

Research Article

Chronic illness and faith healing: Understanding the experiences of cardiovascular patients in Kashmir

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Received: 24-Nov-2023, Manuscript No. IJMSA-23-121079; Editor assigned: 27-Nov-2023, Pre QC No. IJMSA-23-121079 (PQ); Reviewed: 12-Nov-2023, QC No. IJMSA-23-121079; Revised: 22-Jan-2025, Manuscript No. IJMSA-23-121079 (R); Published: 30-Jan-2025

ABSTRACT

This study delves into the experiences of cardiovascular patients in Kashmir regarding faith healing practices and their integration with conventional medicine. Twelve participants with cardiovascular diseases shared their perspectives through in-depth interviews, revealing a diverse spectrum of viewpoints. Some patients embraced faith healing due to skepticism about conventional healthcare, financial constraints, and cultural traditions. Others advocated for an integrative approach, combining faith healing with evidence-based medical treatments. The study revealed a profound intertwining of faith healing practices to the cultural and religious beliefs of Kashmir society. The experiences shared by participants highlight the substantial impact of these practices on their physical, mental and spiritual well-being by providing relief, solace, hope, and enhanced resilience. Cultural acceptance played a pivotal role in either encouraging or discouraging faith healing practices. The findings underscore the importance of patient centered care, cultural competence among healthcare providers, and a holistic approach to well-being in managing chronic illnesses.

Keywords: Cardiovascular disease, Faith healing, Chronic illness, Holistic wellbeing, Integrated healthcare approach

INTRODUCTION

Chronic illnesses impose a significant burden on global health, affecting millions of individuals and straining healthcare systems worldwide (WHO, 2021). Among chronic illnesses, cardiovascular diseases CVDs remain a leading cause of mortality accounting for 31% of all deaths (ibid, 2017), necessitating effective strategies for management and treatment. While modern medicine has made substantial progress in improving CVD outcomes, there is a growing acknowledgment that patients often seek complementary or alternative approaches to cope with their conditions. One such avenue is faith healing, encompassing diverse spiritual practices and rituals believed to promote physical and emotional well-being (Murray & Zentner, 2018).

From a sociological perspective, the use of faith healing can be understood as a form of cultural health behaviour (Mechanic, 1995). Patients who use faith healing may do so because of their

cultural or religious beliefs or because of social pressures from their respective communities. These factors can influence patients' perceptions of the efficacy of faith healing and their willingness to try this form of alternative therapy. At the same time, the use of faith healing can also be seen as a response to the limitations of biomedicine in addressing the complex needs of chronic illness patients. Patients with chronic illness often face multiple physical and psychological challenges that cannot be fully addressed by medical interventions alone. Faith healing may offer patients a sense of hope, comfort, and emotional support that complements biomedical treatment (Frenk et al., 2010).

In the picturesque region of Kashmir, situated in the northern part of the Indian subcontinent, CVDs have emerged as a major health concern in recent times (Kamili et al., 2007). The prevalence of risk factors such as hypertension, diabetes, and sedentary lifestyles has contributed to an increased burden of CVDs in the local population. Concurrently, the socio-cultural fabric of Kashmir is deeply

intertwined with various religious and spiritual beliefs that significantly influence healthcare-seeking behaviours and choices. Faith healing practices have persisted for generations in this region, playing a crucial role in shaping the health beliefs and behaviours of individuals with chronic illnesses, including those with cardiovascular conditions (Charan et al, 2020).

Understanding the experiences of cardiovascular patients in Kashmir concerning faith healing is of paramount importance. This research aims to shed light on the complexities and nuances surrounding the integration of conventional medical treatments and faith healing practices in managing chronic CVDs. The study seeks to offer valuable insights into patients' perspectives, their attitudes towards faith healing, their experiences with faith healing treatment practices and the factors influencing their healthcare decisions. The study is expected to be informative for healthcare professionals, policymakers, and the broader community about the cultural and spiritual dimensions of healthcare. By recognizing the significance of faith healing practices in patients' lives, healthcare systems can adopt a more patient-centred approach and develop holistic strategies that acknowledge the interconnection between physical health and spiritual well-being. Ultimately, this research contributes to a nuanced understanding of the challenges and opportunities in the management of chronic CVDs, offering insights that can improve patient care and support in the region.

There is a growing body of evidence to support the role of faith in coping with chronic illness. For example, a study by Koh (2018) found that patients with heart failure who had a strong religious faith reported better quality of life and were more likely to adhere to their treatment regimens. Another study by Giselle (2014) found that patients with chronic pain who prayed for relief reported less pain and anxiety. These studies suggest that faith can provide a number of benefits for people with chronic illness:

- Faith can help people to maintain hope and optimism in the face of a chronic illness. This can be a powerful motivator for people to adhere to their treatment regimens and to continue to fight their illness.
- Faith can help people to cope with the stress and anxiety that often accompany chronic illness. This can be achieved through prayer, meditation, or other religious practices.
- Faith communities can provide a valuable source of social support for people with chronic illness. This support can help people to feel less isolated and alone, and it can also provide practical assistance, such as transportation to medical appointments or help with childcare.

Research exploring the perspectives and experiences of patients seeking faith healing reveals diverse attitudes and beliefs. Some people with chronic illness turn to faith healing in the hope of being cured. Faith healing is a religious practice that involves the use of prayer, laying on of hands, or other rituals to bring about healing. There is no scientific evidence to support the effectiveness of faith healing in curing chronic illness, but some people find it to be a helpful way to cope with their illness. Likely, Olson et al. (2006) found that some patients with cardiovascular disease who used faith healing reported feeling more hopeful and less anxious.

However, the study also found that some patients experienced disappointment or frustration when faith healing did not lead to a cure. Some patients view faith healing as a complementary approach to conventional medical treatments, perceiving it as an additional source of support and comfort (Ahmed et al, 2007). In contrast, others may exclusively rely on faith healing practices, influenced by religious convictions and personal experiences (Narayanasamy et al., 2004). Patients often report positive emotional and psychological effects, such as reduced stress and improved coping mechanisms, from engaging in faith healing (Stanley, 2013). However, challenges may arise when faith healing practices conflict with medical advice or delay timely medical interventions, necessitating sensitivity and open communication in healthcare settings (Sarkar, 2014).

The review of literature highlights the complex relationship between chronic illness, faith healing, and the experiences of cardiovascular patients. Faith healing practices are deeply rooted in cultural beliefs and traditions, providing patients with comfort and hope. Understanding patients' attitudes and experiences can inform healthcare professionals, leading to more patient-centred care approaches that integrate both conventional medical treatments and faith healing practices, while respecting cultural diversity and spiritual dimensions of health.

Objectives

- To explore the beliefs, perceptions, and experiences of CVD patients regarding faith healing as a complementary or alternative approach to managing their chronic illnesses.
- To explore the faith healing treatment practices and their experiences received by the CVD patients in Kashmir.
- To identify the factors influencing the healthcare-seeking decisions of CVD patients, particularly in choosing between conventional medical treatments and faith healing practices.

MATERIALS AND METHODS

The study has employed a qualitative research design to gain a comprehensive understanding of the lived experiences and perspectives of CVD patients in Kashmir region concerning chronic illness and faith healing practices. The qualitative approach is well-suited for exploring complex and subjective phenomena, allowing for an in-depth exploration of participants' beliefs, perceptions and experiences. In case, in-depth interview method was used to elicit rich, context-specific data, enabling a nuanced analysis of the research problem under study.

Purposive sampling technique was used to select participants who have been diagnosed with CVD conditions and have encountered faith healing practices in their illness journey. The inclusion criteria ensured that participants were adults, have first-hand experiences with chronic illnesses and have engaged with faith healing practices. The sample size was determined as 12 participants on the basis of data saturation; ensuring that adequate data is collected to address the research objectives effectively. The participants were

approached at the residences of four famous faith healers in district Pulwama of Kashmir region. For the purpose of this study, a faith healer is operationally defined as person who employs spiritual or religious practices, rituals, or interventions with the intention of promoting physical, emotional, or spiritual healing, comprising of, spiritual leaders, religious leaders, or those recognized within a community for their ability to facilitate healing through divine or supernatural means.

Data was collected through semi-structured interview schedule to provide participants with the flexibility to express their experiences and perspectives openly, while ensuring that key themes related to chronic illness and faith healing are explored. Participants were encouraged to share their narratives, beliefs, and experiences related to both conventional medical treatments and faith healing practices. All interviews were audio-recorded with participants' informed consent and transcribed verbatim to maintain accuracy during analysis. Further, thematic analysis, a systematic qualitative analysis approach, was employed to identify patterns, themes, and connections within the data.

RESULTS

The present study aimed to delve into the experiences of CVD patients in Kashmir regarding faith healing practices and their integration with conventional medicine. Chronic illnesses, such as cardiovascular conditions, have a significant impact on individuals' lives, influencing their physical well-being, emotional state, and overall quality of life. In regions with diverse cultural practices, like Kashmir, patients often explore various approaches for treatment, including faith healing practices. Understanding the experiences and perspectives of participants becomes crucial for providing patient-centred and culturally sensitive healthcare. Thematic analysis was applied to the conducted interviews of CVD patients, each representing unique viewpoints and narratives, to capture a diverse range of perspectives. The findings were categorised under following themes and sub-themes.

Diverse perspectives on faith healing practices

The thematic analysis revealed a diverse range of perspectives on faith healing practices among cardiovascular patients in Kashmir. Participant 4 expressed, "I have considered faith healing practices for my condition. Firstly, I relied on the expertise of doctors where I came to know about my heart issue, but the expenses on tests and medicine were excessive; doctors used to run their business firm; they hardly bother about patient's life. So, instead of visiting further to these butchers I prefer to consult Peer Sahab (Faith Healer)." In addition, participant 2 stated, "although I have taken medical prescription for more than 4 years, don't find much improvement from illness. However, as soon as I start visiting Peer Sahab (Faith Healer), I observed betterment in my health conditions".

These viewpoints reflect a preference for faith healing practices and highlights a trust in supernatural interventions, which may be attributed to the prevalence of inadequate healthcare facilities in the region, unsatisfactory services and attitude of medical care providers, financial burden on patients, and medically incurable

health conditions. Above all these factors, the values and belief system of Kashmir society play a significant role in driving people towards faith healers. Historically, Kashmir valley has remained home of saints across different religions and faiths, so called Peer-i-Ver (land of saints) who, through their teachings and practices, have imbibed the essence of spiritual and supernatural aspect into the belief system and values of the society. People used to visit them for spiritual and worldly ends that traditionally, is the relevance of faith healing practices in the region. Although some participants are using faith healing practices as alternative to conventional medical treatment, it is revealed that all the participants have initially preferred medical health services where they are diagnosed and some have got treatment for long time.

In contrast, participant 2 shared a different perspective, stating, "From the day I started my illness, I rely on the expertise of medical doctors and the prescribed treatments but simultaneously I visit to Peer Sahab for spiritual strength to bear the burden of the disease." This response shows a level of openness to exploring different healing methods while emphasizing a cautious approach towards faith healing. The individual's awareness of these practices may stem from cultural beliefs and societal discussions surrounding faith healing.

Faith healing treatment practices

Faith healing encompasses a rich tapestry of beliefs, practices, and rituals, often deeply intertwined with culture and spirituality. In interview with the participants, the study delves into the multifaceted world of faith healing treatments. These treatments go beyond conventional medical approaches, drawing from cultural and religious traditions to offer holistic healing experiences. The experiences of the CVD patients highlighted the profound impact these treatments have had on their emotional, spiritual, and even physical well-being, emphasizing the intricate relationship between faith, culture, and the journey toward healing. The study explored the following different types of faith healing treatments experienced by the CVD patients in Kashmir.

Meditation and Prayer: Meditation and prayer held central positions in the participants' faith healing practices. Daily meditation sought a deeper connection with the divine, while specific healing prayers were recited during the physical sufferings of the illness. These practices provided a sense of peace, hope, and reassurance in challenging times. Participant 4 stated, "Muraqabah (meditation) and Duwa (prayer) are the cornerstones of my faith healing journey. My Peer Sahab (Faith Healer) encouraged me to Muraqabah daily, seeking a deeper connection with the divine. He bestowed me specific Duwa-e-Shifa (healing prayers) to recite when I suffer from pain and shivering." Further, participant 7 argued, "These practices provide a profound sense of peace and hope. During Muraqabah (meditation), I find clarity and an inner calmness that helps me face the challenges of heart disease. Duwa (prayer) connects me with the divine and brings a sense of reassurance, knowing that I'm not alone in my journey."

Meditation and prayer offer not only solace but also a deep sense of connection to the divine to the CVD patients. They serve as pillars of emotional and spiritual strength, providing clarity and

inner calmness. These practices underscore the importance of mental and spiritual well-being in the participant's faith healing journey.

Blessed substances: Blessed substances, such as holy water and blessed oils, also found integral to the participants' faith healing treatment practices. The water and oil exorcised by faith healer were used by the patients to drink daily and in anointing rituals for a specific period of treatment course. These substances were by the participants believed to carry the blessings of spiritual leaders, imparting healing properties. As Participant 5 mentioned, "My Murshid (spiritual leader) give me Tawiz-Trayesh (holy water) to drink and Padith-Teel (blessed oil) for anointing rituals for two months. These substances carry the blessings of my Murshid and possess healing properties." Also, Participant 9 claimed, "When I applied the Tabrook (blessed substances) of Peer Sahab, I've felt a sense of relaxation and calmness in my sufferings of illness. There's a feeling of being touched by a higher power, and it has provided comfort. I believe it's a reminder of the spiritual dimension of healing."

The use of blessed substances adds a tangible dimension to faith healing practices. The sensations experienced during anointings, such as comfort, relaxation and calmness, demonstrate the powerful impact of these substances on the participant's sense of spiritual healing. They emphasize the spiritual dimension of the healing process and the belief in the transfer of divine blessings.

Faith-based counselling: Participants regarded faith-based counselling a vital support system in their faith healing journey. Religious leaders offered them guidance and counsel based on faith teachings. Their words provided comfort and strength, serving as a form of spiritual mentorship in navigating the complexities of chronic illness like CVD from a faith perspective. Participant 6 argued, "Counselling from my Murshid has been a source of great support in my faith healing journey. From time to time, he provides guidance and counsel based on my religious teachings. They are there to listen, offer solace, and guide me through the spiritual aspects of healing. His words provide not only comfort but also a deep sense of strength. It's like having a spiritual mentor who understands the complexities of burden of my illness and helps me navigate them comfortably."

Faith-based counselling highlights the importance of religious teachings and spiritual leadership in faith healing practices. It emphasizes that faith leaders play a crucial role in helping individuals understand and navigate the spiritual and emotional aspects of their healing journey. This form of counselling fosters resilience and offers guidance rooted in faith principles.

Laying on of hands: The laying on of hands is a practice involving physical contact during faith healing. The healer's place their hands on specific areas of the body participants, creating a warm and comforting sensation. It is believed to facilitate the flow of healing energy. Participant 1 stated, "From my Peer Sahab, I received the healing treatment through the practice of laying on of his hands. During I've felt a warm and comforting sensation." Moreover, Respondent 10 said, "My Murshid placed his hand on my heart, it was as though a transfer of positive energy is occurring. While it

might not have a direct physical effect on my condition, it has a powerful impact on my emotional and spiritual well-being. It was a moment of profound connection and solace."

The laying on of hands exemplifies the intimate and personal nature of some faith healing practices. While it may not have direct physical effects on the participant's condition, the emotional and spiritual impact is significant. This practice demonstrates the interconnectedness of the mind, body, and spirit, reinforcing the belief that healing goes beyond the physical realm.

Sacred symbols and artifacts: Sacred symbols and artifacts including amulets and sacred black thread held a special place in the participant's faith healing journey. They wore amulet blessed by their spiritual leader, considering it a source of comfort and protection during illness. Participant 4 argued, "My Peer Sahab gave me a Taweez (amulet) to wear for my heart disease three months ago. It has provided me with a sense of strength and security during difficult times." In addition, participant 12 claimed, "I wear a Padith- Pun (thread) blessed by my spiritual leader as a source of comfort and protection, especially for my illness. It has a tangible reminder of our faith's protective power." Participant 9 said, "The Taweez (amulet) bestowed me by Peer Sahab (faith healer) carries deep spiritual significance for me, and I believe it wards off negative influences and promotes healing."

Traditionally, Sacred symbols and artifacts held a special place in the faith healing practices in Kashmir society. People wore sacred symbols and artifacts provide a tangible link to faith and protection. The amulet, in this case, signifies the belief in the power of faith to ward off negative influences and promote healing. It demonstrates that faith healing practices often encompass physical elements that serve as reminders of the spiritual dimension of healing and provide a sense of security during challenging times.

To summarise, the participant's experiences with these faith healing treatments reveal the deep emotional and spiritual impact they have had on their journey to well-being. These practices, rooted in culture and spirituality, offer comfort, hope, and a profound connection to the divine. While the effectiveness of these treatments can vary, their role in providing holistic support, both emotionally and spiritually, is evident. The study underscores the intricate nature of faith healing, where faith and culture merge to offer a unique approach to healing and holistic well-being.

Faith healing and mental health well-being

The emotional and psychic impacts of faith healing practices, as revealed from participants, paints a nuanced picture of how these practices resonate with individuals facing CVD. Participant 5 shared, "Faith healing has been my anchor during this journey. It's not just about physical healing; it's about finding emotional strength and hope. When I engage in these practices, I feel a deep connection to something greater than myself, and that connection brings me solace during the toughest times." Participant 8 expressed a similar sentiment, stating, "While medical treatments are essential, faith healing adds an extra layer of support. It's like a lifeline for my emotions. When I participate in these rituals and prayers, I feel a sense of control over my illness, and it boosts my

mental resilience. It's a source of hope that keeps me going." This narrative reflects how faith healing practices can provide emotional comfort and hope during the healing journey. The participant's choice to integrate these practices alongside conventional medicine signifies an acknowledgment of the potential emotional benefits.

For many, faith healing offers more than just a remedy for physical ailments; it provides a sanctuary for emotional well-being and psychological resilience. Engaging in these practices can infuse individuals with a renewed sense of hope and optimism, offering a lifeline during the tumultuous journey of chronic illness. The act of placing trust in faith healing often cultivates a profound spiritual connection, affording individuals a wellspring of comfort and solace in moments of vulnerability. This spiritual connection can be especially valuable when confronting the emotional toll of chronic conditions, providing a haven of inner peace and emotional stability.

Faith healing and holistic well-being

The significance of holistic well-being, as emphasized by the participants and supported by existing research, is paramount for individuals living with chronic illnesses. Holistic well-being extends beyond the mere alleviation of physical symptoms; it encompasses the intricate interplay between emotional, spiritual, and social dimensions of health. Participant 3 aptly remarked, "Managing my heart condition isn't confined to taking medications; it's about achieving emotional and spiritual balance. These facets are interconnected, and addressing them comprehensively has greatly enhanced my overall quality of life." Further, participant 9 stated, "My Peer Sahab has not only improved my condition but he also taught me to face the decision of Almighty Allah. When I learn how to live with this disease by the teachings of murshid, I find the inner peace and I start living a peaceful life." Neglecting the emotional, spiritual, and social dimensions of health can result in an incomplete state of well-being. Even individuals who are physically healthy may grapple with challenges if they lack emotional, spiritual, or social fulfilment. Thus, promoting holistic well-being necessitates not only addressing the physical aspects of health but also advocating for lifestyle modifications, providing robust mental health support, and accommodating patients' cultural and spiritual beliefs within their care plans. By doing so, healthcare professionals can offer comprehensive care that acknowledges the intricate interrelationship between physical and emotional well-being, ultimately contributing to improved patient outcomes and an enriched quality of life.

Cultural and social acceptance of faith healing practices

Cultural and social acceptance play pivotal roles in shaping individuals' attitudes and behaviour towards faith healing practices, as illuminated by the insights gathered from our interviewees. Participant 6 articulated, "In our community, faith healing has deep roots. It's not just a tradition; it's a way of life. When I decided to explore faith healing alongside conventional medicine, my family and community were supportive. This acceptance gave me the confidence to integrate these practices into my health journey." Similarly, participant 1 mentioned, "My family and community respect my decision to focus on conventional medical treatments.

They understand that different individuals have different approaches to managing their health." This reflects the importance of cultural understanding and acceptance of individual choices, acknowledging the role of societal support in healthcare decisions. Moreover, social acceptance, particularly within close-knit communities or families, holds considerable sway over individuals' health-seeking behaviours. In cultures where faith healing is widely accepted and practiced, individuals may feel encouraged to explore these methods alongside conventional medicine, fostering a sense of community and shared belief.

Conversely, participant 10 shared a different perspective, stating, "I grew up in an environment where faith healing was viewed with skepticism. My social circle largely discouraged it, considering it superstitious. So, I chose to rely on conventional medicine in their eyes and used to visit covertly and occasionally to the faith healer for my inner peace." This narrative reveals that in societies where faith healing is met with skepticism or disapproval, individuals may opt for a more traditional approach, relying solely on evidence-based medical treatments. Recognizing the role of cultural and social factors in healthcare decisions is essential for healthcare professionals to provide culturally sensitive and patient-centred care that respects individual beliefs and values while ensuring access to appropriate medical interventions.

Integration of faith healing and conventional medicine

An interesting finding was the varying opinions on integrating faith healing practices with conventional medicine. Participant 6 stated, "I believe in integrating faith healing practices with conventional medicine for a more holistic approach to my health." This participant values the spiritual and emotional support offered by faith healing practices alongside modern medical treatments, recognizing the potential benefits of a comprehensive approach.

On the other hand, participant 3 expressed a different viewpoint, stating, "My faith healer suggested me to continue conventional medicine for my treatment along with meditation and spiritual practices." This perspective emphasizes a reliance on evidence-based practices and highlights the participant's faith in modern medical interventions. It may reflect a preference for treatments supported by clinical research and a desire for the most validated approach. Participants also expressed the importance of healthcare professional support and open-mindedness. Participant 7 shared, "I appreciate healthcare professionals who are open-minded and supportive of my choice to integrate faith healing practices with conventional medicine. It shows they care about my well-being." This highlights the significance of patient-provider communication and the need for understanding and respect from healthcare professionals, regardless of the chosen treatment path.

The integration of faith healing practices with conventional medicine is a multifaceted aspect of healthcare decisions among individuals dealing with chronic illnesses. Many individuals, embracing a holistic approach to their well-being, opt for a combined strategy. They value the emotional and spiritual support offered by faith healing practices while simultaneously acknowledging the significance of evidence-based medical

interventions. For them, this integration signifies a balanced approach that addresses not only their physical health but also their emotional and spiritual needs.

The aforementioned findings provide a deeper understanding of the diverse perspectives and experiences of cardiovascular patients in Kashmir concerning faith healing practices and their integration

with conventional medicine. Participants' narratives offer personal insights into the complexities of managing chronic illnesses and highlight the need for patient-centred and culturally sensitive healthcare approaches. The findings emphasize the significance of acknowledging individual beliefs and preferences while providing evidence-based medical care to address the holistic well-being of patients (Table 1).

Table 1. Demographic profile of participants.

Participants	Age	Gender	Residence	Education Level
Participant 1	39 Years	Male	Rural	Post-graduation
Participant 2	58 Years	Male	Rural	Secondary
Participant 3	67 Years	Female	Rural	Illiterate
Participant 4	51 Years	Female	Urban	Higher secondary
Participant 5	40 Years	Male	Urban	Graduation
Participant 6	65 Years	Male	Rural	Elementary
Participant 7	70 Years	Female	Rural	Illiterate
Participant 8	29 Years	Male	Urban	Post-graduation
Participant 9	55 Years	Female	Urban	Graduation
Participant 10	61 Years	Female	Rural	Elementary
Participant 11	32 Years	Male	Urban	Graduation
Participant 12	37 Years	Male	Urban	Graduation

DISCUSSION

The findings of this study provide a nuanced exploration of the experiences and perspectives of CVD patients in Kashmir concerning faith healing practices and their integration with conventional medicine. In a region characterized by diverse cultural practices and beliefs, understanding how individuals with chronic illnesses navigate their healthcare choices is of paramount importance for delivering patient-centred and culturally sensitive healthcare. This research, employing thematic analysis on interviews CVD patients using faith healing practices, each representing unique viewpoints and narratives, reveals several significant findings.

Firstly, the thematic analysis uncovers a tapestry of diverse perspectives on faith healing practices among CVD patients in Kashmir. Some participants express a preference for faith healing practices, reflecting a trust in supernatural interventions. This inclination is contextualized within a backdrop of inadequate healthcare facilities, unsatisfactory services from medical care providers, financial constraints on patients, and medically incurable health conditions. Importantly, this preference resonates with the findings of Harvey and Silverman, who highlighted that the cultural beliefs and societal norms can significantly influence individuals' beliefs about health and illness. These cultural factors often lead people to explore faith healing practices as an alternative or complementary approach to conventional medicine. In contrast, some participants demonstrated a more balanced approach. They acknowledged the potential benefits of both conventional medicine and faith healing practices, emphasizing the importance of integrating both for a more holistic approach to health. This viewpoint is consistent with the findings of Varela, who also found that individuals often combine faith healing with conventional

medical treatment. They reported feeling better and having a better quality of life when integrating both approaches. Their work aligns with the perspectives of our participants, emphasizing the value of emotional and spiritual support alongside modern medical treatments.

The study also revealed a rich fabric of beliefs and rituals deeply rooted in culture and spirituality on faith healing practices in Kashmir. These practices, extending beyond conventional medicine, draw from cultural and religious traditions to provide holistic healing experiences. The experiences of these patients underscore the profound impact of faith healing on their emotional, spiritual, and physical well-being, highlighting the intricate interplay between faith, culture, and the healing journey. Meditation, prayer, blessed substances, faith-based counselling, laying on of hands, and sacred symbols play key roles in this multi-faceted approach. These findings emphasize the unique and holistic nature of faith healing in addressing chronic illnesses, particularly cardiovascular diseases, in Kashmiri society.

Furthermore, the study reveals the profound impact of faith healing practices on emotional and mental health well-being. Participants describe how engaging in these practices provides emotional strength, hope, and a sense of control over their illnesses. This emotional dimension of healing resonates with the findings of Stanley, who found that faith healing can provide emotional support, hope, and a sense of control over the illness. Similarly, Varela reported that faith healing can have a positive impact on the emotional and psychological well-being of people with chronic illnesses, helping them cope with the stress and uncertainty of their conditions and promoting hope and optimism.

Cultural and social acceptance emerge as pivotal factors shaping individuals' healthcare decisions. The findings illustrate that the level of acceptance within their community's influences whether individuals explore faith healing practices alongside conventional medicine. This emphasizes the significance of cultural competence in healthcare delivery, highlighting the need to respect individual beliefs and values while ensuring access to appropriate medical interventions. This finding aligns with the study of Olson et al., who emphasized the importance of healthcare professionals understanding the cultural context in which patients make healthcare decisions. By acknowledging and involving patients' families in treatment discussions, healthcare providers can create a supportive environment that fosters trust and improves patient satisfaction.

The integration of faith healing practices with conventional medicine emerges as a central theme in the findings. Some participants advocate for this integration, recognizing the emotional and spiritual support offered by faith healing practices as complementary to modern medical interventions. In contrast, others opt for a more segregated approach, relying solely on evidence-based medical treatments. This dichotomy underscores the need for open and respectful communication between patients and healthcare providers to align treatment plans with individual beliefs and preferences effectively. It also highlights the necessity for healthcare professionals to remain informed and open-minded, supporting patients regardless of their chosen treatment paths.

To summarise, the study attempted a deeper understanding of healthcare decision-making processes in the context of diverse cultural practices, enriching the discourse on patient-centred care and cultural competence in healthcare delivery.

CONCLUSION

In conclusion, this study provides valuable insights into the complex interplay between chronic cardiovascular illness, faith healing practices, and healthcare decision-making among patients in Kashmir. The research reveals a diverse range of perspectives, with some patients opting for faith healing practices as an alternative or complementary approach to conventional medicine, while others choose a more segregated path. The study delves into the intricate world of faith healing practices among CVD patients in Kashmir, revealing a profound intertwining of culture and spirituality. The experiences shared by participants highlight the substantial impact of meditation, prayer, blessed substances, counselling, laying on of hands, and sacred symbols on their well-being. The findings emphasize the significance of these practices as integral components of a holistic healing journey. One of the key findings highlights the impact of faith healing practices mental health well-being, offering patients hope, emotional strength, and a sense of control.

Cultural acceptance and societal norms play a pivotal role in shaping these healthcare decisions, emphasizing the importance of cultural competence among healthcare providers. To enhance patient-centred care, healthcare systems should promote holistic well-being by respecting individual beliefs and values, integrating faith healing practices where desired, and fostering open

communication between patients, faith healers, and medical professionals. This approach can lead to more comprehensive and culturally sensitive healthcare delivery, ultimately improving the well-being of cardiovascular patients in Kashmir.

- **Culturally sensitive healthcare:** Healthcare providers should undergo cultural competency training to better understand and respect the cultural and spiritual beliefs of patients. This will facilitate more open and trusting patient-provider relationships.
- **Integrated care plans:** Developing integrated care plans that incorporate both conventional medical treatments and faith healing practices can offer a more holistic approach to patient care. Patients should be encouraged to openly discuss their preferences and beliefs with their healthcare teams.
- **Emotional support:** Recognize the emotional and psychological benefits of faith healing practices. Healthcare providers should offer emotional support and resources to help patients cope with the emotional challenges of chronic illnesses.
- **Community awareness:** Community education programs should be initiated to increase awareness and understanding of the role of faith healing practices in managing chronic illnesses. This can help reduce stigma and promote acceptance.
- **Research and collaboration:** Encourage further research on the effectiveness of faith healing practices in conjunction with conventional treatments. Collaborative studies between faith healers and medical professionals could lead to innovative and comprehensive approaches to healthcare.

By implementing these suggestions and acknowledging the diverse perspectives of cardiovascular patients, healthcare systems can provide more compassionate, culturally sensitive, and patient-centred care, ultimately improving the well-being of individuals dealing with chronic illnesses in Kashmir.

LIMITATIONS AND SCOPE

The study may face limitations concerning the generalizability of findings due to the qualitative nature of the research and the specific regional context of Kashmir. Participants' self-reporting might be influenced by recall bias or social desirability bias. However, the findings will provide valuable insights into the experiences of cardiovascular patients in Kashmir and contribute to the growing body of knowledge in the study area.

The research findings attempted to offer valuable insights into the interplay between chronic illness, faith healing, and healthcare-seeking behaviors in the context of Kashmir. The results can be disseminated through peer-reviewed publications, academic conferences, and community presentations to reach relevant stakeholders, including healthcare practitioners, policymakers, and the general public. The aim is to promote culturally sensitive and patient-centers care approaches that integrate conventional medical treatments and respect patients' spiritual and cultural beliefs.

ACKNOWLEDGMENT

The authors extend their sincere gratitude to all participants who generously shared their experiences and perspectives, contributing invaluable insights to this study. We would like to express our appreciation to the faith healers who facilitated access to the participants and provided essential context for understanding the faith healing practices in Kashmir.

DECLARATION OF INTEREST STATEMENT

The authors declare that there are no financial, personal, or professional interests that could be construed as influencing the research or the interpretation of its results. This study was conducted with a commitment to unbiased inquiry and the pursuit of knowledge in the realm of healthcare. The authors have no affiliations, financial involvements, or relationships with organizations that might pose a conflict of interest with the subject matter of this research. This declaration is made to ensure transparency and uphold the integrity of the research process and its outcomes.

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