

Religious, spiritual support benefits men and women facing chronic illness: study

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Religious support, including care from congregations, religious counseling and assistance from pastors, is associated with better mental health outcomes for women and with better physical and mental health for men, according to a University of Missouri study. Credit: St. Katherine's Church -- UK

Individuals who practice religion and spirituality report better physical and mental health than those who do not. To better understand this relationship and how spirituality/religion can be used for coping with significant health issues, University of Missouri researchers are examining what aspects of religion are most beneficial and for what populations. Now, MU health psychology researchers have found that religious and spiritual support improves health outcomes for both men and women who face chronic health conditions.

"Our findings reinforce the idea that religion/spirituality may help buffer the negative consequences of chronic health conditions," said Stephanie Reid-Arndt, associate professor of health psychology in the School of Health Professions. "We know that there are many ways of coping with stressful life situations, such as a chronic illness; involvement in religious/spiritual activities can be an effective coping strategy."

Religious and spiritual support includes care from

congregations, spiritual interventions, such as religious counseling and forgiveness practices, and assistance from pastors and hospital chaplains. The recent publication from the MU Center for Religion and the Professions research group, authored by Reid-Arndt, found that religious support is associated with better mental health outcomes for women and with better physical and mental health for men.

"Both genders benefit from social support - the ability to seek help from and rely on others - provided by fellow congregants and involvement in religious organizations," said co-author Brick Johnstone, health psychology professor.
"Encouragement to seek out religious and spiritual supports can assist individuals in coping with stress and physical symptoms related to health issues. Health care providers can urge patients to take advantage of these resources, which provide emotional care, financial assistance and opportunities for increased socialization."

The study examined the role of gender in using spirituality/religiosity to cope with chronic health conditions and disabilities, including spinal cord injury, brain injury, stroke and cancer. Using measures of religiousness/spirituality, general mental health and general health perception, the researchers found no differences between men and women in terms of self-reported levels of spiritual experiences, religious practices or congregational support. This finding contrasts with other studies that suggest women may be more spiritual or participate in religion more frequently than men.

"While women generally are more religious or spiritual than men, we found that both genders may increase their reliance on spiritual and religious resources as they face increased illness or disability," Johnstone said.

For women, mental health is associated with daily spiritual experiences, forgiveness and



religious/spiritual coping, the study found. This suggests that belief in a loving, supportive and forgiving higher power is related with positive mental coping for women with chronic conditions. For men, religious support - the perception of help, support and comfort from local congregations - was associated with better self-rated health.

Johnstone is director of the MU Spirituality and Health Research program. He has completed several studies examining the relationships that exist among religion, spirituality and health, particularly for individuals with different chronic disabling conditions and for those from different faith traditions.

More information: The study, "Gender Differences in Spiritual Experiences, Religious Practices, and Congregational Support for Individuals with Significant Health Conditions," was published in the *Journal of Religion, Disability & Health*.

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