



RESEARCH REVIEW

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

MAY, 2014

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 religion using biocultural techniques. *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, ATLA Religion Database, General Science, PubMed, EBSCO Psychology and Behavioral Sciences Collection, PsycARTICLES, PsycINFO, ScienceDirect, and Web of Science. The search terms were altruism, god, goddess, meditat*, prayer, relig*, ritual, 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 661 articles, 69 articles have been retained from 51 journals. There are 66 pre-publication citations from 43 journals.

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PART 1: ARTICLES IN RELIGION, BRAIN, AND BEHAVIOR

1.1 SCIENTIFIC STUDY OF RELIGION: COGNITIVE NEUROSCIENCE

Lewis, Gary J., Ryota Kanai, Geraint Rees & Timothy C. Bates. 2014. Neural correlates of the “good life”: eudaimonic well-being is associated with insular cortex volume. *Social Cognitive and Affective Neuroscience* 9(5). 615–618.
doi:10.1093/scan/nst032.

Eudaimonic well-being reflects traits concerned with personal growth, self-acceptance, purpose in life and autonomy, among others, and is a substantial predictor of life events, including health. Although interest in the aetiology of eudaimonic well-being has blossomed in recent years, little is known of the underlying neural substrates of this construct. To address this gap in knowledge, here researchers examined whether regional gray matter (GM) volume was associated with eudaimonic well-being. Structural magnetic resonance images from 70 young, healthy adults who also completed Ryff's 42-item measure of the six core facets of eudaimonia, were analysed with voxel-based morphometry techniques. It was found that eudaimonic well-being was positively associated with right insular cortex GM volume. This association was also reflected in three of the sub-scales of eudaimonia: personal growth, positive relations and purpose in life. Positive relations also showed a significant association with left insula volume. No other significant associations were observed, although personal growth was marginally associated with left insula, and purpose in life exhibited a marginally significant negative association with middle temporal gyrus GM volume. These findings are the first to link eudaimonic well-being with regional brain structure.

Lu, H, Y Song, M Xu, X Wang, X Li & J Liu. 2014. The brain structure correlates of individual differences in trait mindfulness: A voxel-based morphometry study. *Neuroscience* 272C. 21–28.
doi:10.1016/j.neuroscience.2014.04.051.

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Mindfulness is the state of being attentive to and aware of what is taking place in the present, which is beneficial for reducing stress-related symptoms and improving mental and physical health. Previous studies have demonstrated that meditation practice can improve individuals' mindfulness through modifying functions and structures of multiple brain regions, including the anterior cingulate cortex (ACC), insula, fronto-limbic network, posterior cingulate cortex (PCC), and temporal-parietal junction. However, little is known about the neuroanatomical correlates of trait mindfulness. In the current study, researchers used voxel-based morphometry to investigate the neural correlates of individual differences in trait mindfulness by correlating the gray matter (GM) volume of each voxel across the whole brain with trait mindfulness measured by the Mindful Attention Awareness Scale in a large sample of young adults (n=247). It was found that individuals who were more mindful of the present had greater GM volume in the right hippocampus/amygdala and bilateral ACC, but less GM volume in bilateral PCC and the left orbitofrontal cortex. These results suggest that trait mindfulness is associated with brain regions involved in executive attention, emotion regulation, and self-referential processing, through which mindfulness may exert its beneficial effects on psychological and physical well-being.

Milz, Patricia, Pascal L. Faber, Dietrich Lehmann, Kieko Kochi & Roberto D. Pascual-Marqui. 2014. sLORETA intracortical lagged coherence during breath counting in meditation-naïve participants. *Frontiers in Human Neuroscience* 8. 303.
doi:10.3389/fnhum.2014.00303.

Researchers investigated brain functional connectivity comparing no-task resting to breath counting (a meditation exercise but given as task without referring to meditation). Functional connectivity computed as EEG coherence between head-surface data suffers from localization ambiguity, reference dependence, and overestimation due to volume conduction. Lagged coherence between intracortical model sources addresses these criticisms. With this analysis approach, experienced meditators reportedly showed reduced coherence during meditation, meditation-naïve participants have not yet been investigated. 58-channel EEG from 23 healthy, right-handed, meditation-naïve males during resting (3 runs) and breath counting (2 runs) was computed into sLORETA time series of intracortical electrical activity in 19 regions of interest corresponding to the cortex underlying 19 scalp electrode sites, for each of the eight independent EEG frequency bands covering 1.5-44 Hz. Intracortical lagged coherences and head-surface conventional coherences were computed between the 19 regions/sites. During breath counting compared to resting, paired t-tests corrected for multiple testing revealed four significantly lower intracortical lagged coherences, but four significantly higher head-surface conventional coherences. Lowered intracortical lagged coherences involved left BA 10 and right BAs 3, 10, 17, 40. In conclusion, intracortical lagged coherence can yield results that are inverted to those of head-surface conventional coherence. The lowered functional connectivity between cognitive control areas and sensory perception areas during meditation-type breath counting compared to resting conceivably reflects the attention to a bodily percept without cognitive reasoning. The reductions in functional connectivity were similar but not as widespread as the reductions reported during meditation in experienced meditators.

Pulcu, Erdem, Roland Zahn, Jorge Moll, Paula D. Trotter, Emma J. Thomas, Gabriella Juhasz, J. F. William Deakin, Ian M. Anderson, Barbara J. Sahakian & Rebecca Elliott. 2014. Enhanced subgenual cingulate response to altruistic decisions in remitted major depressive disorder. *NeuroImage: Clinical* 4. 701–710.
doi:10.1016/j.nicl.2014.04.010.

Major depressive disorder (MDD) is associated with functional abnormalities in fronto-meso-limbic networks contributing to decision-making, affective and reward processing impairments. Such functional disturbances may underlie a tendency for enhanced altruism driven by empathy-based guilt observed in some patients. However, despite the relevance of altruistic decisions to understanding vulnerability, as well as everyday psychosocial functioning, in MDD, their functional neuroanatomy is unknown. In this study, researchers used a charitable donations experiment with fMRI, comparing 14 medication-free participants with fully remitted MDD and 15

demographically-matched control participants without MDD. Compared with the control group, the remitted MDD group exhibited enhanced BOLD response in a septal/subgenual cingulate cortex (sgACC) region for charitable donation relative to receiving simple rewards and higher striatum activation for both charitable donation and simple reward relative to a low level baseline. The groups did not differ in demographics, frequency of donations or response times, demonstrating only a difference in neural architecture. The authors conclude that altruistic decisions probe residual sgACC hypersensitivity in MDD even after symptoms are fully remitted. The sgACC has previously been shown to be associated with guilt which promotes altruistic decisions. In contrast, the striatum showed common activation to both simple and altruistic rewards and could be involved in the so-called “warm glow” of donation. Enhanced neural response in the depression group, in areas previously linked to altruistic decisions, supports the hypothesis of a possible association between hyper-altruism and depression vulnerability, as shown by recent epidemiological studies.

1.2 SCIENTIFIC STUDY OF RELIGION: EVOLUTION

Oudenhoven, Jan Pieter van, Boele de Raad, Marieke E Timmerman, Françoise Askevis-Leherpeux, Pawel Boski, Carmen Carmona, Rajneesh Choubisa, et al. 2014. Are virtues national, supranational, or universal? *SpringerPlus* 3. 223.
doi:10.1186/2193-1801-3-223.

Many studies investigated cultural differences in values, most notably by Hofstede and Schwarz. Relatively few have focused on virtues, a related and important concept in contemporary social science. The present paper examines the similarities and differences between nations, or blocks of culturally related nations, on the perceived importance of virtues. Adults (n=2,809 students) from 14 countries were asked to freely mention which virtues they found important to practice in daily life, and next to rate a list of 15 virtues, which reflect the most frequently mentioned categories in The Netherlands, as found in a previous study. The 14 nations included the United States, Mexico, nine European and three Asian nations. For the free-listed virtues, researchers compared the top-ten lists of most frequently mentioned virtues across the nations. They then used a correspondence analysis on the frequency table to assess the relationships between the virtues and nations. For the 15 virtues ratings, a MANOVA and follow-up ANOVAs were used to examine effects of nation, age, gender and religion. Strong evidence for relationships between nations and blocks of culturally related nations and the importance attached to various virtues were found. There appear to be some country specific virtues, such as generosity in France, but also some relatively universal virtues, most notably honesty, respect, and kindness.

1.3 SCIENTIFIC STUDY OF RELIGION: PSYCHOLOGY AND CULTURE

Barber, Justin. 2014. Believing in a Purpose of Events: Cross-Cultural Evidence of Confusions in Core Knowledge. *Applied Cognitive Psychology* 28(3). 432–437.
doi:10.1002/acp.3003.

Researchers examined beliefs in the purpose of events in the American population. Previously, separate researchers surveyed these beliefs in the Finnish population. Their methodology was used to assess the beliefs in a dissimilar demographic. Four hypotheses were tested using questionnaire responses (n=429), and analyzed with structural equation modeling. As hypothesized, a positive correlation was found between beliefs in the purpose of events and paranormal beliefs. Confusions of core biological, physical, and psychological knowledge predicted the belief variables as hypothesized, although model fit was mediocre. Core knowledge confusions were also hypothesized to predict religiousness and purposeful-event beliefs. A close-fitting model displayed weak predictive power and was interpreted as insufficient support for the third hypothesis. Lastly, researchers hypothesized and found that participants rated events they experienced as more purposeful than events that they did not experience.

Baxamusa, Mufaddal & Abu Jalal. 2014. Does religion affect capital structure? *Research in International Business and Finance* 31. 112–131.
doi:10.1016/j.ribaf.2013.09.003.

Researchers hypothesized that if the cultural characteristics of a region are important, then firms located in Protestant- and Catholic-majority counties within the U.S. will have different attitude toward leverage. It was found that a 1% increase in a county's Protestant religiosity leads to a 0.4% lower leverage and less frequent debt issuances. This religiosity also has significant effect on the firms' adjustment speeds toward the target capital structure. Using a sample of international firms, researchers find that these differences in leverage in the U.S. are similar to the behavior of firms in Catholic and Protestant countries outside of the U.S.

Davis, Don E., Daryl R. Van Tongeren, Joshua N. Hook, Edward B. Davis, Everett L. Jr. Worthington & Stephanie Foxman. 2014. Relational spirituality and forgiveness: Appraisals that may hinder forgiveness. *Psychology of Religion and Spirituality* 6(2). 102–112.

In three studies, researchers focused on negative spiritual appraisals theorized to hinder forgiveness: being angry toward God, viewing the transgression as a desecration, or viewing the offender as evil. Because the latter construct did not have an existing measure, the first two studies describe exploratory (Study 1; n=200) and confirmatory (Study 2; n=300) factor analyses of the Viewing the Offender as Evil (VOE) scale. Then, in Study 3 (n=425), researchers found that (a) all three negative appraisals of relational spirituality were related to greater unforgiveness, (b) viewing the offender as evil uniquely predicted unforgiveness after controlling for covariates, and (c) empathy partially mediated the relationship between viewing the offender as evil and unforgiveness. Although religious and spiritual factors can promote forgiveness, these studies highlight the ways in which they hinder forgiveness.

Greer, Chelsea L., Everett L. Jr. Worthington, Daryl R. Van Tongeren, Aubrey L. Gartner, David J. II Jennings, Yin Lin, Caroline Lavelock, Todd W. Greer & Man Yee Ho. 2014. Forgiveness of in-group offenders in Christian congregations. *Psychology of Religion and Spirituality* 6(2). 150–161.

Religious communities, as other communities, are ripe for interpersonal offenses. Researchers examined the degree to which group identification predicted forgiveness of an in-group offender. Researchers examined the effects of a victim's perception of his or her religious group identification as a state-specific personal variable on forgiveness by integrating social identity theory into a model of relational spirituality to help explain victim's responses to transgressions within a religious context. Data were collected from members of Christian congregations from the Midwest region of the United States (Study 1, n=63), and college students belonging to Christian congregations (Study 2, n=376). Regression analyses demonstrated that even after statistically controlling for many religious and transgression-related variables, group identification with a congregation still predicted variance in revenge and benevolence toward an in-group offender after a transgression. In addition, mediation analyses suggest group identification as one mechanism through which trait forgivingness relates to forgiveness of specific offenses. Researchers discuss the importance of group identity in forgiving other in-group members in a religious community.

Hayati, Elli N., Maria Emmelin & Malin Eriksson. 2014. "Researchers no longer live in the old days": a qualitative study on the role of masculinity and religion for men's views on violence within marriage in rural Java, Indonesia. *BMC Womens Health* 14. 58.
doi:10.1186/1472-6874-14-58.

Previous studies on domestic violence in Indonesia have focused primarily on women's experiences and little research has been undertaken to understand men's views on domestic violence or their involvement in the prevention of domestic violence. This study aimed to explore men's views on masculinity and the use of violence within marriage, in order to gain knowledge on how to involve men in prevention of domestic violence in rural Indonesia. Focus group discussions with six groups of local male community leaders in Purworejo were conducted. The

discussions were transcribed and coded for the construction of a positional map on different masculinities and their relation to the level of acceptance of domestic violence. Results indicate that social and cultural changes have played a crucial role in transforming the relationship between men and women in Indonesian society. Three different positions of masculinity with certain beliefs on the gender order and acceptance of violence within marriage were identified: the traditionalist, the pragmatist, and the egalitarian. The traditionalist had the highest acceptance of violence as a tool to uphold the superior position of men within marriage, while the pragmatist viewed violence as undesirable but sometimes needed in order to correct the wife's behavior. The egalitarian did not see any reason for violence because they believed that men and women are equal and complementary to each other. The authors conclude that adaptation to social and cultural changes, combined with lack of exposures to contextual and progressive religious teachings, has led to the formation of three different positions of masculinity among the population in this study. Each position has certain beliefs regarding the gender order and the use of violence within marriage.

Heiphetz, Larisa, Elizabeth S. Spelke, Paul L. Harris & Mahzarin R. Banaji. 2014. What do different beliefs tell us? An examination of factual, opinion-based, and religious beliefs. *Cognitive Development* 30. 15–29.

doi:10.1016/j.cogdev.2013.12.002.

Children and adults differentiate statements of religious belief from statements of fact and opinion, but the basis of that differentiation remains unclear. Across three experiments, adults and 8–10-year-old children heard statements of factual, opinion-based, and religious belief. Adults and children judged that statements of factual belief revealed more about the world, statements of opinion revealed more about individuals, and statements of religious belief provided information about both. Children, unlike adults, judged that statements of religious belief revealed more about the world than the believer. These results led to three conclusions. First, judgments concerning the relative amount of information statements of religious belief provide about individuals change across development, perhaps because adults have more experience with diversity. Second, recognizing that statements of religious belief provide information about both the world and the believer does not require protracted learning. Third, statements of religious belief are interpreted as amalgams of factual and opinion-based statements.

Negru, Oana, Cosmina Haragâș & Anca Mustea. 2014. How private is the relation with God? Religiosity and family religious socialization in Romanian emerging adults. *Journal of Adolescent Research* 29(3). 380–406.

This qualitative study explores the dynamics of religious cognitions, behaviors, and emotions in emerging adult discourse in a sample of Romanian youth of heterogeneous socioeconomic, denominational (Orthodox Christian, Roman Catholic, Neo-protestant), and educational background. Also, from a parent-child dyad perspective, researchers investigate the role of family religious socialization when children have reached emerging adulthood. Findings bring forward personal conceptualizations of religiosity and specific strategies of religious exploration the youth employ. In addition, family religious socialization is portrayed through the lens of the autonomy-support parents provide their offspring from childhood to emerging adulthood. Emerging adults tend to integrate childhood family religious socialization into the context of their lifelong religious development and also report more present-day parental influence than their parents.

Pennycook, Gordon, James Allan Cheyne, Nathaniel Barr, Derek J. Koehler & Jonathan A. Fugelsang. 2014. The role of analytic thinking in moral judgements and values. *Thinking & Reasoning* 20(2). 188–214.

doi:10.1080/13546783.2013.865000.

While individual differences in the willingness and ability to engage analytic processing have long informed research in reasoning and decision making, the implications of such differences have not yet had a strong influence in other domains of psychological research. Researchers claim that analytic thinking is not limited to problems that have a

normative basis and, as an extension of this, predict that individual differences in analytic thinking will be influential in determining beliefs and values. Along with assessments of cognitive ability and style, religious beliefs, and moral values, participants judged the wrongness of acts considered disgusting and conventionally immoral, but that do not violate care- or fairness-based moral principles. Differences in willingness to engage in analytic thinking predicted reduced judgments of wrongness, independent of demographics, political ideology, religiosity, and moral values. Further, researchers show that those who were higher in cognitive ability were less likely to indicate that purity, patriotism, and respect for traditions and authority are important to their moral thinking. These findings are consistent with a “Reflectionist” view that assumes a role for analytic thought in determining substantive, deeply-held human beliefs and values.

Peterman, Jeremy S., Denise R. LaBelle & Laurence Steinberg. 2014. Devoutly anxious: The relationship between anxiety and religiosity in adolescence. *Psychology of Religion and Spirituality* 6(2). 113–122.

The present study examined specific religious variables (e.g., religious service attendance, importance of faith) as predictors of anxiety in adolescents. Participants included a subsample of the National Institute for Child Health and Human Development (NICHD) Study of Early Child Care (n=952; 48.3% female; 76.6% Caucasian). Youth completed religiosity measures in early adolescence (6th grade; ages 11–12) and in mid-adolescence (age 15); parents reported on youth religiosity in 5th grade (ages 10–11). Anxiety measures of youth were completed by parents in early adolescence and by youth in mid-adolescence. Results demonstrated a modest positive association between religious service attendance/youth group participation and anxiety in mid-adolescence. Time spent in weekday evening religious activities in early adolescence modestly predicted greater anxiety in mid-adolescence. Finally, youth who increased in religious service attendance experienced greater anxiety in mid-adolescence. The relation was mediated by self-reported guilt.

Salas-Wright, Christopher P., Michael G. Vaughn & Brandy R. Maynard. 2014. Religiosity and violence among adolescents in the United States: Findings from the National Survey on Drug Use and Health 2006–2010. *Journal of Interpersonal Violence* 29(7). 1178–1200.
doi:10.1177/0886260513506279.

There is a pressing need to develop a more nuanced understanding of the relationships between particular expressions of religiosity and the various manifestations of violence among youth. This study examines these relationships among adolescents in the general population as well as across racial/ethnic, gender, and family income differences. Using a nationally representative sample of adolescents (n=90,202) from the National Survey on Drug Use and Health (2006–2010), logistic regression is used to examine the relationships between religiosity and violence. Results indicate that multiple components of adolescent religiosity are associated with the decreased likelihood of fighting, group fighting, and, to a lesser extent, violent attacks. A number of noteworthy differences were identified across race/ethnicity, gender, and family income. Findings from this investigation shed light on the relationship between particular facets of religiosity and violence that may be useful for violence prevention organizations seeking to integrate religious components into intervention efforts.

Schnitker, Sarah A., Thomas J. Felke, Justin L. Barrett & Robert A. Emmons. 2014. Longitudinal study of religious and spiritual transformation in adolescents attending young life summer camp: Assessing the epistemic, intrapsychic, and moral sociability functions of conversion. *Psychology of Religion and Spirituality* 6(2). 83–93.

The psychological study of conversion has long been concerned with the functionality of conversion, or the ability of religious and spiritual transformation to foster positive change in people’s lives. The epistemic, intrapsychic, and moral sociability functions of transformation were tested in a sample of adolescents attending religious summer camp. Participants completed measures of epistemic, intrapsychic, and moral sociability functioning before and one year following camp, which provided pre- and post-transformation assessment of functioning. Participants also

completed a short survey immediately following camp to assess if they had a transformation at camp. Adolescents attending camp reported a high incidence (33%) of a religious transformation at camp. Transformation predicted positive change in moral sociability and intrapsychic functioning the year following camp. An increase in epistemic functioning was not predicted by religious or spiritual transformation, but participation in Young Life activities significantly predicted of an increase in epistemic functioning.

Shenberger, Jessica M., Brandt A. Smith & Michael A. Zárate. 2014. The effect of religious imagery in a risk-taking paradigm. *Peace and Conflict: Journal of Peace Psychology* 20(2). 150–158.

The drug cartel violence occurring at the U.S.–Mexico border requires an investigation of the social and cultural factors that influence risky behaviors. The current study tested to what extent religious imagery leads individuals to follow suggestions for increased risk-taking behaviors. Researchers used culturally relevant religious imagery primes and nonreligious imagery primes and measured the extent to which individuals followed a confederate's suggestions to engage in risky behaviors on a lab-based risk task. As predicted, the effect of confederate suggestions led to greater risk taking in the religious imagery condition than in the nonreligious imagery condition. The current study demonstrates that when individuals are exposed to religious concepts, they are more susceptible to the influence of others to engage in risky behaviors.

Sillick, Warren J. & Stuart Cathcart. 2014. The relationship between religious orientation and happiness: The mediating role of purpose in life. *Mental Health, Religion & Culture* 17(5). 494–507.

Studies have demonstrated a positive association between religiosity and happiness and that other variables including purpose in life may account for this relationship. Few studies have examined the relationship between religious orientation and happiness, therefore the present study investigated whether purpose in life mediates the relationship between religious orientation and happiness. University students (n=342; 225 women) from Australia participated in the study. The results indicate that for women, purpose in life mediates the relationship between intrinsic religious orientation and happiness and for men, purpose in life mediates the relationship between extrinsic social religious orientation and happiness. The results were unexpected as intrinsic religious orientation negatively predicted happiness, whereas extrinsic social religious orientation positively predicted happiness.

Young, Sean D, Abbas Shakiba, Justin Kwok & Mohammad Sadegh Montazeri. 2014. The influence of social networking technologies on female religious veil-wearing behavior in Iran. *Cyberpsychology, behavior and social networking* 17(5). 317–321.
doi:10.1089/cyber.2013.0338.

Social networking technologies can influence attitudes, behaviors, and social norms. Research on this topic has been conducted primarily among early adopters of technology and within the United States. However, it is important to evaluate how social media might affect people's behaviors in international settings, especially among countries with longstanding, government recommended, cultural and religious traditions and behaviors, such as Iran. This study seeks to assess whether Iranian women who have been using social networking technologies for a longer time (compared to those who have recently joined) would be less likely to cover themselves with a veil and be more comfortable publicly displaying pictures of this behavior on Facebook. Iranian females (n=253) were selected through snowball sampling from nongovernmental organizations in November 2011 and asked to complete a survey assessing their use of Facebook, concerns about not wearing a veil in Facebook pictures, and their actual likelihood of wearing a veil. Items were combined to measure lack of interest in wearing a veil. Length of time as a Facebook user was significantly associated with not wearing a veil, controlling for age, education, and frequency of using Facebook. Results also revealed a significant relationship such that older people were more likely to adhere to the religious behavior of wearing a veil.

1.4 SCIENTIFIC STUDY OF RELIGION: METHOD & THEORY

Piña-Watson, Brandy, Linda G. Castillo, Eunju Jung, Lizette Ojeda & Rosalinda Castillo-Reyes. 2014. The Marianismo Beliefs Scale: Validation with Mexican American adolescent girls and boys. *Journal of Latina/o Psychology* 2(2). 113–130.

Gender roles are a basic organizing feature in Latina/o families, in which female and male gender roles are clearly defined and are captured by the constructs of marianismo and machismo, respectively. Latina/o adolescents are socialized to Latina/o culture's gender role beliefs and expectations; however, research tends to be limited to its respective gender (e.g., studies of marianismo focusing only on women). The present study seeks to validate and explore gender differences in the Marianismo Beliefs Scale (MBS; Castillo et al., 2010) with both Mexican American adolescent boys and girls. Participants were 524 Mexican American adolescents in a mid-sized South Texas city. A categorical confirmatory factor analysis (CCFA) was performed to test the factor structure and measurement invariance across gender. Results of the CCFA provided a modified 5-factor version of the MBS: the Marianismo Beliefs Scale–Adolescent Version (MBSA). Cross-group mean comparisons indicate that girls endorsed higher levels of family pillar and spiritual pillar beliefs, whereas the boys scored significantly higher on beliefs that Latinas should self-silence to maintain harmony and should be subordinate to others. No gender differences were present for beliefs on Latinas being virtuous and chaste.

PART 2: ARTICLES IN SPIRITUALITY & HEALTH RESEARCH

2.1 SPIRITUALITY & HEALTH: GENERAL HEALTH & WELL-BEING

Bower, Julianne E., Gail Greendale, Alexandra D. Crosswell, Deborah Garet, Beth Sternlieb, Patricia A. Ganz, Michael R. Irwin, Richard Olmstead, Jesusa Arevalo & Steve W. Cole. 2014. Yoga reduces inflammatory signaling in fatigued breast cancer survivors: A randomized controlled trial. *Psychoneuroendocrinology* 43. 20–29.
doi:10.1016/j.psyneuen.2014.01.019.

This study tested the hypothesis that an Iyengar yoga intervention specifically designed for fatigued breast cancer survivors would lead to decreases in inflammation-related gene expression and circulating markers of proinflammatory cytokine activity. Breast cancer survivors with persistent cancer-related fatigue were randomized to a 12-week Iyengar yoga intervention (n=16) or a 12-week health education control condition (n=15). Blood samples were collected at baseline, post-intervention, and at a 3-month follow-up for genome-wide transcriptional profiling and bioinformatic analyses. Plasma inflammatory markers and salivary cortisol were also assessed. In promoter-based bioinformatics analyses, the yoga group showed reduced activity of the pro-inflammatory transcription factor nuclear factor kappa B (NF-kappa B), increased activity of the anti-inflammatory glucocorticoid receptor, and reduced activity of CAMP response element-binding protein (CREB) family transcription factors relative to controls. There was also a significant intervention effect on the soluble tumor necrosis factor receptor type II (sTNE-R11), a marker of TNF activity; plasma levels of sTNE-R11 remained stable in the yoga group, whereas levels of this marker increased in the health education group. A similar, non-significant trend was observed for the interleukin 1 receptor antagonist. No significant changes in C reactive protein (CRP), interleukin 6 (IL-6), or diurnal cortisol measures were observed.

Cramer, Holger, Romy Lauche, Heidemarie Haller, Nico Steckhan, Andreas Michalsen & Gustav Dobos. 2014. Effects of yoga on cardiovascular disease risk factors: A systematic review and meta-analysis. *International Journal of Cardiology* 173(2). 170–183.
doi:10.1016/j.ijcard.2014.02.017.

The aim of this review was to systematically assess and meta-analyze the effects of yoga on modifiable biological cardiovascular disease risk factors in the general population and in high-risk disease groups. Forty-four RCTs with a total of 3168 participants were included. Risk of bias was high or unclear for most RCTs. Relative to usual care or no intervention, yoga improved: systolic and diastolic blood pressure; heart rate; respiratory rate; waist circumference; waist/hip ratio; total cholesterol; HDL; VLDL; triglycerides; HbA1c; and insulin resistance. Relative to exercise, yoga improved HDL. The authors conclude that this meta-analysis revealed evidence for clinically important effects of yoga on most biological cardiovascular disease risk factors, and thus despite the methodological drawbacks of the included studies, yoga can be considered as an ancillary intervention for the general population and for patients with increased risk of cardiovascular disease.

Fish, J. A., K. Ettridge, G. R. Sharplin, B. Hancock & V. E. Knott. 2014. Mindfulness-based Cancer Stress Management: Impact of a mindfulness-based programme on psychological distress and quality of life. *European Journal of Cancer Care* 23(3). 413–421.
doi:10.1111/ecc.12136.

This study explores the impact of a Mindfulness-Based Cancer Stress Management program (MBCSM) on psychological distress and quality of life. Research methodology included a single-group quasi-experimental study of 26 participants experiencing distress related to a cancer diagnosis, including care providers, who completed an MBCSM program and all assessments. Participants completed the Functional Assessment of Cancer Therapy–General version 4 (FACT-G) and its associated spirituality index (FACT-Sp-Ex), Hospital Anxiety and

Depression Scale (HADS), Freiburg Mindfulness Inventory (FMI), and the Distress Thermometer, at baseline, post-intervention, and three months after program completion. Significant improvements were observed on all measures following the intervention, which were maintained at 3-month follow-up. Mindfulness was significantly correlated with all main outcome measures at post-intervention and 3-month follow-up, providing evidence for the internal validity of the study.

- Greeson, Jeffrey M., Michael K. Juberg, Margaret Maytan, Kiera James & Holly Rogers. 2014. A Randomized Controlled Trial of Koru: A Mindfulness Program for College Students and Other Emerging Adults. *Journal of American College Health* 62(4). 222–233.
doi:10.1080/07448481.2014.887571.

This study, a randomized controlled trial, evaluated the effectiveness of Koru, a mindfulness training program for college students and other emerging adults. Participants were 90 students who participated between Fall 2012 and Spring 2013. It was hypothesized that Koru, compared with a wait-list control group, would reduce perceived stress and sleep problems, and increase mindfulness, self-compassion, and gratitude. Following intervention, as hypothesized, results showed significant Group (Koru, Wait-List) × Time (Pre, Post) interactions for improvements in perceived stress, sleep problems, mindfulness, and self-compassion. All significant effects were replicated in the wait-list group. Significant correlations were observed among changes in perceived stress, sleep problems, mindfulness, and self-compassion.

- Halpern, Jonathan, Marc Cohen, Gerard Kennedy, John Reece, Clement Cahan & Armanda Baharav. 2014. Yoga for Improving Sleep Quality and Quality of Life for Older Adults. *Alternative Therapies in Health & Medicine* 20(3). 37–46.

In this study, the research team aimed to (1) examine the efficacy of a yoga intervention (YI) for the treatment of insomnia in older adults, (2) determine the ability of yoga to enhance the QoL of older adults, and (3) establish the applicability of yoga practice for older people in a Western cultural setting. Participants were older men and women (age ≥ 60 y) with insomnia. The YI group participated in 12 wk of classes, held 2 × /wk, incorporating yoga postures, meditative yoga, and daily home practice of meditative yoga. Following intervention, compared with controls, the YI group showed significant improvements in a range of subjective factors, including overall sleep quality; sleep efficiency; sleep latency and duration; self-assessed sleep quality; fatigue; general well-being; depression; anxiety; stress; tension; anger; vitality; and function in physical, emotional, and social roles.

- Kanaya, Alka M., Maria Rosario G. Araneta, Sarah B. Pawlowsky, Elizabeth Barrett-Connor, Deborah Grady, Eric Vittinghoff, Michael Schembri, et al. 2014. Restorative yoga and metabolic risk factors: The Practicing Restorative Yoga vs. Stretching for the Metabolic Syndrome (PRYSMS) randomized trial. *Journal of Diabetes and Its Complications* 28(3). 406–412.
doi:10.1016/j.jdiacomp.2013.12.001.

Researchers conducted a 48-week randomized trial comparing restorative yoga vs. stretching among underactive adults with the metabolic syndrome. Researchers provided lifestyle counseling and a tapering series of 90-min group classes in the 24-week intervention period and 24-week maintenance period. 180 participants were randomized and 135 (75%) completed the trial. At the 12 month mark, fasting glucose decreased more in the yoga group than in the stretching group; there were no other significant differences between groups. At 6 months favorable changes within the yoga group included reductions in fasting glucose, insulin, and HbA1c and an increase in HDL-cholesterol that were not sustained at 1 year except changes in fasting glucose. The stretching group had a significant reduction in triglycerides at 6 months which was not sustained at 1 year but had improved quality of life at both time-points.

Kim-Spoon, Jungmeen, Julee P. Farley, Christopher Holmes, Gregory S. Longo & Michael E. McCullough. 2014. Processes linking parents' and adolescents' religiousness and adolescent substance use: Monitoring and self-control. *Journal of Youth and Adolescence* 43(5). 745–756.

Empirical evidence suggests that religiousness is related negatively to adolescent substance use, but researchers know little about how such protective effects might occur. The current study examined whether parents' and adolescents' religiousness are associated positively with parental, religious, and self-monitoring, which in turn are related to higher self-control, thereby related to lower adolescent substance use. Participants were 220 adolescents (45 % female) who were interviewed at ages 10–16 and again 2.4 years later. Structural equation modeling analyses suggested that higher adolescents' religiousness at Time 1 was related to lower substance use at Time 2 indirectly through religious monitoring, self-monitoring, and self-control. Higher parents' religiousness at Time 1 was associated with higher parental monitoring at Time 2, which in turn was related to lower adolescent substance use at Time 2 directly and indirectly through higher adolescent self-control. The results illustrate that adolescents with high awareness of being monitored by God are likely to show high self-control abilities and, consequently, low substance use. The findings further suggest that adolescents' religiousness as well as their religious environments (e.g., familial context) can facilitate desirable developmental outcomes.

Landry, Jayan Marie. 2014. Physiological and psychological effects of a Himalayan singing bowl in meditation practice: a quantitative analysis. *American journal of health promotion: AJHP* 28(5). 306–309.
doi:10.4278/ajhp.121031-ARB-528.

Fifty-one participants completed two randomly assigned sessions beginning with either 12 minutes of a Himalayan singing bowl (HSB) or silence, followed by a 20-minute directed relaxation (DR) session. Following intervention, there was a greater decline in systolic BP and HR with HSB compared to silence prior to DR. Changes in diastolic BP were greater with HSB, with a nonsignificant trend. Hypertensive subjects (n=20) had similar and significant BP changes with HSB and silence when compared to normotensive subjects (n=31). PANAS scores fell significantly with both interventions.

Mackenzie, Michael J, Linda E Carlson, David M Paskevich, Panteleimon Ekkekakis, Amanda J Wurz, Kathryn Wytsma, Katie A Krenz, Edward McAuley & S Nicole Culos-Reed. 2014. Associations between attention, affect and cardiac activity in a single yoga session for female cancer survivors: An enactive neurophenomenology-based approach. *Consciousness and Cognition* 27C. 129–146.
doi:10.1016/j.concog.2014.04.005.

Yoga practice is reported to lead to improvements in quality of life, psychological functioning, and symptom indices in cancer survivors. Importantly, meditative states experienced within yoga practice are correlated to neurophysiological systems that moderate both focus of attention and affective valence. The current study used a mixed methods approach based in neurophenomenology to investigate associations between attention, affect, and cardiac activity during a single yoga session for female cancer survivors. Yoga practice was associated with a linear increase in associative attention and positive affective valence, while shifts in cardiac activity were related to the intensity of each yoga sequence. Changes in attention and affect were predicted by concurrently assessed cardiac activity. Awareness of breathing, physical movement, and increased relaxation were reported by participants as potential mechanisms for yoga's salutary effects. While yoga practice shares commonalities with exercise and relaxation training, yoga may serve primarily as a promising meditative attention-affect regulation training methodology.

Martin, Andi Celine & Melanie R. Keats. 2014. The Impact of Yoga on Quality of Life and Psychological Distress in Caregivers for Patients With Cancer. *Oncology Nursing Forum* 41(3). 257–264.

doi:10.1188/14.ONF.257-264.

In this study, 12 caregivers for patients with cancer participated in a six-week Vinyasa yoga (VY) intervention and completed measures of QOL and psychological distress pre- and postintervention. Significant improvements were found in the mental component score of overall QOL and in overall psychological distress. Several subdomains of QOL and psychological distress were also improved significantly. Open-ended survey question responses revealed that participants perceived physical and mental benefit from the intervention, highlighting improvements in flexibility, core and upper-body strength, balance, breathing, and energy.

Oakley, Sarah & Elinor Evans. 2014. The role of yoga: breathing, meditation and optimal fetal positioning. *The Practising Midwife* 17(5). 30–32.

In this article researchers look at yogic breathing and meditation techniques for midwives to recommend to expectant mothers, and some postures that specifically help to encourage an optimal fetal position.

Prakhinkit, Susaree, Siriluck Suppapatiporn, Hirofumi Tanaka & Daroonwan Suksom. 2014. Effects of Buddhism walking meditation on depression, functional fitness, and endothelium-dependent vasodilation in depressed elderly. *Journal of Alternative and Complementary Medicine (New York, N.Y.)* 20(5). 411–416.

doi:10.1089/acm.2013.0205.

The objectives of this study were to determine the effects of the novel Buddhism-based walking meditation (BWM) and the traditional walking exercise (TWE) on depression, functional fitness, and vascular reactivity. Forty-five elderly participants aged 60-90 years with mild-to-moderate depressive symptoms were randomly allocated to the sedentary control, TWE, and BWM groups. The BWM program was based on aerobic walking exercise incorporating the Buddhist meditations performed 3 times/week for 12 weeks. Muscle strength, flexibility, agility, dynamic balance, and cardiorespiratory endurance increased in both exercise groups. Depression score decreased only in the BWM group. FMD improved in both exercise groups. Significant reduction in plasma cholesterol, triglyceride, high-density lipoprotein cholesterol, and C-reactive protein were found in both exercise groups, whereas low-density lipoprotein cholesterol, cortisol, and interleukin-6 concentrations decreased only in the BWM group.

Valoriani, Vania, Francesco Lotti, Claudia Vanni, Maria-Chiara Noci, Nicolas Fontanarosa, Gabriella Ferrari, Cinzia Cozzi & Ivo Noci. 2014. Hatha-yoga as a psychological adjuvant for women undergoing IVF: a pilot study. *European Journal of Obstetrics & Gynecology and Reproductive Biology* 176. 158–162.

doi:10.1016/j.ejogrb.2014.02.007.

This article evaluates the influence of Hatha-yoga (HY) practice on distress of women before starting their first in vitro fertilization (IVF) cycle. Researchers offered 143 consecutive women with couple infertility the opportunity to attend a free HY course lasting 3 months as a psychological support before starting their first IVF cycle. All women were asked to complete the State-Trait Anxiety Inventory-Y1 (STAY-Y1), Edinburgh Depression Scale (EDS) and General Health Questionnaire-12 (GHQ-12) at baseline (T1) and after 3 months (T2), to evaluate symptoms of anxiety, depression and distress, respectively. Of the 143 women, 120 completed all three questionnaires. Of these, 45 attended the HY course and 75 did not. At T1, EDS and GHQ-12 scores were significantly higher in the HY group than in the non-HY group. There were no group differences in STAI-Y1 scores. At T2 there were no group differences. When, in each group, the score of each questionnaire at T1 was compared to the score at T2, a significant T1 to T2 reduction was observed in the HY group. The authors conclude that women who are more distressed are more likely to accept psychological support before starting an IVF cycle and that in these women HY practice is associated with distress reduction.

Vance, Todd, Hermine H. Maes & Kenneth S. Kendler. 2014. A Multivariate Twin Study of the Dimensions of Religiosity and Common Psychiatric and Substance Use Disorders. *Journal of Nervous and Mental Disease* 202(5). 360–367.
doi:10.1097/NMD.0000000000000131.

The authors sought to decompose the covariance between seven dimensions of religiosity and two internalizing psychiatric disorders (major depression and phobia) and two externalizing substance use disorders (alcohol dependence and nicotine dependence). Significant negative correlations, accounted for by shared additive genetic effects, were found between alcohol dependence and six of the seven religiosity factors. Additive genetic effects accounted for significant negative correlations between nicotine dependence and one religiosity factor, social religiosity, and between phobia and unvengefulness. Common environmental effects accounted for a significant positive correlation between phobia and the factor God as judge. No statistically significant covariance due to genetic or environmental effects was found for major depression and any of the seven religiosity factors. Overall, although several statistically significant bivariate relationships were found, the estimates of covariance due to additive genetic effects were modest.

Vilalta, Aleix, Joan Valls, Josep Porta & Juan Viñas. 2014. Evaluation of spiritual needs of patients with advanced cancer in a palliative care unit. *Journal of palliative medicine* 17(5). 592–600.
doi:10.1089/jpm.2013.0569.

Researchers evaluated the spiritual needs of 50 patients diagnosed with advanced and terminal cancer by the palliative care unit of a hospital in Barcelona, Spain. A questionnaire was used which included 28 items selected from a review of the literature; the responses were analyzed using a five-point Likert scale. The results were grouped in 11 categories corresponding to different spiritual needs. Two spiritual needs emerged as the most relevant for the patients: their need to be recognized as a person until the end of their life and their need to know the truth about their illness. The least important spiritual needs were identified as those: for continuity and an afterlife; to get rid of obsessions; to achieve freedom from blame and to be able to forgive others; and the need for reconciliation and to feel forgiven by others. These results suggest that patients receiving palliative care wish to live for the present with as much normality as possible and show only minor concern for their past and future.

Watt, Melissa H, Sarah M Wilson, Mercykutty Joseph, Gileard Masenga, Jessica C MacFarlane, Olola Oneko & Kathleen J Sikkema. 2014. Religious coping among women with obstetric fistula in Tanzania. *Global public health* 9(5). 516–527.
doi:10.1080/17441692.2014.903988.

This study aimed to examine religious coping among 54 women with obstetric fistulae in Tanzania. Forty-five women also completed individual in-depth interviews where religion was discussed. Although participants utilized positive religious coping strategies more frequently than negative strategies, 76% reported at least one form of negative religious coping. In univariate analysis, negative religious coping was associated with stigma, depression and low social support. In multivariate analysis, only depression remained significant, explaining 42% of the variance in coping. Qualitative data confirmed reliance upon religion to deal with fistula-related distress, and suggested that negative forms of religious coping may be an expression of depressive symptoms. Results suggest that negative religious coping could reflect cognitive distortions and negative emotionality, characteristic of depression.

2.2 SPIRITUALITY & HEALTH: MENTAL HEALTH

Akotia, Charity Sylvia, Birthe Loa Knizek, Eugene Kinyanda & Heidi Hjelmeland. 2014. “I have sinned”: Understanding the role of religion in the experiences of suicide attempters in Ghana. *Mental Health, Religion & Culture* 17(5). 437–448.

This qualitative study examined the role played by religion in the experiences of persons who attempted suicide in Ghana. Twelve men and 18 women on admission at various hospitals and clinics in Accra were interviewed. Interpretative Phenomenological Analysis was used to analyze the data. Researchers found that religion provided a broad context within which the informants' experiences could be understood. All informants acknowledged God as owner of life and death. Whereas the majority reacted to the suicidal act in a way that resonates with their religious system and sought for forgiveness from God, a few reacted in opposition to the system and expressed anger and disappointment in God.

- Bershadsky, Svetlana, Linda Trumppheller, Holly Beck Kimble, Diana Pipaloff & Ilona S. Yim. 2014. The effect of prenatal Hatha yoga on affect, cortisol and depressive symptoms. *Complementary Therapies in Clinical Practice* 20(2). 106–113.
doi:10.1016/j.ctcp.2014.01.002.

Perinatal depression impacts maternal and child health, and little is known about effective interventions. The effects of prenatal Hatha yoga on cortisol, affect and depressive symptoms were investigated in 51 women. Twice during pregnancy, yoga group participants reported on affect and provided a saliva sample before and after a 90-min prenatal Hatha yoga session. Corresponding measures were obtained from yoga and control group participants on days of usual activity. Depressive symptoms were assessed in pregnancy and post-partum. Cortisol was lower and positive affect higher on yoga compared to usual activity days. Negative affect and contentment improved more in response to the yoga session. Yoga group participants showed fewer postpartum but not antepartum depressive symptoms than control group participants.

- Bottaccioli, Francesco, Antonia Carosella, Raffaella Cardone, Monica Mambelli, Marisa Cemin, Marcello M. D'Errico, Elisa Ponzio, Anna Giulia Bottaccioli & Andrea Minelli. 2014. Brief Training of Psychoneuroendocrinology-Based Meditation (PNEIMED) Reduces Stress Symptom Ratings and Improves Control on Salivary Cortisol Secretion Under Basal and Stimulated Conditions. *EXPLORE: The Journal of Science and Healing* 10(3). 170–179.
doi:10.1016/j.explore.2014.02.002.

Meditation is proposed as an anti-stress practice lowering allostatic load and promoting well-being, with brief formats providing some of the benefits of longer interventions. PsychoNeuroEndocrinoImmunology-based meditation (PNEIMED) combines the teaching of philosophy and practice of Buddhist meditation with a grounding in human physiology from a systemic and integrative perspective. Researchers evaluated the effects of four-day PNEIMED training (30 hours) on subjective and objective indices of stress in healthy adults. A non-randomized, controlled, before-and-after study was conducted. Participants (n=125) answered a questionnaire rating stress symptom before (T0) and after (Tf) a PNEIMED course. In an additional sample (n=40; smokers, overweight persons, women taking contraceptives, and subjects with oral pathologies were excluded), divided into PNEIMED-attending (intervention, n=21) and non-meditating (control, n=19) groups, salivary cortisol was measured upon awakening and during a challenging mental task. Self-rated distress scores were highly reduced after the PNEIMED course. In the intervention group, improvement of psychological well-being was accompanied by decrease in cortisol levels at awakening. No T0-vs-Tf changes in distress scores and morning cortisol were found in controls. Based on baseline-to-peak increment of cortisol response at T0, 26 subjects (n=13 for each group) were classified as task-responders. The amplitude and duration of the cortisol response decreased after PNEIMED, whereas no effects were found in controls.

- Gomi, Sachiko, Vincent R Starnino & Edward R Canda. 2014. Spiritual assessment in mental health recovery. *Community mental health journal* 50(4). 447–453.
doi:10.1007/s10597-013-9653-z.

Mental health recovery-oriented and strengths model proponents recognize spirituality to be a key aspect of the recovery process. In order to incorporate spirituality in practice, practitioners need to know how to conduct spiritual

assessment effectively. Although implicit and explicit spiritual assessment approaches have been identified as useful frameworks for conducting spiritual assessment, there is a gap in knowledge about what constitutes effective approaches and questions for addressing spirituality in the lives of people with psychiatric disabilities. To address this gap, focus group interviews were conducted with providers and consumers of mental health services in order to develop practical guidance for spiritual assessment. Focus group participants provided feedback about a list of sample spiritual assessment questions and then suggested principles and questions for practitioners to use. Collective insights from the focus groups formed the basis for recommendations for spiritual assessment.

Good, Marie & Teena Willoughby. 2014. Institutional and personal spirituality/religiosity and psychosocial adjustment in adolescence: Concurrent and longitudinal associations. *Journal of Youth and Adolescence* 43(5). 757–774.
doi:10.1007/s10964-013-9989-2.

Spirituality/religiosity is hypothesized to promote positive adjustment among adolescents. The goals of this study were to assess the unique and joint associations between two dimensions of spirituality/religiosity—institutional and personal—and a range of domains of psychosocial adjustment (intrapersonal well-being, quality of parent–child relationship, substance use, and academic orientation) and to evaluate the direction of effects in these associations. Participants included 803 predominately Canadian-born adolescents (53% female) from Ontario, Canada, who completed a survey in grade 11 and grade 12. At the concurrent level, higher personal spirituality/religiosity consistently and uniquely predicted more positive adjustment in terms of well-being, parental relationship, and academic orientation. Higher institutional spirituality/religiosity uniquely and consistently predicted lower substance use, particularly when personal spirituality/religiosity also was high. With regard to the direction of effects (i.e., longitudinal associations), institutional spirituality/religiosity predicted lower future substance use. The results imply that the personal and institutional dimensions of spirituality/religiosity may be associated differentially with psychosocial adjustment, and it may be only in the domain of substance use that spirituality/religiosity predicts change in behavior over time.

Hirsch, Jameson K., Jon R. Webb & Nadine J. Kaslow. 2014. Daily hassles and suicide ideation in African-American female suicide attempters: Moderating effect of spiritual well-being. *Mental Health, Religion & Culture* 17(5). 529–541.

Suicide risk is increased for previous suicide attempters, who may be vulnerable to exacerbating factors such as daily hassles, yet individual-level, adaptive characteristics may ameliorate risk. Researchers examined the influence of daily hassles on suicidal ideation and the moderating role of spiritual well-being and its subscales of religious and existential wellbeing. In this cross-sectional study, 148 African-American female suicide attempters were recruited from a large, urban hospital and completed the Survey of Recent Life Events, Spiritual Well-Being Scale, and Beck Scale for Suicide Ideation. Religious and existential well-being moderated the association between hassles and suicidal thoughts; this relationship was weaker for individuals with greater levels of spiritual well-being. Historically, spiritual beliefs have been important to the African-American community and their promotion may effectively prevent additional thoughts of suicide by attempters experiencing hassles of daily life.

Judd, Katherine Ann & Brian Vandenberg. 2014. Effects of religious stigma and harm on perceived psychopathology. *Mental Health, Religion & Culture* 17(5). 508–519.

Prior research suggests that assessment of the pathology of religious beliefs is influenced by conventionality and harm, with less conventional and more harmful beliefs resulting in higher pathology ratings. This study, involving 313 participants, investigated levels of pathology assigned to religious beliefs when the beliefs were either helpful or less severely harmful than those used in prior research, and when the associated religion was either stigmatized (Islam) or non-stigmatized (Christianity). Results indicate that an attenuated form of harm results in elevated pathology ratings. Furthermore, religious stigma impacts these perceptions when beliefs are harmful but not when beliefs are helpful. Ratings in the harm condition were higher for Christianity than for Islam, suggesting that

perceived pathology of religious beliefs may depend less on general stigma assumptions and more on perceived consistency between harmful beliefs and assumed religious schemata.

Knabb, Joshua James & Anna Grigorian-Routon. 2014. The role of experiential avoidance in the relationship between faith maturity, religious coping, and psychological adjustment among Christian university students. *Mental Health, Religion & Culture* 17(5). 458–469.

In the current study, the authors investigated the relationship between faith maturity, religious coping, experiential avoidance (EA), and psychological maladjustment (depression, anxiety, and stress) among a sample of Christian college students (n=84). Findings revealed a strong positive correlation between faith maturity and positive religious coping, and weak negative correlations between faith maturity and negative religious coping and maladjustment. Moreover, a weak negative correlation emerged between positive religious coping and maladjustment, as well as a moderate positive correlation between negative religious coping and maladjustment. Finally, consistent with the proposed hypothesis, EA partially mediated the link between negative religious coping and psychological maladjustment, although EA played no mediating role with positive religious coping and maladjustment.

Krause, Neal & R. David Hayward. 2014. Religion, finding interests in life, and change in self-esteem during late life. *Research on Aging* 36(3). 364–381.

Research indicates that greater involvement in activities is essential for successful aging. The purpose of the current study is to examine a construct that motivates involvement in activities: finding interests in life. In the process, researchers also show how involvement in religion may help promote interests. In order to examine these issues, a conceptual model is tested that contains the following core hypotheses: (1) older people who go to church more often will be more likely to have stronger God-mediated control beliefs (i.e., the belief that God works together with people to resolve problems and reach desired goals); (2) older adults with a stronger sense of God-mediated control will be more likely to find things in life that are interesting; and (3) older individuals with more interests experience a greater sense of self-worth over time. Findings from a nationwide survey provide support for the key relationships described above.

Lanfredi, Mariangela, Valentina Candini, Chiara Buizza, Clarissa Ferrari, Maria E Boero, Gian M Giobbio, Nicoletta Goldschmidt, et al. 2014. The effect of service satisfaction and spiritual well-being on the quality of life of patients with schizophrenia. *Psychiatry Research* 216(2). 185–191. doi:10.1016/j.psychres.2014.01.045.

Quality of life (QOL) has been considered an important outcome measure in psychiatric research and determinants of QOL have been widely investigated. Researchers aimed at detecting predictors of QOL at baseline and at testing the longitudinal interrelations of the baseline predictors with QOL scores at a 1-year follow-up in a sample of patients living in Residential Facilities (RFs). Logistic regression models were adopted to evaluate the association between WHOQoL-Bref scores and potential determinants of QOL. In addition, all variables significantly associated with QOL domains in the final logistic regression model were included by using the Structural Equation Modeling (SEM). Researchers included 139 patients with a diagnosis of schizophrenia spectrum. In the final logistic regression model level of activity, social support, age, service satisfaction, spiritual well-being and symptoms' severity were identified as predictors of QOL scores at baseline. Longitudinal analyses carried out by SEM showed that 40% of QOL follow-up variability was explained by QOL at baseline, and significant indirect effects toward QOL at follow-up were found for satisfaction with services and for social support.

Lee, Grace P., Lilian A. Ghandour, Alaa H. Takache & Silvia S. Martins. 2014. Investigating the association between strategic and pathological gambling behaviors and substance use in youth: could religious faith play a differential role? *American Journal on Addictions* 23(3). 280–287. doi:10.1111/j.1521-0391.2014.12101.x.

This study investigated the link between gambling behaviors and the use of alcohol, drugs, and non-prescribed prescription medications, while exploring the moderating role of distinct religious faiths. In 2010, 570 students from the American University of Beirut completed a self-reported, anonymous English questionnaire, which included lifetime gambling and past-year substance use measures. Half (55%) were lifetime gamblers, of whom, 12% were probable pathological gamblers. About 60% were strategic gamblers. Lifetime gamblers were more than twice as likely as non-gamblers to report past-year illegal drug use and alcohol abuse. Probable pathological gamblers were also more than four times as likely as non-gamblers to report nonmedical prescription drug use, illegal drug use, and alcohol abuse. Compared to nonstrategic gamblers, strategic gamblers had more than three times the odds of illegal drug and cigarette use. The link between alcohol abuse and gambling was stronger among Christians than Muslims. Conversely, Muslims were more likely to report the co-occurrence of various gambling behaviors (lifetime, probable pathological, and strategic gambling) with both illegal drug use and cigarette use. The authors conclude that gambling and substance use behaviors were strongly linked in this sample of youth from Lebanon, corroborating the evidence from North America. Particularly novel are the co-occurrence of pathological gambling and nonmedical prescription drug use and the potential differential role of religion.

- Orme-Johnson, David W & Vernon A Barnes. 2014. Effects of the transcendental meditation technique on trait anxiety: A meta-analysis of randomized controlled trials. *Journal of Alternative and Complementary Medicine* 20(5). 330–341.
doi:10.1089/acm.2013.0204.

This meta-analysis of randomized controlled trials (RCTs) on the Transcendental Meditation (TM) technique updates previous meta-analyses and assesses the effects of initial anxiety level, age, duration of practice, regularity of practice, research quality, author affiliation, and type of control group on effect sizes. This systematic review of the literature used the Comprehensive Meta-Analysis (CMA) program for core analyses of effect sizes, bias analysis, meta-regression, and moderator variable analysis. Comprehensive literature searches included databases devoted to meditation research. More than 600 TM research papers were identified; 14 of these addressed trait anxiety and reported on 16 studies among 1,295 participants with diverse demographic characteristics. No adverse effects were reported. Overall, TM practice is more effective than treatment as usual and most alternative treatments, with greatest effects observed in individuals with high anxiety. More research is needed in this area, especially with high-anxiety patients, conducted under medically supervised conditions.

- Roh, Soonhee, Yeon-Shim Lee, Jae Hoon Lee & James I. Martin. 2014. Typology of religiosity/spirituality in relation to perceived health, depression, and life satisfaction among older Korean immigrants. *Aging & Mental Health* 18(4). 444–453.
doi:10.1080/13607863.2013.848837.

The objectives of this study were (1) to identify distinct subtypes of older Korean immigrants based on their levels of religiosity/spirituality (R/S) and (2) to determine if the identified subtypes differed by demographic characteristics, perceived health, depression, and life satisfaction. Method: Factor mixture models were evaluated with a nonprobability sample of older Korean immigrants (n=200) residing in the New York City area in 2009 to classify typologies of R/S. Multiple regression was used to test the associations between the R/S subtypes and outcomes (perceived health, depression, and life satisfaction) while controlling for demographics. Two substantively distinct latent profiles were identified: normally religious/spiritual ('average R/S') and minimally religious/spiritual ('low R/S'). The average R/S subgroup (74.4%) showed higher means than those in the low R/S subgroup (25.6%) on all six R/S class indicators. Subtypes did not differ on age, education, income, marital status, living arrangements, or years in the USA. However, males were more likely than females to be 'average R/S.' The 'average R/S' subtype had significantly greater life satisfaction than their 'low R/S' counterpart. No differences between the two subtypes were found on perceived health or depression. Findings highlight the importance of the classifications of R/S for mental health outcomes, and they indicate that relationships among R/S, various demographic characteristics, and physical/mental health are complex.

Sacco, Shane J., Crystal L. Park, D. P. Suresh & Deborah Bliss. 2014. Living with heart failure: Psychosocial resources, meaning, gratitude and well-being. *Heart & lung: the journal of critical care* 43(3). 213–218.

doi:10.1016/j.hrtlng.2014.01.012.

The present study explored the experiences of people living with advanced heart failure (HF) to determine the extent to which (1) psychosocial resources relevant to HF patients were qualitatively reported, and (2) to determine the extent to which psychosocial resources were correlates of subsequent well-being as assessed by validated quantitative measures. Participants (n=111) completed four open-ended questions to assess aspects of living with HF. Open-ended questions were coded to identify psychosocial resources: positive meaning, gratitude, religion/spirituality (R/S), social support, and medical resources. Data were collected once and then again 3 months later. Patients reported many psychosocial resources, particularly positive meaning, R/S, social support, and medical resources. Positive meaning and R/S were inversely linked with depressive symptoms. R/S was also related to less death anxiety, while social support was related to higher anxiety about death three months later.

Shaku, Fumio, Madoka Tsutsumi, Hideyoshi Goto & Denise Saint Arnoult. 2014. Measuring the effects of Zen training on quality of life and mental health among Japanese monk trainees: a cross-sectional study. *Journal of Alternative and Complementary Medicine* 20(5). 406–410.

doi:10.1089/acm.2013.0209.

This article reports on a study that examined how rigorous professional training affected the International Quality of Life (QOL) Assessment Short Form-36 (SF-36) and General Health Questionnaire-28 (GHQ-28) scores of Zen trainees in Japanese monasteries. The study was conducted in Rinzai Zen monasteries. Anonymous and confidential surveys containing the SF-36 and GHQ-28 were distributed by mail, and 256 questionnaires were collected from Rinzai Zen monasteries. One hundred ninety-eight complete questionnaires were collected and the participants were divided according to their training length: group I (<1 year), group II (1-3 years), and group III (≥3 years). The SF-36 seven subscale scores (physical functioning, role-physical, body pain, general health, vitality, role-emotional, and mental health) of the longer-length training group were significantly higher compared to other groups. The SF-36 MCS (mental component summary) score among the groups were significantly different, and the scores of group III were significantly higher compared to the scores of group I. Furthermore, the GHQ-28 total and subscales (somatization, anxiety, social dysfunction, and depression) scores of longer-length training were significantly lower (better). The authors conclude that Zen professional training, including inward-attention practices, improves the QOL and general mental health of trainees, even in a tough and distressing environment. However, detailed qualitative and longitudinal studies are required to fully assess these effects.

Shonin, Edo, William Van Gordon & Mark D. Griffiths. 2014. The Treatment of Workaholism With Meditation Awareness Training: A Case Study. *EXPLORE: The Journal of Science and Healing* 10(3). 193–195.

doi:10.1016/j.explore.2014.02.004.

Research into the clinical utility of Buddhist-derived interventions (BDIs) has increased greatly over the last decade. Although clinical interest has predominantly focused on mindfulness meditation, there also has been an increase in the scientific investigation of interventions that integrate other Buddhist principles such as compassion, loving kindness, and “non-self.” However, due to the rapidity at which Buddhism has been assimilated into the mental health setting, issues relating to the misapplication of Buddhist terms and practices have sometimes arisen. Indeed, hitherto, there has been no unified system for the effective clinical operationalization of Buddhist principles. Therefore, this paper aims to establish robust foundations for the ongoing clinical implementation of Buddhist principles by providing: (i) succinct and accurate interpretations of Buddhist terms and principles that have become embedded into the clinical practice literature, (ii) an overview of current directions in the clinical operationalization of BDIs, and (iii) an assessment of BDI clinical integration issues. It is concluded that BDIs may be effective

treatments for a variety of psychopathologies including mood-spectrum disorders, substance-use disorders, and schizophrenia.

- Strauss, Clara, Kate Cavanagh, Annie Oliver & Danelle Pettman. 2014. Mindfulness-Based Interventions for People Diagnosed with a Current Episode of an Anxiety or Depressive Disorder: A Meta-Analysis of Randomised Controlled Trials. *Plos One* 9(4). e96110. doi:10.1371/journal.pone.0096110.

Objective: Mindfulness-based interventions (MBIs) can reduce risk of depressive relapse for people with a history of recurrent depression who are currently well. However, the cognitive, affective and motivational features of depression and anxiety might render MBIs ineffective for people experiencing current symptoms. This paper presents a meta-analysis of randomised controlled trials (RCTs) of MBIs where participants met diagnostic criteria for a current episode of an anxiety or depressive disorder. Method: Post-intervention between-group Hedges g effect sizes were calculated using a random effects model. Moderator analyses of primary diagnosis, intervention type and control condition were conducted and publication bias was assessed. Results: Twelve studies met inclusion criteria (n=578). There were significant post-intervention between-group benefits of MBIs relative to control conditions on primary symptom severity. Effects were demonstrated for depressive symptom severity, but not for anxiety symptom severity, for RCTs with an inactive control, but not where there was an active control and effects were found for MBCT but not for MBSR.

- Taku, Kanako & Arnie Cann. 2014. Cross-national and religious relationships with posttraumatic growth: The role of individual differences and perceptions of the triggering event. *Journal of Cross-Cultural Psychology* 45(4). 601–617.

Posttraumatic growth (PTG), which is positive changes experienced as a result of psychological struggle with highly challenging life circumstances, generally correlates with greater religiosity and optimism, and often shows gender and cross-national differences. The current study examined the relationship of national background and religion with PTG, as well as individual differences variables (i.e., optimism, pessimism, and gender) and individuals' appraisal or perceptions of the event (i.e., whether the event was perceived as having a direct or indirect impact, and whether the event was perceived as deliberate or accidental). American and Japanese college students identified a highly stressful life event and completed the PTG Inventory and the revised Life Orientation Test. Results showed that national background and religiosity (religious affiliation and strengths of religious beliefs) predicted the level of overall PTG. In addition to the national and religious associations, gender and optimism had positive associations with PTG. The role of individual differences variables and perceptions of the triggering event varied cross-nationally across the PTG domains.

- Williamson, W. Paul & Ralph W. Hood, Jr. 2014. Religious fundamentalism and perceived threat: A report from an experimental study. *Mental Health, Religion & Culture* 17(5). 520–528.

This study investigated the experimental effect of threat on religious fundamentalism (RF) and the tendency towards reprisal. Researchers presented 102 Christians with one of three scenarios, involving the hire of a Christian biologist, evolution biologist, or a (neutral) communications expert as professor at their university, and also the subsequent sanctioning of his speeding violation. Moderated multiple regression analyses of Christian/evolutionist data found that low RF endorsed the evolutionist and high RF endorsed the Christian; further, participants levied a higher court fine on the speeding evolutionist, regardless of RF. Analyses of Christian/neutral data found that low RF discriminated in favour of the neutral candidate, whereas high RF did not discriminate between candidates; also, low RF sanctioned the neutral candidate with a speeding ticket, while high RF sanctioned the Christian. Overall findings indicated that fundamentalists were not necessarily aggressive or punitive and that they reacted no different from non-fundamentalists when values were threatened.

2.3 SPIRITUALITY & HEALTH: METHOD AND THEORY

Ando, Michiyo, Yukihiro Sakaguchi, Yasufumi Shiihara & Kumi Izuhara. 2014. Universality of Bereavement Life Review for Spirituality and Depression in Bereaved Families. *American Journal of Hospice & Palliative Medicine* 31(3). 327–330.
doi:10.1177/1049909113488928.

The present study aimed to investigate the effects of the Bereavement Life Review on depression and spiritual well-being of bereaved families in a setting that does not specialize in palliative care. The participants were 20 bereaved family members who underwent the Bereavement Life Review over 2 sessions in 2 weeks. Beck Depression Inventory Second Edition scores significantly decreased and Functional Assessment Chronic Illness Therapy-Spiritual scores increased from pre- to post-intervention. These results show that the Bereavement Life Review can decrease depression and improve spiritual well-being of bereaved families after the death of a family member in a setting without specialized palliative care. The results also suggest the universality of this therapy.

Best, Megan, Phyllis Butow & Ian Olver. 2014. Spiritual support of cancer patients and the role of the doctor. *Supportive Care in Cancer* 22(5). 1333–1339.
doi:10.1007/s00520-013-2091-1.

Spiritual care is reported as important for cancer patients, but the role of the doctor in its provision is unclear. Researchers undertook to understand the nature of spiritual support for Australian cancer patients and their preferences regarding spiritual care from doctors. Using grounded theory, semi-structured interviews were conducted with 15 cancer patients with advanced disease in a variety of care settings. Patients were asked about the source of their spiritual support and how they would like their doctors to engage with them on spiritual issues. Three themes were identified as follows: (1) sources of spiritual support which helped patients cope with illness and meet spiritual needs, (2) facilitators of spiritual support, and (3) role of the doctor in spiritual support. Regardless of religious background, the majority of patients wanted their doctor to ask about their source of spiritual support and facilitate access to it. Patients did not want spiritual guidance from their doctors, but wanted to be treated holistically and to have a good relationship, which allowed them to discuss their fears. Doctors' understanding of the spiritual dimension of the patient was part of this.

Dose, Ann Marie, Barbara Leonard, Cynthia Peden McAlpine & Mary Jo Kreitzer. 2014. The Meaning of Spirituality at the End of Life. *Journal of Hospice & Palliative Nursing* 16(3). 158–164.
doi:10.1097/NJH.0000000000000041.

Spirituality has been described as one of the most important components of end-of-life care, yet there is limited research on the description of spirituality from those experiencing it at end of life. The aims of this study were to describe and interpret the lived experience of spirituality at the end of life among adults receiving hospice care and describe and interpret how these individuals' remembered experiences of spirituality across the life span shape the meaning and experience of spirituality at the end of life. In this qualitative, phenomenological study, participants completed lifelines of their spiritual journeys throughout their lifetimes at study entry. One to 2 days later, they participated in a taped, unstructured interview, where they discussed their spirituality lifelines and described their current experiences of spirituality. Additional interviews were requested from participants. Eleven Midwest hospice patients participated. The lived experience of spirituality at the end of life was described within the context of spirituality lived throughout one's life, as particularly manifested through themes of Connectedness, Spiritual Life Moments, Pick Up the Pieces and Move On, and Religion Matters. Spirituality remains a highly individualized concept and needs individualized assessment and interventions at end of life.

Granero-Molina, J., M. M. Diaz Cortes, J. Marquez Membrive, A. M. Castro-Sanchez, O. M. Lopez Entrambasaguas & C. Fernandez-Sola. 2014. Religious faith in coping with terminal cancer: What is the nursing experience? *European Journal of Cancer Care* 23(3). 300–309.

doi:10.1111/ecc.12150.

This qualitative study describes nurses' reports on the role played by religious faith in the care of patients with terminal cancer. Using Gadamer's philosophical hermeneutics and C. Roy's adaptation model as a base, in-depth interviews were carried out with 23 nurses who had cared for patients with terminal cancer for at least 6 months. Three main themes emerged when a Gadamerian-based hermeneutic research method was applied: faith facilitates the coping process in cases of terminal cancer, faith hinders the coping process in cases of terminal cancer and terminal illness impacts faith. The lack of univocal results indicates that the role of faith in coping with death is essentially practical, individualized and changeable. The nurse-patient relationship can help to determine the spiritual needs of cancer patients at the end of life.

Hess, Ka Yan & Elelwani Ramugondo. 2014. Clinical reasoning used by occupational therapists to determine the nature of spiritual occupations in relation to psychiatric pathology. *British Journal of Occupational Therapy* 77(5). 234–242.
doi:10.4276/030802214X13990455043449.

In this exploratory study, the clinical reasoning process followed by occupational therapists in determining whether their clients' spiritual occupations were health promoting or manifestations of a psychiatric illness is described. A qualitative multiple case study design was used. Five occupational therapists working in different mental health care settings were interviewed using semi-structured interviews. Review of relevant documents and field-notes also provided important data sources. Three themes emerged from thematic analysis, namely 'Clinical Reasoning: complex, dynamic and multi-layered'; 'Multiple resources: people as key'; and 'Rewarding and challenging experience'. 'Underground practice' emerged as a strategy that helped participants to navigate around contextual barriers in order to ensure client-centredness when addressing spiritual occupational needs within a mental healthcare setting. Spiritual occupational engagements should be examined in conjunction with individual clients' own process of meaning-making, implications for health to the client and others within the healthcare setting, and by taking the broader occupational narrative of the person, as well as relevant cultural norms and expectations, into consideration.

Hodge, David R, Fei Sun & Robert J Wolosin. 2014. Hospitalized Asian patients and their spiritual needs: developing a model of spiritual care. *Journal of aging and health* 26(3). 380–400.
doi:10.1177/0898264313516995.

A paucity of research has examined the relationship between addressing the spiritual needs of hospitalized Asians and their overall satisfaction with service provision. This study examined this relationship, in tandem with the effects of eight potential mediators, to develop a model of spiritual care for older hospitalized Asians. Structural equation modeling was used with a national sample of Asians (n=805), age 50 and above, who were consecutively discharged from hospitals over a 12-month period. The relationship between spiritual needs and satisfaction was fully mediated by five variables: nurses, physicians, the discharge process, visitors, and the admissions process.

Lasebikan, Victor Olufolahan & George Ladokun Lasebikan. 2014. Prophecy or schizophrenia: A comparative study of psychopathology and quality of life of "prophets" and schizophrenia patients. *Mental Health, Religion & Culture* 17(5). 449–457.

Previous literature has suggested certain similarities between prophets and psychotics. The main aim of this study was to compare the prevalence and profile of psychopathologies and quality of life among psychotics and selected "prophets" in a Nigerian population. The study design was a comparative study. Profile of psychopathologies and quality of life were examined among 168 schizophrenia patients and prophets. Compared with the prophets, schizophrenia patients were younger, less educated, with family histories of psychosis, past history of psychosis, unmarried and unemployed, and reported more psychopathologies. Quality of life in the physical health domain

was lower in the schizophrenia group. Six percent of prophets had schizophrenia. Schizophrenia patients and prophets seem two independent but interwoven groups.

McDonald, Claire, Craig Murray & Heather Atkin. 2014. Palliative-care professionals' experiences of unusual spiritual phenomena at the end of life. *Mental Health, Religion & Culture* 17(5). 479–493.

Research literature has highlighted unusual phenomena occurring at the end of life. Palliative-care professionals often feel ill-prepared in managing these and in talking to patients and family members about them. This study aimed to explore the meanings and interpretations ascribed to these phenomena by palliative-care professionals. Eight participants were interviewed, and interpretative phenomenological analysis used to identify themes within their accounts. Four themes emerged from the analysis: (1) Who are researchers to say what's out there?: a connection with something beyond what can be seen; (2) It opened up conversations: the experience of talking about unusual experiences; (3) It knocked me sideways: managing the emotional impact of these experiences; and (4) The fact that she was so accepting made it easier: the value of acceptance in relation to unusual experiences.

Nilsson, Håkan. 2014. A four-dimensional model of mindfulness and its implications for health. *Psychology of Religion and Spirituality* 6(2). 162–174.

This article introduces a four-field model of mindfulness training and discusses its implications for health. Through the pioneering work of Kabat-Zinn and others, a vast amount of research has been conducted regarding both physical and mental mindfulness; as such, it is generally these two dimensions that are relied upon for intervention by health care professionals. While certainly a sign of progress, this article proposes that the essential next step in mindfulness training is to involve the less known social and existential dimensions as well. Indeed, it is herein argued that the addition of these two fields can serve to enhance the theory of resilience, the general promotion of human health, and the specific practice of mindfulness, especially as it relates to both group and meaning-of-life contexts. It is further argued that a more nuanced understanding of physical (a Western notion) and spiritual (an Eastern notion) mindfulness can be obtained by examining the interconnectedness of all four fields. The aim is to open the way toward a more broad, holistic, and altruistic approach to the practice of mindfulness as well as to encourage further research along these potentially productive lines.

Pidgeon, Aileen M., Lucas Ford & Frances Klaassen. 2014. Evaluating the effectiveness of enhancing resilience in human service professionals using a retreat-based Mindfulness with Metta Training Program: A randomised control trial. *Psychology Health & Medicine* 19(3). 355–364. doi:10.1080/13548506.2013.806815.

This paper explores the feasibility of a brief Mindfulness with Metta Training Program (MMTP), targeting the enhancement of mindfulness and self-compassion in a retreat format, as a means of increasing resilience in human services professionals. In this randomized control trial, 44 human services professionals were randomly allocated either to a MMTP retreat group or to a control group. Following the MMTP intervention, no significant differences between the retreat and control groups were found on resilience, mindfulness and self-compassion variables. However, significant improvements were observed over time for the retreat group for mindfulness and self-compassion at one and four months and for resilience at four-months post MMTP intervention. The results of this pilot study show that MMTP in a retreat format is a promising method of increasing resilience, mindfulness and self-compassion in human services professionals.

Ross, Linda, Rene van Leeuwen, Donia Baldacchino, Tove Giske, Wilfred McSherry, Aru Narayanasamy, Carmel Downes, Paul Jarvis & Annemiek Schep-Akkerman. 2014. Student nurses perceptions of spirituality and competence in delivering spiritual care: A European pilot study. *Nurse Education Today* 34(5). 697–702. doi:10.1016/j.nedt.2013.09.014.

Spiritual care is expected of nurses, but it is not clear how undergraduates can achieve competency in spiritual care at point of registration as required by nursing/midwifery regulatory bodies. To describe undergraduate nurses'/midwives' perceptions of spirituality/spiritual care, their perceived competence in delivering spiritual care, and to test out the proposed method and suitability of measures for a larger multinational follow-on study. Author administered questionnaires were completed by 86% of the intended convenience sample of 618 undergraduate nurses/midwives from 6 universities in 4 European countries in 2010. Results indicate that students held a broad view of spirituality/spiritual care and considered themselves to be marginally more competent than not in spiritual care. They were predominantly Christian and reported high levels of spiritual wellbeing and spiritual attitude and involvement. The proposed method and measures were appropriate and are being used in a follow-on study. The following are worthy of further investigation: whether the pilot study findings hold in student samples from more diverse cultural backgrounds; whether students' perceptions of spirituality can be broadened to include the full range of spiritual needs patients may encounter and whether their competence can be enhanced by education to better equip them to deliver spiritual care; identification of factors contributing to acquisition of spiritual caring skills and spiritual care competency.

Shonin, Edo, William Van Gordon & Mark D. Griffiths. 2014. The emerging role of Buddhism in clinical psychology: Toward effective integration. *Psychology of Religion and Spirituality* 6(2). 123–137.

Research into the clinical utility of Buddhist-derived interventions (BDIs) has increased greatly over the last decade. Although clinical interest has predominantly focused on mindfulness meditation, there also has been an increase in the scientific investigation of interventions that integrate other Buddhist principles such as compassion, loving kindness, and “non-self.” However, due to the rapidity at which Buddhism has been assimilated into the mental health setting, issues relating to the misapplication of Buddhist terms and practices have sometimes arisen. Indeed, hitherto, there has been no unified system for the effective clinical operationalization of Buddhist principles. Therefore, this paper aims to establish robust foundations for the ongoing clinical implementation of Buddhist principles by providing: (i) succinct and accurate interpretations of Buddhist terms and principles that have become embedded into the clinical practice literature, (ii) an overview of current directions in the clinical operationalization of BDIs, and (iii) an assessment of BDI clinical integration issues. It is concluded that BDIs may be effective treatments for a variety of psychopathologies including mood-spectrum disorders, substance-use disorders, and schizophrenia. However, further research and clinical evaluation is required to strengthen the evidence-base for existent interventions and for establishing new treatment applications. More important, there is a need for greater dialogue between Buddhist teachers and mental health clinicians and researchers to safeguard the ethical values, efficacy, and credibility of BDIs.

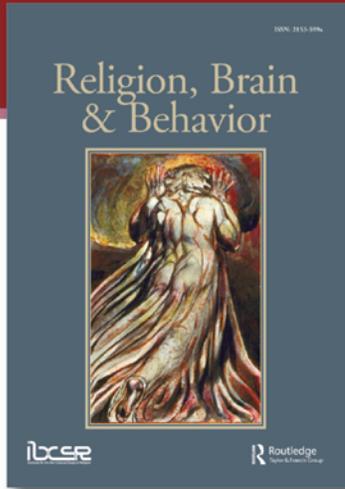
Sibinga, Erica M. S., Carisa Perry-Parrish, Katherine Thorpe, Marissa Mika & Jonathan M. Ellen. 2014. A Small Mixed-Method RCT of Mindfulness Instruction For Urban Youth. *EXPLORE: The Journal of Science and Healing* 10(3). 180–186.
doi:10.1016/j.explore.2014.02.006.

Researchers aimed to explore the specific effects of mindfulness-based stress reduction (MBSR) for urban youth by comparing it with an active control program, designed to control for time, positive peer-group experience, and positive adult instructor. Patients between the ages of 13–21 years who received primary pediatric care at our urban outpatient clinic were eligible for study participation. Those who were interested were consented and randomly assigned to an eight-week program of MBSR or Healthy Topics (HT), a health education curriculum. To increase sensitivity to outcomes of interest, mixed methods were used to assess psychological symptoms, coping, and program experience. Analysis of variance and regression modeling were used; interviews were audio-taped, transcribed, and coded for key themes. A total of 43 (26 MBSR, 17 HT) youths attended one or more sessions, of whom 35 [20 MBSR (77%), 15 HT (88%)] attended the majority of the sessions and were considered completers. Program completers were African American, 80% female, with average age of 15.0 years. Statistical

analysis of survey data did not identify significant post-program differences between groups. Qualitative data show comparable positive experiences in both programs, but specific differences related to MBSR participants' use of mindfulness techniques to calm down and avoid conflicts, as well as descriptions of internal processes and self-regulation. Compared with an active control program, MBSR did not result in statistically significant differences in self-reported survey outcomes of interest but was associated with qualitative outcomes of increased calm, conflict avoidance, self-awareness, and self-regulation for urban youths. Importantly, based on qualitative results, the HT program functioned as an effective active control for MBSR in this sample, facilitating a more rigorous methodological approach to MBSR research in this population. Researchers believe the promising effects elucidated in the qualitative data have the potential for positive affective and behavioral outcomes.

Zernicke, Kristin A., Tavis S. Campbell, Michael Specia, Kelley McCabe-Ruff, Steven Flowers & Linda E. Carlson. 2014. A randomized wait-list controlled trial of feasibility and efficacy of an online mindfulness-based cancer recovery program: the eTherapy for cancer applying mindfulness trial. *Psychosomatic Medicine* 76(4). 257–267.
doi:10.1097/PSY.000000000000053.0

A treatment-as-usual randomized wait-list controlled trial was conducted to investigate the feasibility and impact of an online synchronous Mindfulness-Based Cancer Recovery (MBCR) group program for underserved distressed cancer survivors. Sixty-two men and women exhibiting moderate to high distress within 3 years of completing primary cancer treatment without access to in-person MBCR were randomized to either immediate online MBCR (n=30) or to wait for the next available program (n=32). Participants completed questionnaires pre-intervention and post-intervention or wait period online. Program evaluations were completed after MBCR. Feasibility was tracked through monitoring eligibility and participation through the protocol. Intent-to-treat mixed-model analyses for repeated measures were conducted. Feasibility targets for recruitment and retention were achieved, and participants were satisfied and would recommend online MBCR. There were significant improvements and moderate Cohen d effect sizes in the online MBCR group relative to controls after MBCR for total scores of mood disturbance, stress symptoms, spirituality, and mindfully acting with awareness. Main effects of time were observed for posttraumatic growth and remaining mindfulness facets. The results provide evidence for the feasibility and efficacy of an online adaptation of MBCR for the reduction of mood disturbance and stress symptoms, as well as an increase in spirituality and mindfully acting with awareness compared with a treatment-as-usual wait-list.



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PART 3: BOOKS

3.1 SCIENTIFIC STUDY OF RELIGION, BRAIN, AND BEHAVIOR

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