results of this study showed that it is reliable and valid for measuring spiritual self-care practices among African Americans with heart failure (5).

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Box (1): Steps of Reviewing Articles on Spiritual Self-Care on Health Behaviors.

In a review study, Mary White et al. (2011) explored spirituality and spiritual self-care: an extension of the nursing theory of self-care deficit. This theory of spiritual self-care is part of Orem's theory of self-care deficit, which emphasizes the importance of the role of spirituality. According to this theory, understanding interpersonal relationships and believing in a higher source leads to inner cohesion, which acts as a protective shield against hardships and crises (24).

In a letter to the editor, Bell (2011) introduced the concept of spiritual self-care derived from Orem's grand theory of self-care. Spiritual self-care is defined as a set of practices that promote happiness, feelings of pleasure, and life satisfaction (3).

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Rezaei Aghuei (2024) conducted an experimental study entitled "The Pattern of Spiritual Self-Care on Care Burden in Spouses of Veterans" on 30 individuals using a simple random method in two groups of 15 intervention and 15 controls. In the intervention group, the training program was implemented based on the spiritual self-care model and emphasis on interpersonal relationships, spiritual practices, individual spiritual practices, and physical spiritual practices in 6 training sessions. The results of the covariance test, after removing the effect of the pre-test, showed a significant difference (P = 0.007, Eta = 0.24). In a way that 24% of the changes in the reduced care burden can be related to spiritual self-care (6).

In a qualitative study titled "Experiences of Spiritual Self-Care in Adolescents," Hekmatipour (2021) conducted interviews with 14 adolescents, employing a content analysis approach. The data analysis yielded 252 initial codes related to adolescents' spiritual experiences. These codes were then categorized into 5 main themes (self-control, seeking help from God, divine proximity, performing religious duties, and personal activities) and 16 sub-themes. The experiences of spiritual self-care, encompassing the sub-themes of religious duties, personal activities, self-control, seeking help from God, and divine proximity, led to a closer connection with God, increased resilience in the face of difficulties, and improved mental well-being among adolescents. Furthermore, the adolescents reported that engaging in spiritual activities prevented them from being drawn to high-risk behaviors (25).

In a 2021 study, Dalir investigated the effect of spiritual self-care education on the care burden of mothers of hospitalized children. This quasi-experimental study was conducted on 60 mothers using a non-random sampling method. The intervention group received four training sessions based on the spiritual self-care model. Statistical tests showed a significant difference between the intervention and control groups (P<0.01). The care burden was lower in the intervention group than in the control group. Based on the results of this study, the spiritual self-care model is an efficient and effective educational and care method in the care of patients. It will play an important role in increasing the quality of nursing care (26).

In a 2023 study, Mirzaeian investigated the effect of Mary White's spiritual self-care education on Corona anxiety using a quasi-experimental design. The study involved 60 participants divided into intervention and control groups through non-random sampling. A significant difference was observed between the two groups, indicating the effectiveness of spiritual self-care education in reducing anxiety (4).

Hekmati Pour (2020) in a qualitative study with a Mary White spiritual self-care pattern approach with interviews of 14 adolescents showed the concept of spiritual self-care4 main aspects (spiritual belief, spiritual experience, social-religious activities and spiritual growth) (27).

Rezaei Aghuei (2024) showed in an experimental study entitled Spiritual Self-Care Model on Self-Efficacy and Resilience of Spouses of Veterans. There is a significant difference between the experimental and control groups. Education based on the Mary White self-care model increases self-efficacy and increases resilience in the spouses of veterans (16, 28).

Hashemzadeh (2020) conducted an experimental study entitled "The Effect of Spiritual Self-Care Training on the Caregiver Burden of Mothers of Infants Admitted to the Neonatal Respiratory Intensive Care Unit of Sari City Hospitals" on 64 mothers and their infants admitted to the unit. The study was based on Mary White's model of spiritual self-care. The mean caregiver burden before the intervention in the intervention and control groups was 65.46 ± 4.51 and 62.68 ± 7.29, respectively, which did not show a significant difference (P = 0.07). The mean caregiver burden after the intervention was 43.47 ± 6.47 and 60.59 ± 6.73, respectively, which showed a significant difference (P < 0.01). The results of this study showed that spiritual self-care training reduces the caregiver burden of mothers (15).

Valipour Eskandarkolaii (2023) conducted an experimental study entitled "A Spiritual Self-Care Model on the Quality and Severity of Sleep in Diabetic Children" using a simple random sampling method in the intervention and control groups. The analysis of covariance in both variables showed a significant difference. It showed the effectiveness of the Mary White Spiritual Self-Care Model on the quality and severity of insomnia in diabetic adolescents (12, 23).

In an experimental study entitled "The Effect of Mary White's Spiritual Self-Care Model on the Anxiety of Mothers of Hospitalized Children" by Heydarpoor (2022), 64 mothers were randomly assigned to two groups: an intervention group and a control group. The statistical test between the two groups showed a significant difference (P < 0.01). The anxiety level in the intervention group was lower than that in the control group (29).

Discussion

The study revealed that the most frequent application of the spiritual self-care model was on the components of pain, suffering, resilience, anxiety, and improved sleep quality and severity of insomnia. Given that spirituality plays a significant role in life expectancy in patients and individuals experiencing severe life crises (30), spiritual beliefs act as a protective shield in stressful situations, which are the consequences of spiritual self-care, resilience, and adaptation (31).

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Table (2) Articles related to the impact of Mary White's spiritual self-care model on health behaviors.

Number	Author (year)	Setting	Study type	Sample size and study	Results
1	Heydarpoor(2022)	Iran	Experimental	64 mothers of infants hospitalized in the neonatal ward	Mary White's self-care model reduces anxiety in mothers of hospitalized infants
2	Rezaei Aghuei(2024)	Iran	Experimental	The Wives of 30 War Veterans Suffer from Post-traumatic Stress Disorder	A model of spiritual self-care leads to increased self-efficacy in spouses of veterans
3	Hekmati Pour(2020)	Iran	Qualitative	14 Adolescents	This study identified four main aspects of spiritual self-care (spiritual belief, spiritual experience, socio-religious activities, and spiritual growth)
4	Dalir(2020)	Iran	quasi-experimental	60 hospitalized children's mothers	A spiritual self-care pattern reduced the care burden in mothers of hospitalized children.
5	Mirzaian(2023)	Iran	quasi-experimental	60 students	A spiritual self-care pattern reduces anxiety in nursing students.
6	Rezaei Aghuei(2024)	Iran	Experimental	30 Spouses of Veterans with Post-traumatic Stress Disorder	A spiritual self-care model reduces the burden of caregiving for spouses of veterans.
7	Keykha(2024)	Iran	Experimental	70 diabetic patients	A spiritual self-care pattern leads to the management of diabetes complications.
8	Hashemzadeh(2020)	Iran	Experimental	64 hospitalized mothers of newborns	A spiritual self-care pattern reduces caregiving burden.
9	Valipour Eskandarkolaii(2023)	Iran	Experimental	66 adolescents with diabetes	Spiritual self-care patterns reduce insomnia in adolescents
10	Valipour Eskandarkolaii(2023)	Iran	Experimental	66 adolescents with diabetes	A spiritual self-care pattern increases the quality of sleep in adolescents.
11	Somayeh Hashemzadeh(2023)	Iran	Experimental	64 mothers of hospitalized infants	A spiritual self-care model reduces anxiety in mothers.
12	Yazarloo(2023)	Iran	Experimental	64 Mothers of infants hospitalized in the neonatal ward	Mary White's self-care model reduces stress in mothers of hospitalized infants
13	White(2013)	America	Psychometric	142 African American heart patients	The four factors extracted from the factor analysis are (personal spiritual practices, spiritual practices, spiritual physical practices, and spiritual interpersonal relationships).
14	White(2011)	America	Review	Library	Interpersonal relationships are an element of the theory of spiritual self-care that create inner cohesion in individuals.
15	Bell(2011)	America	Letter to the Editor	Review	Spiritual self-care is a part of Orem's self-care theory, which emphasizes satisfaction, pleasure, happiness, and spiritual experiences.
16	Hekmatipour(2021)	Iran	Qualitative	A content analysis approach on 14 adolescents aged 14–20.	Experiences of spiritual self-care, or practices of spiritual self-care, included the subcategories of religious duties, personal activities, self-control, seeking help from God, and divine closeness.
17	Rezaei Aghuei(2024)	Iran	Experimental	30 Veteran Wives	A spiritual self-care pattern leads to adjustment and increases resilience in the spouses of veterans.

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Spiritual self-care can have many effects on individuals' mental and physical health (22). Numerous studies have shown that caring for the spiritual dimensions of a person can help reduce stress, anxiety, and depression and improve individuals' quality of life (3, 6). Additionally, spiritual activities can help individuals feel more hopeful and purposeful in difficult times in their lives (10). Spiritual beliefs influence health habits and behaviors and are associated with a sense of well-being in individuals. Spirituality protects individuals against negative thoughts and helps them cope with stressors (4, 26). Belief in God and a higher power affects stress reduction (32). Establishing a spiritual connection with an infinite power gives a person the assurance that a strong force is always supporting them, and these individuals can more easily overcome events by relying on their faith and belief; they experience less stress and anxiety, and as a result, their expectations of the future will be more hopeful and optimistic (33, 34). Spiritual self-care is a vital component of overall human well-being that has received significant attention in the modern world. Given the complexities of life and daily challenges, attending to spiritual dimensions can help individuals achieve mental, physical, and social balance (35, 36). Ultimately, spiritual self-care should be recognized as a key tool in promoting quality of life and public health (4). Since Mary White's model of spiritual self-care emphasizes the importance of attending to the spiritual dimension in human life and shows that caring for the soul and psyche is as important as caring for the body. This model can be effective guidance for improving the quality of life and increasing the overall health of individuals (11, 24).

Given the significant role of models and theories in enhancing the quality of nursing care (37, 38), the utilization of a spiritual self-care model plays a crucial role in improving nursing skills. A limitation of this research was that the majority of published articles concerning the impact of spirituality on health lacked a standard framework and theory. Many of them addressed a general concept. Therefore, the impact of Mary White's spiritual self-care model has not been extensively studied. Consequently, it is recommended that this effective and low-cost care model be applied to a wider range of variables and also to more vulnerable groups.

Conclusion

Spiritual self-care is an important aspect of physical, mental, and social health that can help reduce stress, improve quality of life, and strengthen the immune system. According to the existing findings, it is recommended that individuals and health professionals pay more attention to this dimension of self-care and provide practical solutions to promote it. Because spirituality is considered one of the important pillars of self-care, which has a very important role in the adaptation and internal cohesion of individuals.

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Conflict of interest

In this study, no conflict of interest was observed.

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