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Research Article

**GENDER WISE COMPARISON OF RELIGIOUS & SPIRITUAL  
BELIEVES ABOUT THE PRAYERS ROLE FOR HEALTH  
SEEKING BEHAVIOR AMONG STUDENTS AT LAHORE**<sup>1</sup>Dr. Mubashir Tanvir Sheikh, <sup>2</sup>Dr. Fatima Rehman, <sup>3</sup>Dr. Mariam Noor<sup>1</sup>House Officer, Mayo Hospital Lahore<sup>2</sup>WMO, Govt Eye Cum General Hospital Gojra<sup>3</sup>Quaid e Azam Medical College Bahawalpur**Abstract:**

*The role of religious spirituality in health promotion and disease management has always been one of the significant aspects all over the world which has different modes and ways in different areas of the world. However, there has been no significant effort to study the religious and spiritual aspect of health management and overall well-being among the Pakistani population. In order to cover this topic, we conducted a cross-sectional survey at Sir Ganga Ram Hospital, Lahore from Mid-February to Mid-October 2017 through a self-administered questionnaire on a total of 1342 students. The research asked for the prayers about the health of the family and self in the last three months duration and reported that a number of students did pray for their as well as for the health of their parents and other family members. We also suggest that it is important to understand the prayers role specifically associated with health in the perspective of Pakistan.*

Keywords: *Religious, Spiritual, Prayer, Health and Students.*

**Corresponding author:**

**Dr. Mubashir Tanvir Sheikh,**  
House Officer, Mayo Hospital,  
Lahore

QR code



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**INTRODUCTION:**

Religion and Spirituality do a lot in the promotion of health, disease management, disease limiting and disease prevention. There are also evidences about the reduced rate of morbidity and mortality through prayers among three Abrahamic religions believers and also among the followers of the other high-power religions from all over the globe; few other religions and cultures also believed the divine happiness in giving away gifts and other materials such as milk, coconut and even the human life for the removal of epidemics and prosperity [1 – 11]. Pakistan can into being on the basis of a separate land to offer religious activities with autonomy and freedom. It also aimed at the solidarity for the Muslims of the subcontinent. There is a common practice of prayers for the health in the Pakistani population. However, in the light of scientific surveys, there is no exitance of such studies about the practice of prayers for wellbeing and health among Pakistani population. The purpose of this research was to determine the pattern and prevalence of prayers for one's own health and well-being as well as for the well-being and health of the family among university students at Lahore. We also compared the trend of this health-seeking routine in the perspective of conservative and modern healthcare service provision.

**METHODS:**

There has been no significant effort to study the religious and spiritual aspect of health management and overall well-being among the Pakistani population. In order to cover this topic, we conducted a cross-sectional survey at Sir Ganga Ram Hospital, Lahore from Mid-February to Mid-October 2017 through a self-administered questionnaire on a total of 1342 students. The research asked for the prayers about the health of the family and self in the last three months duration and reported that a number of students did pray for their as well as for the health of their parents and other family members. The students were included from both genders from 19 – 29 years of age through convenience sampling method from both public and private sector. Our questionnaire

comprised of convergent and divergent questions for the collection of information from the students with prior consent of the students. We maintained a complete confidentiality protocol about the information of the students as we only aimed at the selection of trend and health-seeking behaviour. We also applied the SPSS and Chi-Square Test on the research outcomes and analyzed the outcomes thoroughly for dependent and independent variables association (P-Value < 0.05).

**RESULTS:**

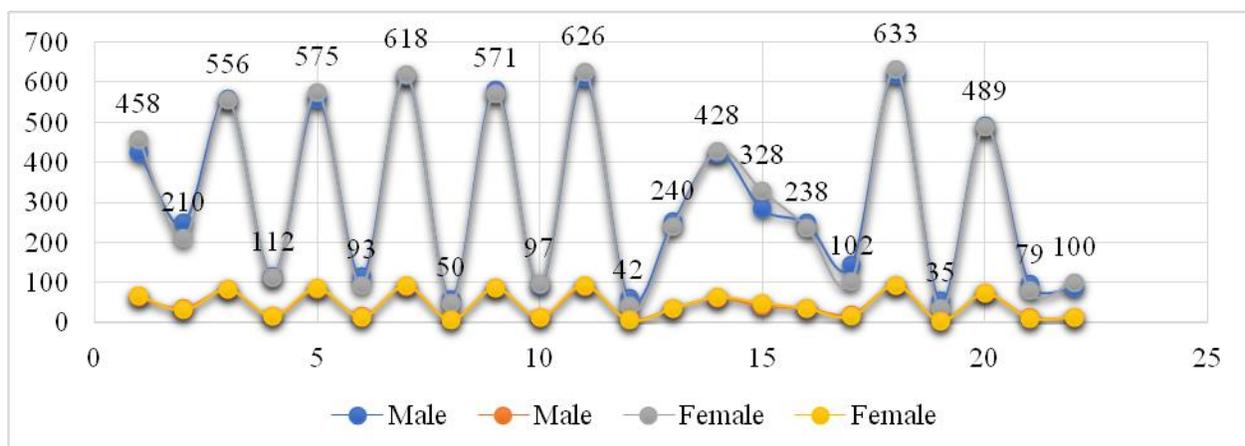
In the total research population, 674 students were male (50.2%); whereas, 668 students were female (49.8%). Moreover, 712 students were enrolled from Master's Programme (53.1%) and remaining all students were enrolled from Bachelors programme. The mean age of the male and female students was respectively ( $21.7 \pm 2.5$ ) years and ( $21.3 \pm 1.9$ ) years with a significant P-Value of (0.007). The difference was only that female students had visited the doctor for the management of any disease in the last one year timeframe as reflected in Table – I. In the measure of being religious a total of 927 students (72.9%) considered themselves in the category of religious students; whereas, 177 students (13.2%) did not take themselves as religious and there were 186 unsure students (13.9%) about being religious.

More religious students were more involved in the act of praying for the wellbeing and health of themselves and their families than other category students. Students also prayed for their health-seeking behaviour and academic success as shown in Table – II.

The respondents were asked for the visit to a doctor by self or family in the last one year. They were also asked for the act of praying about the wellbeing and health of self or family with academic success payers in the last three months. The response was also taken about the visit to a homoeopathic doctor or Hakim by self or family in the last one year and outcomes are shown in Table – I below.

Table – I: Gender Wise Responses

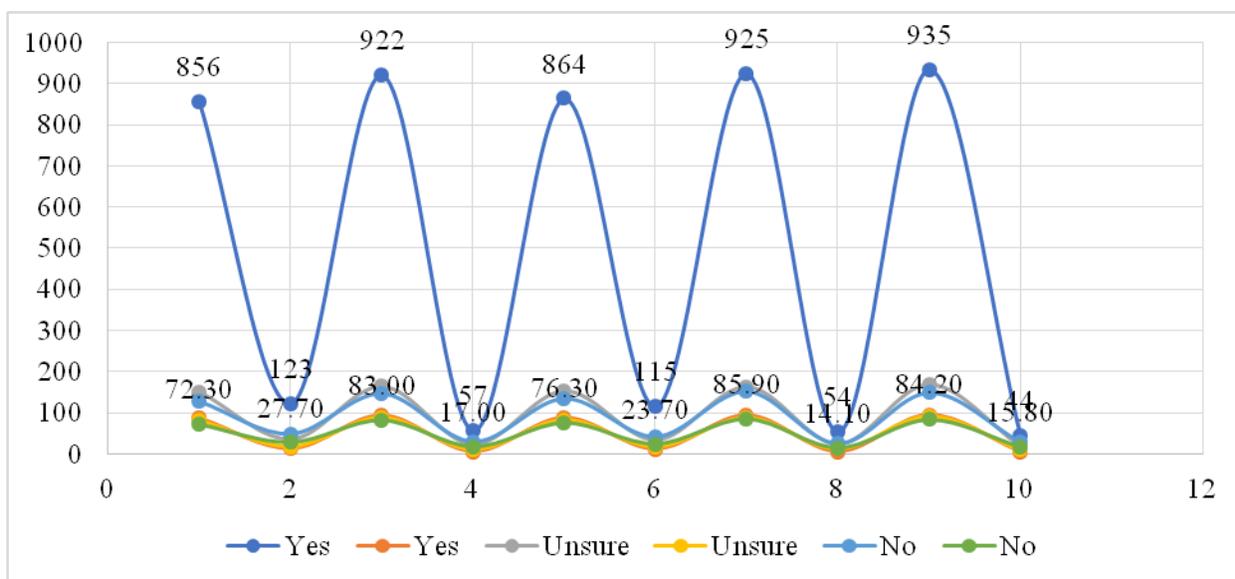
Responses		Male		Female		P-Value
		No	%	No	%	
I went to a doctor for disease management in the last one year.	Yes	426	63.20	458	68.60	0.038
	No	248	36.80	210	31.40	
My family went to a doctor for disease management in the last one year.	Yes	558	82.80	556	83.20	0.828
	No	116	17.20	112	16.80	
I have prayed for own health in the last three months.	Yes	560	83.10	575	86.10	0.129
	No	114	16.90	93	13.90	
I have prayed for my family's health in the last three months.	Yes	615	91.20	618	92.50	0.395
	No	59	8.80	50	7.50	
I have prayed for own well-being in the last three months.	Yes	581	86.20	571	85.50	0.704
	No	93	13.80	97	14.50	
I have prayed for my family's well-being in the last three months.	Yes	614	91.10	626	93.70	0.071
	No	60	8.90	42	6.30	
I have not consulted any Hakim or homoeopathic doctor for disease management.	Yes	251	37.20	240	35.90	0.618
	No	423	62.80	428	64.10	
My family has not consulted any Hakim or homoeopathic doctor for disease management.	Yes	283	42.00	328	49.10	0.121
	No	248	36.80	238	35.60	
	Don't Know	143	21.20	102	15.30	
I have prayed for the success in academics in last one year.	Yes	620	92.00	633	94.80	0.041
	No	54	8.00	35	5.20	
I am a religious person.	Yes	490	72.70	489	73.20	0.193
	No	98	14.50	79	11.80	
	Unsure	86	12.80	100	15.00	



The respondents were asked for being religious questions in the form of prayers about own and family health concerns in the last three months with additional prayers of self or family's wellbeing in the last three months along with academic success payers. Response and outcomes are shown in Table – II below.

**Table – II:** Responses about Being Religious

Response		Yes		Unsure		No		P-Value
		No	%	No	%	No	%	
I prayed for own health-related concerns in the last three months.	Yes	856	87.40	151	81.20	128	72.30	1000.0 V
	No	123	12.60	35	18.20	49	27.70	
I prayed for my family's health concerns in the last three months.	Yes	922	94.20	164	88.20	147	83.00	
	No	57	5.80	22	11.20	30	17.00	
I prayed for own well-being in the last three months.	Yes	864	88.20	153	82.30	135	76.30	
	No	115	11.80	33	17.70	42	23.70	
I prayed for my family's health concerns in the last three months.	Yes	925	94.50	163	87.60	152	85.90	
	No	54	5.50	23	12.40	25	14.10	
I prayed for own academic success in the last three months.	Yes	935	95.50	169	90.90	149	84.20	
	No	44	4.50	17	9.10	28	15.80	

**DISCUSSION:**

A total of 884 respondents visited medical healthcare facilities (65.9%) for the management of disease in case of an infection or injury in the last one-year timeframe; whereas, 1114 respondents told that their families have visited a doctor or any related medical facility in the timeframe of last one-year (83%). However, 1135 respondents prayed for the wellness for themselves (84.6%) and 1233 respondents prayed for the wellness of their families (91.9%) in the last three months timeframe. The prayers about the academic success were reported among 1253 respondents (93.4%) in the last one-year timeframe. Females had more involvement in the prayers for

academic success than males ( $P\text{-Value} > 0.05$ ). Males were visiting doctors and hakims more than females about the health concerns in the timeframe of one-year ( $P\text{-Value} > 0.05$ ). Traditional medical practitioners, homoeopathic doctors and hakims were also visited by the students and their families for the management of their disease.

There was also an interesting trend about the praying and religious profile among male and female students. Most religious students prayed for the health and wellbeing along with academic success for self and family members. All those who believed in praying were of religious consideration; whereas, the

other was of non-religious considerations. Although, there were also unsure cases ( $P$ -Value  $> 0.05$ ). Health prayers are found universally among students even in the students considered as “not religious”. The behaviour of praying was in the range of 72% – 86%.

### CONCLUSION:

The prayer behaviour has a connection with the socioeconomic, ethnic, parental education and geographical residence status. Collective effort is necessary for the utmost promotion of such pray activities for the emotional and spiritual well-being. The research asked for the prayers about the health of the family and self in the last three months duration and reported that a number of students did pray for their as well as for the health of their parents and other family members. We also suggest that it is important to understand the prayers role specifically associated with health from the perspective of Pakistan.

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