



## Cancer, Religious Philosophy, Death and Dying

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### Abstract

This final issue of *JORH* for 2022 revisits the topics of (1) cancer, (2) religious philosophy, and (3) uniquely collates a number of papers discussing the theme of death and dying—which seems an appropriate topic given the conclusion and celebration of life for one of the most internationally admired monarchs, Queen Elizabeth II (1926–2022). Lastly a call for papers is issued regarding religion, spirituality, suicide, and its prevention: <https://www.springer.com/journal/10943/updates/23471166>.

**Keywords** Cancer · Religious philosophy · Death · Dying · Queen Elizabeth II

### Introduction

This issue marks the end of an era with the death of Queen Elizabeth II (1926–2022). While some past presidents and prime ministers across the globe have varied in terms of their competence and capabilities, Queen Elizabeth II has been the “sure and steadfast” champion of sensibility and international unity for seventy years:

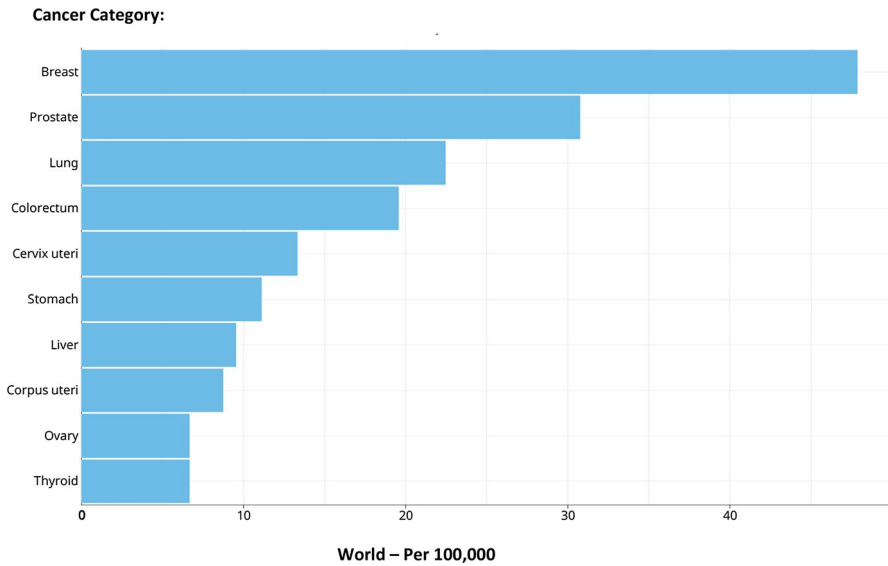
“We may hold different points of view, but it is in times of stress and difficulty, that we most need to remember, that we have much more in common than there is dividing us” (Queen Elizabeth II; 1952–2022).

Our thoughts and deepest sympathies are with the Royal Family and those around the world who mourn the loss of Her Majesty Queen Elizabeth II.<sup>1</sup> Likewise, in this issue, we acknowledge the pain and loss experienced by millions around the world suffering from the effects of cancer. Globally, cancer continues to be the second

<sup>1</sup> Sympathy noted @ SpringerNature: <https://twitter.com/SpringerNature/status/1568180291096793093>.

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**Fig. 1** WHO (2020). Estimated Global Age-Standardized Incidence Rates of Cancer: Both Sexes and All Ages. *Source* WHO (2020). International Agency for Research on Cancer. Geneva: World Health Organization & Globocan (2020). Global Cancer Observatory. Lyon, France: World Health Organization. (<http://gco.iarc.fr>)

most common chronic global disease, often leading to premature death (WHO, 2020). Cancer was a key theme in two previous issues of *JORH* (JORH, 60–4, 2021b; 61–2, 2022a) and is presented again in this issue with research from Iran, Turkey, Morocco, Poland, and the USA. Various religious philosophical discussions have also been published across numerous issues of *JORH*, but this issue collates a number of unique theological perspectives together—from Christian, Buddhist, Islamic, and secular philosophical views. For the first time, this issue of *JORH* also assembles a number of papers discussing the theme of death and dying across various cultures, and the need for appropriate spiritual/pastoral care.

## Cancer

As noted by the World Health Organization, after ischemic heart disease, cancer is the “second leading cause of death globally, accounting for an estimated 9.6 million deaths annually, or one in six deaths globally” (WHO, 2020). Breast cancer and prostate cancer are the leading causes of death globally (Fig. 1). More specifically, for males, the most common types of cancer are prostate, lung, colorectal, stomach, and liver cancer, whereas for women, the common types are breast, colorectal, lung, cervical, and thyroid cancer. This issue considers: (i) breast cancer and spirituality among women in Poland; (ii) the effect of religious–spiritual psychotherapy on illness perception and inner strength among patients with breast cancer in Iran; (iii) oral cancer, fatalism, and Islamic religious beliefs in Pakistan; (iv) beneficial effects

of spiritual experiences and existential aspects of life satisfaction for breast and lung cancer patients in Poland; (v) religious rituals performed by Muslim palliative caregivers in Turkey during the cancer grieving process; (vi) post-traumatic growth in cancer patients in Turkey; (vii) association between religiosity, depression, and anxiety among Moroccan cancer patients; (viii) awareness and performance of testicular self-examinations—social and cultural barriers to cancer screenings among US Orthodox Jews; (ix) community knowledge, attitudes, and behaviors of imams on prostate cancer in Kahramanmaraş, Turkey; and lastly, (x) one of the side effects of prostate cancer, namely the specific spiritual care needs of patients with urinary incontinence in Turkey.

## Religious Philosophy

With regard to various religious philosophical and theological perspectives, this issue includes: (i) religious beliefs about the body and the association with subjective health; (ii) religious and social capital as elements of a theory of religion and health; (iii) Ignatian spirituality as an inspiration for a pedagogical theory of accompaniment; (iv) unconscious spirituality—toward a contemporary conceptualization; (v) the relationship between religiousness/spirituality and psychometric intelligence in the USA; (vi) social trust, religiosity, and self-rated health in the context of national religious pluralism; (vii) Alexis Carrel and his voyage of discovery with regard to miracles and the spirituality of healing; (viii) the relationship between religious/spiritual beliefs and subjective well-being: a case-based comparative cross-national study of the USA, Turkey, Denmark and the Czech Republic; (ix) whether Canadian atheists are any less healthy than the religious; (x) changes in spiritual but not religious identity and well-being in emerging adulthood in the USA; (xi) a meta-analytic literature study on the relationship between workplace spirituality and sustainability; (xii) Buddhism and psychoanalysis; (xiii) Seon Master Daehaeng and William James on religious faith; (xiv) experiences of leaving a high-cost religious group; (xv) the association between individualized religiosity and health behavior in Denmark; and finally, (xvi) perspectives of major world religions regarding euthanasia and assisted suicide.

Several previous issues of *JORH* have considered Islamic philosophical perspectives (*JORH* 60:2, 2021a; 61:5, 2022a, 2022b). This issue presents research relating to: (xvii) Islamic spiritual and emotional intelligence and its relationship to eternal happiness; (xviii) the relationship between paranormal beliefs, social efficacy and social outcome expectations in Turkey; (xix) the impact of green religiosity on the green product switching behavior in Pakistan; (xx) integrating cognitive behavioral and Islamic principles in psychology and psychotherapy; (xxi) circumcision knowledge and opinions of Islamic primary healthcare workers in Turkey; and (xxii) and whether circumcision is even “necessary” in Islam.

## Death and Dying

Finally, and perhaps the most pertinent section within this issue is that relating to death, dying, grief and mourning across different cultures. This issue considers: (i) a religio-cultural study of death and dying in contemporary Kashian society; (ii) a commentary on Muslim acceptance of death in an intensive care unit; (iii) whether spirituality influences emotional regulation during grief talk—the moderating role of prolonged grief symptomatology; (iv) religious and cultural practices of Muslims living in central Anatolia on death and mourning; (v) Tamil songs of mourning: understanding the reflection of times in oppari songs; and lastly (vi) the dropsy of Popes (1555–1978): a bad prognostic sign foreboding of death.

## Call for Papers—Religion, Spirituality, and Suicide

The *JORH* Editors hope that this issue, like previous issues, will prove professionally engaging for its readership. While the Editors welcome all topics from potential and regular authors, we would particularly welcome submissions regarding an upcoming special issue on suicide. Please refer to the following call for papers link: <https://www.springer.com/journal/10943/updates/23471166>. If you would like to submit a paper, please do so via the Editorial Manager on the *JORH* web site: <https://www.springer.com/journal/10943/submission-guidelines>.

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