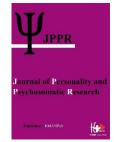


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The Role of Spirituality in Coping with Chronic Illness

Mehdi. Ghezelseflou¹

Assistant Professor, Department of Psychology, Faculty of Humanities, Gonbad Kavoos University, Gonbad Kavoos, Iran

* Corresponding author email address: m.ghezelsefloo@gonbad.ac.ir

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ABSTRACT

The objective of this study was to explore the role of spirituality in coping with chronic illness, focusing on how spiritual practices, support systems, and personal beliefs influence the daily lives and overall well-being of individuals living with chronic conditions. This qualitative research employed semi-structured interviews with 23 participants diagnosed with various chronic illnesses for at least one year. Data were collected until theoretical saturation was reached and analyzed using NVivo software. Thematic analysis was conducted to identify key themes and subthemes from the interview transcripts, providing a comprehensive understanding of the participants' experiences. The study identified four main themes: Spiritual Practices, Support Systems, Personal Spiritual Beliefs, and Impact on Daily Life. Spiritual practices such as prayer, meditation, and reading sacred texts were reported by all participants as significant coping mechanisms. Support systems, including family support, religious communities, and spiritual mentors, were crucial for 20 participants. Personal beliefs, such as faith in a higher power and finding meaning in illness, were significant for 18 participants. The impact on daily life included improved coping mechanisms, emotional well-being, and life satisfaction, as reported by 19 participants. Spirituality plays a vital role in coping with chronic illness, providing emotional support, enhancing resilience, and improving overall well-being. The findings underscore the importance of integrating spiritual care into healthcare practices to better support patients' holistic needs. Future research should explore the long-term effects of spiritual practices on health outcomes and evaluate the efficacy of spiritual care interventions in clinical settings.

Keywords: Spirituality, Chronic Illness, Coping Mechanisms, Qualitative Research, Spiritual Practices, Support Systems, Emotional Well-being.



1. Introduction

hronic illnesses, such as heart failure, cancer, diabetes, and chronic pain conditions, impose substantial physical and emotional challenges (Coutinho, 2021; Pan & Sánchez, 2022; Suksatan et al., 2022; Thomas et al., 2022; Weitkamp & Bodenmann, 2022; Zeligman & Fakhro, 2023). Research has shown that individuals often turn to spiritual and religious practices to navigate these difficulties. For instance, Bekelman et al. (2007) found a significant association between spiritual well-being and reduced depression among patients with heart failure, suggesting that spirituality can offer crucial psychological support (Bekelman et al., 2007). Similarly, Bussing et al. (2009) reported that spirituality and religiosity serve as valuable resources for patients coping with chronic pain, providing a sense of hope and enhancing pain management strategies (Büssing et al., 2009).

The relevance of spirituality in chronic illness management is further supported by studies on specific populations. Cotton et al. (2009) explored religious and spiritual coping among adolescents with sickle cell disease, revealing that these coping mechanisms were integral to managing their condition (Cotton et al., 2009). Moreover, the study by Harvey and Silverman (2007) emphasized the role of spirituality in the self-management of chronic illness among older African Americans and whites, highlighting cultural dimensions of spiritual practices (Harvey & Silverman, 2007).

Theoretical frameworks have been developed to understand the impact of spirituality on health outcomes. Narayanasamy (2006) discusses the implications of empirical studies on spirituality and culture for nurse education, underscoring the importance of integrating spiritual care into healthcare practices (Narayanasamy, 2006). The Functional Assessment of Chronic Illness Therapy—Spiritual Well-Being Scale (FACIT-Sp), developed by Peterman et al. (2002), provides a robust tool for measuring spiritual well-being in patients with chronic illnesses, facilitating the examination of spirituality's role in health outcomes (Peterman et al., 2002).

Recent studies have expanded our understanding of spirituality's impact on chronic illness. Zeligman and Fakhro (2023) investigated the relationship between posttraumatic growth and spirituality among adults with chronic illness, finding that spirituality contributes to positive psychological adjustments (Zeligman & Fakhro, 2023). Chen (2023) explored the effect of self-efficacy on spiritual health among

middle-aged and older adults with chronic diseases, emphasizing the interplay between personal beliefs and health management (Chen, 2023).

Empirical studies have consistently demonstrated the beneficial effects of spirituality on coping with chronic illness. For example, Fradelos et al. (2015) examined the effect of spirituality on the quality of life of patients with chronic kidney disease, revealing a positive correlation between spiritual practices and mental health status (Fradelos et al., 2015). Similarly, Harbali and Koç (2021) found that spiritual orientation and religious coping significantly alleviated psychosocial problems among oncology patients (Harbali & Koç, 2021).

Moreover, the qualitative study by Pendleton et al. (2002) on religious/spiritual coping in childhood cystic fibrosis highlighted the profound impact of spiritual beliefs on managing chronic conditions from a young age (Pendleton et al., 2002). These findings are echoed by Reynolds et al. (2016), whose meta-analytic review confirmed that spiritual coping is associated with better psychosocial adjustment and physical health in youth with chronic illness (Reynolds et al., 2016).

Hunter-Hernández et al. (2015) discussed missed opportunities in leveraging spirituality as a bridge to resilience in Latinos with cancer, advocating for more inclusive spiritual care practices (Hunter-Hernández et al., 2015). This perspective aligns with Kugbey et al. (2020), who explored illness perception and coping among women with breast cancer in Ghana, emphasizing the cultural context of spiritual practices (Kugbey et al., 2020).

Despite the substantial evidence supporting the positive role of spirituality in coping with chronic illness, there remain gaps in our understanding that warrant further investigation. For instance, the study by Mehrabi et al. (2015) on coping responses following a breast cancer diagnosis highlights the need for more research on specific spiritual practices and their direct effects on health outcomes (Mehrabi et al., 2015). Additionally, the work by Peng-Keller et al. (2021) on integrating the spiritual dimension into multimodal pain therapy underscores the potential benefits of comprehensive, interdisciplinary approaches to chronic illness management (Peng-Keller et al., 2021). The objective of this study was to explore the role of spirituality in coping with chronic illness, focusing on how spiritual practices, support systems, and personal beliefs influence the daily lives and overall well-being of individuals living with chronic conditions.



2. Methods and Materials

2.1. Study Design and Participants

This study employs a qualitative research design to explore the role of spirituality in coping with chronic illness. The aim is to gain in-depth understanding and insights from individuals living with chronic conditions about how spirituality influences their coping mechanisms. The study focuses on personal experiences, perceptions, and narratives, making a qualitative approach most suitable.

Participants were selected using purposive sampling to ensure a diverse representation of individuals with various chronic illnesses. Criteria for inclusion included adults (18 years and older) diagnosed with a chronic illness for at least one year, who identify spirituality as a significant aspect of their life and coping process. Recruitment was carried out through healthcare providers, support groups, and social media platforms dedicated to chronic illness communities.

Data collection continued until theoretical saturation was reached, meaning no new themes or insights were emerging from the interviews. This approach ensures that the findings are comprehensive and reflective of the range of experiences within the participant group.

2.2. Measures

2.2.1. Semi-Structured Interview

Data collection was conducted through semi-structured interviews, which allowed for flexibility in exploring participants' experiences while ensuring that key topics related to spirituality and coping were covered. An interview guide was developed, consisting of open-ended questions designed to elicit detailed responses about the participants' spiritual beliefs, practices, and how these have influenced their experience of living with a chronic illness.

The interview guide included questions such as:

Can you describe your spiritual beliefs or practices?

How has your spirituality influenced your experience with chronic illness?

Can you provide examples of how you use spirituality to cope with your illness?

Have there been times when your spirituality has been particularly important or challenging in relation to your illness? Interviews were conducted in-person, via phone, or through video conferencing, depending on the participants' preferences and geographical location. Each interview lasted between 60 to 90 minutes and was audio-recorded with the participants' consent for accuracy in transcription.

2.3. Data Analysis

The audio-recorded interviews were transcribed verbatim and analyzed using NVivo software, which facilitates the organization and coding of qualitative data. Thematic analysis was employed to identify, analyze, and report patterns (themes) within the data. The process involved:

Familiarization with the data through reading and rereading the transcripts.

Generating initial codes to categorize data segments.

Searching for themes by collating codes into potential themes.

Reviewing themes to ensure they accurately represent the data.

Defining and naming themes to provide clear and meaningful labels.

3. Findings and Results

The study included 23 participants, all of whom had been living with a chronic illness for at least one year and identified spirituality as a significant aspect of their coping process. The participant group comprised 14 women and 9 men, ranging in age from 25 to 68 years, with a mean age of 47. The chronic illnesses represented in the study included diabetes (6 participants), cancer (5 participants), rheumatoid arthritis (4 participants), multiple sclerosis (3 participants), and chronic heart disease (5 participants). The participants came from diverse religious backgrounds, including Christianity (11 participants), Islam (5 participants), Hinduism (3 participants), Buddhism (2 participants), and non-denominational spirituality (2 participants). The majority of participants (18) were married or in a long-term partnership, while 5 were single or widowed. Educational levels varied, with 12 participants holding a college degree, 7 having completed high school, and 4 possessing postgraduate qualifications.



Table 1

The Results of Qualitative Analysis

Categories	Subcategories	Concepts (Open Codes)
1. Spiritual Practices	Prayer	Daily prayers, prayer for healing, communal prayers
	Meditation	Mindfulness, guided meditation, spiritual focus
	Rituals	Religious ceremonies, personal rituals, use of sacred objects
	Reading Sacred Texts	Bible reading, Quran recitation, spiritual literature
	Spiritual Music and Chants	Hymns, mantras, listening to spiritual music
2. Support Systems	Family Support	Emotional support, shared beliefs, family prayers
	Religious Community	Church groups, mosque gatherings, spiritual support groups
	Spiritual Mentors	Guidance from religious leaders, spiritual counseling
	Peer Support Groups	Chronic illness support groups, shared spiritual practices
	Online Spiritual Communities	Virtual prayer circles, online meditation groups
3. Personal Spiritual Beliefs	Faith in Higher Power	Trust in God, belief in divine plan, surrender to a higher power
	Meaning and Purpose	Finding purpose in suffering, life mission, spiritual growth through illness
	Afterlife Beliefs	Belief in heaven, reincarnation, spiritual continuation
	Karma and Divine Justice	Belief in karma, divine retribution, cosmic justice
	Resilience Through Faith	Strength through belief, enduring hardships, faith as a coping mechanism
	Acceptance and Peace	Inner peace, acceptance of illness, spiritual serenity
4. Impact on Daily Life	Coping Mechanisms	Reduced anxiety, enhanced coping strategies, positive mindset
	Lifestyle Changes	Healthier habits, adopting spiritual routines, dietary changes
	Emotional Well-being	Increased joy, decreased depression, emotional stability
	Interpersonal Relationships	Improved relationships, empathetic communication, spiritual connection with others
	Life Satisfaction	Increased life satisfaction, contentment, gratitude
	Meaningful Activities	Volunteering, spiritual service, engaging in meaningful work

3.1. Spiritual Practices

Prayer: Participants frequently mentioned engaging in daily prayers, praying for healing, and participating in communal prayers as integral to their coping strategies. One participant noted, "I pray every morning and night, asking for strength and healing." Another shared, "Our church's prayer group has been a huge support; we pray for each other's health."

Meditation: Meditation practices such as mindfulness, guided meditation, and spiritual focus were common among participants. "Meditation helps me center my thoughts and find peace amidst the pain," remarked a participant. Another added, "Guided meditations with a spiritual focus help me feel connected to something greater."

Rituals: Personal and communal rituals, including religious ceremonies and the use of sacred objects, were highlighted. A participant shared, "Lighting candles and attending mass gives me a sense of calm and connection." Another stated, "I have a small altar at home where I perform daily rituals."

Reading Sacred Texts: Engaging with sacred texts, such as reading the Bible or reciting the Quran, was a common practice. "Reading the Bible every night gives me comfort and guidance," said one participant. Another mentioned,

"Reciting the Quran helps me feel at peace and strengthens my faith."

Spiritual Music and Chants: Listening to hymns, mantras, and other forms of spiritual music was a significant practice. A participant expressed, "Listening to hymns lifts my spirit and gives me hope." Another shared, "Chanting mantras helps me stay calm and focused."

3.2. Support Systems

Family Support: Emotional and spiritual support from family members was crucial for many participants. "My family prays with me and supports me emotionally," mentioned one participant. Another said, "Shared beliefs and practices have brought us closer during my illness."

Religious Community: Involvement in religious communities, such as church groups and mosque gatherings, provided significant support. "My church group is like a second family; their prayers and support mean the world to me," shared a participant. Another added, "Our mosque's gatherings provide a sense of community and spiritual upliftment."

Spiritual Mentors: Guidance from spiritual mentors, including religious leaders and spiritual counselors, was valuable. A participant noted, "My spiritual mentor's advice has been a beacon of light during tough times." Another said,



"Spiritual counseling helps me navigate my feelings and stay strong in my faith."

Peer Support Groups: Chronic illness support groups with shared spiritual practices were beneficial. "Our support group discusses how faith helps us cope, which is incredibly encouraging," remarked a participant. Another shared, "Knowing others use spirituality in their journey makes me feel less alone."

Online Spiritual Communities: Virtual prayer circles and online meditation groups provided additional support. "I joined an online prayer group, and it's amazing how connected I feel," said one participant. Another mentioned, "Online meditation sessions have been a lifeline during the pandemic."

3.3. Personal Spiritual Beliefs

Faith in Higher Power: Trust in a higher power, belief in a divine plan, and surrendering to a higher power were prevalent themes. "I believe that God has a plan for me, and that keeps me going," shared a participant. Another said, "Surrendering to a higher power gives me peace."

Meaning and Purpose: Finding meaning and purpose in suffering, identifying a life mission, and experiencing spiritual growth through illness were common. "My illness has given me a deeper sense of purpose," remarked a participant. Another added, "I believe this experience is meant to strengthen my spirit."

Afterlife Beliefs: Beliefs in heaven, reincarnation, or spiritual continuation offered comfort. "Believing in heaven gives me hope for the future," said one participant. Another mentioned, "The idea of reincarnation helps me see my illness as part of a larger journey."

Karma and Divine Justice: Belief in karma, divine retribution, and cosmic justice influenced coping. "I trust that everything happens for a reason and karma will balance things out," shared a participant. Another stated, "Believing in divine justice helps me accept my situation."

Resilience Through Faith: Strength through belief, enduring hardships, and using faith as a coping mechanism were highlighted. "My faith gives me the strength to face each day," remarked one participant. Another said, "Enduring hardships feels more manageable with my strong belief in God."

Acceptance and Peace: Achieving inner peace, accepting the illness, and experiencing spiritual serenity were important aspects. "I've found peace by accepting my illness as part of my spiritual journey," shared a participant. Another mentioned, "Spiritual serenity helps me cope with daily challenges."

3.4. Impact on Daily Life

Coping Mechanisms: Participants reported reduced anxiety, enhanced coping strategies, and a more positive mindset through spirituality. "My anxiety lessens when I focus on my spiritual practices," noted one participant. Another shared, "Spirituality gives me a positive outlook despite my illness."

Lifestyle Changes: Healthier habits, adopting spiritual routines, and making dietary changes were influenced by spirituality. "I've started eating healthier and incorporating spiritual routines into my day," said a participant. Another mentioned, "My diet has changed to align with my spiritual beliefs."

Emotional Well-being: Increased joy, decreased depression, and emotional stability were reported. "Spirituality brings joy to my life even on tough days," remarked a participant. Another shared, "I feel more emotionally stable and less depressed thanks to my faith."

Interpersonal Relationships: Improved relationships, empathetic communication, and spiritual connections with others were noted. "My relationships have deepened through shared spiritual practices," said one participant. Another mentioned, "Empathetic communication rooted in spirituality has strengthened my bonds with others."

Life Satisfaction: Participants expressed increased life satisfaction, contentment, and gratitude. "I feel more satisfied with my life and grateful for each day," noted one participant. Another shared, "Contentment comes from seeing my life through a spiritual lens."

Meaningful Activities: Engaging in meaningful activities such as volunteering, spiritual service, and meaningful work was significant. "Volunteering gives me a sense of purpose and aligns with my spiritual values," said one participant. Another mentioned, "Engaging in spiritual service brings fulfillment and joy.

4. Discussion and Conclusion

The findings from this study reveal the significant role of spirituality in coping with chronic illness. Four main themes emerged from the semi-structured interviews: Spiritual Practices, Support Systems, Personal Spiritual Beliefs, and Impact on Daily Life. Each theme encompassed various subthemes and concepts that elucidate how spirituality aids individuals in managing their chronic conditions.



Spiritual Practices were integral to participants' coping mechanisms. Daily prayers, meditation, rituals, reading sacred texts, and listening to spiritual music or chants were frequently mentioned as practices that provided comfort and strength. This aligns with the findings of Bussing et al. (2009), who identified spirituality and religiosity as key resources for patients with chronic pain conditions (Büssing et al., 2009). Similarly, Cotton et al. (2009) reported that adolescents with sickle cell disease relied heavily on religious and spiritual coping mechanisms (Cotton et al., 2009).

Support Systems also played a crucial role. Emotional and spiritual support from family, religious communities, spiritual mentors, peer support groups, and online spiritual communities were highlighted as vital sources of strength. Bekelman et al. (2007) emphasized the importance of spiritual well-being in reducing depression among patients with heart failure, underscoring the value of a supportive spiritual community (Bekelman et al., 2007).

Personal Spiritual Beliefs such as faith in a higher power, finding meaning and purpose, beliefs in the afterlife, karma, and resilience through faith were recurrent themes. Participants often spoke about how these beliefs helped them find peace and acceptance of their illness. This is consistent with the study by Harvey and Silverman (2007), which found that spirituality significantly influenced the self-management of chronic illness among older adults (Harvey & Silverman, 2007).

The Impact on Daily Life included improved coping mechanisms, lifestyle changes, enhanced emotional wellbeing, better interpersonal relationships, increased life satisfaction, and engagement in meaningful activities. These findings resonate with the work of Fradelos et al. (2015), who observed that spirituality positively influenced the quality of life in patients with chronic kidney disease (Fradelos et al., 2015).

The results of this study are well-supported by existing literature. For instance, Baetz and Bowen (2008) found significant associations between chronic pain, fatigue, and spirituality, which echoes our participants' experiences of finding relief and strength through spiritual practices (Baetz & Bowen, 2008). The importance of meditation, as highlighted in our findings, is also corroborated by the work of Chen (2023), who explored the effect of self-efficacy on spiritual health among middle-aged and older adults with chronic diseases, emphasizing the role of mindfulness and spiritual focus (Chen, 2023).

Support systems, particularly the role of religious communities and spiritual mentors, have been extensively documented. Hunter-Hernández et al. (2015) discussed the missed opportunity of using spirituality as a bridge to resilience in Latinos with cancer, highlighting the need for stronger support networks within these communities (Hunter-Hernández et al., 2015). This aligns with our findings on the crucial role of peer support groups and online spiritual communities, especially during times of isolation and physical limitations.

Personal spiritual beliefs and their impact on coping strategies were a significant aspect of our study. The belief in a higher power and finding meaning in suffering were common themes. Zeligman and Fakhro (2023) found that spirituality contributed to posttraumatic growth among adults with chronic illness, supporting our findings that faith can lead to positive psychological adjustments (Zeligman & Fakhro, 2023). Additionally, Reynolds et al. (2016) in their meta-analytic review, confirmed that spiritual coping is associated with better psychosocial adjustment and physical health, particularly in youth with chronic illness (Reynolds et al., 2016).

The impact of spirituality on daily life, including lifestyle changes and emotional well-being, is consistent with findings from various studies. For example, Harbali and Koç (2021) found that spiritual orientation and religious coping significantly alleviated psychosocial problems among oncology patients (Harbali & Koç, 2021). Our participants also reported improved interpersonal relationships and increased life satisfaction, which aligns with the results of Hasanah et al. (2022) who demonstrated that spiritual-based care interventions significantly enhanced the quality of life of children with chronic diseases (Hasanah et al., 2022).

Overall, the results of this study are consistent with a substantial body of literature that highlights the multifaceted role of spirituality in managing chronic illness. The recurring themes of spiritual practices, support systems, personal beliefs, and their impact on daily life underscore the importance of a holistic approach to chronic illness management that includes spiritual care.

This study has several limitations. Firstly, the sample size was relatively small and may not fully represent the diversity of experiences among individuals with chronic illnesses. Additionally, the study relied on self-reported data, which could be influenced by participants' desire to present themselves in a positive light. The cross-sectional nature of the study also limits the ability to assess changes in spirituality and coping over time.

JPPR
Journal of Personality and Psychometric Research

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Future research should aim to include larger and more diverse samples to enhance the generalizability of the findings. Longitudinal studies would be valuable in understanding how spiritual practices and beliefs evolve over the course of chronic illness. Additionally, exploring the specific impact of different spiritual practices on various aspects of health could provide more detailed insights. There is also a need for more intervention-based research to evaluate the efficacy of spiritual care programs in clinical settings.

Healthcare providers should recognize the importance of spirituality in the lives of patients with chronic illness and incorporate spiritual care into routine practice. This could involve training healthcare professionals in spiritual care competencies and developing protocols to assess and address patients' spiritual needs. Creating opportunities for patients to engage in spiritual practices and connect with support systems within the healthcare environment could significantly enhance their coping strategies and overall well-being. By adopting a holistic approach that includes spiritual care, healthcare systems can better support patients in managing the complex challenges associated with chronic illness.

Authors' Contributions

Authors contributed equally to this article.

Declaration

In order to correct and improve the academic writing of our paper, we have used the language model ChatGPT.

Transparency Statement

Data are available for research purposes upon reasonable request to the corresponding author.

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Declaration of Interest

The authors report no conflict of interest.

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Ethics Considerations

The study protocol adhered to the principles outlined in the Helsinki Declaration, which provides guidelines for ethical research involving human participants.

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JPPR
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