Spiritual Well-Being and Practices Among Women With Gynecologic Cancer

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ynecologic cancer attacks the natural foundation of a woman's distinctiveness, her ability to procreate, which brings to mind her loss of sexuality (Ramondetta & Sills, 2004). A diagnosis of cancer can leave a person distressed, stunned, devastated, confused, and physically and mentally overwhelmed. During adverse situations such as a life-threatening illness, many patients find comfort and support in their spirituality, including their beliefs and practices.

Spirituality has been identified as an important component of many women's cancer experiences (Ashing-Giwa et al., 2004; Rippentrop, Altmaier, & Burns, 2006). Women have depended on spirituality as a source of comfort and assurance during challenging times in their lives (Ferrell, Smith, Juarez, & Melancon, 2003). Spirituality helps cultivate psychological well-being and prepares women to fight through illness (Fry, 2000; Renz, Mao, & Cerny, 2005), including breast cancer (Meraviglia, 2006). Although interest in the concept of spirituality and, in particular, spirituality and spiritual needs in people with cancer has increased, limited research has targeted women with gynecologic cancer. This preliminary study aimed to identify spiritual practices and describe spiritual well-being in women with gynecologic cancer.

Background

Spirituality has been defined as a deep search from within to find an intrinsic meaning and purpose in life, as the force that triggers individuals to seek a connection, and as a contact with an enriching experience among a person, others, and an element greater than life itself. Hermann (2006) considered spirituality a natural feature of all humans that sets in motion and guides the search for meaning and purpose in life. Spirituality comprises all aspects of a person's experiences, such as relationships with the self, others, and a transcendent dimension (Hermann). Flannelly, Flannelly, and Weaver (2002) indicated that spirituality includes the need to find significance in

Purpose/Objectives: To identify spiritual well-being and spiritual practices in women with gynecologic cancer.

Design: Descriptive, cross-sectional.

Setting: Urban and rural communities in southeast Florida.

Sample: Convenience sample of 85 women $(\overline{X} \text{ age} = 65.72 \text{ years})$ with some form of gynecologic cancer.

Methods: Participants completed questionnaires to assess spiritual well-being and spiritual practices while attending a healthcare clinic.

Main Research Variables: Spiritual well-being, spiritual practices.

Findings: The level of overall spiritual well-being was high, as were the levels of self-efficacy and life scheme (meaningfulness), as measured with two subscales. Most women reported use of several spiritual practices, including family activities, exercise, and listening to music.

Conclusions: Additional study of the spiritual well-being and practices of women with cancer and comparisons with other groups of women are needed.

Implications for Nursing: Nurses can assume a role in encouraging spiritual practices and enhancing spiritual wellbeing in women with cancer.

life, death, and suffering; transcendence; and a sense of connectedness with oneself, others, and superior powers. Although numerous individuals find spirituality through their religion or personal connection with God or the divine, others find it through nature, art, music, values, and principles or through their search for scientific truth (Anandarajah & Hight, 2001).

In a review of the various conceptualizations of spirituality in nursing and health literature, Chiu, Emblen, Van Hofwegen, Sawatzky, and Meyerhoff (2004) examined 73 articles published from 1990–2000. The authors identified themes of existential reality (e.g., meaning and purpose in life, hope, spiritual existence, experience); transcendence (e.g., an essential component of reality, level of awareness); connectedness (e.g., relationships with self, others, nature, higher being); and power, force, or energy (e.g.,