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LETTER to EDITOR

Spirituality in medical education: a choice or a necessity?

Dear Editor;

Increased attention to spirituality in health issues in recent years (1) has led to the recognition of the need to incorporate spirituality in medical education. More patients have understood that their healthcare providers should be aware of their spiritual and religious needs and take them into account in their therapeutic activities (2). The spiritual dimension of human beings and its significance in their health (3) is getting enhanced among healthcare professionals and people. Spirituality, as a multifaceted concept, denotes transcendence, meaningfulness, and purposefulness through connection with others, nature, and a supreme being (1). A fundamental dimension of human nature is associated with a set of needs with varying degrees among different people. Accordingly, healthcare providers need educational interventions and related curricula designed and implemented to develop their spiritual competencies (4). As a result of the perceived need to integrate spirituality into medical education and as a response to this need, spirituality has been addressed by medical schools throughout the world, including many top leading universities (5).

Nevertheless, few medical schools have integrated spirituality into their curriculum as a core and mandatory course. Instead, most of them are satisfied with occasional lectures, short classes, or trivial content embedded in other courses, including ethics or humanities, to fulfill this aim (6). Furthermore, it is highly dependent on the faculty members' orientation and approach to spirituality and their spiritual background in addressing these issues.

Such a reductionist approach cannot fulfill the requirements and is not adequate for achieving the goals. Students in different disciplines of healthcare are required to pass spirituality courses to understand the role of

spirituality in the health of their patients (knowledge), appreciate and favor the inclusion of spirituality in their healthcare and be adequately motivated (attitude), and gain the required skills and abilities to address the spiritual needs of their clients (practice) in a reasonable and satisfactory level. This degree of competence is achievable only if we think of a more coherent curriculum, more contribution of faculty members, and better constructed and improved programs and policies to be executed. We emphasize the mandatory inclusion of spirituality in medical education. When optional, particular learners with personal interests and tendencies will participate and be strengthened, while those in need of education will neglect and overlook it. Thus, several studies suggest the integration of spirituality in both undergraduate and postgraduate programs as mandatory courses (7). We should bear in mind that medical education without addressing the spiritual dimension of a human being is deficient, disproportionate, and inadequate. So, it seems necessary to integrate spirituality into medical education as required rather than in optional courses.

Ethical considerations

Ethical issues including plagiarism, informed consent, misconduct, data fabrication and/or falsification, double publication and/or submission, redundancy, etc. have been completely observed by the authors. The ethics committee of the National Agency for Strategic Research in Medical Education approved this research.

Financial Support: This study was funded by the National Agency for Strategic Research in Medical Education. Tehran, Iran. Grant No. 972424.

Conflict of Interest: None.

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