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Spirituality and Chronic Illness: A Concept Analysis

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Abstract: Clarifying the concept of spirituality in the context of chronic illness is vital towards the application of holistic care. Utilizing Walker and Avant's method of concept analysis, this paper endeavors to discover the characteristics and attributes of spirituality and consequently propose a definition of spirituality in the context of chronic illness.

Keywords: spirituality, chronic illness, concept analysis

1. Background

Within the arena of the nursing profession, patients' biopsychosocial-spiritual being is increasingly gaining a vital recognition. It is asserted in the holistic model of care that nurses should consider the spiritual needs of their patients in the provision of total patient care (Govier, 2000). Hence, clarifying the concept of spirituality is vital towards the application of holistic care. Nonetheless, in spite of the plethora of research studies that has been conducted on spirituality as it relates to the terminally ill and dying clients there is no operational definition written regarding the concept of spirituality in the eyes of clients with chronic illnesses.

2. Aims or Purpose of Analysis

The aim of this paper is to explore and develop an operational definition of spirituality as applied to clients with chronic illnesses. It endeavors to discover the characteristics and attributes of this concept and consequently propose a definition of spirituality based on the findings of the study. Finally, the output of this paper is aimed to be employed in the development of a middle-range theory.

Papers available online between 1943 and 2012 in the EbscoHost and Medline databases were retrieved for analysis. The search engine Google was also used to examine additional references to 'spirituality'. Spirituality, spiritual, and chronic illness were the terms initially used to search each database. And Walker and Avant strategy for concept analysis is utilized.

3. Definition and Uses of the Concept

3.1 Spirituality

Spirituality is a complex, subjective, intangible, and multidimensional term that is not easy to define (Tanyi, 2002). The Oxford dictionary (2012) describes it as "relating to or affecting the human spirit or soul as opposed to material or physical things" while Merriam-Webster's Dictionary (2012) relates it to "supernatural beings or phenomena". It has various related concepts such as spiritual, religion, religiosity, faith.

Some have confusingly characterized spirituality as religiosity. This is because spirituality denotes "sensitivity or attachment to religious values" (Merriam-Webster's Collegiate Dictionary, 2002) and is concerned or related to religion or religious belief or values (Oxford dictionary, 2012; Merriam-Webster's Dictionary, 2012). But the two, even though contiguous, are different. Spirituality has a broader scope than religiosity. Tanyi (2002) explains that religion involves a structured entity which includes rituals and practices about a God or a higher power. It is a type of spiritual experience and considered as an expression of spirituality (Rowe & Allen, 2004).

On the other hand, spirituality goes beyond the boundaries of religion. Rowe & Allen, (2004) propose that a person can be spiritual without being religious. Lastly, for some individuals, spirituality may be related to religion, but for others (i.e., atheist), it may not be (Tanyi, 2002).

Spirituality is about finding meaning and purpose in one's life and understanding the fundamental nature of human life (Buck, 2006; Thinganjana, 2007; Underwood and Teresi as cited by Büssing and Koenig, 2010; Thinganjana, 2007). It is about seeking to transcend self or the transcendental truth (Buck, 2006; Büssing and Koenig, 2010; Emblen as cited by Newlin, Knafl, & Melkus, 2002). Sheldrake (2007) declares that it is the "essence of being, and deepest values and meaning by which people live". In the Christian perspective, spirituality has to do with "our experiencing of God" (McBrien, 1980, p. 1058). Based form these definitions, spirituality, therefore, is a personal path which makes it possible for a person to discover his or her ontological perspective in life which may or may not be related to religion.

Discovering this ontological perspective can only be accomplished through a sense of connectedness, relatedness, or relationship with Divine, Supreme Being, or God (Buck, 2006; Büssing and Koenig, 2010). Buck (2006) points out that this divine or Supreme Being "may or may not involve religious structures or traditions". Moreover, for some who have grains of pantheistic belief considers connectedness with nature as a way to achieve their self-transcendence (Mander, 2012).

The term spirituality has been utilized across health and other disciplines. Spirituality has been used in psychology, business, in various pedagogy such as in general undergraduate course, or specifically in the teaching of accounting, and physical therapy (Richards & Bergin, 2003; Tischler, 1999; Lindholm, & Astin, 2008; Hocking, Myers, & Cairns, n.d; Sargeant, & Newsham, 2012). Spirituality has also been used in various nursing research studies that specifically discuss chronic illnesses: Alzheimer's disease, cervical cancer, chronic pain, chronic mental illness (Beuscher, 2007; Nthabiseng & Prevan, 2012, Sept; Büssing, Michalsen, Balzat, Grünther, Ostermann, Neugebauer, & Matthiessen, 2009; McFadden, 2006). Also, the spirituality of persons who are experiencing the chronic complications of mustard gas in the disaster of war was studied (Ebadi, Ahmadi, Ghanei, & Kazemnejad, 2009).

3.2 Chronic Illness

Chronic Illness or chronic disease has been defined as an illness that has a lengthy duration which is permanent (Merriam-Webster's Dictionary, 2012). It does not often resolve spontaneously and is rarely cured completely. Such illness has unpredictable episodes and has uncertain outcome and is often with intrusive symptoms that may get slowly worse over time with intermittent or progressive disability which may lead to death (Charmaz, 2007; Australian Institute of Health and Welfare, 2012).

Chronic illnesses include cardiovascular diseases (e.g., heart disease, stroke, hypertension), diabetes, cancer, chronic respiratory diseases (e.g., asthma), and others, such as mental disorders (e.g., chronic fatigue syndrome), vision and hearing impairment, oral diseases, bone and joint disorders (e.g., multiple sclerosis, arthritis), and genetic disorders (e.g., epilepsy, hemophilia, cystic fibrosis) (World health Organization, 2005; Chronic Illness Alliance, 2005).

One of the biggest fears is the uncertainty associated with chronic illness (American Psychological Association, 2012). Hence, it is defined not only by the physical but also the mental and spiritual effects of the disease. Bishop (2005, p. 219) defines chronic illness as "a lifelong process of adapting to significant physical, psychological, social, and environmental changes" as a result of illness. Therefore, living with chronic illness affects a person's quality of life. An individual with chronic illness is faced with issues that often deal with intense physical and psychological stressors as a consequence of living with the illness. It is characterized by changes in self-management behavior such as following a medication and dietary regimen, monitoring blood sugar level, exercising, foot care and at the same time managing ordinary responsibilities (Funnell, Brown, Childs, Haas, Hosey, Jensen, & ... Weiss, 2012 ; Chronic Illness Alliance, 2005). Some patients even experience "stigma and discrimination" (Charmaz, 2007) such as those with AIDS and hepatitis. Finally, patients' struggle with chronic symptoms can bring about "feelings of guilt, loss, sadness, anxiety, diminished self-esteem, loss of role-function, communication problems with family and friends, questions about meaning in life, and religious struggles ('Why me?'), etc" (Büssing, 2010).

3.3 Attributes of Spirituality

Walker & Avant (2005) proposes that it is important to define attributes because they are significant characteristics that help to differentiate one concept from another related concept and clarify its meaning. Moreover, McKenna (as cited in Xyrichis & Ream, 2008) recommends that it is preferable to have fewer attributes that actually characterize a concept well rather than have several attributes that are "tangentially" related to the concept. Four key defining attributes were identified for the concept spirituality for a person who has a chronic illness:

- Faith and attachment with God: it involves believing that God or Supreme Being would empower and help.
- Connectedness with others: entails a mutual interpersonal relationship (e.g., family, significant others, church, spiritual counselors, etc.) which provide a sense of being and possible encouragement to go on with life.
- Personal life meaning and purpose: the ontological philosophical perspective which directs a person towards hope, growth and change or even achieving new perspectives in life. This will assist the person to cultivate the will and strength to survive and deal with the limitations related to his or her chronic illness
- Inner strength and peace: when the individual accepts his situation without reproach; and accepts that God is in control despite of the present chronic and debilitating illness.

4. Cases

4.1 Model Case

Mrs. M is a 59-year-old widow who was discharged from the hospital three weeks ago after amputation of the left great toe due to gangrene. Mrs. M who has been widowed for 32 years has two sons and three daughters. She used to have a small eatery in front of San Miguel Corp where her daughter now works as a finance manager. She currently lives with her fourth child and her family who takes care of her.

She has been a diabetic for almost five years and smokes a half pack of cigarette per day for almost two decades. Her blood sugar level had been fluctuating and her glycosylated hemoglobin is 11.5% which is far from normal. She seldom ate on time and chose to eat foods that consist of simple carbohydrates and high fat. Due to her amputated foot Mrs. M tend to sit around or visit neighbors and play cards (e.g. *tung-it*). She felt guilty about her inability to follow the treatment regimen of her diabetes. She tried to stop smoking for a couple of times (around four times) and start an exercise program but "surrendered". Her daughter tried to give her the prescribed dietary plan but she refused to it eat and even started a quarrel with her.

However, with the subsequent number of visits of her pastor and a newly found religious belief, Mrs. M develops a new set of values and beliefs on her roles as a child of God, as a mother and grandmother. She realized her worth as a person and realized that she has a purpose in life – that is to share the good news of salvation to her family and to other people. She now believes that God would empower her to adhere to the treatment regimen of her chronic illness. She has come to enjoy the quality time with her family, neighbors and friends from church. Moreover, she adheres with the prescribed treatment of her diabetes. She is very happy to finally stop smoking which she had never thought to accomplish. Mrs. M says, "When I found out that I have DM I was at first in denial and then depressed. But then I realized that I still have more years to spend in this life. My family, grandchildren love me and I know God would help me meet the demands of this illness. I know that there is a God who is all-powerful and always help me cope up. I know that He is aware and concerned about the details of my life. I always talk to Him. God loves me." This model case represents an ideal example of spirituality and includes all of the defining attributes.

4.2 Contrary cases

Mr. Q is a 45-year old married and unemployed client. He was admitted to the emergency department due to uncontrolled hypertension. According to him he has not taken his maintenance drugs for two months. He smokes one pack of cigarette a day, do not exercise, eats a high fat and cholesterol diet. Mr. Q says, "Most of the times I do not have money to buy my medicine. But if ever I have, I prefer to buy cigarette with it. But despite all these I know that God will do everything for me. I don't need to stop smoking and exercise. God will not forsake me. He loves me."

4.3 Antecedents and Consequences

Walker and Avant (2005) describe antecedents as events or incidents that must occur prior to the occurrence of a concept, while consequences are events that occur as result of it. It is vital to identify antecedents and consequences for they can clarify the social contexts within which the concept is used. Also, they can also facilitate in refining the attributes (Walker & Avant 2005).

Antecedents of spirituality are "pivotal life events" and "search for meaning" (McBrien, 2006). Life events in person with chronic illness such as acute exacerbation of COPD, flare-up of multiple sclerosis, the feeling of hopelessness due to the demands of the illness can be stimuli towards "spiritual awareness and growth" (Meravigila, 1999). Search for meaning requires understanding of the threatening or seemingly hopeless situation or event and its impact on life.

Consequences of spirituality include sense of hope and transcendence (McBrien, 2006). Spirituality could also lead to a deeper meaning in life (Fawcett and Noble, 2004) and transformation of consciousness and lives (McBrien, 1980). It also has positive impact on the physical, psychosocial, and spiritual well-being (Oh & Kang, 2000 Oct; Nauert, 2011 Oct 27). Spirituality has shown beneficial impact on health outcomes. For instance, several studies have found the relationship between spirituality and glycemic control and self management (Newlin, Melkus, Tappen, Chyun, & Koenig, 2008; Harris, 2008; Thinganjana, 2007) and depression (Kilbourne, Cummings, & Levine, 2009).

4.4 Empirical referents

The final step in a concept analysis is to identify empirical referents for the defining attributes (Walker & Avant 2005). Despite of being abstract and subjective, numerous instruments have been developed and utilized to measure the concept spirituality.

The SpREUK-P SF17 is specifically useful in measuring the spirituality of person in the context of how he or she copes with chronic illness. SpREUK is an acronym of the German translation of "Spiritual and Religious Attitudes in Dealing with Illness". The instrument has been used in various research studies and have been shown to be reliable and valid (Büssing, Reiser, Michalsen, & Baumann, 2012; Büssing, 2010; Dezutter, Luyckx, Schaap-Jonker, Büssing, Hutsebaut, 2010). Spiritual Well-Being Scale is a 20-item self-administered scale designed to measure spiritual wellbeing in both its religious (RWB) and existential (EWB) senses (Paloutzian and Ellison, 1982). It has been used in numerous studies (O'Connor, Guilfoyle, Breen, Mukhardt, & Fisher, 2007; Peterman, Fitchett, Brady, Hernandez, & Cella, 2002).

Another instrument being utilized is Reed and Belcher's Spiritual Perspective Scale (SPS). It is a 10- item selfadministered or structured interview formatted scale which they call the It measures a persons' perspectives on the extent to which spirituality permeates his or her life and a person's engagement in spiritually-related interactions. It has been tested in healthy and terminally ill adults which revealed a good reliability, accuracy and relevance. (Spirituality: Toolkit of instruments to measure end-of-life care, 2004). An example of the instrument is seen in the table below. Other instruments include Spiritual Needs Scale which has been used in various research studies (Yong, Kim, Han, Puchalski, 2008; Büssing, Balzat, Heusser, 2010; Höcker, 2011) and Spiritual Needs Questionnaire (SpNQ) which measures aspects such as religious, meaning, peace, connection.

4.5 Spiritual Perspective Scale (SPS)

In talking with your family or friends, how often do you mention spiritual matters?

- 1) How often do you share with others the problems and joys of living according to your spiritual beliefs?
- 2) How often do you read spiritually-related material?
- 3) How often do you engage in private prayer or meditation?

Response Choices for items 1 to 4:

- 1) Not at all
- 2) Less than once a year
- 3) About once a year
- 4) About once a month
- 5) About once a week
- 6) About once a day
- 7) Forgiveness is an important part of my spirituality
- 8) I seek spiritual guidance in making decisions in my everyday life
- 9) My spirituality is a significant part of my life.

- 10)I frequently feel very close to God or "higher power" in prayer, during public worship or at important moments in my daily life.
- 11)My spiritual views have had an influence upon my life
- 12)My spirituality is especially important to me because it answers many questions about the meaning of life.

Response Choices for items 6 to10

- 1) Disagree Very Strongly
- 2) Disagree Strongly
- 3) Disagree
- 4) Agree
- 5) Agree Strongly
- 6) Agree Very Strongly

5. Conclusion

Using Walker and Avant's method of concept analysis, a definition of spirituality was identified. Spirituality in a person with chronic illness is a personal path, a journey, which makes it possible for a person to discover his or her ontological perspective in life as well as cope with the chronic illness. It inspires and motivates individuals to achieve their optimal being. For many, this can be accomplished through a sense of connectedness or relationship with God, the Divine or Supreme Being. While for some, it can be accomplished by connectedness with nature or others.

The attributes of spirituality include pivotal life events and search for meaning. Antecedents are faith and attachment with God, connectedness with others, personal life meaning and purpose, and inner strength and peace. The consequences consist of sense of hope and transcendence, a deeper meaning in life, transformation of consciousness and lives, positive impact on the physical, psychosocial, and spiritual well-being, and beneficial impact on health outcomes. In the face of of all these findings, the concept of spirituality in a person with chronic illness still entails further study and ought to be empirically tested to the scientific community.

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