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# Relationship between daily spiritual experiences and fear of death in hemodialysis patients

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#### ABSTRAC1

This study is an analytical cross-sectional (correlation) approach of the statistical population of patients who were admitted to the Kermanshah Imam Reza hospital for Dialysis. Around 50 patient's samples were checked by using a correlation formula to determine the sample size of 50 patients. The patients were selected using convenience sampling in one-month period. Two surveys in the form of a questionnaire were made for this study, one of them is the *Cult - Lester* fear of death Scale and the other was daily *spiritual experiences* scale. The relationship between fear of death and spiritual dimensions is set on by the Pearson's Correlation Coefficient and Regression formula. Difference in death fear scale, in terms of gender, age and education is insistent on by t-test analysis using SPSS version 18. In this research a significant relationship was seen between fear of death and spirituality in Hemodialysis patients there was no difference between men and women about fear of death. *Fear of death* average score differences were not significant in age groups. It also found no significant association between age and Spirituality. The mean score of fear of death in people with a college education is more than them who were at high school and under graduates, so that their difference was significant. There was no significant correlation between fear of death and spiritual needs. High religious belief and religious practices leads to reduction of death fear. This study shows that spiritual matters must be considered for a patients treatment because *spiritual matters* reduces the Fear of Death and Anxiety and thereby contributes to the disease process.

Key words: Kidney disease, Fear of death, Spirituality, Hemodialysis

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# 1.INTRODUCTION

eath is one of the events that come to men and is unavoidable. Different analyzes have been done in this topic called death. Some believe that death is one of the life's stages and some have called it the end of life. If fear is a natural emotion in mind it can be positively said that the fear of death is natural. *Fear of death*, including thoughts, fears and emotions are associated to the end of life (1). This type of phobia has a multi-dimensional concept (2). According to,

MOTAMEDI there are *nine* dimensions described namely the fear of the unknown, fear of death, fear of loneliness, fear of loss of family and friends, fear of loss of body, fear of loss of self-inhibition, fear of pain, fear loss of identity and fear of retreat. NELSON also has considered *eight* dimensions of fear, including fear of process of death, fear of early death, fear of death of interest people, panic fear of death, fear of the body after death, fear of the unknown, and fear of dead. Conducted

researches on the fear of death suggest that this type of phobia is a common phenomenon. Kastenbaum in a brief review research on the fear of death in non-clinical populations, showed that fear of death is a common phenomenon in the general population (3). A study has reported that 16% of people are afraid of death and 3%, have panic disorder in this regard and showed that women have more fear of death than men do. It was also observed that with the increasing of the level of education, economic and social status; fear of death was less (4). In a study conducted among high school students and college students in the United States, it was shown that women have a higher death anxiety than men (5). In another study it was found that people with intrinsic religious motivation have less death anxiety, Also stronger belief about life after death is associated with lower death anxiety (6). Because spiritual crisis along with chronic illness threatens the confidence and faith, personal communication is disrupted due to the uncertainty of the future, adaptation mechanisms seem insufficient, and person may be induced to feel lonely and appears in spiritual crisis (7). Among the chronic diseases that can be studied in this context are chronic renal failure and irreversible and progressive impaired renal function. However, due to hemodialysis, their survival has increased but the disease has affected their lives, impaired functional status and changed their quality of life in advanced stages (8). Spiritual turmoil caused grief in patients, can destroy health and positive motivation. Because patients who are more distressed and anxious they may have more sufferings and come with problems such as pain, low self-esteem, loneliness, fatigue, frustration, and fear of death (9, 10). Faith in God and a purposeful and greater attention to spiritual matters reduces psychological insecurity anxiety and fear of death. A study showed that the prevalence of the chronic renal failure disease in 2011 was 18.9% (11). There are about 24 thousand dialysis patients in Iran. Approximately, 5,500 new patients have been added in 2012. During the past five years this has increased to 14%. Incentive towards life to reduce fear and anxiety is very important in these patients. A study has investigated the effects of prayer on the spiritual health of dialysis patients (12) but it has not been conducted to determine the fear of death in these patients. Over seventy million Muslims live in Iran that adhere to religious commandments and religious values which are associated with their lives (13). This study was aimed to investigate the relationship between daily spiritual experiences and fear of death in HEMODIALYSIS hospitalized patients at

Kermanshah Imam Reza hospital.

# 2.MATERIAL SNOMETHODS

This study was an analytical cross-sectional (correlation) approach. The correlation formula is used to determine the sample size of 50 patients referred to hemodialysis center of Kermanshah Imam Reza hospital that were selected in onemonth period using convenience sampling. Two questionnaires were used in this study; one of these was the Cult-Lester scale of death fear (14). The questionnaire consists of four subscales, each subscale includes 8 items. Lester is more reliable for this scale for each of the subscales such as his death, his dying, death and dying the others 0.91, 0.89, 0.72 and 0.87 respectively. Naderi for the first time, conducted the research on revised form of this scale in 2008, and reliability was confirmed by Cronbach's alpha (0.89) (15). The questionnaire included daily spiritual experiences scale. Underwood for the first time constructed this scale to provide multi-dimensional instrument spirituality in 2002. In one study, the internal consistency of the scale was assessed by using Cronbach's alpha with value of 0.94 (16). This scale examines people perception of higher power (God) in their daily lives and their interactions with superior material world. Scale options examine the spiritual experiences during every day of life instead of specific beliefs and behaviors. Spiritual Experiences Scale contains 16 items that measure concepts such as communication, fun and a sense of transcendence, power, convenience, comfort, help of God, guidance by God, receiving God's love, sense of awe, gratitude, kindness and compassion coupled with the feeling of closeness to God. All participants were justified on how to plan, confidentiality of information and purpose of this plan. All of them participated in the study with satisfaction. The relationship between fear of death and spiritual dimensions was determined by Pearson's correlation and regression. Fear of death, according to sex, age and education was computed by t-test analysis using SPSS version 18.

# 3.RESULT&NDISCUSSION

In this research, 50 HEMODIALYSIS patients were studied at Kermanshah Imam Reza hospital. There were 48% females and 52% male patients. Mean age was  $14.5 \pm 48$  years. 42% of patients were lower than diploma, 28% were diploma students patients and 30% were graduates. The fear of death was no difference between men and women (P = 0.2). Average scores

for fear of death in different age groups was not statistically significant (P=0.44). It also found no significant association between age and spirituality (P=0.72). Average scores of self-fear of death, self-fear of dying self-awareness, were 25, 30 and 52, respectively. In this study, the mean score of death fear in people with a college education higher than who were high school and under-graduates. So that the difference was statistically significant (P=0.001). The relationship between

dimensions of spirituality and education were studied. It was shown that there was no significant relationship between education level and beliefs and spiritual needs. However, there was significant negative correlation between education and spiritual activities, so that the people who are with high education, had low intellectual activity (Table 1).

Table 1 . Relationship between education level and dimension of spirituality in hemodialysis patients in Kermanshah Imam Reza hospital

Criterion	Predictor variables	Correlation coefficient	P Value	
	Spiritual beliefs	r = 0.03	0.3	
Education	Spiritual needs	r = 0.02	0.37	
	spiritual activities	r = -0.12	0.001	

Relationship between dimensions of death was examined. Significant relationship can be observed between these dimensions (Table 2).

Table 2 . Relationship between dimensions of fear of death in hemodialysis patients in Kermanshah Imam Reza hospital

Row	variable	P Value
1	self death and the others death	0.0001
2	self death and self dying	0.001
3	self dying and others death	0.01
4	self death the others dying	0.01
5	self dying and the others dying	0.01

The mean score of spirituality in hemodialysis patients was 52  $\pm 12.7$ . Negative relationship between fear of death and spirituality was observed in these patients which was statistically significant (r = -0.43 and P = 0.002). So that with the increasing of spirituality the fear of death was less. The relationship between the death fears was examined in terms of

various aspects of spirituality, including spiritual beliefs, spiritual needs and spiritual activities. In this study, it found no significant correlation between fear of death and spiritual needs (Table 3).

Table 3. Relationship between dimensions of spirituality and fear of death in hemodialysis patients in Kermanshah Imam Reza hospital

criterion	Predictor variables	Correlation coefficient	P Value
	Spiritual beliefs	r = - 0.43	0.002
Deaths fear	Spiritual needs	r = 0.01	0.47
	spiritual activities	r = - 0.22	0.001

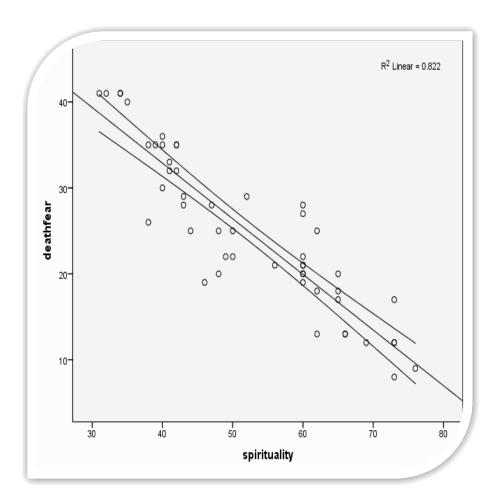


Figure 1. Relationship between dimensions of spirituality and fear of death in hemodialysis patients in Kermanshah Imam Reza hospital

The aim of this study was to determine the relationship between Fear of Death and Spirituality. Based on the obtained results in the present study, significant negative correlation was observed between spiritual beliefs and spiritual activity with the fear of death in hemodialysis patients. This means that the high level of religious belief and religious activity, leads to the reduction of fear of death. In a study which was done about the relationship between spirituality and death anxiety in older women, the same result was obtained so that with the increase of spirituality, anxiety was (15, 17, 18) reduced. In this context, similar results were observed in other studies. In another study, significant negative relationship was observed between religious attitudes and fear of death. In a study on dialysis patients, it was found that those who listened to pray and prayed during treatment were more in spiritual health. Doctor Matthaus believes that encouraging patients to believe and practice prayer is considered to be one of the factors that affect treatment (12, 21). Those patients with inner spirituality and a moral sense have a powerful friendship, with turning to spirituality, they maintain

their health and others (19) things. In this study, no differences were observed between men and women regarding fear of death, which was consistent with the results of other studies in this area (20). Spirituality and its dimensions did not differ between men and women (Figure 1). In this study, the mean fear of death in people who have university education is more than those with diploma or below levels. This indicates that the higher education and awareness, can make more information about the religious and social issues, and fear of death will be most. The negative relationship between spiritual activity and education, indicate that the spiritual activities in higher education is lower, and as a result the fear of death is higher. In this study, a significant relationship was not observed between education, spiritual beliefs and spiritual needs. Some studies show, significant positive correlation between education and familiarity with The Holy Quran among cardiac patients. Another study found no relationship between education and anxiety of death that was inconsistent with our results. It was perhaps for this reason that the study between students and seminary students who were not much different in terms of education was done.

# 4.CONCLUSION

Prayer is a divine spiritual activity that can improve the patient and help in reduction of the Fear of Death. In this regard various studies shows that prayer as a spiritual activity to reduce anxiety and fear of death is caused to accelerate healing. Due to the fear of death in kidney diseases and its relationship to spiritual matters, accordingly, these issues are important to their treatment and it reduces the fear of death, anxiety and help in the treatment process. More research in this area and build models and spiritual models lead to the identification of the problem in the treatment of a disease and the quality of life, life expectancy and survival of these patients will increase.

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## **AUTHORSONTRIBUTION**

This work was carried out in collaboration between all authors.

## CONFLICTINTEREST

Authors have declared that no conflict interests exist.

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