

# **Spiritual Intervention to Improve Psychological Wellbeing on Cancer Patient: A Scoping Review**

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## **Abstract**

Cancer occurs due to the addition of mass in body cells that can spread and cause death. The problems arising from cancer are physical, psychological, and spiritual problems. Spiritual intervention is essential and valuable as one of the treatment efforts in dealing with issues caused by cancer. However, there are obstacles where nurses still need to be exposed to much information about spiritual intervention. The purpose of this study was to obtain an overview of spiritual intervention in cancer patients. This study uses the Scoping Review method. Literature review through Ebsco, Pubmed, Science Direct, and Sage Journals databases. The keywords used in English are Cancer, Spiritual intervention,” AND “Spiritual needs OR spiritual experience OR spirituality”. The criteria for articles in this study are full text, free access, randomized control trial or quasi-experiment research design, English language, population and samples of cancer patients, and the publication period of the last ten years (2013-2022). Found ten articles with different spiritual interventions on cancer patients. Two papers with mindfulness intervention, an article with a spiritual counselling intervention, 3 with spiritual intervention, 2 with spiritual therapy intervention, and 2 with spiritual care intervention. Five spiritual interventions for cancer patients can overcome problems caused by cancer, namely mindfulness, spiritual counselling, spiritual intervention, spiritual therapy, and spiritual care. Spiritual counselling is a very effective intervention because it is carried out intensively and comprehensively to maximize the psychological well-being of cancer patients.

**Keywords:** Cancer Patients.Cancer problems, Spiritual Intervention.

## **Introduction**

Cancer is a non-communicable disease that can cause death. This disease is caused by the growth of an abnormal mass that is not controlled by body tissue cells and can spread to other surrounding organs (WHO, 2018). Every year, the prevalence of cancer has increased. This is evidenced by data from Riset Kesehatan Dasar (2013), which states that the prevalence of cancer reached 1.4 per mile and increased to 1.8 per mile in 2018. The latest data submitted by The International Agency for Research on Cancer (IARC) and the World Health Organization (WHO) that the growth of cancer patients increased by 18.1 million new cases in the world, with 9.6 million cases of cancer patients dying (Bray et al., 2018). The incidence of cancer in Indonesia ranks eighth from Southeast Asia and twenty-third for the Asian region (Bray et al., 2018).

Cancer can cause complex problems, including spiritual problems (Nuraeni, Nurhidayah, Hidayati, Sari, & Mirwanti, 2015). Spiritual problems that often arise are self-esteem problems, impaired spiritual belief, self-distrust, disturbed relationships with oneself due to lack of self-confidence, and reduced the quality of life of patients (Hatamipour, Rassouli, Yaghmaie, Zendedel, & Majd, 2015). As of this, spiritual distress can occur and develop as the patient feels alone and isolated from others (Farajzadegan et al., 2013). Cancer can also cause a spiritual crisis that affects all aspects of life (Hatamipour et al., 2015). Cancer patients have a high risk of experiencing psychiatric disorders such as depression, increased anxiety, and the need for spiritual care from health workers (Pearce, Coan, Herndon II, Koenig, & Abernethy, 2012). In addition, based on research results, 25-30% of patients with non-haematological malignancies experience depressive disorders (Musarezaie, Moeini, Taleghani, & Mehrabi, 2014).

Spirituality is an individual's view or feeling of a dynamic relationship with aspects of life (Ramezani, Ahmadi, Mohammadi, & Kazemnejad, 2014). For patients, spirituality connects them with God and makes them routinely worship God (Sari & Wijayanti, 2014). Spiritual needs are valuable things that

must be met in cancer patients with terminal conditions (Murray, 2004). Spiritual needs are the only way to heal patients. However, patients must recognise and realise spiritual needs during the medical treatment process (Hatamipour et al., 2015). A holistic approach with an emphasis on spiritual care by nurses needs to be done because spiritual care can reduce depression levels in cancer patients and become a coping and strength in dealing with their illness (Musarezaie, Ghasemipour, Ghaleghasemi, Khodaei, & Taleghani, 2015).

Spirituality is a component of holistic and unique care. The right fulfillment of spiritual needs will positively impact cancer patients (Richardson, 2012). So the further step in doing spiritual treatment is to assess the spiritual condition of the patient. From this study, nurses can find out how to carry out spiritual care according to their needs according to the patient's views and background (Hawari, 2004). The spiritual forms that can be carried out are meditation, yoga, music, existential belief, or other religious traditions that can bring peace, meaning and hope to patients with cancer (Wilson et al., 2016).

Based on research in 2017 on the spiritual needs of cancer patients, it was stated that religious needs, namely prayer, were the main spiritual needs of patients (Maziyya, Rahayuwati, & Yamin, 2018). Other studies have shown that patients with acute myocardial infarction who undergo Islamic relaxation can reduce pain and anxiety (Sugiarto, Anies, Julianti, & Mardiyono, 2015). Meanwhile, research by Prihati & Wirawati in 2018 showed that murrotal therapy could reduce pain and anxiety levels in patients with DM ulcers during wound care (Prihati, Wirawati, & Karunianingtyas, 2018). Previous study showed a relationship between spirituality level and pain intensity of cancer patients, where the level of pain intensity of cancer patients has high spirituality (Mozaik, Isabella, & Praptiwi, 2018). Nurses have an important role during the nursing care process in meeting spiritual needs so they must play an active role (Richardson, 2012). However, nurses are still not consistent in providing spiritual care due to lack of information about the types of interventions in spiritual care practices (Delgado, 2015; Nurhidayah, Mediani, & Rahayuwati, 2019). So based on

this, researchers are interested in conducting a literature review on spiritual intervention to improve psychological wellbeing on cancer patients.

#### Research Method

This study uses a literature review with a scoping review design. Scoping review is a methodological technique for exploring new topics that are developing rapidly while remaining flexible (Peterson, Pearce, Ferguson, & Langford, 2017). This design is able to explain the various results of the analysis of relevant articles because it has a wide conceptual range. There are 5 stages in the scoping review framework, namely identifying research questions, identifying relevant study results, selecting studies, mapping data, and compiling, summarizing, and reporting research results (Bradbury-

Jones et al., 2021).

#### Protocol

The protocol used in this literature review is PRISMA Extension for Scoping Reviews (PRISMA-ScR) to identify various topics that discuss spiritual intervention in patients with cancer.

#### Eligibility Criteria

The article selected by the author uses the results of primary research, namely Randomized Control Trial and Quasy Experiment to describe spiritual intervention. The articles used are English articles with full text within the last 10 years (2013-2022). The research sample used in the article is patients with cancer (Table 1).

**Table 1. Inclusion and Exclusion Criteria**

Criteria	Inclusion	Exclusion
Language	English	No English
Article's type	Full text, free access the research article, and review article	Abstract article, not free access, not research articles and review articles
Sample	Patients with cancer	No cancer
Design	Randomized Control Trial or Quasy Experiment	Research design is not a Randomized Control Trial or Quasy Experiment
Year	last 10 years (2013-2022)	More than last 10 years

#### Search Strategy

Article search strategy using several relevant keywords based on PCC's Framework (Table 2).

**Table 2. PCC's Search Strategy**

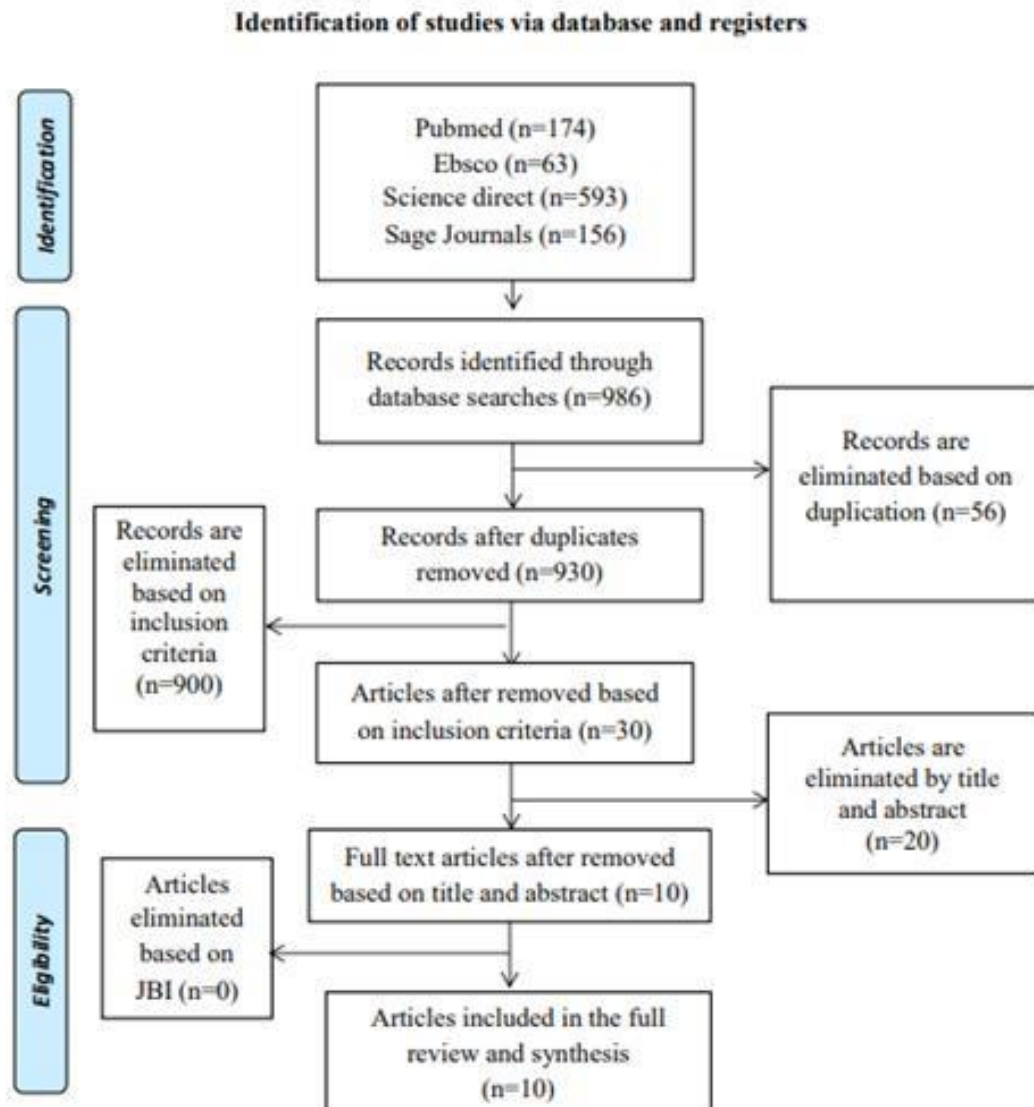
PCC's Framework	Search Strategy
Populations	Cancer OR patient cancer
Content	Spiritual care OR spiritual intervention
Context	Spiritual needs OR spiritual experience OR sprituality

#### Study Selection

The literature review was obtained from databases, namely EBSCO-hosted Academic Science Completed, PubMed, Sage Journals, and ScienceDirect. The author collects articles on relevant topics after eliminating study results that do not meet the inclusion criteria.

## Synthesis of Results

The findings obtained from this literature review explain spiritual interventions in patients with cancer to overcome problems caused by cancer. The literature review used PRISMA Extension for Scoping Reviews (PRISMA-ScR) by involving several reviewers in validating the articles used in the selection process (Figure 1).



**Figure 1. PRISMA Flow Diagram**

## Result

The number of articles obtained from the search is 986 articles. After duplicating the collected articles, 930 articles were obtained. Furthermore, after elimination based on the inclusion criteria, the remaining 30 articles. Then after checking the title and abstract, 10 articles were obtained. Articles were analyzed using the JBI Critical Appraisal Tool assessment method with good article standards above 75% based on criteria and topic relevance (Table 3).

**Table 3. JBI Critical Appraisal Tool**

Author, Published Year	JBI Critical Appraisal Tool	Study Design
(Park et al, 2020)	100 % (13/13)	RCT
(Carlson et al, 2016)	84,6 % (11/13)	RCT
(Sajadi et al, 2018)	76,9 % (10/13)	RCT
(Afrasiabifar, Mosavi, Jahromi, & Hosseini, 2021)	92,3 % (12/13)	RCT
(Nasution, Afriyanti, & Kurniawati, 2021)	88,8 % (8/9)	Quasy Experiment
(Musarezaie et al, 2015)	84,6 % (11/13)	RCT
(Farajzadegan et al, 2013)	84,6 % (11/13)	RCT
(Jafari et al, 2013)	76,9 % (10/13)	RCT
(Keivan, Daryabeigi, & Alimohammadi, 2019)	84,6 % (11/13)	RCT
(Musarezaie et al, 2014)	76,9 % (10/13)	RCT

There are 10 articles that describe spiritual needs intervention in cancer. Several articles identified the outcome of the intervention, namely reducing anxiety, depression, and increasing spiritual well-being. The research subjects were university students and the sample size ranged from 21 to 138 participants. Of the 10 articles analyzed, there are several interventions, namely Mindfulness, spiritual counseling, spiritual intervention, spiritual therapy, and spiritual care. Researchers identify and classify based on the 5 interventions from the articles that have been analyzed. The results of the analysis of the article are presented in tabular form as follows (Table 4):

**Table 4. Extraction Data**

No	Authors and year	purpose	Intervention	location	Design	Sample Size	Result
1.	(Park et al, 2020)	To tested MBCT for psychological distress (anxiety and depression)	Mindfulness-Based Cognitive Therapy	Jepang	RCT	74	MBCT is effective to be used as an intervention to improve well-being that covers psychological, physical, and spiritual domains.
2.	(Carlson et al, 2016)	the effects of these two interventions immediately following the groups and for 1 year thereafter in distressed breast cancer survivors.	mindfulness-based cancer recovery	Canada	RCT	242	Immediately following the intervention, women in MBCR reported greater reduction in mood disturbance (primarily fatigue, anxiety and confusion) and stress symptoms.

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3.	(Sajadi et al., 2018)	To examine the effect of spiritual counseling on spiritual well-being with cancer patients	Spiritual Counseling	Iran	RCT	42	The results showed that the intervention group had a significantly higher level of spiritual well-being.
4.	(Afrasiabifar et al., 2021)	To determine the impact of spiritual intervention on hope and spiritual well-being	Spiritual-based intervention	Iran	RCT	74	This study present statistical differences in the pre-intervention assessment. In contrast, at the post assessment, significant differences.
5.	(Nasution et al., 2021)	effect of a spiritual intervention on anxiety and depression in such cancer patients	spiritual intervention	Indonesia	Q u a s i experimental	108	There were differences in the mean scores of anxiety and depression
6.	(Musarezaie et al., 2015)	effects of a spiritual-based intervention on spiritual well-being	spiritual based intervention	Iran	RCT	64	The mean score of spiritual well-being after spiritual-based intervention in the experimental group was more than the mean score
7.	(Farajzadegan et al., 2013)	investigate the role of spiritual therapy in improving the spiritual well-being and quality of life	Spiritual therapy	Iran	RCT	65	Significant to improve spiritual wellbeing
8.	(Jafari et al., 2013)	role of spiritual therapy intervention in improving the QOL	spiritual therapy course	Iran	RCT	65	Significant to improve quality of life
9.	(Keivan et al., 2019)	effects of a religious and spiritual care for the burn patients	Spiritual care	Iran	RCT	68	reduction of pain intensity in the experimental group and the satisfaction with pain control in this group increased as well.
10.	(Musarezaie et al., 2014)	the effects of a spiritual care program on spiritual care depression	spiritual program care	RCT	Iran	64	mean score of depression was significantly lower in the experiment group

### Discussion

Interventions in the spiritual aspect are carried out because they are known to have a good effect on physical and psychological health (Kwan, Chan, & Choi, 2019). The following is an explanation of each of the spiritual needs interventions of cancer patients.

### Mindfulness

Mindfulness according to Silarus (2015) is the attention given by the individual to the experience felt by fully accepting it (acceptance). Through mindfulness, the experience felt is given full attention without any effort to change the thoughts, bodily sensations, or affect of the experience.

Research by Park, et al (2020) stated that

Mindfulness-Based Cognitive Intervention (MBCT) was carried out for eight weeks with a duration of two hours per week and was given in groups of four to nine participants. The MBCT program was modified by adding psychoeducation to the first session about cancer and how the MBCT program can help patients. the program consists of formal meditation exercises, psychoeducation based on cognitive therapy, and discussions and interactions between participants during learning. In addition, participants were also given a Compact Disc (CD) containing meditation training. The results showed that the MBCT intervention significantly increased spiritual well-being, Fear of cancer recurrence, Fatigue, Quality of Life, Mindfulness Skills, and Adherence to the Intervention.

Another Mindfulness intervention is Mindfulness-Based Cancer Recovery (MBCR). Carlson et al (2018) research conducted a mindfulness-based cancer recovery that stems from a contemplative spiritual tradition, is conducted openly and non-judgmentally, actively engages in meditation training and yoga practices. This program consists of 8 sessions with each session of 90 minutes. The goals of this program are to facilitate a mutually supportive environment and increase family support, increase emotional openness and expression, improve coping skills and relationships between health workers and patients, and detoxify feelings about death. The results of this study indicate that after the MBCR intervention there was an increase in emotional and functional quality of life, affective and positive social support, spirituality (feelings of peace and meaning in life), as well as appreciation and hope for life. In addition, there is a reduction in mood disturbances (especially fatigue, anxiety and confusion), as well as stress symptoms including tension, sympathetic arousal, and cognitive symptoms.

### **Spiritual Counseling**

Another intervention that can be done for spiritual needs is Spiritual Counseling (SC) which is based on the patient's beliefs. Sajadi et al (2018) stated that SC is carried out by exploring spiritual matters to improve general health and patient coping strategies so that they can change the client's attitude towards their condition and can overcome psychospiritual problems. SC activities include meditation, emotional release, spiritual self-disclosure, journaling, prayer, studying scriptures and inspiring readings. SC interventions have the potential to improve spiritual well-being so that patients with chronic illness can reflect on life goals, priorities, and meaning in life, thereby reducing emotional reactivity and strengthening appreciation for life. The study was conducted with interventions on 21 cancer patients as many as 8 sessions for 8 weeks, including question and answer sessions, sharing, reflection, relaxation, and meditation. The results showed that SC intervention could improve spiritual well-

being, existential well-being, and religious well-being in cancer patients (Sajadi et al., 2018).

### **Spiritual Intervention**

Spiritual intervention (SI) is a spiritual intervention that can improve coping and quality of life of cancer patients by using spiritual strategies, fostering good social relationships, improving self-care, and increasing self-confidence. The spiritual intervention focuses on the spiritual well-being of cancer patients to achieve life satisfaction, minimize anxiety, and increase life expectancy and peace. The spiritual intervention was carried out for two weeks. The intervention carried out by Nasution et al (2021) consisted of 4 sessions, namely the first session in the form of introduction and relaxation techniques. In this first session, the patient was invited to discuss the spiritual intervention that was carried out so that they had positive feelings and thoughts about their illness. In addition, patients are also explained relaxation techniques to increase comfort with deep and abdominal breathing. The second session is named the control session. Patients are explained about two control factors, namely factors that can be controlled, namely themselves and factors that cannot be controlled, namely other people. The third and fourth sessions were held in the second week. The third session was about identity, where respondents were asked to express feelings of loss due to cancer. The fourth session is relationship therapy and prayer. Patients are taught to understand the relationship between the respondent and himself, the relationship between the respondent and other people (various parties in various environments), and the relationship between the respondent and God. The results of the study on 54 cancer patients showed that SI could reduce the patient's level of anxiety and depression, and there is an increase in the frequency of participating in religious activities such as reading the scriptures, remembering God, and practicing other religious activities (Nasution et al, 2021).

Research by Afrasiabifar, et al (2021) showed that SI was performed with a duration of between 30 to 50 minutes. This

research was conducted in 5 sessions. The first session is the Introduction domain as Patient's Preparation to explain about goals and the intervention. The second session is the Religious domain with the theme of Excellence to increase Spiritual resources, relationship with God, Sanctities, and Worship in cancer patients. The third session is the Existence domain with the theme of Meaning and purpose to reflect on the patient's Meaning of life, Self-Actualization, and role function of cancer patients. The fourth session is the Emotional domain with the theme of Inner Relaxation to increase calm, hope for life, the forgiveness of the past, face fear, and meaning in life. The fifth session is the Social domain with the theme of Communication to improve relationships with oneself and others by increasing love and sense of belonging, unity, and relationship with spouse, family and friends. Interventions included interactive discussions, asking and answering questions, short audio or video clips, introduction to books, and booklets, and revealing the patient's experience with his illness. The results showed that after SI was performed, patients experienced improvements in Religion health, Existential health, and Global Spiritual Well-being (Afrasiabifar, et al, 2021).

For other research on SI, spiritual-based interventions include direct support and support in the form of religious rituals carried out for three days (Musarezaie et al, 2015). The intervention was to support patients in expressing their feelings, needs, and concerns through verbal and non-verbal communication, explain to patients about the disease and the interventions carried out and respond to their questions. Support is done by giving touch to cancer patients by adjusting their condition and listening actively. To support religious rituals, patients are given worship packages containing prayer mats, prayer beads, and veils for women. Patients are also informed about MP3 audio and earphones for listening to the Qur'an, prayers, and the call to prayer. The results showed an increase in spiritual well-being, including the Existence dimension and the religious dimension after the intervention was given to cancer patients (Musarezaie et al, 2015).

## **Spiritual Therapy**

Spiritual therapy (ST) is a form of psychotherapy with religious or spiritual techniques to empower patients to understand themselves, the universe, events and phenomena, health and growth. In the study of Farajzadegan et al. (2013), the intervention was carried out in 6 sessions: Introduction, Relaxation and meditation, Control, Identity, Relationships, and Prayer Therapy for 6 weeks. Each session has a theme related to a specific domain of spirituality and ends with a 20-30 minute relaxation and meditation practice. The study was conducted on 34 cancer patients. Spiritual therapy can also increase self-esteem and self-confidence in patients so that they can improve the patient's self-management abilities. The results showed that ST has been shown to improve spiritual well-being, coping abilities, and improve quality of life by reducing anxiety and social isolation in cancer patients (Farajzadegan et al., 2013).

Another study on ST by Jafari et al (2013) stated that the intervention was carried out for 6 weeks with 6 sessions, namely Defining the course and introduction, Relaxation and Meditation, control, identity, and Relationships. Each session lasts about two-three hours with didactic material, question and answer sessions, sharing, reflection, and relaxation as well as meditation exercises accompanied by educators who are experienced in spiritual healing. The results showed that ST can improve the quality of life of patients with breast cancer including physical, role, emotional, cognitive, and social functions.

## **Spiritual Care**

Spiritual care is a component of nursing care to obtain and maintain physical health, as well as mental and spiritual recovery. The existence of spiritual care in inpatients and in the ICU can restore and achieve the well-being of patients who experience crises such as hopelessness, vulnerability and social isolation. Research conducted by Keivan et al, (2019) conducted a Spiritual Care E intervention consisting of three sessions conducted with the help of nurses, pastors



and patient companions. This session was conducted before, during and after dressing change. Each session begins by providing support to the patient and at the end of the session the patient listens to verses from the Koran, and after changing the patient's dressing, family members or close friends of the patient are invited to provide support. All information including demographic data, information related to burns, morphine intake, measurement of pain intensity and satisfaction with pain control were collected through a questionnaire to be analyzed before the spiritual treatment program. The results showed that spiritual care was an effective nursing intervention in pain and increased satisfaction with pain control, but this intervention was limited to depending on the patient's personal beliefs about spirituality and religion as well as differences in the patient's spiritual needs that could affect pain (Keivan et al, 2019).

Another research on spiritual care was carried out with two main components, namely the presence of supporters and support in carrying out religious rituals. Researchers provide support and encouragement to patients to express their feelings, needs, and concerns through verbal and non-verbal communication. The researcher then explained about the disease suffered and the interventions carried out in leukemia patients (Musarezaie et al, 2014). The results showed that there was a significant reduction in the level of depression in patients with leukemia. This study shows that spiritual counseling is the most effective intervention from the articles reviewed. Spiritual counseling is carried out intensively by health workers to patients, so that the implementation of activities is carried out comprehensively by paying attention to physical and psychological aspects. This is in line with previous studies which show that counseling can effectively improve the psychological well-being of cancer patients (Li, Rew, & Hwang, 2012; Paredes & Pereira, 2018). Counseling is carried out for 16 weeks by focusing on solving the problems of cancer patients.

## **Conclusion**

Based on the results of the literature review,

it was found 5 spiritual interventions to overcome problems caused by cancer, namely mindfulness, spiritual counselling, spiritual intervention, spiritual therapy, and spiritual care. The intervention provided must be adjusted to the patient's condition and needs according to the assessment results, because spirituality is personal. The 5 interventions provided can improve spiritual well-being, quality of life, psychological problems, and physical problems such as pain.

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