



UMEÅ UNIVERSITET

Religiositet och coping

Religionspsykologiska studier av kristna med cancer

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Akademisk avhandling

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Religiosity and coping: Studies in psychology of religion of Christians living with cancer

Abstract

This thesis investigates the interdependence of religiosity and a life situation changed by cancer, focusing especially on the coping process. This implies analyses of a number of identified expressions of religiosity regarding prerequisites and functions in the coping process. In order to synthesize the results from the studies, the aim has been operationalized into three comprehensive research questions that were posed to each of the empirical studies of the thesis: 1) What are the functions of the analysed expressions of religiosity during the coping process? 2) What prerequisites for the influence of religiosity on the coping process can be identified? 3) How is religiosity influenced by a life situation changed by cancer? The empirical studies are presented in four separate articles. Each of the studies has its own specific research questions that are related to the comprehensive research questions. The method was qualitative and explorative. The research material was gathered with qualitative interviews of 20 Swedish informants of varying gender, age, congregational affiliation and diagnosis. The informants defined themselves as Christians and practised their Christian faith and had or had had a cancer disease. There is longitudinal data from half of the group. The theoretical framework was based on the coping theories developed by Kenneth Pargament and Ruud Ganzevoort and complemented by, among other things, the object-relations theoretical concept of transitional objects.

The results show that most of the analysed expressions of religiosity function as a preserving coping method but some of them also function as a reconstructing coping method. In some cases, the expressions of religiosity also function as methods of attributing control, either to God or to the individual. Two main groups of prerequisites for the expressions of religiosity were identified in conjunction with the coping process: contextual and psychological. The former could in turn be divided into religious and medical contexts; the latter into several different kinds, such as perceptual psychological factors, the need to create and use transitional objects, locus of control, and personality traits. Reconstructing coping methods imply varying degrees of changes in the informants' religiosity, both regarding the analysed expression of religiosity and other expressions of religiosity. In addition to gaining insights into the interdependence of religion and coping for Christians living with cancer, the study contributes to the development of the psychology of religion coping theory by adding to the theory: 1) suggested specifications to the current concepts of Pargament's coping theory; 2) the concept *coping tool*; 3) the distinction between *functional* and *relational* regarding the concepts of coping mechanism and coping method; 4) the coping mechanism *attributing*, and 5) the distinction between *unilateral* and *bilateral* deferring coping styles. The results indicate that the coping process can include a creative element in the form of a search for, or creation of, functional coping methods and/or coping tools which enhance the functionality of the coping process.

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