Religiosity and Patient Engagement in their Healthcare Among Hospital Survivors of an Acute Coronary Syndrome

Hawa Ozien Abu  
*University of Massachusetts Medical School*

David D. McManus  
*University of Massachusetts Medical School*

Catarina I. Kiefe  
*University of Massachusetts Medical School*

*See next page for additional authors*

Follow this and additional works at: [https://escholarship.umassmed.edu/chr_symposium](https://escholarship.umassmed.edu/chr_symposium)

Part of the [Alternative and Complementary Medicine Commons](https://escholarship.umassmed.edu/alternative_and_complementary_medicine), [Cardiovascular Diseases Commons](https://escholarship.umassmed.edu/cardiovascular_diseases), [Civic and Community Engagement Commons](https://escholarship.umassmed.edu/civic_and_community_engagement), [Community-Based Research Commons](https://escholarship.umassmed.edu/community_based_research), [Community Health and Preventive Medicine Commons](https://escholarship.umassmed.edu/community_health_and_preventive_medicine), [Health Services Administration Commons](https://escholarship.umassmed.edu/health_services_administration), [Psychiatry and Psychology Commons](https://escholarship.umassmed.edu/psychiatry_and_psychology), [Religion Commons](https://escholarship.umassmed.edu/religion), and the [Translational Medical Research Commons](https://escholarship.umassmed.edu/translational_medical_research)

Repository Citation
[https://escholarship.umassmed.edu/chr_symposium/2019/posters/12](https://escholarship.umassmed.edu/chr_symposium/2019/posters/12)  
[https://doi.org/10.13028/vb4f-cr19](https://doi.org/10.13028/vb4f-cr19).
Presenter Information
Hawa Ozien Abu, David D. McManus, Catarina I. Kiefe, and Robert J. Goldberg

Keywords
Acute Coronary Syndrome, ACS, religiosity, religion, spirituality, patient engagement

Creative Commons License
This work is licensed under a Creative Commons Attribution-Noncommercial-Share Alike 3.0 License.

Rights and Permissions
Copyright the Author(s)
Approximately 1.4 million patients are hospitalized for an Acute Coronary Syndrome (ACS) annually in the United States. Optimum management after an ACS requires considerable patient engagement/activation. Religious practices permeate people’s lives and may influence engagement in their healthcare. Little is known about the relationship between religiosity and patient activation in hospital survivors of an ACS.

### Objectives
- Estimate the prevalence of religious involvement in survivors of an ACS.
- Evaluate the association between religiosity and patient activation/engagement in survivors of an ACS.

### Methods
- **Data Source:** The Transitions, Risks, and Actions in Coronary Events Center for Outcomes Research and Education Study (TRACE-CORE)
- **Analytic Sample:** Patients (n=2,067) discharged after an ACS from six hospitals in MA and GA (2011-2013).
- **Exposure:** Three measures of religiosity: strength and comfort from religion, petition prayers for health, and intercessory prayers for health.
- **Outcome:** Patient activation assessed with the 6-item Patient Activation Measure, and categorized as low (levels 1 and 2) or high (levels 3 and 4).
- **Analysis:** Logistic regression used to examine the association between religiosity and patient activation.

### Results
- Overall, 58% of patients had low levels of activation (Fig 1).
- Patients reported a high prevalence of strength/comfort from religion, petition and intercessory prayers for health (Fig 2).
- A great deal (adjusted OR (aOR): 2.02; 95% CI: 1.44-2.84), little/some (aOR:1.45; 95% CI: 1.07-1.98) strength and comfort from religion were associated with high activation as were intercessory prayers (aOR: 1.48; 95% CI: 1.07-2.05). Petition prayers for health was associated with low activation (aOR: 0.78; 95% CI: 0.61-0.99) (Table 2).

### Conclusion and Practice Implication
- Majority of ACS survivors engage in religious practices for their health.
- For a holistic approach in patient care, healthcare providers should ascertain how patient’s religiosity/spirituality may influence their engagement with their healthcare.

### Future Research
- Evaluate the relationship between religiosity and patient quality of life.
- Examine the association between religiosity and outcomes including readmissions and survival.