

Innovative Faith Integration in Healthcare Education Related to 3 Different Modalities (Didactic, Online Asynchronous, & Clinical Education)

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Abstract

How do you teach healthcare profession students to apply faith, not just in the classroom but in their profession (McKnight, 2017)? This article presents an innovative approach to faith integration in healthcare education through three distinct modalities: didactic, online asynchronous, and clinical education. This initiative, spearheaded by three nursing faculty members, aims to bridge the gap between spiritual beliefs and professional practice (Young, 2023). Recognizing the challenge of applying biblical principles in real-world healthcare scenarios, faculty members designed faith-based case studies and devotionals that foster engagement, ethical reasoning, and spiritual growth among healthcare profession students. In didactic settings, students engage in discussions about nursing scenarios, which are structured around concepts related to formulating a biblical worldview through reflective questioning. Online asynchronous activities use faith-driven case studies to promote leadership and ethical decision-making, while clinical education encourages students to apply a biblical worldview in patient care settings. Preliminary feedback indicates that these methods enhance student engagement, ethical reasoning, and the integration of faith into professional practice. This approach offers a holistic model of education that prepares nursing students to become compassionate, ethically-grounded healthcare professionals capable of addressing both the physical and spiritual needs of their patients. This project highlights the importance of continued research and adaptation in faith integration within healthcare education, ensuring students are equipped to meet the complexities of their roles with both clinical competence and a biblical worldview (Siahaan, 2021).

Keywords: Assessment, Faith Integration, Christian Commitment, CCI, Faith Scale

Introduction

“So, faith by itself, if it has no works, is dead” (James 2:17, NRSV)

Observations across didactic, clinical, and asynchronous settings in nursing education revealed a disconnect between traditional devotion-based approaches to faith integration and the practical application of faith within the nursing profession. Faith

formation in nursing education often relies on brief devotions and opening prayers that, while well-intentioned, may not facilitate meaningful application of biblical principles to the realities of nursing practice. Kaak (2016) defines academic faith integration as

the work carried out by Christian faculty members when they meaningfully bring the scholarship of their discipline or professional practice and the scholarship representing

insights and perspectives from Christian faith into dialogue with each other, resulting in disciplinary perspectives that are uniquely informed by faith and/or faith perspectives that are uniquely informed by the discipline or profession. (p. 192)

This definition highlights that faith integration, in contrast to faith formation (Nehrbass, 2024), extends beyond devotionals to transformative dialogue between faith and discipline. This lack of practical connection leaves a gap in preparing students to navigate the challenges of the profession through a faith-informed lens. Despite ongoing efforts to incorporate faith into nursing education, there remains a need for more meaningful and cohesive integration across academic and clinical contexts. Recognizing this disconnect, a group of nursing faculty members, each representing a distinct educational modality (didactic, clinical, and online asynchronous) and degree program (graduate, undergraduate, and pre-licensure), collaborated to implement a more robust approach. They replaced traditional devotionals with scenario-based devotionals rooted in real-life nursing situations. Students were invited to explore and discuss how Scripture could be applied to these scenarios, encouraging deeper engagement and practical faith integration. Although formal research will evaluate the effectiveness of this approach, early anecdotal evidence suggests that this method enhances student participation and supports the development of spiritually grounded clinical judgment. The faculty team seeks to share this evolving model to inspire others to rethink and strengthen faith integration.

What the Evidence Says

A growing body of literature emphasizes the importance of intentional and transformative approaches to faith integration in nursing education. A common theme is the value of relational and reflective teaching practices. Astle and Gibson (2017) highlight the transition from secular to faith-based nursing education and advocate for relational interconnectedness as a key strategy. The integration of faith helped create space for meaningful discussion and reflection, fostering a spiritually supportive learning environment. Similarly, McKnight (2017) emphasizes reflective practice among Christian nurse educators, advocating for holistic alignment between

one's professional responsibilities, teaching, research, and service, and Christian values. Through spiritual assessment and prayer, educators are encouraged to weave faith throughout their academic careers.

Expanding on the theme of intentional integration, Herrity (2024) in *Teaching Christianly* emphasizes the need for faculty to model Christian thinking and living within the classroom, not as an add-on, but as a natural and essential part of pedagogy. Herrity advocates for faculty to cultivate a learning environment where Christian worldview principles are infused into content delivery, interactions, and critical reflection. This approach reinforces the idea that Christian education should be transformative, shaping both character and competence through every element of instruction.

Both Hartman (2022) and Purper et al. (2020) emphasize the critical role of the learning environment in facilitating meaningful faith integration within nursing education. Hartman (2022) focuses on graduate-level education and presents a model grounded in spiritual transformation, highlighting the importance of creating classroom environments where spiritual disciplines, faith-based community engagement, and a biblical worldview are intentionally embedded into instructional practices. This model seeks to cultivate a spiritually attentive atmosphere that goes beyond surface-level devotionals, enabling students to internalize and apply faith principles in their professional practice.

Purper et al. (2020) address the distinct challenges posed by asynchronous online learning environments, where faith integration can often be overlooked. In structuring online learning spaces with purposeful strategies that integrate faith, educators can create a spiritually formative experience even in the absence of face-to-face interaction. Together, these studies demonstrate that regardless of modality, traditional classroom or online, aspects of the learning environment must be deliberately designed to support faith integration.

Young (2023) articulates how a biblical worldview enhances students' critical thinking and ethical decision-making, equipping them to approach clinical dilemmas with faith-informed clarity and compassion. Pennington (2020) adds that assessment practices can serve as tools for both academic and spiritual

reflection. By encouraging students to evaluate their values and faith in relation to clinical practice, assessments become formative experiences that support ethical discernment and deeper engagement.

Overall, the evidence underscores that meaningful faith integration in nursing education requires approaches that are intentional, relational, and transformative. Intentional integration ensures that biblical principles are woven into course design and learning objectives rather than presented as add-ons. Relational integration emphasizes the importance of fostering genuine connections between faculty and students, creating safe spaces for spiritual reflection and dialogue. Transformative integration goes beyond imparting knowledge to shaping students' ethical reasoning, professional identity, and personal faith in ways that prepare them for compassionate, Christ-centered care. Collectively, these insights highlight that effective faith integration is not confined to a single teaching strategy or setting but is characterized by deliberate, reflective practices that holistically develop students in both their spiritual and professional journeys.

Integration of Faith Across Nursing Education Modalities

Building upon literature that supports the importance of intentional and relevant faith integration, the following section outlines how these principles have been applied across different levels and modalities of nursing education. The authors implemented targeted strategies in graduate and undergraduate/prelicensure didactic and clinical settings. These distinct approaches were designed to connect spiritual development with professional formation in meaningful and practical ways.

Graduate Education

At the graduate level, the new method was used in a class on advanced practice and leadership within the online asynchronous Master of Healthcare Simulation Leadership program. Faith integration in this setting requires intentional instructional design to ensure that spiritual development remains central despite the lack of face-to-face interaction. Faculty have embedded faith-based case studies within weekly modules, prompting students to engage with real-world ethical challenges from a biblical worldview.

Each case study includes a scenario relevant to healthcare simulation leadership, accompanied by guided reflection questions that ask students to evaluate decisions through the lens of Christian values such as integrity, stewardship, justice, and compassion. Faculty deliver these activities through asynchronous discussion boards and written assignments. Below is an example of an asynchronous graduate activity.

HSL520 – Lab Activity on Leadership Challenges

- **Instructions:**

- Please review the scenario below and then answer the prompts which are provided. Please re-upload your finished document into the appropriate submission portal in blackboard for this week's lab activity.

"Navigating Tensions: A Leadership Challenge" – Simulation Leadership Scenario

- **Background:**

- Dr. Johnson, a seasoned faculty member, is leading a critical simulation exercise for medical students at the prestigious Medville University. The simulation technician, Charles, is responsible for ensuring the technology runs smoothly during these exercises. However, a significant error has occurred, jeopardizing the simulation and causing frustration among both faculty and students.

- **The Incident:**

- As the simulation unfolds, a technical glitch disrupts the scenario, leading to confusion among the students and a loss of valuable learning time. Dr. Johnson, known for his high standards and commitment to excellence, immediately notices the issue and approaches Charles, the simulation technician, to address the situation.

- **Conversation Part 1:**

- Dr. Johnson (firmly): "Charles, we cannot afford technical errors during

these simulations. This disruption is affecting the learning experience for our students. What happened?"

- Charles (defensively): "I'm not sure, Dr. Johnson. Everything was working fine during the setup, but it seems like there's a sudden malfunction. I'll look into it right away."
- **The Argument:**
 - Dr. Johnson, feeling the pressure of the moment, insists on a quick resolution, while Charles, feeling defensive about his competence, pushes back against the implication that the error is solely his fault.
- **Conversation Part 2:**
 - Dr. Johnson (impatiently): "This is unacceptable, Charles. We rely on your expertise to ensure smooth simulations. We can't compromise the students' education like this."
 - Charles (defensively): "I did my best, Dr. Johnson. Technology can be unpredictable sometimes. It's not like I wanted this to happen."
- **The Leadership Challenge:**
 - As a leader, Dr. Johnson must navigate the tension and find a solution that addresses the immediate issue while fostering a collaborative and solution-oriented approach for the future.
- **Question/Assignment:**
 - What Recommendations would you make to Dr. Johnson in solving the above?
 - How do you think Dr. Johnson's initial response reflects the importance of maintaining high standards and commitment to excellence, especially in a learning environment?
 - When you read the Bible verse below how does it align with the above response and how might these same biblical principles help you in navigating this challenge and or similar challenges in your future as a healthcare simulation leader?

- "Whatever you do, work at it with all your heart, as working for the Lord, not for human masters." - Colossians 3:23 (NIV)

Pre-licensure Didactic Education

Devotionals within this modality included a Bible verse or story, followed by a nursing scenario, and three discussion questions. The Bible verses or stories were selected by the instructor from personal readings, and the scenarios represented real-world nursing situations involving marginalized populations inspired by the instructor's professional practice. This intentional design aimed to increase student awareness of social determinants of health and healthcare bias to better prepare them to work as nurses with diverse groups of clients. The discussion questions guided students in responding to and reflecting on the scenarios using a Christian worldview.

Students engaged in these devotionals at the beginning of in-person class sessions. The instructor displayed the PowerPoint slide with the scripture, the scenario, and the discussion questions. Students had five minutes for peer discussion while the instructor rounded, listened, and asked follow-up questions. After five minutes, the whole class discussed their responses to the scenario, with the instructor facilitating. Additional resources related to the unique challenges of the chosen marginalized group were included in the slide notes and posted to Blackboard. Students could revisit the devotional materials and notes after class. Below is an example.

Micarah is a nurse and a friend of yours at work. She has been feeling burnt out after working through the COVID-19 pandemic, and has been having trouble finding joy at work. You know she is a Christian and you would like to encourage her. Read the Bible verse below and answer the following questions

Therefore we do not lose heart. Though outwardly we are wasting away, yet inwardly we are being renewed day by day. For our light and momentary troubles are achieving for us an eternal glory that far outweighs them all. So we fix our eyes not on what is seen, but on what is unseen, since what is seen is temporary, but what is unseen is eternal. (2 Cor 4:16-18, NIV)

1. How could you use this Bible verse to encourage Micarah without minimizing the pain she experienced?
2. What strategies might you suggest to de-stress and manage burnout?
3. What would help you in nursing school to mentally prepare for practice?

Undergraduate/Pre-licensure Clinical Education

In the clinical setting, nursing students have the opportunity to translate theory into practice by caring for clients in dynamic, real-life hospital situations. This setting also provides an optimal context to learn and apply biblical principles in authentic clinical experiences. Through this dual experience, students have an opportunity to actively integrate faith into nursing practice while sharing it with those they serve.

The faith integration activity developed for this modality was designed with this purpose in mind. In pre-conference, students received a Bible verse focused on values such as compassion, integrity, and servant leadership. They were prompted to discuss the verse and reflect on its personal meaning and relevance to their nursing practice. Students were then instructed to take the verse with them to the clinical units in which they were assigned and identify situations throughout the day where they could apply its message. They were also asked to share their experiences during post-conference discussions with their clinical group. The activity was intentionally student-led to promote autonomy and minimize faculty intervention. Students were encouraged to identify both personal and patient-centered applications of the selected verse throughout their clinical experiences. The instructions also included post-conference reflection prompts to assist the faculty in driving a deeper discussion. This structure fostered self-directed learning and supported the internalization of faith-based principles in practical, real-world contexts. Below is an example of an undergraduate clinical education faith integration activity.

Pre-Conference: Read verse and hand-out verses to the students. Have students discuss their impression and meaning of the verse. Students are asked to find a situation or scenario in their clinical day that they can

incorporate this verse into and explain that this will be discussed in post-conference:

Week One Verse: “For I can do everything through Christ, who gives me strength” (Philippians 4:13, NLT).

Post Conference:

Verse Interpretation: Read the verse, and ask students to interpret the meaning. Then start a discussion on how the students incorporated the verse.

Additional Reflection Discussion Topics:

Faith and Strength: This verse highlights the connection between faith and strength. Ask your students to reflect on the role of faith and spirituality in their own lives and how it influences their sense of strength and resilience.

Overcoming Challenges: Encourage your students to share personal or clinical experiences where they faced challenging situations. Discuss how having faith and a support system can help individuals overcome these challenges.

Interpreting 'Everything': What does "everything" mean in the context of this verse? Explore with your students the idea that while faith can provide strength, it may not necessarily mean that one can achieve absolutely anything without limitations. Discuss the importance of setting realistic goals and expectations.

Teamwork and Support: Emphasize the idea that strength can also come from the support of others. Discuss how healthcare professionals often work in teams, and how relying on colleagues, mentors, and patients' families can contribute to success.

Resilience: Talk about the concept of resilience in clinical practice. How can healthcare professionals, like nurses, doctors, and therapists, maintain resilience in the face of adversity? How does faith or spirituality play a role in this?

Patient Perspective: Encourage your students to consider how this verse might relate to their patients. Do some patients draw strength from their faith during their medical journey? How can healthcare providers support and respect the diverse spiritual and religious beliefs of their patients?

Ethical Considerations: Explore the ethical dimensions of integrating faith and spirituality into clinical care.

Discuss the importance of respecting patients' beliefs and maintaining professional boundaries.

Self-Care: Remind your students about the importance of self-care and taking care of their own well-being. How can they draw strength from their faith or other sources to prevent burnout and maintain a healthy work-life balance?

By delving into these discussion topics, you can help your students explore the deeper meaning of Philippians 4:13 and how it may apply to their roles as clinical professionals and to themselves as individuals. This can also provide a platform for meaningful conversations about faith, resilience, and the challenges they may encounter in their healthcare careers.

Preliminary Findings and Lessons Learned

Preliminary findings were gathered from students' verbal and written feedback, and observations during the devotionals. These indicated increased student engagement and satisfaction, strengthened ethical reasoning and compassion, and an enhanced understanding of faith-professional integration. Additionally, capturing instructor experiences and perceptions through reflective surveys or qualitative interviews may yield insights into implementation fidelity, faculty development needs, and perceived impact on teaching practice.

Students expressed appreciation for opportunities to explore the intersection of spiritual beliefs and professional responsibilities. Discussions involving faith-based reflection helped students articulate how scripture informs their responses to clinical and ethical challenges. Many students noted that the clinical activity supported their ethical development by preparing them to navigate patient interactions from a biblically grounded perspective. Students reported that these approaches made course content and scripture more relatable and meaningful. As a result, the integration fostered both academic enrichment and spiritual growth. Integrating faith into nursing education appears to positively impact students' ethical reasoning and compassion. Exposure to complex scenarios that required the application of both clinical knowledge and biblical values enabled students to develop a stronger ethical framework. This

foundation is an essential asset in client care and informed decision-making.

Online Teaching Adaptations and Challenges

The application of faith integration in asynchronous online environments presents a unique set of both challenges and opportunities for educators and learners alike. Unlike face-to-face or synchronous virtual classrooms, asynchronous settings lack real-time interaction, making it more difficult to convey tone, foster spiritual connection, and facilitate spontaneous discussions rooted in biblical truths. This has required instructors to be highly intentional in how they design and deliver content that weaves together academic rigor and faith-based principles.

To address these challenges, the department's instructional methods have evolved to include a variety of tools and digital resources, such as pre-recorded devotional videos, reflective journal prompts, interactive discussion boards with Scripture applications, and curated multimedia content. These resources not only communicate spiritually grounded concepts but also encourage students to engage with them at their own pace, allowing for deeper reflection and more personal application of faith.

Moreover, the shift to asynchronous formats has underscored the importance of employing creative instructional strategies, such as storytelling, case studies with moral and ethical dilemmas, and problem-based learning tied to biblical values. Robust support systems are also critical; students benefit from clear guidance on how to integrate faith into assignments, peer interactions, and professional practice, even when not engaging live. This includes thoughtful feedback and accessible academic support grounded in a biblical worldview.

Finally, clarity in communication is paramount. Instructors must craft announcements, rubrics, and assignment instructions with precise language that reflects spiritual themes and expectations. Doing so fosters an environment where students feel both intellectually and spiritually supported, even in the absence of real-time dialogue. The result is an online classroom that becomes more than just a place of learning, it becomes a space for spiritual formation and transformation.

Uniqueness of Clinical Faith Integration

During post-conference discussions, students shared instances where they initiated conversations about faith with clients and clinical staff, enriching the provision of spiritual care in the clinical environment. They reported that without the activity, they would not have had the confidence or know-how to initiate these discussions and experiences. These interactions emphasized spiritual engagement as a key element of holistic nursing practice and helped students build confidence in expressing their beliefs professionally. An example is included in Appendix C.

Although many students reported positive experiences, some faced challenges, particularly those without a faith background or familiarity with biblical principles. These students found it difficult to connect faith to clinical practice and to share spiritual reflections. Faculty provided support and encouraged students to ask questions, while maintaining the expectation that all students fully engage in the activity to the best of their ability. Based on these challenges, future research should incorporate opportunities for this population of students to receive additional guidance and support in connecting faith to clinical practice.

Feedback-Driven Improvements

Ongoing feedback from students plays a critical role in refining strategies, including devotionals. Adjustments informed by student input have included improving clarity around the relevance of biblical principles to clinical case studies and ensuring accessibility of devotional materials. A mid-semester course evaluation in the didactic setting revealed positive comments highlighting the value and interactivity of these devotionals.

Future Implications of the Practice

The integration of faith-based activities in nursing education offers meaningful opportunities to advance holistic, ethically grounded practice. As this paper presents anecdotal observations, the authors intend to conduct a formal research study to further examine the impact of scenario-based devotionals as a faith integration method in nursing education. Given the limited literature on this topic, additional research is needed to strengthen the evidence base, inform best practices, and encourage other educators and scholars to explore faith integration as a vital component of

professional formation. Given that three distinct faith integration interventions were implemented (didactic, online asynchronous, and clinical), future research may benefit from examining each modality separately using consistent survey measures. This approach will allow for clearer evaluation of outcomes unique to each method while building a comprehensive understanding of scenario-based faith integration.

Conclusion

The integration of faith into nursing education appeared to be an effective method for fostering both spiritual and professional development among students. Enhanced engagement, strengthened ethical reasoning, and greater comfort with discussing spiritual matters in clinical settings all point to the value of this approach. Feedback and observational data support the continuation and further development of situation-based devotionals as a means to prepare nursing students to serve with compassion, competence, and conviction in a complex healthcare environment.

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