

RESEARCH REVIEW

A DIGEST OF NEW SCIENTIFIC RESEARCH CONCERNING RELIGION, BRAIN & BEHAVIOR APRIL, 2015

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: H. W. Wilson Applied Science and Technology, ATLA Religion Database, H. W. Wilson 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 916 articles, 120 articles have been retained from 65 journals. There are 45 pre-publication citations from 33 journals.

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PART 1: ARTICLES IN RELIGION, BRAIN, AND BEHAVIOR

1.1 SCIENTIFIC STUDY OF RELIGION: COGNITIVE NEUROSCIENCE

Jo, Han-Gue, Thilo Hinterberger, Marc Wittmann & Stefan Schmidt. 2015. Do meditators have higher awareness of their intentions to act? *Cortex* 65. 149–158. doi:10.1016/j.cortex.2014.12.015.

Intuitively, heing aware of one's inner processes to move should be crucial for the control of voluntary movements. However, research findings suggest that we are not always aware of the processes leading to movement execution. The present study investigated induced first-person access to inner processes of movement initiation and the underlying brain activities which contribute to the emergence of voluntary movement. Moreover, researchers investigated differences in task performance between mindfulness meditators and non-meditators while assuming that meditators are more experienced in attending to their inner processes. Two Libet-type tasks were performed: one in which participants were asked to press a button at a moment of their own decision, and the other in which participants' attention was directed towards their inner processes of decision making regarding the intended movement which lead them to press the button. Meditators revealed a consistent readiness potential (RP) between the two tasks with correlations between the subjective intention time to act and the slope of the early RP. However, non-meditators did not show this consistency. Instead, elicited introspection of inner processes of movement initiation changed early brain activity that is related to voluntary movement processes. These findings suggest that compared to non-meditators, meditators are more able to access the emergence of negative deflections of slow cortical potentials (SCPs), which could have fundamental effects on initiating a voluntary movement with awareness.

Laker, Matthew K. 2015. Religious experiences and mind-brain sciences in the 21st century. *Activitas Nervosa Superior* 57(1). 34–41.

The classical work by William James in context of current ideas in religion and modern psychology points to the difference between a "moralist" and a religious or mystical understanding. James described that specific psychological

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Calendar year memberships US\$45 Discounts for retirees and students mechanisms related to religious experience ("re-unification") are compensatory influences on divided consciousness or heterogeneous self, which is determined by a conflict between moral and immoral behavior symbolized by a personified evil as for example the "Satan." According to recent findings there is not widely accepted evidence about specific neural mechanisms of these processes related to psychological integration and re-unification. Nevertheless recent findings indicate very specific and significant influences of these specific experiences related to meditation on brain functions and morphology.

Tang, Yi-Yuan, Britta K. Hölzel & Michael I. Posner. 2015. The neuroscience of mindfulness meditation. *Nature Reviews. Neuroscience* 16(4). 213–225. doi:10.1038/nrn3916.

Research over the past two decades broadly supports the claim that mindfulness meditation, which has been practiced widely for the reduction of stress and promotion of health, exerts beneficial effects on physical and mental health, and cognitive performance. Recent neuroimaging studies have begun to uncover the brain areas and networks that mediate these positive effects. However, the underlying neural mechanisms remain unclear, and it is apparent that more methodologically rigorous studies are required if we are to gain a full understanding of the neuronal and molecular bases of the changes in the brain that accompany mindfulness meditation.

1.2 SCIENTIFIC STUDY OF RELIGION: EVOLUTION

Clobert, Magali, Vassilis Saroglou & Kwang-Kuo Hwang. 2015. Buddhist concepts as implicitly reducing prejudice and increasing prosociality. *Personality & Social Psychology Bulletin* 41(4). 513–525. doi:10.1177/0146167215571094.

Does Buddhism really promote tolerance? Based on cross-cultural and cross-religious evidence, researchers hypothesized that Buddhist concepts, possibly differing from Christian concepts, activate not only prosociality but also tolerance. Subliminally priming Buddhist concepts, compared with neutral or Christian concepts, decreased explicit prejudice against ethnic, ideological, and moral outgroups among Western Buddhists who valued universalism (Experiment 1, n=116). It also increased spontaneous prosociality, and decreased, among low authoritarians or high universalists, implicit religious and ethnic prejudice among Westerners of Christian background (Experiment 2, n=128) and Taiwanese of Buddhist/Taoist background (Experiment 3, n=122). Increased compassion and tolerance of contradiction occasionally mediated some of the effects. The general idea that religion promotes (ingroup) prosociality and outgroup prejudice, based on research in monotheistic contexts, lacks cross-cultural sensitivity. Buddhist concepts activate extended prosociality and tolerance of outgroups, at least among those with socio-cognitive and moral openness.

Kupor, Daniella M., Kristin Laurin & Jonathan Levav. 2015. Anticipating divine protection? Reminders of God can increase nonmoral risk taking. *Psychological Science* 26(4). 374–384. doi:10.1177/0956797614563108.

Religiosity and participation in religious activities have been linked with decreased risky behavior. In the current research, researchers hypothesized that exposure to the concept of God can actually increase people's willingness to engage in certain types of risks. Across seven studies, reminders of God increased risk taking in nonmoral domains. This effect was mediated by the perceived danger of a risky option and emerged more strongly among individuals who perceive God as a reliable source of safety and protection than among those who do not. Moreover, in an eighth study, when participants were first reminded of God and then took a risk that produced negative consequences (i.e., when divine protection failed to materialize), participants reported feeling more negatively toward God than did participants in the same situation who were not first reminded of God. This research contributes to an understanding of the divergent effects that distinct components of religion can exert on behavior.

Roubekas, Nickolas P. 2015. Lucius' Lucid Dream: Book 11 of the Metamorphoses and Religious Conversion. *Journal of Cognitive Historiography* 1(2). 171–185.

In Book 11 of Apuleius' novel Metamorphoses the protagonist, Lucius, transformed into an ass due to misusage of witchcraft, encounters Isis through a dream while sleeping at a remote beach in central Greece. This incident results in the retransformation of Lucius into a man and his subsequent dedication to Isis. However, the information contained in the text regarding both what preceded and followed Lucius' dream suggest that, instead of arguing that Lucius had a mystical experience that led to his conversion, it could be well argued that what he experienced was a lucid dream, i.e., an altered state of consciousness. This article suggests that such alterations of human consciousness may lead to religious conversion when the subject that has such experiences believes that supernatural agents may provide a solution to her/his problems.

Taves, Ann. 2015. "Magical thinking" and the Emergence of New Social Movements: Cognitive Aspects of Reformation Era Debates over Ritual Efficacy. *Journal of Cognitive Historiography* 1(2). 146–170.

Sørensen's (2007) cognitive theory of magic offers more precise tools for analyzing the cognitive dimensions of novelty and change across a range of cultural domains if it is extracted from academic discussions of "religion" and "magic" and recast it generically in terms of the attribution of non-ordinary powers within temporally structured event-frames. Focusing on the agreements required to generate new collective rituals reveals the chief limitation of Sørensen's theory of magic and Lawson and McCauley's theory of ritual for understanding the emergence of new groups with new rituals: neither attends sufficiently to the contestations surrounding the interpretation of presumed originatory events, either when the original attributions are made or when "reformers" reanalyze them. Reformation Era debates over the Eucharist illustrate how subtle shifts in the interpretation of originatory events can signal critical shifts in counterpart connections that in turn lay the foundation for new movements based on new or "reformed" rituals. Although the historical interactions that lead to or preclude such agreements are the basic "stuff" of historical analysis, use of cognitive tools to describe underlying shifts provides a more adequate basis for comparing processes of emergence within and across cultures and time periods.

Watts, Joseph, Simon J. Greenhill, Quentin D. Atkinson, Thomas E. Currie, Joseph Bulbulia & Russell D. Gray. 2015. Broad supernatural punishment but not moralizing high gods precede the evolution of political complexity in Austronesia. *Proceedings of the Royal Society B-Biological Sciences* 282(1804). 20142556.

doi:10.1098/rspb.2014.2556.

Supernatural belief presents an explanatory challenge to evolutionary theorists, as it is both costly and prevalent. One influential functional explanation claims that the imagined threat of supernatural punishment can suppress selfishness and enhance cooperation. Specifically, morally concerned supreme deities or "moralizing high gods" (MHG) have been argued to reduce free-riding in large social groups, enabling believers to build the kind of complex societies that define modern humanity. Previous cross-cultural studies claiming to support the MHG hypothesis rely on correlational analyses only and do not correct for the statistical non-independence of sampled cultures. Here researchers use a Bayesian phylogenetic approach with a sample of 96 Austronesian cultures to test the MHG hypothesis as well as an alternative supernatural punishment hypothesis that allows punishment by a broad range of moralizing agents. Evidence is found for the idea that broad supernatural punishment drives political complexity, whereas MHGs follow political complexity. The authors suggest that the concept of MHGs diffused as part of a suite of traits arising from cultural exchange between complex societies. These results show the power of phylogenetic methods to address long-standing debates about the origins and functions of religion in human society.

1.3 SCIENTIFIC STUDY OF RELIGION: PSYCHOLOGY AND CULTURE

Breslin, Michael J. & Christopher Alan Lewis. 2015. Schizotypy and Religiosity: The Magic of Prayer. Archive for the Psychology of Religion 37(1). 84–97. doi:10.1163/15736121-12341300.

The term schizotypy is used to describe a diverse range of characteristics symptomatic of schizotypal personality disorder and borderline personality disorder. An emerging body of research is concerned with the relationship between schizotypy and religiosity. Mixed findings suggest a gender-specific, weak positive association between schizotypy and religiosity to the relationship between schizotypy and religiosity by employing a multidimensional measure of prayer as a measure of religiosity. A sample of 371 Irish respondents completed the Measure of Prayer Type and the Schizotypal Personality (STA) and Borderline Personality (STB) scales. Multiple regression showed that Magical Thinking uniquely predicted all prayer types, controlling for age and gender.

Burris, Christopher T. & Keri Raif. 2015. Make Believe Unmakes Belief?: Childhood Play Style and Adult Personality as Predictors of Religious Identity Change. *International Journal for the Psychology of Religion* 25(2). 91–106. doi:10.1080/10508619.2014.916590.

Links between current religious status and both childhood play style and adult personality (Five-Factor Model) were explored in a Canadian undergraduate sample. The lifelong religious reported being less open to experience, but more agreeable and conscientious, relative to apostates (who left their childhood faith for no faith), switchers (who migrated to a different faith), converts (who adopted faith since childhood), and the lifelong nonreligious. Relative to the two lifelong groups, apostates and switchers—and, to a lesser extent, converts—reported stronger interest and engrossment in pretend play involving props, peer collaborators, and/or imaginary characters, as well as less interest in organized sports. A childhood predilection for pretend play may function as a marker of greater ability and willingness to consider the implications of experiencing the self in different roles in an "as if" world. In turn, this predisposition may eventuate in a significant ideological shift in response to unmet cognitive and/or emotional needs, consistent with current understandings of religious change.

Chaker, Zina, Felicia M. Chang & Julie Hakim-Larson. 2015. Body satisfaction, thin-ideal internalization, and perceived pressure to be thin among Canadian women: The role of acculturation and religiosity. *Body Image* 14. 85–93. doi:10.1016/j.bodyim.2015.04.003.

In an online study, 143 Canadian women of various religious backgrounds completed measures of acculturation, religiosity, body satisfaction, internalization of the thin ideal, perceived pressure from media, and manner of dress. Heritage acculturation correlated with appearance satisfaction, but not weight satisfaction. After accounting for BMI and social desirability, higher heritage acculturation and lower mainstream acculturation were associated with lower perceived pressure from media. Thus, heritage acculturation across religious denominations may serve as a buffer against appearance dissatisfaction and perceived media pressure. Manner of dress among the Muslim subgroup and its relation to religiosity and acculturation were also assessed. Muslim women who dressed in greater accordance with Islamic principles reported lower heritage acculturation and greater religiosity. Thus, Muslim women's manner of dress was related to their religiosity and the extent to which they embraced cultural values. These findings are discussed in terms of the possible distinctions between heritage acculturation and religiosity.

Dommelen, Andrea van, Katharina Schmid, Miles Hewstone, Karen Gonsalkorale & Marilynn Brewer. 2015. Construing multiple in-groups: Assessing social identity inclusiveness and structure in ethnic and religious minority group members. *European Journal of Social Psychology* 45(3). 386–399. doi:10.1002/ejsp.2095.

The combination of multiple social identities into a coherent in-group construal is of immediate relevance in today's complex and diverse societies. This paper proposes a conceptual and operational framework to examine how individuals subjectively construe their in-group in the context of multiple, cross-cutting group memberships. The subjective combination of multiple social identities is described in terms of structure (social identity structure) and inclusiveness (social identity inclusiveness [SII]). Two studies assess SII and social identity structure in community samples to whom the subjective combination of multiple, cross-cutting in-groups is of particular relevance: a sample of Turkish-Belgian Muslims (Study 1) and Turkish-Australian Muslims (Study 2). Across both studies, SII uniquely predicted attitudes toward a range of out-groups, over and above identification with singular in-groups. Moreover, a wide range of social identity structures were identified, further attesting to broad individual differences in the construal of the perceived in-group.

Ferrari, Joseph R. 2015. Religiosity and Personality Traits of Hispanic and Non-Hispanic Catholic Deacons. *Archive for the Psychology of Religion* 37(1). 1–13. doi:10.1163/15736121-12341296.

The Hispanic masculinity style may be "machismo" (dominant, distant, and unemotional) or "caballeros" (engaged, affectionate, compassionate), but is unknown among Hispanic clergy. Using a U.S. on-line survey database, Hispanic (n=127) and non-Hispanic (n=1,708) Catholic deacons self-reported religiosity and personality traits. Hispanic and non-Hispanic deacons reported similar depth on religious beliefs, but non-Hispanic, compared to Hispanic, deacons claimed higher interpersonal religious commitment and a spiritual transcendence of connectedness to others. On the hexaco-60, Hispanic, compared to non-Hispanic, deacons reported significantly higher emotional traits and lower extraversion traits. Furthermore, Hispanic deacons reported higher fearfulness and sociability and lower boldness facets, compared to non-Hispanic deacons. These results were independent of the ethnic composition of the parish community. Results suggest that Hispanic deacons may reflect "caballeros" masculinity, caring for others and sensitive to their emotional needs while socially outgoing.

Gutierrez, Ian A. & Crystal L. Park. 2015. Emerging adulthood, evolving worldviews: How life events impact college students' developing belief systems. *Emerging Adulthood* 3(2). 85–97. doi:10.1177/2167696814544501.

Worldviews—a person's fundamental perspectives on social and metaphysical reality—relate to multiple aspects of psychological functioning and well-being. Theory on emerging adulthood contends that individuals between the ages of 18 and 29 explore and change their worldviews as they strive to develop a coherent identity. Simultaneously, emerging adults experience many significant life events. The relationship between life events and worldview development in emerging adulthood has yet to be investigated. Researchers conducted a longitudinal analysis of changes in emerging adult college students' (n=168) worldviews over the course of a semester and explored how positive and negatives life events were associated with belief change. Findings revealed that 76.8% of emerging adults in our sample experienced a reliable change in at least one worldview. Additionally, the positive impact of life events was found to mitigate decreases in self-worth beliefs.

Hui, C. Harry, Wilfred W. F. Lau, Sing-Hang Cheung, Shu-Fai Cheung, Esther Y. Y. Lau & Jasmine Lam. 2015. Predictors and Outcomes of Experiences Deemed Religious: A Longitudinal Investigation. The International Journal for the Psychology of Religion 25(2). 107–129. doi:10.1080/10508619.2014.916588.

Experiences deemed religious (EDRs) are events that a person regards as religious and/or supernatural. This study considered four such experiences: miraculous healing; glossolalia; unusual joy and peace during meditation or prayer; and, prayer answered. Researchers proposed a process model and conducted a longitudinal study to address three main research questions: (a) Who are more likely to have EDRs? (b) What effects would the experiences have on the person's subsequent spiritual and psychological conditions? (c) Are all EDRs alike? Findings suggest that EDRs can be predicted through certain common individual characteristics, such as vertical faith maturity (i.e.,

intimacy with the divine). However, there are also individual predictors that are EDR-specific. Regarding outcomes, the experience of unusual joy and peace during prayer and meditation heightens vertical faith maturity, motivates more religious practices, predicts better sleep quality at a later time, and perhaps improves quality of life. However, tongue speaking results in no change in any measured outcome variables. Neither does having prayers answered. Surprisingly, being healed from serious physical illness can have negative consequences. Results demonstrate that the EDRs should not be treated as the same when it comes to their antecedents and consequences.

Khan, Ziasma Haneef, P. J. Watson & Zhuo Chen. 2015. Meanings of Animal Sacrifice during Eidul-Adha. *Archive for the Psychology of Religion* 37(1). 37–53. doi:10.1163/15736121-12341299.

This investigation examined Pakistani Muslim understandings of the animal sacrifice that occurs during Eid-ul-Adha at the end of the Hajj. Pakistani university students (n=156) responded to a number of items expressing possible interpretations of this ritual. A Faithful Sacrifice factor operationalized sincere religious reasons for the sacrifice and correlated positively with an Intrinsic Religious Orientation and with Muslim Experiential Religiousness. Extrinsic and Troublesome Sacrifice factors recorded nonreligious implications of the practice and displayed direct associations with the Extrinsic Social Religious Orientation and inverse linkages with Muslim Experiential Religiousness. Extrinsic Sacrifice also correlated negatively with the Intrinsic Orientation. These results further documented the complexity of Muslim beliefs and practices and once again illustrated how a dialectic between tradition-specific and more general social scientific perspectives can promote progress in the psychology of religion.

Kortt, Michael A., Brian Dollery & Bligh Grant. 2015. Religion and life satisfaction down under. Journal of Happiness Studies 16(2). 277–293. doi:10.1007/s10902-014-9509-4.

Researchers investigated the association between religious involvement and life satisfaction using panel data from the 2004, 2007, and 2010 waves of the Household, Income and Labour Dynamics in Australia (HILDA) survey. Our study provides strong evidence of an association between attendance at religious services and life satisfaction in the Australian social context. While social resources mediate this association, there appears to be a remaining direct influence of attendance at religious services on life satisfaction. To unravel this association, there is a need to disentangle and separately assess the influence that 'religious social resources' and 'secular social resources' may have on life satisfaction.

Lueke, Adam & Bryan Gibson. 2015. Mindfulness meditation reduces implicit age and race bias: The role of reduced automaticity of responding. *Social Psychological and Personality Science* 6(3). 284–291. doi:10.1177/1948550614559651.

Research has shown that mindfulness can positively affect peoples' lives in a number of ways, including relying less on previously established associations. Researchers focused on the impact of mindfulness on implicit age and racial bias as measured by implicit association tests (IATs). Participants listened to either a mindfulness or a control audio and then completed the race and age IATs. Mindfulness meditation caused an increase in state mindfulness and a decrease in implicit race and age bias. Analyses using the Quad Model showed that this reduction was due to weaker automatically activated associations on the IATs.

Maxwell-Smith, Matthew A., Clive Seligman, Paul Conway & Irene Cheung. 2015. Individual Differences in Commitment to Value-Based Beliefs and the Amplification of Perceived Belief Dissimilarity Effects. *Journal of Personality* 83(2). 127–141. doi:10.1111/jopy.12089.

The commitment to beliefs (CTB) framework proposes that there are individual differences in the extent to which people generally follow beliefs that are a reflection of their values. The current research hypothesized that CTB would

amplify the effects of perceived belief dissimilarity or incompatibility, such that individuals higher in CTB would display more pronounced reactions to belief-relevant groups, events, or individuals seen as incompatible with their value-based beliefs. Researchers tested this hypothesis in three studies that assessed participants' CTB and their perceptions of belief dissimilarity or incompatibility with regard to other religious groups (Study 1), political parties during a national election (Study 2), and their romantic partner (Study 3). CTB amplified the effects of perceived belief dissimilarity or incompatibility on people's biases toward other religious groups, voting intentions and behavior in a national election, and their evaluative and behavioral responses toward their romantic partner. These results collectively suggest that perceptions of belief dissimilarity or incompatibility are particularly important cues for individuals with higher levels of CTB as they encounter other people or events that are relevant to their beliefs.

Meier, Brian P., Adam K. Fetterman, Michael D. Robinson & Courtney M. Lappas. 2015. The myth of the angry atheist. *The Journal of Psychology* 149(3). 219–238. doi:10.1080/00223980.2013.866929.

Atheists are often portrayed in the media and elsewhere as angry individuals. Although atheists disagree with the pillar of many religions, namely the existence of a god, it may not necessarily be the case that they are angry individuals. The prevalence and accuracy of angry-atheist perceptions were examined in 7 studies with 1,677 participants from multiple institutions and locations in the United States. Studies 1-3 revealed that people believe atheists are angrier than believers, people in general, and other minority groups, both explicitly and implicitly. Studies 4-7 then examined the accuracy of these beliefs. Belief in God, state anger, and trait anger were assessed in multiple ways and contexts. None of these studies supported the idea that atheists are particularly angry individuals. Rather, these results support the idea that people believe atheists are angry individuals, but they do not appear to be angrier than other individuals in reality.

Rakrachakarn, Varapa, George P. Moschis, Fon Sim Ong & Randall Shannon. 2015. Materialism and life satisfaction: The role of religion. *Journal of Religion and Health* 54(2). 413–426. doi:10.1007/s10943-013-9794-y.

This study examines the role of religion and religiosity in the relationship between materialism and life satisfaction. The findings suggests that religion may be a key factor in understanding differences in findings of previous studies regarding the inverse relationship found in the vast majority of previous studies. Based on a large-scale study in Malaysia, a country comprised of several religious subcultures (mainly Muslims, Buddhists, and Hindus), the findings suggest that the influence of religiosity on materialism and life satisfaction is stronger among Malays than among Chinese and Indians, and life satisfaction partially mediates the relationship between religiosity and materialism. The paper discusses implications for theory development and further research.

Saraç, Leyla. 2015. Relationships between religiosity level and attitudes toward lesbians and gay men among Turkish university students. *Journal of Homosexuality* 62(4). 481–494. doi:10.1080/00918369.2014.983386.

This study examined the relationships between religiosity levels and attitudes toward lesbians and gay men among freshmen university students in Turkey. The Attitudes Towards Lesbians and Gay Men Scale—Short Form and the Religiosity Scale were administered to 91 male and 171 female students. The findings showed that male freshmen had more negative attitudes toward gay men than toward lesbians. In addition, attitudes of male freshmen were significantly more negative toward gay men than females. Both male and female freshmen students who had higher levels of religiosity were found to have higher levels of negative attitudes toward both lesbians and gay men.

Short, Mary B., Thomas E. Kasper & Chad T. Wetterneck. 2015. The relationship between religiosity and internet pornography use. *Journal of Religion and Health* 54(2). 571–583. doi:10.1007/s10943-014-9849-8.

Internet pornography (IP) consumption has increased, resulting in functioning and psychological problems. Thus, understanding what variables affect IP uses is needed. One of the variables may be religion. College students (n=223) completed questions on IP use and religion. About 64 % ever viewed IP and 26 % currently viewed IP, at a rate of 74 min per week. IP use interfered with their relationship with God and spirituality. Religious individuals were less likely to ever or currently view IP. Intrinsic and extrinsic religiosity and alignment of spiritual values were associated with ever use. Results suggest that religiosity matters in IP use.

Smither, James W. & Alan G. Walker. 2015. The relationship between core self-evaluations, views of god, and intrinsic/extrinsic religious motivation. *Psychological Reports* 116(2). 647–662. doi:10.2466/17.07.PR0.116k24w2.

Core self-evaluations refer to a higher-order construct that subsumes four well-established traits in the personality literature: self-esteem, generalized self-efficacy, (low) neuroticism, and (internal) locus of control. Studies that have examined the relationship between various measures of religiosity and individual components of core self-evaluations show no clear pattern of relationships. The absence of a clear pattern may be due to the failure of most previous studies in this area to use theory to guide research. Therefore, theories related to core self-evaluations, religious motivation, and views of God were used to develop and test four hypotheses. Adults completed measures of four religious attitudes (intrinsic religious motivation, extrinsic religious motivation, viewing God as loving, and viewing God as punitive), general religiosity, and core self-evaluations, separated by 6 weeks (with the order of measures counterbalanced). Multivariate multiple regression, controlling for general religiosity, showed that core self-evaluations were positively related to viewing God as loving, negatively related to viewing God as punitive, and negatively related to extrinsic religious motivation. The hypothesis that core self-evaluations would be positively related to intrinsic religious motivation was not supported.

Steffen, Patrick R., Spencer Clayton & William Swinyard. 2015. Religious orientation and life aspirations. *Journal of Religion and Health* 54(2). 470–479. doi:10.1007/s10943-014-9825-3.

The effects of religiosity on well-being appear to depend on religious orientation, with intrinsic orientation being related to positive outcomes and extrinsic orientation being related to neutral or negative outcomes. It is not clear, however, why intrinsic and extrinsic religiosity has the relationships they do. Self-determination theory may provide a useful framework of intrinsic and extrinsic aspirations that may help to answer this question. The purpose of the present study was to examine whether intrinsic and extrinsic religiosity would be related to intrinsic and extrinsic life aspirations. Researchers hypothesized that intrinsic religiosity would be positively related to intrinsic life aspirations and negatively related with extrinsic life aspirations, and that extrinsic religiosity would be positively related to extrinsic life aspirations and negatively related to intrinsic aspirations, and that life aspirations would partially mediate the relationships between religious orientation and outcome. To study these hypotheses, a random national sample (n=425) completed the measures of religious orientation, life aspirations, affect, and life satisfaction. It was found that intrinsic religiosity was positively related to positive affect, life satisfaction, and intrinsic life aspirations and was negatively related to negative affect and extrinsic life aspirations. Extrinsic religiosity was positively related to extrinsic life aspirations and was not related to the intrinsic life aspirations. When both religious orientation and life aspiration variables were included together in the model predicting outcome, both remained significant indicating that religious orientation and life aspirations are independent predictors of outcome. In conclusion, although religious orientation and life aspirations are significantly related to each other and to outcome, life aspirations did not mediate the effects of religious orientation. Therefore, self-determination theory does not appear to completely account for the effects of religious orientation.

1.4 SCIENTIFIC STUDY OF RELIGION: METHOD & THEORY

Halama, Peter. 2015. Empirical Approach to Typology of Religious Conversion. *Pastoral Psychology* 64(2). 185–194.

doi:10.1007/s11089-013-0592-y.

This study attempts to derive the empirically based typology of religious conversion by means of cluster analysis. The research sample consisted of 179 participants who defined themselves as converts. The participants were administered the Religious Conversion Process Questionnaire (RCPQ), which contains 50 items reflecting dominant aspects and theories of conversion. In the first phase of analysis, hierarchical cluster analysis of items was used to identify core dimensions of the questionnaire. The items were sorted into 14 clusters (e.g., positive emotions during conversion, meaning-searching process, influence of other people, long-term and calm conversion, etc.). In the second phase, a two-step cluster analysis (hierarchical cluster analysis optimized by non-hierarchical k-means cluster analysis) was used to determine the types of religious conversion. Five types were derived, some of them clearly corresponding to the conversion types identified in previous theoretical and empirical studies (e.g., compensatory conversion).

Merwe, L. van der & J. Habron. 2015. A Conceptual Model of Spirituality in Music Education. *Journal of Research in Music Education* 63(1). 47–69. doi:10.1177/0022429415575314.

This article aims to describe the phenomenon of spirituality in music education by means of a model derived from the academic literature on the topic. Given the centrality of lived experience within this literature, researchers adopted a hermeneutic phenomenological theoretical framework to describe the phenomenon. The NCT (noticing, collecting, and thinking) model was used for the qualitative document analysis. After data saturation, researchers used V an Manen's lifeworld existentials (corporeality, relationality, spatiality, and temporality) to help organize the many quotes, codes, and categories that emerged from analyzing the literature. The model that results assigns codes to quotes and codes to categories, which in turn appear within one of these four lifeworlds. This article not only offers a working conceptual model of spirituality in music education but may also help to foster an awareness of spiritual experience in pedagogical contexts and thus contribute to what V an Manen calls "pedagogic thoughtfulness and tact."

Zwingmann, Christian & Sonja Gottschling. 2015. Religiosity, Spirituality, and God Concepts. *Archive for the Psychology of Religion* 37(1). 98–116. doi:10.1163/15736121-12341298.

Within a German sample (n=478), the current cross-sectional questionnaire study conducts interreligious and interdenominational comparisons between Catholics, Protestants, free-church Protestants, Bahá'ís, Muslims, Spiritualists, i.e., religiously unaffiliated persons who label themselves as "spiritual," and religious/spiritual "nones." The comparisons refer to self-ratings of religiosity and spirituality, centrality of religiosity, as assessed by the Centrality of Religiosity Scale, and God concepts. The study is largely exploratory in nature, but also aims at identifying contexts of faith in which the term "spiritual" is typically used as a self-description. The results show that only Spiritualists and free-church Protestants substantially label themselves as "spiritual." However, they differ in many respects from each other, thus representing two distinct contexts of faith. The results further reveal a medium position of Catholics and Protestants in between the other subgroups, commonalities as well as specific differences between free-church Protestants, Bahá'ís, and Muslims, and some religious/spiritual approaches even within the "nones."

PART 2: ARTICLES IN SPIRITUALITY & HEALTH RESEARCH

2.1 SPIRITUALITY & HEALTH: GENERAL HEALTH & WELL-BEING

Black, David S., Gillian A. O'Reilly, Richard Olmstead, Elizabeth C. Breen & Michael R. Irwin. 2015. Mindfulness meditation and improvement in sleep quality and daytime impairment among older adults with sleep disturbances: A randomized clinical trial. *JAMA internal medicine* 175(4). 494–501. doi:10.1001/jamainternmed.2014.8081.

To determine the efficacy of a mind-body medicine intervention, called mindfulness meditation, to promote sleep quality, researchers carried out a randomized clinical trial with two parallel groups of older adults with moderate sleep disturbances. Participants were randomized to either a standardized mindful awareness practices (MAPs) intervention (n=24) or a sleep hygiene education (SHE) intervention (n=25). Following intervention, participants in the MAPs group showed significant improvement relative to those in the SHE group on the Pittsburgh Sleep Quality Index (PSQI). The MAPs group showed significant improvement relative to the SHE group on secondary health outcomes of insomnia symptoms, depression symptoms, fatigue interference, and fatigue severity. Betweengroup differences were not observed for anxiety, stress, or NF-zB, although NF-zB concentrations significantly declined over time in both groups.

Bower, Julienne E., Alexandra D. Crosswell, Annette L. Stanton, Catherine M. Crespi, Diana Winston, Jesusa Arevalo, Jeffrey Ma, Steve W. Cole & Patricia A. Ganz. 2015. Mindfulness meditation for younger breast cancer survivors: A randomized controlled trial. *Cancer* 121(8). 1231–1240. doi:10.1002/cncr.29194.

This randomized trial provided the first evaluation of a brief, mindfulness-based intervention for younger breast cancer survivors designed to reduce stress, depression, and inflammatory activity. Women diagnosed with early stage breast cancer at or before age 50 who had completed cancer treatment were randomly assigned to a 6-week Mindful Awareness Practices (MAPS) intervention group (n=39) or to a wait-list control group (n=32). Participants completed questionnaires before and after the intervention to assess stress and depressive symptoms (primary outcomes) as well as physical symptoms, cancer-related distress, and positive outcomes. Participants also completed questionnaires at a 3-month follow-up assessment. In linear mixed models, the MAPS intervention led to significant reductions in perceived stress and marginal reductions in depressive symptoms, as well as significant reductions in proinflammatory gene expression and inflammatory signaling at postintervention. Improvements in secondary outcomes included reduced fatigue, sleep disturbance, and vasomotor symptoms and increased peace and meaning and positive affect. Intervention effects on psychological and behavioral measures were not maintained at the 3-month follow-up assessment, although reductions in cancer-related distress were observed at that assessment.

Cho, Hye Kyung, Woongjoon Moon & Jaehee Kim. 2015. Effects of yoga on stress and inflammatory factors in patients with chronic low back pain: A non-randomized controlled study. *European Journal of Integrative Medicine* 7(2). 118–123. doi:10.1016/j.eujim.2014.10.008.

Yoga is known to reduce stress and inflammation which are related to chronic low back pain (CLBP). However, very few studies investigated the effect of yoga on stress and inflammation in patients with CLBP. Researchers aimed to evaluate effects of the 12-week yoga program on back-related function, stress, and inflammatory factors in patients with CLBP. Following intervention, by the per-protocol analysis indicators of health significantly improved in the yoga group (n=14), whereas there were no significant differences in the control group (n=11). Serum cortisol level and total SOSI score significantly decreased in the yoga group. TNF-alpha maintained in the yoga group whereas TNF-alpha significantly increased in the control group. CRP did not change significantly in both groups.

Cour, Peter la & Marian Petersen. 2015. Effects of Mindfulness Meditation on Chronic Pain: A Randomized Controlled Trial. *Pain Medicine* 16(4). 641–652. doi:10.1111/pme.12605.

This randomized controlled clinical trial investigated the effects of mindfulness meditation on chronic pain. A total of 109 patients with nonspecific chronic pain were randomized to either a standardized mindfulness meditation program (mindfulness-based stress reduction [MBSR]) or to a wait list control. Pain, physical function, mental function, pain acceptance, and health-related quality of life were measured. The SF36 vitality scale was chosen as the primary outcome measure; the primary end point was after completing the MBSR course. Within a 2.5-year period, 43 of the 109 randomized patients completed the mindfulness program, while 47 remained in the control group. Data were compared at three time points: at baseline, after completion of the course/waiting period, and at the 6-month follow-up. Significant effect was found on the primary outcome measure, the SF36 vitality scale. On the secondary variables, significant medium to large size effects were found for lower general anxiety and depression, better mental quality of life (psychological well-being), feeling in control of the pain, and higher pain acceptance. Small (nonsignificant) effect sizes were found for pain measures. There were no significant differences in the measures just after the intervention vs the 6-month follow-up.

Duchemin, Anne-Marie, Beth A. Steinberg, Donald R. Marks, Kristin Vanover & Maryanna Klatt. 2015. A Small Randomized Pilot Study of a Workplace Mindfulness-Based Intervention for Surgical Intensive Care Unit Personnel: Effects on Salivary alpha-Amylase Levels. *Journal of Occupational and Environmental Medicine* 57(4). 393–399. doi:10.1097/JOM.00000000000000371.

Personnel from a surgical intensive care unit were randomized to a stress-reduction intervention or a waitlist control group. The 8-week group mindfulness-based intervention included mindfulness, gentle yoga, and music. Psychological and biological markers of stress were measured 1 week before and 1 week after the intervention. Following intervention, levels of salivary alpha-amylase, an index of sympathetic activation, were significantly decreased between the first and second assessments in the intervention group with no changes in the control group. There was a positive correlation between salivary alpha-amylase levels and burnout scores. These data suggest that this type of intervention could decrease not only reactivity to stress but also the risk of burnout.

Freedenberg, Vicki A., Sue A. Thomas & Erika Friedmann. 2015. A Pilot Study of a Mindfulness Based Stress Reduction Program in Adolescents with Implantable Cardioverter Defibrillators or Pacemakers. *Pediatric Cardiology* 36(4). 786–795. doi:10.1007/s00246-014-1081-5.

This study examined the feasibility of the MBSR program for adolescents with implantable cardioverter defibrillators (ICDs) or pacemakers (PMs), a population previously unexamined in the research literature. The participants completed measures of anxiety and depression (Hospital Anxiety and Depression Scale) and coping (Responses to Stress Questionnaire) at baseline and after the six-session MBSR intervention. Feasibility was demonstrated by successful recruitment of 10 participants, 100 % participation and completion. Anxiety decreased significantly following the intervention, with a large effect size. Anxiety frequency decreased from baseline to post-intervention, and 90 % of participants reported decreased anxiety scores post-intervention. Coping skills related negatively to anxiety and depression. Post-intervention, the group independently formed their own Facebook group and requested to continue meeting monthly. Although generalizability is limited due to the small sample size, this successful pilot study paves the way for larger studies to examine the efficacy of MBSR interventions in adolescents with high-risk cardiac diagnoses.

Garland, Eric L., Brett Froeliger & Matthew O. Howard. 2015. Neurophysiological evidence for remediation of reward processing deficits in chronic pain and opioid misuse following treatment

with Mindfulness-Oriented Recovery Enhancement: Exploratory ERP findings from a pilot RCT. *Journal of Behavioral Medicine* 38(2). 327–336. doi:10.1007/s10865-014-9607-0.

This study examined whether a Mindfulness-Oriented Recovery Enhancement (MORE) intervention could augment natural reward processing through training in savoring as indicated by event-related brain potentials (ERPs). Participants were chronic pain patients at risk for opioid misuse who were randomized to 8 weeks of MORE (n=11) or a support group control condition (n=18). ERPs to images representing naturally rewarding stimuli (e.g., beautiful landscapes, intimate couples) and neutral images were measured before and after 8 weeks of treatment. Analyses focused on the late positive potential (LPP), an ERP response in the 400-1,000 ms time window thought to index allocation of attention to emotional information. Treatment with MORE was associated with significant increases in LPP response to natural reward stimuli relative to neutral stimuli which were correlated with enhanced positive affective cue-responses and reductions in opioid craving from pre- to post-treatment. Findings suggest that cognitive training regimens centered on strengthening attention to natural rewards may remediate reward processing deficits underpinning addictive behavior.

Garrison, Kathleen A., Prasanta Pal, Rahil Rojiani, Jesse Dallery, Stephanie S. O'Malley & Judson A. Brewer. 2015. A randomized controlled trial of smartphone-based mindfulness training for smoking cessation: a study protocol. *BMC Psychiatry* 15. 83. doi:10.1186/s12888-015

This study evaluates the efficacy of a smartphone app-based mindfulness training program for improving smoking cessation rates at 6-months follow-up. A two-group parallel-randomized clinical trial with allocation concealment will be conducted. Group assignment will be concealed from study researchers through to follow-up. The study will be conducted by smartphone and online. Daily smokers who are interested in quitting smoking and own a smartphone (n=140) will be recruited through study advertisements posted online. After completion of a baseline survey, participants will be allocated randomly to the control or intervention group. Participants in both groups will receive a 22-day smartphone-based treatment program for smoking. Participants in the intervention group will receive mobile mindfulness training plus experience sampling. Participants in the control group will receive experience sampling-only. The primary outcome measure will be one-week point prevalence abstinence from smoking (at 6-months follow-up) assessed using carbon monoxide breath monitoring, which will be validated through smartphone-based video chat.

Godfrey, Kathryn M., Linda C. Gallo & Niloofar Afari. 2015. Mindfulness-based interventions for binge eating: a systematic review and meta-analysis. *Journal of Behavioral Medicine* 38(2). 348–362. doi:10.1007/s10865-014-9610-5.

This systematic review and meta-analysis sought to summarize the literature on mindfulness-based interventions and determine their impact on binge eating behavior. PubMED, Web of Science, and PsycINFO were searched using keywords binge eating, overeating, objective bulimic episodes, acceptance and commitment therapy, dialectical behavior therapy, mindfulness, meditation, mindful eating. Of 151 records screened, 19 studies met inclusion criteria. Most studies showed effects of large magnitude. Results of random effects meta-analyses supported large or medium-large effects of these interventions on binge eating. However, there was high statistical heterogeneity among the studies.

Gotink, Rinske A., Paula Chu, Jan J. V. Busschbach, Herbert Benson, Gregory L. Fricchione & M. G. Myriam Hunink. 2015. Standardised Mindfulness-Based Interventions in Healthcare: An Overview of Systematic Reviews and Meta-Analyses of RCTs. *Plos One* 10(4). doi:10.1371/journal.pone.0124344.

The objective of this study was to systematically review the evidence of effectiveness MBSR and MBCT in different patient categories. The search produced 187 reviews, of which 23 were included, covering 115 unique RCTs and

8,683 unique individuals with various conditions. Compared to wait list control and treatment as usual, MBSR and MBCT significantly improved depressive symptoms, anxiety, stress, quality of life, and physical functioning. Limitations include heterogeneity within patient categories, risk of publication bias, and limited long-term follow-up in several studies.

Hatah, Ernieda, Kien Ping Lim, Adliah Mohd Ali, Noraida Mohamed Shah & Farida Islahudin. 2015. The influence of cultural and religious orientations on social support and its potential impact on medication adherence. *Patient Preference and Adherence* 9. 589–596. doi:10.2147/PPA.S79477.

Social support can positively influence patients' health outcomes through a number of mechanisms, such as increases in patients' adherence to medication. Although there have been studies on the influence of social support on medication adherence, these studies were conducted in Western settings, not in Asian settings where cultural and religious orientations may be different. The objective of this study was to assess the effects of cultural orientation and religiosity on social support and its relation to patients' medication adherence. This was a cross-sectional study of patients with chronic diseases in two tertiary hospitals in Selangor, Malaysia. Patients who agreed to participate in the study were asked to answer questions in the following areas: 1) perceived group and higher authority cultural orientations; 2) religiosity: organizational and non-organizational religious activities, and intrinsic religiosity; 3) perceived social support; and 4) self-reported medication adherence. Patients' medication adherence was modeled using multiple logistic regressions, and only variables with a p-value of <0.25 were included in the analysis. A total of 300 patients completed the questionnaire, with the exception of 40 participants who did not complete the cultural orientation question. Group cultural orientation, organizational religious activity, non-organizational religious activity, and intrinsic religiosity demonstrated significant associations with patients' perceived social support. In the medication adherence model, only age, duration of treatment, organizational religious activity, and disease type (human immunodeficiency virus) were found to significantly influence patients' adherence to medications. The authors conclude that social support was not found to have significant influence on patients' medication adherence. Only age, duration of treatment, organizational religious activity, and disease type (human immunodeficiency virus) had significant influence on patients' adherence.

Kraemer, Kristen M., Alison C. McLeish & Adrienne L. Johnson. 2015. Associations between mindfulness and panic symptoms among young adults with asthma. *Psychology, Health & Medicine* 20(3). 322–331.

doi:10.1080/13548506.2014.936888.

Despite the well-documented associations between panic psychopathology and asthma, there has been a dearth of empirical work examining factors that may reduce the negative effects of panic for individuals with asthma. Thus, the goal of the present study was to examine the role of mindfulness skills (i.e. observe, describe, acting with awareness, nonjudgment, and nonreactivity) in symptoms of panic psychopathology (i.e. panic symptoms, anxiety sensitivity, and body vigilance). Participants were young adults with asthma who completed online self-report measures for course credit. After controlling for the effects of asthma control and negative affectivity, greater use of the mindfulness skill of acting with awareness, relative to the other mindfulness skills, significantly predicted fewer panic symptoms and decreased anxiety sensitivity. The skill of observing approached statistical significance in terms of predicting increased body vigilance and anxiety sensitivity. These finding suggest that targeting the skill of acting with awareness may be a novel way to decrease panic symptomatology among individuals with asthma.

Larkey, Linda K., Denise J. Roe, Karen L. Weihs, Roger Jahnke, Ana Maria Lopez, Carol E. Rogers, Byeongsang Oh & Jose Guillen-Rodriguez. 2015. Randomized Controlled Trial of Qigong/Tai Chi Easy on Cancer-Related Fatigue in Breast Cancer Survivors. *Annals of Behavioral Medicine* 49(2). 165–176.

doi:10.1007/s12160-014-9645-4.

This study aims to compare a meditative movement practice, Qigong/Tai Chi Easy (QG/TCE) with sham Qigong (SQG), testing effects of meditation/breath aspects of QG/TCE on breast cancer survivors' persistent fatigue and other symptoms. This double-blind, randomized controlled trial tested 12 weeks of QG/TCE versus SQG on fatigue, depression, and sleep among 87 postmenopausal, fatigued breast cancer survivors, stages 0–III, age 40–75. Following intervention, fatigue decreased significantly in the QG/TCE group compared to control at post-intervention and 3 months follow-up, but not depression and sleep quality. Improvement occurred over time for both interventions in depression and sleep quality.

Lengacher, Cecile A., Richard R. Reich, Carly L. Paterson, Heather S. Jim, Sophia Ramesar, Carissa B. Alinat, Pinky H. Budhrani, et al. 2015. The effects of mindfulness-based stress reduction on objective and subjective sleep parameters in women with breast cancer: a randomized controlled trial. *Psycho-Oncology* 24(4). 424–432. doi:10.1002/pon.3603.

The purpose of this study was to investigate the effects of mindfulness-based stress reduction for breast cancer survivors (MBSR(BC)) on multiple measures of objective and subjective sleep parameters among breast cancer survivors (BCS). Data were collected using a two-armed randomized controlled design among BCS enrolled in either a 6-week MBSR(BC) program or a usual care (UC) group with a 12-week follow-up. Seventy-nine BCS participants (mean age 57 years), stages 0-III, were randomly assigned to either the formal (in-class) 6-week MBSR(BC) program or UC. Sleep parameters were measured at baseline, 6 weeks, and 12 weeks after completing the MBSR(BC) or UC program. Results showed indications of a positive effect of MBSR(BC) on objective sleep parameters (OSP) at 12 weeks on sleep efficiency, percent of sleep time, and less number waking bouts. Small nonsignificant improvements were found in SSP in the MBSR(BC) group from baseline to 6 weeks. No significant relationship was observed between minutes of MBSR(BC) practice and SSP or OSP.

Limbers, Christine A., Danielle Young, William Bryant & Matthew Stephen. 2015. Associations between family religious practices, internalizing/externalizing behaviors, and body mass index in obese youth. *International Journal of Psychiatry in Medicine* 49(3). 215–226. doi:10.1177/0091217415582191.

The objective of the present study was to assess the associations among family religious practices, internalizing/externalizing behaviors, and body mass index in a sample of severely obese youth referred to an outpatient pediatric endocrinology clinic. The sample consisted of 43 obese youth aged 6-16 years. Approximately 93% of families endorsed their religious faith as Christian or Catholic. Parents of youth were administered a demographic questionnaire, religiosity questionnaire, and the Child Behavior Checklist. Three multiple linear regression models were examined with body mass index percentile, Child Behavior Checklist Internalizing Scale, and Child Behavior Checklist Externalizing Scale as outcome variables. A parent endorsing greater importance of religious faith in shaping family life was associated with lower child body mass index percentile in the present sample. Greater family attendance at religious services was associated with higher child body mass index percentile.

Martin, Rosemarie A., Victor J. Ellingsen, Golfo K. Tzilos & Damaris J. Rohsenow. 2015. General and religious coping predict drinking outcomes for alcohol dependent adults in treatment. *American Journal on Addictions* 24(3). 240–245. doi:10.1111/ajad.12181.

Religiosity is associated with improved treatment outcomes among adults with alcohol dependence; however, it is unknown whether religious coping predicts drinking outcomes above and beyond the effects of coping in general, and whether gender differences exist. Researchers thus assessed 116 alcohol-dependent adults for use of religious coping, general coping, and alcohol use within 2 weeks of entering outpatient treatment, and again 6 months after treatment. Researchers found that religious coping at 6 months predicted fewer heavy alcohol use days and fewer drinks per day. This relationship was no longer significant after controlling for general coping at 6 months.

O'Leary, Karen & Samantha Dockray. 2015. The effects of two novel gratitude and mindfulness interventions on well-being. *Journal of Alternative and Complementary Medicine (New York, N.Y.)* 21(4). 243–245.

doi:10.1089/acm.2014.0119.

The objective of this study was to examine the efficacy of two dual-component interventions, one based on mindfulness and one based on gratitude, to reduce depression and stress and increase happiness levels. Participants (n=65) were randomly assigned to a wait-list control condition or to either a gratitude or a mindfulness intervention condition. The interventions were used four times a week for 3 weeks. The gratitude intervention involved a gratitude diary and grateful reflection. The mindfulness intervention involved a mindfulness diary and mindfulness meditation, the Body Scan. The outcome variables were depression, stress, and happiness measured by using the Edinburgh Depression Scale, the Perceived Stress Scale, and the Subjective Happiness Scale, respectively. All outcome variables improved over time in both interventions group but not in the wait-list control group. Efficacy of the interventions differed between the interventions.

Penberthy, J. Kim, Andrea Konig, Christopher J. Gioia, Vivian M. Rodríguez, John A. Starr, William Meese, Danielle Worthington-Stoneman, Karen Kersting & Eva Natanya. 2015. Mindfulness-based relapse prevention: History, mechanisms of action, and effects. *Mindfulness* 6(2). 151–158. doi:10.1007/s12671-013-0239-1.

Mindfulness-based relapse prevention (MBRP) is an intervention for persons recovering from addiction which integrates mindfulness practices and cognitive and behavioral-based relapse prevention techniques, with the goal of helping individuals avoid a return to substance use. MBRP has shown promise in reducing relapse rates among individuals recovering from substance use disorders, but literature examining the effectiveness and mechanisms of action of MBRP is still rather limited. The current paper is a theoretical review of the development of MBRP and research evidence supporting the effectiveness of this intervention. Proposed psychological and physiological mechanisms of action of MBRP and directions for future research are also examined with a specific focus on treating individuals recovering from alcohol use disorders.

Peppone, Luke J., Michelle C. Janelsins, Charles Kamen, Supriya G. Mohile, Lisa K. Sprod, Jennifer S. Gewandter, Jeffrey J. Kirshner, et al. 2015. The effect of YOCAS©(®) yoga for musculoskeletal symptoms among breast cancer survivors on hormonal therapy. *Breast Cancer Research and Treatment* 150(3). 597–604.

doi:10.1007/s10549-015-3351-1.

Up to 50% of breast cancer survivors on aromatase inhibitor therapy report musculoskeletal symptoms such as joint and muscle pain, significantly impacting treatment adherence and discontinuation rates. Researchers conducted a secondary data analysis of a nationwide, multi-site, phase II/III randomized, controlled, clinical trial examining the efficacy of yoga for improving musculoskeletal symptoms among breast cancer survivors currently receiving hormone therapy (aromatase inhibitors [AI] or tamoxifen [TAM]). Breast cancer survivors currently receiving AI (n=95) or TAM (n=72) with no participation in yoga during the previous 3 months were randomized into 2 arms: (1) standard care monitoring and (2) standard care plus the 4-week yoga intervention (2x/week; 75 min/session) and included in this analysis. The yoga intervention utilized the UR Yoga for Cancer Survivors (YOCAS©(®)) program consisting of breathing exercises, 18 gentle Hatha and restorative yoga postures, and meditation. Musculoskeletal symptoms were assessed pre- and post-intervention. At baseline, AI users reported higher levels of general pain, muscle aches, and total physical discomfort than TAM users. Among all breast cancer survivors on hormonal therapy, participants in the yoga group demonstrated greater reductions in musculoskeletal symptoms such as general pain, muscle aches and total physical discomfort from pre- to post-intervention than the control group. The severity of musculoskeletal symptoms was higher for AI users compared to TAM users. Among breast cancer

survivors on hormone therapy, the brief community-based YOCAS intervention significantly reduced general pain, muscle aches, and physical discomfort.

Pérez, John E. & Amy Rex Smith. 2015. Intrinsic religiousness and well-being among cancer patients: the mediating role of control-related religious coping and self-efficacy for coping with cancer. *Journal of Behavioral Medicine* 38(2). 183–193. doi:10.1007/s10865-014-9593-2.

Researchers examined the relationship between intrinsic religiousness and well-being, with control-related religious coping and self-efficacy for coping with cancer as potential mediators of this relationship among cancer patients. In a cross-sectional design, 179 ambulatory cancer patients completed measures of intrinsic religiousness, religious coping, self-efficacy for coping with cancer, well-being, and demographic variables. Type of cancer, stage of cancer, and time since diagnosis were collected from electronic medical charts. In a path model, the positive association between intrinsic religiousness and three types of well-being (physical, functional, and social) was fully mediated by active religious surrender and self-efficacy for coping with cancer. In addition, the negative association between passive religious deferral and all four types of well-being (physical, functional, social, and emotional) was fully mediated by self-efficacy for coping with cancer. Finally, there was a negative direct association between pleading for God's direct intercession and emotional well-being. These findings suggest pathways by which intrinsic religiousness and control-related religious coping are linked to various dimensions of well-being among cancer patients.

Salas-Wright, Christopher P., Michael G. Vaughn & Brandy R. Maynard. 2015. Profiles of religiosity and their association with risk behavior among emerging adults in the United States. *Emerging Adulthood* 3(2). 67–84. doi:10.1177/2167696814539327.

There exists significant variation in religious expression, and a growing body of research suggests the importance of examining this variation among emerging adults vis-à-vis involvement in antisocial and high-risk behaviors. Drawing from the National Survey on Drug Use and Health (NSDUH; n=19,312) and the National Epidemiologic Survey on Alcohol and Related Conditions (NESARC; n=2,721), latent profile analysis and multinomial regression are employed to examine the relationships between latent religiosity classes, antisocial behavior, substance use, and substance use disorders. Results revealed four-class solutions for both the NSDUH and NESARC samples. Emerging adults classified as "publicly and privately devoted" were substantially less likely to be involved in a broad array of risk behaviors and to meet criteria for substance use disorders. Findings suggest the protective effect of religiosity finds its most powerful expression primarily among the minority of emerging adults most profoundly committed to religious life.

Schoenberg, Nancy E., Henry E. Bundy, Jordan A. Baeker Bispo, Christina R. Studts, Brent J. Shelton & Nell Fields. 2015. A rural Appalachian faith-placed smoking cessation intervention. *Journal of Religion and Health* 54(2). 598–611. doi:10.1007/s10943-014-9858-7.

This article addresses the notable absence of faith programming for smoking cessation among underserved rural US residents who experience tobacco-related health inequities. In this article, researchers describe a faith-oriented smoking cessation program in rural Appalachia, involving 590 smokers in 26 rural churches randomized to early and delayed intervention groups. Researchers present three main themes that account for participants' positive evaluation of the program: the program's ability to leverage social connections; the program's convenience orientation; and the program's financial support for smoking cessation. The authors also present themes on the roles of faith and church in smoking cessation programming, including some mixed perceptions on smoking stigma and comfort in church settings; challenges in faith-placed smoking cessation recruitment; and the positive perception of such programming by church leaders. They conclude that faith-placed smoking cessation programs offer great potential, although they must be administered with great sensitivity to individual and community norms.

Schreiber, Judith A. & Jean Edward. 2015. Image of God, religion, spirituality, and life changes in breast cancer survivors: A qualitative approach. *Journal of Religion and Health* 54(2). 612–622. doi:10.1007/s10943-014-9862-v.

This study explored the impact of a breast cancer diagnosis on religion/faith and changes in behaviors, relationship, or goals. In this qualitative study, women, who participated in a larger, quantitative study, completed written responses to questions regarding the role of religion/faith in their lives, the impact of their diagnosis on their image of God and on faith/religious beliefs, and any changes in behaviors, relationships, or life goals were examined. Based on previous findings noting differences in psychological outcomes based on a higher (HE) or lesser (LE) engaged view of God, 28 (14 HE; 14 LE) women were included in the analysis. Awareness of life and its fleeting nature was common to all. Ensuing behaviors varied from a need to focus on self-improvement-egocentrism (LE) to a need to focus on using their experiences to help others (altruism (HE)). Study results suggest that seemingly small, but highly meaningful, differences based on one's worldview result in considerably different attitudinal and behavioral outcomes.

Sharma, Manoj & Paul Branscum. 2015. Yoga Interventions in Pregnancy: A Qualitative Review. Journal of Alternative and Complementary Medicine 21(4). 208–216. doi:10.1089/acm.2014.0033.

This study looked at yoga interventions done from 2008 to December 2013 and examined whether yoga can be an efficacious approach for influencing maternal and birth outcomes in pregnancy. A systematic search was carried out for quantitative articles of pregnancy involving all schools of yoga. A total of 15 articles met the inclusion criteria: 6 from the United States, 6 from India, 2 from Taiwan, and 1 each from Korea and Thailand. Of the 15 studies, 10 showed positive changes in maternal psychological or birth outcomes.

Son, Jenny van, Ivan Nyklíček, Giesje Nefs, Jane Speight, Victor J. Pop & François Pouwer. 2015. The association between mindfulness and emotional distress in adults with diabetes: Could mindfulness serve as a buffer? Results from Diabetes MILES: The Netherlands. *Journal of Behavioral Medicine* 38(2). 251–260. doi:10.1007/s10865-014-9592-3.

The aim of the present study was to examine (1) the association between facets of mindfulness and emotional distress; and (2) whether mindfulness might moderate the association between potential adverse conditions (stressful life events and comorbidity) and emotional distress. Analyses were conducted using cross-sectional data (Management and Impact for Long-term Empowerment and Success-Netherlands): 666 participants with diabetes (type 1 or type 2) completed measures of mindfulness, depressive symptoms, and anxiety symptoms. Hierarchical multiple regression analyses showed significant associations between mindfulness facets (acting with awareness, non-judging, and non-reacting) and symptoms of anxiety and depression. These mindfulness facets appeared to have a moderating effect on the association between stressful life events and depression and anxiety. However, the association between comorbidity and emotional distress was largely not moderated by mindfulness. In conclusion, mindfulness is negatively related to both depression and anxiety symptoms in people with diabetes and shows promise as a potentially protective characteristic against the influence of stressful events on emotional well-being.

Stafford, Lesley, Naomi Thomas, Elizabeth Foley, Fiona Judd, Penny Gibson, Angela Komiti, Jeremy Couper & Litza Kiropoulos. 2015. Comparison of the acceptability and benefits of two mindfulness-based interventions in women with breast or gynecologic cancer: a pilot study. *Supportive Care in Cancer* 23(4). 1063–1071. doi:10.1007/s00520-014-2442-6.

The aim of this study was to compare the relative benefits and acceptability of two different group-based mindfulness psychotherapy interventions among women with breast and gynecologic cancer. Data from 42 women who completed

an 8-week mindfulness-based cognitive therapy (MBCT) program comprising 22 contact hours were compared to data from 24 women who completed a 6-week mindfulness meditation program (MMP) comprising 9 contact hours. Distress, quality of life (QOL), and mindfulness were evaluated pre- (T1) and post-intervention (T2). ANCOVA was used to analyze the relationship between intervention type and T1 score on outcome variable change scores. Participants' perceptions of benefit and acceptability were assessed. Scores on distress, QOL, and mindfulness improved from T1 to T2 with medium to large effect sizes for the MMP and MBCT interventions. ANCOVA showed no main effect for intervention type on outcome change scores and no interaction between intervention type and respective T1 score. Distress and mindfulness scores at T1 had a main effect on respective change scores. Both programs were perceived as beneficial and acceptable with no differences between the intervention types. Within the limits of a small, non-randomized study, these findings provide preliminary support for the utility of a brief mindfulness intervention for improving distress and QOL in a heterogeneous group of women with cancer.

Stecz, Patryk & Józef Kocur. 2015. Religiousness, religious coping with illness, and psychological function among Polish elderly patients with osteoarthritis undergoing arthroplasty. *Journal of Religion and Health* 54(2). 554–570. doi:10.1007/s10943-014-9842-2.

To determine the influence of religious coping and religiousness on the psychological functioning of Polish patients before and after arthroplasty, a prospective study was performed. Out of a pool of 102 potential participants, a total of 61 (34 females, 27 males) completed a purposely created survey, Brief-COPE followed by preoperative and postoperative Perceived Stress Scale, State Trait Anxiety Inventory and Satisfaction with Life Scale. Religious coping was not associated with: (1) perceived stress before or after surgery; (2) preoperative or postoperative anxiety; (3) life satisfaction. A two-factor ANOVA has shown that religious coping controlled by religiousness was related to better psychological functioning. Between- and within-subjects effects were observed for improvement in life satisfaction measured by split-plot ANOVA, which suggests that such improvement was greater among subjects of higher religious orientation. Researchers concluded that religious strategies in dealing with stress measured by Brief-COPE were least likely to benefit patients of low-religious orientation. The study demonstrated the importance of core religious beliefs in predicting benefits derived from religiousness in the face of a crisis. This study showed that regardless of its effectiveness, turning to religion is common among Polish patients about to undergo surgery for osteoarthritis of the hip.

Vinchurkar, Suhas Ashok & Dhananjay Vijay Arankalle. 2015. Integrating yoga therapy in the management of urinary incontinence: A case report. *Journal of Evidence-Based Complementary & Alternative Medicine* 20(2). 154–156. doi:10.1177/2156587214563311.

A 63-year-old overweight female prediagnosed with stress urinary incontinence presented with exacerbated events of urine leakage. She was advised to take up a residential lifestyle and behavioral program, primarily consisting of a monitored yoga therapy module, apart from her ongoing anticholinergic medicine, for 21 days. Assessments were based on a frequency volume chart, a bladder diary for the entire duration of treatment, and the International Consultation on Incontinence Modular Questionnaire-Urinary Incontinence Short Form questionnaire on the days of admission and discharge. A total of 1.9 kg of weight loss was observed during her stay. Usage of pad, as reported in her diary, reduced from 3 to 1 per day. Her International Consultation on Incontinence Modular Questionnaire-Urinary Incontinence Short Form score reduced from 16 to 9, indicating better continence. She expressed subjective well-being and confidence in her social interactions. This is probably the first case report demonstrating feasibility of integration of yoga therapy in the management of urinary incontinence.

Yadav, Raj Kumar, Kumar Sarvottam, Dipti Magan & Rashmi Yadav. 2015. A Two-Year Follow-Up Case of Chronic Fatigue Syndrome: Substantial Improvement in Personality Following a Yoga-Based Lifestyle Intervention. *Journal of Alternative and Complementary Medicine* 21(4). 246–249.

doi:10.1089/acm.2014.0055.

Chronic Fatigue Syndrome (CFS) is characterized by excessive fatigue after minimal physical or mental exertion, muscle and joint pain, poor concentration, dizziness, and sleep disturbances. Researchers report here on the effects of a yoga-based lifestyle intervention in a 30-year old male patient with a documented diagnosis of CFS with compromised quality of life (QoL) and altered personality. The patient initially attended a short-term yoga-based lifestyle intervention program that consisted of yoga-postures, breathing exercises (pranayama), meditation, group discussions, and individualized advice on stress management, diet and physical activity besides group support. Thereafter, patient attended 5 more such programs. After intervention, there was a notable and consistent improvement in his clinical profile, positive aspects of personality and subjective well-being, and reduction in anxiety following this yoga-based lifestyle intervention. Overall, the results suggest that lifestyle intervention may improve clinical condition and personality in patients with CFS.

Zaben, Faten Al, Doaa Ahmed Khalifa, Mohammad Gamal Sehlo, Saad Al Shohaib, Salma Awad Binzaqr, Alae Magdi Badreg, Rawan Ali Alsaadi & Harold G. Koenig. 2015. Religious involvement and health in dialysis patients in Saudi Arabia. *Journal of Religion and Health* 54(2). 713–730. doi:10.1007/s10943-014-9962-8.

Patients on hemodialysis experience considerable psychological and physical stress due to the changes brought on by chronic kidney disease. Religion is often turned to in order to cope with illness and may buffer some of these stresses associated with illness. Researchers describe here the religious activities of dialysis patients in Saudi Arabia and determined demographic, psychosocial, and physical health correlates. An in-person questionnaire was administered to 310 dialysis patients (99.4 % Muslim) in Jeddah, Saudi Arabia. The questionnaire included the Muslim Religiosity Scale, Structured Clinical Interview for Depression, Hamilton Depression Rating Scale, Global Assessment of Functioning scale, and other established measures of psychosocial and physical health. Bivariate and multivariate analyses identified characteristics of patients who were more religiously involved. Religious practices and intrinsic religious beliefs were widespread. Religious involvement was more common among those who were older, better educated, had higher incomes, and were married. Overall psychological functioning was better and social support higher among those who were more religious. The religious also had better physical functioning, better cognitive functioning, and were less likely to smoke, despite having more severe overall illness and being on dialysis for longer than less religious patients. Religious involvement is correlated with better overall psychological functioning, greater social support, better physical and cognitive functioning, better health behavior, and longer duration of dialysis. Whether religion leads to or is a result of better mental and physical health will need to be determined by future longitudinal studies and clinical trials.

2.2 SPIRITUALITY & HEALTH: MENTAL HEALTH

Amjad, Faiza & Iram Zehra Bokharey. 2015. Comparison of spiritual well-being and coping strategies of patients with generalized anxiety disorder and with minor general medical conditions. *Journal of Religion and Health* 54(2). 524–539. doi:10.1007/s10943-014-9834-2.

The purpose of the present study was to compare the spiritual well-being and coping strategies of patients with generalized anxiety disorder (GAD) and those with general medical conditions (GMC). The sample was comprised of 40 participants with GAD fulfilling the diagnostic criteria of DSM IV-TR and 50 participants with GMC. The descriptive statistics, correlation analysis and independent sample t-test were used for data analysis. The results revealed the significant negative correlation of spiritual wellness with GAD symptoms and positive correlation between spiritual wellness, active practical and religious-focused coping strategies. The independent sample t-test showed that spiritual wellness of participants with GMC was higher than participants with GAD. Moreover, out of 13 dimensions of spiritual wellness inventory, the scores of participants with minor general medical conditions in

the dimensions of conception of divinity, present centeredness, hope, forgiveness, conscientiousness and spiritual freedom remained significantly higher than those with GAD. The participants with GMC used more active practical coping strategies and religious-focused coping strategies than participants with GAD. There was no difference between two groups of participants in using active distracting coping strategies, while avoidance-focused coping strategies were used by participants with GAD more than those with GMC.

Ando, Michiyo, Felicia Marquez-Wong, Gary B. Simon, Haruko Kira & Carl Becker. 2015. Bereavement life review improves spiritual well-being and ameliorates depression among American caregivers. *Palliative & Supportive Care* 13(2). 319–325. doi:10.1017/S1478951514000030.

The aim of our study was to investigate the utility of bereavement life review (BLR) to elevate spiritual well-being and alleviate depression among Hawaiian-American caregivers, and to identify changes that occur when caring for their loved ones up to the time of death. Bereavement life review therapy was provided for 20 bereaved Hawaiian-Americans. In the first session, subjects reviewed memories of the deceased with a therapist, who recorded their narratives and collected them into a personal history book. During the second session, subjects discussed the contents of this book. Caregivers completed the Functional Assessment Chronic Illness Therapy-Spiritual (FACIT-Sp) questionnaire and the Beck Depression Inventory, Second Edition (BDI-II) pre- and post-intervention. Subjects also described changes in their views that occurred during the caring process in response to questions. Following intervention, FACIT-Sp scores significantly increased and BDI scores significantly decreased. Five categories were chosen from the narratives on changes that had occurred during caregiving and due to the deceased death: "Learning from practical caring experience," "Positive understanding of patients," "Recognition of appreciation," "Self-change or growth," and "Obtaining a philosophy."

Black, Stephanie Winkeljohn, Patrick Pössel, Benjamin D. Jeppsen, Annie C. Bjerg & Don T. Wooldridge. 2015. Disclosure during private prayer as a mediator between prayer type and mental health in an adult Christian sample. *Journal of Religion and Health* 54(2). 540–553. doi:10.1007/s10943-014-9840-4.

According to Poloma and Pendleton's prayer model, there are four prayer types (colloquial, meditative, petitionary, and ritual), all of which have varying associations with mental health. However, few studies have examined what mechanisms explain these associations. The literature demonstrates that disclosing distressing information can improve mental health. Thus, the current study examined self-disclosure as a mediating variable between Poloma and Pendleton's prayer types and mental health. It was hypothesized that self-disclosure would mediate the association between prayer types involving meaningful communication with God (colloquial and meditative prayer types) and mental health and would not mediate associations between petitionary and ritual prayer types and mental health. This cross-sectional, online study analyzed data from praying Christian adults (n=296) to test the hypotheses. As predicted, self-disclosure mediated the positive associations between colloquial and meditative prayer types and mental health. Self-disclosure was not associated with petitionary or ritual prayer and therefore did not mediate the relationships of these prayer types with mental health, as expected. Petitionary prayer had a negative relationship to mental health. The results indicate that self-disclosure is an important mediator to consider when investigating the associations between private prayer and mental health.

Chen, Fangfang, Xueyu Lv, Jiliang Fang, Shan Yu, Jing Sui, Lingzhong Fan, Tao Li, et al. 2015. The effect of body-mind relaxation meditation induction on major depressive disorder: A resting-state fMRI study. *Journal of Affective Disorders* 183. 75–82. doi:10.1016/j.jad.2015.04.030.

The present study employed resting-state functional magnetic resonance imaging (rs-fMRI) to examine the effect of body-mind relaxation meditation induction (BMRMI) on the brain activity of depressed patients and to investigate

possible mechanisms of action for this complex intervention. 21 major depressive disorder patients (MDDs) and 24 age and gender-matched healthy controls (HCs) received rs-fMRI scans at baseline and after listening to a selection of audio designed to induce body-mind relaxation meditation. The rs-fMRI data were analyzed using Matlab toolbox to obtain the amplitude of low-frequency fluctuations (ALFF) of the BOLD signal for the whole brain. A mixed-design repeated measures analysis of variance (ANOVA) was performed on the whole brain to find which brain regions were affected by the BMRMI. An additional functional connectivity analysis was used to identify any atypical connection patterns after the BMRMI. After the BMRMI experience, both the MDDs and HCs showed decreased ALFF values in the bilateral frontal pole (BA10). Additionally, increased functional connectivity from the right dorsal medial prefrontal cortex (dmPFC) to the left dorsal lateral prefrontal cortex (dlPFC) and the left lateral orbitofrontal cortex (OFC) was identified only in the MDDs after the BMRMI.

Chiesa, Alberto, Vittoria Castagner, Costanza Andrisano, Alessandro Serretti, Laura Mandelli, Stefano Porcelli & Fabio Giommi. 2015. Mindfulness-based cognitive therapy vs. psycho-education for patients with major depression who did not achieve remission following antidepressant treatment. *Psychiatry Research* 226(2-3). 474–483. doi:10.1016/j.psychres.2015.02.003.

Mindfulness-based cognitive therapy (MBCT) showed efficacy for currently depressed patients. However, most of the available studies suffer from important methodological shortcomings, including the lack of adequate control groups. The present study aims to compare MBCT with a psycho-educational control group designed to be structurally equivalent to the MBCT program but excluding the main putative "active ingredient" of MBCT (i.e., mindfulness meditation practice) for the treatment of patients with major depression (MD) who did not achieve remission following at least 8 weeks of antidepressant treatment. Out of 106 screened subjects, 43 were randomized to receive MBCT or psycho-education and were prospectively followed for 26 weeks. Assessments were performed at baseline, 4, 8, 17 and 26-weeks. Both HAM-D and BDI scores, as well as quality of life and mindfulness scores, showed higher improvements, which were particularly evident over the long-term period, in the MBCT group than in the psychoeducation group. Although limited by a small sample size, the results of this study suggest the superiority of MBCT over psycho-education for non-remitted MD subjects.

Cruz-Ortega, Luis G., Daniel Gutierrez & Dennis Waite. 2015. Religious orientation and ethnic identity as predictors of religious coping among bereaved individuals. *Counseling and Values* 60(1). 67–83.

doi:10.1002/j.2161-007X.2015.00061.x.

Religious orientation and ethnic identity inform the religious coping process, but research on this topic is scarce. The authors collected data on these constructs from a sample (n=319) of bereaved adults. A canonical correlation analysis showed that individuals who engage in traditional spiritual practices and strive to achieve ordinary and transcendental spiritual goals are more likely to engage in positive religious coping. Also, a multiple regression analysis revealed that individuals with higher levels of ethnic identity development are more likely to engage in positive religious coping. Finally, a discriminant analysis indicated that ethnic identity and a conservative religious orientation discriminated between Whites and ethnic minority individuals.

Geurtzen, Naline, Ron H. J. Scholte, Rutger C. M. E. Engels, Yuli R. Tak & Rinka M. P. van Zundert. 2015. Association Between Mindful Parenting and Adolescents' Internalizing Problems: Non-judgmental Acceptance of Parenting as Core Element. *Journal of Child and Family Studies* 24(4). 1117–1128.

doi:10.1007/s10826-014-9920-9.

Previous studies have showed that traditional parenting dimensions (e.g., responsiveness, behavioral control, psychological control, and autonomy support) are related to adolescents' internalizing problems. The current study examined mindful parenting, a new approach to parenting based on the principles of mindfulness. Mindful parenting

as operationalized in the present study consisted of six dimensions: listening with full attention, compassion for the child, non-judgmental acceptance of parental functioning, emotional non-reactivity in parenting, emotional awareness of the child, and emotional awareness of self. These six mindful parenting dimensions were assumed to be associated with adolescents' symptoms of depression and anxiety while controlling for traditional parenting dimensions and parental symptoms of depression and anxiety. The sample consisted of 901 adolescents and their parents. Results showed that of the six mindful parenting dimensions, only the dimension non-judgmental acceptance of parental functioning was significantly associated with adolescents' internalizing problems. This means that children of parents who reported higher levels of non-judgmental acceptance of their own functioning as a parent reported fewer symptoms of depression and anxiety. These findings indicate that in future parenting research and practices, it is relevant to take parental thoughts, feelings, and attitudes with regard to their own role as a parent into account when studying the association between parenting and adolescents' internalizing problems.

Hoge, Elizabeth A., Eric Bui, Elizabeth Goetter, Donald J. Robinaugh, Rebecca A. Ojserkis, David M. Fresco & Naomi M. Simon. 2015. Change in Decentering Mediates Improvement in Anxiety in Mindfulness-Based Stress Reduction for Generalized Anxiety Disorder. Cognitive Therapy and Research 39(2). 228–235. doi:10.1007/s10608-014-9646-4.

Researchers sought to examine psychological mechanisms of treatment outcomes of a mindfulness meditation intervention for generalized anxiety disorder (GAD). Mindfulness and decentering was examined as two potential therapeutic mechanisms of action of GAD symptom reduction in patients randomized to receive either mindfulness-based stress reduction (MBSR) or an attention control class (n=38). Multiple mediation analyses were conducted using a non-parametric cross product of the coefficients approach that employs bootstrapping. Analyses revealed that change in decentering and change in mindfulness significantly mediated the effect of MBSR on anxiety. When both mediators were included in the model, the multiple mediation analysis revealed a significant indirect effect through increases in decentering, but not mindfulness. Furthermore, the direct effect of MBSR on decrease in anxiety was not significant, suggesting that decentering fully mediated the relationship. Results also suggested that MBSR reduces worry through an increase in mindfulness, specifically by increases in awareness and nonreactivity. Improvements in GAD symptoms resulting from MBSR are in part explained by increased levels of decentering.

Hudson, Darrell L., Jason Q. Purnell, Alexis E. Duncan & Evander Baker. 2015. Subjective religiosity, church attendance, and depression in the National Survey of American Life. *Journal of Religion and Health* 54(2). 584–597. doi:10.1007/s10943-014-9850-2.

This study examined the association between religion and depression and whether religion explained lower rates of depression among blacks compared to whites. Data were drawn from the National Survey of American Life, a multi-ethnic sample of African Americans, Caribbean Blacks, and non-Hispanic whites (n=6,082). African Americans and Caribbean Blacks reported higher mean levels of subjective religiosity than whites, but there were no significant differences in levels of church attendance. African Americans and Caribbean Blacks reported significantly lower odds of depression than whites. Differences in subjective religiosity and church attendance did not account for the association between major depression and African American and Caribbean Black race/ethnicity relative to whites.

Koenig, Harold G., Michelle J. Pearce, Bruce Nelson, Sally F. Shaw, Clive J. Robins, Noha S. Daher, Harvey Jay Cohen, et al. 2015. Religious vs. Conventional Cognitive Behavioral Therapy for Major Depression in Persons with Chronic Medical Illness A Pilot Randomized Trial. *Journal of Nervous and Mental Disease* 203(4). 243–251. doi:10.1097/NMD.00000000000000273.

Researchers examined the efficacy of conventional cognitive behavioral therapy (CCBT) versus religiously integrated CBT (RCBT) in persons with major depression and chronic medical illness. Participants were randomized to either CCBT (n=67) or RCBT (n=65). The intervention in both groups consisted of ten 50-minute sessions delivered remotely during 12 weeks (94% by telephone). Adherence to treatment was similar, except in more religious participants in whom adherence to RCBT was slightly greater (85.7% vs. 65.9%). The intention-to-treat analysis at 12 weeks indicated no significant difference in outcome between the two groups. Response rates and remission rates were also similar. Overall religiosity interacted with treatment group, suggesting that RCBT was slightly more efficacious in the more religious participants. These preliminary findings suggest that CCBT and RCBT are equivalent treatments of major depression in persons with chronic medical illness. Efficacy, as well as adherence, may be affected by client religiosity.

Krause, Neal. 2015. Race, Religious Involvement, and Feelings of Personal Control in Middle and Late Life. *Archive for the Psychology of Religion* 37(1). 14–36. doi:10.1163/15736121-12341297.

Research on differences in personal control among Blacks and Whites is conflicted. The purpose of this study is to see if differences in feelings of control between Blacks and Whites can be attributed to race differences in the use of religious resources. Developing a close relationship with God serves as the focal measure of religious involvement. The data come from a nationwide survey of middle-aged and older Blacks and Whites in the United States. A second-order factor model is embedded in a larger latent variable model that assesses the relationships among race, a close relationship with God, and feelings of personal control. The findings suggest that Blacks have a stronger sense of control than Whites. Moreover, a significant portion of these race differences can be attributed to the fact that Blacks are more likely than Whites to report they have a close relationship with God.

Krause, Neal. 2015. Religious doubt, helping others, and psychological well-being. *Journal of Religion and Health* 54(2). 745–758. doi:10.1007/s10943-014-9977-1.

A growing body of research reveals that religious doubt may have a deleterious effect on well-being. However, relatively less is known about how people try to cope with doubt. The purpose of this study is to see whether providing tangible help to others offsets the effects of religious doubt on well-being. Findings from a nationwide survey of middle-aged and older adults indicate that helping strangers reduces the negative relationship between religious doubt and three indicators of well-being: self-esteem, life satisfaction, and optimism. But in contrast, similar dissonance reduction benefits were not provided by helping family members and friends.

Kvande, Marianne Nilsen, Christian Andreas Klöckner, Unni Karin Moksnes & Geir Arild Espnes. 2015. Do Optimism and Pessimism Mediate the Relationship Between Religious Coping and Existential Well-Being? Examining Mechanisms in a Norwegian Population Sample. *International Journal for the Psychology of Religion* 25(2). 130–151. doi:10.1080/10508619.2014.892350.

In the secular context of Norway, researchers investigated the mediating roles of both optimism and pessimism in the relationship between six dimensions of religious coping as measured by the Religious Coping Activities Scale (RCOPE) and existential well-being (EWB). The moderating effect of long-standing health problems on these relationships was also examined. This cross-sectional study was conducted in 2009 among Norwegians 18 to 75 years of age. Results from structural equation models showed different mechanisms for optimism and pessimism: when optimism was tested as a mediator, the RCOPE factors of spiritually based coping, support, avoidance, and deeds had a direct effect on EWB. Contrary to this, when pessimism was tested as a mediator, the RCOPE factors of spiritually based coping, support, avoidance, and discontent had an indirect effect on well-being through pessimism. The results from multiple-group structural equation models generally supported expectations that the relationships between religious coping, optimism, pessimism, and well-being were stronger for those with health problems compared

to those without health problems. This study shows that a relationship between religious coping and well-heing may be evident even if the context is highly secular, and it adds to the literature an understanding of the separate roles of optimism and pessimism to this relationship.

Leaviss, J. & L. Uttley. 2015. Psychotherapeutic benefits of compassion-focused therapy: an early systematic review. *Psychological Medicine* 45(5). 927–945. doi:10.1017/S0033291714002141.

Compassion-focused therapy (CFT) is a relatively novel form of psychotherapy that was developed for people who have mental health problems primarily linked to high shame and self-criticism. The aim of this early systematic review was to draw together the current research evidence of the effectiveness of CFT as a psychotherapeutic intervention and to provide recommendations that may inform the development of further trials. A comprehensive search of electronic databases was undertaken to systematically identify literature relating to the effectiveness of CFT as a psychotherapeutic intervention. Reference lists of key journals were hand searched and contact with experts in the field was made to identify unpublished data. Fourteen studies were included in the review, including three randomized controlled studies. The findings from the included studies were, in the most part, favorable to CFT, and in particular seemed to be effective for people who were high in self-criticism.

Lundmark, Mikael. 2015. Religious Objects and the Coping Process. *Archive for the Psychology of Religion* 37(1). 54–83. doi:10.1163/15736121-12341301.

This study addresses the psychological functions of physical religious objects in religious coping by presenting case studies on the use of prayer cloths. The cases are selected from a qualitative, in-depth interview study among Swedish practicing Christians suffering from cancer, on religious experiences and expressions that serve in the process of coping with a life situation changed by the disease. It is argued that current psychological theories on coping and religion lack tools for understanding the role of physical religious objects in the process of religious coping. A theoretical framework that remedies this problem is suggested and applied to the case studies. The key feature of the theoretical framework is that it modifies and extends the coping theory of Kenneth Pargament by drawing on resources from object relations theory, especially the concept of "transitional object." The results suggest that the creation and/or handling of transitional objects is a reconstructing or preserving coping method, and that prayer cloths function as transitional objects when they (a) facilitate transition/movement between the inner subjective world and the outer objective world by being charged with significance, and (b) function as a coping tool for conserving this significance.

McClintock, Andrew S. & Timothy Anderson. 2015. The application of mindfulness for interpersonal dependency: Effects of a brief intervention. *Mindfulness* 6(2). 243–252. doi:10.1007/s12671-013-0253-3.

This study examined the efficacy of a brief mindfulness intervention for alleviating the affective consequences of interpersonal dependency. Seventy undergraduate students with high trait dependency underwent a mood induction to exacerbate the core cognitive and affective features of interpersonal dependency. Participants were then randomly assigned to listen and participate in a 20-min recording of either a mindfulness treatment or a distraction (control) treatment. Relative to those in the distraction group, mindfulness group participants reported greater increases in state mindfulness and greater reductions in state anxiety and state negative affect. Mediation analyses supported the notion that the decentering facet of state mindfulness fully mediated the improvements in both state anxiety and state negative affect. The findings of this study evince that mindfulness training may be a beneficial adjunct for treating interpersonal dependency and possibly dependent personality disorder.

McIlvain, S. J., B. Miller, B. A. Lawhead, C. Barbosa-Leiker & A. Anderson. 2015. Piloting yoga and assessing outcomes in a residential behavioural health unit. *Journal of Psychiatric and Mental Health Nursing* 22(3). 199–207.

doi:10.1111/jpm.12184.

This study examined if adolescents on a residential behavioral health unit would participate in a yoga intervention. Yoga was added, twice weekly, to the program schedule for adolescents with mental illness on an inpatient unit. Trait Emotional Intelligence Questionnaire-Adolescent Short Form (TEIQue-ASF) scores were measured over 8 weeks. Additional measures included daily numbers of quiet times, time outs, and point card scores. Twenty-two adolescents completed the study. The TEIQue-ASF assessment was able to detect changes in total scores over 8 weeks. Increased yoga participation was related to higher values of the TEIQue-ASF subdomain of sociability, increase in weekly point card totals, a decrease in behavioral time outs, and a decrease in combined behavioral interventions at various time points throughout the program.

Pearson, Matthew R., Adrienne K. Lawless, David B. Brown & Adrian J. Bravo. 2015. Mindfulness and Emotional Outcomes: Identifying Subgroups of College Students using Latent Profile Analysis. *Personality and Individual Differences* 76. 33–38. doi:10.1016/j.paid.2014.11.009.

In non-meditating samples, distinct facets of mindfulness are found to be negatively correlated, preventing the meaningful creation of a total mindfulness score. The present study used person-centered analyses to distinguish subgroups of college students based on their mindfulness scores, which allows the examination of individuals who are high (or low) on all facets of mindfulness. Using the Lo-Mendell-Rubin Adjusted LRT test, researchers settled on a 4-class solution that included a high mindfulness group (high on all 5 facets, n=245), low mindfulness group (moderately low on all 5 facets, n=563), judgmentally observing group (high on observing, but low on non-judging and acting with awareness, N=63), and non-judgmentally aware group (low on observing, but high on non-judging and acting with awareness, N=70). Consistent across all emotional outcomes including depressive symptoms, anxiety symptoms (i.e., worry), affective instability, and distress intolerance, researchers found that the judgmentally observing group had the most maladaptive emotional outcomes followed by the low mindfulness group. Both the high mindfulness group and the non-judgmentally aware group had the most adaptive emotional outcomes.

Rabow, Michael W. & Sarah J. Knish. 2015. Spiritual well-being among outpatients with cancer receiving concurrent oncologic and palliative care. *Supportive Care in Cancer* 23(4). 919–923. doi:10.1007/s00520-014-2428-4.

Spiritual well-being is threatened by cancer, but its correlation with other illness symptoms and the efficacy of palliative care (PC) to ameliorate spiritual suffering are not well understood. Researchers conducted a retrospective study using a convenience sample of oncology patients at a comprehensive cancer center who received concurrent oncologic and palliative care between 2008 and 2011. Participants were 883 patients, half with metastatic disease. Religious affiliation was reported as Christian by 20.3 %, Catholic by 18.7 %, and "none" by 39.0 %. Baseline spiritual well-being was not significantly correlated with age, gender, race, cancer stage, marital status, insurance provider, or having a religious affiliation. Greater spiritual well-being was correlated with greater quality of life and well-being, and with less depression, anxiety, fatigue, and pain. In multiple regression analysis, the associations persisted between spiritual well-being and anxiety, depression, fatigue, and quality of life. Spiritual well-being improved comparing mean scores immediately prior to initial PC consultation with those at first follow-up.

Rose, Theda, Joseph Shields, Stephen Tueller & Sharon Larson. 2015. Religiosity and behavioral health outcomes of adolescents living in disaster-vulnerable areas. *Journal of Religion and Health* 54(2). 480–494.

doi:10.1007/s10943-014-9828-0.

This study utilized data from the National Survey on Drug Use and Health (2005-2010) to examine the relationship between religion, depression, marijuana use, and binge drinking. The sample included 12,500 adolescents residing in the Gulf Coast region of the USA. Results show that religious salience was directly related

to depression, marijuana, and binge drinking. It was also indirectly related to both substance use outcomes through depression. Religious service attendance was unrelated to any of the outcomes. Implications of the findings are discussed.

Shorey, Ryan C., Michael J. Gawrysiak, Scott Anderson & Gregory L. Stuart. 2015. Dispositional Mindfulness, Spirituality, and Substance Use in Predicting Depressive Symptoms in a Treatment-Seeking Sample. *Journal of Clinical Psychology* 71(4). 334–345. doi:10.1002/jclp.22139.

Using preexisting patient medical records (n=105), the current study investigated dispositional mindfulness and spirituality in relation to depressive symptom clusters (affective, cognitive, and physiological) among men in residential substance use treatment. Findings demonstrated that dispositional mindfulness and spirituality were negatively associated with depressive symptoms. After controlling for age, alcohol use, and drug use, dispositional mindfulness remained negatively associated with all of the depression clusters. Spirituality only remained associated with the cognitive depression cluster.

Sterner, William R. & Lisa R. Jackson-Cherry. 2015. The influence of spirituality and religion on coping for combat-deployed military personnel. *Counseling & Values* 60(1). 48–66. doi:10.1002/j.2161-007X.2015.00060.x.

A paucity of research exists examining the role of spirituality/religion (S/R) as a protective factor for combatdeployed military personnel. The purpose of this study is to (a) define the underlying structure of items from an author-developed instrument measuring coping, beliefs, and support; and (b) examine how S/R affiliation, activities, and practices affect coping responses for 279 combat-deployed military personnel. Significant predictors of coping included support, age, Christian affiliation, and frequency of S/R practices. The authors found that beliefs, S/R practices prior to deployment, previous combat deployments, and first deployment were not significant predictors of coping. Implications for counselors and future research are addressed.

Virgili, Mario. 2015. Mindfulness-based interventions reduce psychological distress in working adults: A meta-analysis of intervention studies. *Mindfulness* 6(2). 326–337. doi:10.1007/s12671-013-0264-0.

The aim of this study was to assess the effectiveness of mindfulness-based interventions (MBIs) for reducing psychological distress in working adults. A comprehensive literature search of relevant databases included articles written in English published on December 2012. The meta-analysis included 19 controlled and uncontrolled intervention studies with a total of 1,139 participants. Analyses yielded medium-to-large mean effect sizes for the within-group (pre–post) comparison and for the between-group comparison of MBI with an inactive control. Effectiveness was largely maintained at a median follow-up of 5 weeks. Analyses based on subgroup comparisons suggested that brief versions of mindfulness-based stress reduction developed for organizational settings are equally effective as standard 8-week versions originally developed for clinical settings. However, there is little evidence to suggest that MBIs are more effective than other types of occupational stress management interventions, such as relaxation training and yoga, for reducing psychological distress in working adults. Overall, these findings support the use of MBIs in organisational settings for the reduction of psychological distress. Implications for practice and research are discussed.

Wang, Hongshan, Peter Rober, Annemie Dillen & Paul Enzlin. 2015. The impact of stressful life events on highly religious Chinese Christians living in Belgium. *Journal of Religion and Health* 54(2). 495–516.

doi:10.1007/s10943-014-9832-4.

While there has been considerable inquiry into how religion may help Christians deal with stressful life events (SLEs), only limited research has been conducted on the impact SLEs might have on religion. This study's purpose

was to provide an in-depth analysis of this relationship in a sample of highly religious Christians of Chinese origin. In-depth qualitative interviews were conducted with 11 Chinese couples residing in Belgium, and a conceptual model was created to describe how SLEs impact religiosity and how religion influences people's coping processes. Results indicated that for highly religious Chinese Christians, an SLE may represent a faith-growth opportunity.

Westphal, Maren, Martina-Barbara Bingisser, Tianshu Feng, Melanie Wall, Emily Blakley, Roland Bingisser & Birgit Kleim. 2015. Protective benefits of mindfulness in emergency room personnel. *Journal of Affective Disorders* 175. 79–85. doi:10.1016/j.jad.2014.12.038.

Recent meta analyses have found that mindfulness practice may reduce anxiety and depression in clinical populations and there is growing evidence that mindfulness 'nay also improve well-being and quality of care in health professionals. This study examined whether mindfulness protects against the impact of work related stress on mental health and burnout in emergency room (ER) nurses. ER nurses (n=50) were recruited from an urban teaching hospital in Switzerland and completed a survey on work related stressors, mindfulness, burnout, depression, and anxiety. The most frequently reported work related stressor was interpersonal conflict. Nurses working more consecutive days since last taking time off were at greater risk for depression and those reporting more work related interpersonal conflicts were at greater risk for burnout. Mindfulness was associated with reduced anxiety, depression, and burnout. Mindfulness was a significant predictor of anxiety, depression, and burnout and moderated the impact of work-related stressors on mental health and burnout.

Wongtongkam, Nualnong, Andrew Day, Paul Russell Ward & Anthony Harold Winefield. 2015. The influence of mindfulness meditation on angry emotions and violent behavior on Thai technical college students. *European Journal of Integrative Medicine* 7(2). 124–130. doi:10.1016/j.eujim.2014.10.007.

Violence among technical college students is a significant issue in Thailand, and yet few interventions are available for use with this group. In this study the outcomes of a culturally appropriate intervention, mindfulness meditation (MM), on anger and violent behavior are reported. The MM intervention was delivered over three consecutive weeks to technical college students (n=40) and the effects compared to a comparison group (n=56) who attend classes as usual. Both the intervention and comparison group completed a series of validated self-report measures on aggressive and violent behavior perpetration and victimization on three occasions (pre-intervention, 1 month and 3 month post-intervention). Program participants reported lower levels of anger expression at one month follow-up, but there were no observed group x time interactions for self-reported violent behavior. Rates of victimization changed over time, with one interaction effect observed for reports of being threatened.

Yoon, Eunju, Christine Chih-Ting Chang, Angela Clawson, Michael Knoll, Fatma Aydin, Laura Barsigian & Kelly Hughes. 2015. Religiousness, spirituality, and eudaimonic and hedonic wellbeing. *Counselling Psychology Quarterly* 28(2). 132–149. doi:10.1080/09515070.2014.968528.

This study tested a conceptual model of religiousness/spirituality (R/S) and hedonic well-being (HWB; measured by life satisfaction and positive affect) by including eudaimonic well-being (EWB; measured by meaning in life) as a mediator. Given the multidimensionality of R/S, researchers examined whether and how the magnitudes of direct and indirect relationships varied for various aspects of R/S: organizational religious practices, private religious practices, daily religious/spiritual experiences, and subjective spirituality. Web survey data of 450 American adults were analyzed using structural equation modeling. Results showed that EWB partially mediated the relation of daily religious/spiritual experiences and HWB; however, the other three aspects of R/S had no indirect relationships with HWB. Additionally, private religious practices and subjective spirituality indicated negative direct relationships with HWB. Approximately 68% of the variance in HWB was accounted for by the variables included in this model.

Zoogman, Sarah, Simon B. Goldberg, William T. Hoyt & Lisa Miller. 2015. Mindfulness interventions with youth: A meta-analysis. *Mindfulness* 6(2). 290–302. doi:10.1007/s12671-013-0260-4.

Mindfulness meditation is a well-validated intervention for symptoms of depression and anxiety disorders in adults, with meta-analyses showing moderate effect sizes. This study marks the first published meta-analysis of the burgeoning literature on mindfulness meditation with youth (conducted between 2004 and 2011) and identifies specific outcomes and sub-populations for whom mindfulness may be particularly helpful. Inclusion criteria were peer-reviewed journal articles published in English, study participants under 18 years of age, and a description in the methods section of mindfulness as the chief component of an intervention. A systematic search was conducted, of which upon review, 20 articles met inclusion criteria. Mindfulness interventions with youth overall were found to be helpful and not to carry iatrogenic harm, with the primary omnibus effect size (del) in the small to moderate range, indicating the superiority of mindfulness treatments over active control comparison conditions. A significantly larger effect size was found on psychological symptoms compared to other dependent variable types, and for studies drawn from clinical samples compared to non-clinical sample. Mindfulness appears to be a promising intervention modality for youth.

2.3 SPIRITUALITY & HEALTH: METHOD AND THEORY

Bostic, Jeff Q., Michael D. Nevarez, Mona P. Potter, Jefferson B. Prince, Margaret M. Benningfield & Blaise A. Aguirre. 2015. Being present at school: Implementing mindfulness in schools. *Child and Adolescent Psychiatric Clinics of North America* 24(2). 245–259. doi:10.1016/j.chc.2014.11.010.

Developmentally sensitive efforts to help students learn, practice, and regularly use mindfulness tactics easily and readily in and beyond the classroom are important to help them manage future stresses. Mindfulness emphasizes consciously focusing the mind in the present moment, purposefully, without judgment or attachment. Meditation extends this to setting aside time and places to practice mindfulness, and additionally, yoga includes physical postures and breathing techniques that enhance mindfulness and meditation. Several mindfulness programs and techniques have been applied in schools, with positive benefits reported. Some elements of these programs require modifications to be sensitive to the developmental state of the children receiving mindfulness training.

Burns, Emily. 2015. The blessingway ceremony: Ritual, nostalgic imagination and feminist spirituality. *Journal of Religion and Health* 54(2). 783–797. doi:10.1007/s10943-014-9991-3.

There is an increasing interest in the role of spirituality on the experience of health, wellness and illness, as well as the role of spiritual practice in health care provision. For pregnancy and childbirth, this focus has tended to concentrate on hospital birth settings and care, and religious forms of spirituality. The blessingway ceremony can be described as an alternative baby shower, popular with home-birthing women. Its focus is woman-centered and draws on the power of ritual to evoke a spiritual experience for the pregnant host and her guests. This spirituality is experienced as a strong connection between women, their relationship with "nature," and forged via the nostalgic imagination of women through time and space. This article will draw on data obtained in 2010 during doctoral fieldwork with 52 home-birthing women across eastern Australia and will examine the blessingway ceremony and its significance as a site of potential spiritual empowerment for pregnant and birthing women.

Carey, Lindsay B., Mark A. Willis, Lillian Krikheli & Annette O'Brien. 2015. Religion, health and confidentiality: An exploratory review of the role of chaplains. *Journal of Religion and Health* 54(2). 676–692.

doi:10.1007/s10943-014-9931-2.

Chaplaincy has traditionally been considered a profession highly respectful of confidentiality. Nevertheless, given increasing professional collaboration within health and welfare contexts, plus the requirements of intervention reporting and the ease of technological data sharing, it is possible that confidentiality may be sacrificed for the sake of expediency. This exploratory review considers the literature relating to the role of chaplaincy and confidentiality that suggests a number of principles which should be considered by chaplaincy associations/organizations to ensure appropriate professional practice and the holistic health and well-being of patients/clients.

Chiera-Lyle, Maria & Rabbi Rena Arshinoff. 2015. When Patients Mirror Our Personal Lives: A Case Study Illustrating the Role of Spiritual Care in Parallel Life Situations. *Journal of Hospice & Palliative Nursing* 17(2). 143–148. doi:10.1097/NJH.000000000000138.

Nurses bring professional knowledge and personal experience to their work. Sometimes they relate to patients because of similar situations they have experienced themselves. One of the challenges nurses face is separating out the situation of their patients from their own incidents that seem very familiar. Although nurses are trained to keep their own emotional responses detached from the work they do, they sometimes unconsciously identify with the emotions they witness in their patients and families. When situations our patients face mirror our personal lives, nurses and professional caregivers may not recognize the impact they have on them. The spiritual care professional supports staff with the awareness that nurses are also human themselves with their own personal challenges and accompanying emotions. There is great potential for nurses to obtain spiritual support as they strive to provide optimum care to patients as they deal with their own challenges. This article highlights the experience of a nurse and a spiritual care professional who helped her to identify the parallel between her patient's situation and that of her own and the spiritual and emotional growth that emerged on both a personal and a professional level.

Churchill, Larry R. 2015. Embracing a broad spirituality in end of life discussions and advance care planning. *Journal of Religion and Health* 54(2). 759–764. doi:10.1007/s10943-014-9988-y.

Advance care planning for end of life typically focuses on the mechanics of completing living wills and durable power of attorney documents. Even when spiritual aspects of end of life care are discussed, the dominant assumptions are those of traditional religious systems. A broad view of spirituality is needed, one that may involve traditional religious beliefs but also includes personal understandings of what is holy or sacred. Embracing this broad practice of spirituality will help both familial and professional caregivers honor an essential aspect of end of life discussions and promote greater discernment of the deep meaning in advance care documents.

Curcio, Cristiane Schumann Silva, Giancarlo Lucchetti & Alexander Moreira-Almeida. 2015. Validation of the Portuguese version of the Brief Multidimensional Measure of Religiousness/Spirituality (BMMRS-P) in clinical and non-clinical samples. *Journal of Religion and Health* 54(2). 435–448. doi:10.1007/s10943-013-9803-1.

Despite Brazil's high levels of religious involvement, there is a scarcity of validated religiousness/spirituality (R/S) measures in Portuguese, particularly multidimensional ones. This study presents the validation of the Portuguese version of the "Brief Multidimensional Measure in Religiousness and Spirituality" (BMMRS) within the Brazilian context. Inpatients (262) and caregivers (389) at two hospitals of Brazil answered the BMMRS, the DUREL-p, and a sociodemographic questionnaire. The internal and convergent validity and test-retest reliability for major dimensions were good. Discriminant validity was high (except for the Forgiveness dimension). The Portuguese version of the BMMRS is a reliable and valid instrument to assess multiple R/S dimensions in clinical and non-clinical samples.

Desbordes, Gaëlle, Tim Gard, Elizabeth A. Hoge, Britta K. Hölzel, Catherine Kerr, Sara W. Lazar, Andrew Olendzki & David R. Vago. 2015. Moving beyond mindfulness: Defining equanimity as an outcome measure in meditation and contemplative research. *Mindfulness* 6(2). 356–372. doi:10.1007/s12671-013-0269-8.

In light of a growing interest in contemplative practices such as meditation, the emerging field of contemplative science has been challenged to describe and objectively measure how these practices affect health and well-being. While "mindfulness" itself has been proposed as a measurable outcome of contemplative practices, this concept encompasses multiple components, some of which, as reviewed here, the authors hold may be better characterized as equanimity. Equanimity can be defined as an even-minded mental state or dispositional tendency toward all experiences or objects, regardless of their origin or their affective valence (pleasant, unpleasant, or neutral). In this article, the authors propose that equanimity be used as an outcome measure in contemplative research. They first define and discuss the inter-relationship between mindfulness and equanimity from the perspectives of both classical Buddhism and modern psychology, and present existing meditation techniques for cultivating equanimity. They then review psychological, physiological, and neuroimaging methods that have been used to assess equanimity either directly or indirectly.

Flint, Adrian. 2015. Traditional Healing, Biomedicine and the Treatment of HIV/AIDS: Contrasting South African and Native American Experiences. *International Journal of Environmental Research and Public Health* 12(4). 4321–4339. doi:10.3390/ijerph120404321.

Traditional healing remains an important aspect of many people's engagement with healthcare and, in this, responses to the treatment of HIV/AIDS are no different. However, given the gravity of the global HIV/AIDS pandemic, there has been much debate as to the value of traditional healing in this respect. Accordingly, this paper explores the extent to which meaningful accommodation between the biomedical and traditional sectors is possible (and/or even desirable). It does this through a consideration of Native American and South African experiences, looking at how the respective groups, in which medical pluralism is common, have addressed the issue of HIV/AIDS. The paper points to the importance of developing "culturally appropriate" forms of treatment that emphasize complementary rather than adversarial engagement between the traditional and biomedical systems and how policymakers can best facilitate this.

Friedson, Meredith L. 2015. Psychotherapy and the Fundamentalist client: The aims and challenges of treating Jehovah's Witnesses. *Journal of Religion and Health* 54(2). 693–712. doi:10.1007/s10943-014-9946-8.

Jehovah's Witnesses are a Fundamentalist Christian religious group well known for their door-to-door proselytism. As a result of their belief in spreading the word of God and converting others, Jehovah's Witness populations are growing across the globe. A primary element of Jehovah's Witness doctrine and other Fundamentalist groups is a mandate to not develop associations with people outside of the religion. As a result of this isolationism, many Fundamentalists who experience psychological distress may hesitate to obtain help from the mental health community. Their belief system and cultural values, including the practice of "disfellowshipping" or shunning members, influence the types of problems Jehovah's Witnesses and other Fundamentalists present with in therapy, obstacles to treatment, and issues that may arise within the therapeutic relationship.

Green, Janet. 2015. Living in hope and desperate for a miracle: NICU nurses perceptions of parental anguish. *Journal of Religion and Health* 54(2). 731–744. doi:10.1007/s10943-014-9971-7.

The birth of an extremely premature baby is a tragedy, and it is only natural that the parents will rely on the spiritual and religious beliefs that guide the rest of their lives. At this difficult time, parents with strong religious

beliefs will hope for divine intervention and pray for a miracle. This paper outlines the difficulties experienced by neonatal nurses when caring for an extremely premature baby whose parents hold on to hope and their belief in divine intervention and a miracle. Data were collected via a questionnaire to Australian neonatal nurses and semi-structured interviews with 24 neonatal nurses in NSW, Australia. A qualitative approach was used to analyze the data. The theme of "hoping for a miracle" was captured by two sub-themes "praying for a miracle" and "oscillating between hope and despair." For some families, the hope of divine intervention seemed all consuming, and the nurses were witness to the desperation and disappointment of families when a miracle was not forthcoming.

Henry, Hani M. 2015. Spiritual energy of Islamic prayers as a catalyst for psychotherapy. *Journal of Religion and Health* 54(2). 387–398. doi:10.1007/s10943-013-9780-4.

Islamic prayers can produce spiritual energy that may yield many psychological benefits, such as amelioration of stress and improvement in subjective well-being, interpersonal sensitivity, and mastery. Islamic prayers can also be integrated into mainstream therapeutic interventions with religious Muslim clients, and this integration can mobilize, transform, and invigorate the process of psychotherapy. This paper provides methods that can be used for the explicit integration of Islamic prayers into traditional psychotherapy. Further, the paper offers strategies for avoiding potential pitfalls that may hamper this process. Finally, a case study illustrating this therapeutic integration and its psychological benefits will be presented.

Hong, Philip Young P., David R. Hodge & Sangmi Choi. 2015. Spirituality, hope, and self-sufficiency among low-income job seekers. *Social Work* 60(2). 155–164. doi:10.1093/sw/swu059.

Self-sufficiency (SS) is an important social welfare policy goal in the United States, yet little is known about the process that leads to SS. To address this gap in the literature, this study examined the relationship between spirituality, hope, and SS among a sample of low-income job seekers (n=116). It was hypothesized that spirituality would be related to hope, and that hope, in turn, would be related to SS. Using survey data from two workforce development agencies, this hypothesis was confirmed: hope fully mediated the relationship between spirituality and SS. Of the two factors through which hope is commonly operationalized— agency and pathways—supplemental analysis suggested that spirituality only affects SS through the agency channel. To help foster hope in direct practice settings, it is suggested that social workers might employ spiritually modified cognitive—behavioral therapy protocols. Macrostructural interventions that block the pathway component of hope are also suggested to help reverse exclusion from labor market entry. As such, hope needs to be addressed comprehensively—intrapsychically and macrostructurally—to effect bottom-up change for SS. Engendering hope may assist clients overcome some of the many challenges they encounter on the journey to SS.

Hosemans, Dominic. 2015. Meditation: A process of cultivating enhanced well-being. *Mindfulness* 6(2). 338–347.

doi:10.1007/s12671-013-0266-y.

Meditation is the practice of training attention, and has increasingly become implemented in mainstream healthcare. The current study compared non-meditators with two general approaches to meditation as follows: concentrative and insight-oriented. The latter entails focusing attention on a single object, whereas the former opens attention, in an accepting and non-judgmental way, to whatever arises within the mind. Compared to non-meditators, both meditation approaches demonstrated significantly enhanced mindfulness and also indicated lower perceived stress. However, when compared to non-meditators, only insight-oriented meditators reported significantly greater subjective well-being (SWB), which is thought to arise from the expansion of attention to unwholesome thoughts, cultivating acceptance of such thoughts, and therefore decreasing the surrounding emotional context. Nonetheless, no significant difference was noted on SWB between concentrative and insight-oriented meditators.

Kimmes, Jonathan G., Allen B. Mallory, Charlotte Cameron & Özlem Köse. 2015. A treatment model for anxiety-related sexual dysfunctions using mindfulness meditation within a sex-positive framework. *Sexual and Relationship Therapy* 30(2). 286–296. doi:10.1080/14681994.2015.1013023.

In this article, researchers propose a clinical model for treating anxiety-related sexual dysfunctions that hinges on the use of mindfulness meditation practices. First, theoretical and empirical evidence for anxiety as either a cause or condition of several different sexual dysfunctions is provided. Next, the concept of mindfulness and the research that supports the use of mindfulness meditation practices in addressing anxiety are explained. The inherent link between mindfulness and sex-positivity is also addressed while acknowledging the need to emphasize both mindfulness and sex-positivity in therapy. The proposed model for the treatment of anxiety-related sexual dysfunctions using mindfulness practices within a sex-positive framework is outlined. It utilizes mindfulness-based practices such as body scan meditation and sitting meditation as well as several preexisting sex therapy interventions, including directed masturbation and sensate focus assignments. A case study is provided as an example of the progression of therapy and as a demonstration of the clinical viability of the model. Ultimately, this model illustrates a potential way in which mindfulness practices can be utilized within a sex-positive approach to sex therapy.

Laios, K., G. Tsoucalas, M. Karamanou & G. Androutsos. 2015. The medical–religious practice of votive offerings and the representation of a unique pathognomonic one inside the Asclepieion of Corinth. *Journal of Religion and Health* 54(2). 449–454. doi:10.1007/s10943-013-9811-1.

Votive offerings to the healing gods were a common religious custom for the ill believers to achieve the expected cure. The dedication of votive offerings began in Prehistoric Crete and continued during the Classical Period, mainly connected with the god Asclepius. Most offerings presented healthy members, while in some rare cases a disease had been displayed. A unique votive offering, found in the Asclepieion of Corinth, presented an anomaly, bringing to light the religious beliefs of the era. The custom of votive offerings was absorbed by the Orthodox Christians and still remains a common practice.

Levin, Jeff. 2015. Religious differences in self-rated health among US Jews: Findings from five urban population surveys. *Journal of Religion and Health* 54(2). 765–782. doi:10.1007/s10943-014-9998-9.

Research findings on religion and health among Jews are in relatively short supply. While recent studies report on the health of Israelis and the mental health of Jews in the USA, little information exists on the physical health of US Jews, especially from population surveys. In this study, data are analyzed from five urban surveys of Jews conducted since 2000: two surveys from New York (n=4,533; n=5,993) and one apiece from Chicago (n=1,993), Philadelphia (n=1,217), and Boston (n=1,766). A strategy of two-way ANCOVA with interaction was used to test for differences in self-rated health across five categories of Jewish religious affiliation (secular, Reform, Reconstructionist, Conservative, Orthodox) and four categories of synagogue attendance (from never to at least weekly). Findings, adjusted for age and effects of other covariates, reveal that affiliated and synagogue-attending Jews report moderately better health than secular and non-attending Jews.

Lin, Peter & Henry M. Seiden. 2015. Mindfulness and psychoanalytic psychotherapy: A clinical convergence. *Psychoanalytic Psychology* 32(2). 321–333. doi:10.1037/a0038170.

Mindfulness techniques originating in centuries-old Buddhist meditation practice are increasingly being used in Western psychotherapy. This article focuses on the use of one such mindfulness rubric: "the four steps"—in which Chan (the Chinese term for Zen Buddhism) practice and psychoanalytic psychotherapy process can be integrated clinically. A case example is presented. In this case the therapist was a Taiwanese immigrant and a practicing

Buddhist, the supervisor an American psychoanalytic psychotherapist. The supervisory exchange was an important aspect of this convergence of Eastern and Western thought.

Lumma, Anna-Lena, Bethany E. Kok & Tania Singer. 2015. Is meditation always relaxing? Investigating heart rate, heart rate variability, experienced effort and likeability during training of three types of meditation. *International Journal of Psychophysiology: Official Journal of the International Organization of Psychophysiology* 97(1). 38–45. doi:10.1016/j.iipsycho.2015.04.017.

Meditation is often associated with a relaxed state of the body. However, meditation can also be regarded as a type of mental task and training, associated with mental effort and physiological arousal. The cardiovascular effects of meditation may vary depending on the type of meditation, degree of mental effort, and amount of training. In the current study researchers assessed heart rate (HR), high-frequency heart rate variability (HF-HRV) and subjective ratings of effort and likeability during three types of meditation varying in their cognitive and attentional requirements, namely breathing meditation, loving-kindness meditation and observing-thoughts meditation. In the context of the ReSource project, a one-year longitudinal mental training study, participants practiced each meditation exercise on a daily basis for three months. As expected, HR and effort were higher during loving-kindness meditation and observing-thoughts meditation compared to breathing meditation. With training over time HR and likeability increased, while HF-HRV and the subjective experience of effort decreased. The increase in HR and decrease in HF-HRV over training was higher for loving-kindness meditation and observing-thoughts meditation compared to breathing meditation. In contrast to implicit beliefs that meditation is always relaxing and associated with low arousal, the current results show that core meditations aiming at improving compassion and meta-cognitive skills require effort and are associated with physiological arousal compared to breathing meditation. Overall these findings can be useful in making more specific suggestions about which type of meditation is most adaptive for a given context and population.

Massey, Kevin, Marilyn JD Barnes, Dana Villines, Julie D. Goldstein, Anna Lee Hisey Pierson, Cheryl Scherer, Betty Vander Laan & Wm. Thomas Summerfelt. 2015. What do I do? Developing a taxonomy of chaplaincy activities and interventions for spiritual care in intensive care unit palliative care. *BMC Palliative Care* 14. 10. doi:10.1186/s12904-015-0008-0.

Chaplains are increasingly seen as key members of interdisciplinary palliative care teams, yet the specific interventions and hoped for outcomes of their work are poorly understood. This project served to develop a standard terminology inventory for the chaplaincy field, to be called the chaplaincy taxonomy. The research team used a mixed methods approach to generate, evaluate and validate items for the taxonomy. Researchers conducted a literature review, retrospective chart review, focus groups, self-observation, experience sampling, concept mapping, and reliability testing. Chaplaincy activities focused primarily on palliative care in an intensive care unit setting in order to capture a broad cross section of chaplaincy activities. Literature and chart review resulted in 438 taxonomy items for testing. Chaplain focus groups generated an additional 100 items and removed 421 items as duplications. Self-Observation, Experience Sampling and Concept Mapping provided validity that the taxonomy items were actual activities that chaplains perform in their spiritual care. Inter-rater reliability for chaplains to identify taxonomy items from vignettes was 0.903. The authors conclude that the 100 item chaplaincy taxonomy provides a strong foundation for a normative inventory of chaplaincy activities and outcomes. A deliberative process is proposed to further expand and refine the taxonomy to create a standard terminological inventory for the field of chaplaincy. A standard terminology could improve the ways inter-disciplinary palliative care teams communicate about chaplaincy activities and outcomes.

McGlasson, Terencio Daunte & Deborah J. Rubel. 2015. My soul to take: A phenomenology of the struggle for an authentic gay spirituality. *Counseling and Values* 60(1). 14–31. doi:10.1002/j.2161-007X.2015.00058.x.

This phenomenological study explored the "coming-out" experience of 7 gay men who were significantly influenced by conservative Christianity in their formative years and who are living as "out" gay men. Four commonalities were revealed in their experience of this phenomenon: (a) a realization and acceptance of their gay identity, (b) a reckoning that action was required, (c) a rejection of the oppressive religious authority in their lives, and (d) a reorientation in their pursuit of a healthy spirituality. The study includes a review of the relevant literature and recommendations to counselors in addressing the unique needs of spiritually oriented lesbian, gay, bisexual, transgender, and questioning individuals.

Pan, Peter Jen Der, Liang-Yu F. Deng, Shiou Ling Tsai & S. S. Jenny Yuan. 2015. Perspectives of Taiwanese pastoral counselors on the use of scripture and prayer in the counseling process. *Psychological Reports* 116(2). 543–563. doi:10.2466/02.PR0.116k23w0.

Interviews were carried out with 10 Christian pastoral counselors to explore their perspectives on the use of Scripture and prayer in the counseling process. Grounded Theory was utilized. Five main categories including a theological framework of pastoral counseling, counselors' considerations of using Scripture and prayer, preparation for Christian spiritual intervention, implications of spiritual resources, and ethical issues in the pastoral counseling process were generated. The results suggest the theological framework of pastoral counseling is crucial to the use of Scripture and prayer, and the issue of a neutral response should first be clarified for clients. Basic guidelines for ethically using Scripture and prayer for working with Christian clients are proposed for further pastoral counselor training, practice, and research.

Payne, Peter & Mardi A. Crane-Godreau. 2015. The preparatory set: a novel approach to understanding stress, trauma, and the bodymind therapies. *Frontiers in Human Neuroscience* 9. 178. doi:10.3389/fnhum.2015.00178.

Basic to all motile life is a differential approach/avoid response to perceived features of environment. The stages of response are initial reflexive noticing and orienting to the stimulus, preparation, and execution of response. Preparation involves a coordination of many aspects of the organism: muscle tone, posture, breathing, autonomic functions, motivational/emotional state, attentional orientation, and expectations. The organism organizes itself in relation to the challenge. The present researchers propose to call this the "preparatory set" (PS). They suggest that the concept of the PS can offer a more nuanced and flexible perspective on the stress response than do current theories. The authors also hypothesize that the mechanisms of body-mind therapeutic and educational systems (BTES) can be understood through the PS framework. They suggest that the BTES, including meditative movement, meditation, somatic education, and the body-oriented psychotherapies, are approaches that use interventions on the PS to remedy stress and trauma. They discuss how the PS can be adaptive or maladaptive, how BTES interventions may restore adaptive PS, and how these concepts offer a broader and more flexible view of the phenomena of stress and trauma. They then offer supportive evidence for these hypotheses, and suggest directions for future research.

Piderman, Katherine M., Carmen Radecki Breitkopf, Sarah M. Jenkins, Terin T. Euerle, Laura A. Lovejoy, Gracia M. Kwete & Aminah Jatoi. 2015. A Chaplain-led Spiritual Life Review Pilot Study for Patients with Brain Cancers and Other Degenerative Neurologic Diseases. *Rambam Maimonides Medical Journal* 6(2). e0015. doi:10.5041/RMMJ.10199.

This pilot study was designed to describe changes in spiritual well-being (SWB), spiritual coping, and quality of life (QOL) in patients with brain cancer or other neurodegenerative diseases participating in a chaplain-led spiritual life review interview and development of a spiritual legacy document (SLD). Eligible participants were enrolled and completed baseline questionnaires. They were interviewed by a board-certified chaplain about spiritual influences, beliefs, practices, values, and spiritual struggles. An SLD was prepared for each participant, and one month follow-up questionnaires were completed. Two cases are summarized, and spiritual development themes are illustrated

within a spiritual development framework. A total of 27 patients completed baseline questionnaires and the interview, 24 completed the SLD, and 15 completed the follow-up questionnaire. Increases in SWB, religious coping, and QOL were detected. The majority maintained the highest (best) scores of negative religious coping, demonstrating minimal spiritual struggle.

Powell, Richard A., Linda Emanuel, George Handzo, John Lantos, Laura B. Dunn, Ellen L. Idler, Diane J. Wilkie, et al. 2015. Transcending differences to study the transcendent: an exploratory study of researchers' and chaplains' reflections on interdisciplinary spiritual care research collaboration. *BMC palliative care* 14. 12. doi:10.1186/s12904-015-0004-4.

Despite recognition of the centrality of professional board-certified chaplains (BCC) in palliative care, the discipline has little research to guide its practices. To help address this limitation, HealthCare Chaplaincy Network funded six proposals in which BCCs worked collaboratively with established researchers. Recognizing the importance of interdisciplinary collaboration in the development of a new field, this paper reports on an exploratory study of project members' reflections over time on the benefits and challenges of conducting inter-disciplinary spiritual care research. Data collection occurred in two stages. Stage 1 entailed two independent, self-reflective focus groups, organized by professional discipline, mid-way through the site projects. Stage 2 entailed end-of-project site reports and a conference questionnaire. Eighteen professionals participated in the group discussions. Stage 1: Researchers perceived chaplains as eager workers passionately committed to their patients and to research, and identified challenges faced by chaplains in learning to conduct research. Chaplains perceived researchers as passionate about their work, were concerned research might uncover negative findings for their profession, and sensed they used a dissimilar paradigm from their research colleagues regarding the "ways of relating" to knowledge and understanding. Stage 2: Researchers and chaplains noted important changes they ascribed to the interdisciplinary collaboration that were classified into six domains of cultural and philosophical understanding: respect; learning; discovery; creativity; fruitful partnerships; and learning needs.

Ramakrishnan, P., A. Karimah, K. Kuntaman, A. Shukla, B. K. M. Ansari, P. H. Rao, M. Ahmed, et al. 2015. Religious/spiritual characteristics of Indian and Indonesian physicians and their acceptance of spirituality in health care: A cross-cultural comparison. *Journal of Religion and Health* 54(2). 649–663. doi:10.1007/s10943-014-9906-3.

Religious/spiritual (R/S) characteristics of physicians influence their attitude toward integrative medicine and spiritual care. Indonesian physicians collaborate with traditional, complementary, and alternative medicine (TCAM) professionals within modern healthcare system, while Indian physicians are not reported to do so. The aim of the study was to understand the R/S characteristics and their influence on Indian and Indonesian physicians' acceptance of TCAM/spirituality. An exploratory, pilot, cross-cultural, cross-sectional study, using Religion and Spirituality in Medicine, and Physician Perspectives (RSMPP) survey questionnaire, compared r/s characteristics and perspectives on integrative medicine of 169 physicians from two allopathic, Sweekar-Osmania University (Sweekar-OU), India, University of Airlanga (UNAIR), Indonesia, and a TCAM/Central Research Institute of Unani Medicine (CRIUM) institute from India. More physicians from UNAIR and CRIUM (89.1 %) described themselves as "very"/"moderately" religious, compared to 63.5 % Sweekar-OU. Greater number of (84.6 %) UNAIR physicians described themselves as "very" spiritual and also significantly high in intrinsic religiosity as compared to Sweekar-OU and TCAM physicians; 38.6 % of UNAIR and 32.6 % of CRIUM participants reported life-changing spiritual experiences in clinical settings as against 19.7 % of Sweekar-OU; 92.3 % of UNAIR, compared to CRIUM (78.3 %) and Sweekar-OU (62 %), felt comfortable attending to patients' spiritual needs. Clinical comfort and not r/s characteristics of participants was the significant variable in full regression models, predictive of primary outcome criteria

Stratton, Stephen P. 2015. Mindfulness and Contemplation: Secular and Religious Traditions in Western Context. *Counseling & Values* 60(1). 100–118. doi:10.1002/j.2161-007X.2015.00063.x.

This article considers the growth of mindfulness as a secular practice embedded in a culture that is pluralistic but still primed by Western religion and spirituality. Eastern and Western meditational practices are compared and contrasted for greater understanding of the strengths of each. Western contemplative practices are described as an attentional training process with common factors related to mindfulness. Even as Eastern and Western meditational forms are distinguished, the shared concerns of those who value a religious-spiritual perspective in counseling are raised. Ethical implications are discussed related to informed consent, competence, and multicultural awareness.

Szczesniak, Rhonda D., Yuanshu Zou, J. Denise Wetzel, Neal Krause & Daniel H. Grossoehme. 2015. Increased congregational support for parents of children with cystic fibrosis. *Journal of Religion and Health* 54(2). 664–675. doi:10.1007/s10943-014-9928-x.

Positive health outcomes are related to adults' religious congregational participation. For parents of children with chronic disease, structured daily care routines and/or strict infection control precautions may limit participation. For this exploratory study, researchers examined the relationship between congregational support and religious coping by parents of children with cystic fibrosis (CF) compared to parents for whom child health issues were not significant stressors. CF parents reported higher levels of emotional support from congregation members and use of religious coping. Within-group differences were found for CF parents by denominational affiliation. Congregational support for parents dealing with child chronic disease is important.

Timmons, Shirley M. 2015. Review and evaluation of faith-based weight management interventions that target African American women. *Journal of Religion and Health* 54(2). 798–809. doi:10.1007/s10943-014-9912-5.

This integrative review was conducted to present results of the use of recommended criteria to evaluate faith-based weight management interventions (WMIs) that target African American women. This group experiences the highest prevalence of adult obesity in the US when compared to other ethnic groups. "Best practice" WMIs can help to alleviate obesity. Faith-based interventions hold promise for helping to address the problem of obesity in African American women since a significant portion of these persons views the church as a trusted entity that advocates for their well-being. No systematic evaluation of faith-based WMIs has been reported even though there is an ongoing plea for the need for better evaluation of health interventions that prioritizes comprehensive description of their attributes (e.g., linkage to theory, interventionists' background, and dosage) to enable replication and a broader assessment of their validity to include appropriateness and feasibility). Critique criteria were applied to faith-based WMIs (n=5) that target African American women. Findings highlighted the need for increased disclosure about the (1) interventionists' background, (2) intervention's location within the church setting, and (3) nature of any "pre-intervention" treatment. The review also indicated the need for interventions that are (1) designed from robust research methodologies (effectiveness) that include randomization of both church setting and participants, (2) deemed appropriate from the perspective of African American women targeted, and (3) are financially feasible-without steep participant incentives/implementation costs that compromise internal validity and any positive outcomes generated.

Tussing-Humphreys, Lisa M., Jessica L. Thomson & Stephen J. Onufrak. 2015. A church-based pilot study designed to improve dietary quality for rural, lower Mississippi Delta, African American adults. *Journal of Religion and Health* 54(2). 455–469. doi:10.1007/s10943-014-9823-5.

Researchers piloted a 6-month, church-based, behavioral intervention, Delta Body and Soul (DBS), for African American (AA) adults in the Lower Mississippi Delta (LMD). DBS was designed to improve overall dietary

quality in LMD AA adults. The intervention included six once-monthly group-based educational sessions implemented by trained church members. Program implementation, session attendance, congregational feedback, and baseline and post-intervention, demographic, health, behavioral, and clinical parameters were assessed. Participants were predominately AA, female, and overweight or obese. Retention rate was 79%. High adherence, defined as attendance at four or more educational sessions, was associated with dietary quality improvement and reduced blood glucose. Implementation of the DBS pilot intervention was feasible and may result in dietary quality and clinical improvements.

Victor, Elizabeth C., Hilary Bowman & Robert J. Thompson. 2015. Development of a Measure of College Students' Adherence to Religious Doctrine Concerning Sexual Behavior. *Journal of American College Health* 63(3). 210–214. doi:10.1080/07448481.2014.975721.

The authors developed a 14-item measure of adherence to religious doctrine concerning sexual behavior (ARDSB). The ARDSB psychometric properties were investigated to better understand religious motivations associated with changes in sexual behavior that may provide support for sexual health promotion and prevention programs. Participants were four hundred eighty-three undergraduates aged 18 to 26. Data were collected from an online survey during the 2012–2013 academic school year. Principle components factor analysis identified 2 factors: reasons to break religious doctrine and reasons to adhere to religious doctrine concerning sexual behavior. The subscales had good internal consistency. Correlations, t-tests, and analyses of variance of the subscales with measures of intrinsic and extrinsic religiosity and self-reported sexual behavior and risk provide support for concurrent validity.

Zeng, Xianglong, Mengdan Li, Bo Zhang & Xiangping Liu. 2015. Revision of the Philadelphia Mindfulness Scale for measuring awareness and equanimity in Goenka's Vipassana meditation with Chinese Buddhists. *Journal of Religion and Health* 54(2). 623–637. doi:10.1007/s10943-014-9870-y.

Goenka's 10-day V ipassana course is a widespread mindfulness course rooted in traditional Buddhism. Awareness and equanimity are two abilities cultivated in this course that are not featured in modern mindfulness-based psychotherapies and thereby not adequately measured by current mindfulness scales. The present article analyzed the Philadelphia Mindfulness Scale (PHLMS) and revised it into a short version to avoid confusion when measuring awareness and equanimity. Empirical data obtained using Chinese university students and Chinese Buddhists showed that the psychometric properties of the original version of the PHLMS had low factor loading on some items and that the short version had improved psychometric properties, especially for Buddhists. The short PHLMS also exhibited reasonable relationships with emotional outcomes and meditation practices among Buddhists. Implications for the future application of the PHLMS among Buddhists were also discussed.

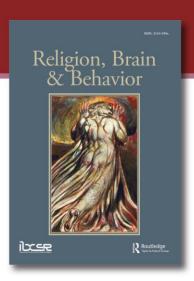
Zeng, Xianglong, Tian P. S. Oei, Yiqing Ye & Xiangping Liu. 2015. A critical analysis of the concepts and measurement of awareness and equanimity in Goenka's Vipassana meditation. *Journal of Religion and Health* 54(2). 399–412. doi:10.1007/s10943-013-9796-9.

Goenka's Vipassana meditation (GVM), a widely applied mindfulness training system rooted in Buddhism, is currently widely used. Although the two abilities cultivated in GVM, awareness and equanimity, exhibit certain similarities with the mindfulness cultivated in mindfulness-based psychotherapies (MBTs), they are not major concerns in MBTs. While many mindfulness scales have been created to measure different aspects of mindfulness constructs and certain scales and items can indeed reflect the basic abilities of awareness and equanimity, none of them can adequately capture the way in which those abilities and related ideas are applied in GVM. This paper presents a critical examination of the problems associated with the concepts and measurement of awareness and equanimity and presents potential solutions for achieving better measurement of these concepts in the future.

IBCSR RESEARCH REVIEW: APRIL, 2015

Zini, Avraham, Harold D. Sgan-Cohen & Paula Feder-Bubis. 2015. Religious leaders' opinions and guidance towards oral health maintenance and promotion: A qualitative study. *Journal of Religion and Health* 54(2). 373–386. doi:10.1007/s10943-013-9752-8.

Religions emphasize the supreme value of life. However, potential or concrete conflicts of perception between dictates of faith and science often present an inescapable dilemma. The aim of this qualitative research was to examine the views of spiritual and religious leaders towards general and oral health issues. A total of 11 eminent Jewish spiritual and religious community leaders were purposively chosen. They were interviewed using a semi-structured questionnaire. The verbatim transcriptions of the interviews were analyzed in the spirit of grounded theory, using qualitative data analysis software. Open, axial, and thematic coding served to build categories and themes. Analysis of participants' perspectives reflected that they, based upon Jewish theology, attributed high importance to primary prevention at both personal and community levels. Religious and orthodox people were depicted as being motivated towards maintaining oral health behaviors due to a sense of obligation to follow religious edicts, strong social support, and elevated perceived spiritual levels. The authors offer a theoretical model that can explain the potential high motivation among these communities towards implementing positive general and oral health behaviors. Religiosity may be regarded as an example of a psycho-social health determinant, encompassing spiritual belief ("psycho") and social support ("social") components.



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PART 3: BOOKS

3.1 SCIENTIFIC STUDY OF RELIGION, BRAIN, AND BEHAVIOR

- Bull, Michael, Jon P. Mitchell & David Howes (eds.). 2015. Ritual, Performance and the Senses. (Sensory Studies). New York: Bloomsbury Academic.
- Fox, Jonathan. 2015. Political Secularism, Religion, and the State: A Time Series Analysis of Worldwide Data. (Cambridge Studies in Social Theory, Religion and Politics). Cambridge: Cambridge University Press.
- Gregg, Stephen E. & Lynne Scholefield. 2015. Engaging with Living Religion: A Guide to Fieldwork in the Study of Religion. 1 edition. New York: Routledge.
- Johnson, Andy J. (ed.). 2015. Religion and Men's Violence Against Women. New York: Springer.
- Lyden, John C. & Eric Michael Mazur (eds.). 2015. *The Routledge Companion to Religion and Popular Culture*. (Routledge Religion Companions). New York: Routledge.
- Slone, D. Jason, James A. Van Slyke, Donald Wiebe, Luther H. Martin & William W. McCorkle (eds.). 2015. *The Attraction of Religion: A New Evolutionary Psychology of Religion*. New York: Bloomsbury Academic.

3.2 Spirituality & Health Research

Ferngren, Gary B. 2014. *Medicine and Religion: A Historical Introduction*. Baltimore: Johns Hopkins University Press.

PART 4: ARTICLES IN PRESS

4.1 SCIENTIFIC STUDY OF RELIGION, BRAIN, AND BEHAVIOR

- Baker, Joseph O., Kelli K. Smith & Yasmin A. Stoss. 2015. Theism, secularism, and sexual education in the united states. *Sexuality Research & Social Policy: A Journal of the NSRC*. doi:10.1007/s13178-015-0187-8.
- Garrison, Kathleen A., Thomas A. Zeffiro, Dustin Scheinost, R. Todd Constable & Judson A. Brewer. 2015. Meditation leads to reduced default mode network activity beyond an active task. *Cognitive, Affective & Behavioral Neuroscience*. doi:10.3758/s13415-015-0358-3.
- Hafizi, Sina, Harold G. Koenig & Doaa Ahmed Khalifa. 2015. Psychometric properties of the farsi version of hoge intrinsic religiosity scale in muslims: A brief report. *Pastoral Psychology*. doi:10.1007/s11089-015-0648-2.
- Hui, C. Harry, Esther Y. Y. Lau, Jasmine Lam, Shu-Fai Cheung & Wilfred W. F. Lau. 2015. Psychological Predictors of Chinese Christians' Church Attendance and Religious Steadfastness: A Three-Wave Prospective Study. *Psychology of Religion and Spirituality*. doi:10.1037/a0039216.
- Kimball, Richard & Michael Wissner. 2015. Religion, Poverty, and Politics: Their Impact on Women's Reproductive Health Outcomes. *Public Health Nursing (Boston, Mass.)*. doi:10.1111/phn.12196.
- Krause, Neal & R. David Hayward. 2015. Humility, Compassion, and Gratitude to God: Assessing the Relationships Among Key Religious Virtues. *Psychology of Religion and Spirituality*. doi:10.1037/rel0000028.
- Kurth, Florian, Nicolas Cherbuin & Eileen Luders. 2015. Reduced age-related degeneration of the hippocampal subiculum in long-term meditators. *Psychiatry Research: Neuroimaging*. doi:10.1016/j.pscychresns.2015.03.008.
- Lane, Justin E. 2015. Semantic network mapping of religious material: testing multi-agent computer models of social theories against real-world data. *Cognitive Processing*. doi:10.1007/s10339-015-0649-1.
- Lee, Sulim, Soyoung Choun, Carolyn M. Aldwin & Michael R. Levenson. 2015. Cross-cultural comparison of self-transcendent wisdom between the united states and korea. *Journal of Cross-Cultural Gerontology*. doi:10.1007/s10823-015-9259-8.
- Ritter, Ryan S., Jesse L. Preston, Erika Salomon & Daniel Relihan-Johnson. 2015. Imagine no religion: Heretical disgust, anger and the symbolic purity of mind. *Cognition & Emotion*. 1–19. doi:10.1080/02699931.2015.1030334.
- Saggar, Manish, Anthony P. Zanesco, Brandon G. King, David A. Bridwell, Katherine A. MacLean, Stephen R. Aichele, Tonya L. Jacobs, B. Alan Wallace, Clifford D. Saron & Risto Miikkulainen. 2015. Mean-field thalamocortical modeling of longitudinal EEG acquired during intensive meditation training. *NeuroImage*. doi:10.1016/j.neuroimage.2015.03.073.

Yin, Fang, Qiong Li & Heyong Shen. 2015. Death Dreams From an Implicit Perspective: A Cross-Cultural Comparison Between Tibetan and Han Chinese Dreamers. *Dreaming*. doi:10.1037/a0039148.

4.2 SPIRITUALITY & HEALTH RESEARCH

- Abdollahi, Abbas & Mansor Abu Talib. 2015. Spirituality Moderates Hopelessness, and Suicidal Ideation among Iranian Depressed Adolescents. *Death Studies*. doi:10.1080/07481187.2015.1013163.
- Achour, Meguellati, Mohd Roslan Mohd Nor & Mohd Yakub Zulkifli MohdYusoff. 2015. Islamic Personal Religiosity as a Moderator of Job Strain and Employee's Well-Being: The Case of Malaysian Academic and Administrative Staff. *Journal of Religion and Health*. doi:10.1007/s10943-015-0050-5.
- Barkin, Samuel H., Lisa Miller & Suniya S. Luthar. 2015. Filling the void: Spiritual development among adolescents of the affluent. *Journal of Religion and Health*. doi:10.1007/s10943-015-0048-z.
- Barton, Yakov A. & Lisa Miller. 2015. Spirituality and positive psychology go hand in hand: An investigation of multiple empirically derived profiles and related protective benefits. *Journal of Religion and Health*. doi:10.1007/s10943-015-0045-2.
- Braganza, Dinesh & Ralph L. Piedmont. 2015. The impact of the core transformation process on spirituality, symptom experience, and psychological maturity in a mixed age sample in india: A pilot study. *Journal of Religion and Health*. doi:10.1007/s10943-015-0049-y.
- Brodtkorb, Eylert & Karl Otto Nakken. The relationship between epilepsy and religiosity illustrated by the story of the visionary mystic Wise-Knut. *Epilepsy & Behavior*. doi:10.1016/j.yebeh.2015.04.017.
- Burns, Debra S., Susan M. Perkins, Yan Tong, Russell E. Hilliard & Larry D. Cripe. 2015. Music Therapy Is Associated With Family Perception of More Spiritual Support and Decreased Breathing Problems in Cancer Patients Receiving Hospice Care. *Journal of Pain and Symptom Management*. doi:10.1016/j.jpainsymman.2015.02.022.
- Cobb, Eleanor, Ariel Kor & Lisa Miller. 2015. Support for adolescent spirituality: Contributions of religious practice and trait mindfulness. *Journal of Religion and Health*. doi:10.1007/s10943-015-0046-1.
- Cope, Heidi, Melanie E. Garrett, Simon Gregory & Allison Ashley-Koch. 2015. Pregnancy continuation and organizational religious activity following prenatal diagnosis of a lethal fetal defect is associated with improved psychological outcome. *Prenatal Diagnosis*. doi:10.1002/pd.4603.
- Doane, Michael J. & Marta Elliott. 2015. Religiosity and Self-Rated Health: A Longitudinal Examination of Their Reciprocal Effects. *Journal of Religion and Health*. doi:10.1007/s10943-015-0056-z.
- Doehring, Carrie. 2015. Resilience as the relational ability to spiritually integrate moral stress. *Pastoral Psychology*.

- doi:10.1007/s11089-015-0643-7.
- Feagans Gould, Laura, Jacinda K. Dariotis, Mark T. Greenberg & Tamar Mendelson. 2015. Assessing fidelity of implementation (foi) for school-based mindfulness and yoga interventions: A systematic review. *Mindfulness*. doi:10.1007/s12671-015-0395-6.
- Frewen, Paul, Nicholas Rogers, Les Flodrowski & Ruth Lanius. 2015. Mindfulness and metta-based trauma therapy (mmtt): Initial development and proof-of-concept of an internet resource. *Mindfulness*. doi:10.1007/s12671-015-0402-y.
- Harding, Seeromanie, Ursula M. Read, Oarabile R. Molaodi, Aidan Cassidy, Maria J. Maynard, Erik Lenguerrand, Thomas Astell-Burt, Alison Teyhan, Melissa Whitrow & Zinat E. Enayat. 2015. The determinants of young adult social well-being and health (dash) study: Diversity, psychosocial determinants and health. *Social Psychiatry and Psychiatric Epidemiology*. doi:10.1007/s00127-015-1047-9.
- Holder, Mark D., Ben Coleman, Tim Krupa & Eugene Krupa. 2015. Well-being's relation to religiosity and spirituality in children and adolescents in Zambia. *Journal of Happiness Studies*. doi:10.1007/s10902-015-9640-x.
- Jones, Kim D., Scott D. Mist, Marie A. Casselberry, Ather Ali & Michael S. Christopher. Fibromyalgia Impact and Mindfulness Characteristics in 4986 People with Fibromyalgia. EXPLORE: The Journal of Science and Healing. doi:10.1016/j.explore.2015.04.006.
- Jun, Jung Sim, Kyoung Hag Lee & Brien L. Bolin. 2015. Stress and Spirituality on the Depressive Symptoms of Older Adults in Assisted Living: Gender Differences. *Journal of Evidence-Informed Social Work*. 1–13. doi:10.1080/15433714.2014.966229.
- Kim, Na-Young, Hyu-Jung Huh & Jeong-Ho Chae. 2015. Effects of religiosity and spirituality on the treatment response in patients with depressive disorders. *Comprehensive Psychiatry*. doi:10.1016/j.comppsych.2015.04.009.
- Kobayashi, Daiki, Takuro Shimbo, Osamu Takahashi, Roger B. Davis & Christina C. Wee. The Relationship between Religiosity and Cardiovascular Risk Factors in Japan: A Large-Scale Cohort Study. *Journal of the American Society of Hypertension*. doi:10.1016/j.jash.2015.04.003.
- Lin, Yu-Ling, Kun-Ming Rau, Yi-Hui Liu, Yu-Hua Lin, Jeremy Ying & Chia-Chan Kao. Development and validation of the Chinese Version of Spiritual Interests Related Illness Tool for patients with cancer in Taiwan. *European Journal of Oncology Nursing*. doi:10.1016/j.ejon.2015.03.005.
- Lipschitz, David L., Renee Kuhn, Anita Y. Kinney, Karen Grewen, Gary W. Donaldson & Yoshio Nakamura. 2015. An Exploratory Study of the Effects of Mind-Body Interventions Targeting Sleep on Salivary Oxytocin Levels in Cancer Survivors. *Integrative Cancer Therapies*. doi:10.1177/1534735415580675.
- Mastropieri, Biagio, Lorne Schussel, David Forbes & Lisa Miller. 2015. Inner resources for survival: Integrating interpersonal psychotherapy with spiritual visualization with homeless youth. *Journal of Religion and Health*.

- doi:10.1007/s10943-015-0044-3.
- Miklowitz, David J., Randye J. Semple, Monika Hauser, Dana Elkun, Marc J. Weintraub & Sona Dimidjian. 2015. Mindfulness-based cognitive therapy for perinatal women with depression or bipolar spectrum disorder. *Cognitive Therapy and Research*. doi:10.1007/s10608-015-9681-9.
- Milbury, Kathrin, Smitha Mallaiah, Gabriel Lopez, Zhongxing Liao, Chunyi Yang, Cindy Carmack, Alejandro Chaoul, Amy Spelman & Lorenzo Cohen. 2015. Vivekananda Yoga Program for Patients With Advanced Lung Cancer and Their Family Caregivers. *Integrative Cancer Therapies*. doi:10.1177/1534735415583554.
- Moore, Jon T. & Mark M. Leach. 2015. Dogmatism and Mental Health: A Comparison of the Religious and Secular. *Psychology of Religion and Spirituality*. doi:10.1037/rel0000027.
- O'Brien, Mary R. & David Clark. 2015. Spirituality and/or religious faith: A means for coping with the effects of amyotrophic lateral sclerosis/motor neuron disease? *Palliative & Supportive Care*. 1–12. doi:10.1017/S1478951515000097.
- Pearce, Michelle J., Deborah Medoff, Ryan E. Lawrence & Lisa Dixon. 2015. Religious Coping Among Adults Caring for Family Members with Serious Mental Illness. *Community Mental Health Journal*. doi:10.1007/s10597-015-9875-3.
- Ruscio, Aimee C., Christine Muench, Emily Brede & Andrew J. Waters. 2015. Effect of Brief Mindfulness Practice on Self-Reported Affect, Craving, and Smoking: A Pilot Randomized Controlled Trial Using Ecological Momentary Assessment. Nicotine & Tobacco Research: Official Journal of the Society for Research on Nicotine and Tobacco. doi:10.1093/ntr/ntv074.
- Sanders, Peter W., G. E. Kawika Allen, Lane Fischer, P. Scott Richards, David T. Morgan & Richard W. Potts. 2015. Intrinsic religiousness and spirituality as predictors of mental health and positive psychological functioning in latter-day saint adolescents and young adults. *Journal of Religion and Health*. doi:10.1007/s10943-015-0043-4.
- Sansone, Randy A. & Michael W. Wiederman. 2015. Religiosity/spirituality: Relationships with non-suicidal self-harm behaviors and attempted suicide. *The International Journal of Social Psychiatry*. doi:10.1177/0020764015579738.
- Sheffield, Karen M. & Cheryl L. Woods-Giscombé. 2015. Efficacy, Feasibility, and Acceptability of Perinatal Yoga on Women's Mental Health and Well-Being: A Systematic Literature Review. *Journal of Holistic Nursing*. doi:10.1177/0898010115577976.
- Wachholtz, Amy B., Christopher D. Malone & Kenneth I. Pargament. 2015. Effect of Different Meditation Types on Migraine Headache Medication Use. *Behavioral Medicine (Washington, D.C.)*. doi:10.1080/08964289.2015.1024601.
- Wu, Li-Fen, Malcolm Koo, Yu-Chen Liao, Yuh-Min Chen & Dah-Cherng Yeh. 2015. Development and Validation of the Spiritual Care Needs Inventory for Acute Care Hospital Patients in Taiwan. *Clinical Nursing Research*. doi:10.1177/1054773815579609.