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Is religious and existential well-being important in quality of life in Hong Kong Chinese?

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ABSTRACT

The present study aims to determine the extent to which general QoL is predicted by religious and existential well-being, taking into consideration the intensity of participants' religious and personal beliefs. Additionally, we examine the differences between Christians, believers in the Chinese religions, and those who are not religious. The study is based on the secondary analysis of a cross-sectional survey on the Spiritual Well-being scale (SWBS), which encompasses religious (RWB) and existential well-being (EWB). Participants ($N = 445$) were comprised of three religious subsamples for known group comparisons: a Chinese religions group (CRG) ($n = 133$), comprising Buddhism (23.1%), Taoism (5.2%), folk religions and ancestral worship (1.5%); a Christian group ($n = 144$) consisting of Roman Catholics (8.3%) and Protestants (24%); and non-believers (NRel) ($n = 167$). Regardless of their religious affiliations, QoL scores were the same in the overall sample. However, when taking the extent of religious commitment and sense of belonging into consideration, religious believers had higher scores in QoL and SWBS than non-believers (highest in Christians, followed by CRG and NRel). Hierarchical regressions showed that EWB was the only significant predictor of QoL after controlling for gender, age, and the extent of religious belief and commitment. The data indicated positive influences of religious beliefs on QoL and SWBS, although distinct affiliations might have affected these scores to a different extent. Fostering RWB and EWB are vital to promoting QoL.

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1. Introduction

Quality of life (QoL) is a form of patient-reported outcome and an important anchor in measuring what constitutes the preferred clinical endpoint in a health-related intervention (Fayers & Hays, 2014). Quality of life can be used to determine productivity costs, such as productivity at work or incurred societal costs, which can help in setting priorities for healthcare policies (Krol, Stolk, &

Brouwer, 2014; Lopez-Bastida et al., 2012). Maintaining and strengthening QoL was found to positively influence health and reduce stress (Brundage et al., 2011), whereas lower QoL is associated with suicidal behaviours (Hidalgo-Rasmussen & Hidalgo-San Martin, 2015) and hopelessness (Smith et al., 2016).

The QoL concept has long moved beyond the traditional view of functional health status, material resources and financial independence (Bowling, 1995, 2005a; Gill, 1995; Kaplan, 1994) to life values, spiritual well-being, resilience and hope (Fayers & Machin, 2007; Moberg & Brusek, 1978; Moberg, 2001; Rapley, 2003, 2012; Veenhoven, 2000, 2008). Spiritual well-being and existential well-being were found to be significant predictors of QoL, especially in

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those who are facing hardships in health, such as palliative care patients, adults with paraplegia, and senior adults (Ali, Marhemat, Sara, & Hamid, 2015; Finocchiaro, Roth, & Connelly, 2014; Lo et al., 2001; Skevington, 2002). While numerous studies have investigated either the religious or the existential aspects of spiritual well-being when a person is facing a life crisis (Ali et al., 2015; Finocchiaro et al., 2014; Lo et al., 2001; Skevington, 2002), little attention has been paid to observing the influences of the two components in relation to QoL in healthy individuals. The salience of religious and existential well-being as predictors of QoL, in particular among people with diverse spiritual beliefs, awaits further investigation. The present paper aims to articulate the relationships of religious and existential well-being with QoL from both the theist and non-theist perspectives.

1.1. Capturing spiritual well-being from the religious and existential perspectives

In a national survey, over half of the social worker respondents reported frequently conducting spiritual assessment in their practice, but there were discrepancies when communicating the preference for spiritual support during treatment (Oxhandler, Parrish, Torres, & Achenbaum, 2015). In addition, spiritual interventions that pivoted on existential themes have been beneficial in improving QoL (Kruizinga et al., 2016). Structured research using a cross-culturally validated Spiritual Well-being scale that covered both theist and non-theist emphases is valuable in substantiating the constructs for evaluating services and spiritual research initiatives (Berzon, Hays, & Shumaker, 1993; Oxhandler et al., 2015; Tang, 2008; Webb, Toussaint, & Dula, 2014).

Growing evidence has shown that a non-theist measurement is crucial in predicting well-being (Ellison & Fan, 2008; Gallien, Bian, Kim, & Tamanji Anye, 2014; Mazzotti, Mazzuca, Sebastiani, Scoppola, & Marchetti, 2011). Over the last two decades, the existential element that transforms human (Hill et al., 2000; McSherry & Cash, 2004; Webb et al., 2014) has emerged as a significant component in the spiritual theoretical framework in addition to organised religion and structured belief systems (Chan, Verplanken, & Skevington, 2016; O'Connell & Skevington, 2005, 2007; Skevington, Gunson, & O'Connell, 2013; Webb et al., 2014; WHOQOL SRPB Group, 2006). However, some researchers have supported the inclusion of a collective spiritual worldview (Fisher, 2011; Watson, 2009) and humanistic and personal beliefs (Fleck & Skevington, 2007; O'Connell & Skevington, 2005), while others have found that adding altruistic values or secular views to the spiritual dimensions are confounders to mental and psychological (Koenig, 1997; Koenig, 2008; Moreira-Almeida & Koenig, 2006). Among various spiritual scales, some are classified as assessing spirituality (de Jager Meezenbroek et al., 2012; Monod et al., 2011), religious coping, and depth of religiosity or spiritual practice (Fetzer/NIA Working Group, 2003; Hall, Meador, & Koenig, 2008; Idler & Benyamini, 1997; Koenig, McCullough, & Larson, 2001; Spilker, 1996). Nonetheless, the indicators do not adequately cover the whole meaning of spiritual well-being that spans from the

communal domain to humanistic views (Chan et al., 2016; Fisher, 2011; Skevington et al., 2013). The Spiritual Well-being scale (SWBS) is the most widely used scale to address a universal human experience (Murray, Johnson, Gow, & Deary, 2015; Paloutzian, Bufford, & Widaman, 2012). Its framework is a dual concept that encompasses religious (RWB) and existential well-being (EWB) and captures a sense of spiritual wholeness (Ellison, 1983). Regardless, the SWBS has been administered to a wide variety of participants, including Christians and non-religious participants, clients with mental problems and terminal illness, healthcare professionals (Bufford & Parker, 1985; Bufford, Paloutzian, & Ellison, 1991; de Jager Meezenbroek et al., 2012; Hill & Hood, 1999; Li, Rew, & Hwang, 2012; Musa & Pevalin, 2012, 2014; Rowold, 2011; Utsey, Lee, Bolden, & Lanier, 2005), and there is little evidence to suggest that the scale is able to discriminate between Christian and Chinese religious believers.

Traditional Chinese religious beliefs, such as Taoism, Buddhism and Confucianism have stark differences with Christianity. In Judeo-Christian belief, God is love and the source of caring, healing and comfort (Polkinghorne, 2006). Chinese religious believers differed from the Christians or non-theist believers in terms of the source of their faith and strength, and answers to existential questions, such as the experience in everyday life and attitude to afterlife issues (Tongeren, Raad, McIntosh, & Pae, 2013). Paramount to Buddhism and Taoism is a naturalistic sense of causality within the human experience and cosmic unity (Kwong, 2002; Laozi, 1990; The Hong Kong Buddhist Association, 2008). In addition, collectivism is a common assumption in Chinese culture that differs from individualism in western countries, which appeared to have significantly influenced existential beliefs. For example, familial relationships and strong social ties that influences existential well-being and engagement with the world (Osafu Hounkpatin, Wood, Boyce, & Dunn, 2015). Nevertheless, the vast majority of existential research has been conducted in western cultures. The relationships of QoL and RWB and EWB of the Chinese religious believers deserves scrutiny.

Careful adaptation of the SWBS is crucial to ensure precision across religious believers from diverse denominations, as well as non-believers, to avoid bias in reflecting what the instrument was intended to measure (Epstein, Santo, & Guillemin, 2015; Gjersing, Caplehorn, & Clausen, 2010). Assessment is the first and most crucial step in sound ethical practice, affecting not only an individual's decision-making but also policy making. The present results could determine the significance of religious and existential well-being with QoL in the religious and non-religious believers. In addition, it could support the use of SWBS as a comprehensive tool in evaluating spiritual-related interventions and research initiatives.

2. Method

2.1. Design

The present study is based on the secondary analysis of cross-sectional survey data from a validation study on the convergent validity of SWBS to a QoL instrument (Chan

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