

AN ISLAMIC-BASED SPIRITUAL PROGRAM TO IMPROVE WORKPLACE HAPPINESS AMONG INPATIENT NURSES IN JEMBER, INDONESIA

Kholid Rosyidi Muhammad Nur^{1*}, Nurfika Asmaningrum¹, Rondhianto Rondhianto¹, Dicky Endrian Kurniawan¹, Orachorn Lumprom²

1. Faculty of Nursing, Universitas Jember, Indonesia
2. Faculty of Nursing, Prince of Songkla University, Thailand

Article Information

Received: 30 April 2025
Revised: 27 October 2025
Accepted: 25 February 2026

*Corresponding Author

Kholid Rosyidi Muhammad Nur
kholidrosyidi.psik@unej.ac.id

DOI

10.20884/1.jks.2026.21.1.15849

ABSTRACT

Happiness at work (HAW) plays a critical role in nurses' performance and their ability to deliver compassionate care, as it affects nurses' motivation, empathy, and caring behavior. However, culturally grounded interventions to improve nurses' happiness, particularly within Islamic spiritual frameworks, remain underexplored. Therefore, this study examined the effect of an Islamic-based spiritual program based on local religious and cultural values on nurses' HAW. This research employed a quasi-experimental design with a non-equivalent control group. The intervention included a structured religious talk on the meaning of life and daily listening to Quranic recitations (murottal) during work for four weeks. The study involved 64 inpatient nurses from hospitals. The participants were assigned to an intervention group (n = 32) and a control group (n = 32). Data were collected using the Shortened HAW questionnaire and analyzed using repeated-measures ANOVA and the Kruskal–Wallis test. The results showed that happiness scores increased significantly in the intervention group (mean difference = 1.53, $p < 0.001$; $\eta^2 = 0.354$). In contrast, the control group showed minimal change. These findings indicate that Islamic-based spiritual programs can effectively enhance nurses' happiness at work and may contribute to nurse retention, strengthen caring values, and improve healthcare quality.

Keywords: *Happiness at work; job satisfaction; local wisdom; nursing; spiritual counseling*



ISSN : 1907-6637

e-ISSN : 2579-9320

BACKGROUND

Ward nurses are expected to demonstrate caring behavior to support their patients' recovery (Alikari et al., 2022; Oluma & Abadiga, 2020). However, high workload due to a greater number of patients and a shortage of nursing staff (Montgomery et al., 2015), long working hours, and inadequate emotional support make it difficult for nurses to consistently provide high-quality care (Alharbi et al., 2016; Babapour et al., 2022; Oldland et al., 2020; Reyes-Rodriguez et al., 2025). A study conducted in a university hospital in southern Brazil showed that inpatient nurses have moderate levels of anxiety (Vega et al., 2023). Another study in Indonesia found that 32.8% of ward nurses experienced severe stress, and 28.1% had a heavy workload (Febrianti et al., 2024). Nurses face challenges such as excessive workload, workplace aggression, inadequate preparation, patient isolation during the epidemic, and resource scarcity.

All of which contribute to considerable emotional and psychological pressure (Afandi et al., 2025; Reyes-Rodriguez et al., 2025).

Studies showed that the high-stress levels of ward nurses can lead to decreased job satisfaction (Alharbi et al., 2016) and workplace happiness (Javanmardnejad et al., 2021), ultimately affecting healthcare quality (Oldland et al., 2020) and patient outcomes (Babapour et al., 2022; Ren et al., 2023). Previous studies have also reported that work-related stress negatively impacts nurses' health and quality of life (Babapour et al., 2022).

Workplace happiness is important because it contributes to an individual's mental well-being, productivity, and resilience under stress (Loreto et al., 2022). It is positively correlated with job performance and caring behavior. Nurses who

experience higher levels of happiness tend to exhibit greater empathy, patience, and motivation in their professional duties (Sharif et al., 2020).

Watson's Theory of Human Caring states that happiness in nursing involves feelings of acceptance, gratitude, and a sense of meaning in one's work, which align closely with the philosophy of caring. According to this theory, authentic caring relationships are strengthened when nurses experience inner harmony, gratitude, and a sense of connection to their purpose. All of these elements can be cultivated through spiritual development (Gunawan et al., 2022; Kurz, 2024).

Various strategies have been implemented to reduce nurses' work stress and enhance work satisfaction, including stress management training programs (Goudarzian et al., 2024), psychological interventions (Browne & Chun Tie, 2024), and improved work facilities (Nielsen et al., 2017). Although these interventions have yielded beneficial results, many nurses still have inadequate spiritual support (Harrad et al., 2019). Given the growing recognition of the importance of spiritual support among health workers, a new approach combining indigenous values with spiritual counseling has emerged. Approaches that help nurses establish a sense of connection to the meaning and purpose of their work promote their spiritual well-being and demonstrate concern for the workforce (Celano et al., 2022). Integrating spirituality into the workplace, particularly through culturally relevant approaches, is a promising yet underexplored avenue for enhancing nurses' well-being.

Workplace spirituality has a positive impact on happiness at work, both directly and indirectly (Nikensari & Yudhistira, 2024). Spiritual growth has been shown to improve mental health and behavior (Božek et al., 2020). Studies have shown that spiritual therapy can help individuals feel more satisfied with their life's purpose (Sun et al., 2024). It can also help people feel less depressed and anxious, as well as improve resilience and well-being (Leung & Li, 2023). In addition, a study among nursing students reported that spirituality positively predicted major satisfaction (Rias et al., 2025). Spirituality can help individuals transform negative ideas and emotions into positive ones, leading to happiness and contentment in any situation, including the workplace. Thus, spiritual counseling has the potential to enhance nurses' work satisfaction and overall happiness.

Cultural context is also a crucial consideration in developing interventions for nurses. Previous studies found that research that considers regional social and cultural norms in the planning and implementation of treatments may be more successful in fostering positive work subjectivity and mental health (Hamka et al., 2022; Porras Velasquez, 2024). Local wisdom rooted in a culture of togetherness and harmonization with the environment has great potential to increase happiness at work (Singh et al., 2023). Previous studies have also shown that Islamic-based positive psychology training effectively enhances nurses' psychological well-being, demonstrating its potential as a valuable approach to fostering positive emotions and caring behaviors in nursing practice (Nurbaeti et al., 2024; Yuliatun & Karyani, 2022). However, few studies explore Islamic-based interventions to enhance nurses' happiness in Indonesia.

In the agrarian culture of Jember, Indonesia, communal religious gatherings (*pengajian*) are deeply rooted in everyday life. This study adapts such local practices into a

structured, evidence-based spiritual counseling program that combines *pengajian* (religious talk) and *murrotal* (Quran recitation) sessions. Previous studies have found that Islamic-based spiritual therapy can improve mental health status (Hamka et al., 2022; Khaledian et al., 2017), which may affect feelings of happiness. Therefore, this faith-based and cultural value moderates work happiness (Daulay et al., 2022; Singh et al., 2023).

One method to increase inpatient nurses' job satisfaction is through spiritual therapy grounded in indigenous wisdom. This method incorporates cultural values relevant to nurses' everyday lives and provides spiritual support. Gratitude, humility, and a sense of community can help nurses cope more effectively with work-related stress (Celano et al., 2022). Research indicates that integrating spiritual support with local values can help individuals discover meaning in their work, ultimately leading to increased happiness and well-being (Božek et al., 2020).

Implementing Islamic-based spiritual counseling grounded in local wisdom may foster gratitude, humility, and a sense of community among nurses. Such values may help mitigate stress and strengthen their caring behavior. Thus, with appropriate interventions, nurses can be more empowered to face the challenges of their jobs, leading to increased job satisfaction and improved healthcare quality. This study examines the impact of an Islamic-based spiritual program grounded in local wisdom on nurses' happiness at work.

METHOD

Design

This is a quasi-experimental study with a non-equivalent control group and repeated measures (pre-test, immediate post-test, post-intervention at 4 weeks). Data collection was conducted from June to August 2024.

Participants

The study population consisted of inpatient nurses at a hospital in Jember, Indonesia. The sample size ($N = 64$; $n = 32$ per group) was determined by a power analysis (Cohen, 1992) to detect medium effects with an α -level of 0.05 and a power of 0.80. Nurses were eligible if they were Muslim, had ≥ 1 year of work experience, and provided their written informed consent. The participants were selected from the hospital nurse roster using simple random sampling. They were then randomly allocated to either the intervention or the control group using sealed-envelope randomization, which was handled by a researcher not involved in the outcome assessment. Assessors who administered questionnaires were blinded to group allocation to reduce detection bias. The exclusion criteria include absence from one or more intervention sessions.

Instruments and data collection

The sociodemographic questionnaire and the 12-item Shortened Happiness at Work (SHAW) were employed in this study (Putri, 2019). The SHAW in this study comprised three domains (job satisfaction, organizational commitment, engagement), with a response range of 12–48. The researchers conducted validity and reliability tests and obtained r values ranging from 0.264 to 0.736 and Cronbach's $\alpha = 0.895$. Data were collected at baseline (pre-test), immediately after the religious talk (immediate post-test), and four weeks after the intervention ended (post-intervention). The researchers administered the questionnaires directly to ensure there was no bias in the data collection process.

Intervention

The independent variable in this study was an Islamic-based spiritual intervention comprising two integrated components: a structured religious talk and the recitation of Quranic verses (murrotal) during work (Figure 1). The religious talk focused on the meaning of life and was delivered in a 60-minute session by a *Ustadz* (muslim spiritual teacher). The session emphasized themes such as gratitude, the role of humans in serving others, and the positive impact of compassion and mutual support in daily life. This component was adapted from the local wisdom tradition known as *pengajian* and structured scientifically to ensure consistency and relevance to the nursing context.

The intervention was grounded theoretically in Watson's Theory of Human Caring, which emphasizes the importance of inner harmony, meaning, and transpersonal relationships in caring practices. It also incorporated elements of positive psychology and the PERMA model (Positive emotion, Engagement, Relationships, Meaning, and

Accomplishment), to strengthen nurses' emotional resilience and sense of purpose (Franco & Christie, 2021; Kurz, 2024; Wei & Watson, 2019). The murrotal playback, which involved listening to Quranic verses for approximately 30 minutes per shift over four weeks, was designed to create a calming and spiritually uplifting work atmosphere that reinforces mindfulness and emotional balance.

To ensure intervention fidelity, standardized materials and procedures were applied across all sessions. *The Ustadz* used a structured script and presentation guide, reviewed by the research team, to ensure content consistency. Attendance was recorded, and an observer completed a fidelity checklist during each session. For the murrotal component, identical audio recordings were played in all participating wards using the same playback schedule and volume level. The control group did not receive any intervention during the study but was offered the same program after the post-intervention assessment to ensure ethical parity.

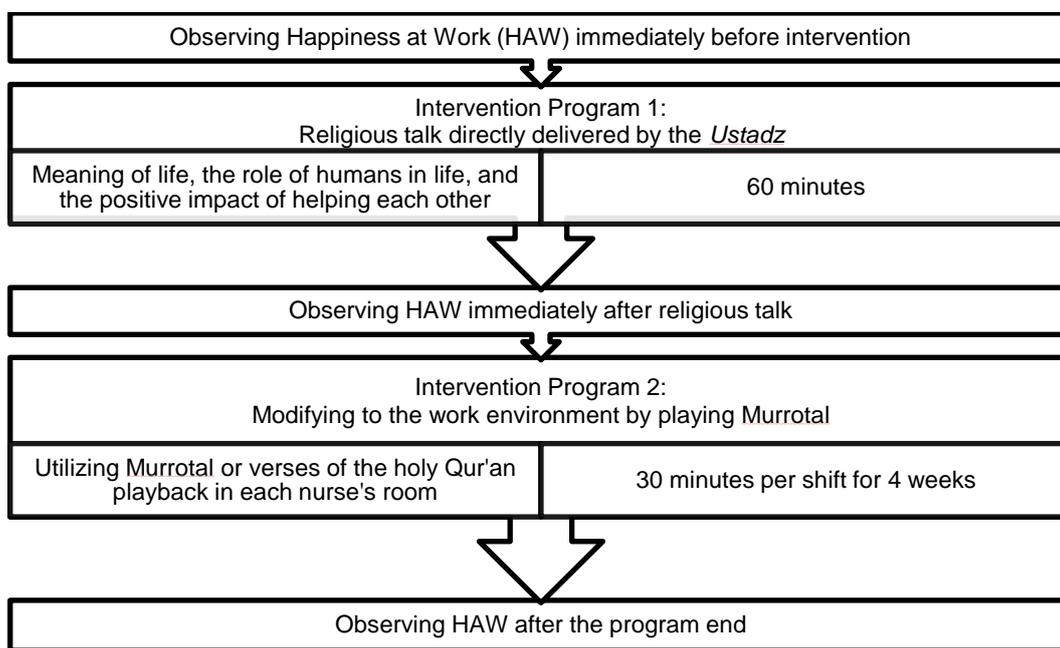


Figure 1. An Islamic-based spiritual program to improve happiness at work among nurses

Statistical analysis

The researchers analyzed the data using SPSS version 26. The nurses' happiness at work was measured based on descriptive statistics, including frequency, percentage, mean, and standard deviation (mean ± SD). For the inferential analysis, a repeated-measures ANOVA was conducted to examine the interaction between time (pre-test, immediate post-test, and post-intervention) and group (intervention versus control). Assumptions of normality (Shapiro–Wilk test), homogeneity of variances (Levene's test), and sphericity (Mauchly's test) were also evaluated. When the sphericity assumption was violated, the Greenhouse–Geisser correction was applied. Post hoc pairwise comparisons were performed using the Bonferroni correction. Effect sizes were reported as partial eta-squared (η^2) for ANOVA. The Kruskal-Wallis test was employed to compare differences in happiness at work scores between the intervention and control groups because the data distribution did not meet the normality assumption. Statistical significance was set at $\alpha = 0.05$. There is no missing data, and no participants were excluded because no one missed any of the intervention sessions.

Ethical declaration

Ethical clearance was obtained from the Ethical Committee of Medical Research Faculty of Dentistry, Universitas Jember (registration number 2561/UN25.8/KEPK/DL/2024). Written informed consent was obtained from all participants. Data confidentiality was maintained.

RESULT

Table 1 shows that the 64 respondents were equally distributed between the intervention and control groups. Most participants were aged 24–34 years (53.1%), female (50%), and married (76.6%). Most have obtained a Diploma 3 in Nursing (54.7%), with nearly half (48.4%) having over 11 years of work experience. A majority of participants were contract/non-ASN employees (54.7%) and earned above the regional minimum wage (57.8%). The majority also served as associate nurses (73.4%). Overall, the participants' characteristics were generally similar.

Table 1. Respondents' characteristics

Characteristics	Respondents' Group				Total (N = 64)	
	Intervention (n = 32)		Control (n = 32)		n	%
	n	%	n	%		
Age (years)						
Young adulthood (17-23)	0	0	2	3.1	2	3.1
Middle age (24-34)	15	23.4	19	29.7	34	53.1
Mature age (35-60)	17	26.6	11	17.2	28	43.8
Sex						
Male	17	26.6	15	23.4	32	50.0
Female	15	23.4	17	26.6	32	50.0
Marital status						
Married	28	43.8	21	32.8	49	76.6
Unmarried	1	1.6	11	17.2	12	18.8
Divorced	3	4.7	0	0	3	4.7
Nursing education level						
Nursing diploma 3	16	25.0	19	29.7	35	54.7
Nursing diploma 4/bachelor of applied	1	1.6	0	0	1	1.6
Bachelor of nursing	2	3.1	3	4.7	5	7.8
Nursing profession	13	20.3	10	15.6	23	35.9
Work experience (year)						
1-5	4	6.3	16	25	20	21.3
5-10	8	12.5	5	7.8	13	20.3
> 11	20	31.3	11	17.2	31	48.4
Employee status						
Permanent/ASN	16	50.0	13	20.3	29	45.3
Contract/non-ASN	16	50.0	19	29.7	35	54.7
Salary						
< minimum regional wage	10	15.6	17	26.6	27	42.2
> minimum regional wage	22	34.4	15	23.4	37	57.8
Nurse's role						
Head of the room	4	6.3	4	6.3	8	12.5
Team leader/primary nurse	2	3.1	7	10.9	9	14.1
Associate nurse	26	40.6	21	32.8	47	73.4
Total	32	50.0	32	50.0	64	100.0

Next, the findings demonstrated a statistically significant improvement in nurses' happiness at work following participation in the Islamic-based spiritual program. Table 2 shows that the mean happiness scores in the intervention group increased from 37.34 (SD = 3.93) at the baseline to

39.22 (SD = 3.17) immediately after the intervention and remained elevated at 38.88 (SD = 3.42) post-intervention. In contrast, the control group exhibited minimal changes across the three time points.

Table 2. Descriptive statistics of happiness at work scores

Time of measurement	Mean \pm SD	95% CI
Intervention (n = 32)		
Pre-test	37.34 \pm 3.93	35.93 - 38.76
Immediate post-test	39.22 \pm 3.17	38.08 - 40.36
Post-intervention	38.88 \pm 3.42	37.64 - 40.11
Control (n = 32)		
Pre-test	37.13 \pm 4.01	35.68 - 38.57
Immediate post-test	37.41 \pm 3.79	36.04 - 38.77
Post-intervention	37.38 \pm 3.75	36.02 - 38.73

The repeated-measures ANOVA (Table 3) confirmed a significant time effect in the intervention group ($F = 17.01$, $p < 0.001$, $\eta^2 = 0.354$), indicating a moderate-to-large effect size. In contrast, the control group showed only a marginal effect ($F = 4.23$, $p = 0.019$, $\eta^2 = 0.120$). The pairwise comparisons (Table 4) revealed that the greatest increase

occurred between the pre-test and the immediate post-test (mean difference = 1.87, $p < 0.001$), with gains maintained at the post-intervention assessment (mean difference = 1.53, $p < 0.001$). No significant change was observed between the immediate and post-intervention phases, suggesting a sustained effect.

Table 3. Summary for the repeated measures ANOVA

Group	Sum of square	Degree of freedom	Mean squares	F	Sig.	Effect size
Intervention group ^a	63.77	2	47.09	17.01	0.000	0.354
Control group ^b	1.52	2	0.76	4.23	0.019	0.120

a: not homogenic/Greenhouse-Geisser; b: homogenic/Sphericity assumed

Table 4. Pairwise comparisons of happiness at work scores

Comparison	Mean Difference	Std. Error	Sig. ^a	95% CI
Intervention group (n = 32)				
Pre-test vs immediate post-test	1.87	0.44	0.000	0.77 - 2.98
Pre-test vs post-intervention	1.53	0.33	0.000	0.70 - 2.37
Immediate post-test vs post-intervention	0.34	0.23	0.421	0.23 - 0.92
Control group (n = 32)				
Pre-test vs immediate post-test	0.28	0.12	0.080	0.02 - 0.59
Pre-test vs post-intervention	0.25	0.10	0.055	0.00 - 0.50
Immediate post-test vs post-intervention	0.03	0.09	1.000	0.21 - 0.27

a: Adjustment for multiple comparisons: Bonferroni

Moreover, the Kruskal–Wallis analysis (Table 5) showed significant between-group differences in score changes from pre-test to both post-test phases ($\chi^2 = 8.207$, $p = 0.004$; $\chi^2 = 8.021$, $p = 0.005$). These results further confirm the intervention’s impact.

Table 5. Difference change of happiness at work scores

Time Measurement	Mean Rank	Median (Min-Max)	Differences between groups ^a	
			χ^2	p
Pre-test vs immediate post-test				
Intervention group	38.22	0.5 (-2 - 7)	8.207	0.004
Control group	26.78	0.0 (0 - 3)		
Pre-test vs post-intervention				
Intervention group	38.28	0.5 (0 - 5)	8.021	0.005
Control group	26.72	0.0 (-1 - 3)		
Immediate post-test vs post-intervention				
Intervention group	31.00	0.0 (-4 - 2)	0.754	0.385
Control group	34.00	0.0 (-2 - 1)		

a: Kruskal-Wallis test

Collectively, these results provided robust evidence that the Islamic-based spiritual intervention, grounded in religious and cultural values, effectively enhances nurses’ happiness at work and sustains its benefits over time.

DISCUSSION

This study’s results demonstrate that Islamic-based spiritual programs grounded in local wisdom can significantly improve the happiness at work of inpatient nurses. The intervention, which integrated structured religious talks and Quranic recitation, effectively enhanced nurses’ well-being after 1 month of implementation. This finding suggests that incorporating spiritual and cultural elements into workplace programs can foster a more supportive professional environment for nurses in Indonesia.

Grounded in Watson’s Theory of Human Caring, this program emphasizes nurturing the inner self to sustain compassionate care. The religious talk component fostered gratitude, self-reflection, and an understanding of life’s meaning, aligning with Watson’s concept of transpersonal caring relationships (Gunawan et al., 2022). Meanwhile, listening to Quranic verses (murrotal) promoted mindfulness and tranquility, supporting nurses’ emotional balance and psychological resilience amid workplace stressors. These findings are consistent with previous research, which demonstrates that spirituality-based interventions can enhance mental well-being and compassion in healthcare professionals (Leung & Li, 2023; Sun et al., 2024). Similarly, other studies reported that nurses with higher self-compassion experience lower levels of professional burnout and better psychological well-being (Arafat et al., 2025). Quran recitation can provide people with a solid foundation for living a more tranquil life and to remain resilient in the face of adversity (Khaledian et al., 2017), including performing nursing tasks.

The spiritual recitation element in this study also functions as a practical form of positive psychology intervention, consistent with Seligman’s PERMA model, which emphasizes Positive emotion, Engagement, Relationships,

Meaning, and Accomplishment as core dimensions of well-being (Franco & Christie, 2021; Wei & Watson, 2019). For nurses, listening to the Holy Quran can be a valuable tool for enhancing their spiritual well-being and job satisfaction. Qur’anic verses can help promote inner serenity and help them remain calm in a challenging professional environment. The tone and meaning of the Qur’anic verses can soothe the mind and lessen anxiety (Khaledian et al., 2017). As a result, nurses may discover greater fulfillment in their work, which is regarded as both a field of reward and a highly spiritually valuable form of service.

Happiness at work is associated with higher morale, job satisfaction, and commitment to daily tasks (Porrás Velasquez, 2024). For nurses, cultural values also moderate happiness at work (Singh et al., 2023). Meanwhile, studies have shown that spiritual upliftment improves mental health (Leung & Li, 2023). Spiritual counseling has also been shown to reduce anxiety, increase well-being and resilience, foster a deeper sense of meaning, and contribute to a greater sense of purpose in life (Sun et al., 2024). Thus, spiritual counseling has the potential to enhance nurses’ work satisfaction and overall happiness.

According to psychological well-being theory, individual well-being depends on physical, mental (Trudel-Fitzgerald et al., 2019), and spiritual aspects (Celano et al., 2022). Spirituality in the workplace has been shown to positively impact nurses’ job satisfaction, motivation, and overall happiness by providing meaning and purpose to their work (Nikensari & Yudhistira, 2024). Additionally, local wisdom theory suggests that cultural and spiritual values can effectively enhance social cohesion and emotional bonding in the workplace (Hamka et al., 2022; Porrás Velasquez, 2024).

Using local wisdom as the foundation of a spiritual program is a novel and timely strategy, particularly in a professional context like nursing, which requires robust emotional stability and social support (Celano et al., 2022). As contented nurses

are more likely to provide patients with sympathetic and focused care, the program enhances nurses' well-being and can raise the standard of healthcare. Additionally, spirituality rooted in local culture helps strengthen nurses' bonds and sense of belonging to the organization, thereby affecting their commitment to the institution.

Happiness is positively associated with nurse services and affects performance (Javanmardnejad et al., 2021). The results showed that happiness and performance had a significant positive effect (Chang et al., 2020). Thus, increasing the happiness of nurses will also improve their performance.

However, several limitations must be considered when implementing an Islamic-based spiritual program to ensure its effectiveness. One of the primary challenges is the diversity of nurses' perceptions of spirituality, encompassing various religious backgrounds. Not all nurses feel connected to local wisdom-based spiritual practices, so some may find the program irrelevant or incompatible with their values. Future research should include replication and longitudinal studies across multiple hospitals and cultural settings to evaluate the program's sustained impact on nurse retention, productivity, and patient satisfaction.

Nevertheless, the program has great potential for adoption in other regions, as different local cultures may offer unique benefits to enrich workplace health and wellness practices. The program can also be optimized by adding a long-term evaluation to assess its impact on nurse retention, productivity, and healthcare quality. By embedding this program in the organizational culture, hospitals can create a better work environment that supports employee well-being and patient satisfaction.

CONCLUSION AND RECOMMENDATION

This study demonstrated that Islamic-based spiritual programs grounded in local wisdom significantly improved happiness at work among inpatient nurses in Jember, Indonesia. The findings provide strong evidence that incorporating spiritual and cultural dimensions into workplace well-being programs can enhance nurses' motivation, morale, and caring behavior.

From a nursing practice perspective, this program provides a culturally congruent strategy to enhance psychological well-being and compassion, enabling nurses to deliver holistic, patient-centered care while fostering emotional resilience and teamwork. The findings also underscore the importance of integrating spirituality and local cultural values into nursing education curricula and professional training to equip nurses to manage stress and maintain empathy in demanding healthcare environments.

At the policy level, healthcare leaders are encouraged to adopt culturally sensitive well-being programs as part of their organizational strategies for staff retention and quality improvement. Embedding such interventions into hospital culture can enhance job satisfaction, reduce burnout, and improve patient outcomes. Overall, this study reinforces the evidence that faith-based and culturally grounded interventions are essential for advancing nursing practice, education, and policy within culturally diverse healthcare systems.

ACKNOWLEDGEMENT

This research is financially supported by a Junior Researcher Grant (Hibah Penelitian Pemula) from the Institute for

Research and Community Service, Universitas Jember, Indonesia. The authors are thankful to all participants who contributed to this research.

CONFLICT OF INTEREST

There is no conflict of interest in this study.

REFERENCES

- Afandi, A. T., Ardiana, A., Muhammad Nur, K. R., Sutawardana, J. H., Rasni, H., Sulistyorini, L., & Kurniawati, D. (2025). Understanding nurses' caring behavior: the impact of work environment and individual factors. *Jurnal Keperawatan Soedirman*, 20(3), 215. <https://doi.org/10.20884/1.jks.2025.20.3.13689>
- Alharbi, J., Wilson, R., Woods, C., & Usher, K. (2016). The factors influencing burnout and job satisfaction among critical care nurses: a study of Saudi critical care nurses. *Journal of Nursing Management*, 24(6), 708–717. <https://doi.org/10.1111/jonm.12386>
- Alikari, V., Gerogianni, G., Fradelos, E. C., Kelesi, M., Kaba, E., & Zyga, S. (2022). Perceptions of caring behaviors among patients and nurses. *International Journal of Environmental Research and Public Health*, 20(1), 396. <https://doi.org/10.3390/ijerph20010396>
- Arafat, A. E. A. E., Kulintang, M. B. M., Ngo, A. D., Alkhuraif, R. A. M., & Aburmeishan, R. H. S. (2025). The influence of demographic factors and professional burnout on nurses' self-compassion in a healthcare facility in Qassim, Kingdom of Saudi Arabia. *Jurnal Keperawatan Soedirman*, 20(1), 76. <https://doi.org/10.20884/1.jks.2025.20.1.13929>
- Babapour, A.-R., Gahassab-Mozaffari, N., & Fathnezhad-Kazemi, A. (2022). Nurses' job stress and its impact on quality of life and caring behaviors: a cross-sectional study. *BMC Nursing*, 21(1), 75. <https://doi.org/10.1186/s12912-022-00852-y>
- Božek, A., Nowak, P. F., & Blukacz, M. (2020). The relationship between spirituality, health-related behavior, and psychological well-being. *Frontiers in Psychology*, 11. <https://doi.org/10.3389/fpsyg.2020.01997>
- Browne, C., & Chun Tie, Y. (2024). Promoting well-being: a scoping review of strategies implemented during the covid-19 pandemic to enhance the well-being of the nursing workforce. *International Journal of Nursing Studies Advances*, 6, 100177. <https://doi.org/10.1016/j.ijnsa.2024.100177>
- Celano, T., Harris, S., Sawyer, A. T., & Hamilton, T. (2022). Promoting spiritual well-being among nurses. *Nurse Leader*, 20(2), 188–192. <https://doi.org/10.1016/j.mnl.2021.08.002>
- Chang, S., Han, K., & Cho, Y. (2020). Association of happiness and nursing work environments with job crafting among hospital nurses in South Korea. *International Journal of Environmental Research and Public Health*, 17(11), 4042. <https://doi.org/10.3390/ijerph17114042>
- Daulay, N., Darmayanti, N., Harahap, A. C. P., Wahyuni, S., Mirza, R., Dewi, S. S., Hardjo, S., Indrawan, Y. F., Aisyah, S., Harahap, D. P., & Munisa, M. (2022). Religiosity as moderator of stress and well-being among muslim students during the pandemic in

- Indonesia. *Islamic Guidance and Counseling Journal*, 5(2), 88–103. <https://doi.org/10.25217/igcj.v5i2.2696>
- Febrianti, V., Pitono, A. J., Arifin, A., & Yudha, E. K. (2024). The workload and stress levels among staff nurses in the inpatient ward of a secondary health care service in Indonesia. *Fundamental and Management Nursing Journal*, 7(2), 58–65. <https://doi.org/10.20473/fmnpj.v7i2.49397>
- Franco, P. L., & Christie, L. M. (2021). Effectiveness of a one day self-compassion training for pediatric nurses' resilience. *Journal of Pediatric Nursing*, 61, 109–114. <https://doi.org/10.1016/j.pedn.2021.03.020>
- Goudarzian, A. H., Nikbakht Nasrabadi, A., Sharif-Nia, H., Farhadi, B., & Navab, E. (2024). Exploring the concept and management strategies of caring stress among clinical nurses: a scoping review. *Frontiers in Psychiatry*, 15. <https://doi.org/10.3389/fpsy.2024.1337938>
- Gunawan, J., Aunguroch, Y., Watson, J., & Marzilli, C. (2022). Nursing administration: Watson's theory of human caring. *Nursing Science Quarterly*, 35(2), 235–243. <https://doi.org/10.1177/08943184211070582>
- Hamka, -, Suen, M.-W., Ramadhan, Y. A., Yusuf, M., & Wang, J.-H. (2022). Spiritual well-being, depression, anxiety, and stress in Indonesian Muslim communities during COVID-19. *Psychology Research and Behavior Management*, 15, 3013–3025. <https://doi.org/10.2147/PRBM.S381926>
- Harrad, R., Cosentino, C., Keasley, R., & Sulla, F. (2019). Spiritual care in nursing: An overview of the measures used to assess spiritual care provision and related factors amongst nurses. *Acta Biomedica*, 90, 44–55. <https://doi.org/10.23750/abm.v90i4-S.8300>
- Javanmardnejad, S., Bandari, R., Heravi-Karimooi, M., Rejeh, N., Sharif Nia, H., & Montazeri, A. (2021). Happiness, quality of working life, and job satisfaction among nurses working in emergency departments in Iran. *Health and Quality of Life Outcomes*, 19(1), 112. <https://doi.org/10.1186/s12955-021-01755-3>
- Khaledian, M., Pishvaei, M., Karami Baghteyfouni, Z., Smaeili, M., & Baghteyfouni, K. Z. (2017). Effect of Islamic-based spiritual therapy on self-esteem and mental health of addicts. *Journal of Research & Health Social Development & Health Promotion Research Center*, 7(2), 719–728. <https://doi.org/10.18869/acadpub.jrh.7.2.719>
- Kurz, J. M. (2024). Philosophy of nursing and caring. *International Journal for Human Caring*, 28(4), 224–227. <https://doi.org/10.20467/IJHC-2023-0011>
- Leung, J., & Li, K.-K. (2023). Faith-based spiritual intervention for persons with depression: preliminary evidence from a pilot study. *Healthcare*, 11(15), 2134. <https://doi.org/10.3390/healthcare11152134>
- Loreto, B. B. L., de Azevedo, S. C., da Silva, A. G., Malloy-Diniz, L. F., Ornell, F., Trés, L. M. A. M., Kessler, F. H. P., & Castro, M. N. de. (2022). Well-being at work, productivity, and coping with stress during the COVID-19 pandemic. *Trends in Psychiatry and Psychotherapy*. <https://doi.org/10.47626/2237-6089-2021-0250>
- Montgomery, A., Spânu, F., Băban, A., & Panagopoulou, E. (2015). Job demands, burnout, and engagement among nurses: A multi-level analysis of ORCAB data investigating the moderating effect of teamwork. *Burnout Research*, 2(2–3), 71–79. <https://doi.org/10.1016/j.burn.2015.06.001>
- Nielsen, K., Nielsen, M. B., Ogbonnaya, C., Känslä, M., Saari, E., & Isaksson, K. (2017). Workplace resources to improve both employee well-being and performance: A systematic review and meta-analysis. *Work & Stress*, 31(2), 101–120. <https://doi.org/10.1080/02678373.2017.1304463>
- Nikensari, G. A., & Yudhistira, P. G. A. (2024). Spirituality in the workplace: enhanced job satisfaction through employee well-being and work-life balance. *Jurnal Manajemen Teori Dan Terapan| Journal of Theory and Applied Management*, 17(2), 316–332. <https://doi.org/10.20473/jmtt.v17i2.57090>
- Nurbaeti, I., Budi Lestari, K., & Khairunnisa, T. T. (2024). The correlation between Islamic mindfulness with nursing student professional attitude and caring behavior. *Jurnal Keperawatan Padjadjaran*, 12(2), 201–207. <https://doi.org/10.24198/jkp.v12i2.2388>
- Oldland, E., Botti, M., Hutchinson, A. M., & Redley, B. (2020). A framework of nurses' responsibilities for quality healthcare — Exploration of content validity. *Collegian*, 27(2), 150–163. <https://doi.org/10.1016/j.colegn.2019.07.007>
- Oluma, A., & Abadiga, M. (2020). Caring behavior and associated factors among nurses working in Jimma University specialized hospital, Oromia, Southwest Ethiopia, 2019. *BMC Nursing*, 19(1), 19. <https://doi.org/10.1186/s12912-020-0407-2>
- Porras Velasquez, N. R. (2024). Positive psychology and the search for happiness at work. *Majalah Kesehatan Indonesia*, 5(1), 1–8. <https://doi.org/10.47679/makein.2024200>
- Putri, D. L. (2019). *Pengaruh budaya organisasi, spiritualitas di tempat kerja, dan efikasi diri terhadap kebahagiaan di tempat kerja pada karyawan BUMN di Jakarta (The influence of organizational culture, workplace spirituality, and self-efficacy on workplace happiness among state-owned enterprise employees in Jakarta)* [Undergraduate Thesis]. Universitas Islam Negeri Syarif Hidayatullah.
- Ren, Z., Zhao, H., Zhang, X., Li, X., Shi, H., He, M., Zha, S., Qiao, S., Li, Y., Pu, Y., Sun, Y., & Liu, H. (2023). Associations of job satisfaction and burnout with psychological distress among Chinese nurses. *Current Psychology*, 42(33), 29161–29171. <https://doi.org/10.1007/s12144-022-04006-w>
- Reyes-Rodriguez, G., Cuellar-Pompa, L., & Rodríguez-Gómez, J. Á. (2025). Psycho-emotional status related to working conditions among nurses: A scoping review. *Journal of Nursing Reports in Clinical Practice*, 3(1), 58–68. <https://doi.org/10.32598/JNRC.2406.1109>
- Rias, Y. A., Hasanah, R. N., Areta, A. C. C., Wulandari, S., Novaisniati, L., Firdaus, M. R., & Shih, Y. W. (2025). The gender role stereotypes, patriarchal beliefs, and spirituality as predictors of male nursing students' major satisfaction: a cross-sectional study. *Jurnal Keperawatan Soedirman*, 20(3), 178. <https://doi.org/10.20884/1.jks.2025.20.3.14813>

- Sharif, T. J., Hosseinzadeh, M., Mahdavi, N., Areshtanab, H. N., & Dickens, G. L. (2020). Happiness and its relationship with job burnout in nurses of educational hospitals in Tabriz, Iran. *International Journal of Community Based Nursing and Midwifery*, 8(4), 295–304. <https://doi.org/10.30476/IJCBNM.2020.83298.1138>
- Singh, S., Kshtriya, S., & Valk, R. (2023). Health, hope, and harmony: a systematic review of the determinants of happiness across cultures and countries. *International Journal of Environmental Research and Public Health*, 20(4), 3306. <https://doi.org/10.3390/ijerph20043306>
- Sun, M., Tian, X., Peng, Y., Wang, Z., Lu, Y., & Xiao, W. (2024). Effects of meaning therapy on spirituality, psychological health, and quality of life in patients with cancer: A systematic review and meta-analysis of randomized controlled trials. *Asia-Pacific Journal of Oncology Nursing*, 11(4), 100388. <https://doi.org/10.1016/j.apjon.2024.100388>
- Trudel-Fitzgerald, C., Millstein, R. A., von Hippel, C., Howe, C. J., Tomasso, L. P., Wagner, G. R., & VanderWeele, T. J. (2019). Psychological well-being as part of the public health debate? Insight into dimensions, interventions, and policy. *BMC Public Health*, 19(1), 1712. <https://doi.org/10.1186/s12889-019-8029-x>
- Vega, E. A. U., Macedo, A. B. T., Antonioli, L., Pinheiro, J. M. G., Esteban, A. N. P., & Souza, S. B. C. de. (2023). Levels of anxiety and stress experienced by nurses in inpatient units. *Aquichan*, 23(1), 1–19. <https://doi.org/10.5294/aqui.2023.23.1.6>
- Wei, H., & Watson, J. (2019). Healthcare interprofessional team members' perspectives on human caring: A directed content analysis study. *International Journal of Nursing Sciences*, 6(1), 17–23. <https://doi.org/10.1016/j.ijnss.2018.12.001>
- Yuliatun, I., & Karyani, U. (2022). Improving the psychological well-being of nurses through Islamic positive psychology training. *Psikohumaniora: Jurnal Penelitian Psikologi*, 7(1), 91–102. <https://doi.org/10.21580/pjpp.v7i1.10792>