

# RESEARCH REVIEW

A DIGEST OF NEW SCIENTIFIC RESEARCH CONCERNING RELIGION, BRAIN & BEHAVIOR

FEBRUARY, 2011

#### INTRODUCTION

IBCSR Research Review (IRR) is published by the Institute for the Biocultural Study of Religion, a non-profit research institute dedicated to the scientific study of the biocultural aspects of religion. IRR briefly annotates and furnishes online information about scientific research articles related to brain, behavior, culture, and religion published in English in leading journals. It also lists relevant books. Articles in press are listed without annotation. Annotations for articles aim to supply a preliminary understanding of the methods and results of a research study, or the argument of a paper. Annotations typically furnish more detail for articles in the scientific study of religion related to religion, brain, and behavior, than for articles in the area of spirituality and health, in accordance with IBCSR research priorities.

Articles for this issue were located by searching the following databases: Applied Science and Technology, ASFA Biological Sciences, ATLA Religion Database, General Science, PubMed, Psychology and Behavioral Sciences Collection, PsycARTICLES, PsycINFO, ScienceDirect, and Web of Science. The search terms were altruism, god, goddess, meditat\*, prayer, relig\*, spiritu\*, and yoga, tailored to the database being searched. Books were located on Amazon.com. Articles not directly relevant to the scientific study of religion were excluded, as were correspondence and reviews. From a universe of 532 articles, 49 articles have been retained from 37 journals. There are 48 pre-publication citations from 35 journals.

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## PART 1: ARTICLES IN RELIGION, BRAIN, AND BEHAVIOR

#### 1.1 SCIENTIFIC STUDY OF RELIGION: COGNITIVE NEUROSCIENCE

Slagter, Heleen A, Richard J Davidson & Antoine Lutz. 2011. Mental training as a tool in the neuroscientific study of brain and cognitive plasticity. Frontiers in Human Neuroscience 5. 17. doi:10.3389/fnhum.2011.00017.

The authors describe key findings from neuroimaging studies of meditation as evidence for the organization of brain circuitry constantly changing as a function of experience or learning. This learning is often specific to the trained stimuli and task, and does not improve performance on novel tasks, even very similar ones. Additionally, the authors identify several characteristics of specific meditation training regimes that may determine process-specific learning. These characteristics include ongoing variability in stimulus input, the meta-cognitive nature of the processes trained, task difficulty, the focus on maintaining an optimal level of arousal, and the duration of training. Lastly, they discuss the methodological challenges that researchers face when attempting to control or characterize the multiple factors that may underlie meditation training effects.

#### 1.2 SCIENTIFIC STUDY OF RELIGION: EVOLUTION

Huebner, Bryce & Marc D. Hauser. 2011. Moral judgments about altruistic self-sacrifice: When philosophical and folk intuitions clash. *Philosophical Psychology* 24(1). 73-94. doi:10.1080/09515089.2010.534447.

The authors critique, and build on, the recent philosophical arguments of Judith Jarvis Thomson, which assert that intuitions about altruistic self-sacrifice suggest that something has gone wrong in philosophical debates over the trolley problem. They report the results of a study that was designed to examine commonsense intuitions about altruistic self-sacrifice. They find that a surprisingly high proportion of people judge that they should give up their

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lives to save a small number of unknown strangers. They also find that the willingness to engage in such altruistic self-sacrifice is predicted by a person's religious commitments. Finally, they show that folk-moral judgments are sensitive to agent-relative reasons in a way that diverges in important ways from Thomson's proposed intuitions about the trolley problem. They close with a discussion of the relative merits of folk intuitions and philosophical intuitions in constructing a viable moral theory.

#### 1.3 SCIENTIFIC STUDY OF RELIGION: PSYCHOLOGY AND CULTURE

Albertson, Bethany L. 2011. Religious Appeals and Implicit Attitudes. *Political Psychology* 32(1). 109-130.

doi:10.1111/j.1467-9221.2010.00793.x.

This article explores the possibility that religious language, when used by politicians, can affect political attitudes through implicit processes. Because religious attachments are formed early in the lives of many Americans, religious language may influence citizens without their awareness. Implicit and explicit attitudes are related but distinct constructs, and implicit attitudes may have behavioral implications in the political realm. The author tests these hypotheses experimentally, relying on a widely used implicit measure, the Implicit Association Test. She finds that a Christian religious appeal affects implicit attitudes and political behavior among people who currently or previously identify as Christian. Furthermore, an explicit preference for less religion in politics does not moderate implicit effects.

Eisenlohr, Patrick. 2011. Religious Media, Devotional Islam, and the Morality of Ethnic Pluralism in Mauritius. *World Development* 39(2). 261-269. doi:10.1016/j.worlddev.2009.11.026.

This paper focuses on the circulation of religious media and their emphasis on religiously grounded notions of the common good in an ethnically diverse society, and addresses the importance of a media-sustained public sphere for the modalities of ethnic pluralism in Mauritius. The media-driven dynamics of ethnic and religious pluralism also highlight performatively constituted morality comprising of both affective and meaningful dimensions of the public sphere, as they are evident in Mauritian engagements with religious media.

Esch, Tobias & George B. Stefano. 2011. The neurobiological link between compassion and love. Medical Science Monitor: International Medical Journal of Experimental and Clinical Research 17(3). RA65-75.

The authors address the neurobiology of compassion and love. Besides their emotional role and capacity to govern behavior, appetitive motivation, and effect a general "positive state", one that is even "spiritual" at times, the behaviors shown in love and compassion clearly rely on neurobiological mechanisms and underlying molecular principles. These processes and pathways involve the brain's limbic motivation and reward circuits, a finely tuned and profound autoregulation. This capacity to self-regulate emotions, approach behaviors and even pair bonding, as well as social contact in general, i.e., love, attachment and compassion, can be highly effective in stress reduction, survival and overall health. While molecular biology is the basis of interpersonal neurobiology, there is no answer to the question of what comes first or is more important: it is a cybernetic capacity and complex circuit of autoregulation that is clearly "amazing."

#### 1.4 SCIENTIFIC STUDY OF RELIGION: METHOD & THEORY

Peters, Ted. 2011. The implications of the discovery of extra-terrestrial life for religion. *Philosophical Transactions. Series A, Mathematical, Physical, and Engineering Sciences* 369(1936). 644-655. doi:10.1098/rsta.2010.0234.

#### IBCSR Research Review: February, 2011

This paper asks about the future of religion: will confirmation of extra-terrestrial intelligence (ETI) cause terrestrial religion to collapse? The author asserts that it will not, based upon a summary of the Peters ETI Religious Crisis Survey'. The paper then examines four specific challenges to traditional doctrinal belief likely to be raised at the detection of ETI: first, what is the scope of God's creation? Second, what can we expect regarding the moral character of ETI? Third, is one earthly incarnation in Jesus Christ enough for the entire cosmos, or should we expect multiple incarnations on multiple planets? Fourth, will contact with more advanced ETI diminish human dignity? More than probable contact with extra-terrestrial intelligence will expand the Bible's vision so that all of creation—including the 13.7 billion year history of the universe replete with all of God's creatures—will be seen as the gift of a loving and gracious God.

## PART 2. ARTICLES IN SPIRITUALITY & HEALTH RESEARCH

#### 2.1 SPIRITUALITY & HEALTH: GENERAL HEALTH & WELL-BEING

April, Karine Toupin & Rishma Walji. 2011. The State of Research on Complementary and Alternative Medicine in Pediatric Rheumatology. Rheumatic Disease Clinics of North America 37(1). 85-94.

doi:10.1016/j.rdc.2010.11.011.

This article reviews available evidence on complementary and alternative medicine in pediatric rheumatology. Despite its common use in pediatric rheumatology (34%–92%), there is still uncertainty as to its efficacy and safety. Although results are promising for some treatments such as massage, acupuncture, mind-body interventions (e.g., guided imagery and meditative breathing), and some natural health products (e.g., calcium supplements and Tripterygium wilfordii), the authors identify a need for high-quality trials investigating the long-term effects and underlying mechanisms of these therapies as well as research on their use in this population of patients.

Bergman, Jonathan, Arlene Fink, Lorna Kwan, Sally Maliski & Mark S Litwin. 2011. Spirituality and end-of-life care in disadvantaged men dying of prostate cancer. *World Journal of Urology* 29(1). 43-49.

doi:10.1007/s00345-010-0610-y.

In a study of 35 low-income, uninsured men in a state-funded public assistance program who had died since the program's inception in 2001, and who had completed a spirituality questionnaire at program enrollment, researchers found that a higher proportion of men with high (33%) versus low (13%) spirituality scores enrolled in hospice, though analysis was not adequately powered to demonstrate statistical significance. Likewise, they saw a trend toward increased receipt of palliative radiation among those with higher spirituality (37% vs. 25%). The differences in end-of-life care received among those with low and high spirituality varied little by the FACIT-Sp peace and faith subscales.

Cameron, Melainie, Joel J Gagnier & Sigrun Chrubasik. 2011. Herbal therapy for treating rheumatoid arthritis. *Cochrane Database of Systematic Reviews (Online)* 2. CD002948. doi:10.1002/14651858.CD002948.pub2.

After a literature review of randomized controlled trials of herbal interventions compared with placebo or active controls in rheumatoid arthritis (RA), researchers concluded from 12 studies that several herbal interventions are inadequately justified by single studies or non-comparable studies in the treatment of rheumatoid arthritis. There is moderate evidence that oils containing GLA (evening primrose, borage, or blackcurrant seed oil) afford some benefit in relieving symptoms for RA, while evidence for Phytodolor® N is less convincing. Tripterygium wilfordii products may reduce some RA symptoms, however, oral use may be associated with several side effects. Many trials of herbal therapies are hampered by research design flaws and inadequate reporting.

Evans, Yolanda, Laura Richardson, Cari McCarty & Chuan Zhou. 2011. 191. Religiosity and Sexual Behaviors in African American and White Youth. *Journal of Adolescent Health* 48(2, Supplement 1). S117.

doi:10.1016/j.jadohealth.2010.11.239.

No abstract available.

Field, Tiffany. 2011. Yoga clinical research review. Complementary Therapies in Clinical Practice 17(1). 1-8

doi:10.1016/j.ctcp.2010.09.007.

In this paper recent research is reviewed on the effects yoga has on psychological conditions including anxiety and depression, on pain syndromes, cardiovascular, autoimmune and immune conditions and on pregnancy. Further, the physiological effects of yoga, including decreased heartrate and blood pressure, and the physical effects, including weight loss and increased muscle strength, are reviewed. Finally, potential underlying mechanisms are proposed including the stimulation of pressure receptors leading to enhanced vagal activity and reduced cortisol. The reduction in cortisol, in turn, may contribute to positive effects such as enhanced immune function and a lower prematurity rate.

Finocchario-Kessler, S, D Catley, J Berkley-Patton, M Gerkovich, K Williams, J Banderas & K Goggin. 2011. Baseline predictors of ninety percent or higher antiretroviral therapy adherence in a diverse urban sample: the role of patient autonomy and fatalistic religious beliefs. *AIDS Patient Care and STDs* 25(2). 103-111. doi:10.1089/apc.2010.0319.

This study assessed baseline predictors of high ART (antiretroviral therapy) adherence ( $\geq 90\%$ ) measured by electronic drug monitors at 12 and 24 weeks after enrollment in a randomized controlled trial testing behavioral interventions to improve ART adherence (n=204). Several baseline predictors retained statistical significance in multivariate analysis at 24 weeks. Baseline levels of autonomous support from friends and family, motivation to adhere, and having an active coping style were all positively associated with adherence, while the belief that God is in control of one's health was negatively associated with adherence.

Krause, N. & E. Bastida. 2011. Prayer to the Saints or the Virgin and Health Among Older Mexican Americans. *Hispanic Journal of Behavioral Sciences* 33(1). 71-87. doi:10.1177/0739986310393628.

The purpose of this study was to evaluate a conceptual model that assesses whether praying to the saints or the Virgin is associated with the health of older Mexican Americans. A survey was conducted of 1,005 older Mexican Americans; data from 795 of the Catholic respondents are presented in this study. The findings support the following relationships that are embedded in the conceptual model: older Mexican Americans who attend church more often are more likely to believe in the efficacy of prayer to the saints or the Virgin; stronger beliefs in the efficacy of intercessory prayer are associated with more frequent prayer to the saints or the Virgin; frequent prayer is to the saints or the Virgin and is associated with greater God-mediated control beliefs; stronger God-mediated control beliefs are associated with greater optimism; and greater optimism is associated with better self-rated health.

Kudel, Ian, Sian Cotton, Magda Szaflarski, William C. Holmes & Joel Tsevat. 2011. Spirituality and religiosity in patients with HIV: A test and expansion of a model. *Annals of Behavioral Medicine* 41(1). 92-103.

doi:10.1007/s12160-010-9229-x.

In testing a model postulating the relationship of religiosity, mental health, and physical functioning in 345 patients with HIV, researchers found that increased spirituality/religiosity predicted increased religious coping, which influenced social support. Social support, in turn, positively influenced depressed mood (as a measure of mental health); depressed mood affected fatigue; and both variables predicted self-reported physical function. These three variables predicted health rating/utility for one's health state. Additional analyses found that two covariates, religiosity and race, differentially predicted spirituality/religiosity and religious coping.

Lyon, Maureen, Patricia Garvie, Linda Briggs, Jiangping He, Robert McCarter & Lawrence D'Angelo. 2011. 98. Is Spirituality a Substitute for Connectedness? An Examination of Spirituality Among HIV-Infected Adolescents and their Families. *Journal of Adolescent Health* 48(2, Supplement 1). S68-S69.

doi:10.1016/j.jadohealth.2010.11.145.

No abstract available.

Murthy, S.N., N.S.N. Rao, Babina Nandkumar & Avinash Kadam. 2011. Role of naturopathy and yoga treatment in the management of hypertension. *Complementary Therapies in Clinical Practice* 17(1). 9-12.

doi:10.1016/j.ctcp.2010.08.005.

In a study of 104 subjects diagnosed with hypertension and taking antihypertensive pharmaceuticals, researchers found that an intervention of naturopathy and yoga resulted in reduced systolic and diastolic blood pressure, improved lipid profile, and weight loss. At the end of one year, out of 57 patients who came for follow-up, 14 cases were found to have blood pressure within normal ranges without any medication over the previous 12 months.

Ulger, Ozlem & Naciye Vardar Yağlı. 2011. Effects of yoga on balance and gait properties in women with musculoskeletal problems: a pilot study. *Complementary Therapies in Clinical Practice* 17(1). 13-15.

doi:10.1016/j.ctcp.2010.06.006.

Twenty-seven women (30-45 years old) with musculoskeletal problems, such as osteoarthritis and low-back pain, participated in 8 sessions (twice weekly for 4 weeks) of a yoga program which included asanas, stretching exercises, and breathing techniques. Post-study values of patients' gait parameters were found to be statistically higher than their pre-study values. The values of patients' halance addressed anterior and right positions with patients' eyes open and subsequently closed pre-treatment. However, it was notable that balance post-treatment was minimal when subjects eyes were open or closed. Anterior-posterior values and right-left values were almost equal after treatment.

#### 2.2 Spirituality & Health: Mental Health

Abdel-Khalek, Ahmed M. 2011. Religiosity, subjective well-being, self-esteem, and anxiety among Kuwaiti Muslim adolescents. *Mental Health, Religion & Culture* 14(2). 129-140. doi:10.1080/13674670903456463.

The study explored the association between religiosity, subjective well-being (SWB), self-esteem, and anxiety among a sample of 499 Muslim Kuwaiti adolescents. All the correlations were significant between religiosity and SWB rating scales, self-esteem (positive) and anxiety (negative). Results suggest that religiosity is associated with high levels of self-rating of SWB, self-esteem and low levels of anxiety. The present findings provide further evidence for a probable mollifying role of religiosity in providing a buffering effect on anxiety in the current sample of Muslim adolescents. Part of a special issue on Islam and mental health.

Abdel-Khalek, Ahmed M. & Ghada K. Eid. 2011. Religiosity and its association with subjective well-being and depression among Kuwaiti and Palestinian Muslim children and adolescents. *Mental Health, Religion & Culture* 14(2). 117-127. doi:10.1080/13674670903540951.

The study investigated the association of religiosity and the self-ratings of happiness, satisfaction with life, mental health, physical health, and depression among Kuwaiti (n=1,937) and Palestinian (n=1,009) Muslim children and adolescents. It was found that Palestinian males were significantly less religious than all other groups, while Kuwaiti males and females had significantly higher mean scores on happiness and satisfaction than Palestinians. Kuwaiti males had significantly higher mental health and less depression than all other groups. Among all the four groups, the correlations between religiosity and well-being rating scales were positively significant, but

negatively significant with depression. The principal components analysis yielded a single salient factor for all groups labeled "Religiosity and well-being vs. depression." Part of a special issue on Islam and mental health.

Abu-Raiya, Hisham & Kenneth I. Pargament. 2011. Empirically based psychology of Islam: summary and critique of the literature. *Mental Health*, *Religion & Culture* 14(2). 93-115. doi:10.1080/13674670903426482.

The authors systematically reviewed the growing empirically based psychology of Islam, and arrive at 10 conclusions: Islam is a multidimensional religion, and means different things to different people, and some people might adhere to some of its elements but not to others; Islam is similar to, but is different from, other religions; Islam's role in the lives of Muslims seems mostly positive; some types of Islamic religiousness are negative; the empirical findings have not been translated yet into clinical applications; most of studies conducted among Muslims provide only a birds-eye view of Islam; empirical studies of Muslims are scarce; empirical research on negative types of religiousness among Muslims is sparse; the majority of research in this field has been restricted to convenient samples; several important topics with implications for Muslims deserve further consideration, and there is a need for more varied research methods in studies of Muslims. Part of a special issue on Islam and mental health.

Abu-Raiya, Hisham, Kenneth I. Pargament & Annette Mahoney. 2011. Examining Coping Methods With Stressful Interpersonal Events Experienced by Muslims Living in the United States Following the 9/11 Attacks. *Psychology of Religion and Spirituality* 3(1). 1-14. doi:10.1037/a0020034.

Pargament's religious coping theory was used to examine the methods of coping with stressful interpersonal events experienced by 138 Muslims living in the United States following the 9/11 attacks. The large majority of participants reported experiencing at least one stressful interpersonal event after the 9/11 attacks related to being Muslim. Participants used both religious and nonreligious methods to deal with these stressful interpersonal events. Positive religious coping and reaching out were related to posttraumatic growth; negative religious coping was associated with depression, and isolation was tied to both depression and angry feelings. The large majority of participants did not view the negative interpersonal events they experienced after the 9/11 attacks as a sacred loss, but a significant percentage did consider these events as a desecration. Further, viewing these incidents as a desecration was tied to posttraumatic growth, but this link was partially mediated by positive coping methods.

Al-Krenawi, Alean & John R. Graham. 2011. Mental health help-seeking among Arab university students in Israel, differentiated by religion. *Mental Health, Religion & Culture* 14(2). 157-167. doi:10.1080/13674670903454229.

This paper compares attitudes to mental health-seeking patterns among a cohort of students representing three major religious minorities among Arab communities in Israel: Christians, Druze, and Muslim. Results of a cross-national survey of 195 student respondents indicate significant differences regarding attitudes towards help-seeking behavior. Compared to Druze and Muslim counterparts, Christian subjects were higher in interpersonal openness, perceived mental health services as less stigmatizing, and were less likely to use traditional healing systems. Findings are analyzed in relation to cultural, historical, and political differences. Part of a special issue on Islam and mental health.

Al-Solaim, Lamis & Kate Miriam Loewenthal. 2011. Religion and obsessive-compulsive disorder (OCD) among young Muslim women in Saudi Arabia. *Mental Health, Religion & Culture* 14(2). 169-182.

doi:10.1080/13674676.2010.544868.

After interviews with 15 young women suffering from OCD in Saudi Arabia, researchers found that religion was not perceived as a cause of the illness, but the illness can show itself in religious symptoms, notably with respect to prayer, and in a phase in which the young women were very strict and literal-minded with themselves and their

families, with respect to religious observance. Religious symptoms were reported as more upsetting than other symptoms, being seen as damaging to the sufferer's piety. Other facets of the importance of religion in the experience of OCD were shown in help-seeking, in choosing to go first to religious healers for treatment, and only when these were unsuccessful were mental health professionals consulted. It was very important that the professional should be seen as trustworthy, and the criterion of trustworthiness was religiosity, specifically the use of pious, Qura'anic quotations, and a covered face (for a woman)/long beard (for a man). Part of a special issue on Islam and mental health.

Bachner, Yaacov G., Norm O'Rourke & Sara Carmel. 2011. Fear of Death, Mortality Communication, and Psychological Distress Among Secular and Religiously Observant Family Caregivers of Terminal Cancer Patients. *Death Studies* 35(2). 163-187. doi:10.1080/07481187.2010.535390.

The current study compared responses and the relative strength of association between mortality communication, fear of death, and psychological distress (i.e., depressive symptomatology, emotional exhaustion) among secular and religiously observant family caregivers of terminally ill cancer patients. From 236 participants, researchers found that retrospectively reported mortality communication was statistically greater among secular caregivers; in contrast, both fear of death and depressive symptoms were greater among the religiously observant. Among secular caregivers, a significant inverse relationship between mortality communication and the two indices of caregiver distress emerged. In contrast, the association between mortality communication and psychological distress among the religious was moderated by these caregivers' fear of death. Researchers conclude that fear of death is a significant predictor of psychological distress among religiously observant caregivers of terminal cancer patients (i.e., fear of their own death as elicited by the caregiving role).

Behere, R. V., R. Arasappa, A. Jagannathan, S. Varambally, G. Venkatasubramanian, J. Thirthalli, D. K. Subbakrishna, H. R. Nagendra & B. N. Gangadhar. 2011. Effect of yoga therapy on facial emotion recognition deficits, symptoms and functioning in patients with schizophrenia. *Acta Psychiatrica Scandinavica* 123(2). 147-153. doi:10.1111/j.1600-0447.2010.01605.x.

Researchers randomized a group of schizophrenic patients on anti-psychotic medication to receive yoga (n=27), exercise (n=17) or waitlist (n=22), and at 2 and 4 month followup found significant improvement in positive and negative symptoms, socio-occupational functioning and performance on a facial recognition of emotions test in the Yoga group, but not in the other two groups.

Cheung, Chau-kiu & Jerf Wai-keung Yeung. 2011. Meta-analysis of relationships between religiosity and constructive and destructive behaviors among adolescents. *Children and Youth Services Review* 33(2). 376-385.

doi:10.1016/j.childyouth.2010.10.004.

After a review of 40 studies published from 1995 to 2009, covering adolescents with an average age of 16.45 years, the authors found a weak effect between religious involvement and constructive or destructive behavior. Religious involvement exhibits a stronger relationship with constructive behavior than with destructive behavior. Compared with private religious involvement, public religious involvement shows a weaker relationship with constructive or destructive behaviors.

Cicirelli, Victor G. 2011. Religious and Nonreligious Spirituality in Relation to Death Acceptance or Rejection. *Death Studies* 35(2). 124-146. doi:10.1080/07481187.2011.535383.

In this article, meanings of religious and nonreligious spirituality are explored, with implications for death acceptance, death rejection, and life extension. In the first of two exploratory studies, 16 elders low on intrinsic

religiosity were compared with 116 elders high in religiosity; they differed both in qualitative responses and on death attitudes. In the second, 48 elders were assessed on religious and nonreligious spirituality and compared on attitudes toward death rejection, life extension, and death acceptance. The author concludes that a sizable minority of elders hold nonreligious spirituality beliefs, and these beliefs are related to greater acceptance of life extension and death rejection.

Desrosiers, Alethea, Brien S. Kelley & Lisa Miller. 2011. Parent and peer relationships and relational spirituality in adolescents and young adults. *Psychology of Religion and Spirituality* 3(1). 39-54. doi:10.1037/a0020037.

In a sample of 615 adolescents and young adults representing a diverse range of ethnicities and religious affiliations, Maternal Spiritual Support, Paternal Care, and Friends Spiritual Support were significantly positively associated with Relational Spirituality, with Maternal Spiritual Support influencing the selection of peers who offer Friends Spiritual Support. The authors conclude that parents and peers are very important facilitating the development of Relational Spirituality, particularly through maternal openness to discussion about spirituality/religiosity and through paternal affection.

Dobkin, Patricia L & Qinyi Zhao. 2011. Increased mindfulness – the active component of the mindfulness-based stress reduction program? *Complementary Therapies in Clinical Practice* 17(1). 22-27.

doi:10.1016/j.ctcp.2010.03.002.

Researchers found that an increase in mindfulness was significantly related to reductions in depressive symptoms, stress, medical symptoms and an increase in overall sense of coherence in a sample of 83 chronic ill patients. However, the relationship between practice and outcomes was less evident.

Houltberg, Benjamin, Carolyn Henry, Michael Merten & Linda Robinson. 2011. Adolescents' Perceptions of Family Connectedness, Intrinsic Religiosity, and Depressed Mood. *Journal of Child & Family Studies* 20(1). 111-119.

doi:10.1007/s10826-010-9384-5.

From a sample of 248 ninth and tenth grade students at public high schools, researchers found that family connectedness was negatively associated with depressed mood, and intrinsic religiosity was not significantly associated with depressed mood. For boys, high intrinsic religiosity strengthened the association between mothers' support and depressed mood. Among girls, when mothers' support was low, intrinsic religiosity provided an additional source of connectedness in protecting against depressed mood.

Kézdy, Anikó, Tamás Martos, Vivian Boland & Katalin Horváth-Szabó. 2011. Religious doubts and mental health in adolescence and young adulthood: The association with religious attitudes. *Journal of Adolescence* 34(1). 39-47.

doi:10.1016/j.adolescence.2010.03.003.

This study investigated the moderating role of religious attitudes (strength of religious belief, and literal vs. symbolic approach to religion) on this relationship in a sample of 403 Hungarian high school and university students aged 15–25 years. Results provided support for a three-way moderation: the positive correlation between doubts and anxiety/depression was stronger the higher the level of religious belief, but was strongest when religious beliefs and symbolic approach were both high. These associations were found to be stable across gender and educational level.

Momtaz, Yadollah Abolfathi, Tengku-Aizan Hamid, Rahimah Ibrahim, Nurizan Yahaya & Sen Tyng Chai. 2011. Moderating effect of religiosity on the relationship between social isolation and psychological well-being. *Mental Health, Religion & Culture* 14(2). 141-156. doi:10.1080/13674676.2010.497963.

This study aimed to examine the moderating effect of religiosity on the relationship between social isolation and psychological well-being among a sample of 1415 community-dwelling older Malay Muslims age 60 years and over, using data from a national survey of older persons in Peninsular Malaysia. The authors found that religiosity significantly moderates relationship between social isolation and psychological well-being, after controlling for age, sex, marital status, level of education, employment status, household income, and place of residence. Part of a special issue on Islam and mental health.

Parker, Jessica A, Barbara Mandleco, Susanne Olsen Roper, Donna Freeborn & Tina Taylor Dyches. 2011. Religiosity, spirituality, and marital relationships of parents raising a typically developing child or a child with a disability. *Journal of Family Nursing* 17(1). 82-104. doi:10.1177/1074840710394856.

From questionnaires completed by 111 parents raising a child with a disability (CWD) and 34 parents raising typically developing children researchers found that parents raising typically developing children scored higher on private and public religiosity and marital satisfaction than parents raising a CWD; mothers scored higher on religiosity variables than fathers. Mothers' ratings of spirituality and family type (disability or typically developing child) predicted their ratings of marital conflict. Higher spirituality and raising typically developing children were associated with higher ratings of marital satisfaction for both mothers and fathers. However, spirituality also moderated the relationship between private/public religiosity and marital satisfaction only for fathers.

Pössel, Patrick, Nina C. Martin, Judy Garber, Aaron W. Banister, Natalie K. Pickering & Martin Hautzinger. 2011. Bidirectional relations of religious orientation and depressive symptoms in adolescents: A short-term longitudinal study. *Psychology of Religion and Spirituality* 3(1). 24-38. doi:10.1037/a0019125.

A 4-month longitudinal study of 273 ninth-grade students found that higher intrinsic religious orientation measured at baseline significantly predicted lower self-reported depressive symptoms 4 months later, controlling for initial level of depressive symptoms and cognitive style; in contrast, extrinsic orientation and the interaction between religious orientation and life events did not significantly predict later depressive symptoms. Self-reported depressive symptoms did not predict either intrinsic or extrinsic religious orientation 4 months later.

Schmidt, Stefan, Paul Grossman, Barbara Schwarzer, Susanne Jena, Johannes Naumann & Harald Walach. 2011. Treating fibromyalgia with mindfulness-based stress reduction: results from a 3-armed randomized controlled trial. *Pain* 152(2). 361-369. doi:10.1016/j.pain.2010.10.043.

Efficacy of MBSR for enhanced well-being of fibromyalgia patients was investigated. A total of 177 female patients were randomized to one of the following: MBSR; an active control procedure controlling for nonspecific effects of MBSR; or a wait list. Of the 82% of patients who completed the study, there were no significant differences between groups on health-related quality of life (HRQoL) at 2 months, but patients overall improved in HRQoL at short-term follow-up. Primary outcome analyses did not support the efficacy of MBSR in fibromyalgia, although patients in the MBSR arm appeared to benefit most. Effect sizes were small compared to the earlier, quasi-randomized investigation.

Singh, Nirbhay N., Giulio E. Lancioni, Alan S. W. Winton, Ashvind N. Singh, Angela D. Adkins & Judy Singh. 2011. Can adult offenders with intellectual disabilities use mindfulness-based procedures to control their deviant sexual arousal? *Psychology, Crime & Law* 17(2). 165-179. doi:10.1080/10683160903392731.

In a preliminary study, researchers assessed whether three adult sexual offenders with intellectual disability could learn to control their deviant sexual arousal. They evaluated the individuals' ability to use self-control methods, Meditation on the Soles of the Feet, and a Mindful Observation of Thoughts meditation procedure to control their

deviant sexual arousal when given relevant printed stimulus materials. Data indicate that the individuals were minimally successful when they used their own self-control strategies, more effective with Meditation on the Soles of the Feet, and most effective with Mindful Observation of Thoughts meditation.

Tavabi, Amir Ali & Elham Iran-Pour. 2011. The association between religious beliefs and mental health amongst medical students. *JPMA*. The Journal of the Pakistan Medical Association 61(2). 135-138.

In a study of 200 randomly selected Muslim medical students (125 female) of Islamic Azad University-Tehran Medical Branch between June and July 2006, a statistically significant association was found between religious beliefs (RB) and mental health (MH). The stronger the RB, the higher the academic success. Similarly a significant association of academic success was also detected with MH. There was no association of age, gender and marital status either with RB or MH.

Worthington, Everett L, Joshua N Hook, Don E Davis & Michael A McDaniel. 2011. Religion and spirituality. *Journal of Clinical Psychology* 67(2). 204-214. doi:10.1002/jclp.20760.

Researchers meta-analyzed 51 samples from 46 studies (n=3,290) that examined the outcomes of religious accommodative therapies and nonreligious spirituality therapies. Comparisons on psychological and spiritual outcomes were made to a control condition, an alternate treatment, or a subset of those studies that used a dismantling design. Patients in religious or spiritual psychotherapies showed greater improvement than those in alternate secular psychotherapies both on psychological and on spiritual outcomes. Religiously accommodated treatments outperformed dismantling-design alternative treatments on spiritual but not on psychological outcomes. An excerpt from the authors' recent book.

#### 2.3 SPIRITUALITY & HEALTH: METHOD AND THEORY

Abdel-Khalek, Ahmed M. 2011. Islam and mental health: A few speculations. *Mental Health, Religion & Culture* 14(2). 87-92.

doi:10.1080/13674676.2010.544867.

The author reflects on the studies conducted by various researchers on the relationship of Islam and mental health. It is being stressed by the author that there is a positive relation between religiosity and both mental and subjective well-being, and a negative association between religiosity and psychopathology. It adds that the similarities between monotheistic religions overshadow the differences regarding the association between religiosity and mental health.

Ben-Arye, Eran, Elad Schiff, Khaled Karkabi, Yael Keshet & Efraim Lev. 2011. Exploring association of spiritual perspectives with complementary medicine use among patients with Type 2 diabetes in Israel. *Ethnicity & Health* 16(1). 1-10. doi:10.1080/13557858.2010.510181.

From a questionnaire completed by 3,742 patients attending primary care clinics in Northern Israel, researchers found that the 12.9% who reported having Type 2 diabetes also reported more overall use of complementary and alternative medicine (CAM) during the previous year. Further analysis revealed that CAM use was associated with higher self-assessed religiosity; CAM use among patients with diabetes was also associated more with female gender, higher education, and age under 60. Of the Jewish population, there was significant association between CAM use and higher religiosity.

Blanton, P. Gregg. 2011. The Other Mindful Practice: Centering Prayer & Psychotherapy. *Pastoral Psychology* 60(1). 133-147. doi:10.1007/s11089-010-0292-9.

The author highlights a mindful practice that grows out of the Christian tradition: Centering Prayer. He first describes the practice and compares it with mindfulness practices. The remainder of the article explores the clinical implications of Centering Prayer. First, ways in which Centering Prayer informs our understanding of the need for and the goals of counseling are suggested. Next, four therapeutic skills of Centering Prayer, along with three distinct ways for integrating Centering Prayer into psychotherapy are offered.

Carlin, Nathan & Donald Capps. 2011. Freud's Wolf Man: A Case of Successful Religious Sublimation. *Pastoral Psychology* 60(1). 149-166. doi:10.1007/s11089-009-0212-z.

This article focuses on Freud's view that the case of Sergei Pankejeff, commonly known as Wolf Man, is an example of an unsuccessful religious sublimation. The authors suggest that there was one feature of his early religious behavior that reflected a successful religious sublimation and explain why it was successful. They conclude that even small children may experience a successful religious sublimation.

Fenwick, Peter & Sue Brayne. 2011. End-of-life experiences: reaching out for compassion, communication, and connection-meaning of deathbed visions and coincidences. *The American Journal of Hospice & Palliative Care* 28(1). 7-15. doi:10.1177/1049909110374301.

The authors write that, while much has been written on the spiritual needs of the dying, many doctors and nurses still find this a difficult area to approach. They lack the confidence and/or training to recognize or discuss spiritual aspects of death and dying or to affirm the spiritual needs of the dying person. The authors find that their end-of-life experience research suggests that deathbed visions and deathbed coincidences are not uncommon, and that the dying process appears to involve an instinctive need for spiritual connection and meaning, requiring compassionate understanding and respect from those who provide end-of-life care.

Lomax, James W., Jeffrey J. Kripal & Kenneth I. Pargament. 2011. Perspectives on "Sacred Moments" in Psychotherapy. *American Journal of Psychiatry* 168(1). 12-18. doi:10.1176/appi.ajp.2010.10050739.

The authors describe a clinical experience and offer comments on it from the perspectives of a psychoanalyst, a psychotherapy researcher, and a historian of religions. The clinical context is a psychodynamic psychotherapy with a patient who is describing what she has tentatively thought about intellectually as a "paranormal experience," but she is concerned that it might be further evidence to support labeling her as an odd, weird, and "severely pathologic" individual. The authors hope to encourage clinicians to be open to patients' descriptions of anomalous experiences and to work with patients to construct meanings of these experiences that will promote health, positive coping, and growth.

Moschella, Mary. 2011. Spiritual Autobiography and Older Adults. *Pastoral Psychology* 60(1). 95-98. doi:10.1007/s11089-010-0307-6.

The author describe spiritual autobiography groups, which provide participants with an environment in which they can make meaning out of their lives, grieve their losses, and give and receive support.

Omonzejele, Peter F & Chukwugozie Maduka. 2011. Metaphysical and value underpinnings of traditional medicine in West Africa. *Chinese Journal of Integrative Medicine* 17(2). 99-104. doi:10.1007/s11655-011-0649-y.

In a study of residents in urban (Benin City) and rural (Ehime Mbano) communities in Nigeria, and interviews with traditional healers, researchers found that in both rural and urban areas, women and more elderly persons had more recourse than other groups to traditional medicine; Christians, less educated persons, self-employed persons and women affirmed most strongly to the efficacy of traditional medicine over Western medicine with

respect to certain ailments. Ways for averting spiritual illnesses included obeying instructions from ancestors and offering regular sacrifices to the gods; methods used by traditional healers to determine whether an ailment was "spiritual" or as a result of home problems included diagnosis linked to divination, interpretation of dreams particularly those involving visits by ancestors, interpretation of nightmares and omens such as the appearance of owls. Methods for curing patients included use of herbs particularly those believed to have magical powers, offering of sacrifices, use of incantations and wearing of protective medicine.

Panzini, Raquel Gehrke, Camila Maganha, Neusa Sica da Rocha, Denise Ruschel Bandeira & Marcelo P Fleck. 2011. Brazilian validation of the Quality of Life Instrument/spirituality, religion and personal beliefs. Revista De Saúde Pública 45(1). 153-165.

From a sample of 404 patients and workers of a university hospital and workers of a university in Southern Brazil, researchers found that the Brazilian Portuguese version of the World Health Organization's Quality of Life Instrument--Spirituality, Religion and Personal Beliefs module (WHOQOL-SRPB (General SRPB-Domain)) showed good psychometric qualities and could have valid and reliable use in Brazil.

Park, Kwang-hee. 2011. Asian Medicine and Holistic Aging. *Pastoral Psychology* 60(1). 73-83. doi:10.1007/s11089-010-0305-8.

This article introduces a holistic model of care for the elderly from the perspective of Traditional Chinese Medicine (TCM), a body-spirit-social-environment perspective, deeply influenced by Chinese religions, which laid the foundation of Chinese health beliefs and practices. The author evaluates practices that promote health, longevity, and quality of life, and support end of life care. Insights address care for Chinese and other ethnic Asian older adults.

Pathy, Rubini, Kelsey E. Mills, Sharon Gazeley, Andrea Ridgley & Tara Kiran. 2011. Health is a spiritual thing: perspectives of health care professionals and female Somali and Bangladeshi women on the health impacts of fasting during Ramadan. *Ethnicity & Health* 16(1). 43-56. doi:10.1080/13557858.2010.523780.

From two culturally specific focus groups with six Somali and seven Bangladeshi Muslim women who observed Ramadan and lived in an inner-city neighborhood of Toronto, Canada, researchers found that both Muslim women and health care professionals also interviewed (n=22) recognized the spiritual significance of the Ramadan fast. Muslim participants considered the fast to be beneficial to health overall, whereas health care professionals tended to reflect on health concerns from fasting. Many health care professionals were not fully aware of fasting practices during Ramadan and some found it challenging to counsel patients about the health effects of fasting. Muslim women expressed disagreement regarding which medical interventions were permitted during fasting. They generally agreed that health care professionals should not specifically advise against fasting, but instead provide guidance on health maintenance while fasting.

Reid, Denise. 2011. Mindfulness and flow in occupational engagement: presence in doing. Canadian Journal of Occupational Therapy/Revue Canadienne D'ergothérapie 78(1). 50-56.

The author describes mindfulness and "flow": a psychological state that occurs when a person is aware of his or her actions but is not being aware of his or her awareness. Mindfulness is viewed not as the achievement of any particular state, but as intentional awareness of what is, being aware of awareness. Both flow and mindfulness involve being present, actively engaged, and attentive.

Ruijs, Wilhelmina Lm, Jeannine LA Hautvast, Koos van der Velden, Sjoerd de Vos, Hans Knippenberg & Marlies Ejl Hulscher. 2011. Religious subgroups influencing vaccination coverage in the Dutch Bible belt: an ecological study. *BMC Public Health* 11(1). 102. doi:10.1186/1471-2458-11-102.

Researchers in the Netherlands found that mean vaccination coverage in municipalities with orthodox protestant denominations (OPDs) (n=135) was significantly than in 297 municipalities without OPDs. In municipalities with OPDs, 84% of the variance in vaccination coverage was explained by the presence of these OPDs. Immigration had a significant, but small explanatory effect as well. Membership ratios of all OPDs were negatively related to vaccination coverage; this relationship was strongest for two very conservative OPDs.

Sirilla, J.A., S.A. Ezzone, C. Kirkendall & J. Buck. 2011. Assessing Quality of Life (QOL), Spiritual Well-Being, and Use of Resources Throughout the Hematopoietic Stem Cell Transplant (HSCT) Process. *Biology of Blood and Marrow Transplantation* 17(2, Supplement 1). S193. doi:10.1016/j.bbmt.2010.12.127.

No abstract available.

Snodgrass, Jill & Siroj Sorajjakool. 2011. Spirituality in Older Adulthood: Existential Meaning, Productivity, and Life Events. *Pastoral Psychology* 60(1). 85-94. doi:10.1007/s11089-010-0282-y.

This article explores the relationship of spirituality and older adulthood, especially focusing on factors that may result in an increased spirituality among the elderly. Older adulthood, as the accumulation of insight gleaned from difficult lessons learned through life, offers the opportunity to embrace human finitude, to recognize life's continuity and to grow in clarity about God and God's presence. Wisdom gained through the experiences of vulnerability and transition serves as a resource to self and others.

Staud, Roland. 2011. Effectiveness of CAM therapy: understanding the evidence. *Rheumatic Diseases Clinics of North America* 37(1). 9-17. doi:10.1016/j.rdc.2010.11.009.

By definition, complementary and alternative medicine (CAM) attempts to diagnose and treat illnesses in unconventional ways. This review focuses on how to assess the effectiveness of CAM therapies for chronic musculoskeletal pains, emphasizing the role of specific and nonspecific analgesic mechanisms, including placebo.

Thomas, Justin & Saquab Ashraf. 2011. Exploring the Islamic tradition for resonance and dissonance with cognitive therapy for depression. *Mental Health*, *Religion & Culture* 14(2). 183-190.

doi:10.1080/13674676.2010.517190.

This paper explores the process of cognitive therapy and the models of depression upon which it is based, highlighting areas of resonance and dissonance with Islamic thought. The paper advocates the development of cognitive behavioral psychotherapeutic content and technique informed by Islamic tradition. The authors argue that such spiritually and culturally attuned interventions, in many cases, will be more appropriate and clinically effective for clients with world views shaped by Islam. Part of a special issue on Islam and mental health.

Van den Branden, Stef & Bert Broeckaert. 2011. Living in the hands of God. English Sunni e-fatwas on (non-)voluntary euthanasia and assisted suicide. *Medicine, Health Care, and Philosophy* 14(1). 29-41.

doi:10.1007/s11019-010-9280-1.

This study analyses Islamic views on (non-)voluntary euthanasia and assisted suicide as expressed in English Sunni fatwas published on independent Islamic websites. After analysis of 32 English Sunni e-fatwas, researchers found that all of them speak out against every form of active termination of life. They base themselves solely on Quranic verses and prophetic traditions, leaving aside classical jurisprudential discussions on the subject. On the level of content, they are in line with the international literature on Islamic end-of-life ethics.

Wahbeh, Helané, Heather Zwickey & Barry Oken. 2011. One method for objective adherence measurement in mind-body medicine. *Journal of Alternative and Complementary Medicine (New York, N.Y.)* 17(2). 175-177.

doi:10.1089/acm.2010.0316.

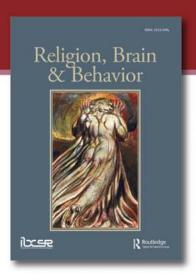
This brief methods report describes one method for objectively measuring home practice adherence of mindfulness meditation using a custom monitoring software program. In the second iteration of the experiment, objective data were easily collected, uploaded, and viewed using the custom software application, iMINDr. Participants reported that iMINDr was straightforward to use, and they returned the monitoring units as directed. Researchers conclude that the iMINDr is an example of a simple objective adherence measurement system that may help mind—body researchers examine how home practice adherence may affect outcomes in future clinical trials.

Yesilada, Erdem. 2011. Contribution of traditional medicine in the healthcare system of the Middle East. *Chinese Journal of Integrative Medicine* 17(2). 95-98. doi:10.1007/s11655-011-0651-0.

The author describes Unani medicine, set up by the Islamic physicians in the Middle East about a thousand years ago based on the teachings of Hippocrates and Galen. This medical system had been practiced widespread in the world including Europe until the 16th century and contributed greatly to the development of modern medicine. Traditional practitioners have become the main component of disease management in the Middle East and they have used herbal remedies along with spiritual techniques for the treatment of ailments mainly based on the Unani medicine.

Young, Laura A. 2011. Mindfulness meditation: a primer for rheumatologists. *Rheumatic Diseases Clinics of North America* 37(1). 63-75. doi:10.1016/j.rdc.2010.11.010.

This review provides the practicing rheumatologist with an overview of mindfulness and how it can be applied to Western medical treatment plans to enhance both the medical and psychological care of patients.



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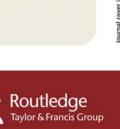
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#### PART 3. BOOKS

#### 3.1 SCIENTIFIC STUDY OF RELIGION, BRAIN, AND BEHAVIOR

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