

Letter to Editor

Familiarity with Holy Quran and Death Anxiety in Emergency Nurses

Dear Editor,

“Death anxiety” is a multidimensional concept and it is defined as the fear of one’s own and the others’ dying. The nurses, who work in emergency departments, are faced with death of many patients, and this can lead to exacerbation of death anxiety in these nurses.^[1] There are numerous factors affecting phenomenon of death anxiety, one of this factors is religious practices.^[2] Familiarity with the holy Quran (FHQ) as one of the religious activity indicators in Muslims can influence on death anxiety.^[3] It is important we know about FHQ and death anxiety in emergency nurses. This understanding will help the professionals to better manage such a phenomenon. Therefore, the purpose of this study is to explore the relationship between FHQ and death anxiety in emergency nurses who working in Vali-Asr hospital in the city of Arak.

Using a descriptive cross-sectional design, 51 nurses were identified from emergency departments of Vali-Asr Hospital in Arak city in 2016. The data collection instruments were a demographic characteristics form, Templer’s death anxiety scale, and the holy Quran familiarity questionnaire. The first part included information regarding the gender, age, marital status, and education level. The second part included Templer’s death anxiety scale containing 15 questions with “true” or “false” choices. The questionnaire scores were from 1 to 15 and the higher scores were suggestive of higher death anxiety level.^[4] The third part was the holy Quran familiarity questionnaire containing 20 five-choice questions and was from 20 to 100 and the higher scores were suggestive of higher familiarity with holy Quran.^[5] The content validity of the two instruments was established by 14 nursing faculty members. The reliability of these instruments was demonstrated by Cronbach’s alpha for the Templer’s death anxiety scale (0.83) and the holy Quran familiarity questionnaire (0.85). Statistical analysis was conducted using SPSS version 13 (SPSS Inc., Chicago, IL, USA). Collected data were analyzed using descriptive statistics and Spearman correlation coefficient.

The majority of the participants were women (52.4%), their mean age was 28.61 ± 4.49 years and 52.9% were married. Most of the participants had bachelor of science in nursing (96.1%). Mean scores of FHQ and death anxiety were 68.45 ± 11.17 and 7.74 ± 2.18 , respectively. The previous studies showed that death anxiety and the resultant pain are high in nursing profession.^[1,4] In the emergency department, the competing demands of other patients and poor structural

design fail to provide patients’ privacy observation and better end of life care. This can lead to the development of death anxiety in emergency nurses.^[6] Findings of the present study showed that there were no significant correlations between the demographic characteristics and FHQ ($P = 0.71$) and death anxiety ($P = 0.42$). However, some authors believed that developmental and sociocultural factors such as age, gender, and religiosity can influence on manifestation of death anxiety.^[7,8] For instance, Rafii *et al.* found that death anxiety is higher in younger nurses.^[2] In the present study, FHQ is negatively associated with death anxiety ($r = -0.10$). However, no significant correlation was observed between FHQ and death anxiety among this nurses ($P = 0.47$). The holy Quran contains many verses about achieving tranquility and has a direct healing effect on the various systems of the human body.^[9,10] Familiarity with Quran and reciting this holy book leads to the state of resting and calming mind of human beings.^[10]

In conclusion, the current study revealed moderate levels of death anxiety in emergency nurses. While, Quran familiarity was negatively associated with death anxiety, but this correlation was not significant.

This study had several limitations that should be mentioned. The findings are limited by its cross-sectional design, which prevents us from making conclusions about cause and effect. In addition, the small sample size is a limitation as well.

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Conflicts of interest

There are no conflicts of interest.

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