

## Spiritual beliefs, practices may help smokers quit

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Unlike many traditional alcohol and drug dependence treatment programs, mainstream smoking cessation programs generally exclude spiritual practice and beliefs from the treatment process. But a study by Oregon Health & Science University Smoking Cessation Center researchers reveals many smokers are receptive to and may benefit from their own spiritual resources, when attempting to quit.

The study, believed to be the first to look at the potential use of spiritual resources for quitting in adult smokers, recently was published in Nicotine & Tobacco Research.

For decades, the OHSU research team encountered some patients in clinical practice who reported that in addition to the treatments provided by the team, they used personal spiritual beliefs and practices in their quit attempts. This led the team to question why spiritual resources were not part of mainstream tobacco dependence treatment programs.

"We theorized the absence of spiritual resources in smoking cessation programs may be due to perceived resistance from smokers or, until recently, the social acceptance of smoking, which may have prevented patients and providers from considering the health effects of tobacco dependence as life-threatening," said David Gonzales, Ph.D., principal investigator of the study, and co-director, OHSU Smoking Cessation Center, OHSU School of Medicine. "We know that smoking cessation medications coupled with behavioral interventions increase quit rates, but quitting is still difficult and some smokers need more support in



order to quit successfully. We may be missing opportunities to assist these smokers."

Gonzales and colleagues discovered that women were more likely to report a spiritual practice or belief compared with men, but smokers of both sexes who smoked more than 15 cigarettes per day were more likely to be open to having their health care provider encourage them to use their own (the patient's) spiritual practice to assist in a quit attempt.

"Our findings suggest that although not all clinicians want to talk about spirituality with their patients, those who do feel comfortable doing so will likely find most patients who smoke are receptive. Asking smoking patients if they have a spiritual practice or belief may be important to their care," Gonzales explained.

Patient spirituality is becoming more mainstream in medicine and is accepted as integral to the treatment of many medical conditions, especially cancer, Gonzales explained. Surveys show patients would like their providers to discuss spirituality related to their health care. Along with this opportunity there is a challenge for health care providers to respect spiritual beliefs and practices that may be different from their own. Further investigation and program development on how to include spirituality in mainstream tobacco dependence treatment is warranted, he and his team concluded.

To conduct this research, Gonzales and colleagues surveyed 104 current smokers, aged 18 or older and not attempting to quit, in smoking areas outside building on the OHSU Marquam Hill Campus. Study participants were equally male and female, on average 38 years old, and had smoked about 17 cigarettes a day for approximately 21 years. The anonymous surveys included questions about smoking behaviors, and spiritual practices and beliefs.



Of the 104 participants, 92 had some history of using spiritual resources, and of those, 78 percent believed that using those resources when making a quit attempt could be helpful. Seventy-seven percent believed having treatment staff encourage the use of spiritual resources to help them quit could be beneficial.

Source: Oregon Health & Science University

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