

The Impact of Religion and Spirituality on Quality of Life for Adult Oncology Patients

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Abstract

This article examines the impact religion and spirituality have on the quality of life for adult oncology patients. A diagnosis of cancer can be shocking news for many patients. Many people who have a cancer diagnosis believe that they have impending death with no hope for recovery. For some, religion and spirituality can be essential resources that assist cancer patients to cope with this diagnosis. Some sources of religion and spirituality include faith, hope, and meaning of life for an individual. Research findings support that a religious and spiritual perspective decreases depression, lowers anxiety, and promotes adherence to the treatment of cancer [1]. Findings from 18 qualitative and quantitative articles were analyzed to gather an understanding on the impact of spirituality and religion on the quality of life for oncology patients. These articles suggest that inclusion of religious and spiritual needs of oncology patients can significantly increase the quality of life for oncology patients.

Key Words: spirituality, religion, quality of life, and oncology

Introduction

According to the National Cancer Institute (2017), cancer is the leading cause of death in the United States [2]. Modern science and technology have made long term survivorship possible for oncology patients with approximately 68% of oncology patients living at least five years beyond treatment [3]. Due to detection and treatment advances, the rate of cancer survivors are approximately 14.5 million in 2014 and is expected to increase to nearly 19 million by 2024 [2], when patients navigate the road to cancer treatment and recovery the need to attain quality of life is essential [4].

Many cancer survivors are searching for a means of coping with the physical and emotional stressors related to their diagnosis. Initially, a cancer diagnosis often generates psychological distress exhibited by depression, anxiety and the need for adjustment to the illness [5]. A recent cross-sectional study of German patients with chronic pain diseases found that 72% of patients diagnosed with terminal cancer expressed spiritual needs [6]. For this reason, there is a growing demand for more holistic care by the healthcare community [7].

In 2001, The Institute of Medicine commented on health care in America as fragmented and impersonal [8]. Healthcare, once grounded in the traditional care of the entire person, has evolved into a disconnection of treatment to the mind, body, and soul [8]. The free market system of the United States has negatively impacted patient-centered care. Patients have become consumers,

reduced to a dollar sign, where time is money [9]. Additionally, many healthcare professionals are uncomfortable addressing the topic because of the private nature of one's spiritual or religious practices [6]. The resurgence of both religion and spirituality has recently become a growing interest in the healthcare system worldwide [10].

Seventy-seven percent of the world's population practice some type of formal religion [10]. Spiritual practices and religious activities can be a significant resource for coping. Their is a positive impact of spirituality and religion which has an affect on the health and well-being of an individual suffering with a chronic illness, specifically cancer [11]. For this reason, the World Health Organization declared that spirituality is an important aspect to patient quality of life [12]. Florence Nightingale reflects "that caring for the whole person – including one's spiritual needs – has been at the heart of the nursing discipline since its founding" [13]. Healthcare professionals are increasingly being encouraged by society to include the concepts of spirituality and religion into their practice [10]. For this reason, numerous research results suggests a positive impact that spirituality and religion has on the quality of life for oncology patients is required. This paper seeks to understand if religion and spirituality improve the quality of life for adult oncology patients? The population examined in the literature focused on adult oncology patients and the affect religion and spirituality have on their quality of life.

Review of Literature

Currently, no universal definition for spirituality is found in the

literature [13]. This may cause concern for inconsistent research results related to the impact spirituality has on an individual's health outcome [13]. However, spirituality can be broadly defined as a uniquely individualized experience as one searches for a greater sense of meaning, purpose, and hope in life [10, 11].

Often, spirituality is accompanied with a connectedness to a higher power, or principle [10, 11]. In contrast, religion is universally defined as an organized system of beliefs, practices, and rituals collectively shared by a group of people and associated with a structured formal institution [11, 14]. Furthermore, religion can be a means to express one's spirituality [8].

Evidence from numerous studies suggest there is a strong relationship between religious and spiritual resources and better quality of life for individuals diagnosed with cancer. Emotions such as anger, anxiety, and depression often accompany a diagnosis of cancer. Coping with these emotions at various stages of the illness has been enhanced through reliance on spiritual and religious practices and beliefs [15]. A descriptive qualitative study from 28 female breast cancer survivors found that women with a highly-engaged image of God saw their diagnosis as a positive experience. This resulted in transformational life changes that positively affected themselves, and strengthened their relationships with others [15]. Furthermore, a direct relationship exists between those who have a relationship with God resulting in a positive sense of well-being. Conversely, those who did not have a relationship with God have a diminished spiritual attitude and a reduced sense of well-being. This sense of well-being and quality of life are strongly associated with the belief system of an individual [16].

Improvement to health-related quality of life for all individuals is listed as a goal of Healthy People 2020 [17]. Quality of life is defined as a person's sense of well-being and the ability to live a full, satisfying and productive life [17]. Several consistent themes were identified with a review of current research regarding the positive effect spirituality and religion has on the quality of life for oncology patients. These distinct concepts that emerged through the experience of those redefining themselves on their cancer journey include: faith; meaning and purpose; hope; and forgiveness. Examples of these themes will be addressed based on the findings from various current research articles.

Faith

Faith is the complete trust in someone or something without physical proof [18]. In one study examining breast cancer survivorship, women who expressed faith in God scored higher on quality of life measurements. They described the ability to see their lives through God's eyes, holding on to faith that He may use their situation for personal growth and to inspire others [15]. Another study analyzing the influence religious beliefs have on the care of both male and female cancer survivors found that those who had a belief in God had a positive attitude toward their cancer diagnosis. This provided them with additional strength during their journey [18].

The use of religious practices such as prayer, Bible reading, sermons, and songs had the ability to transform these participants from a negative state of mind to a positive hopeful one. Overall, their faith in God has led these cancer survivors to a decrease in

treatment side effects, better compliance with treatment, and an increase in quality of life. Ultimately, faith in the participants' belief system created meaning and purpose for their journey [18].

Meaning and Purpose

A sense of meaning and purpose increases feelings of happiness and satisfaction in life. Conversely, a lack of meaning and purpose may lead to feelings of anxiety and depression. Religion and spirituality provides meaning and a sense of purpose in the lives of oncology patients. Furthermore, when religion is present it provides a positive sense of meaning and purpose to their illness experience. This feeling of partnering with God generated psychological benefits of well-being as well [1]. Meaning and purpose can instill a sense of hope to these oncology patients [11].

Hope

Hope is defined as dependence on something in the future [15]. One ethnographic study found that a belief in God provided the will to keep fighting. A feeling of hope positively impacts quality of life and faith in the future providing a mechanism to become more resilient and take control of their illness [11]. Forgiveness, another concept of religion and spirituality, also increases hope and the ability to cope with a diagnosis of cancer [19].

Forgiveness

Forgiveness is a common concept to all religions. A beneficial connection has been established between the act of forgiveness and improved health-related outcomes. There is truth in the old adage that holding a grudge causes more harm to the offended than it does to the offender. Negative emotions, left unaddressed, can lead to considerable physical and mental health problems. In a review of cross-sectional and longitudinal studies, Webb et al. (2012) goes on to explain how forgiveness, often associated with religion and spirituality, produces a greater satisfaction with life and improved psychological well-being [19]. The benefit between forgiveness and better health and well-being stems in part from the ability to reduce negative feelings of depression, anxiety, stress, and anger. Thus, forgiveness is yet another way for religion and spirituality to facilitate an increased quality of life for oncology patients [19].

Application to Nursing

The review of the research reveals a positive relationship between religion, spirituality, and the quality of life for patients with cancer. Oncology patients who have experienced an enhanced quality of life and sense of well-being include these concepts such as faith, meaning, purpose, hope, and forgiveness into their health regime [1, 11, 15, 19]. Connections created through a spiritual belief system have produced a support system of friends developed through common religious organizations [6]. Because of the positive effects religion and spirituality have on health and well-being, healthcare providers should inquire whether their patients want to include these holistic approaches into their treatment plan.

Many nurses wished for more education in addressing the spiritual needs of their patients because they did not feel confident. Adequately defining spirituality would be the initial step for research in increasing confidence in nursing practice. Lack of training may lead to negligence in identifying and meeting patients' spiritual needs. Formal classes in various religions and spiritual values may assist nurses with the ability and confidence

to provide competent spiritual care [8]. Concepts of spirituality such as meaning and purpose, hope, and forgiveness are part of the human experience and should be utilized in clinical practice because spirituality greatly enhances the well-being of humans. Patients whose religious and spiritual needs were addressed by health care workers had a higher quality of life [1].

Another recent study revealed that many patients faced with the diagnosis of cancer relied on their spirituality and religiosity as coping resources. However, 72% of patients reported that these spiritual needs were not supported by the medical system [6]. Kang et al., also found that oncology patients valued religion and spirituality in which practice of both demonstrated an association to improved quality of life. The quality of life for patients whose religious and spiritual needs were addressed scored significantly higher than others. It is important that religious and spiritual care be provided by all health care professionals. For this to happen, all healthcare staff should be trained and knowledgeable about these beliefs (2012).

National Health Services recommend for healthcare organizations to develop and implement a spiritual care policy for health care staff to be sensitive and incorporate questions related to spirituality into standard practice and assist in recognizing the spirituality needs of cancer patients [1]. Nurses should be prepared to address all dimensions of care including spirituality in order to provide holistic care to cancer patients [8]. To educate nurses and healthcare providers, more learning opportunities to stimulate critical thinking and advance understanding of how religion and spirituality improves quality of life is needed [13]. Ultimately, acknowledgment and consideration of spiritual well-being by healthcare providers is recommended in clinical practice because it facilitates better coping and overall adjustment for cancer patients resulting in an improved quality of life [3].

Conclusion

The purpose of this discussion was to investigate if religion and spirituality improve the quality of life for adult oncology patients. The findings from the literature support that practice of religion and spirituality by cancer patients positively affects their quality of life. Additionally, practice of religion and spirituality provided a positive sense of meaning, purpose, and enabled effective coping for patients who have cancer [1]. The research suggests that spiritual well-being helps cancer patients discover meaning and a sense of purpose in life resulting in effective coping responses to the disease [3].

Cancer is a life-threatening disease and spiritual well-being becomes an essential stress management practice for these patients because it serves as a buffer against stress and depression. Faith, another component of religion and spirituality, offers reassurance of strength to cope, as well as, hope for recovery. After being diagnosed with cancer, patients who have faith show increased personal strength, spiritual growth, and greater appreciation for everyday living which stimulates maximizing quality of life [3].

Researchers often focus on alternative therapies that assist with relieving cancer symptoms and treatments such as yoga, music, and other stress reduction exercises. For future research, the focus should also include the benefits of religious practices such as praying and religious music the burden of cancer disease and

management of symptoms [18]. Another suggestion to clinical practice is the use of meaning-centered therapy groups. The focus in these groups is to understand what religion means to the individual and how it impacts healthcare decisions [1]. Provision of counseling and support groups is another strategy to address the spiritual needs of cancer patients [5]. Research on religion and spirituality shows a positive correlation among cancer patients, however, it is not very clear what is being measured therefore an operational definition on spirituality must be made for future studies. Reinert, and Koenig (2013) believe that an appropriate definition of spirituality may change the way research is done on spirituality allowing researchers to properly understand the impact it might have on health outcomes [13]. The findings suggest not only the need for defining spirituality but also the need for education in order to fully understand the impact of religion and spirituality for adult oncology patients. Once these terms are clearly defined more quantitative data can be researched on this topic. For now, qualitative data supports that spiritual and religious wellbeing is a significant aspect of patient care and should be considered in the impact of quality of life for oncology patients. Ultimately when religious and spiritual needs are embraced, better health outcomes and quality of life for adult oncology patients occurs [20].

References

1. Swinton J, Bain V, Ingram S, Heys S (2011) Moving inwards, moving outwards, moving upwards: the role of spirituality during the early stages of breast cancer. *European Journal of Cancer Care* 20: 640-652.
2. National Cancer Institute (2017) Cancer Statistics. Retrieved April 17, 2017, from National Cancer Institute at the National Institutes of Health website: <https://www.cancer.gov/about-cancer/understanding/statistics>
3. Gonzalez P, Castañeda S, Dale J, Medeiros E, Buelna C, et al. (2014) Spiritual well-being and depressive symptoms among cancer survivors. *Supportive Care in Cancer* 22: 2393-2400.
4. Canada AL, Murphy PE, Fitchett G, Stein K (2016) Re-examining the Contributions of Faith, Meaning, and Peace to Quality of Life: A Report from the American Cancer Society's Studies of Cancer Survivors-II (SCS-II). *Annals of Behavioral Medicine: A Publication of the Society of Behavioral Medicine* 50: 79-86.
5. Maciejewski PK, Phelps AC, Kacel EL, Balboni TA, Balboni M, et al. (2012) Religious coping and behavioral disengagement: opposing influences on advance care planning and receipt of intensive care near death. *Psycho-Oncology* 21: 714-723.
6. Büssing A, Janko A, Baumann K, Hvidt NC, Kopf A (2013) Spiritual needs among patients with chronic pain diseases and cancer living in a secular society. *Pain Medicine (Malden, Mass.)* 14: 1362-1373.
7. Hughes MD (2008) The Holistic Way: John Wesley's Practical Piety as a Resource for Integrated Healthcare. *Journal of Religion & Health* 47: 237-252.
8. Canfield C, Taylor D, Nagy K, Strauser C, VanKerkhove K, et al. (2016) Critical Care Nurses' Perceived Need for Guidance in Addressing Spirituality in Critically Ill Patients. *American Journal Of Critical Care: An Official Publication, American Association Of Critical-Care Nurses* 25: 206-211.
9. LaMothe R (2013) The spirits of capitalism and Christianity and their impact on the formation of healthcare leaders.

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- Journal of Religion and Health 52: 3-17.
10. Pesut B, Fowler M, Taylor EJ, Reimer-Kirkham S, Sawatzky R (2008) Conceptualising spirituality and religion for healthcare. *Journal of Clinical Nursing* 17: 2803-2810.
 11. Unantenne N, Warren N, Canaway R, Manderson L (2013) The strength to cope: spirituality and faith in chronic disease. *Journal of Religion and Health* 52: 1147-1161.
 12. Kang J, Shin DW, Choi JY, Park CH, Baek YJ, et al. (2012) Addressing the religious and spiritual needs of dying patients by healthcare staff in Korea: patient perspectives in a multi-religious Asian country. *Psycho-Oncology* 21: 374-381.
 13. Reinert KG, Koenig HG (2013) Re-examining definitions of spirituality in nursing research. *Journal of Advanced Nursing* 69: 2622-2634.
 14. Barber C (2012) Spirituality and religion: a brief definition. *British Journal of Healthcare Assistants* 6: 378-381.
 15. Schreiber JA, Edward J (2015) Image of God, religion, spirituality, and life changes in breast cancer survivors: a qualitative approach. *Journal of Religion And Health* 54: 612-622.
 16. Schreiber J, Brockopp D (2012) Twenty-five years later-what do we know about religion/spirituality and psychological well-being among breast cancer survivors? A systematic review. *Journal of Cancer Survivorship* 6: 82-94.
 17. Healthy People 2020, (2017) Quality of Life. Retrieved April 20, 2017 from website: <https://www.healthypeople.gov>
 18. Hamilton JB, Galbraith KV, Best NC, Worthy VC, Moore LD (2015) African-American Cancer Survivors' Use of Religious Beliefs to Positively Influence the Utilization of Cancer Care. *Journal of Religion and Health* 54: 1856-1869.
 19. Webb JR, Toussaint L, Conway-Williams E (2012) Forgiveness and Health: Psycho-spiritual Integration and the Promotion of Better Healthcare. *Journal Of Health Care Chaplaincy* 18: 57-73.
 20. Prouty AM, Fischer J, Purdom A, Cobos E, Helmeke KB (2016) Spiritual Coping: A Gateway to Enhancing Family Communication during Cancer Treatment. *Journal of Religion and Health* 55: 269-287.

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