Spirituality and Religiosity as an Approach to Coping for Adolescents Living with Sickle Cell Disease: A Review of the Literature

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Overview

- Significance
- Purpose
- Literature Review
  - Key Themes
  - Limitations
  - Implications
Significance

- Sickle cell disease is a serious debilitating chronic illness and global problem
- Spirituality and religiosity are common among adolescents
- Spirituality and religiosity increase coping and positively correlates with health outcomes
  (Cotton, Zebracki, Rosenthal, Tsevat, & Drotar, 2006)
Purpose

- To examine how adolescents living with sickle cell disease use spirituality and religiosity (S/R) to cope
- To determine how the use of S/R among adolescents living with sickle cell disease impact health outcomes
Spirituality and Religiosity

- **Spirituality** - Innate capacity to transcend and experience meaning and purpose in life beyond one’s material, temporal, existence through contemplation and action aimed toward the sacred
  (Benson, Roehlkepartain, & Rude, 2003)

- **Religiosity** - Commitment to an organized way of knowing and orienting to the religious community’s subject of worship
  (Schaefer, 2010)
Inclusion Criteria

- S/R among adolescents with SCD
- S/R among parents of children or adolescents with SCD
- S/R among adults with SCD
- Published in peer reviewed journals
- Qualitative and quantitative studies
Search Strategy

• Searched 6 computerized databases
• Author searches
• Reviewed 89 studies for possible eligibility
• A total of 11 studies reviewed
  – 1 reported on children, 3 reported on children and adolescents, 1 reported on adolescents, and 6 reported on adults inclusive of 18-21 year-olds.
Coding Data

• Year of dissemination
• Participant characteristics
  – Age
  – Ethnicity
  – Gender
• Study design
Literature Review- Key Themes

• S/R as sources for coping
• S/R enhances pain management
• S/R influences health care utilization
• S/R improve quality of life
Literature Review - Key Themes

• S/R as sources for coping
  – Adolescents relied on their S/R when managing their SCD
    (Cotton, Grossoehme, Rosenthal, McGrath, Roberts, Hines, & Tsevat, 2009; Sibinga, Shindell, Casella, Duggan, & Wilson, 2006; Yoon & Black, 2006)
  – Parents relied on S/R on behalf of their child to assist them in coping with their SCD
    (Sibinga et al., 2006; Yoon & Black, 2006)
  – Parents desired to discuss further with their child’s health care provider, but felt providers would not be interested
    (Sibinga et al., 2006; Yoon & Black, 2006)
• S/R enhances pain management
  – Prayer, hoping, spiritual healing were aspects of S/R used when coping with pain (Anie, Stepsoe, Ball, Dick, & Smalling, 2002; Cotton, et al., 2009)
  – Disease severity was associated with greater reliance of S/R (Sibinga et al, 2006)
  – S/R used more often with those who were older and used two or more analgesics (Yoon & Black, 2006)
Literature Review- Key Themes

• S/R influences health care utilization
  – Adolescents using active coping inclusive of their S/R were more likely to access health services
    – (Anie, et al., 2002)
  – Positive religious coping was related to fewer hospitalizations
    (Bediako, Lattimer, Haywood, Ratanawongsa, Lanzkron, & Beach, 2011)
  – Low to moderate church attendance was associated with less health care utilization
• S/R improve quality of life
  – There was a positive correlation between spirituality and perception of HRQOL among adolescents
    (Cotton et al., 2009)
  – There was a positive correlation between spirituality and perception of HRQOL and adults
    (Adegbola, 2011; Mann-Jiles & Morris, 2009)
Literature Review - Limitations

• Lack of data from adolescents and children when parents surveyed
• Need to provide conceptual definitions for spirituality, religiosity, and related terms
• Longitudinal studies may provide further evaluation of the relational influence of S/R over time
• Detailed documentation of pain experiences in relationship to use of S/R is necessary
• Lack of current studies
• Most of the literature specific for adults
Literature Review-Implications

- Adolescents’ perspectives may complement parental reports and guide further inquiry.
- Conceptual definitions of S/R and related concepts are essential especially when working with children/adolescents.
- As the severity of illness and pain experiences increase, a holistic approach to managing pain may be effective.
- Greater understanding of the role of S/R to QOL is warranted.
References


References


References


