Letter to the Editor

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# Religious Coping in the Parents of Critically III Children

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## Dear Editor,

The pediatric intensive care unit (PICU) experience for parents is extremely stressful. Commonly identified parental stressors included the loss of the parenting role, uncertainty over the child's outcome, being separated from the child (1). Religious coping is the use of religious beliefs or practices to reduce the emotional distress caused by loss or change (2). Religion and/or spirituality are important values for many parents of critically ill children (3). Faith helped sustain some parents whose children had died in PICUs and offered comfort in the act of praying for Allah's help and guidance (4). Here, we present religious coping in the parents of critically ill children in the PICU to attract the attention of health caregivers to the parents' spiritual needs.

In PICUs, parents identified six priorities for pediatric end-of-life care including honest and complete information, ready access to staff, communication and care coordination, emotional expression and support by the staff, preservation of the integrity of the parent-child relationship, and faith (4). The main causes of extremely stressful situations for parental stress in a PICU were as follows: the parents' child having breathing difficulty; their child suffering pain; their child being unresponsive; crises in other children in the PICU. Factors least associated with stress included not being alone with baby; and the presence of monitors and equipment. Nearly all parents (99%) felt that prayer was helpful (1). Robinson et al. (5) studied matters of spirituality at the end of life in the PICU. They found that four explicitly spiritual/ religious themes emerged prayer, faith, access to and care from clergy, and belief in the transcendent quality of the parent-child relationship that endures beyond death. Parents also identified several implicitly spiritual/religious themes, including insight and wisdom; reliance on values; and virtues such as hope, trust, and love (5). Most parents of children receiving palliative care felt that religion and spirituality were important in helping them deal with tough times, and most parents reported either participation in formal religious communities, or a sense of personal spirituality. Their beliefs and prayers were associated with qualities of their overall outlook on life, questions of goodness and human capacity, or that "everything happens for a reason". From religious participation and practices, parents felt they received support from both their spiritual communities and from Allah, peace and comfort, and moral guidance (6).

We have observed that all parents of children were stressful and psychosocially affected in PICU. Most parents, particularly mothers showed markedly increase in the frequency of supplication, daily religious rituals and charity. The prayed parents have found spiritual relief and inner heart peace because they believe in the following religious teachings: The best, finest, sweetest, most immediate fruit and result of supplication is this, that the person who offers it knows there is someone who listens to his voice, sends a remedy for his ailment, takes pity on him, and whose hand of power reaches everything. He is not alone in this great hostel of the world; there is an all-generous being who looks after him and makes it friendly. Imagining himself in the presence of the One who can bring about all his needs and repulse all his innumerable enemies, he feels a joy and relief; he casts off his load, which is as heavy as the world and exclaims: "All praise be to Allah, the Lord and Sustainer of the Worlds!" (7).

In conclusion, we would like to emphasize that religious coping is important for many parents of critically ill children in PICU in many societies in the world; therefore, we believe that parents in PICU should be supported spiritually by health caregivers.



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