SPIRITUAL STRUGGLES, HEALTH-RELATED QUALITY OF LIFE, AND MENTAL HEALTH OUTCOMES IN URBAN ADOLESCENTS WITH ASTHMA

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ABSTRACT

This study examined (a) whether spiritual struggles were uniquely associated with health-related quality of life (HRQoL) and mental health outcomes, after accounting for negative secular coping, and (b) whether changes in spiritual struggles over time were associated with changes in these psychosocial outcomes among urban adolescents with asthma. Adolescents (N = 151 at Time-1; N = 132 at Time-2) completed multiple self-report measures. Descriptive statistics, difference scores, and hierarchical multiple regressions were calculated. Results indicated that (a) more spiritual struggles were associated with greater depressive and anxiety symptoms and worse psychosocial HRQoL at baseline; (b) changes in spiritual struggles were significantly associated with changes in depressive symptoms longitudinally; and (c) spiritual struggles significantly accounted for 4–9% of the unique variance in these outcomes. Findings suggested screening for spiritual struggles when caring for these adolescents.

Keywords: religion, spirituality, coping, asthma, quality of life

Asthma is a prevalent childhood chronic illness and affects an estimated 9% of children and adolescents in the United States (US). Prevalence rates for asthma are higher among African-American adolescents as compared...
to their White peers (12.8% prevalence versus 7.9% prevalence among White youth; Akinbami, Moorman, Garbe, & Sondik, 2009). Compared with their healthy peers, adolescents with asthma are at greater risk for impaired health-related quality of life (HRQoL), greater anxiety, and more academic problems (Fowler, Davenport, & Garg, 1992; Merikallio, Mustalahti, Remes, Valovirta, & Kaila, 2005; Vila, Nollet-Clemençon, de Blic, Mouren-Simeoni, & Scheinmann, 2000). Urban adolescents, of whom a large percentage are African-American, are even more susceptible to the adverse effects of asthma than their suburban peers, due to environmental factors (mold and hazardous air pollutants) that exacerbate their illness (Corburn, Osleeb, & Porter, 2006; Krieger, Song, Takaro, & Stout, 2000). Given these health disparities, research examining novel ways to improve urban adolescents’ coping with asthma is warranted.

Many factors influence how an adolescent adapts to living with a chronic illness, such as asthma. One factor that has received sizable attention is coping style. Coping, defined as the “constantly changing cognitive and behavioral efforts to manage specific external or internal demands that are appraised as taxing” (Lazarus & Folkman, 1984, p. 141), has historically been thought of in a secular sense. For example, adolescents with asthma might use relaxation skills or drawing/writing activities to cope with symptoms or feelings of sadness due to their asthma. Coping style has been associated with a range of outcomes among adolescents including internalizing problems (e.g., depressive symptoms), externalizing problems (e.g., behavior problems), social functioning, and academic performance (Herman-Stahl & Peterson, 1996; Compas, Connor-Smith, Saltzman, Thomsen, & Wadsworth, 2001). Though less widely studied, religious and spiritual coping has been defined as “the search for significance under stress, in ways related to the sacred” (Pargament, 1997, p. 90). Restated, religious and spiritual coping focuses on how one uses religious and spiritual beliefs or practices (such as prayer) to deal with a stressor like a chronic illness. People often use religion and spirituality in times of distress to gain control of a situation, gain comfort, or derive meaning (Pargament, Koenig, & Perez, 2000). National surveys have found that religion/spirituality is salient for many children and adolescents, with up to 84% of adolescents reporting a belief in God and over 50% reporting regular religious service attendance (Smith & Denton, 2005). Thus, it is surprising that the literature on pediatric coping with chronic illness remains almost exclusively secular in nature.

In adults with a chronic illness, the use of positive religious and spiritual coping strategies (e.g., seeking God’s support) has been associated