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Explain the Religious Behaviors of Mothers during Child Hospitalization: A Qualitative Study

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Abstract

Background and Objective: One of the main sources of tension and anxiety for the family is the crisis caused by the disease and hospitalization of the child. Today, attention to the emotional and spiritual needs of families in the care process has been known as one of the main priorities for improving pediatric care conditions. Understanding the religious behaviors of mothers during illness of children and hospitalization may help us to response their spiritual needs better. This study aimed to understand the experiences and perspectives of mothers from religious practices during child hospitalization at the hospital.

Method: This qualitative research was conducted in Teaching Pediatric Hospital affiliated to Golestan University of Medical Sciences. Data were collected through semi-structured interviews. The sampling was based on purposeful with maximum variation. Nineteen mothers of the hospitalized children were participated. Data saturation was the criteria for termination of sampling. Interviews were recorded, transcribed verbatim and analyzed according to conventional qualitative content analysis. All ethical issues were observed. Moreover, the authors did not report conflict of interest.

Results: Analysis of data from the participants' experiences, leading to the formation of two main themes "Improving health-preserving" and "acceptance -compatibility" with sub-themes "achieve peace, hope, spiritual tolerance". Quran reading, muttering to God, prayer, praying were the spiritual behvaiours of mothers that were mentioned repeatedly in interviews

Conclusion: The results of the study showed that religious beliefs and religious behaviors can be an effective way to promote mental health in mothers of children admitted to hospital.

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Summary

Background and Objectives: One of the main sources of families' tension and anxiety is the crisis caused by the disease and hospitalization of their children. Today, the attention to the emotional and spiritual needs of families in the care process has been recognized as one of the main priorities for improving pediatric care conditions. Understanding the religious behaviors of mothers during the illness of their children and hospitalization may help us respond to their spiritual needs better. In Islamic teachings, some methods are

recommended for coping with difficulties. Faith in God gives individuals a spiritual strength which helps them in hardships to move away from anxiety (1). Religious coping has both cognitive (e.g., illness is a part of God's plan) and behavioral components (e.g., prayer) (2). To provide psychological and spiritual needs of families, understanding their faith and beliefs particularly in stressful situations is necessary. This study aimed to understand the experiences and perspectives of mothers when following religious practices during child hospitalization

Method: This qualitative research was conducted in Teaching Pediatric Hospital affiliated to Golestan University of Medical Sciences. Data were collected

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through semi-structured interviews. The sampling was purposeful with maximum variation. 19 mothers of hospitalized children from medical, surgical, infectious, emergency and neonatal units participated in this study. Data saturation was the criterion for termination of sampling. Interviews were recorded, transcribed verbatim and analyzed according to conventional qualitative content analysis. The main questions were: tell us about using religious beliefs while your child is hospitalized? How would they help you? What do you do? We also used probing questions for depth interviews such as why? Give me an example? How did you feel? As for the analysis, the conventional content analysis was used (3). For validity and reliability of study, we used Guba and Lincoln guidelines (4, 5). All ethical issues required in qualitative research were carefully observed.

Results: From data analysis, two main themes "Improving - health preserving" and "compliance - coping" and sub-themes "peace, hope, Psychological resilience" emerged. Quran reading, muttering to God, prayer, and praying were the participants' religious behaviors.

To better understand the experiences of the participants, direct narrations are quoted within quotation marks.

A) Recovery - Maintaining Health

Reading the Quran and praying to seek improvements in child's health and reduce the symptoms of the disease was one of aspects of mothers' experiences. For example, one of participants stated "....since her birth, she was very sick, became ill and was hospitalized in ICU, she has had high fever all the time, my prayer is to cut down her fever, ..."

B) Acceptance - coping

The theme achieving coping determined that religious beliefs (beliefs and resort), worship (prayer, worship and religious rituals), trust and closeness to God through increased sense of hope, and peace and psychological tolerance help mothers to adapt to and deal with difficult and stressful situations in order to be able to play their duty as the main caregivers.

peace

Most participants' statements pointed out that reading the Quran and praying and saying the name of Allah brought about a sense of calmness and peace. For example, one of the participants stated, "when I pray, I get calm". Another participant also said, "while I'm stressed, I always have prayer book and I do use Tasbih (worry beads), I give my blessing to Prophet Mohammad) and recite the verse Ayatol Korsi, these make me feel better."

Hope

Other experiences of participants were hope to improve the child's health through trust in God, prayer, reading the Quran and avowal. The participants narrated their feelings in various ways, "trusted in God, whatever is God's will, everything that he wants. I put the Quran always on top of his bed (to keep him safe)".

Psychological resilience

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Another theme was increasing tolerance during hard times due to praying and reading Quran. One of the mothers stated "If I don't recite prayer and Quran, I can't stand the pressure in these tough situations"

Discussion: Improving – keeping health was one of the extracted themes from the experiences in this qualitative study. There were various pieces of evidence that indicated Quran has unbelievable comforting healing effects on mind and body (6, 7). The study of the physiological response of premature infants revealed that the sound of Quran has constant and persistence effect on oxygen saturation, respiratory rate, heartbeat, and thus reducing symptoms of stress (8).

In a study by Hekmatpour et al (2011), miracles in life, gaining inner peace, human relationship, decision-making and behaviors based on the Quran, patience and frugality were effects of reading the Quran (9). In patients with Carpal tunnel syndrome, reading praying significantly reduced the clinical symptoms, electrodiagnostic findings, blood pressure and stress (10).

"Compliance -coping" was another theme that emerged from the experiences of the participants. The study by Shamsi et al (2011) showed that the sound of the Holy Quran leads to relieving stress among the staff (11). Sound of the Holy Quran was effective in reducing anxiety in patients before induction of anesthesia (12), depression (13) and reducing anxiety of the patients in the Intensive Care Unit (14).

The results of current study demonstrated that the spiritual/religious behaviors such as reading the Qur'an and praying (Doaa) caused peace, hope and psychological tolerance in mothers with a sick child. "We sent down the Quran which is a healing and a mercy to believers, but to the harm-doers it does not increase them, except in loss (Sura: AL-ISRA: verse 82)

In this verse, Allah tells us that Quran was sent to us as guidance, a blessing, mercy, and a healing.

Praying increases human tolerance against the diseases and problems; in other words, pray is a factor to deal with specific problems and can cause mental relaxation in patients (15). Patients felt better when resorting to Imams. The religious sources could create a sense of hope and a positive outlook on life (16).

Conclusion: Mothers showed different religious practices when taking care of their sick child. Their faith came to help them with spiritual and emotional needs so that they could handle stressful situations caused by child's illness. The results of the study showed that religious beliefs and religious behaviors can be an effective way to promote mental health in mothers of hospitalized children.

References

1. Tavan B, Jahani F. The effect of attending the familiarity with Quran workshop on the mental health of nurses at the educational hospitals of Arak

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University of Medical Sciences Arak Medical University Journal (AMUJ). 2011;13(4):35-40.(Full Text in Persian)

- 2. Thuné-Boyle IC, Stygall JA, Keshtgar MR, Newman SP. Do religious/spiritual coping strategies affect illness adjustment in patients with cancer? A systematic review of the literature. Social science & medicine. 2006;63(1):151-64.
- 3. Graneheim UH, Lundman B. Qualitative content analysis in nursing research: concepts, procedures and measures to achieve trustworthiness. Nurse education today. 2004;24(2):105-12.
- 4. Parvizy S, Adib-Hajbaghery M, Salsali M. Principles and methods in Qualitative research. Tehran: Jameenegar; 2015.
- 5. Polit DF, Beck CT, Hungler B. Essentials of nursing research: Methods, appraisal, and utilization. Philadelphia: Lippincott Williams & Wilkins; 2006.
- 6. Mirbagher Ajorpaz N, Aghajani M. The effects of music and Holy Quran on patient's anxiety and vital signs before abdominal surgery. Evidence Based Care. 2011;1(1): 63-76.
- 7. Shirvani M, Mirzaeian R, Ghaderi A. The Effect of Holy Quran Sound on Vital Sign and Spo 7 in Unconscious Patients Hospitalized in the ICU. 7 th Provincial Congress on Quran and Health; Charmahal Bakhtiari, Shahrekord 2013. p. 17-23. (Full Text in Persian)
- 8. Eskandari N, Keshavars M, Jahdi F. Effective Factors on Physiological Responses of Premature Infants to Holly Quran Recitation. Qom University Medical Sciences Journal.1(5):19-25.
- 9. Hekmatpour D, Changizi Ashtiani S, Anbari Z, Khodadadi F, Kamali Nahad R. The manifestation of the effect of Quran reading on the life of faculty members, students and clerks at Arak University of Medical Sciences. Arak Medical University Journal (AMUJ). 2011;13(4,):41-50. (Full Text in Persian)
- 10. Etefagh L, Azma K, Jahangir A. Prayer therapy: using verses of Fatiha al-Kitab, Qadr and Towhid surahs on patients suffering from Tunnel Karp syndrome. Interdisciplinary Quranic Studies. 2009; 1(2): 27-31.
- 11. Shamsi M, Bayati A, Jahani F, Farhangnia L. The effect of Holy Quran recitation on perceived stress among personnel of Arak University of Medical Sciences. Bimonthly Official Publication Medical Daneshvar. 2011;19(95):35-44. (Full Text in Persian)
- 12. Shafiei N, Salari S, Sharifi M. Comparison between hearing the Quran Arabic voice and Voice with Persin meaning on decreasing the anxiety and

- vital signs stabilization of patients before induction of anesthesia. Quarterly of Quran & Medicine. 2011; 1(1): 5-11. (Full Text in Persian)
- 13. Ansari Jaberi A, Negahban Bonabi T, Sayyadi Anari A, Agha Mohamad Hassani P. The effect of the Koran reciting on the depressed patients in psychiatry department of Moradi hospital in Rafsanjan. Journal of Research on Religion & Health; 2005.
- 14. Jahani A, Rejeh N, Heravi-Karimooi M, Hadavi A, Zayeri F, Khatooni AR. The relationship between spiritual health and quality of life in patients with coronary artery disease. Islamic lifestyle centered on health. 2012;1(2):17-21.
- 15. Sharifnia SH, Hojjati H, Nazari R, Qorbani M, Akhoondzade G. The effect of prayer on mental health of hemodialysis patients. Journal of Critical Care Nursing. 2012;5(1):29-34.
- 16. Hatamipour K, Rassouli M, Yaghmaie F, Alavi Majd H, Zendedel K. Cancer Patients of Religious Needs: A qualitative study. Journal of Medical Figh. 2014;6(20-21):141-69. (Full Text in Persian)