



# The Use of Prayer During Life-Threatening Illness: A Connectedness to God, Inner-Self, and Others

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## Abstract

To explore how prayers were used as expressions of spirituality among community-dwelling African Americans in response to life-threatening illness. Fifty-eight older African American adults residing in the Southeastern US participated in a qualitative descriptive study. Through prayers, participants requested the strength to endure, protection, healing and expressed gratitude. Prayers were expressions of spirituality through dimensions of connectedness: transpersonally to God or the unseen; intrapersonally to one's inner-self; and, interpersonally to others. Prayers are an important aspect of spirituality and the mental health of older African Americans particularly during serious, life-threatening illness. An understanding of the ways in which prayers are used might enhance the cultural relevance of mental health interventions in this population.

**Keywords** Spirituality · Prayer · African Americans · Chronic illness

The use of prayer in the daily lives of US populations is well documented. Among the general population, 58% of US citizens say they pray at least once a day and these rates are higher in the Southern States and among African Americans (Pew Forum 2007). In response to life-threatening illnesses, individuals pray for healing (Ameling 2000; McCaffrey et al. 2004; Reyes-Ortiz et al. 2009), protection (Reis and Menezes 2017; Taylor et al. 2014) and strength to endure illness (Smith et al. 2012). Prayer is also used in response to varied personal and health issues such as the relief of pain (Meints et al. 2016; Meints et al. 2018; Robinson-Lane and Valle-rand 2018), depressed moods (Zhang et al. 2013), and difficulty sleeping (Sandberg

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et al. 2014). Moreover, when combined with other religious practices, prayer is associated with improved adherence to medications (Dalmida et al. 2017). Scholars who focused on religious practices among chronically ill populations have concluded that prayer is associated with poorer health outcomes (Escoto et al. 2018; Hatah et al. 2015; Hulett et al. 2018; Hvidt et al. 2017). However, these studies are largely cross-sectional, where praying is likely a strategy that increases within the context of serious, chronic illnesses and associated symptoms (Im et al. 2008; Sandberg et al. 2014).

## Conceptual Framework

Prayer is generally conceptualized as a religious practice and/or means of communicating with God (Cone 2002; Pinn 1999). As a religious practice, the act of praying can be private or public; solitary or communal (Cone 2002; Pinn 1999). Through spoken word, song, or thought, prayer is used to make requests to God for oneself or others or to offer praise and thanksgiving (Cone 2002; Pinn 1999). Prayer is further characterized by listening, confiding, and maintaining a relationship with God, a form of communication similar to that which occurs among mortal beings (Levin et al. 2011). When examined through the framework of spirituality, prayer is an expression of one's spirituality with multidimensional aspects of connectedness (Reed 1992). According to Reed (1992), spirituality promotes a sense of making meaning of one's lived experience which can be achieved through dimensions of connectedness transpersonally (to God or other higher power), intrapersonally (within oneself), and interpersonally (to others and the environment) (Reed 1992). These dimensions of connectedness enable the individual to transcend an everyday lived experience to an existence that is meaningful and empowered. Thus, prayer is a religious practice with spiritual dimensions that facilitates individual transcendence beyond a stressful situation to some level of well-being.

## Prayer and African Americans

In comparison to other US racial/ethnic groups, African Americans are more likely to report praying daily, to believe with certainty that God exists, and to indicate the importance of religion in their daily lives (Pew Forum 2007). Among African Americans, prayer is likely an everyday religious practice that is intermingled with a set of beliefs of who God is and what God can do along with a sense of empowerment and self-awareness in relation to one's image of God (Cone 2006). Historically, African Americans have used prayer as a means to communicate their struggles and fears to God (Cone 2002; Raboteau 1995) and to encourage others during adversity (Raboteau 1978). The perspective of God as a father figure, as a miracle maker, and one in control of life and death, permits believers to maintain a positive sense of self through this identity as a child of God (Cone 2006).

Among African Americans experiencing life-threatening illness, prayer remains a prevalent religious practice, a form of communication, and a means to maintain a

close and personal relationship with God (Hamilton et al. 2007). God is perceived to be a very important source of social support during troubled times and an ever-present and trusted confidant during life-threatening illnesses (Hamilton and Sandelowski 2004). In this report, we explore the use of prayers and the ways in which prayers are expressions of spirituality through dimensions of connectedness to God, self, and others within the context of a life-threatening illness experience (Carter 2008).

## Design and Methods

A combination of qualitative and quantitative methodologies was used to explore African Americans' use of prayers in response to life threatening illness. A qualitative descriptive design (Sandelowski 2000; Sandelowski 2010) using open-ended semi-structured interviews, criterion sampling, qualitative content analysis (Hsieh and Shannon 2005) were used to elicit participant's use of prayers in response to life threatening illness. Quantitative descriptive analyses were used to describe participant demographics and to describe frequencies of the types of prayers used among the participants (Field 2009). All quantitative analyses were performed with SPSS version 24. The Institutional Review Boards of the University of North Carolina at Chapel Hill and Emory University approved this study.

## Participants

The data for this report comes from the interviews of 58 African American women and men residing in the Southeastern United States. Inclusion criteria for this report include (a) African American ethnicity by self-report; (b) at least 50 years old; (c) having experienced a life-threatening illness; and (d) having used prayer. Although participants targeted for recruitment were religiously affiliated and likely to use this religious practice in their daily lives, religious affiliation was neither an inclusion or exclusion criteria. Recruitment efforts involved word of mouth, email announcements to community groups, presentations of the study by the first author during regularly scheduled church services, prayer meetings, and other faith-based community group meetings. The first author also presented the study during regularly scheduled meetings of an African American cancer support group.

## Procedures

The first author conducted semi-structured interviews lasting 15–60 min. During the interviews, participants were asked to talk candidly about whether and how they used religious songs, scriptures, and prayers to help them when they had a stressful event, such as a loss of a loved one or a life-threatening illness (Hamilton et al. 2013; Hamilton et al. 2012). The interviews consisted of three open-ended questions: (1) "Can you recall a time in your life that was particularly stressful for you?" (2) "Tell me about a religious song, scripture, or prayer that helped you during that time," and

(3) “Tell me how that song, scripture and/or prayer helped you during that time.” Participants were given a \$30 store gift card at the completion of the interview. This report focuses on participants use of prayers in response to life threatening illness.

### **Strategies to Enhance Rigor**

All interviews were conducted in participants’ homes or private rooms located in cancer clinics or faith-based institutions. To encourage participants to freely discuss issues related to spirituality and religious practices, only the first author and interviewee were present during the interview. All interviews were audiotaped and transcribed verbatim with the first author and research assistants reviewing each transcript for accuracy. Member checking was conducted with participants, members of the target population, and clergy during data collection and analysis to validate the interpretation of narratives, generation of themes, and validity of conclusions. The first author (JH) and last author (AM) independently read randomly selected transcripts for the purpose of arriving at clarity and agreement of themes and subthemes of purposes of prayers and dimensions of connectedness to God, self, and others.

### **Data Analysis**

Prior to content analysis of the data, a table was initially constructed to organize each participant’s narrative responses by the illness event; whether a prayer was discussed; the purpose of the prayer; descriptions of prayers as types of connectedness to God, one’s inner-self, and others, and, any stated outcomes. The first author (JH) and co-author (AM) identified key categories of prayers from participants’ descriptions of them. An initial analysis of the reported prayers used led to the construction of five categories: (1) Prayers for Strength, (2) Prayers for Protection, (3) Prayers for Healing, (4) Prayers for Gratitude, and (5) Prayers of Connectedness to God, self, and others. An SPSS database was created that allowed for these categories of prayers from each participant interview to be coded yes (1), reflecting a category or no (0), did not reflect a category. This SPSS database permitted the determination of demographics and frequencies for the uses of prayers (categories).

## **Results**

### **Participant Characteristics**

The 58 participants were on average 67 years old and primarily women (69%); married (55%); college educated (28%); retired (50%); currently affiliated with Baptist churches (72%); and, resided in rural areas (67%). Table 1 provides an in-depth description of study participants’ demographics.

**Table 1** Demographic characteristics of study participants

Variables	Participants ( <i>n</i> = 58)
Age (mean, SD)	67 (11.03)
<i>Gender (n, %)</i>	
Female	40 (69%)
Male	18 (31%)
<i>Geographic location (n, %)</i>	
Rural	39 (67%)
Urban	19 (33%)
<i>Marital status (n, %)</i>	
Married	32 (55%)
Widowed	8 (14%)
Divorced	9 (16%)
Separated	2 (3%)
Never married	5 (9%)
<i>Education (n, %)</i>	
< High school	9 (16%)
High school degree	11 (19%)
Partial college	14 (24%)
College degree	16 (28%)
Graduate/professional	8 (11%)
<i>Employment status (n, %)</i>	
Full-time/part-time	18 (31%)
Retired	29 (50%)
Quit because of health	11 (19%)
<i>Religious affiliation (n, %)</i>	
Baptist	42 (72%)
Methodist	11 (19%)
Catholic	3 (5%)
Holiness	1 (2%)

## Illness Experiences

Participants most frequently reported illness experiences of cancer (43%); followed by other chronic illness (24%), heart disease (7%); trauma/accident (5%); and stroke/neurovascular disease (3%). These life-threatening illness categories (heart disease, cancer, stroke, and unintentional injuries) are all leading causes of death among African Americans (CDC 2010) along with stressful chronic and functionally limiting illnesses such as kidney failure, insulin-dependent diabetes, and arthritis.

## Purpose of Prayer

When the purpose of a prayer was discussed, the most common purposes were strength to endure (47%) followed by healing (16%). Subsequently, gratitude was 9%, and protection was 7%, respectively.

*Strength to Endure* Prayers for strength to endure were requests to God for His assistance to persevere during the life threatening illness events. Participants that prayed for strength believed that God would be there with them at all times, walking with them and holding their hand throughout their struggles.

A 66-year-old never married woman described her use of prayer when diagnosed with endometrial cancer. She spoke of the purpose of her prayers to God in response to complications from cancer and radiation treatments:

I thought that I was going to die and I went into that back room and I prayed... He is your guide, your refuge, and He does give you strength and guide you to do whatever you have to do no matter how difficult it is...I couldn't depend on anybody: I couldn't depend on my pastor, I couldn't depend on my family, they came to see about me, they tried to do for me, but I had to call on the Lord to give me the strength.

A 69-year-old married man with the illness experiences of open-heart surgery, congestive heart failure, stroke, and later a diagnosis of prostate cancer spoke of the courage and strength received from his prayers to endure these illnesses:

It wasn't like it is today; so I went to the hospital afraid, and I remembered something [Bible verse] I had read... I asked God to do for me what You did for Hezekiah, and I said to God, I know that I don't have all these good things that Hezekiah had, but this is what I'm saying in my prayer, 'You know who I am—and I know You know what I mean to You, and I know You know that this is coming from the heart.'—And I said to Him that I know He can, and I believe He would, and while I was saying that He did... And that gives me all the courage I need."

*Healing* Prayers for healing were those conversations with God where participants requested assistance in the recovery from their illness or a return to a state of wellness. Although participants requested healing for their own illness, some requested healing for other individuals as well.

Prayer for healing was discussed in an interview with a 71-year-old married man when experiencing the life-threatening illness experience of a brain aneurysm:

... if you heal me from this, I will serve you the rest of my life. And I have not wavered, I haven't. And of course they had to do an operation, but you got to understand, God instructed people that worked on me with His hands to go inside my brain and to heal me. I call it healing, but they really operated on me. Got the aneurysm under control.

A 61-year-old married man spoke of his experience with prayer during treatment for esophageal cancer:

During the time of all this right here, the thing I wanted most of all was to be able to go back to the church and sing. I was praying that- I knew He was gonna heal my body- but I was praying that He would spare my voice so that I could sing again.

*Gratitude* Prayers for gratitude were prayers when individuals expressed appreciation, thankfulness, or feelings of indebtedness to God for a positive outcome.

A 65-year-old married woman with near fatal injuries from a car accident that occurred many years ago spoke of her daily prayers to God:

And every morning I wake up, my prayer is ‘Thank God, I’m waking up to a new day and with good health...’ I also thank Him that He has given me—I know two children that are ministers and my other one, and he loves the Lord—he’s not where he needs to be yet, but I’m still praying for him to get to that.

Another expression of gratitude via prayers was evident in an interview with an 82-year-old widowed man. The purpose of his many prayers to God was gratitude and thanksgiving for relief from the pain experienced during his cancer diagnosis and treatment. His prayers expressing gratitude were daily:

I pray to God, first thing I say, “Lord I thank you for this day.” Wake up in the morning, I say, “Lord, thank you for this day. You have blessed us to see another day and you have brought us from the worst time of sickness up to this time.” And I thanked Him so dearly.

*Protection* Prayers for protection were for requests for security, safety, and shelter within the context of illness when death was believed to be imminent. Prayers for protection were for oneself or for others experiencing illness events. One widowed 73-year-old woman prayed for the protection of her son who had an illness that resulted in seizures. This woman was fearful that her son would have a seizure while driving and harm himself or someone else. She described her prayer:

I had prayed that the Lord would, every morning, look over him, because he had seizures, and I just asked the Lord to look over him every day. I knew that he would, but I wanted to ask, just, like, thank Him for looking over him. Every day I would say [pray] this, that he would not have a seizure and hurt somebody... That was my prayer.

### **Prayers as Dimensions of Connectedness**

As an expression of spirituality, prayers of connectedness were demonstrated through the following dimensions: (1) transpersonal connectedness to God (74%); followed by (2) intrapersonal connectedness to self (47%); and (3) interpersonal connectedness to others (19%). Participants typically had prayers that were in one or more of these dimensions.

*Prayers as a Transpersonal Connectedness to God* Prayers were conversations with God to express gratitude or make requests but also a consciousness of the powers derived from a relationship with an ever-present, all-powerful Higher

Power. African Americans generally describe this Higher Power as God with whom they have a personal relationship (Cone 2002; Hamilton et al. 2007). This transpersonal connectedness promotes individual perceptions of the existence of an all-powerful entity with whom they have access to negotiate stressful life events. In particular, prayers are a vehicle for the expression of needs but also the promotion of a self-awareness that is empowering when confronted with chronic disease that is potentially debilitating and life-threatening.

An 82-year-old widowed man spoke of the ease of talking to God during his life-threatening illness experience.

But, uh, that's the good part about praying is that you feel better...it's usually mental. We usually can get medicine for physical stuff, you know. But for mental things we—there's no pill that we can take, unless you want something to knock you out. But I didn't—when I faced a life-death situation when I had a heart-attack, I mean praying was easy. It wasn't like anything special that I thought I had to do because I'd been accustomed to that with other things, and I think that's one way you are prepared to deal with life's things is by gradually having an experience where you, uh—like somebody said, 'You need to call up God.'

The connectedness to God is also evident from an interview with a 71-year-old married man. During his experience with a brain aneurysm, this participant spoke of his relationship with God and the assurance that prayers are answered:

And the one thing I tell anybody, don't give up on God. Don't give up because if you asked Him for something, He might not give it to you right then, but believe me, He will give it to you.

In another interview, a 61-year-old married man spoke of the value of depending on God to endure complications from life-threatening illness. Having experienced cancer, he had the following advice for prayer:

The only thing I could say to anyone is put your hand in God's hand and as long as you keep your hand in His hand, He will make everything alright.

*Prayers as Intrapersonal Connectedness to Self* When prayers are expressions of spirituality through a connectedness with the self, the individual is likely empowered through the perception of being a child of God. Through conversations with God, participants had a consciousness of relatedness to God and the realization of not being alone, having someone to depend on, or having someone to talk to during those times when there was no one else. As a result, participants were empowered to endure the struggles with their illness and associated treatments.

An 85-year-old widowed woman who described herself as the only surviving sibling of 12 brothers and sisters described her ability to depend on God during difficult times:

Man can't go but so far, but God will be there when man fails. Man will disappoint you, but God will always be there; He's not gonna let you down. He'll be there when you need Him at all times, anytime. You can call on Him anytime.



He's never too busy. And it used to amaze me about calling on God... He can listen to everybody at the same time, and He'll be there when you need Him.

In another interview, a 69-year-old with the experience of having had heart failure and diabetes used prayer was used to talk to God at any given time even during times that were not necessarily stressful:

... even at night time when things are—I won't say distressful for me, but I can just—through prayer I can sit there and talk to him... and everything is sort of comfortable.

*Prayers as Interpersonal Connectedness to Others* Prayer also has a reciprocal nature that promotes a connectedness to others. Through prayer, participants in this study were connected to others which resulted in feelings of caring, valued and loved, and belonging to a larger community of individuals with shared experiences.

One 67-year-old married woman described her life threatening illness as complications from diabetes that required the amputation of her leg.

I always told my husband if I ever get sick you call for the elders of the church, that's what the word said in the Bible, and let them pray for me. If everyone would believe in this I think it'll be a lot less people you know that would be so, so sick. That would come through their trials and everything. Well they was there. All didn't get to come in because I was so sick. My children didn't want a bunch in there. But they was down there, they was praying for me...

Another 59-year-old woman spoke of her fear of dying when diagnosed with breast cancer. She spoke of the value in having others pray for her recovery:

There was a word that was given to me by my pastor and the day before I got ready to go into surgery, he said to me, 'I've [in church] been praying for you,' because he knows there is strength in unity. And so, when you share your story, first of all, it lets you know that you're not alone. It lets you know that you don't have to be afraid, that you don't have to go through this thing by yourself and that there is somebody that's gonna be there to support you and somebody there that's going to love you through the journey.

## Discussion

In this report, we explored the ways in which prayers were used during life-threatening illnesses. These findings might be used to optimize clinical care and enhance the cultural relevance of mental health interventions designed to alleviate psychological distress among patients when seriously ill.

Our themes that captured the overt, intentional purposes of prayer for strength to endure, healing, gratitude, and protection during illness are similar to that previously reported in research conducted among larger national samples (Reyes-Ortiz et al. 2009; Ross et al. 2008) and among advanced stage cancer patients (Smith et al.

2012). When participants in this study prayed for strength to endure, the mechanism by which this occurred appeared to be through the perception of access to an all-powerful entity. This powerful entity was a source of social support, someone with whom they could hold hands throughout their struggles and as a result, felt as if they were never alone. Prayers for health and healing ranked second to prayers for endurance among participants in this report. Consistent with existing research, prayers for healing were conceptualized as petitioning for a return to a state of wellness or control of symptoms (McCaffrey et al. 2004; Ross et al. 2008). The findings in this study are also consistent with those in existing research where prayers petitioning for healing may also include bargaining or a promise to change some behavior with God (Taylor et al. 1999). In exchange for healing, participants' increased faithfulness or the promises for such were likely a form of payment to God for the receipt of healing.

Prayers used to request protection and express gratitude were the least frequently reported among these participants. Prayers for protection were generally used in situations where the fate of illness or potential for injury was not within the participants' control. For example, participants' prayers of protection were requests to be shielded from unforeseen illness or injury. Specifically, prayers for protection were used during times of vulnerability such as car accidents or the aftermath of uncontrolled seizures and life events that could possibly result in imminent death. Mothers in this study were especially vocal of their prayers of protection for their adult sons. In other studies, prayers for protection have been used among adolescents as a shield from HIV (Puffer et al. 2012) and protection of daily life events that threaten the attainment of longevity (Reis and Menezes 2017).

Gratitude is an emerging concept in the study of spirituality and investigations of religious involvement (Bussing et al. 2014; Koenig et al. 2014), faith (Bussing et al. 2014), and spiritual well-being (Mills et al. 2015; Sharma and Singh 2018). However, in contrast to existing research, participants in this study described expressions of gratitude as a type of prayer. During prayers of gratitude, participants thanked God for interceding on their behalf with past, present, and future life-threatening events. Participants were grateful to God for bringing them through past illnesses, for his presence during current illnesses, and for what they believed would occur during encounters with future life-threatening illness.

Perhaps the more interesting finding in this study were the ways in which prayers were expressions of spirituality as dimensions of connectedness to God, one's inner-self, and to others. While praying for strength, healing, gratitude or protection, participants were consciously aware of themselves within the context of their relationship to God and to other individuals in their social networks. In a transpersonal connectedness, participants were conscious of their relationship to God and the potential access to the powers associated with this immortal being. When individuals transcended the self to connect to God, they were empowered through a realization of their access to an all-powerful entity with the capability of responding to their requests. Among these participants, God was ever present and dependable in ways that mortal beings were not. As a result of this transpersonal connectedness, participants' usual support resources were extended which empowered them to endure experiences with life-threatening illness. In this and other research, participants

experiencing life-threatening illness reported feeling a transpersonal connectedness to God who delivered them from previous stressful life events and were therefore confident in their ability to endure the current illness (Sterba et al. 2014).

Secondly, prayers promoted an intrapersonal connectedness through perceptions of the inner-self as a child of God. As a child of God, participants were comforted through the promise of health and well-being through associations with a caring and loving fatherly figure. Although existing literature has focused on participant beliefs in God in control of illness (Carney and Park 2018; Merluzzi and Philip 2017) and illness as God's punishment for wrong doing (Lyon et al. 2014), the findings from this research suggests there is comfort derived from the knowledge of God's continual presence in their lives. This intrapersonal connectedness likely enabled seriously ill participants to feel less isolated when they believed that God was always present. God's presence was considered a source of social support which promotes a sense of a caring community, and alleviates social isolation (Felder et al. 2017). God's continual presence provided participants with a dependable and non-judgemental confidant, with whom they were able to share their innermost fears and worries.

Finally, prayers promoted an interpersonal connectedness among family, fellow congregants, and others within their communities. This interpersonal connectedness was likely enhanced through the belief that prayers are stronger when they occur among groups. Similar to other research, cancer patients cope with their illness through praying for others (Smith et al. 2012) and have requested that fellow members of their faith-based institutions pray for them (Sterba et al. 2014). Scholars with expertise in spirituality and health have found that praying for others likely reduces symptoms associated with experienced stress (Krause et al. 2016) and the negative emotion of anger toward others (Bremner et al. 2011). These prayers strengthened emotional and spiritual connections among patient and their social networks (Sterba et al. 2014). A controversial topic currently discussed is whether healthcare practitioners should engage in religious practices such as praying with patients (Koenig et al. 2017; Konig et al. 2016; Rosenbaum 2007). Similar to our findings, patients may discuss using prayer with healthcare providers (Goldstein et al. 2008). However, rather than engage in prayer, healthcare practitioners might encourage patients to pray with family and friends. In this study, participants felt valued and respected when encouraged by their practitioners to pray with others within their social networks and faith-based communities. However, participants in this study did not report making requests that practitioners pray with them.

## Limitations of Present Study

Participants in this study were primarily affiliated with US faith-based institutions who might have different perceptions of God and the role of prayer during illness events. Additionally, participants in this study were older adults; therefore, the findings of this study may not be generalizable to other age groups. Prayer, however, is a global concept and the findings in this report are likely to extend a prevailing and limited view of prayer as petitioning to God.

## Implications for Practice and Research

Prayer is used to cope with serious illnesses, however, practitioners are unsure of how to incorporate this practice into patient care. The information presented in this article might be used to assist practitioners in understanding how prayer might positively influence patient outcomes. For example, given the perspective that praying empowers and promotes endurance during serious illness, practitioners might encourage distressed patients to consider prayer or meditation as a self-help strategy. Patients might benefit from considering prayer as a way of drawing on the positive energy derived from a connectedness to a higher power or God.

Prayer might also be a means of enhancing the perceived social support available to individuals during serious illness. When prayer is conceptualized as a conversation with God, individuals with serious illnesses might confide in Him their innermost worries and concerns. Moreover, the ever-present perspective of this entity ensures that someone is always available to listen to these worries. Although future research on this topic is needed, these results suggest that seriously ill individuals who use their spirituality and prayers to confide in God might experience lower levels of psychological distress.

Although the practice of practitioners praying with patients might not be feasible or even desirable, the findings in this study suggest that discussions related to the benefit of prayer might be a mental health promoting strategy among seriously ill patients. Practitioners might consider encouraging patients to request prayer from members of their social networks or faith-based communities. Prayer might also be used among patients as a way to alleviate negative emotions of anger associated with events likely to occur during social interactions when ill.

Future research is needed to explore whether spirituality as dimensions of connectedness are useful to patients with diverse ages, racial/ethnic backgrounds, or religious traditions so that findings in this study are not generalized to all patients. Scholars should also empirically examine the influences of spirituality as dimensions of connectedness to mental health outcomes. Finally, it is important to evaluate the feasibility of practitioners incorporating discussions related to the beneficial nature of prayer as a self-care strategy and to enhance social support within individual social networks.

## Conclusion

The participants in this study illustrated the ways in which prayer might be a positive religious practice. Prayer empowers individuals and provides needed emotional and spiritual support to endure serious illnesses and stressful life events. Through prayer, participants in this study petitioned for strength to endure, healing, and protection but perceived prayer as a source of connectedness to God, self, and others during their life-threatening illnesses and events. For these individuals, prayer was also a way of expressing gratitude to God for past actions and for what they believed was possible in current and future situations. The innovativeness of these findings is,

however, the ways in which prayers are likely a source of emotional or social support. Through dimensions of connectedness to God, one's inner-self, and others, prayer might provide a constant confidante that alleviates feelings of social isolation. Moreover, when family, friends, and congregants of faith-based institutions express communal prayers, patients are likely to feel loved and valued which might provide a sense of increased comfort, hopefulness, and peace needed to overcome their situations.

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