Use of Prayer by Parents in Pediatric Emergency Department Patients

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Mind–body interventions, one of the major categories of complementary and alternative medicine (CAM), include practices that are based on the human body but that have an effect on the human body and physical health, such as meditation, prayer, and mental healing.1 Prayer means “begging to Allah, calling someone, sending something somewhere.” Prayer is the human heart’s conversation with Allah and seeking his blessing and help. Prayer is the servant reaching the level of addressing his Lord in the face of an extraordinary event. Ubudiyyet means “serving, slavery, excessive devotion to someone.” Worship is an endless way of speaking from man to Allah. Salah (namaz) is a form of worship in which a person establishes a direct relationship with Allah. A man was created to worship Allah.2 Herein, we present our observations about the use of prayer by parents of ill children to attract the attention of health caregivers to parents’ spiritual needs.

In previous research, Losier et al3 found that approximately 13% of caregivers reported using CAM for their child in the pediatric emergency department. The most common CAM therapies used were homeopathy (20%), prayer/spiritual approaches (19.7%), and massage therapy (16.7%).3 Sawni et al4 reported that the use of CAM was 15% and the most common types of CAM therapies used were folk remedies/home remedies (59%), herbs (41%), prayer healing (14%), and massage therapy (10%). In another series, 48.8% of the patients had received at least one alternative therapy among pediatric emergency department patients. The most common were massage (16%), chiropractic therapy (9.8%), relaxation (7.2%), meditation (6.2%), aromatherapy (6.1%), and spiritual healing (4.3%).5 In our country, parents commonly use CAM including prayer for their children’s health. Top et al6 reported that 97.7% of parents of ill children had used at least one CAM method for mostly respiratory complaints, and 17.5% mothers used prayer. In another study, 77.2% of mothers of children with developmental disabilities reported using at least one CAM treatment, and 32.9% mothers used prayer.7 In a study from Özyazıcıoğlu et al,8 42.29% of mothers reported using one or more CAM therapies for their child with a chronic disease, use of prayer was in 17.24%.

In our clinical practice, we have observed that most parents use CAM treatments, and the most commonly used CAM treatments are prayer by parents and/or by hodja, herbal medicine, and massage. Most parents of ill children pray to Allah for their children’s health; however, many parents do not openly pray at their children’s bedside because they hesitate the reaction of health care professionals. Second, most families believe that results were the best when both prayer and conventional medicine were integrated. The prayed parents found spiritual peace and comfort because they believe the following spiritual/religious teachings. It is established by the people of reality that the illnesses of innocent children are like training for their delicate bodies, and injections and Dominical training allow them to withstand in the future the upheavals of the world that is in addition to many instances of wisdom pertaining to the child’s worldly life; instead of the atonement for sins in adults which looks to spiritual life and is the means to purifying life, illnesses are like injections ensuring the child’s spiritual progress in the future or hereafter, and the merits accruing from such illnesses pass to the book of good works of the parents, particularly of the mother who through the mystery of compassion prefers the health of her child to her own health.9

In conclusion, we would like to emphasize that prayer is very important for many parents of ill children in many societies in the world; therefore, we believe that health caregivers should support parents spiritually.
Conflict of Interest
None declared.

References