

RESUMO - SAÚDE E ESPIRITUALIDADE

SPIRITUALITY AND RELIGIOUS COPING IN CANCER PATIENTS RECEIVING PALLIATIVE CARE: A DESCRIPTIVE REVIEW

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Introduction: Patients with cancer, particularly in advanced stages, frequently experience

psychological and spiritual distress. Spirituality has been recognized as an important

dimension of patient-centered care, involving the search for meaning, purpose, and

transcendence, and has been associated with mental health, quality of life, and coping with

illness. In this context, religious coping refers to behavioral and cognitive strategies based on

religious beliefs, which may be positive, when associated with spiritual support and

meaning-making, or negative, when related to spiritual conflict, feelings of punishment, or

abandonment. Objective: To describe the role of spirituality and religious coping in the

experience of cancer, particularly in patients receiving palliative care. Methods: A descriptive review was conducted using selected publications from biomedical databases,

including PubMed, focusing on studies published in English between 2022 and 2024.

Articles were identified using terms related to spirituality, religiosity, and religious coping in

cancer and palliative care. Observational studies employing validated instruments for

assessing religiosity and spiritual coping were prioritized. Results: The reviewed studies

consistently indicate that positive religious coping is associated with better psychological

adjustment and quality of life, while negative religious coping is linked to higher levels of

distress, including spiritual struggle and depressive symptoms. In palliative care settings,

patients may exhibit increased levels of negative religious coping compared to non-palliative

populations, alongside reduced use of positive coping strategies. Additionally, engagement

in spiritual or religious practices appears to be associated with improved mental health

outcomes and, in some studies, lower mortality. Conclusion: Spirituality represents a

relevant dimension in the experience of cancer, particularly in palliative care. Positive

religious coping is associated with improved emotional adaptation, whereas negative coping

may contribute to greater spiritual and psychological suffering. These findings reinforce the

importance of integrating spiritual assessment and support into oncological and palliative

care to promote more comprehensive and patient-centered approaches.

Palavras-chave: spirituality; religious coping; cancer.