

Impact of Religion/Spirituality on Health: What Are The Evidences?

Abstract

From advancement of mechanistic view of human body to shifting paradigm of evaluation in medicine, the world has changed a lot in the last two decades in terms of visualizing a person as One Whole Being. Recently many studies have evolved questioning spirituality benefits on health. Articles largely concentrate on reduction of physical as well as mental symptoms through association with religious practices. On the other hand, some argue on its association considering error in research designs and bias in studies that have linked a positive correlation between religion and health. This review article has considered both accounts of objections as well as neutral studies along with recent developments, which is basically the integration of spirituality into medical curriculum. Why it is now gaining attention? Why in need of most of the distressed patients? How religion affects coping and perception of a person and help in crisis? Current approach is critically analyzed for further studies to establish ambiguity in many areas and discussed benefits as how health system can be improved through incorporation of spiritual aspect into health assessment.

Keywords: Spirituality; Religion; Psychiatry; Mental health

Review Article

Volume 2 Issue 3 - 2015

Hena Jawaid*

Aga Khan University Hospital, Pakistan

***Corresponding author:** Hena Jawaid, Aga Khan University Hospital, B 73 Block 06 Gulshan E Iqbal, Karachi, Pakistan, Tel: 0333-7927925; Email: henajawaid000@hotmail.com

Received: November 9, 2014 | **Published:** March 12, 2015

Introduction

Health of mind and body

The Ancient Greek period focused body and mind using two approaches [1] the materialist; stating matter, or brain [2] the persona list; central in the person is the core called the soul, self, or ego states i.e., thought and emotion.

In most of the cultures of the world, both in ancient and in modern times care for the soul and body were integrated. Those who were assigned to the care of people in the culture attended to both their physical and spiritual needs; there was no dichotomy between the needs of the body and those of the spirit. In many ancient cultures, the shaman was a religious figure as well as healer (Shamans are still active in many cultures), also in Christianity; Jesus was a healer of body and spirit. In the last few decades, this separation has resulted in religiosity that is solely dedicated to spiritual concerns, while physicians and scientists are dedicated to the physical ones [1]. Rene Descartes was a seventeenth-century philosopher who believed in mechanical laws and gave little or no concern to meaning. His ideologies are dealing with rupture of body and spirit, the healing picture, which came to surface, contained detached body and soul [3].

Vision of machine

Due to rapid succession of discoveries in the last couple of decades and progression of neuro-anatomy, neurophysiology and micro-biology, the brain and behavior discussions got a new vision; vision of machine, science and objectivity. With time, old belief of spiritual highness and intellectual well-being were overshadowed by molecular sciences.

The authors of the book called, "Persuasion and healing" [4] holds that effort should be made to steer between doubt

and the acceptance. Too much "skepticism" dependent upon standardized scientific methods can miss real phenomena, while too enthusiastic "willingness" to accept every subjective finding may lead to false results. Remen [5] who has developed Commonwealth Retreats for people with cancer, described it well: "Helping, fixing, and serving represent three different ways of seeing life. When you help, you see life as weak. When you fix, you see life as broken. When you serve, you see life as whole. Fixing and helping may be the work of the ego, and service the work of the soul." Every person has his/her own life stories, relationships, meanings and purpose of life, simply treating a medical diagnosis is not more than approaching a patient from a materialist point of view [6].

Significance Of Religion /Spirituality In Life

Religion deals with external functions and an apparent code of conduct while spirituality concerns with esoteric dimensions of personality like finding serenity with nature or with surrounding and with God, also to explore out meaning and motives of life. The main features of spirituality as defined by Martsof & Mickey [7] are meaning, connecting, transcendence and value. Similarly, William James [8] has also distinguished an experiential religion from an Institutional religion with intrinsic and extrinsic meaning respectively.

Simpson and Weiner [9] in the *Oxford English Dictionary*, offers two related themes. First, spirituality refers to life's most vital issues and concerns (e.g., the term spiritus in Latin means "the breath" most vital to life). Second, spirituality is seen as subjective features of life including the senses, such as sight and hearing. The Association of American Medical Colleges [10] defines spirituality as a broad one: "Spirituality is recognized as a factor that contributes to health in many persons. The concept of spirituality is found in all cultures and societies. It is expressed in

an individual's search for ultimate meaning". Anandarajah & Hight [11] explained that important aspects of spirituality are love and peace that individuals derive from their relationships, nature and God. Spirituality can be described as latent constructs; as it cannot be observed directly but can be inferred from some of their elements [12].

More than an objective definition, the concept of health has emerged ahead of biological functioning, influenced by cultural, social, and philosophical factors, including purpose in life and the quality of healthy personal relationships [13]. Although research helped out a lot in sorting out spirituality's role, it will take many more years to understand its different aspects to unfold some of medicine's greatest mysteries.

Evidence Based Association Between Spirituality and Health

When a person gets ill, he/she experiences stress over the changes in life then, he or she eventually looks for evident reasons or solutions for cure, and when the medical system fails to do so, then the patient begins to look towards spirituality for healing in other ways. Those who were not religious previously may turn to religion for comfort and acquire it as a new method of coping.

In 1974, Benson et al. [14] found that 10 to 20 minutes of meditation twice a day leads to decreased metabolism, decreased heart rate, decreased respiratory rate, and slower brain waves. The practice was beneficial for the treatment of chronic pain, insomnia, anxiety, hostility, depression, premenstrual syndrome, and infertility and was a useful adjunct to treatment for patients with cancer or HIV. The personal beliefs influence illness prevention, coping, recovery, and illness experience. Patients showed less psychological distress if they connect with God in hope for healing and relaxation, most of them report strength and comfort from their spiritual beliefs [15].

Conclusion

According to the evidence based findings, mixed results of negative and positive associations are present, although data has showed positive linkage to great extent but considering past account of deficiencies, better methodology in future researches regarding religious practices and health findings are needed. Cross-sectional survey can be done among spiritually trained students and those who are not, in order to evaluate

the differences (it is expected to make) in patient management and counseling. Proper training can diminish physician's related concerns like time consumption and poor spiritual assessment skills. More researches are needed on this ground for enhanced understanding of relationship and improvement of health system.

References

1. Puchalski CM (2001) Spirituality and health: the art of compassionate medicine. *Hospital Physician* 37(3): 30-36.
2. Lothane Z (1998) Freud's 1895 Project: from mind to brain and back again. *An NY Acad Sci* 843(1): 43-65.
3. Droege TA (1991) The faith factor in healing. Trinity Pr Intl, USA.
4. Frank JD, Frank JB (1993) Persuasion and healing: A comparative study of psychotherapy. (3rd edn), JHU Press, Washington, USA.
5. Remen RN (1997) *Kitchen Table Wisdom: Stories Thai Heal*. Penguin Group (USA) Incorporated, USA.
6. Koenig HG (2000) Religion, spirituality, and medicine: Application to clinical practice. *JAMA* 284(13): 1708-1708.
7. Martsolf DS, Mickley JR (1998) The concept of spirituality in nursing theories: differing world-views and extent of focus. *J Adv Nurs* 27(2): 294-303.
8. James W (1902) *The varieties of religious experience*. Random House, New York, USA.
9. Weiner ES, Simpson J (1991) *The Compact Oxford English Dictionary*. (2nd edn), Oxford University Press, Oxford, USA, pp. 1422.
10. Wetzel MS, Eisenberg DM, Kaptchuk TJ (1998) Courses involving complementary and alternative medicine at US medical schools. *JAMA* 280(9): 784-787.
11. Anandarajah G, Hight E (2001) Spirituality and medical practice: using the HOPE questions as a practical tool for spiritual assessment. *Am Fam Physician* 63(1): 81-89.
12. Miller WR, Thoresen CE (2003) Spirituality, religion, and health: An emerging research field. *Am psychol* 58(1): 24-35.
13. Ryff CD, Singer B (1998) The contours of positive human health. *Psychological inquiry* 9(1): 1-28.
14. Benson H, Beary JF, Carol MP (1974) The relaxation response. *Psychiatry* 37(1): 37-46.
15. Larson DB, Milano MA (1995) Are religion and spirituality clinically relevant in health care? *Mind/Body Medicine* 1: 147-157.