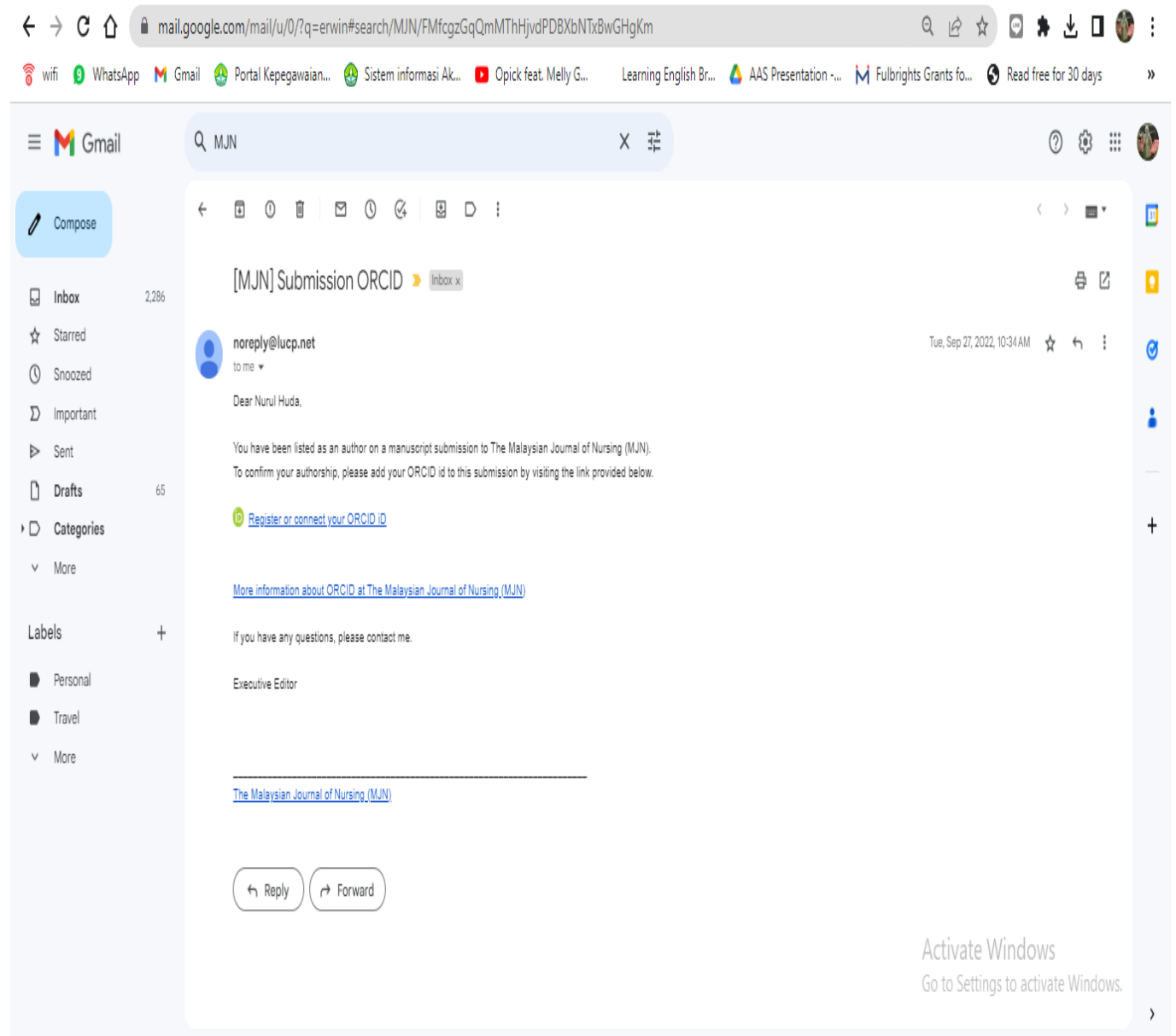


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A revised version of "Religion and spirituality in coping with cancer among Muslims: A literature review: Religion and spirituality among Muslim Cancer Patient" has been uploaded by the author Tukimin.

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Thanking you for your support and cooperation

With Best Regards
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Research & Publication Executive
The Malaysian Journal of Nursing
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Religion and Spirituality in Coping with Cancer among Muslims: A Literature Review

ABSTRACT:

Active religious practice is central to the lives of Muslims. Few studies have examined how religious engagement by Muslims who are coping with cancer affects their psychological health during treatment. Objective: To determine how and the extent to which religion and spirituality are employed as coping mechanisms by Muslims through a literature review. Methods: The electronic Medline, Cinahl, Google Scholar, and PubMed databases were used to identify relevant articles. Grey literature, including websites, was also looked over. Studies including patients with cancer of all types and stages were included. Results: Eight articles were included in the review. Key topics of interest were how the characteristics of Muslim religiosity and spirituality are involved in coping with cancer, including whether they further enable a Muslim to give meaning to cancer, how cancer affects the religious beliefs of Muslim patients with cancer, and whether religion influences treatment considerations. Conclusion: Religion and spirituality are crucial for Muslim patients to find meaning in cancer, and both are used as primary means of coping. Thus, nurses must be aware of and sensitive to the importance of religion in caring for such patients.

Author(s):
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Title: Religion and spirituality in coping with cancer among Muslims: A literature review

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Religion and spirituality in coping with cancer among Muslims: A literature review

Abstract

Background: Active religious practice is central to the lives of Muslims. Few studies have examined how religious engagement by Muslims who are coping with cancer affects their psychological health during treatment. **Objective:** To determine how and the extent to which religion and spirituality are employed as coping mechanisms by Muslims through a literature review. **Method:** The electronic Medline, Cinahl, Google Scholar, and PubMed databases were used to identify relevant articles. Grey literature, including websites, was also looked over. Studies including patients with cancer of all types and stages were included. **Results:** Eight articles were included in the review. Key topics of interest were how the characteristics of Muslim religiosity and spirituality are involved in coping with cancer, including whether further how they enable a Muslim to give meaning to cancer, how cancer affects the religious beliefs of Muslim patients with cancer, and whether religion influences treatment considerations. **Conclusions:** Religion and spirituality are crucial for Muslim patients to find meaning in cancer, and both are used as primary means of coping. Thus, nurses must be aware of and sensitive to the importance of religion in caring for such patients

Keywords: Religiosity, Spirituality, Coping, Cancer, Nursing.

Background

Cancer is a major public health concern worldwide. Among diseases, its economic burden is among the most severe (1). In 2018, 18.07 million new cancer cases were diagnosed in the world, while 9.8 million people died from cancer (2). By 2030, 23.6 million new instances of cancer are expected to be diagnosed each year (3).

Having cancer is a really difficult situation. Cancer patients and their families suffer physical, emotional, financial, social, and spiritual obstacles as a result of the disease's diagnosis and treatment. Patients' physical and mental well-being will be impaired, and this will have a direct impact on their entire quality of life. Research found that many cancer patients got anxiety and fall

to depression especially in advanced cancer patients since they are fears about death (4). In order to cope with the experiences, many patients try to find the best coping with the most affordable for them. It help them to moderate their negative feelings especially ater diagnosing with the cancer (4,5).

Given its prevalence and burden, many studies have tried to determine how patients with cancer cope with their illness and improve their quality of life. One major focus of research is religious and spiritual coping. Engaging in daily spiritual activities and having religious support are significant predictors of the mental health status of patients with cancer (6). Religiosity exerts many positive effects on an individual facing a life-threatening illness. Religiosity can lead a believer to be active in religious activities, strengthening their faith and communal ties. Overall, religiosity results in positive health outcomes (7). Among Muslims, religiosity is of particular importance, especially in the context of the detailed guidelines on everyday life provided in the Qur'an and sunnah (8).

Healthcare practitioners working with cancer patients in underdeveloped countries should understand of the numerous coping techniques that patients use after getting a cancer diagnosis. It is vital for patients to develop coping strategies, and integrating one into their treatment regime constitutes a key milestone in cancer care. Active religious practice is central to the lives of Muslims (9). Yet, to date, few studies have examined how religious engagement by Muslims who are coping with critical illnesses affects their psychological health during treatment. Thus, we undertook a literature review to determine both the impact of religious coping among Muslim cancer patients and the coping mechanisms they use to deal with the disease.

Purpose

This study aims to determine how and the extent to which religion and spirituality are employed as coping mechanisms by Muslims through a literature review

Methods

Research design

This study was classified as a literature review since it identified, picked, evaluated, and synthesized high-quality research materials pertinent to the research question.

Search methods

We searched the electronic Medline, Cinahl, Google Scholar, and Pubmed databases for relevant articles. A combination of keywords, namely 'Cancer', 'Spiritual', 'Coping', 'Religiosity', 'Strategies', 'Muslim', and 'Islam', were used to identify relevant articles. The abstracts obtained from the initial search were reviewed by the primary author, who specifically determined whether they addressed the effects of a cancer diagnosis on individuals and their usage of religious coping mechanisms. Each article identified was read in full to assess its relevance.

Inclusion and exclusion criteria

The inclusion criteria were created to concentrate on the subject the study team was looking into in order to avoid bias. Studies that were primary qualitative research studies, published in English between 2009 and 2021, that took into account at least one factor connected to the religious coping among Muslim cancer patients were included in this review. Incomplete studies and studies with duplicate items in the search results were eliminated.

Screening of articles

Separate authors screened the articles. Any differences of opinion were discussed between the authors. The key phrases and search terms were used to retrieve 16.870 articles from CINAHL, Pubmed, and GoogleScholar during the identification phase. Duplicates were deleted from 16.816 of these articles. There were 57 papers that were included in the screening step after recognizing the title and abstract, but only 25 were evaluated for eligibility, and 32 were discarded because the publications were unrelated to the study. 17 of the 25 full-text publications evaluated were irrelevant to the issue under consideration and did not fit the requirements for inclusion and exclusion. Therefore, only 8 articles were retained (**Figure 1**).

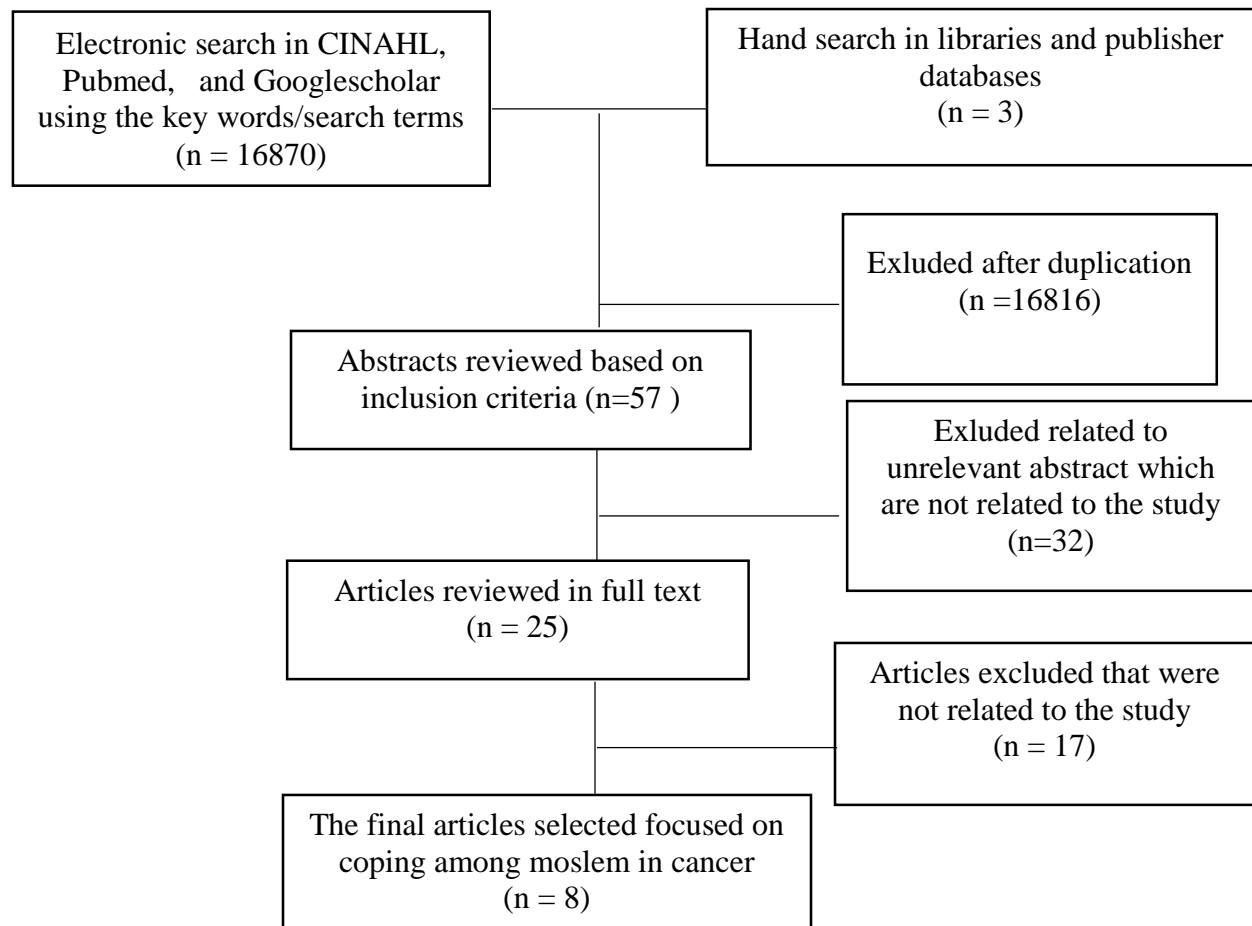


Figure 1. Flow chart of screening articles

Data extraction and analysis

Due to the variability in the methodology and statistical significance of the results, this review was unable to conduct a meta-analysis of the accuracy of religious coping among Muslim cancer patients. The data was isolated and summarized independently in order to complete the review. A table was used to extract the study's aims, methodology, results, and significance of the topic under consideration. **Table 1** contains the final extraction table.

Table 1. Study extraction

No	Title, authors and year of publication	Methodology	No of research subject	Study location	Results
1.	Religioun and spirituality in Coping with advanced Breast Cancer : Perspective From Malaysian Muslim Women. (10)	Qualitative	3	Malaysia	The themes were examined in two major areas: (1) what new meanings these women discovered as a result of their cancer experiences, and (2) how did these new meanings affect their lives.
2.	Religious beliefs, practices, and health in colorectal cancer patients in Saudi Arabia (11)	Quantitative	100	Saudi arabia	All participants (100%) took part in collective worship and prayer five times per day (Fard). After accounting for socioeconomic and social factors, overall religiosity was found to be inversely associated to depressed symptoms and suicide thoughts.
3.	Muslim Breast Cancer Survivor Spirituality: Coping Strategy or Health Seeking Behavior Hindrance (12)	Qualitative	39	Iran	Participants' primary source of psychological support is spirituality. Almost all of the individuals blamed their cancer on God's will. Despite this, they have been actively involved in their medical treatment.
4.	Centrality of spirituality/religion in the culture of palliative care service in Indonesia: An ethnographic study (13)	Qualitative : An ethnographic study	Patients (n = 21), their relatives (n = 21), and a palliative care staff (n = 6)	Indonesia	Religion was characterized as being fundamental to daily life, with all participants claiming to be affiliated with certain religions and engaging in religious behaviors on a regular basis. Patients' families were aware of and responded to their requirements for these practices. Patients and their relatives received spiritual treatment from the staff in the form of religious discussions and group prayers. Health care professionals must comprehend religious and spiritual traditions in order to support patients and their families in end-of-life care. These traditions are important cultural aspects and have a basic bearing on their patients' holistic health.

5.	The Impact of Culture and Sociological and Psychological Issues on Muslim Patients With Breast Cancer in Pakistan (14)	Qualitative	39	Pakistan	This study emphasizes the importance of religion and family support as coping mechanisms, as well as the difficulties of isolation, hostility, and rage that are common reactions to chemotherapy. Women's desire for spiritual support for their condition, as well as the overarching innate attribute of maternal duty, are unique elements of this study. These cultural characteristics will need to be studied and researched further.
6.	Coping with a diagnosis of breast cancer among Omani women (15)	Qualitative	Breast cancer has been diagnosed in 19 women.	Oman	Denial, optimism, retreat, Islamic beliefs and practices, and family and health-care professional help were all mentioned as coping techniques, with Islamic beliefs and practices being the most prevalent. Women's coping techniques should be recognized and respected by health-care practitioners, who should encourage them to use them to lessen psychological symptoms.
7.	Islamic Religiosity, Depression and Anxiety among Muslim Cancer Patients (9)	Quantitative	59	Malaysia	The results showed a strong negative correlation between Islamic religiosity and feelings of despondency and anxiety. The religious personality subscale was also found to be negatively linked with depression.
8.	Arab American Women's Lived Experience With Early-Stage Breast Cancer Diagnosis and Surgical Treatment (16)	Qualitative	Surgical treatment for early-stage breast cancer in ten Arab American women	United States	When Arab American women were diagnosed with breast cancer, their fatalistic attitudes did not deter them from seeking care and seeking treatment information and options.

Quality appraisal

Critical appraisal instruments were used to determine whether the study design was appropriate for the critical review issue and whether the articles were pertinent to the subject under evaluation. The levels of evidence for the article and the quality assessment are shown in **Table 2**.

No	Author and year	Methodology	Level of evidence	Summary of appraisal
1.	Farizah Ahmad et all, (2010)	Qualitative	VII	Good
2.	Mahmoud Shaheen Al Ahwal et all, (2016)	Qualitative	VII	Good
3.	Tayebeh Fasihi Harandy et all, (2010)	Qualitative	VII	Good
4.	Erna Rochmawati ,Rick Wiechula, Kate Cameron. (2018)	Qualitative	VII	Good
5.	Maggi Banning et all, (2009)	Qualitative	VII	Good
6.	Mohammed H Al-Azri et all, (2014)	Qualitative	VII	Good
7.	Nadzirah Ahmad Basri et all, (2015)	Qualitative	VII	Fair
8.	Rana Fakhri Obeidat et all, (2012)	Qualitative	VII	Good

Results

We identified eight articles that met the inclusion criteria. Most of these papers discussed the connection between religiosity and spirit quality and how these two orientations directly influence a patient's coping when faced with cancer. Broadly, the articles differentiated between religiosity and spirituality among Muslim believers, investigated the meaning such believers ascribed to having cancer, analysed the effect of having been diagnosed with cancer on their spirituality and religiosity, and discussed the implications of being able to rely on religiosity as a coping method during treatment for cancer. Each of these topics are addressed individually in the following sections.

Differentiating religiosity and spirituality in Islam

The concepts of spirituality and religiosity in the West differ from those in Islam. In the West, the prevailing view is that spirituality is restricted to specific religious contexts and is mainly influenced by one's ethnicity and religious community (10). However, Islam makes no distinction between religion and spirituality, which implies that there is no distinction between thought and action (17). More precisely, spirituality and religiosity are not separate in Islam because spirituality is seen as an inner dimension of religion (10).

Fundamentally, the difference between the secular concepts of spirituality and those of monotheistic religions, of which Islam is one, is the source of knowledge (11). Whereas secular thinkers engage in various speculative endeavours, Islam is based on the actual word of God (Allah), as enshrined in the Qur'an, which is the principal holy book of Muslims. Thus, the Qur'an is an authoritative text for believers (10).

The meaning of cancer

A cancer diagnosis is an emotionally fraught experience. One study found that among Muslims, many believe their illness to be an awakening from God (10). Illness, therefore, is regarded as a sign of God's love and grace, not as punishment (16). Thus, patients find their disease to be more tolerable and can develop their illness appraisal (9).

Impact of cancer diagnosis on spirituality and religiosity

According to our literature review, Muslims who are diagnosed with cancer perceive their disease to be a manifestation of God's will. Because they ascribe control over life and death to God, they are able to surrender to and accept their condition; yet, simultaneously, they are willing to be actively engaged in medical treatment (12). Thus, confronting a life-threatening illness is a spiritual encounter for them, one which allows them to find a path to healing (10). This disposition enables Muslim patients to be patient (*Sabr*) in their efforts to achieve their spiritual growth (18). Muslim patients tend to engage in the habitual recitation of prayers and the Qur'an (13). These activities help them manage their emotions and overcome fear and anxiety stemming from the cancer diagnosis (15,18).

Religiosity as a means of coping with cancer

Scholars have become increasingly interested in the role that religiosity and spirituality play in coping with cancer during treatment (19). Coping is described as a person's continual cognitive and behavioral efforts to cope with certain external or internal pressures that are deemed to be beyond their psychological resources (20). Among Muslim patients diagnosed with cancer, religiosity becomes a source of coping with cancer (15). One study determined that Muslims who accepted cancer as God's will and adopted positive thinking exhibited low psychological distress with respect to low anxiety and depression and high quality of life (9,12). Coping through religiosity and spirituality have been reported by patients as making them feel calmer, more

peaceful, more optimistic, and more energetic, with seemingly all fear removed (10). Patients have further reported that such coping also assisted them with their emotional stress and pain and helped them to recover from their illnesses (15).

Discussions

Life-threatening illnesses such as cancer entail intense emotional experiences and may involve a spiritual encounter as they seek to cope during treatment. Among Muslim patients with cancer, spirituality helps them become closer to God, to accept their diagnosis, and to be free of all the fear and pain caused by their illness. They are also able to change their perspective of the world and find meaning in being a patient with cancer. Consequently, Muslims tend to have a positive attitude and exhibit acceptance of their illness. Cancer enables them to become more engaged with God and to acquire new strength to face difficulties in life (10).

This literature review demonstrated how vital religion and spirituality are in Muslim thought and behaviour when facing a critical illness. This finding accords with other studies that have stated that spirituality plays a vital role in cultivating positive feelings towards health and life among cancer survivors (21). Most of the moslem used spirituality and religioun as their important coping resources. Religion usually provides a positive meaning and answers to fundamental existential questions about life and death, directing them to be positive. Therefore, this coping strategies become the most frequent coping startegies used by patient (10). Hence, patient's experience of cancer and their coping strategies must be understood by healthcare professional. Moreover, health care professional must also assisst and encourage them to use in appropriate way. Previous research showed that patient who trusted and closer to God in their illness trajectories will not afraid of death, stronger believe in after life concept and increased their quality of life (9,12).

In this literature review, we found that Muslims followed their religious beliefs and practices, such as reciting prayers and passages in the Qur'an to mitigate their emotional distress and fear and to feel the mercy of God (15). Thus, patients who were committed to their religious beliefs and practices decreased their anxiety and fear of their illness (14). In this case, they did it to be more comfort and try to dilute their emotional distress and fear. They believed that stronger their faith in Allah, the more opportunity to get Mercy from Allah. Therefore, they tried o follow their religious practices (Al-Azri et al, 2014). In the Quran, Allah said “ We sent down in the

Quran that which is a healing and a mercy to those who believe: to the unjust it causes nothing but loss after loss” (Qur’an: Bani Israel 17:82). Patients should be encouraged to use their religion and spirituality for coping, moreover, healthcare providers should aid them in praying frequently, reciting religious verses from the Holy Qur'an, and communicating with religious leaders, all of which can provide them with a sense of inner peace. As a result, patients formed their trust in health professionals and adhered to religious beliefs and rituals in order to reduce their worry and fear of the implications of their illnesses.

The limitation of this study was only explorative rather than focused on answering a specific clinical question. In particular, this study was only aimed at discerning the coping strategies of and verifying the effect of religious coping among Muslims with cancer.

Conclusion

Cancer is a life-threatening disease that affects the physical, emotional, and spiritual health of patients. To the best of our knowledge, this is the first literature review to explore the relationship that religiosity and spirituality have with how Muslims cope with cancer. We determined that spirituality and religiosity play crucial roles in the ability of patients to find meaning in cancer, with religiosity helping them become closer to God and spirituality helping them cope with the disease burden. Therefore, healthcare professional must be aware of and culturally sensitive to religiosity and spirituality when caring for patients.

Conflict of Interest

In publishing this research, the authors state that they have no competing interests.

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Religion and Spirituality in Coping with Cancer: A Literature Review

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ABSTRACT

Background: Active religious practice is central to the lives of Muslims. Few studies have examined how religious engagement by Muslims who are coping with cancer affects their psychological health during treatment. **Objective:** To determine how and the extent to which religion and spirituality are employed as coping mechanisms by Muslims through a literature review. **Methods:** The electronic Medline, Cinahl, Google Scholar, and PubMed databases were used to identify relevant articles. Grey literature, including websites, was also looked over. Studies including patients with cancer of all types and stages were included. **Results:** Eight articles were included in the review. Key topics of interest were how the characteristics of Muslim religiosity and spirituality are involved in coping with cancer, including whether they further enable a Muslim to give meaning to cancer, how cancer affects the religious beliefs of Muslim patients with cancer, and whether religion influences treatment considerations. **Conclusion:** Religion and spirituality are crucial for Muslim patients to find meaning in cancer, and both are used as primary means of coping. Thus, nurses must be aware of and sensitive to the importance of religion in caring for such patients.

Keywords: Religiosity; Spirituality; Coping; Cancer; Nursing

INTRODUCTION

Cancer is a major public health concern worldwide. Among diseases, it's economic burden is among the most severe (John & Ross, 2010). In 2018, 18.07 million new cancer cases were diagnosed in the world, while 9.8 million people died from cancer (WHO, 2018). By 2030, 23.6 million new instances of cancer are expected to be diagnosed each year (Sung *et al.*, 2021). Having cancer is a really difficult situation. Cancer patients and their families suffer physical, emotional, financial, social, and spiritual obstacles as a result of the disease's diagnosis and treatment. Patients' physical and mental well-being will be impaired, and this will have a direct impact on their entire quality of life. Research found that many cancer patients get anxiety and fall into depression, especially in advanced cancer patients, since they are afraid of death (Niedzwiedz *et al.*, 2019). In order to cope

with the experience, many patients try to find the best coping method that is most affordable for them. It helps them to moderate their negative feelings, especially after being diagnosed with cancer (Niedzwiedz *et al.*, 2019; Baqutayan, 2012). Given its prevalence and burden, many studies have tried to determine how patients with cancer cope with their illness and improve their quality of life. One major focus of research is religious and spiritual coping. Engaging in daily spiritual activities and having religious support are significant predictors of the mental health status of patients with cancer (Grossoehme, 2020). Religiosity exerts many positive effects on an individual facing a life-threatening illness. Religiosity can lead a believer to be active in religious activities, strengthening their faith and communal ties. Overall, religiosity results in positive health outcomes (George, 2000). Among Muslims, religiosity is of particular importance, especially in the context of the detailed guidelines on

everyday life provided in the Qur'an and Sunnah (Park, 2005).

Healthcare practitioners working with cancer patients in underdeveloped countries should understand the numerous coping techniques that patients use after getting a cancer diagnosis. It is vital for patients to develop coping strategies and integrating one into their treatment regime constitutes a key milestone in cancer care. Active religious practice is central to the lives of Muslims (Basri, Gan & NG, 2014). Yet, to date, few studies have examined how religious engagement by Muslims who are coping with critical illnesses affects their psychological health during treatment. Thus, a literature review was undertaken to determine both the impact of religious coping among Muslim cancer patients and the coping mechanisms they use to deal with the disease.

Purpose

This study aims to determine how and the extent to which religion and spirituality are employed as coping mechanisms by Muslims through a literature review.

METHODOLOGY

Research Design

This study was classified as a literature review since it identified, picked, evaluated, and synthesized high-quality research materials pertinent to the research question.

Search Methods

We searched the electronic Medline, Cinahl, Google Scholar, and PubMed databases for relevant articles. A combination of keywords, namely 'Cancer', 'Spiritual', 'Coping', 'Religiosity', 'Strategies', 'Muslim', and 'Islam', were used to identify relevant articles. The abstracts obtained from the initial search were reviewed by the primary author, who specifically determined whether they addressed the effects of a cancer diagnosis on individuals and their use of religious coping mechanisms. Each article identified was read in full to assess its relevance.

Inclusion and Exclusion Criteria

The inclusion criteria were created to concentrate on the subject the study team was looking into in order to avoid bias. Studies that were primary qualitative research studies, published in English between 2009

and 2021, that took into account at least one factor connected to the religious coping among Muslim cancer patients were included in this review. Incomplete studies and studies with duplicate items in the search results were eliminated.

Screening of Articles

Separate authors screened the articles. Any differences of opinion were discussed between the authors. The key phrases and search terms were used to retrieve 16,870 articles from CINAHL, PubMed, and Google Scholar during the identification phase. Duplicates were deleted from 16,816 of these articles. There were 57 papers that were included in the screening step after recognizing the title and abstract, but only 25 were evaluated for eligibility, and 32 were discarded because the publications were unrelated to the study. 17 of the 25 full-text publications evaluated were irrelevant to the issue under consideration and did not fit the requirements for inclusion and exclusion. Therefore, only 8 articles were retained (Figure 1).

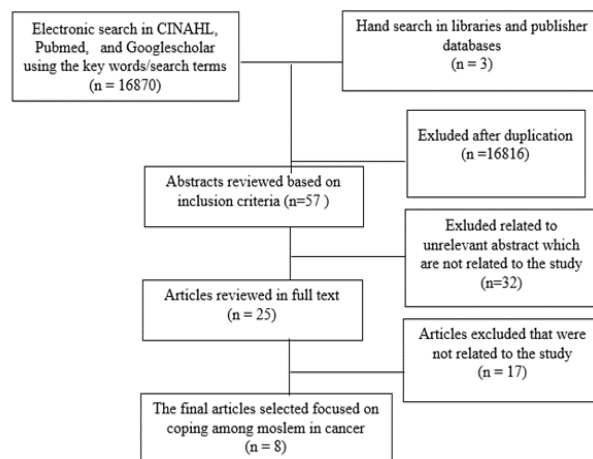


Figure 1: Flow Chart of Screening Articles

Data Extraction and Analysis

Due to the variability in the methodology and statistical significance of the results, this review was unable to conduct a meta-analysis of the accuracy of religious coping among Muslim cancer patients. The data was isolated and summarized independently in order to complete the review. A table was used to extract the study's aims, methodology, results, and significance of the topic under consideration. Table 1 contains the final extraction table.

Table 1: Study Extraction

No	Title, authors and year of publication	Methodology	No of research subject	Study location	Results
1.	Religion and spirituality in Coping with advanced Breast Cancer : Perspective From Malaysian Muslim Women. (10)	Qualitative	3	Malaysia	The themes were examined in two major areas: (1) what new meanings these women discovered as a result of their cancer experiences, and (2) how did these new meanings affect their lives.
2.	Religious beliefs, practices, and health in colorectal cancer patients in Saudi Arabia (11)	Quantitative	100	Saudi arabia	All participants (100%) took part in collective worship and prayer five times per day (Fard). After accounting for socioeconomic and social factors, overall religiosity was found to be inversely associated to depressed symptoms and suicide thoughts.
3.	Muslim Breast Cancer Survivor Spirituality: Coping Strategy or Health Seeking Behavior Hindrance (12)	Qualitative	39	Iran	Participants' primary source of psychological support is spirituality. Almost all of the individuals blamed their cancer on God's will. Despite this, they have been actively involved in their medical treatment.
4.	Centrality of spirituality/religion in the culture of palliative care service in Indonesia: An ethnographic study (13)	Qualitative : An ethnographic study	Patients (n = 21), their relatives (n = 21), and a palliative care staff (n = 6)	Indonesia	Religion was characterized as being fundamental to daily life, with all participants claiming to be affiliated with certain religions and engaging in religious behaviors on a regular basis. Patients' families were aware of and responded to their requirements for these practices. Patients and their relatives received spiritual treatment from the staff in the form of religious discussions and group prayers. Health care professionals must comprehend religious and spiritual traditions in order to support patients and their families in end-of-life care. These traditions are important cultural aspects and have a basic bearing on their patients' holistic health.
5.	The Impact of Culture and Sociological and Psychological Issues on Muslim Patients With Breast Cancer in Pakistan (14)	Qualitative	39	Pakistan	This study emphasizes the importance of religion and family support as coping mechanisms, as well as the difficulties of isolation, hostility, and rage that are common reactions to chemotherapy. Women's desire for spiritual support for their condition, as well as the overarching innate attribute of maternal duty, are unique elements of this study. These cultural characteristics will need to be studied and researched further.
6.	Coping with a diagnosis of breast cancer among Omani women (15)	Qualitative	Breast cancer has been diagnosed in 19 women.	Oman	Denial, optimism, retreat, Islamic beliefs and practices, and family and health-care professional help were all mentioned as coping techniques, with Islamic beliefs and practices being the most prevalent. Women's coping techniques should be recognized and respected by health-care practitioners, who should encourage them to use them to lessen psychological symptoms.
7.	Islamic Religiosity, Depression and Anxiety among Muslim Cancer Patients (9)	Quantitative	59	Malaysia	The results showed a strong negative correlation between Islamic religiosity and feelings of despondency and anxiety. The religious personality subscale was also found to be negatively linked with depression.
8.	Arab American Women's Lived Experience With Early-Stage Breast Cancer Diagnosis and Surgical Treatment (16)	Qualitative	Surgical treatment for early-stage breast cancer in ten Arab American women	United States	When Arab American women were diagnosed with breast cancer, their fatalistic attitudes did not deter them from seeking care and seeking treatment information and options.

Quality Appraisal

Critical appraisal instruments were used to determine whether the study design was appropriate for the critical

Quality Appraisal

Critical appraisal instruments were used to determine whether the study design was appropriate for the critical review issue and whether the articles were pertinent to the subject under evaluation. The levels of evidence for the article and the quality assessment are shown in table 2.

Table 2: The Levels of Evidence for the Article and the Quality Assessment

No	Author and Year	Methodology	Level of Evidence	Summary of Appraisal
1.	Farizah Ahmad <i>et al.</i> , (2010)	Qualitative	VII	Good
2.	Mahmoud Shaheen Al Ahwal <i>et al.</i> , (2016)	Qualitative	VII	Good
3.	Tayebeh Fasihi Harandy <i>et al.</i> , (2010)	Qualitative	VII	Good
4.	Erna Rochmawati ,Rick Wicchula, Kate Cameron. (2018)	Qualitative	VII	Good
5.	Maggi Banning <i>et al.</i> , (2009)	Qualitative	VII	Good
6.	Mohammed H Al-Azri <i>et al.</i> , (2014)	Qualitative	VII	Good
7.	Nadzirah Ahmad Basri <i>et al.</i> , (2015)	Qualitative	VII	Fair
8.	Rana Fakhri Obeidat <i>et al.</i> , (2012)	Qualitative	VII	Good

Ethical Approval

A review paper only; the project of the study topic received ethics Approval on April 18, 2022, from the Ethical Committee Board in Indonesia (IRB no: 332 / UN.19.5.1.8/KEPK.FKp/2022). This work is licensed under a Creative Commons Attribution 4.0 International License.

RESULTS

We identified eight articles that met the inclusion criteria. Most of these papers discussed the connection between religiosity and spirit quality and how these two orientations directly influence a patient's coping when faced with cancer. The articles broadly differentiated between religiosity and spirituality among Muslim believers; investigated the meaning such believers ascribed to having cancer, analysed the effect of having been diagnosed with cancer on their spirituality and religiosity; and discussed the implications of being able to rely on religiosity as a coping method during treatment for cancer. Each of these topics is addressed individually in the following sections.

Differentiating Religiosity and Spirituality in Islam

The concepts of spirituality and religiosity in the West differ from those in Islam. In the West, the prevailing view is that spirituality is restricted to specific religious contexts and is mainly influenced by one's ethnicity and religious community (Ahmad, Muhammad & Abdullah, 2011). However, Islam makes no distinction between religion and spirituality, which

implies that there is no distinction between thought and action (Baumer, 1971). More precisely, spirituality and religiosity are not separate in Islam because spirituality is seen as an inner dimension of religion (Ahmad, Muhammad & Abdullah, 2011).

The difference between the secular concepts of spirituality and those of monotheistic religions, of which Islam is one, is the source of knowledge (Shaheen *et al.*, 2016). Whereas secular thinkers engage in various speculative endeavours, Islam is based on the actual word of God (Allah), as enshrined in the Qur'an, which is the principal holy book of Muslims. Thus, the Qur'an is an authoritative text for believers (Ahmad, Muhammad & Abdullah, 2011).

The Meaning of Cancer

A cancer diagnosis is an emotionally fraught experience. One study found that among Muslims, many believe their illness to be an awakening from God (Ahmad, Muhammad & Abdullah, 2011). Illness, therefore, is regarded as a sign of God's love and grace, not as punishment (Obeidat, Lally & Dickerson, 2012). Thus, patients find their disease to be more tolerable and can develop their illness appraisal (Basri, Gan & NG, 2014).

Impact of Cancer Diagnosis on Spirituality and Religiosity

According to our literature review, Muslims who are diagnosed with cancer perceive their disease to be a manifestation of God's will. Because they ascribe control over life and death to God, they are able to surrender to and accept their condition; yet, simultaneously, they are willing to be actively engaged in medical treatment (Harandy *et al.*, 2010). Thus, confronting a life-threatening illness is a spiritual encounter for them, one which allows them to find a path to healing (Ahmad, Muhammad & Abdullah, 2011). This disposition enables Muslim patients to be patient (Sabr) in their efforts to achieve their spiritual growth (Ahmadi *et al.*, 2019). Muslim patients tend to engage in the habitual recitation of prayers and the Qur'an (Rochmawati, Wiechula & Cameron, 2018). These activities help them manage their emotions and overcome fear and anxiety stemming from the cancer diagnosis (Al-Azri *et al.*, 2014; Ahmadi *et al.*, 2019).

Religiosity as a Means of Coping with Cancer

Scholars have become increasingly interested in the role that religiosity and spirituality play in coping with cancer during treatment (Lazarus, 1993). Coping is described as a person's continual cognitive and behavioural efforts to cope with certain external or internal pressures that are deemed to be beyond their psychological resources (Lin & Bauer-Wu, 2003). Among Muslim patients diagnosed with cancer, religiosity becomes a source of coping with cancer (Al-Azri *et al.*, 2014). One study determined that Muslims who accepted cancer as God's will and adopted positive thinking exhibited low psychological distress with respect to low anxiety and depression and a high quality of life (Basri, Gan & NG, 2014; Harandy *et al.*, 2010). Coping through religiosity and spirituality has been reported by patients as making them feel calmer, more peaceful, more optimistic, and more energetic, with seemingly all fear removed (Ahmad, Muhammad & Abdullah, 2011). Patients have further reported that such coping also assisted them with their emotional stress and pain and helped them recover from their illnesses (Al-Azri *et al.*, 2014).

DISCUSSION

Life-threatening illnesses such as cancer entail intense emotional experiences and may involve a spiritual encounter as they seek to cope during treatment. Among Muslim patients with cancer, spirituality helps them become closer to God, accept their diagnosis, and be free of all the fear and pain caused by their illness. They are also able to change their perspective of the world and find meaning in being a patient with cancer. Consequently, Muslims tend to have a positive attitude and exhibit acceptance of their illness. Cancer enables them to become more engaged with God and to acquire new strength to face difficulties in life (Ahmad, Muhammad & Abdullah, 2011).

This literature review demonstrated how vital religion and spirituality are in Muslim thought and behaviour when facing a critical illness. This finding accords with other studies that have stated that spirituality plays a vital role in cultivating positive feelings towards health and life among cancer survivors (Narayanasamy, 2001). Most of the Muslims used spirituality and religion as their main coping resources. Religion usually provides

a positive meaning and answers to fundamental existential questions about life and death, directing them to be positive. Therefore, these coping strategies become the most frequently used by patients (Ahmad, Muhammad & Abdullah, 2011). Hence, patients' experience of cancer and their coping strategies must be understood by healthcare professionals. Moreover, healthcare professionals must also assist and encourage them to use it in an appropriate way. Previous research showed that patients who trusted and were closer to God in their illness trajectories were not afraid of death, had a stronger belief in the afterlife concept, and increased their quality of life (Basri, Gan & NG, 2014; Harandy *et al.*, 2010).

In this literature review, we found that Muslims followed their religious beliefs and practices, such as reciting prayers and passages in the Qur'an, to mitigate their emotional distress and fear and to feel the mercy of God (Al-Azri *et al.*, 2014). Thus, patients who were committed to their religious beliefs and practises decreased their anxiety and fear of their illness (Banning *et al.*, 2009). In this case, they did it to be more comfortable and to try to dilute their emotional distress and fear. They believed that the stronger their faith in Allah, the more opportunities they had to get mercy from Allah. Therefore, they tried to follow their religious practises (Al-Azri *et al.*, 2014). In the Quran, Allah said, " We sent down in the Quran that which is a healing and a mercy to those who believe; to the unjust it causes nothing but loss after loss" (Qur'an: Bani Israel 17:82). Patients should be encouraged to use their religion and spirituality for coping. Furthermore, healthcare providers should aid them in praying frequently, reciting religious verses from the Holy Qur'an, and communicating with religious leaders, all of which can provide them with a sense of inner peace. As a result, patients formed their trust in health professionals

and adhered to religious beliefs and rituals in order to reduce their worry and fear of the implications of their illnesses.

The limitation of this study was that it was only explorative rather than focused on answering a specific clinical question. In particular, this study was only aimed at discerning the coping strategies and verifying the effect of religious coping among Muslims with cancer.

CONCLUSION

Cancer is a life-threatening disease that affects the physical, emotional, and spiritual health of patients. To the best of our knowledge, this is the first literature review to explore the relationship that religiosity and spirituality have with how Muslims cope with cancer. We determined that spirituality and religiosity play crucial roles in the ability of patients to find meaning in cancer, with religiosity helping them become closer to God and spirituality helping them cope with the disease burden. Therefore, healthcare professionals must be aware of and culturally sensitive to religion and spirituality when caring for patients.

Conflict of Interest

In publishing this research, the authors state that they have no competing interests.

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Conflict of Interest

All authors declared no competing interests in the study.

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