Stress and Religious Coping among People Living with HIV/AIDS

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BACKGROUND: People living with HIV/AIDS rely on a number of means to cope with the stressors associated with being HIV-positive. Spirituality/religiosity has been identified as an important factor in health and well-being among men and women with HIV/AIDS. PURPOSE: The purpose of this cross-sectional study is to test a segment of the Spirituo-Psychoneuroimmunology (S-PNI) model regarding interconnections between religious coping, depression, perceived stress, CD4 count, social support, and health-related quality of life (HRQOL) among men and women living with HIV/AIDS.

METHODS: A non-random sample of 292 HIV+ men and women were recruited from infectious disease clinics and AIDS Service Organizations in the Raleigh-Durham area. Correlations and hierarchical regression statistics were used. The S-PNI model, developed by the author, based on McCain's PNI-based framework (2005), served as a guide to facilitate the examination of those interrelationships. SAMPLE: Majority of the sample were African-American (90.1%) and 6.2% were Caucasian. About half (52.7%) completed high school or had a G.E.D., 25% had college, technical or graduate school experience. Majority (90.8%) were unemployed or on disability. Mean sample age was 45 years, mean depression score was 19.3 (SD=12.8), and mean CD4 count was 452.5 (SD 335.58) cells/ìL. Mean negative religious coping was 4.86 (5.34) and positive religious coping was16.6 (5.06), with higher scores representing more coping on a scale from 0 to 21. FINDINGS: The findings of this study showed significant inverse associations between religious coping and depression. There were also significant inverse associations between depression and immune status. Depression was the only significant predictor of HRQOL. CONCLUSIONS: People with HIV/AIDS who use religion to cope in a positive manner report less depressive symptoms and those who use religion to cope in a negative or less positive manner report more depressive symptoms. In this sample, depression was associated with immune status and predicted HRQOL.