



RESEARCH REVIEW

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

APRIL, 2014

INTRODUCTION

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

Articles for this issue were located by searching the following databases: Applied Science and Technology, ATLA Religion Database, General Science, PubMed, EBSCO Psychology and Behavioral Sciences Collection, PsycARTICLES, PsycINFO, ScienceDirect, and Web of Science. The search terms were altruism, god, goddess, meditat*, prayer, relig*, ritual, spiritu*, and yoga, tailored to the database being searched. Books were located on Amazon.com. Articles not directly relevant to the scientific study of religion were excluded, as were correspondence and reviews. From a universe of 795 articles, 144 articles have been retained from 70 journals. There are 55 pre-publication citations from 43 journals.

IRR is distributed free of charge via email to those who register at ibcsr.org. Wesley J. Wildman publishes *IRR* on behalf of IBCSR and the editor is Joel Daniels, a doctoral candidate at Boston University. Please send comments and suggestions to info@ibcsr.org. To unsubscribe, send an email to irr@ibcsr.org with “unsubscribe” in the subject line.

CONTENTS

Part 1: Articles in Religion, Brain, and Behavior	2
1.1 Scientific Study of Religion: Cognitive Neuroscience.....	2
1.2 Scientific Study of Religion: Evolution	4
1.3 Scientific Study of Religion: Psychology and Culture	5
1.4 Scientific Study of Religion: Method & Theory.....	12
Part 2. Articles in Spirituality & Health Research	14
2.1 Spirituality & Health: General Health & Well-Being	14
2.2 Spirituality & Health: Mental Health	25
2.3 Spirituality & Health: Method and Theory	32
Part 3. Books.....	47
3.1 Scientific Study of Religion, Brain, and Behavior.....	47
3.2 Spirituality & Health Research.....	47
Part 4. Articles in Press.....	48
4.1 Scientific Study of Religion, Brain, and Behavior.....	48
4.2 Spirituality & Health Research.....	49

PART 1: ARTICLES IN RELIGION, BRAIN, AND BEHAVIOR

1.1 SCIENTIFIC STUDY OF RELIGION: COGNITIVE NEUROSCIENCE

Arch, Joanna J., Kirk Warren Brown, Derek J. Dean, Lauren N. Landy, Kimberley D. Brown & Mark L. Laudenslager. 2014. Self-compassion training modulates alpha-amylase, heart rate variability, and subjective responses to social evaluative threat in women. *Psychoneuroendocrinology* 42. 49–58.

doi:10.1016/j.psyneuen.2013.12.018.

A growing body of research has revealed that social evaluative stressors trigger biological and psychological responses that in chronic forms have been linked to aging and disease. Recent research suggests that self-compassion may protect the self from typical defensive responses to evaluation. Researchers investigated whether brief training in self-compassion moderated biopsychological responses to the Trier Social Stress Test (TSST) in women. Compared to attention (placebo) and no-training control conditions, brief self-compassion training diminished sympathetic (salivary alpha-amylase), cardiac parasympathetic, and subjective anxiety responses, though not HPA-axis (salivary cortisol) responses to the TSST. Self-compassion training also led to greater self-compassion under threat relative to the control groups. In that social stress pervades modern life, self-compassion represents a promising approach to diminishing its potentially negative psychological and biological effects.

Fox, Kieran C R, Savannah Nijeboer, Matthew L Dixon, James L Floman, Melissa Ellamil, Samuel P Rumak, Peter Sedlmeier & Kalina Christoff. 2014. Is meditation associated with altered brain structure? A systematic review and meta-analysis of morphometric neuroimaging in meditation practitioners. *Neuroscience and Biobehavioral Reviews* 43C. 48–73.

doi:10.1016/j.neubiorev.2014.03.016.

Numerous studies have begun to address how the brain's gray and white matter may be shaped by meditation.

The Institute for the Biocultural Study of Religion

Membership Benefits

Religion, Brain & Behavior

Discounted annual subscription to the flagship journal in the biocultural study of religion

Contribute to IBCSR.org

Submit events, links, news, and reviews to the leading site for the biocultural study of religion

Research Review Database

Search an online database with all articles ever published in the scientific study of religion

Receive IBCSR Newsletters

Research news in the scientific study of religion, as well as Institute news, delivered to your email inbox



Join today!
www.ibcsr.org

Calendar year memberships US\$45
Discounts for retirees and students

This research is yet to be integrated, however, and two fundamental questions remain: Is meditation associated with altered brain structure? If so, what is the magnitude of these differences? To address these questions, researchers reviewed and meta-analyzed 123 brain morphology differences from 21 neuroimaging studies examining approximately 300 meditation practitioners. Anatomical likelihood estimation (ALE) meta-analysis found eight brain regions consistently altered in meditators, including areas key to meta-awareness (frontopolar cortex/BA 10), exteroceptive and interoceptive body awareness (sensory cortices and insula), memory consolidation and reconsolidation (hippocampus), self and emotion regulation (anterior and mid cingulate; orbitofrontal cortex), and intra- and interhemispheric communication (superior longitudinal fasciculus; corpus callosum). Effect size meta-analysis (calculating 132 effect sizes from 16 studies) suggests a global 'medium' effect size. Publication bias and methodological limitations are strong concerns, however.

Gard, Tim, Maxime Taquet, Rohan Dixit, Britta K Hölzel, Yves-Alexandre de Montjoye, Narayan Brach, David H Salat, Bradford C Dickerson, Jeremy R Gray & Sara W Lazar. 2014. Fluid intelligence and brain functional organization in aging yoga and meditation practitioners. *Frontiers in Aging Neuroscience* 6. 76.
doi:10.3389/fnagi.2014.00076.

Numerous studies have documented the normal age-related decline of neural structure, function, and cognitive performance. Preliminary evidence suggests that meditation may reduce decline in specific cognitive domains and in brain structure. Here researchers extended this research by investigating the relation between age and fluid intelligence and resting state brain functional network architecture using graph theory, in middle-aged yoga and meditation practitioners, and matched controls. Fluid intelligence declined slower in yoga practitioners and meditators combined than in controls. Resting state functional networks of yoga practitioners and meditators combined were more integrated and more resilient to damage than those of controls. Furthermore, mindfulness was positively correlated with fluid intelligence, resilience, and global network efficiency. These findings reveal the possibility to increase resilience and to slow the decline of fluid intelligence and brain functional architecture and suggest that mindfulness plays a mechanistic role in this preservation.

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

Major depressive disorder (MDD) is associated with functional abnormalities in fronto-meso-limbic networks contributing to decision-making, affective and reward processing impairments. Such functional disturbances may underlie a tendency for enhanced altruism driven by empathy-based guilt observed in some patients. However, despite the relevance of altruistic decisions to understanding vulnerability, as well as everyday psychosocial functioning, in MDD, their functional neuroanatomy is unknown. Using a charitable donations experiment with fMRI, researchers compared 14 medication-free participants with fully remitted MDD and 15 demographically-matched control participants without MDD. Compared with the control group, the remitted MDD group exhibited enhanced BOLD response in a septal/subgenual cingulate cortex (sgACC) region for charitable donation relative to receiving simple rewards and higher striatum activation for both charitable donation and simple reward relative to a low level baseline. The groups did not differ in demographics, frequency of donations or response times, demonstrating only a difference in neural architecture. Results indicate that altruistic decisions probe residual sgACC hypersensitivity in MDD even after symptoms are fully remitted. The sgACC has previously been shown to be associated with guilt which promotes altruistic decisions. In contrast, the striatum showed common activation to both simple and altruistic rewards and could be involved in the so-called “warm glow” of donation. Enhanced neural response in the depression group, in areas previously linked to altruistic

decisions, supports the hypothesis of a possible association between hyper-altruism and depression vulnerability, as shown by recent epidemiological studies.

Reeves, Roy R, Samet Kose & Abuhuziefa Abubakr. 2014. Temporal lobe discharges and glossolalia. *Neurocase* 20(2). 236–240.
doi:10.1080/13554794.2013.770874.

Glossolalia (speaking in tongues) is a religious phenomenon of which there has been only limited scientific investigation. Described here is the case of a 44-year-old woman who had clonic jerking of the left forearm while speaking in tongues. Waking EEG while she was thinking of nothing in particular was normal. After several minutes of silently praying in tongues she manifested right temporal sharp wave discharges and may have been in a state resembling light sleep. Possible relationships between glossolalia, ecstatic religious phenomena, and temporal lobe electrical discharges are discussed.

Schutte, Nicola S. & John M. Malouff. 2014. A meta-analytic review of the effects of mindfulness meditation on telomerase activity. *Psychoneuroendocrinology* 42. 45–48.
doi:10.1016/j.psyneuen.2013.12.017.

The enzyme telomerase, through its influence on telomere length, is associated with health and mortality. Four pioneering randomized control trials, including a total of 190 participants, provided information on the effect of mindfulness meditation on telomerase. A meta-analytic effect size of $d=0.46$ indicated that mindfulness meditation leads to increased telomerase activity in peripheral blood mononuclear cells. These results suggest the need for further large-scale trials investigating optimal implementation of mindfulness meditation to facilitate telomerase functioning.

1.2 SCIENTIFIC STUDY OF RELIGION: EVOLUTION

Andre, J.-B. 2014. Mechanistic constraints and the unlikely evolution of reciprocal cooperation. *Journal of Evolutionary Biology* 27(4). 784–795.
doi:10.1111/jeb.12351.

Social evolution theory faces a puzzle: a gap between theoretical and empirical results on reciprocity. On the one hand, models show that reciprocity should evolve easily in a wide range of circumstances. On the other hand, empirically, few clear instances of reciprocity (even in a broad sense) have been found in nonhuman animals. In this paper, the author aims to suggest and evaluate a novel reason concurring to solve this puzzle. It is proposed that it is difficult for reciprocity to evolve because it raises an evolutionary problem of bootstrapping: it requires that two complementary functions: (i) the ability to cooperate and (ii) the ability to respond conditionally to the cooperation of others, arise together and reach a significant frequency, whereas neither of them can be favoured in the absence of the other. Analytic models and simulations are created showing that, for this reason, the evolutionary emergence of reciprocal cooperation is highly unlikely.

Clément, Fabrice, Paul Harris, Stéphane Bernard, Jean-Philippe Antonietti & Laurence Kaufmann. 2014. Rousseau's child: Preschoolers expect strangers to favor prosocial actions. *Swiss Journal of Psychology* 73(2). 105–110.
doi:10.1024/1421-0185/a000129.

Modern thinking about human nature is notoriously divided between two contradictory notions: The Hobbesian tradition portrays people as driven by selfish desires, while the Rousseauian tradition recognizes altruistic proclivities as true motivations to cooperate. Researchers tested preschoolers' predictions about the prosocial or antisocial manner in which people would behave toward each other. Four stories were presented to 3- and 4-year-old children. In each story, the protagonists could either cooperate, act in terms of their own interests, or adopt a behavior unrelated to the ongoing scenario. Children as young as 3 years of age expected the protagonists to behave

prosocially – and even more so if the protagonists were female. The results suggest that, even at an early age, children are inclined to adopt a “Rousseau-like” stance rather than a “suspicious” or “pessimistic” Hobbesian stance.

Gervais, Will M. 2014. Everything is permitted? People intuitively judge immorality as representative of atheists. *PLoS One* 9(4). e92302.
doi:10.1371/journal.pone.0092302.

Scientific research yields inconsistent and contradictory evidence relating religion to moral judgments and outcomes, yet most people on earth nonetheless view belief in God (or gods) as central to morality, and many view atheists with suspicion and scorn. To evaluate intuitions regarding a causal link between religion and morality, this paper tested intuitive moral judgments of atheists and other groups. Across five experiments (n=1,152), American participants intuitively judged a wide variety of immoral acts (e.g., serial murder, consensual incest, necrobestiality, cannibalism) as representative of atheists, but not of eleven other religions, ethnic, and cultural groups. Even atheist participants judged immoral acts as more representative of atheists than of other groups. These findings demonstrate a prevalent intuition that belief in God serves a necessary function in inhibiting immoral conduct, and may help explain persistent negative perceptions of atheists.

Matsuo, Tadasu, Marko Jusup & Yoh Iwasa. 2014. The conflict of social norms may cause the collapse of cooperation: Indirect reciprocity with opposing attitudes towards in-group favoritism. *Journal of Theoretical Biology* 346. 34–46.
doi:10.1016/j.jtbi.2013.12.018.

Indirect reciprocity is a cooperation-maintaining mechanism based on the social evaluation of players. Here, researchers consider the case of a group in which two social norms with opposing attitudes towards in-group favoritism are mixed. One norm, called “Bushido”(the way of warriors), regards cooperation with outsiders as betrayal, whereas the second norm, called “Shonindo” (the way of merchants), regards cooperation with outsiders as desirable. Each member of the group, irrespective of being a Bushido or a Shonindo player, is evaluated in two different ways and assigned two different labels: “ally” or “enemy” according to the Bushido evaluation; “good” or “bad” according to the Shonindo evaluation. These labels change in response to the action taken (cooperation or defection) when acting as a donor, as well as the label attached to the recipient. In addition to Bushido players, who cooperate with an ally and defect from an enemy, and Shonindo players, who cooperate with a good recipient and defect from a bad recipient, the group contains a third kind of players: unconditional defectors. The fractions of the three types of players follow the replicator dynamics. If the probability of interacting with outsiders is small, and if the cost-to-benefit ratio of cooperation is low, researchers observe several important patterns. Each social norm is able to maintain a high level of cooperation when dominant. Bushido and Shonindo players evaluate each other unfavorably and engage in a severe conflict. In the end, only one norm permeates the whole group driving the other to the extinction. When both social norms are equally effective, a rare occurrence of unconditional defectors may lead to a successful invasion.

1.3 SCIENTIFIC STUDY OF RELIGION: PSYCHOLOGY AND CULTURE

Boellinghaus, Inga, Fergal W. Jones & Jane Hutton. 2014. The role of mindfulness and loving-kindness meditation in cultivating self-compassion and other-focused concern in health care professionals. *Mindfulness* 5(2). 129–138.
doi:10.1007/s12671-012-0158-6.

Therapists and other health professionals might benefit from interventions that increase their self-compassion and other-focused concern since these may strengthen their relationships with clients, reduce the chances of empathetic distress fatigue and burnout and increase their well-being. This article aimed to review the effectiveness of mindfulness-based interventions (MBIs) and loving-kindness meditation (LKM) in cultivating clinicians’ self-

compassion and other-focused concern. Despite methodological limitations, the studies reviewed offer some support to the hypothesis that MBIs can increase self-compassion in health professionals, but provide a more mixed picture with regard to MBIs' affect on other-focused concern. The latter finding may in part be due to ceiling effects; therefore future research, employing more sensitive measures, would be beneficial. Turning to LKM, there is encouraging preliminary evidence from non-clinician samples that LKM, or courses including LKM and related practices, can increase self-compassion and other-focused concern. As well as extending the LKM evidence base to health professionals and using more robust, large-scale designs, future research could usefully seek to identify the characteristics of people who find LKM challenging and the supports necessary to teach them LKM safely.

Brandt, Mark J. & Christine Reyna. 2014. To love or hate thy neighbor: The role of authoritarianism and traditionalism in explaining the link between fundamentalism and racial prejudice. *Political Psychology* 35(2). 207–223.
doi:10.1111/pops.12077.

Fundamentalism is consistently related to racial prejudice, yet the mechanisms for this relationship are unclear. Researchers identify two core values of fundamentalism, authoritarianism and traditionalism, that independently contribute to the fundamentalism-racial prejudice relationship. Researchers also contextualize the fundamentalism-racial prejudice relationship by suggesting that fundamentalists may show prejudice based on conceptions of African Americans as violating values but show tolerance when prejudice is less justifiable. These ideas are tested and confirmed using three data sets from the American National Election Studies. Across all three samples, fundamentalism is related to increases in symbolic racism but decreases in negative affect towards African Americans, and these relationships are mediated by both authoritarianism and traditionalism.

Burris, Christopher T. & Fabio Sani. 2014. The immutable likeness of “being”: Experiencing the self as timeless. *International Journal for the Psychology of Religion* 24(2). 85–103.

Three studies explored the structure and correlates of the Immutable Self (IS) scale, intended to measure individual differences in the propensity for experiences typified by a sense that the conscious self is timeless, predating conception and surviving death, and therefore not contingent upon being incarnate. IS was linked to aversion to the spatial and temporal limitations of physical existence, a propensity for self-transcendence, and interest in activities framed as facilitating the latter. Higher versus lower IS scorers perceived death to be mysterious but rejected the idea that it heralds complete annihilation of the self. Higher IS was linked to a greater willingness to self-identify with a religious group and to embrace a spiritual/religious motivation to transcend boundaries (immanence orientation). When the salience of the body was increased via incidental mirror exposure, higher IS scores predicted less condemnation of an individual who made a decision that shortened his life. A propensity for IS experiences may therefore have a profound impact on how people deal with the limitations inherent in physical existence.

Charlier, Philippe. 2014. Naming the body (or the bones): Human remains, anthropological/medical collections, religious beliefs, and restitution. *Clinical Anatomy* 27(3). 291–295.
doi:10.1002/ca.22358.

Human bones and biological remains conserved in anthropological, medical, and archaeological collections are foci of ethical debate, as recently illustrated by the affair of Charles Byrne's bones. In the near future, curators will have to choose between global conservation of all (or almost all) anthropological collections and systematic restitution to their original communities or families. Various proposals and examples of restitution and nonrestitution are given (with justifications) in order to support the concept that the body (especially the dead body) is not property. The present researchers propose that the only element supporting arguments in favor of restitution could be the name of the individual, highlighting the importance of all identification processes for such "artifacts." This is undoubtedly a universal value: naming the dead, identifying and then burying the person, i.e., reversing the progression along the timeline from individual to scientific specimen. Such elements could be of great

interest to all universities and medical institutions that keep human remains in their collections for educational or historical purposes when they are confronted with ethical problems and/or repatriation requests.

- Heiphetz, Larisa, Elizabeth S. Spelke, Paul L. Harris & Mahzarin R. Banaji. 2014. What do different beliefs tell us? An examination of factual, opinion-based, and religious beliefs. *Cognitive Development* 30. 15–29.
doi:10.1016/j.cogdev.2013.12.002.

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

- Lindeman, Marjaana, Bethany Heywood, Tapani Riekkki & Tommi Makkonen. 2014. Atheists become emotionally aroused when daring god to do terrible things. *International Journal for the Psychology of Religion* 24(2). 124–132.

Researchers examined whether atheists exhibit evidence of emotional arousal when they dare God to cause harm to themselves and their intimates. In Study 1, the participants (16 atheists, 13 religious individuals) read aloud 36 statements of three different types: God, offensive, and neutral. In Study 2 (n=19 atheists), 10 new stimulus statements were included in which atheists wished for negative events to occur. The atheists did not think the God statements were as unpleasant as the religious participants did in their verbal reports. However, the skin conductance level showed that asking God to do awful things was equally stressful to atheists as it was to religious people and that atheists were more affected by God statements than by wish or offensive statements. The results imply that atheists' attitudes toward God are ambivalent in that their explicit beliefs conflict with their affective response.

- Lomas, Tim, Trudi Edginton, Tina Cartwright & Damien Ridge. 2014. Men developing emotional intelligence through meditation? Integrating narrative, cognitive and electroencephalography (EEG) evidence. *Psychology of Men & Masculinity* 15(2). 213–224.
doi:10.1037/a0032191.

Traditional masculine norms around emotions (e.g., inexpressiveness) can mean men have difficulties managing their emotions, contributing to potential mental health problems. However, it is recognized that men and masculinities are diverse, and that some men can positively self-manage their mental health, although this has received little attention in the literature. Researchers sought to find men who had discovered ways to engage constructively with their emotions, in this case through meditation. Thirty male meditators, recruited using a maximum variation sampling strategy, participated in a longitudinal mixed-methods study in the United Kingdom. Participants undertook 2 cognitive neuroscience sessions, approximately 1 year apart, composed of cognitive assessments of attention combined with electroencephalograph measurement during task performance and meditation. In-depth narrative interviews exploring men's experiences of meditation were also conducted at both time points, analyzed using a modified constant comparison approach. Taken together, the quantitative and qualitative results suggest that men developed attention skills through meditation, although there were variations according to previous meditation experience (e.g., a sharper longitudinal increase in theta amplitude under

meditation for novice practitioners). Moreover, development of attention appeared to enhance men's emotional intelligence, which in turn could be conducive to well-being.

- McCauley, John F. 2014. Measuring and reducing religious bias in post-conflict zones: Evidence from Côte d'Ivoire. *Political Psychology* 35(2). 267–289.
doi:10.1111/pops.12059.

This article explores how religious bias, once it has been cultivated through politicization and violence, can be reduced. Using foundations from social identity theory and superordinate goal theory, the author develops post-conflict bias reduction strategies that include competing types of superordinate messages, economic and theological, as well as different sources of those messages. To test these strategies, video-based information treatments are used, coupled with Implicit Association Tests in Bouaké, Côte d'Ivoire. The experimental findings point to three conclusions. First, implicit Muslim-Christian bias in the study area remains high. Second, Christians in the study tend to be more biased against Muslims than Muslims are against Christians. Third, the effectiveness of treatments depends on the subjects who receive those treatments: theological messages are most effective in reducing bias among Muslims, regardless of their source, and strategies that rely on political leaders to deliver messages perform best among Christians, regardless of the content.

- McDermott, Ryon C., Jonathan P. Schwartz, Lori D. Lindley & Josiah S. Proietti. 2014. Exploring men's homophobia: Associations with religious fundamentalism and gender role conflict domains. *Psychology of Men & Masculinity* 15(2). 191–200.
doi:10.1037/a0032788.

Research and theory indicate that gender role conflict and religious fundamentalism are key predictors of men's homophobia. To date, however, investigators have not examined the combined contributions of these variables in relation to homophobia. The present study proposed and tested a structural model in which the relationship between religious fundamentalism and homophobia was partially mediated by gender role conflict domains. After controlling for socially desirable response bias in a sample of undergraduate, primarily heterosexual men from a midsized southern university (n=200), the hypothesis that gender role conflict domains would partially mediate the relationship between religious fundamentalism and homophobia was not supported. A model in which gender role conflict and religious fundamentalism made unique contributions to homophobia was the best fit to the data, and restrictive affectionate behavior between men, religious fundamentalism, and a suppression effect on restrictive emotionality explained 52% of the variance in men's homophobia. Results are discussed in relation to gender role conflict theory, religious fundamentalism, and potential implications for research and practice.

- Mellinger, Christopher & Ronald F. Levant. 2014. Moderators of the relationship between masculinity and sexual prejudice in men: friendship, gender self-esteem, same-sex attraction, and religious fundamentalism. *Archives of Sexual Behavior* 43(3). 519–530.
doi:10.1007/s10508-013-0220-z.

Masculinity has been found to predict the sexual prejudice of heterosexual men against gay men. The present study investigated the role of four variables as moderators of the relationships between two masculinity constructs (endorsement of traditional masculinity ideology and gender role conflict) and sexual prejudice in men. The hypothesized moderators were: direct and indirect friendships with gay men, gender self-esteem, acknowledged same-sex attraction, and religious fundamentalism. A total of 383 men completed 8 scales plus a demographic questionnaire. Direct friendship strengthened the positive relationship between masculinity ideology and sexual prejudice, contrary to hypothesis. This finding could mean that high masculinity ideology scores reduced the likelihood that a man with many gay friends would let go of his prejudice. Direct friendship did not moderate the relationship between gender role conflict and sexual prejudice nor did indirect friendship moderate either relationship; however, both forms of friendship predicted prejudice, as hypothesized. Gender self-esteem strengthened the positive relationships between both masculinity variables and sexual prejudice as hypothesized. Same-sex

attraction weakened the relationship between gender role conflict and sexual prejudice as hypothesized, but contrary to hypothesis did not moderate the relationship between masculinity ideology and sexual prejudice. Religious fundamentalism predicted prejudice, but showed no significant moderation. The results were discussed in terms of limitations and suggestions for future research and application. In conclusion, this line of investigation appears promising and should be continued and the present findings can be utilized in anti-prejudice social marketing campaigns and in counseling.

- Muñoz-García, Antonio & María José Aviles-Herrera. 2014. Effects of academic dishonesty on dimensions of spiritual well-being and satisfaction: A comparative study of secondary school and university students. *Assessment & Evaluation in Higher Education* 39(3). 349–363.
doi:10.1080/02602938.2013.832729.

Recent research has shown an increase in academic dishonesty in different educational systems and levels, and negative effects on the academic institution, society and the students themselves. In order to describe the differential perception of academic dishonesty by Spanish secondary school and university students, and to study its consequences on psychological well-being, comparisons between two groups of students from secondary education and university were carried out, using measures of the perception and execution by others of dishonest behavior, as well as psychological well-being and satisfaction with life and learning. University students revealed greater laxity of conscience, considering dishonest behavior to be less serious and more common than secondary school students, and indulging in more dishonest behavior themselves. They also showed greater spiritual, personal, community and environmental well-being, and greater satisfaction with learning. However, transcendental spiritual well-being was greater in the group of secondary education students. Academic dishonesty was associated with satisfaction with learning in both groups, and with satisfaction with life in secondary education. Its link with measures of spiritual well-being was greater in the group of secondary education students, being linked to transcendental well-being only in the group of university students. No gender differences were observed in any of the variables.

- Pennycook, Gordon, James Allan Cheyne, Nathaniel Barr, Derek J. Koehler & Jonathan A. Fugelsang. 2014. The role of analytic thinking in moral judgments and values. *Thinking & Reasoning* 20(2). 188–214.
doi:10.1080/13546783.2013.865000.

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

- Petrican, Raluca & Christopher T. Burris. 2014. Transcendent Experiences Motivate “Escape” From the Body via Intimate Partnerships. *International Journal for the Psychology of Religion* 24(2). 104–123.
doi:10.1080/10508619.2013.771997.

Three studies involving younger and older samples tested a model centered upon individual differences in one's personal history of “immutable self”(IS) experiences, typified by consciousness transcending the usual spatiotemporal bounds associated with embodiment, such that conscious existence no longer seems contingent upon

the physical body. In Study 1, optical-acoustic stimulation evoked an IS-related experience that increased the sense of physical containment (i.e., feeling isolated within one's body, separate from the rest of the world) among some individuals. Studies 2 and 3 showed that the heightened sense of physical containment associated with a history of IS experiences predicted intensified motivation to maintain an intimate partnership, previously shown elsewhere to reduce the salience of the body. Key comparisons between elderly Parkinson's disease patients versus their spouses and healthy controls provided suggestive evidence that dopaminergic function may be a critical contributor to this motivational sequence.

Piazza, Jared & Paulo Sousa. 2014. Religiosity, political orientation, and consequentialist moral thinking. *Social Psychological and Personality Science* 5(3). 334–342.
doi:10.1177/1948550613492826.

Three studies demonstrated that the moral judgments of religious individuals and political conservatives are highly insensitive to consequentialist (i.e., outcome-based) considerations. In Study 1, both religiosity and political conservatism predicted a resistance toward consequentialist thinking concerning a range of transgressive acts, independent of other relevant dispositional factors (e.g., disgust sensitivity). Study 2 ruled out differences in welfare sensitivity as an explanation for these findings. In Study 3, religiosity and political conservatism predicted a commitment to judging “harmless” taboo violations morally impermissible, rather than discretionary, despite the lack of negative consequences rising from the act. Furthermore, non-consequentialist thinking style was shown to mediate the relationship religiosity/conservatism had with impermissibility judgments, while intuitive thinking style did not. These data provide further evidence for the influence of religious and political commitments in motivating divergent moral judgments, while highlighting a new dispositional factor, non-consequentialist thinking style, as a mediator of these effects.

Ryan, Louise. 2014. “Islam does not change”: Young people narrating negotiations of religion and identity. *Journal of Youth Studies* 17(4). 446–460.
doi:10.1080/13676261.2013.834315.

There is growing interest in how diasporic Islam may be embraced by young people as a way of carving out space and identity in migratory contexts. Islamic identity may facilitate a critical stance in relation to both the “host” society and also to parental authority and “traditional” ethnic practices. However, there have been recent critiques of the tendency to oversimplify and exaggerate the extent of homogeneity in diasporic Islamic beliefs. This paper draws on lively focus group narratives of young people in London to explore the interactive presentation of Islamic selves. While on the surface these young people present themselves through “true”, “universal” Islamic identity, on closer reading subtleties of difference and contingency become more apparent. By bringing together young people who practice Islam in different ways, this paper offers a deeper insight into how claims to a universal identity are actively constructed and contested through particular social relationships and interactions in specific structural contexts. In so doing, the paper takes up recent calls for more research on the personal meaning of religion for Muslim youngsters.

Schweitzer, Jeffrey R. & Roger M. Knudson. 2014. Dialogues with presence: A narrative inquiry into calling and dreams. *Pastoral Psychology* 63(2). 133–146.
doi:10.1007/s11089-013-0547-3.

According to Hillman (1996), the experience of a calling necessitates a mythic sensibility that our contemporary paradigms of knowing have all but erased. However, the arena of religious vocation is one in which the notion of a calling and of a purposeful engagement with the “unseen” retains significance. Using a narrative methodology, researchers examined phenomenological dimensions of the calling experiences and dreams in the lives of three female ministers. In this article, researchers first present a compelling narrative of one such calling experience. Next, researchers elaborate three themes—“melancholy,” “intimacy,” and “courage”—that recur throughout her

narrative. Last, researchers conclude with a commentary on the unique role of dreams as potentially mimetic to religious experience.

- Streib, Heinz & Constantin Klein. 2014. Religious styles predict interreligious prejudice: A study of German adolescents with the Religious Schema Scale. *International Journal for the Psychology of Religion* 24(2). 151–163.

Based on a sample of 340 German adolescents age 12 to 25, this article presents an analysis of the effects of religion on two instances of interreligious prejudice: anti-Islamic and anti-Semitic prejudice. Reflecting the emergent interest in implementing a perspective of religious maturity and religious development into research on religion and prejudice, the present study has included the Religious Schema Scale (RSS) which, with its three subscales, Truth of Texts & Teachings (ttt), Fairness, Tolerance & Rational Choice (ftr), and Xenosophia/Interreligious Dialog (xenos), differentiates religious styles. Regression analyses indicate the superior explanatory power of the RSS in comparison to other measures of religiosity. The RSS subscale ttt relates to and predicts anti-Islamic and anti-Semitic prejudice, whereas ftr and xenos relate to and predict disagreement with interreligious prejudice. Results of an analysis of variance using high agreement on ttt, ftr, and xenos for group construction indicate a decrease in interreligious prejudice in relation to religious development.

- Tung, Rosalie L, Chris Baumann & Hamin Hamin. 2014. Cross-cultural management of money: The roles of ethnicity, religious affiliation, and income levels in asset allocation. *International Journal of Cross Cultural Management* 14(1). 85–104.
doi:10.1177/1470595812470441.

This study examines the interplay between ethnicity, religious affiliation, and income levels to understand differences in managing money. Asset allocation decisions among 730 Caucasian and ethnic Chinese were examined. Respondents in Australia, Canada, and China revealed their monetary decisions in an online survey. Multivariate analysis of variance was used to examine differences and interaction effects between ethnic, religious, and income groups. The study found that for the higher-income respondents, asset allocation decisions converged despite differences in ethnic and religious background. In the lower-income segment, asset allocation decisions varied along ethnic lines. These differences were further compounded by their religious background. The implications of this study of management are twofold: the high-income group can be treated as one segment, for example, from the international marketing segmentation perspective. On the other hand, respondents in the low-income bracket diverged in their investment strategies on the basis of ethnicity and religion. As such, they ought to be treated separately according to their values.

- Weingarten, Carol P., Lester Luborsky, Tomasz Andrusyna, Louis Diguier & Jean Descôteaux. 2014. Relationships between God and people: An interpersonal study of scriptures. *International Journal for the Psychology of Religion* 24(2). 133–150.

In past research researchers systematically examined relationships between God and people portrayed in English narratives from the Torah and New Testament. This article extends this comparative approach to include English narratives from the Qur'an. There were 763 interpersonal narratives from these three scriptures that were examined. Frequent themes for God/human relationships included "helpful," "divine," "hurtful," and "controlling" representations. In all scriptures' global patterns, the most frequently appearing themes for God's wishes and responses toward people were positive relationship themes. Narratives about men exemplars and women showed many positive relationship themes, often with humble or cooperative themes as highest ranking responses from people. All scriptures showed evidence of in-group out-group bias. Differences between scriptures included results on the nature of highest scored global themes and how scripture narratives portrayed in-group out-group bias.

Wood, Andrew William & Abigail Holland Conley. 2014. Loss of Religious or Spiritual Identities Among the LGBT Population. *Counseling and Values* 59(1). 95–111.
doi:10.1002/j.2161-007X.2014.00044.x.

Lesbian, gay, bisexual, and transgender (LGBT) individuals are at risk of having negative experiences with religion because of mainstream religions' non-LGBT-affirming stance. Negative religious experiences can lead to religious or spiritual (R/S) struggles and loss of R/S identity to maintain sexual identity. The authors describe R/S abuse, R/S struggle, and how these can result in loss of R/S identity in LGBT individuals. They provide a case study and discuss counseling implications and areas for future research.

1.4 SCIENTIFIC STUDY OF RELIGION: METHOD & THEORY

Berkowski, Monisha & Douglas A. MacDonald. 2014. Childhood Trauma and the Development of Paranormal Beliefs. *Journal of Nervous and Mental Disease* 202(4). 305–312.
doi:10.1097/NMD.000000000000123.

Belief in the paranormal is fairly prevalent in the general population. Previous research has shown a link between several personality characteristics and paranormal beliefs. The current study attempted to further investigate this link by replicating previous models that have shown a link between childhood trauma, fantasy proneness, and paranormal beliefs. In addition, the study attempted to expand on this model by including other variables such as stigma, resiliency, and coping style. The study used a sample of 198 undergraduate students. A significant correlation between trauma and paranormal beliefs was found. Partial correlations and path analyses revealed that fantasy proneness and avoidant coping style fully mediate the relationship between trauma and paranormal beliefs. The results imply that researchers need to take into account how a person responds to trauma via the development of coping strategies to accurately understand any observed relationship between trauma and paranormal beliefs.

Bulkeley, Kelly. 2014. Religious Worship and Dream Recall: New results from a survey of American adults. *Pastoral Psychology* 63(2). 123–132.
doi:10.1007/s11089-013-0560-6.

This study of 2,992 demographically diverse American adults provides a new empirical view of the relationship between dreams and religion. Participants answered a question about the frequency of their religious worship service attendance, in addition to several questions about their recall of various types of dreams. The results confirm previous research showing that the most religiously observant people in America tend to remember considerably fewer dreams than do the least religiously observant people. This study elaborates on that finding by using word search technology to analyze several hundred dream reports provided by the participants. The results show that in terms of dream content, there is little difference between religiously observant and nonobservant people, other than a higher frequency of Christianity-related words in the dreams of the most religiously observant people. This study gives pastoral caregivers and psychotherapists new insights into the religiously and spiritually meaningful patterns they may encounter in the dreams of their clients.

Lee, Joseph & M. Theol. 2014. The human dark side: Evolutionary psychology and original sin. *Journal of Religion and Health* 53(2). 614–629.
doi:10.1007/s10943-013-9805-z.

Human nature has a dark side, something important to religions. Evolutionary psychology has been used to illuminate the human shadow side, although as a discipline it has attracted criticism. This article seeks to examine the evolutionary psychology's understanding of human nature and to propose an unexpected dialog with an enduring account of human evil known as original sin. Two cases are briefly considered: murder and rape. To further the exchange, numerous theoretical and methodological criticisms and replies of evolutionary psychology are

explored jointly with original sin. Evolutionary psychology can partner with original sin since they share some theoretical likenesses and together they offer insights into the nature of what it means to be human.

Schmalzl, Laura, Mardi A. Crane-Godreau & Peter Payne. 2014. Movement-based embodied contemplative practices: Definitions and paradigms. *Frontiers in Human Neuroscience* 8. 205. doi:10.3389/fnhum.2014.00205.

Over the past decades, cognitive neuroscience has witnessed a shift from predominantly disembodied and computational views of the mind, to more embodied and situated views of the mind. These postulate that mental functions cannot be fully understood without reference to the physical body and the environment in which they are experienced. Within the field of contemplative science, the directing of attention to bodily sensations has so far mainly been studied in the context of seated meditation and mindfulness practices. However, the cultivation of interoceptive, proprioceptive and kinesthetic awareness is also said to lie at the core of many movement-based contemplative practices such as Yoga, Qigong, and Tai Chi. In addition, it likely plays a key role in the efficacy of modern somatic therapeutic techniques such as the Feldenkrais Method and the Alexander Technique. In the current paper researchers examine how these practices are grounded in the concepts of embodiment, movement and contemplation, as researchers look at them primarily through the lens of an enactive approach to cognition. Throughout, researchers point to a series of challenges that arise when Western scientists study practices that are based on a non-dualistic view of mind and body.

PART 2. ARTICLES IN SPIRITUALITY & HEALTH RESEARCH

2.1 SPIRITUALITY & HEALTH: GENERAL HEALTH & WELL-BEING

Amaro, Hortensia, Suzanne Spear, Zayda Vallejo, Kerith Conron & David S. Black. 2014. Feasibility, Acceptability, and Preliminary Outcomes of a Mindfulness-Based Relapse Prevention Intervention for Culturally-Diverse, Low-Income Women in Substance Use Disorder Treatment. *Substance Use & Misuse* 49(5). 547–559.
doi:10.3109/10826084.2013.852587.

Researchers examined feasibility, acceptability, and benefits of a mindfulness-based relapse prevention (MBRP) intervention in a racially and ethnically diverse sample of 318 low-income women in substance use disorder treatment (2003-2006). The study used a single group, repeated measures design. Participant satisfaction was high but completion was modest (36%). Linear regressions examining change in addiction severity and psychological functioning by dosage showed that higher dosage was associated with reduced alcohol, drug severity, and perceived stress at 12 months. Further research on MBRP efficacy for this population is warranted.

Black, David S. 2014. Mindfulness-based interventions: An antidote to suffering in the context of substance use, misuse, and addiction. *Substance Use & Misuse* 49(5). 487–491.
doi:10.3109/10826084.2014.860749.

In this article, the author supplies an introduction to the special theme issue concerning mindfulness and substance use intervention by first providing a brief historical account of the secular Mindfulness-Based Stress Reduction program to introduce new readers to the more general topic of mindfulness-based interventions (MBIs), and to contextualize historical publishing trends observed in mindfulness research across the past four decades. He then examines the implications of MBIs for substance use, misuse, and addiction, especially in areas related to craving and suffering. Finally, he outlines the empirical and conceptual compendium of contributions offered in the special issue.

Burke, Adam, Juliana Van Olphen, Mickey Eliason, Ryan Howell & Autumn Gonzalez. 2014. Re-examining religiosity as a protective factor: Comparing alcohol use by self-identified religious, spiritual, and secular college students. *Journal of Religion and Health* 53(2). 305–316.
doi:10.1007/s10943-012-9623-8.

Religiosity has been found to be associated with lower alcohol use by college students. The majority of studies on this topic, however, fail to differentiate religiosity and spirituality. This is potentially problematic due to the changing face of religion in America today. A study was conducted to explore similarities and differences between self-identified religious and spiritual college students. A modified version of the Core Alcohol and Drug Survey was administered online with a sample of 2,312 students. As hypothesized, self-identified religious and spiritual students differed significantly on key variables related to religious practices, alcohol consumption, and postmodern social values.

Chiesa, Alberto & Alessandro Serretti. 2014. Are Mindfulness-Based Interventions Effective for Substance Use Disorders? A Systematic Review of the Evidence. *Substance Use & Misuse* 49(5). 492–512.
doi:10.3109/10826084.2013.770027.

Mindfulness-based interventions (MBIs) are increasingly suggested as therapeutic approaches for effecting substance use and misuse (SUM). The aim of this article is to review current evidence on the therapeutic efficacy of MBIs for SUM. A literature search was undertaken using four electronic databases and references of retrieved articles. The search included articles written in English published up to December 2011. Quality of included trials was

assessed. In total, 24 studies were included, three of which were based on secondary analyses of previously investigated samples. Current evidence suggests that MBIs can reduce the consumption of several substances including alcohol, cocaine, amphetamines, marijuana, cigarettes, and opiates to a significantly greater extent than waitlist controls, non-specific educational support groups, and some specific control groups. Some preliminary evidence also suggests that MBIs are associated with a reduction in craving as well as increased mindfulness. The limited generalizability of the reviewed findings is noted.

Cooper, Denise C, Julian F Thayer & Shari R Waldstein. 2014. Coping with Racism: The Impact of Prayer on Cardiovascular Reactivity and Post-stress Recovery in African American Women. *Annals of Behavioral Medicine* 47(2). 218–230.
doi:10.1007/s12160-013-9540-4.

This study examined how prayer coping relates to cardiovascular reactivity (CVR), post-stress recovery, and affective reactivity in response to racism-related stress. African American women (n=81) reported their use of prayer coping on the Perceived Racism Scale and completed anger recall and racism recall tasks while undergoing monitoring of systolic and diastolic blood pressure (DBP), heart rate, heart rate variability (HRV), and hemodynamic measures. Prayer coping was examined for associations with CVR, recovery, and affective change scores using general linear models with repeated measures. Higher prayer coping was associated with decreased state stress and DBP reactivity during racism recall and with decreased DBP and increased HRV during racism recall recovery.

Dai, Chia-Liang & Manoj Sharma. 2014. Between inhale and exhale: Yoga as an intervention in smoking cessation. *Journal of Evidence-Based Complementary & Alternative Medicine* 19(2). 144–149.
doi:10.1177/2156587214524580.

The current study provided a review of evidence-based yoga interventions' impact on smoking cessation. Inclusion criteria were as follows: (a) study published between 2004 and 2013, (b) study published in English language, (c) study used yoga-based interventions, (d) study involved smokers with varying level of smoking, (e) study used any quantitative design, and (f) study had physiological and/or psychological outcomes. A total of 10 studies met the inclusion criteria. Designs were 2 pre–post tests and 8 randomized controlled trials. Majority of the interventions were able to enhance quitting smoking rates in the participants under study. Yoga-based interventions hold promise for smoking cessation. Some of the limitations include short follow-up measurements and short duration of intervention.

Davis, James M., Simon B. Goldberg, Maggie C. Anderson, Alison R. Manley, Stevens S. Smith & Timothy B. Baker. 2014. Randomized Trial on Mindfulness Training for Smokers Targeted to a Disadvantaged Population. *Substance Use & Misuse* 49(5). 571–585.
doi:10.3109/10826084.2013.770025.

Researchers report the results of a randomized trial comparing a novel smoking cessation treatment Mindfulness Training for Smokers (MTS) to a usual care therapy (Controls), which included the availability of a tobacco quit line and nicotine patches. Data were collected from 196 low socioeconomic status smokers in 2010-2011 in Madison, Wisconsin. Participants were randomized to either MTS or a telephonic quit line. The primary outcome was 6-month smoking abstinence measured by carbon monoxide breath testing and Time-Line Follow-Back. Among treatment initiators (randomized participants who participated in the intervention), abstinence rates were significantly different between the MTS (38.7%) and control (20.6%) groups.

Day, Melissa A., Beverly E. Thorn & Nancy J. Rubin. 2014. Mindfulness-based cognitive therapy for the treatment of headache pain: A mixed-methods analysis comparing treatment responders and treatment non-responders. *Complementary Therapies in Medicine* 22(2). 278–285.
doi:10.1016/j.ctim.2013.12.018.

This recent pilot study demonstrated mindfulness-based cognitive therapy (MBCT) is a potentially efficacious headache pain treatment; however, it was not universally effective for all participants. The study sought to explore patient characteristics associated with MBCT treatment response and the potential processes of change that allowed treatment responders to improve and that were potentially lacking in the non-responders. The sample consisted of 21 participants, 14 of whom were classified as treatment responders ($\geq 50\%$ improvement in pain intensity and/or pain interference) and seven as non-responders ($< 50\%$ improvement). Participants completed an 8-week MBCT treatment for headache pain management. Quantitative data indicated a large effect size difference between responders and non-responders for pre- to post-treatment change in standardized measures of pain acceptance and catastrophizing, and a small to medium effect size differences on treatment dose indicators. Both groups showed improved psychosocial outcomes. Qualitatively, change in cognitive processes was a more salient qualitative theme within treatment responders; both groups commented on the importance of non-specific therapeutic factors. Barriers to mindfulness meditation were also commented on by participants across groups. Results indicated that change in pain-related cognitions during an MBCT intervention for headache pain is a key factor underlying treatment response.

- Dylan, Arielle. 2014. Noble Eightfold Path and Yoga (NEPY): A group for women experiencing substance use challenges. *Social Work with Groups: A Journal of Community and Clinical Practice* 37(2). 142–157.
doi:10.1080/01609513.2013.824853.

This article describes the structure and methodology of a group created for women living with substance use challenges. The group was held at a community-based addictions services agency and combined physical activity (batba yoga) with meditation and planned topics for self-reflection. Group work practice, in many forms, has been used successfully for decades as a helping modality for addictions issues, but the implementation of this innovative, insight-based approach is untried. Offered weekly for 10 weeks, the group was well attended with regular members. Limited qualitative feedback indicating satisfaction and beneficial impacts was gathered during the final group meeting.

- Garland, Eric L., Amelia Roberts-Lewis, Karen Kelley, Christine Tronnier & Adam Hanley. 2014. Cognitive and Affective Mechanisms Linking Trait Mindfulness to Craving Among Individuals in Addiction Recovery. *Substance Use & Misuse* 49(5). 525–535.
doi:10.3109/10826084.2014.850309.

The present study aimed to identify affective, cognitive, and conative mediators of the relation between trait mindfulness and craving in data culled from an urban sample of 165 persons (in abstinence verified by urinalysis) entering into residential treatment for substance use disorders between 2010 and 2012. Multivariate path analysis adjusting for age, gender, education level, employment status, and substance use frequency indicated that the association between the total trait mindfulness score on the Five Facet Mindfulness Questionnaire and alcohol/drug craving was statistically mediated by negative affect and cognitive reappraisal, but not by readiness to change.

- Gray, Mary Tod. 2014. Habits, rituals, and addiction: an inquiry into substance abuse in older persons. *Nursing Philosophy* 15(2). 138–151.
doi:10.1111/nup.12041.

Older people enter the final phases of their lives with well-established habits and rituals, some of which might be or become substance abuse. This inquiry focused on the relationship between habits, rituals, and the compulsive addictive behaviors evident in older persons' substance abuse. Habits and rituals, examined as adaptive and limiting functions in older persons, revealed changes in autonomy, social inclusion, and emotional responses to such changes as older persons experience declining energy reserves and physical debilities. Older persons' ebbing sense of control and passionate responses to change illustrate the perennial struggle between the will and emotions when

habits and rituals transform to compulsive addictive behaviors. Two concepts, germane to this struggle both in older persons' addictive behaviors and nurses' response, emerged from this inquiry: temperance, a balance between the will's freely chosen actions and passionate desire, and discipline, the means to achieve such balance. The focused attention demanded in discipline can be realized in spiritual exercises and daily care of the soul. Disciplined actions engage the older persons' imaginative capacities to manage and abandon the self in goals consistent with end-of-life issues: meaningful fulfillment of human potential and the need for daily joy and pleasure in living the final years.

Grözinger, Gerd & Wenzel Matiaske. 2014. The direct and indirect impact of religion on well-being in Germany. *Social Indicators Research* 116(2). 373–387.
doi:10.1007/s11205-013-0308-9.

A European Social Survey (ESS)-based study of Clark and Lelkes on the European level showed a double positive connection between religion and life-satisfaction: not only did a personal involvement have a positive impact, but there was also a regional externality. Even atheists seemed to be happier in areas with many religious people. However, the regional structure of the ESS can be seen as methodologically doubtful. Researchers therefore replicated the study with more rich German data. In this study researchers confirm the positive individual effect of religion, but a negative regional externality was found. However, further analysis revealed that this was an effect of an omitted variable: the degree of urbanization. In a more detailed approach researchers show that this effect is confined to areas with a protestant majority. Researchers conclude that the positive degree of urbanization influence on life-satisfaction is presumably due to the chance for more political participation in the (protestant) city states in Germany.

Hanely, Jane & Amy Brown. 2014. Cultural variations in interpretation of postnatal illness: Jinn possession amongst Muslim communities. *Community Mental Health Journal* 50(3). 348–353.
doi:10.1007/s10597-013-9640-4.

Maternal experience of emotional and physical disturbance during the postnatal period is a worldwide occurrence but may be interpreted differently according to cultural background. Little is known about different expressions and treatment of cultural phenomena during the postnatal period such as the affliction of Jinn possession in Arabic cultures. Jinn are considered to be evil spirits, which cause emotional and physical distress at times of vulnerability such as the postnatal period. The aim of this paper was to explore maternal experience of Jinn possession and draw parallels with Western interpretations of postnatal illness. Ten women in an Arabian Gulf state who had recently given birth and identified themselves as having Jinn possession were interviewed as to their experiences of Jinn possession. Mothers described the Jinn as evil spirits who cause symptoms such as sadness, anxiety and physical malaise during the postnatal period. Numerous risk factors for possession emerged such as lack of familial support, poverty and a traumatic birth. Clear parallels emerged between Western concepts of postnatal illness and Jinn possession. Mothers in Muslim cultures may experience Jinn possession during the postnatal period, which reflects similar symptoms and etiology to Western concepts of postnatal illness.

Hawes, Starlyn M & Jannette Y Berkley-Patton. 2014. Religiosity and risky sexual behaviors among an African American church-based population. *Journal of Religion and Health* 53(2). 469–482.
doi:10.1007/s10943-012-9651-4.

This study examined the relationships between demographics, religiosity, and sexual risk behaviors among 255 adult African American church-based participants. Although participants were highly religious, they reported an average of seven lifetime sex partners and most inconsistently used condoms. Several demographic variables and religiosity significantly predicted lifetime HIV-related risk factors. Taken together, findings indicated that this population is at risk for HIV. Future research should continue to identify correlates of risky sexual behavior among African American parishioners to facilitate the development of HIV risk reduction interventions in their church settings.

Heydari-Fard, Jabar, Masoumeh Bagheri-Nesami, Marjan Ahmad Shirvani & Reza-Ali Mohammadpour. 2014. Association between quality of life and religious coping in older people. *Nursing older people* 26(3). 24–29.
doi:10.7748/nop2014.03.26.3.24.e496.

This study examined the association between quality of life (QoL) and religious coping in older people living in their own homes. A descriptive analytical study was undertaken in Iran with 200 older people aged over 60 living in their own homes who were selected for inclusion by systematic random sampling. Data were collected by use of the Short Form 36 (SF-36) QoL questionnaire and a religious coping questionnaire developed previously by the authors. Results indicate that there was no significant association between QoL and religious coping. However, mental health and social function had a significant association with the total score for religious coping. An association between a high level of religious coping and QoL was significant only for the mental health domain of the SF-36. In light of these results, the author suggests that older people's mental health and social function may be improved by strengthening their religious beliefs. Mental health and social function are associated with other QoL domains and so their promotion may also improve overall QoL.

Hilton, Jeanne M. & Stephen L. Child. 2014. Spirituality and the Successful Aging of Older Latinos. *Counseling and Values* 59(1). 17–34.
doi:10.1002/j.2161-007X.2014.00039.x.

Using face-to-face interviews and a self-report questionnaire, the authors investigated the contributions of spirituality and religiosity to the well-being and levels of depression of 60 Latino adults ages 50 to 84 after controlling for age, health, education, and economic strain. Religiosity and spirituality predicted well-being; however, increases in well-being were associated with lower levels of externalizing religiosity and higher levels of spirituality. Economic strain overshadowed all other variables in predicting depression. Thus, 2 factors predicted the psychological health of Latino elders: economic strain predicted depression, and spiritual health predicted well-being.

Hoborn, Kylie. 2014. Religion in sexual health: A staff perspective. *Journal of Religion and Health* 53(2). 461–468.
doi:10.1007/s10943-012-9650-5.

This paper reports data on the complexities of delivering religious/spiritual care in sexual health from a staff perspective. A learning needs analysis, in survey format, was conducted with the nursing staff of a leading London sexual health clinic. Recruitment took place in May 2011 over a period of 2 weeks. The sample consisted of 25 members of staff which included service support workers and registered nurses. The survey was divided into three sections, being population demographics, clinical experience and understanding and education. This article will explore the second section of which being clinical experience and understanding. This section used six open-ended questions to investigate participants' experience of common clinical episodes where religion was an influential part of the patient experience and decision-making. A range of contemporary sexual health and religious issues were extrapolated from the survey findings ranging from homosexuality to termination of pregnancy. Four main areas of complexity identified from participants responses were identified: sexual dysfunction, treatment issues, sexual health knowledge and high-risk behavior. Findings from the study highlight the diversity of influence of religion has on the sexual health of patients.

Humboldt, Sofia von, Isabel Leal & Filipa Pimenta. 2014. Does spirituality really matter?: A study on the potential of spirituality for older adult's adjustment to aging: Spirituality and adjustment to aging. *Japanese Psychological Research* 56(2). 114–125.
doi:10.1111/jpr.12033.

This study analyzed the indicators of adjustment to aging (AtA) and to investigate the latent constructs that can work as major determinants in spirituality for a cross-national older community-dwelling population. Questionnaires were completed to assess the participants' background information. Interviews were performed, addressing one core area: indicators of AtA. Complete data were available for 154 older adults from two nationalities (German and Portuguese), aged 75 to 103 years. The data were subjected to content analysis. Representations of the associations and latent constructs were analyzed using a multiple correspondence analysis (MCA). The most prevalent response of the interviewed participants for indicators of AtA was spirituality (43.2%). Spiritual activities was the most reported response regarding spirituality (20.0%). A significant moderate association was found between spiritual activities and nationality. Spirituality for older adults was explained by a three-dimensional overall model: spiritual and existential meaning, limit-related awareness and community embeddedness. The findings presented in this paper emphasized the need to explore the potential of spirituality for AtA and the need for improving the spiritual dimension of health care for the older cross-national population.

Keyworth, Chris, Jasmin Knopp, Kate Roughley, Chris Dickens, Stuart Bold & Peter Coventry. 2014. A Mixed-Methods Pilot Study of the Acceptability and Effectiveness of a Brief Meditation and Mindfulness Intervention for People with Diabetes and Coronary Heart Disease. *Behavioral Medicine* 40(2). 53–64.
doi:10.1080/08964289.2013.834865.

Mindfulness-based interventions can successfully target negative perseverative cognitions such as worry and thought suppression, but their acceptability and effectiveness in people with long-term conditions is uncertain. Researchers therefore pilot tested a six-week meditation and mindfulness intervention in people (n=40) with diabetes mellitus and coronary heart disease. Researchers used a sequential mixed-methods approach that measured change in worry and thought suppression and qualitatively explored acceptability, feasibility, and user experience with a focus group (n=11) and in-depth interviews (n=16). The intervention was highly acceptable, with 90% completing more than 5 sessions. Meditation and mindfulness skills led to improved sleep, greater relaxation, and more-accepting approaches to illness and illness experience. At the end of the six-week meditation course, worry, and thought suppression were significantly reduced.

Krause, Neal & R David Hayward. 2014. Trust-based prayer expectancies and health among older Mexican Americans. *Journal of Religion and Health* 53(2). 591–603.
doi:10.1007/s10943-013-9786-y.

This study assesses the health-related effects of trust-based prayer expectancies, which reflect the belief that God answers prayers at the right time and in the best way. The following relationships are evaluated in our conceptual model: (1) older Mexican Americans who attend worship services more often tend to develop a closer relationship with God; (2) people who feel close to God will be more likely to develop trust-based prayer expectancies; (3) people who endorse trust-based prayer expectancies will have greater feelings of self-esteem; and (4) higher self-esteem is associated with better self-rated health. The data support each of these relationships.

Lagman, Regina A, Grace J Yoo, Ellen G Levine, Kira A Donnell & Holly R Lim. 2014. “Leaving it to God”: Religion and spirituality among Filipina immigrant breast cancer survivors. *Journal of Religion and Health* 53(2). 449–460.
doi:10.1007/s10943-012-9648-z.

Many Filipinos have a powerful adherence to Catholicism. However, little is known about spirituality and religious involvement of Filipina Americans who have been diagnosed with breast cancer. Ten (n=10) in-depth qualitative interviews with Filipina immigrant breast cancer survivors identified prayer to be the most common religious practice, followed by prayers by others and spiritual support from the Catholic Church. These findings can

help clinicians and researchers understand the role of spirituality and religion in providing comfort and support for Filipina immigrant breast cancer patient as they face the stress of diagnosis and treatment.

Lee, Courtney, Cindy Crawford, Anita Hickey & Active Self-Care Therapies for Pain (PACT) Working Group. 2014. Mind-body therapies for the self-management of chronic pain symptoms. *Pain Medicine* 15(Supplement 1). S21–39.
doi:10.1111/pme.12383.

For this article, a systematic review was conducted to rigorously assess both the quality of the research on active self-care complementary and integrative medicine (ACT-CIM) modalities and the evidence for their efficacy and effectiveness in treating chronic pain symptoms. A panel of subject matter experts was also convened to evaluate the overall literature pool and develop recommendations for the use and implementation of these modalities. Following key database searches, 146 randomized controlled trials were included in the review, 54 of which investigated mind-body therapies, as defined by the authors. This article summarizes the current evidence, quality, efficacy, and safety of these modalities.

Lengacher, Cecile A., Melissa M. Shelton, Richard R. Reich, Michelle K. Barta, Versie Johnson-Mallard, Manolete S. Moscoso, Carly Paterson, et al. 2014. Mindfulness based stress reduction (MBSR(BC)) in breast cancer: Evaluating fear of recurrence (FOR) as a mediator of psychological and physical symptoms in a randomized control trial (RCT). *Journal of Behavioral Medicine* 37(2). 185–195.
doi:10.1007/s10865-012-9473-6.

To investigate the mechanism(s) of action of mindfulness based stress reduction (MBSR(BC)) including reductions in fear of recurrence and other potential mediators. Eighty-two post-treatment breast cancer survivors (stages 0-III) were randomly assigned to a 6-week MBSR(BC) program (n=40) or to usual care group (UC) (n=42). Psychological and physical variables were assessed as potential mediators at baseline and at 6 weeks. MBSR(BC) compared to UC experienced favorable changes for five potential mediators: (1) change in fear of recurrence mediated the effect of MBSR(BC) on 6-week change in perceived stress and state anxiety; and (2) change in physical functioning mediated the effect of MBSR(BC) on 6-week change in perceived stress and trait anxiety. MBSR(BC) reduces fear of recurrence and improves physical functioning which reduces perceived stress and anxiety. Findings support the beneficial effects of MBSR(BC) and provide insight into the possible cognitive mechanism of action.

Magyar-Russell, Gina, Iain Tucker Brown, Inna R Edara, Michael T Smith, Joseph E Marine & Roy C Ziegelstein. 2014. In search of serenity: Religious struggle among patients hospitalized for suspected acute coronary syndrome. *Journal of Religion and Health* 53(2). 562–578.
doi:10.1007/s10943-013-9713-2.

Hospitalization for a sudden cardiac event is a frightening experience, one that is often marked by uncertainty about health status, fear of recurrent cardiac problems, and related existential, religious, and spiritual concerns. Religious struggle, reflecting tension and strain regarding religious and spiritual issues, may arise in response to symptoms of acute coronary syndrome (ACS). The present study examined the prevalence and types of religious struggle using the Brief RCOPE, as well as associations between religious struggle, psychological distress, and self-reported sleep habits among 62 patients hospitalized with suspected ACS. Fifty-eight percent of the sample reported some degree of religious struggle. Questioning the power of God was the most frequently endorsed struggle. Those struggling religiously reported significantly more symptoms of anxiety, depression, and sleep disturbance. Non-White participants endorsed greater use of positive religious coping strategies and religious struggle. Results suggest that patients hospitalized for suspected ACS experiencing even low levels of religious struggle might benefit from referral to a hospital chaplain or appropriately trained mental health professional for more detailed religious and spiritual assessment.

Mantzios, Michail & J. C. Wilson. 2014. Making concrete construals mindful: A novel approach for developing mindfulness and self-compassion to assist weight loss. *Psychology & Health* 29(4). 422–441.

doi:10.1080/08870446.2013.863883.

Research on the usefulness of mindfulness and self-compassion for dieting has focused on meditative practices. However, meditation can be difficult to maintain, especially while dieting. Thus, the present research attempted to induce mindfulness and self-compassion by using food diaries that required the participant to either focus on concrete (i.e. how they are eating) construals or abstract (i.e. why they are eating) construals. The concrete construals were expected to increase mindfulness and self-compassion, as well as decrease avoidance and negative thoughts (which would further aid the development of mindfulness and self-compassion). Study 1 found that mindfulness and self-compassion mediated the inverse relationship of avoidance and negative thoughts with weight loss. Study 2 showed that concrete construal diaries increased mindfulness and self-compassion, decreased avoidance and negative thoughts, and supported weight loss significantly more than the abstract construal diaries. Study 3, then, compared the concrete construal diaries with a mindful self-compassionate meditation programme. There was no difference in weight loss at the end of the intervention, but at a three-month follow-up, the diaries performed better at weight maintenance. Thus, the concrete construal diaries may promote mindfulness and self-compassion and potentially promote long-term weight loss.

Minvaleev, Rinad S, Alfred R Bogdanov, Rinat R Bogdanov, David P Bahner & Paul E Marik. 2014. Hemodynamic observations of tumo yoga practitioners in a Himalayan environment. *Journal of Alternative and Complementary Medicine* 20(4). 295–299.

doi:10.1089/acm.2013.0159.

Few attempts have been made to evaluate the physiology of traditional Eastern health practices. The goal of this study was to evaluate the hemodynamic effects of the mysterious Buddhist practice of tumo. Tumo is a meditative practice that produces inner heat through the alleged cultivation of body energy-channels. This study was performed by members of an international expedition to the Himalayan Mountains in the Republic of India. The study was performed in an unpopulated outdoor mountainous area at an altitude of 16,400 ft with ambient temperatures between -10 and -15 degrees Celsius. Two (2) cohorts of subjects were studied: healthy non-yogi volunteers and tumo practitioners. All of the subjects were stripped down to their underclothes and exposed to the subzero atmospheric temperatures for 5 minutes. The volunteers were then passively rewarmed while the tumo practitioners performed tumo for up to 10 minutes. Fourteen (14) subjects (six volunteers and eight tumo practitioners) completed the study. There was one female subject in each group. With cold exposure, the stroke volume index (SVI) and carotid blood flow decreased while the total peripheral resistance index (TPRI) increased significantly in both groups. In the volunteer group, these changes returned to baseline with rewarming. Following tumo, the cardiac index, carotid blood flow, left ventricular ejection fraction (LVEF) and tricuspid annular plane systolic excursion (TAPSE) were significantly higher when compared with baseline, while the TPRI was significantly lower. Tumo was associated with a hyperdynamic vasodilated state with increased biventricular performance. Researchers postulate that tumo results in a massive increase in sympathetic activity with activation of brown adipose tissue and marked heat production. The increased heat production may explain the paradoxical vasodilatation in tumo practitioners exposed to subzero temperatures.

Park, Crystal L, Haikel Lim, Max Newlon, D P Suresh & Deborah E Bliss. 2014. Dimensions of religiousness and spirituality as predictors of well-being in advanced chronic heart failure patients. *Journal of Religion and Health* 53(2). 579–590.

doi:10.1007/s10943-013-9714-1.

Researchers examined relationships between seven dimensions of religion/spirituality (RS) (forgiveness, daily spiritual experiences, belief in afterlife, religious identity, religious support, public practices, and positive RS

coping) and three dimensions of well-being (physical, mental, and existential) in a sample of 111 patients with advanced chronic heart failure. Participants completed questionnaires at baseline and 3 months later. Results showed that fairly high levels of RS were reported on all seven dimensions. Furthermore, RS dimensions were differentially related to well-being. No aspect of RS was related to physical well-being, and only a few aspects were related to mental well-being. Forgiveness was related to less subsequent depression, while belief in afterlife was related to poorer mental health. All aspects of RS were related to at least one aspect of existential well-being. In particular, daily spiritual experiences were linked with higher existential well-being and predicted less subsequent spiritual strain. These results are consistent with the view that in advanced disease, RS may not affect physical well-being but may have potent influences on other aspects of well-being, particularly existential aspects.

- Pilkinton, Melinda W. 2014. Correlates of race and substance abuse with religious support systems: A study of pregnant substance abusers. *Journal of Human Behavior in the Social Environment* 24(3). 390–398.
doi:10.1080/10911359.2014.875336.

Women who misuse substances may have decreased connections with community structures, including religious support systems. This study examined the correlates of race, age, socioeconomic status, and drug use status on 1,116 pregnant women's connections with religious support structures. Data were derived from the 2002 National Survey of Drug Abuse and the 2003 National Survey of Drug Use and Health and were used to perform a secondary analysis of the variables. Results of the analyses revealed that race is not an indicator of social connectivity; while drug use, age, and socioeconomic status are indicators.

- Reid, Rory C., Jennifer E. Bramen, Ariana Anderson & Mark S. Cohen. 2014. Mindfulness, Emotional Dysregulation, Impulsivity, and Stress Proneness Among Hypersexual Patients: Mindfulness and Hypersexuality. *Journal of Clinical Psychology* 70(4). 313–321.
doi:10.1002/jclp.22027.

The current study explores relationships between mindfulness, emotional regulation, impulsivity, and stress proneness in a sample of participants being treated for Hypersexual Disorder, and healthy controls, to assess whether mindfulness attenuates symptoms of hypersexuality. Hierarchical regression analysis was used to assess whether significant relationships between mindfulness and hypersexuality exist beyond associations commonly found with emotional dysregulation, impulsivity, and stress proneness in a sample of male hypersexual patients (n=40) and control subjects (n=30). These results show a robust inverse relationship of mindfulness to hypersexuality over and above associations with emotional regulation, impulsivity, and stress proneness. This suggests that mindfulness may be a meaningful component of successful therapy among patients seeking help for hypersexual behavior in attenuating hypersexuality, improving affect regulation, stress coping, and increasing tolerance for desires to act on maladaptive sexual urges and impulses.

- Satin, Jillian R., Wolfgang Linden & Roanne D. Millman. 2014. Yoga and Psychophysiological Determinants of Cardiovascular Health: Comparing Yoga Practitioners, Runners, and Sedentary Individuals. *Annals of Behavioral Medicine* 47(2). 231–241.
doi:10.1007/s12160-013-9542-2.

The evidence of cardiovascular benefits of yoga is promising, but lacks demonstrations of specificity compared to other interventions. The present cross-sectional study examined cardiovascular health markers in long-term practitioners of yoga (yogis), runners, and sedentary individuals. Researchers compared physiological, psychological, and lifestyle variables associated with cardiovascular health across groups. Yogis (n=47) and runners (n=46) showed favorable profiles compared to sedentary individuals (n=52) on heart rate, heart rate variability, depression, perceived stress, and cigarette smoking. Runners and male yogis showed superior aerobic fitness compared to the sedentary group. Runners reported greater social support compared to other groups. Yogis demonstrated a lower respiration rate compared to sedentary individuals and were more likely to refrain from

eating meat compared to other groups. Yogis and runners demonstrated several cardiovascular health advantages over sedentary individuals. These findings raise the possibility that yoga may improve aerobic fitness in men but not women.

- Schuman-Olivier, Zev, Bettina B. Hoepfner, A. Eden Evins & Judson A. Brewer. 2014. Finding the Right Match: Mindfulness Training May Potentiate the Therapeutic Effect of Nonjudgment of Inner Experience on Smoking Cessation. *Substance Use & Misuse* 49(5). 586–594.
doi:10.3109/10826084.2014.850254.

Mindfulness training (MT) is an emerging therapeutic modality for addictive disorders. Nonjudgment of inner experience, a component of mindfulness, may influence addiction treatment response. To test whether this component influences smoking cessation, tobacco smokers (n=85) in a randomized control trial of MT vs. Freedom from Smoking (FFS), a standard cognitive-behaviorally-oriented treatment, were divided into split-half subgroups based on baseline Five Facet Mindfulness Questionnaire nonjudgment subscale. Smokers who rarely judge inner experience smoked less during follow-up when randomized to MT vs. FFS. Measuring trait nonjudgment may help personalize treatment assignments, improving outcomes.

- Seawell, Asani H., Loren L. Toussaint & Alyssa C. D. Cheadle. 2014. Prospective associations between unforgiveness and physical health and positive mediating mechanisms in a nationally representative sample of older adults. *Psychology & Health* 29(4). 375–389.
doi:10.1080/08870446.2013.856434.

This study examined the prospective association between unforgiveness and self-reported physical health and potential positive psychological mediators of this association. Participants were a national sample of 1,024 American adults of 66 years of age and older. Data were collected at two time points separated by three years. Results indicated that unforgiveness was prospectively associated with declines in self-reported physical health three years later, and poor initial self-reported health status did not predict increases in unforgiveness across time. Furthermore, the prospective association of unforgiveness with self-reported health was mediated by a latent positive psychological traits variable. These results confirm cross-sectional findings suggesting that unforgiveness is related to health. The present study also suggests that unforgiveness has a prospective, but not reciprocal, association with self-reported physical health. Unforgiveness may have its association with self-reported physical health through its interruption of other positive traits that typically confer health benefits.

- Spofford, Jessica L., Robert M. Nevels, Samuel T. Gontkovsky & Taunjah P. Bell. 2014. Meditative practices predict spirituality but mindfulness does not predict alcohol use in African-American college students. *Mental Health, Religion & Culture* 17(4). 379–389.
doi:10.1080/13674676.2013.810614.

This study examines the relationships between mindfulness, alcohol use, social desirability, daily spiritual experiences, and religion in African-American college students at an Historically Black College or University. Significant positive correlations were found between mindfulness and religion as well as between spirituality and meditative practices. Results suggest that participants who reported being religious were more likely to have higher emotional intelligence and better verbal expressive abilities compared to participants who reported being nonreligious. Participants who endorsed practicing some form of meditation also were found to have a higher degree of reported spirituality compared to those who reported not practicing meditation. Findings suggest that those participants who reported being mindfully nonjudgmental also reported being more likely to be negatively reactive to their own thoughts. Findings do not suggest that mindfulness, social desirability, and religion predict alcohol use in African-American college students.

Sun, Jing, Nicholas Buys & Rohan Jayasinghe. 2014. Effects of community-based meditative Tai Chi programme on improving quality of life, physical and mental health in chronic heart-failure participants. *Aging & Mental Health* 18(3). 289–295.
doi:10.1080/13607863.2013.875120.

There is increasing evidence that coronary heart disease is linked with a number of psychosocial risk factors and biophysiological risk factors such as metabolic syndrome. This study aimed to compare Tai Chi program heart-failure participants between the pre-intervention phase and six month after intervention time in health-related quality of life (HRQoL), including physical health, role-physical, bodily pain, general health, vitality, social functioning, role-emotional and mental health. In addition, the difference between pre-intervention and post-intervention time in psychological distress and resilience, body mass index (BMI), systolic blood pressure (SBP) and diastolic blood pressure (DBP) were compared. A prospective intervention study was conducted in 2012 to evaluate the effectiveness of a community-based meditation Tai Chi intervention program to improve heart-failure patients' health. Outcomes differed in significance and magnitude across four HRQoL measures, psychological distress and resilience between the pre- and post-intervention time in heart-failure patients who participated in the Tai Chi exercise. The participants in the post-intervention time also reduced BMI, SBP, and waist circumference. Regular and more than six months Tai Chi exercises had a beneficial effect to HRQoL, reducing psychological distress, promoting resilience, and reducing the BMI and blood pressure level in heart-failure patients.

Witkiewitz, Katie, Sarah Bowen, Erin N. Harrop, Haley Douglas, Matthew Enkema & Carly Sedgwick. 2014. Mindfulness-Based Treatment to Prevent Addictive Behavior Relapse: Theoretical Models and Hypothesized Mechanisms of Change. *Substance Use & Misuse* 49(5). 513–524.
doi:10.3109/10826084.2014.891845.

Mindfulness-based treatments are growing in popularity among addiction treatment providers, and several studies suggest the efficacy of incorporating mindfulness practices into the treatment of addiction, including the treatment of substance use disorders and behavioral addictions (i.e., gambling). The current paper provides a review of theoretical models of mindfulness in the treatment of addiction and several hypothesized mechanisms of change. Researchers provide an overview of mindfulness-based relapse prevention (MBRP), including session content, treatment targets, and client feedback from participants who have received MBRP in the context of empirical studies. Future research directions regarding operationalization and measurement, identifying factors that moderate treatment effects, and protocol adaptations for specific populations are discussed.

Witkiewitz, Katie, Kaitlin Warner, Betsy Sully, Adria Barricks, Connie Stauffer, Brian L. Thompson & Jason B. Luoma. 2014. Randomized Trial Comparing Mindfulness-Based Relapse Prevention with Relapse Prevention for Women Offenders at a Residential Addiction Treatment Center. *Substance Use & Misuse* 49(5). 536–546.
doi:10.3109/10826084.2013.856922.

Reincarceration rates are high among substance-involved criminal offenders. This study (conducted during 2010-2011 in an urban area and funded by a Washington State University-Vancouver mini-grant) used a randomized design to examine the effectiveness of mindfulness-based relapse prevention (MBRP) as compared to relapse prevention (RP), as part of a residential addictions treatment program for women referred by the criminal-justice system (n=105). At 15-week follow up, regression analyses found women in MBRP, compared to RP, reported significantly fewer drug use days and fewer legal and medical problems.

2.2 SPIRITUALITY & HEALTH: MENTAL HEALTH

Assari, Shervin. 2014. Chronic Medical Conditions and Major Depressive Disorder: Differential Role of Positive Religious Coping among African Americans, Caribbean Blacks and Non-Hispanic Whites. *International Journal of Preventive Medicine* 5(4). 405–413.

This study was aimed to investigate the main and buffering effects of positive religious coping on the association between the number of chronic medical conditions and major depressive disorder (MDD) among African Americans, Caribbean Blacks and Non-Hispanic Whites. This cross-sectional study used data from the National Survey of American Life, 2001 and 2003. This study enrolled 3,570 African Americans, 1,438 Caribbean Blacks and 891 Non-Hispanic Whites. Number of chronic conditions and positive religious coping were independent variables, 12-month MDD was the outcome and socio-economic characteristics were controls. Researchers fitted the following three ethnic-specific logistic regressions for data analysis. In Model I, researchers included the number of chronic conditions and controls. In Model II, researchers added the main effect of religious coping. In Model III, researchers included an interaction between religious coping and number of chronic conditions. Based on Model I, number of chronic conditions was associated with higher odds of 12-month MDD among all race/ethnic groups. Model II showed a significant and negative association between religious coping and MDD among Caribbean Blacks, but not African Americans or Hispanic Whites. Model III suggested that, only among Caribbean Blacks, the effect of chronic medical conditions on MDD is smaller in the presence of high positive religious coping. Although the association between multiple chronic conditions and MDD may exist regardless of race and ethnicity, race/ethnicity may shape how positive religious coping buffers this association. This finding sheds more light onto race and ethnic differences in protective effects of religiosity on mental health of populations.

Brewer-Smyth, Kathleen & Harold G Koenig. 2014. Could spirituality and religion promote stress resilience in survivors of childhood trauma? *Issues in Mental Health Nursing* 35(4). 251–256.
doi:10.3109/01612840.2013.873101.

Trauma is a precursor to many mental health conditions that greatly impact victims, their loved ones, and society. Studies indicate that neurobiological associations with adverse childhood experiences are mediated by interpersonal relationships and play a role in adult behavior, often leading to cycles of intergenerational trauma. There is a critical need to identify cost effective community resources that optimize stress resilience. Faith-based communities may promote forgiveness rather than retaliation, opportunities for cathartic emotional release, and social support, all of which have been related to neurobiology, behavior, and health outcomes. While spirituality and religion can be related to guilt, neurotic, and psychotic disorders, they also can be powerful sources of hope, meaning, peace, comfort, and forgiveness for the self and others. This article provides an overview of religion and spirituality as they relate to the neurobiology of resilience in victims of childhood trauma.

Chou, Hui-Tzu Grace & Jeremy A. Hofer. 2014. Characteristics of congregations that might increase their participants' risk of depression. *Mental Health, Religion & Culture* 17(4). 390–399.
doi:10.1080/13674676.2013.816940.

This research examines some characteristics of congregations that might increase the risk of their participants being depressed. Analyzing data from the Portraits of American Life Study Wave 1 (2006), this research found that those affiliated with a congregation that did not meet their spiritual needs had arguments about traditional versus contemporary beliefs, made them feel like outsiders, and had unsatisfactory decision-making processes which were more likely to feel depressed than their counterparts. The findings of this research suggest that to alleviate the problem of depression, individuals need to choose a congregation that meets their spiritual needs and makes them feel accepted, rather than just attending any congregations.

- Gardner, Timothy M., Christian U. Krägeloh & Marcus A. Henning. 2014. Religious coping, stress, and quality of life of Muslim university students in New Zealand. *Mental Health, Religion & Culture* 17(4). 327–338.
doi:10.1080/13674676.2013.804044.

Most of the research on religious coping has been conducted with Christian participants from Western cultures, although in recent years increasingly more studies have been conducted with Muslim participants. For university students in Muslim countries, religiosity is positively correlated with a variety of indices of mental health and psychological well-being, but only a small number of studies investigated coping in Muslims living and studying in a non-Muslim country. The present study thus explored the relationship between perceived stress, quality of life (QOL), and religious coping in a sample of 114 Muslim university students in New Zealand. International Muslim students had higher levels of spirituality/religiousness than domestic Muslim students, and used more positive and negative religious coping methods. For international students, positive religious coping was positively related to QOL and lack of stress, while, for domestic students, negative religious coping was negatively related to the QOL and increased stress. This different pattern may relate to the ethnic background of the participants, and the results of the present study thus highlight that Muslims studying at universities overseas can certainly not be considered as a homogenous group.

- Gash, Jean, Olivia G. M. Washington, David P. Moxley & Holly Feen-Calligan. 2014. The Relationship between Spiritual Resources and Life Attitudes of African American Homeless Women. *Issues in Mental Health Nursing* 35(4). 238–250.
doi:10.3109/01612840.2013.797062.

Little is known about the relationships between spiritual resources and life attitudes of homeless African American women. Spiritual resources may serve as protective factors for women leaving homelessness. This descriptive study examines spiritual resources, life attitudes, and selected demographics of 160 African American women who were homeless in the Midwestern United States. Participants ranged in age from 30-62 years of age and reported being homeless 1-9 times. The authors draw inferences for how spiritual resources and life attitudes can influence women's efforts to leave homelessness and identify implications for nursing practice.

- Hayward, R. David & Neal Krause. 2014. How religious doubt moderates depression symptoms following older adult bereavement. *Death Studies* 38(4). 217–223.
doi:10.1080/07481187.2012.742476.

This study examined the relationship of religious doubt with mental health following bereavement, using data from a nationally representative longitudinal survey of religion and health in older adulthood. Growth curve modeling analyzed trajectories of change in symptoms of depression at up to three waves over up to seven years following either family bereavement or non-bereavement trauma. After bereavement, those with more religious doubt reported worsening symptoms, whereas those with less doubt reported stable or improving symptoms over the same period. After non-bereavement trauma, religious doubt was not associated with symptom change.

- Holt, Cheryl L., Emily Schulz, Beverly R. Williams, Eddie M. Clark & Min Qi Wang. 2014. Social support as a mediator of religious involvement and physical and emotional functioning in a national sample of African-Americans. *Mental Health, Religion & Culture* 17(4). 421–435.
doi:10.1080/13674676.2013.824953.

Researchers propose social support as one of the factors that may explain the positive relationship often observed between religious involvement and health outcomes. African-Americans are a population that tends to have higher than average levels of religious involvement and are also disproportionately impacted by most health conditions. The present study sought to determine whether social support mediates the role of religious involvement in physical and emotional functioning and depressive symptoms, among a national probability sample of African-Americans

(n=803). Study participants completed telephone interviews. Researchers used structural equation modelling to test hypotheses based on the theoretical model. Findings suggest evidence for a mediating role of belonging and tangible support in the association between religious behaviors and physical functioning as well as depression. There was no mediational role played by appraisal support, or for emotional functioning.

- Kleiman, Evan M. & Richard T. Liu. 2014. Prospective prediction of suicide in a nationally representative sample: religious service attendance as a protective factor. *The British journal of psychiatry* 204. 262–266.
doi:10.1192/bjp.bp.113.128900.

Previous research into religious service attendance as a protective factor against suicide has been conducted only retrospectively, with psychological autopsy studies using proxy informants of completed suicide, rather than prospectively, with completed suicide as a dependent variable. The aim of this study was to determine whether individuals who frequently attended religious services were less likely to die by suicide than those who did not attend so frequently. Researchers analyzed data from a nationally representative sample (n=20,014), collected in the USA between 1988 and 1994, and follow-up mortality data from baseline to the end of 2006. Cox proportional hazard regression analysis indicated that those who frequently attended religious services were less likely to die by suicide than those who did not attend, after accounting for the effects of other relevant risk factors. The authors conclude that frequent religious service attendance is a long-term protective factor against suicide.

- Kralovec, Karl, Clemens Fartacek, Reinhold Fartacek & Martin Plöderl. 2014. Religion and suicide risk in lesbian, gay and bisexual Austrians. *Journal of Religion and Health* 53(2). 413–423.
doi:10.1007/s10943-012-9645-2.

Religion is known to be a protective factor against suicide. However, religiously affiliated sexual minority individuals often report a conflict between religion and sexual identity. Therefore, the protective role of religion against suicide in sexual minority people is unclear. Researchers investigated the effect of religion on suicide risk in a sample of 358 lesbian, gay and bisexual Austrians. Religion was associated with higher scores of internalized homophobia, but with fewer suicide attempts. Data indicate that religion might be both a risk and a protective factor against suicidality in religiously affiliated sexual minority individuals.

- Krause, Neal & David Hayward. 2014. Church service roles and anticipated support among older Mexican Americans. *Mental Health, Religion & Culture* 17(4). 354–364.
doi:10.1080/13674676.2013.805740.

The purpose of this study is to see how feelings of anticipated support arise in church. Anticipated support refers to the belief that coreligionists will provide assistance in the future if the need arises. This model contains the following hypothesis: (1) people who affiliate with conservative Protestant congregations will be more deeply committed to their faith, (2) individuals who are more committed to their faith will attend church more frequently, (3) people who go to church more often will be more likely to occupy church service roles, (4) those who occupy church service roles will feel more highly valued by their coreligionists, (5) individuals who feel they are valued highly by fellow church members will receive more emotional support from them, and (6) people who receive more emotional support at church will have stronger anticipated support beliefs. Data from a nationwide survey of older Mexican Americans support these hypotheses.

- Kyei, Jane J., Al Dueck, Monica J. Indart & Nana Yaa Nyarko. 2014. Supernatural belief systems, mental health and perceptions of mental disorders in Ghana. *International Journal of Culture and Mental Health* 7(2). 137–151.
doi:10.1080/17542863.2012.734838.

Clinical psychology is an underdeveloped profession in Ghana, with insufficient empirical research to guide interventions. In the face of this, it is unclear whether individuals may benefit more from localized interventions

that incorporate cultural traditions and spiritual beliefs, rather than solely Westernized interventions. To better inform interventions and advocate for improved mental health policy in Ghana, this study sought to explore possible relationships between depression, anxiety, somatization, general psychological wellbeing and spirituality. The study also explored Ghanaians' subjective self-assessments of spirituality and perceptions of the causes and treatments of mental illness using qualitative in-depth responses. Results from the adult sample of 448 Christians, Muslims and Traditionalists showed significant negative correlations between depression, psychological wellness and spirituality. Qualitative responses revealed that while spiritual interventions for mental disorders was most frequently stated, a large number of responses favored psychological interventions as treatment options as well.

- Louie, Lila. 2014. The effectiveness of yoga for depression: a critical literature review. *Issues in Mental Health Nursing* 35(4). 265–276.
doi:10.3109/01612840.2013.874062.

In the United States, the prevalence of depression is quite high (9% in the general population) with women, young adults, and seniors particularly vulnerable. In recent years, increasing numbers of people are turning to complementary and alternative medicine (CAM) for relief from depression and other mental health problems. One form of CAM, yoga, has been growing in popularity; this rise in popularity has, in part, been driven by interest in how this practice, with its mindfulness and meditation aspects, may decrease depression. This critical literature review examines six recent studies on yoga as an intervention; specifically, this review focuses on yoga styles in which the practice of yoga poses, called asanas, is the core component.

- Mefford, Linda, Sandra P Thomas, Bonnie Callen & Maureen Groer. 2014. Religiousness/Spirituality and anger management in community-dwelling older persons. *Issues in Mental Health Nursing* 35(4). 283–291.
doi:10.3109/01612840.2014.890472.

This study examined whether dimensions of religiousness/spirituality could predict healthy anger management in a sample of 82 community-dwelling older Americans. A correlational research design was employed using the Deffenbacher Anger Scale and the Brief Multidimensional Measure of Religiousness/Spirituality. Higher scores on Forgiveness, Daily Spiritual Experiences, Religiousness/Spirituality as Coping, and Self-Ranking of Religiousness/Spirituality were correlated with healthier anger management. However, forgiveness was the only significant predictor in the regression analysis. Interventions to facilitate forgiveness may promote healthy anger management and minimize the adverse health effects of mismanaged anger.

- Mitchell, Karen S., Alexandra M. Dick, Dawn M. DiMartino, Brian N. Smith, Barbara Niles, Karestan C. Koenen & Amy Street. 2014. A Pilot Study of a Randomized Controlled Trial of Yoga as an Intervention for PTSD Symptoms in Women: Yoga for PTSD in Women. *Journal of Traumatic Stress* 27(2). 121–128.
doi:10.1002/jts.21903.

Posttraumatic stress disorder (PTSD) is a debilitating condition that affects approximately 10% of women in the United States. Although effective psychotherapeutic treatments for PTSD exist, clients with PTSD report additional benefits of complementary and alternative approaches such as yoga. In particular, yoga may downregulate the stress response and positively impact PTSD and comorbid depression and anxiety symptoms. Researchers conducted a pilot study of a randomized controlled trial comparing a 12-session Kripalu-based yoga intervention with an assessment control group. Participants included 38 women with current full or subthreshold PTSD symptoms. During the intervention, yoga participants showed decreases in reexperiencing and hyperarousal symptoms. The assessment control group, however, showed decreases in reexperiencing and anxiety symptoms as well, which may be a result of the positive effect of self-monitoring on PTSD and associated symptoms. Between-groups effect sizes were small to moderate. Although more research is needed, yoga may be an effective adjunctive

treatment for PTSD. Participants responded positively to the intervention, suggesting that it was tolerable for this sample.

- Moreira-Almeida, Alexander, Harold G Koenig & Giancarlo Lucchetti. 2014. Clinical implications of spirituality to mental health: Review of evidence and practical guidelines. *Revista brasileira de psiquiatria* 36(2). 176–182.

Despite empirical evidence of a relationship between religiosity/spirituality (R/S) and mental health, and recommendations by professional associations that these research findings be integrated into clinical practice, application of this knowledge in the clinic remains a challenge. This paper reviews the current state of the evidence and provides evidence-based guidelines for spiritual assessment and for integration of R/S into mental health treatment. PubMed searches of relevant terms yielded 1,109 papers. Researchers selected empirical studies and reviews that addressed assessment of R/S in clinical practice. The most widely acknowledged and agreed-upon application of R/S to clinical practice is the need to take a spiritual history (SH), which may improve patient compliance, satisfaction with care, and health outcomes. Researchers found 25 instruments for SH collection, several of which were validated and of good clinical utility. This paper provides practical guidelines for spiritual assessment and integration thereof into mental health treatment, as well as suggestions for future research on the topic.

- Omu, Onutobor, Saud Al-Obaidi & Frances Reynolds. 2014. Religious faith and psychosocial adaptation among stroke patients in Kuwait: a mixed method study. *Journal of Religion and Health* 53(2). 538–551.
doi:10.1007/s10943-012-9662-1.

Religious faith is central to life for Muslim patients in Kuwait, so it may influence adaptation and rehabilitation. This study explored quantitative associations among religious faith, self-efficacy, and life satisfaction in 40 female stroke patients and explored the influence of religion within stroke rehabilitation through qualitative interviews with 12 health professionals. The quantitative measure of religious faith did not relate to life satisfaction or self-efficacy in stroke patients. However, the health professionals described religious coping as influencing adaptation post-stroke. Fatalistic beliefs were thought to have mixed influences on rehabilitation. Measuring religious faith among Muslims through a standardized scale is debated. The qualitative accounts suggest that religious beliefs need to be acknowledged in stroke rehabilitation in Kuwait.

- Phoenix, Bethany. 2014. Promoting Resilience and Recovery in a Buddhist Mental Health Support Group. *Issues in Mental Health Nursing* 35(4). 257–264.
doi:10.3109/01612840.2013.867465.

Communities of faith are important arenas for psychiatric mental health nurses to promote emotional well-being and support recovery for persons with mental health problems. This article describes an innovative faith-based mental health group, based on Buddhist philosophy and practice and established by an advanced practice psychiatric nurse, that uses psycho-education, peer support, and faith encouragement to help participants find hope and meaning in the experience of mental health problems. A brief overview of Buddhism and selected concepts relevant to the philosophical framework of the Buddhist mental health support group is followed by a review of the common themes of the group discussions. These include: finding value in the illness experience; differentiating the proper role of treatment from that of Buddhist practice in optimizing mental health; and experiencing a deeper sense of joy, despite current suffering.

- Shores, Cynthia Ingram. 2014. Spiritual Interventions and the Impact of a Faith Community Nursing Program. *Issues in Mental Health Nursing* 35(4). 299–305.
doi:10.3109/01612840.2014.889785.

This study, based on the Roy Adaptation Model, used a qualitative design to identify spiritual nursing interventions that faith community nurses use in their practice, and to examine the spiritual impact of a faith community nursing program. Data were collected from faith community members, clergy representatives, and faith community nurses with a researcher-developed demographic tool and a six-item open-ended questionnaire that were both mailed to participants (n=112; n=52; response rate = 46%) and analyzed through content analysis. A variety of spiritual nursing interventions were identified. Themes related to the spiritual impact included the physical, mental, and spiritual health connection, caring, hope, spiritual support and benefits, and religious concepts.

Shorey, Ryan C., Hope Brasfield, Scott Anderson & Gregory L. Stuart. 2014. Differences in trait mindfulness across mental health symptoms among adults in substance use treatment. *Substance Use & Misuse* 49(5). 595–600.
doi:10.3109/10826084.2014.850310.

Mindfulness is a growing area of investigation among individuals manifesting substance use disorders, as mindfulness meditation may help to prevent relapse to substance use. The current study examined levels of trait mindfulness in substance users seeking treatment from May 2012 to August 2012 in a Tennessee residential center and whether patients with probable (i.e., diagnoses based on a self-report screening instrument) comorbid depression or PTSD reported lower mindfulness than patients without a probable comorbid diagnosis. Data were collected from a convenience sample of archival patient records (n=125) and four instruments. The majority of patients were male (n=84) and non-Hispanic Caucasian (92%); the mean age of the sample was 37.36. Results showed that lower trait mindfulness was associated with increased levels of substance use, depression, and PTSD. Patients with a probable depression or PTSD diagnosis reported lower mindfulness than patients without these disorders. Patients with probable comorbid depression and PTSD reported the lowest levels of mindfulness. These findings suggest that altering levels of mindfulness may be important for individuals manifesting dual-diagnoses in substance user treatment. The study's limitations are noted.

Sun, Fei & David R. Hodge. 2014. Latino Alzheimer's disease caregivers and depression: Using the stress coping model to examine the effects of spirituality and religion. *Journal of Applied Gerontology* 33(3). 291–315.
doi:10.1177/0733464812444462.

This study used stress coping theory to examine the effects of spirituality and religion on depression among a sample of Latino family members caring for a person with Alzheimer's disease (AD) in the United States. Participants consisted of 209 Latino caregivers (CGs) drawn from baseline data from the Resource for Enhancing Alzheimer's Caregivers Health (REACH) II clinical trial. The findings indicate that church attendance moderates the relationship between subjective forms of stress and depression in tandem with exhibiting direct effects on depression. Consistent with the central role religion plays in Latino culture, the results imply that religious involvement may play an important role in mitigating depression through indirect and direct pathways.

Thordardottir, Kolbrun, Ragnhildur Gudmundsdottir, Helga Zoëga, Unnur A. Valdimarsdottir & Berglind Gudmundsdottir. 2014. Effects of yoga practice on stress-related symptoms in the aftermath of an earthquake: A community-based controlled trial. *Complementary Therapies in Medicine* 22(2). 226–234.
doi:10.1016/j.ctim.2014.01.008.

Inhabitants, aged 20–67 years, from highly exposed earthquake areas of two villages in South Iceland were offered to participate in a yoga program subsequent to an earthquake. Sixty-six individuals were self-selected into the study and divided by residential convenience into an experimental group (n=31) and a waiting list control group (n=35). The yoga program was conducted twice a week for six weeks, in normal situations among the inhabitants in the community. Multivariate analysis of variance revealed differences between the experimental

group and waiting list control group on sleep quality and social relations. These differences did not prevail at Bonferroni correction for multiple testing. Participants in both groups showed significant improvements in stress and some stress-related symptoms such as sleep, concentration, well-being, quality of life, depression and anxiety from pre- to post-intervention. While the data from this small study show no statistically significant improvement of an integrated hatha yoga program above and beyond waiting list control, the observed trend toward improved sleep quality and social relations deserve further exploration in larger effectiveness studies on the impact of Hatha yoga on recovery after natural disaster.

Tuck, Inez. 2014. Introduction to This Special Issue on Spirituality and Mental Health. *Issues in Mental Health Nursing* 35(4). 236–237.
doi:10.3109/01612840.2014.890476.

An introduction to this issue is presented in which the editor discusses psychiatric-mental health nursing, the role of spirituality in mental health care, and religious orientation of psychiatrists.

Tuck, Inez & Lorraine Anderson. 2014. Forgiveness, flourishing, and resilience: the influences of expressions of spirituality on mental health recovery. *Issues in Mental Health Nursing* 35(4). 277–282.
doi:10.3109/01612840.2014.885623.

The relationships of spirituality, religion, and health have been the subject of research in a variety of disciplines over the past two decades. Findings have varied: some findings appear to have strong evidence of relationships while other findings are deemed inconclusive. A few studies have distinguished between religion and spirituality, but most investigators have treated the two as one concept with no clear lines of distinction between them. This theoretical study, focusing on the topic of spirituality, explores several related concepts, including forgiveness, flourishing, and resilience, as a basis for developing approaches to facilitate recovery in mental health clients using spiritual interventions.

Unterrainer, H. F., A. J. Lewis & A. Fink. 2014. Religious/Spiritual Well-being, personality and mental health: A review of results and conceptual issues. *Journal of Religion and Health* 53(2). 382–392.
doi:10.1007/s10943-012-9642-5.

The current paper provides background to the development of the Multidimensional Inventory for Religious/Spiritual Well-being and then summarizes findings derived from its use with other measures of health and personality. There is substantial evidence for religiosity/spirituality being positively related to a variety of indicators of mental health, including subjective well-being and personality dimensions. Furthermore, religiosity/spirituality can play an important role in the process of recovering from mental illness as well as providing a protective function against addictive or suicidal behaviors. However, further research is needed to examine the mechanisms through which religiosity/spirituality have an impact on health-related conditions.

Williams, J. Mark G., Catherine Crane, Thorsten Barnhofer, Kate Brennan, Danielle S. Duggan, Melanie J. V. Fennell, Ann Hackmann, et al. 2014. Mindfulness-based cognitive therapy for preventing relapse in recurrent depression: a randomized dismantling trial. *Journal of Consulting and Clinical Psychology* 82(2). 275–286.
doi:10.1037/a0035036.

Researchers compared mindfulness-based cognitive therapy (MBCT) with both cognitive psychological education (CPE) and treatment as usual (TAU) in preventing relapse to major depressive disorder (MDD) in people currently in remission following at least 3 previous episodes. In this randomized controlled trial 274 participants were allocated in the ratio 2:2:1 to MBCT plus TAU, CPE plus TAU, and TAU alone. Data were analyzed for the 255 (93%; MBCT = 99, CPE = 103, TAU = 53) retained to follow-up. MBCT was delivered in

accordance with its published manual, modified to address suicidal cognitions; CPE was modeled on MBCT, but without training in meditation. Both treatments were delivered through 8 weekly classes. Allocated treatment had no significant effect on risk of relapse to MDD over 12 months follow-up. However, severity of childhood trauma affected relapse and significantly interacted with allocated treatment. The authors conclude that MBCT provided significant protection against relapse for participants with increased vulnerability due to history of childhood trauma, but showed no significant advantage in comparison to an active control treatment and usual care over the whole group of patients with recurrent depression.

2.3 SPIRITUALITY & HEALTH: METHOD AND THEORY

Aalderen, Joël R. van, Walter J. Breukers, Rob P. B. Reuzel & Anne E. M. Speckens. 2014. The role of the teacher in mindfulness-based approaches: A qualitative study. *Mindfulness* 5(2). 170–178. doi:10.1007/s12671-012-0162-x.

This study explores the role of the mindfulness-based teacher from the perspective of both participant and teacher. Three qualitative techniques are used to obtain information: in-depth interviews of mindfulness training participants (n=10) and teachers (n=9); a focus group consisting of mindfulness teachers (n=6); and observation by participation in a mindfulness-based cognitive therapy course (MBCT). These three sources of information enabled us to use triangulation to come to our conclusions. A thematic analysis approach was used to derive central themes from the interviews. Analyses resulted in four overarching themes characterizing the teacher-participant relationship in MBCT: embodiment, empowerment, non-reactivity and peer support. The embodiment of the method by the teacher, the teaching of an empowering way of dealing with problems and group processes are mentioned as key factors. Group processes seem to be underestimated by the teachers in the study.

Aragno, Anna. 2014. The roots of evil: A psychoanalytic inquiry. *Psychoanalytic Review* 101(2). 249–288. doi:10.1521/prev.2014.101.2.249.

Of all the great dualities of human experience, "good and evil" have been the most instrumental in shaping the beliefs, rituals, and laws of Homo sapiens. The polarization of our nature into "good and bad" and anthropomorphic externalizations of these impulses have been with us for millennia, providing inspiration for magical rites, representational forms, and the cornucopia of dramas, narratives, and artworks to which they give expression. Furthermore, whereas all religions advocate for good, the particular narratives of evil underlying the traditions of Western culture come to us from the Bible. However, good and especially evil are theological and moral, not psychological, constructs. With Freud's death instinct, and later Fromm's necrophilous character, the darker shadow of human nature became definitively secularized. After an introduction and historical/developmental overview of select theorists, this paper adopts a strictly psychoanalytic frame of reference in the exploration of what renders some human beings capable of doing inhuman things. Looking at behaviors manifesting through the psychodynamics of character structure and severe personality disorders, the breakdown of empathy and defacement of the "other" in the creation of an enemy is discussed. In conclusion two clinical portraits are offered, illustrating how primitive emotions and defenses, superego pathology, and latent schizoid, narcissistic, and projective mechanisms provide fuel and rationalization for malignant aggressive, duplicitous, and sadistic behaviors.

Arbel, Oded. 2014. Sowing the seeds of mindfulness: Experiences from the Israeli Desert Mindfulness Clinic. *Mindfulness* 5(2). 217–219. doi:10.1007/s12671-013-0255-1.

This article presents the experiences of the author from the Israeli Desert Mindfulness Clinic. The Desert Mindfulness Clinic is running as part of the Beer Sheva Mental Health Center (MHC), one of the biggest psychiatric hospitals in Israel, covering the entire southern region of the country. The mindfulness clinic within the

MHC is a unique initiative in Israel and, to some extent, even worldwide. In the Soto Zen tradition, meditation is often referred to as “the art of just sitting.” The aim of the staff in the clinic is two-fold: to deal with stress and burnout and to offer an experience of another way of being, by allowing each participant to have a few conscious breaths, mindfully, on a regular basis.

- Balkin, Richard S., Richard E. Watts & Saba R. Ali. 2014. A conversation about the intersection of faith, sexual orientation, and gender: Jewish, Christian, and Muslim perspectives. *Journal of Counseling & Development* 92(2). (Special Section: Professionalism, Ethics, and Value-Based Conflicts in Counseling). 187–193.
doi:10.1002/j.1556-6676.2014.00147.x.

Recent challenges to counselor education and the American Counseling Association Code of Ethics provided the impetus for this article, which is focused on how 3 major Western religions address counseling and counselor training with diverse clients. Jewish, Christian, and Muslim perspectives are highlighted as related to counseling and training issues across faith, sexual orientation, and gender issues.

- Barker, Kristin K. 2014. Mindfulness meditation: do-it-yourself medicalization of every moment. *Social Science & Medicine* (1982) 106. 168–176.
doi:10.1016/j.socscimed.2014.01.024.

This paper examines mindfulness as a popular and paradigmatic alternative healing practice within the context of contemporary medicalization trends. In recognition of the increasingly influential role popular media play in shaping ideas about illness and healing, what follows is a discursive analysis of bestselling mindfulness meditation self-help books and audio recordings by Jon Kabat-Zinn. The central and contradictory elements of this do-it-yourself healing practice as presented in these materials are best understood as aligned with medicalization trends for three principal reasons. First, mindfulness represents a significant expansion in the definition of disease beyond that advanced by mainstream medicine. Second, its etiological model intensifies the need for therapeutic surveillance and intervention. Third, by defining healing as a never-ending process, it permanently locates individuals within a disease-therapy cycle. In sum, the definition, cause, and treatment of disease as articulated by popular mindfulness resources expands the terrain of experiences and problems that are mediated by medical concepts. The case of mindfulness is a potent illustration of the changing character of medicalization itself.

- Bidell, Markus P. 2014. Personal and professional discord: Examining religious conservatism and lesbian-, gay, and bisexual-affirmative counselor competence. *Journal of Counseling & Development* 92(2). (Special Section: Professionalism, Ethics, and Value-Based Conflicts in Counseling). 170–179.

Lesbian, gay, and bisexual (LGB) orientations can evoke strong reactions that are often based on personal beliefs that seemingly conflict with professional standards calling for LGB-affirmative counseling. This study examined the relationship between religious conservatism and LGB-affirmative counselor competence. Controlling for education level, political conservatism, and LGB interpersonal contact, the results indicate that, as religious conservatism increased, LGB competency significantly decreased. The strongest predictor of LGB-affirmative counselor competency was religious fundamentalism, whereas multicultural course work was not a significant predictor.

- Burke, Laurie A. & Robert A. Neimeyer. 2014. Complicated spiritual grief I: Relation to complicated grief symptomatology following violent death bereavement. *Death Studies* 38(4). 259–267.
doi:10.1080/07481187.2013.829372.

Losing a loved one to violent death has been associated with poor mental health outcomes, including posttraumatic stress disorder, depression, and complicated grief (CG), a protracted, debilitating, and sometimes life-threatening reaction to loss. In addition, recent research suggests that traumatic loss can violate mourners’ basic assumptive

worldviews, and can precipitate a spiritual crisis following loss, also known as complicated spiritual grief (CSG). The present cross-sectional study investigated these multidimensional outcomes in a diverse sample of 150 griever. The authors found that (a) violently bereaved individuals reported greater CG and CSG than did individuals bereaved by natural death; (b) CG and CSG were correlated across the larger sample, and yet are theoretically different constructs; and (c) specific cause of death (natural anticipated, natural sudden, homicide, suicide, or fatal accident) differentially predicted levels of CG and CSG. Implications of these findings for a clearer understanding of spiritual coping in the wake of troubling loss are noted, as well as for intervention with mourners struggling with clinical complications.

Burke, Laurie A., Robert A. Neimeyer, Jason M. Holland, Sharon Dennard, Linda Oliver & M. Katherine Shear. 2014. Inventory of complicated spiritual grief: Development and validation of a new measure. *Death Studies* 38(4). 239–250.
doi:10.1080/07481187.2013.810098.

Although spirituality often has been associated with better outcomes following bereavement, it can be significantly challenged by loss as well. Studies have shown that some bereaved individuals suffer profoundly not only in relation to the death of their loved one but also in their relationship with God and their faith community, a condition known as complicated spiritual grief (CSG). However, to date, in the absence of a simple, multidimensional, and well-validated measure of spiritual crisis following loss, investigators have measured CSG with non-grief-specific instruments. In this study, the authors tested the reliability and validity of a newly developed measure of CSG, called the Inventory of Complicated Spiritual Grief (ICSG). With 2 diverse samples of bereaved adult Christians (total n=304), the authors found that the ICSG had strong internal consistency, and high test-retest reliability for both subscales in a subsample of participants. Analyses of both samples supported a 2-factor model, with one factor measuring Insecurity with God and the other assessing Disruption in Religious Practice. Analyses further supported the convergent and incremental validity of the 18-item ICSG relative to other theoretically similar instruments and measures of poor bereavement outcome, suggesting its usefulness in clinical research and practice.

Burke, Laurie A., Robert A. Neimeyer, Amanda J. Young, Elizabeth Piazza Bonin & Natalie L. Davis. 2014. Complicated spiritual grief II: A deductive inquiry following the loss of a loved one. *Death Studies* 38(4). 268–281.
doi:10.1080/07481187.2013.829373.

Recent studies have revealed an association between complicated grief, which is a severe, prolonged response to the loss of a loved one, and complicated spiritual grief, which is a spiritual crisis following loss. Furthermore, bereavement research has benefitted from a number of studies using qualitative inquiry as a means of examining the experiences of individuals grieving a variety of types of losses. However, a gap in the literature remains in terms of the qualitative investigation of spiritual struggle following loss. Thus, using participants' written responses to open-ended questions along with systematic exploration of this topic with a five-member focus group, researchers designed this qualitative study to better understand the firsthand experiences of bereaved individuals who have suffered a crisis of faith after the death of a loved one. Specifically, directed content analysis of bereaved focus group members' responses revealed 17 different common and salient themes subsumed in an overarching narrative of resentment and doubt toward God, dissatisfaction with the spiritual support received, and substantial changes in the bereaved person's spiritual beliefs and behaviors. Thus, this study clarified the construct of complicated spiritual grief, and laid the groundwork for development of more specific assessment and treatment of this condition.

Choudhuri, Devika Dibya & Kurt L. Kraus. 2014. Buddhist perspectives for addressing values conflicts in counseling: Possibilities from practice. *Journal of Counseling & Development* 92(2). (Special Section: Professionalism, Ethics, and Value-Based Conflicts in Counseling). 194–201.
doi:10.1002/j.1556-6676.2014.00148.x.

In recent years, the issue of value conflicts in counseling has become more salient, whereas equitably working with such conflicts has been increasingly contested. Interest in the confluence of counseling and spirituality has also grown. Using relevant Buddhist principles, the authors offer a spiritual framework that is illustrated through clinical case studies. These are used to conceptualize concerns, understand the conflict, and find ways to be responsive to the disjunction between client and counselor.

Chu, Doris C. & Hung-En Sung. 2014. Causation of drug abuse and treatment strategy: A comparison of counselors' perceptions of faith-based and secular drug treatment programs. *International Journal of Offender Therapy and Comparative Criminology* 58(4). 496–515.

Many offenders participate in drug abuse treatment programs while in prison or on probation or parole. Among other benefits, this treatment may lessen the risk of recidivism. Thus, understanding counselor treatment philosophy is important as their attitudes toward treatment can be influential in the strategies they use and ultimately affect treatment outcomes. Analyzing data from 110 drug abuse treatment counselors, this study compared counselors' perceptions of causation of drug abuse and treatment strategy between faith-based and secular treatment programs. It was found that counselors from faith-based programs were more likely to endorse religious models and less prone to support disease models as an explanation of drug use. With regard to treatment strategy, counselor's group affiliation was not predictive of a focus on either a client religious need or a medical treatment model. Nevertheless, the extent of counselor's religiosity was correlated with tackling clients' religious needs as a treatment strategy. On the other hand, certified (licensed) counselors were found to be more supportive of the medical model as a treatment approach.

Cotton, Sian, Daniel H Grosseohme, Whitney R Bignall & Jerren C Weekes-Kanu. 2014. Should my provider pray with me? Perspectives of urban adolescents with asthma on addressing religious and spiritual issues in hypothetical clinical settings. *Journal of Religion and Health* 53(2). 604–613. doi:10.1007/s10943-013-9790-2.

This qualitative study examined the preferences of urban adolescents with asthma for including religious/spiritual (R/S) inquiry in a variety of hypothetical clinical encounters. Twenty-one urban adolescents with asthma participated in a semi-structured interview. Interviews were transcribed and underwent a thematic analysis. R/S preferences were contextual rather than personal, driven by: (1) acuity of the hypothetical clinical context; (2) nature of the patient-provider relationship; and (3) level of R/S intervention/inquiry. Most adolescents welcomed prayer if near death, but did not see the relevance of R/S in a routine office visit.

Daaleman, Timothy P, David Reed, Lauren W Cohen & Sheryl Zimmerman. 2014. Development and preliminary testing of the quality of spiritual care scale. *Journal of Pain and Symptom Management* 47(4). 793–800. doi:10.1016/j.jpainsymman.2013.06.004.

This article aims to describe the development and reliability and validity of the Quality of Spiritual Care (QSC) scale in family caregivers. Researchers conducted analyses of interviews conducted that included the QSC scale with family members of residents who died in long-term care settings taken after the resident had died. To determine reliability and validity of the QSC scale, researchers examined internal consistency, concurrent construct validity, and factor analysis with promax rotation. Of 165 family caregivers of decedents who were asked whether they received spiritual care, 91 (55%) responded yes, and 89 of these (98%) completed at least 80% of the QSC items. Two items (satisfaction with and value of spiritual care) were perfectly correlated so the latter item was dropped in scale development. Factor analysis identified two factors, personal spiritual enrichment and relationship enrichment. Reliability analysis yielded a Cronbach's alpha of 0.87, and item-total correlations for all items were in excess of 0.55. Preliminary validity of the QSC was supported by significant and expected correlations in both direction and magnitude with items from validated instruments conceptually associated with the quality of spiritual care.

Ferdinand, Alva O, Josue Patien Epame & Nir Menachemi. 2014. Community benefits provided by religious, other nonprofit, and for-profit hospitals: a longitudinal analysis 2000-2009. *Health Care Management Review* 39(2). 145–153.

doi:10.1097/HMR.0b013e3182993b52.

This longitudinal study examines how religious hospitals compare with other nonprofit hospitals (NFPs) and for-profit hospitals with respect to providing community benefits and how the provision of community benefits by hospitals has changed over time. Researchers examine two summated scores based on questions from the American Hospital Association annual survey that focus on community orientation among hospitals. Researchers analyze two regressions with year, facility, and market controls to determine how religious hospitals compare with the other groups over time. Overall, 11% of U.S. hospitals are religious. Religious hospitals were more likely to engage in each individual community benefit activity examined. In addition, the mean values of community benefits provided by religious hospitals, as measured on two summated scores, were significantly higher than those provided by other hospital types in bivariate and regression analyses. Overall, community benefits provided by all hospitals increased over time and then leveled off during the start of the recent economic downturn.

Ford, Dee W, Lois Downey, Ruth Engelberg, Anthony L Back & J Randall Curtis. 2014. Association between Physician Trainee Self-Assessments in Discussing Religion and Spirituality and Their Patients' Reports. *Journal of Palliative Medicine* 17(4). 453–462.

doi:10.1089/jpm.2013.0388.

This study intended to determine whether physician trainees' self-assessments of their communication skills in religious/spiritual discussions were associated with assessments obtained from patients under their care. Prospective, observational, survey-based study of internal medicine trainees' self-assessments (n=181) were matched with their patients' reports (n=541). Data were obtained from pre-intervention surveys prior to the trainees participating in a communication educational intervention. Researchers found that trainees' self-assessments of their communication skills in religious/spiritual communication was significantly and positively associated with their patients' reports of the occurrence and ratings of religious/spiritual communication. The authors conclude therefore that physician trainee self-assessments may be a valid surrogate for patient ratings of quality with respect to religious/spiritual communication.

Frewen, Paul A., Franziska Unholzer, Kyle R.-J. Logie-Hagan & Julia D. MacKinley. 2014. Meditation Breath Attention Scores (MBAS): Test–retest reliability and sensitivity to repeated practice. *Mindfulness* 5(2). 161–169.

doi:10.1007/s12671-012-0161-y.

The sensitivity of an experience-sampling measure of meditators' ability to maintain attention to their breathing during 15-min practices of mindful breath awareness meditation, referred to as "Meditation Breath Attention Scores" (MBAS), was previously shown to vary with other meditative experiences and mindfulness-related traits. The objectives of the present study were to assess: (1) the test–retest reliability of MBAS and (2) the sensitivity to practice-related effects of MBAS. Participants completed as many as four meditation sessions held on average 8–10 days apart. Ninety-five participants took part in session 1, with 77 (81 %) completing all four sessions. Test–retest reliability of MBAS was established and MBAS were sensitive to practice effects consistent with their interpretation as a performance measure. Individual differences in MBAS thus appear to be reliable over time but improve with the repeated practice of meditation.

Ghorbani, Nima, P.J. Watson, Mehran Farhadi & Zhuo Chen. 2014. A multi-process model of self-regulation: Influences of Mindfulness, Integrative Self-Knowledge and Self-Control in Iran. *International Journal of Psychology* 49(2). 115–122.

doi:10.1002/ijop.12033.

Self-regulation presumably rests upon multiple processes that include an awareness of ongoing self-experience, enduring self-knowledge and self-control. The present investigation tested this multi-process model using the Five-Facet Mindfulness Questionnaire (FFMQ) and the Integrative Self-Knowledge and Brief Self-Control Scales. Using a sample of 1,162 Iranian university students, researchers confirmed the five-factor structure of the FFMQ in Iran and documented its factorial invariance across males and females. Self-regulatory variables correlated negatively with Perceived Stress, Depression, and Anxiety and positively with Self-Esteem and Satisfaction with Life. Partial mediation effects confirmed that self-regulatory measures ameliorated the disturbing effects of Perceived Stress. Integrative Self-Knowledge and Self-Control interacted to partially mediate the association of Perceived Stress with lower levels of Satisfaction with Life. Integrative Self-Knowledge, alone or in interaction with Self-Control, was the only self-regulation variable to display the expected mediation of Perceived Stress associations with all other measures. Self-Control failed to be implicated in self-regulation only in the mediation of Anxiety. These data confirmed the need to further examine this multi-process model of self-regulation.

Giordano, Amanda L. & Craig S. Cashwell. 2014. Entering the Sacred: Using Motivational Interviewing to Address Spirituality in Counseling. *Counseling and Values* 59(1). 65–79.
doi:10.1002/j.2161-007X.2014.00042.x.

Despite the salience of spirituality in the lives of many clients, counselors are often hesitant to explore spiritual issues in counseling, largely out of a valid concern of imposing values on the client. Motivational interviewing provides a framework within which a counselor can both assess spirituality and facilitate client exploration of spiritual issues without fear of imposing values.

Grundmann, Christoffer H. 2014. To have life, and have it abundantly! Health and well-being in biblical perspective. *Journal of Religion and Health* 53(2). 552–561.
doi:10.1007/s10943-013-9706-1.

Epidemiological studies researching the impact of participation in religious activities on the overall health and well-being of individuals suggest that having faith and practicing religion is good since they represent expense free, non-medical coping mechanisms accessible to everyone. Faith and religion, thus, can serve for a large number of people as potential reservoirs for cultivating well-being and maintaining health, thereby cutting health-care costs significantly. This begs the question if such pragmatic instrumentalization does justice to faith and religion in the first place. The article investigates this question taking the Christian biblical tradition as an example by, first, identifying texts speaking of “health” across different Bible versions (I), second, by sketching related concepts of “health”(II) and, finally, by assessing the actual extent to which biblical tradition supports the quest for health and well-being (III).

Hafizi, Sina, David H. Rosmarin & Harold G. Koenig. 2014. Brief trust/mistrust in God scale: Psychometric properties of the Farsi version in Muslims. *Mental Health, Religion & Culture* 17(4). 415–420.
doi:10.1080/13674676.2013.816942.

In Iran, a Middle Eastern Islamic country, far too little attention has been paid to the validation and cultural adaptation of measures of religion/spirituality. This has limited the potential for research in this area. The objective of the paper is to assess the psychometric properties of the Farsi version of the Brief Trust/Mistrust in God Scale (BTMGS). After translation of the original English version of the measure into Farsi using a standard forward-backward method, the BTMGS along with the Duke University Religion Index (DUREL) and Hoge Intrinsic Religiosity (Hoge IR) Scale was administered to 720 medical students, physicians, and nurses at Tehran University of Medical Sciences and affiliated hospitals. Internal consistency, test-retest reliability, concurrent validity, and construct validity were determined for the BTMGS. The Farsi version of the BTMGS had high internal consistency, and test-retest reliability, and was adequately correlated with other established measures of religiosity, indicating support for the concurrent validity of the measure. A confirmatory factor analysis

indicated that the Farsi version has two factors (i.e., Trust in God and Mistrust in God) consistent with the original scale. These findings suggest that the Farsi version of BTMGS is a valid and reliable measure in Farsi-speaking populations that may be used to assess relationships with health and well-being.

Hatami, Hossein, Ebrahim Afjei, Maryam Hatami & Neda Hatami. 2014. Monotheistic and spiritual style literature in traditional medicine's resources. *Journal of Religion and Health* 53(2). 438–448. doi:10.1007/s10943-012-9647-0.

For this article, researchers studied the style of writing in the Islamic original sources of traditional medicine from the beginning of the second millennium, including Rhazes, Ahavazi, Avicenna, and Jorjani. An electronic database of the texts was created, and content analysis of the language in the texts was performed. The present authors found that many of the Iranian poets, Gnostics and scientists who studied nature reached the same conclusion from their own point of view: they all observed the permanent emergence of God in all phenomena of universe. Poets considered the beauties of nature; Gnostics studied mental issues; and scientists of natural sciences explored the physiology and anatomy of human body. However, all of them referred to the beauty and magnificence of the universe, as well as the goal-directed character of its phenomena. They performed their research as a way of seeking God, thus paving the way for future generations of scholars. They benefited from the usefulness of the cumulative effects of spirituality, religion and health on performance, thereby highlighting the need to incorporate spirituality and religion in teaching curricula.

Herlihy, Barbara J., Mary A. Hermann & Leigh R. Greden. 2014. Legal and ethical implications of using religious beliefs as the basis for refusing to counsel certain clients. *Journal of Counseling & Development* 92(2). (Special Section: Professionalism, Ethics, and Value-Based Conflicts in Counseling). 148–153. doi:10.1002/j.1556-6676.2014.00142.x.

This article addresses potential legal and ethical implications of lawsuits that have been brought when counselors and counseling students have used their religious beliefs as the basis for refusing to counsel lesbian, gay, bisexual, and transsexual clients. Four lawsuits are reviewed, issues relevant to the cases are identified, and implications for counselor educators and counseling students are discussed.

Himmelstein, Sam, Stephen Saul, Alberto Garcia-Romeu & Daniel Pinedo. 2014. Mindfulness Training as an Intervention for Substance User Incarcerated Adolescents: A Pilot Grounded Theory Study. *Substance Use & Misuse* 49(5). 560–570. doi:10.3109/10826084.2013.852580.

The current study investigated how to effectively teach mindfulness to 10 incarcerated adolescent substance users (n=10) in an urban California detention setting. A grounded theory approach was used to collect and analyze interview data over a 1-year period during 2011 and 2012 in order to develop an initial theory for teaching mindfulness to incarcerated adolescent substance users.

Hunsinger, Matthew, Robert Livingston & Linda Isbell. 2014. Spirituality and intergroup harmony: Meditation and racial prejudice. *Mindfulness* 5(2). 139–144. doi:10.1007/s12671-012-0159-5.

Past research has examined the relationship between religious beliefs and intergroup bias but has not investigated the relationship between specific religious practices and bias. The current work fills this gap by investigating differences in racial prejudice between individuals engaged in an active compassion-based meditation practice and those who have no experience with meditation. Researchers found that a group of experienced compassion-based meditators (from a range of religious traditions) expressed less racial prejudice and more empathy compared to a group of participants who had no experience with meditation, and that differences in prejudice were mediated by

empathy. These results suggest that compassion-based meditators express lower levels of explicit, racial prejudice than non-meditators and that these differences are explained by differences in empathy.

Hurley, Robyn V. C., Tom G. Patterson & Sam J. Cooley. 2014. Meditation-based interventions for family caregivers of people with dementia: A review of the empirical literature. *Aging & Mental Health* 18(3). 281–288.

doi:10.1080/13607863.2013.837145.

Providing care for a family member with dementia is associated with increased risk of adverse mental health sequelae. Recently, interventions utilizing meditation-based techniques have been developed with the aim of reducing psychological distress among dementia caregivers. The present review aimed to critically evaluate the extant empirical literature in order to determine: (1) whether meditation-based interventions can reduce depression among dementia caregivers and (2) whether meditation-based interventions can reduce subjective burden among dementia caregivers. After adhering to inclusion and exclusion criteria, a total of eight studies were included in the present review. Methodological quality was assessed using one of two scales dependent on study design. The results provide tentative evidence that meditation-based interventions do indeed improve levels of depression and burden in family dementia caregivers.

Innes, Kim E & Terry Kit Selfe. 2014. Meditation as a Therapeutic Intervention for Adults at Risk for Alzheimer's Disease - Potential Benefits and Underlying Mechanisms. *Frontiers in psychiatry* 5. 40.

doi:10.3389/fpsy.2014.00040.

In this study, researchers briefly review the existing evidence regarding the potential utility of meditation as a therapeutic intervention for those with and at risk for Alzheimer's disease, discuss possible mechanisms underlying the observed benefits of meditation, and outline directions for future research.

Janse van Rensburg, Bernard A. B. R., Marie Poggenpoel, Chris P H Myburgh & Christopher P Szabo. 2014. A model for the role of defined spirituality in South African specialist psychiatric practice and training. *Journal of Religion and Health* 53(2). 393–412.

doi:10.1007/s10943-012-9644-3.

The current bio-psycho-social approach in South African psychiatry refers to Engel's extended model of health care. It forms the basis of the existing collaboration between medicine, nursing, psychology, occupational therapy and social work. Psychiatry also has to bridge the multi-cultural, multi-religious and spiritual diverse reality of everyday practice. It has become important to establish how, within accepted boundaries, spirituality should be incorporated into the model for practice. Referring to methods described for nursing theory development, a defined core concept was used to construct a model. It may contribute to the discourse on spirituality in local psychiatry, health and mental health.

Joshanloo, Mohsen. 2014. Eastern Conceptualizations of Happiness: Fundamental Differences with Western Views. *Journal of Happiness Studies* 15(2). 475–493.

doi:10.1007/s10902-013-9431-1.

The purpose of this review is to compare and contrast western and eastern conceptualizations of happiness and optimal functioning. Towards this end, accounts of happiness and optimal functioning provided in western philosophy and scientific psychology are compared with those in some eastern schools of thought (namely, Hinduism, Buddhism, Taoism, Confucianism, and Sufism). Six fundamental differences in western and eastern conceptualizations of the good life are identified and discussed in the context of broader psychological theory. The authors hope that this theoretical analysis will stimulate more culturally informed research among happiness researchers.

Karvinen, Kristina H. & Lucas J. Carr. 2014. Does the perception that God controls health outcomes matter for health behaviors? *Journal of Health Psychology* 19(4). 521–530.
doi:10.1177/1359105312474914.

The purpose of this study was to examine the associations between God Locus of Health Control, health behaviors, and beliefs utilizing a cross-sectional online survey (n=549). Results indicated that God Locus of Health Control was correlated with alcohol use, physical activity, perceived risk of chronic disease, and beliefs that poor health behaviors contribute to chronic disease. Multiple regression analyses including covariates and other locus of control variables revealed that God Locus of Health Control was only an independent correlate of the belief that physical inactivity contributed to chronic disease.

Keall, Robyn, Josephine M. Clayton & Phyllis Butow. 2014. Australian Palliative Care Nurses' Reflections on Existential/Spiritual Interventions. *Journal of Hospice & Palliative Nursing* 16(2). 105–112.
doi:10.1097/NJH.0000000000000047.

The objective of this study was to understand Australian palliative care nurses' experience with existential/spiritual interventions and their critical appraisal of Outlook. Existential/spiritual interventions are showing positive results with palliative care patients. The majority of interventions are conducted by non-nurses, yet nurses are the most populous health care workers and are willing to provide holistic care, and patients are open to their help. A qualitative study through semi-structured interviews was conducted. Participants were recruited using purposive sampling of a cross section of 20 palliative care nurses. Questions focused on their experience and review of existential/spiritual interventions in general and a published intervention Outlook. Their responses were transcribed and subjected to thematic analysis. The nurses' responses yielded both a range of experiences with existential/spiritual interventions and a review of Outlook. The review of Outlook identified a further 6 subthemes, including (1) Outlook can provide a framework, (2) session II difficult but valuable, (3) benefit for the bereaved, (4) benefit for the nurse/health care team, (5) potential difficulties in delivering Outlook, and (6) possible modifications. Australian palliative care nurses have limited experience with published existential/spiritual interventions, but many are already including elements of these in their practice, and most welcomed the validated tool.

Kocet, Michael M. & Barbara J. Herlihy. 2014. Addressing Value-Based Conflicts Within the Counseling Relationship: A Decision-Making Model. *Journal of Counseling & Development* 92(2). 180–186.
doi:10.1002/j.1556-6676.2014.00146.x.

A growing number of legal and ethical cases have involved value conflicts between counselors, or counselors-in-training, and their clients. The authors examine considerations that professional counselors are encouraged to take into account when value conflicts arise within the therapeutic relationship. The authors present a strategy known as ethical bracketing and the Counselor Values-Based Conflict Model as tools to use when facing conflicts that arise between personal and professional values.

Kuah-Pearce, Khun Eng. 2014. Understanding suffering and giving compassion: The reach of socially engaged Buddhism into China. *Anthropology & Medicine* 21(1). 27–42.
doi:10.1080/13648470.2014.880872.

This paper will explore the social engagement of Buddhists through their active voluntary works. These works result in the development of a religious philanthropic culture. Through three case examples, this paper will examine how the sangha and individual Buddhists understand social suffering and compassion and attempt to integrate their understanding of Buddhist virtues and values in their daily life where the performance of voluntary works is seen as Buddhist spiritualism. In this process, the individuals seek to understand the key principles of

Buddhism that are of direct relevance to their daily existence and their quest to be a compassionate self. Foremost are two notions of yebao (karma) and gan-en (gratitude) and how through compassionate practices and gratitude for those who accepted compassionate acts, they would be rewarded with good karma. Here, pursuing compassionate acts and the alleviation of social suffering is the pursuit of this-worldly spiritualism.

- Manning, Lydia K. 2014. Enduring as lived experience: Exploring the essence of spiritual resilience for women in late life. *Journal of Religion and Health* 53(2). 352–362.
doi:10.1007/s10943-012-9633-6.

The purpose of this study was to explore spirituality and its relationship to resilience for women in late life. Over thirty interviews with six women aged 80 and older provide a dataset allowing for the phenomenological investigation of spiritual resilience. Themes emerged illustrating the components of spiritual resilience. The components of spiritual resilience are having divine support, maintaining purpose, and expressing gratitude. These factors are essential to the women's resilience and act as mechanisms that promote high levels of subjective well-being and an overall good quality of life. Essentially, participants articulate how their experiences of enduring hardships are informed by spiritual resilience.

- Padayachee, Priyanka & Sumaya Laher. 2014. South African Hindu psychologists' perceptions of mental illness. *Journal of Religion and Health* 53(2). 424–437.
doi:10.1007/s10943-012-9646-1.

Conceptualizations of mental illness are not universally applicable, as culture shapes the expression, perceptions and treatment preferences thereof. By focusing on the perceptions of Hindu psychologists regarding mental illness, this study aimed to provide a deeper understanding of the impact that religious beliefs have on such conceptualizations. Semi-structured interviews were conducted with six Hindu psychologists around the Johannesburg area, South Africa. Responses were analyzed using thematic content analysis. From the findings, it was evident that religion plays a critical role in the understanding and treatment of mental illness. Hindu beliefs around psychological disturbances were salient. Additionally, it was found that a tension existed between psychologists' awareness of the influential function of religion, particularly amongst collectivistic communities such as the Hindu community, and their occupational understandings and practices, which are deeply rooted in Western thought. Furthermore, it was suggested that the fear of stigma prevented Hindu clients from reaping the benefits of seeking help from culturally competent psychologists.

- Pagnini, Francesco, Chiara Di Credico, Ramona Gatto, Viviana Fabiani, Gabriella Rossi, Christian Lunetta, Anna Marconi, et al. 2014. Meditation training for people with amyotrophic lateral sclerosis and their caregivers. *Journal of Alternative and Complementary Medicine* 20(4). 272–275.
doi:10.1089/acm.2013.0268.

Amyotrophic lateral sclerosis (ALS) is a progressive and fatal neurodegenerative disease that is clinically characterized by progressive weakness leading to death by respiratory insufficiency, usually within three years. Although the patient's intellect and personality usually remain unimpaired, as the disease progresses, the patient becomes immobile, develops wasting, and speech becomes impaired, often resulting in social isolation and a high degree of psychological suffering. Mindfulness meditation has proven to be effective technique for reducing distress in many chronic diseases. However, to date, no study has investigated the effect of mindfulness meditation on patients with ALS. A mindfulness meditation training program for ALS patients needs to consider the particularities of ALS symptoms, including the loss of muscular functions and difficulties in respiration, together with the subsequent emotional impairments. With these caveats in mind, a modified protocol, based on original mindfulness meditation interventions, has been created specifically for the ALS population. This article describes the protocol and preliminary results.

Abu-Raiya, Hisham. 2014. Western psychology and Muslim psychology in dialogue: comparisons between a Qura'nic theory of personality and Freud's and Jung's ideas. *Journal of Religion and Health* 53(2). 326–338.

doi:10.1007/s10943-012-9630-9.

In this paper, comparisons are made between a newly developed Qura'nic theory of personality and the Freudian and Jungian theories of the mind. Notable similarities were found between the Freudian id, ego, superego and neurosis and the Qura'nic nafs ammarah besoa' (evil-commanding psyche), a'ql (intellect), al-nafs al-lawammah (the reproachful psyche) and al-nafs al-marid'a (the sick psyche), respectively. Noteworthy resemblances were detected also between the Jungian concepts collective unconscious, archetypes, Self and individuation and the Qura'nic constructs roh (spirit), al-asmaa' (the names), qalb (heart), and al-nafs al-mutmainnah (the serene psyche), respectively. These parallels, as well as the departure points, between the models are thoroughly discussed and analyzed. The comparisons performed in this paper open new avenues for dialogue between western models of the psyche and their Muslim counterparts, a dialogue that can enrich both perspectives and advance the field of psychology.

Regan, Jemma L. 2014. Redefining dementia care barriers for ethnic minorities: The religion–culture distinction. *Mental Health, Religion & Culture* 17(4). 345–353.

doi:10.1080/13674676.2013.805404.

Barriers to healthcare services experienced by black and minority ethnic (BME) persons with dementia are labelled as “cultural” in existing research. This is a promising shift from an ethno-centric approach to dementia care provision, yet very little research is dedicated to specifically how religion, as distinct from culture, influences healthcare practice. Further consideration of the religion/culture distinction is required; religion and culture are two distinct entities, which inevitably interlink. Cultural themes such as “God's will”, “Religious Ritual” and “Religious Duty”, warrant re-categorization as “religious.” Sensitivity to the nuances between cultural and religious themes will provide clearer knowledge of how and why BME persons with dementia experience barriers to accessing care services. Further research is needed with regard to the role of religion specifically on dementia care access for BME persons to aim to improve care provision for this underrepresented demographic.

Schultz, Michael, Doron Lulav-Grinwald & Gil Bar-Sela. 2014. Cultural differences in spiritual care: findings of an Israeli oncologic questionnaire examining patient interest in spiritual care. *BMC Palliative Care* 13(1). 19.

doi:10.1186/1472-684X-13-19.3.

As professional spiritual care (chaplaincy) is introduced to new cultures worldwide, it bears examining which elements of screening and care are universal and, for those elements showing cultural difference, to study them in each culture. No quantitative spiritual care patient study had previously been done in Israel. Our objectives were twofold: 1) to examine who wants spiritual care in Israel, including demographic and clinical variables, and to compare against other results worldwide to further develop universal screening protocols 2) to see what patients want from spiritual care specifically in the Israeli setting. The study setting was an Israeli oncology center at which spiritual care had been recently introduced. Data from 364 oncology patient questionnaires found 41% interest in spiritual care, as compared to 35%-54% in American studies. Having previously been visited by a spiritual caregiver predicted patient interest in further spiritual care, suggesting that the new service is being well-received. Multivariate stepwise logistic regression analysis identified additional predictors of openness to receiving spiritual care: self-describing as somewhat/very spiritual vs. not spiritual or traditional/religious vs. secular; and receiving one visit a week or less from family and friends. These findings are in line with previous American studies, suggesting universality across cultures that could be utilized in screening. Differences in demographic data and medical condition were not significant predictors of patient interest, suggesting a cultural difference, where age and

education were predictors in the American context. Levels of interest in explicitly religious or spiritual support such as prayer or addressing religious/spiritual questions were much lower than in other cultures.

- Sink, Christopher A. & Shawn A. Bultsma. 2014. Psychometric analysis of the Life Perspectives Inventory and implications for assessing characteristics of adolescent spirituality. *Measurement and Evaluation in Counseling and Development* 47(2). 150–167.

The psychometric properties of the Life Perspectives Inventory (LPI English language version), a new instrument designed to assess characteristics associated with nonreligious spirituality in high school–age adolescents, were examined in two phases. Phase 1 demonstrated the survey’s factorial validity and internal consistency and the test–retest reliability of four derived dimensions (Optimistic Outlook, Purpose and Meaning in Life, Connection with the Divine, and Active Spirituality) with a large sample (n=531) of Washington state high school students. In Phase 2, the LPI’s dimensionality was cross-validated using confirmatory factor analysis with more than 400 Michigan high school students. Alpha and stability coefficients computed with the Michigan sample provided further evidence for the LPI-E’s reliability. Implications for school counseling practice are included.

- Turner, Yolanda & William Stayton. 2014. The twenty-first century challenges to sexuality and religion. *Journal of Religion and Health* 53(2). 483–497.
doi:10.1007/s10943-012-9652-3.

Clergy and religious leaders are facing a wide variety of sexual needs and concerns within their faith communities. Conflicts over sexual issues are growing across the entire spectrum of religious denominations, and clerics remain ill prepared to deal with them. As religious communities work to remain influential in public policy debates, clergy and the institutions that train them need to be properly prepared for twenty-first century challenges that impact sexuality and religion. Clergy are often the first point of contact for sexual problems and concerns of their faith community members—complex issues centered on morals, spirituality, and ethics. Yet, there still exists a significant lack of sexual curricula in the programs that are educating our future religious leaders. The resulting paucity of knowledge leaves these leaders unprepared to address the needs and concerns of their congregants. However, with accurate, relevant human sexuality curricula integrated into theological formation programs, future leaders will be equipped to competently serve their constituencies. This paper provides a rationale for the need for such training, an overview of the faith- and theology-based history of a pilot training project, and a description of how the Christian faith and the social sciences intersect in a training pilot project’s impetus and process.

- Watts, S. W., C. Murray & A. Pilkington. 2014. Understanding and supporting psychological wellbeing: An exploration of the experiences of Islamic scholars. *Mental Health, Religion & Culture* 17(4). 365–378.
doi:10.1080/13674676.2013.808177.

This paper considers the role of Islamic scholars as non-statutory providers of support for individuals with issues of psychological distress and wellbeing. A qualitative phenomenological analysis of the experiences of six Imams (Islamic religious officials) who saw this type of support as being part of their role is presented. Four themes were identified: “Building a personal relationship with the ultimate authority”; “Treating the whole person”; “God’s medicine” and “Duty bound to help.”

- Uppal, Gobinderjit Kaur, Sheila Bonas & Helen Philpott. 2014. Understanding and awareness of dementia in the Sikh community. *Mental Health, Religion & Culture* 17(4). 400–414.
doi:10.1080/13674676.2013.816941.

Previous literature confirms that older black minority ethnic populations are less likely than white populations to contact dementia services in the UK. However, it is unknown whether this is due to a higher or lower prevalence of dementia or due to different needs or coping strategies within these communities. The aim of this study was to explore the understanding and perceptions of dementia amongst Sikhs living in the UK. Six focus groups were

involved with 28 Sikh participants who were recruited from Gurdwara (Sikh places of worship). Data were analyzed using constant comparative methodology. The themes reported in this paper include “awareness and interpretation of the characteristics of dementia”, “multiple perspectives of the same symptoms” and “causes of dementia”. The findings have been discussed in the context of existing research and provide an introductory insight into informing culturally appropriate interventions.

Whitehead, James D. & Evelyn Eaton Whitehead. 2014. Transgender lives: From bewilderment to God’s extravagance. *Pastoral Psychology* 63(2). 171–184.
doi:10.1007/s11089-013-0543-7.

Bewilderment is an emotion often evoked by the topic of transgender. Even among those of good will, questions arise that seem to undermine many of the established understandings of personal identity and sexuality. This essay examines bewilderment as a salutary experience, a biblically sanctioned virtue that can lead to a new appreciation of God’s extravagance. The testimony of several transgender persons is examined, confirming the role of gender transition in their maturing in faith.

Whitman, Joy S. & Markus P. Bidell. 2014. Affirmative lesbian, gay, and bisexual counselor education and religious beliefs: How do researchers bridge the gap? *Journal of Counseling & Development* 92(2). (Special Section: Professionalism, Ethics, and Value-Based Conflicts in Counseling). 162–169.
doi:10.1002/j.1556-6676.2014.00144.x.

The position held by the American Counseling Association, reflecting acceptance, affirmation, and nondiscrimination of lesbian, gay, and bisexual (LGB) individuals, has created conflicts for some trainees who hold conservative religious beliefs about sexual orientation. This article explores the counseling profession’s evolution regarding LGB-affirmative counseling and examines the potential conflict this evolution can create for counselor educators who are training students with conservative religious viewpoints about sexual orientation. Recommendations for counselor educators to manage this dilemma are offered.

Wichaidit, Wit, Rassamee Sangthong, Virasakdi Chongsuvivatwong, Edward McNeil, Suwat Charialertsak, Pattapong Kessomboon, Surasak Taneepanichskul, Panwadee Putwatana, Wichai Aekplakorn & The Thai National Health Examination Survey IV Study Group. 2014. Religious affiliation and disparities in risk of non-communicable diseases and health behaviours: Findings from the fourth Thai National Health Examination Survey. *Global Public Health* 9(4). 426–435.
doi:10.1080/17441692.2014.894549.

This study aims to compare the health-related behaviors and risk of non-communicable diseases (NCDs) between Muslims and non-Muslims in Thailand, a predominantly Buddhist country in which Muslims are the second largest religious group. Data from the fourth Thai National Health Examination Survey (NHES IV) conducted in 2009 were used to run multivariate survey logistic regression models with adjustment for age, gender and socio-economic status indicators. Data from 20,450 respondents, of whom 807 (3.9%) were Muslims, were included in the study. Muslims were significantly more likely to have daily consumption of deep-fried food and packaged snacks, and have inadequate control of hypercholesterolemia. In conclusion, researchers found disparity in the majority of risk factors for NCDs between Muslim and non-Muslim Thais.

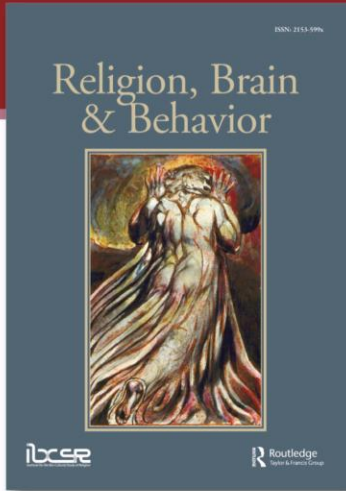
Williams, Terrinieka T, Darcy Dodd, Bettina Campbell, Latrice C Pichon & Derek M Griffith. 2014. Discussing adolescent sexual health in African-American churches. *Journal of Religion and Health* 53(2). 339–351.
doi:10.1007/s10943-012-9632-7.

This study describes the ways in which two African-American churches discuss adolescent sexual health topics. Six focus groups were conducted in two churches in Flint, Michigan, that reported no formal sexual health

programming for their congregants. Three themes emerged to highlight the different perspectives about the role of churches in adolescent sexual decision-making and sexual health education: (1) churches as sources of sexual information, (2) churches as complex communities, and (3) recommendations for sexual education in churches. Participant responses suggest that churches can and should serve a resource for sexual health information.

Ybañez-Llorente, Kathy & Quinn K. Smelser. 2014. Client as Expert: Incorporating Spirituality Using the Tree Ring Technique. *Counseling and Values* 59(1). 35–48.
doi:10.1002/j.2161-007X.2014.00040.x.

Addressing spirituality with clients from diverse spiritual backgrounds is a facet of culturally competent and ethical practice, yet various obstacles contribute to spirituality being overlooked. This article features a counseling technique used with clients who are experiencing difficulty with issues of a spiritual nature. Based on constructivist principles, the tree ring technique provides a context and process for examining clients' spiritual conflicts, whereby the client is the expert and the counselor adopts a not-knowing stance.



INVITATION TO SUBMIT

New to
Routledge
in 2011

Religion, Brain & Behavior

Published in association with the Institute for the Bio-Cultural Study of Religion www.ibcsr.org

Editors

Patrick McNamara, Boston University
Richard Sosis, University of Connecticut
Wesley J. Wildman, Boston University

Assistant Editor

James Haag, Suffolk University

International Editorial Board

Candace Alcorta, University of Connecticut
Nancy Ammerman, Boston University
Scott Atran, University of Michigan
Nina Azari, University of Hawaii
Justin Barrett, Oxford University
Jesse Bering, Queen's University, Belfast
Paul Bloom, Yale University
Pascal Boyer, Washington University in St. Louis
Warren Brown, Fuller Theological Seminary
Joseph Bulbulia, Victoria University
Philip Clayton, Claremont Graduate University
Adam B. Cohen, Arizona State University
Lee Cronk, Rutgers University
Daniel Dennett, Tufts University
Robin Dunbar, Oxford University
Robert Emmons, University of California, Davis
Ernst Fehr, University of Zurich
Daniel Fessler, University of California, Los Angeles
Armin Geertz, Aarhus University
William Scott Green, University of Miami
Marc Hauser, Harvard University
Joseph Henrich, University of British Columbia
William Irons, Northwestern University
Dominic Johnson, University of Edinburgh
Eric Kaufmann, University of London
Deborah Kelemen, Boston University
Lee Kirkpatrick, College of William and Mary
Pierre Liénard, University of Nevada, Las Vegas
Mike McCullough, University of Miami
Andrew Newberg, University of Pennsylvania
Ara Norenzayan, University of British Columbia
Kenneth Pargament, Bowling Green State University
Ilkka Pyysiäinen, University of Helsinki
Peter Richerson, University of California, Davis
Steven Schachter, Harvard University
Jeffrey Schloss, Westmont College
Todd Shackelford, Oakland University
Michael L. Spezio, Scripps College, Claremont
Ann Taves, University of California, Santa Barbara
Robert Trivers, Rutgers University
Fraser Watts, Cambridge University
Harvey Whitehouse, Oxford University
David Sloan Wilson, Binghamton University
Paul J. Zak, Claremont Graduate University

IBCSR

INSTITUTE FOR THE
BIO-CULTURAL STUDY
OF RELIGION

217 High Rock Street, Needham, MA 02492, USA
rbssubmit@ibcsr.org
www.ibcsr.org

The aim of *Religion, Brain & Behavior* (*RBB*) is to provide a vehicle for the advancement of current biological approaches to understanding religion at every level from brain to behavior. *RBB* unites multiple disciplinary perspectives that share these interests. The journal seeks empirical and theoretical studies that reflect rigorous scientific standards and a sophisticated appreciation of the academic study of religion.

RBB welcomes contributions from a wide array of biological and related disciplines, including:

- cognitive science
- evolutionary psychology
- evolutionary anthropology
- social neuroscience
- demography
- neuroeconomics
- developmental psychology
- moral psychology
- mimetics
- epidemiology
- cultural evolution
- cognitive neuroscience
- social psychology
- genetics
- neurology
- bioeconomics
- physiology
- psychology of religion
- archaeology
- behavioral ecology
- public health
- religious studies

In summary, *RBB* considers high quality papers in any aspect of the brain-behavior nexus related to religion.

Author Instructions

Papers for consideration should be sent to the Editors at:
<http://mc.manuscriptcentral.com/rbbb>

Instructions for manuscript preparation:

- Authors should format articles using APA Style, being sure to submit a version suitable for blind refereeing.
- Target articles and review articles are maximum 10,000 words in length, including notes and references. Invited commentaries on target articles are at most 1,000 words in length, and author responses are 2,500 words. Research articles and case studies are no longer than 6,000 words in length, including notes and references.
- Use no more than two layers of headings. Use endnotes rather than footnotes.
- Include an abstract of no more than 200 words, furnishing a summary of background, methods, results, and conclusions, in that order, where applicable.
- Include 4-8 key words or phrases that will help would-be readers find your article using web searches.
- Authors are responsible for obtaining permission to reproduce copyright material from other sources.

Please visit the journal's website for more information:
www.tandf.co.uk/journals/rbbb

Journal cover image: William Blake, Web of Religion, Lessing J. Rosenwald Collection, Library of Congress, Washington DC, USA

www.tandf.co.uk/journals/rbbb

Routledge
Taylor & Francis Group

PART 3. BOOKS

3.1 SCIENTIFIC STUDY OF RELIGION, BRAIN, AND BEHAVIOR

- Barry, Carolyn McNamara & Mona M. Abo-Zena (eds.). 2014. *Emerging adults' religiousness and spirituality: Meaning-making in an age of transition*. (Emerging Adulthood). Oxford University Press.
- Smith, Aaron C. T. 2014. *Thinking about religion: Extending the cognitive science of religion*. (Palgrave Frontiers in Philosophy of Religion). Palgrave Macmillan.

3.2 SPIRITUALITY & HEALTH RESEARCH

- Masuda, Akihiko (ed.). 2014. *Mindfulness & acceptance in multicultural competency: A contextual approach to sociocultural diversity in theory & practice*. (Mindfulness and Acceptance Practica). Oakland, Calif.: Context Press.
- Pasquini, John J. 2014. *Atheist persona: Causes and consequences*. University Press of America.
- Pedrotti, Jennifer Teramoto (ed.). 2014. *Perspectives on the intersection of multiculturalism and positive psychology*. New York: Springer.
- Uden, Marinus van, Joseph Pieper & Hessel Zondag. 2014. *Knockin' on Heaven's Door: Religious and Receptive Coping in Mental Health*. (International Series in Mental Health and Religion). Shaker Verlag.

PART 4. ARTICLES IN PRESS

4.1 SCIENTIFIC STUDY OF RELIGION, BRAIN, AND BEHAVIOR

- Chui, Wing Hong & Kevin Kwok-Yin Cheng. 2014. A Comparison of Attitudes Toward Prisoners of Religious and Non-Religious College Students in Hong Kong. *International journal of offender therapy and comparative criminology*.
doi:10.1177/0306624X14531035.
- Curci, Antonietta, Tiziana Lanciano, Chiara Maddalena, Stefano Mastandrea & Giuseppe Sartori. 2014. Flashbulb memories of the Pope's resignation: Explicit and implicit measures across differing religious groups. *Memory (Hove, England)*. 1–16.
doi:10.1080/09658211.2014.908923.
- Devor, Marshall, Isabelle Rappaport & Z Harry Rappaport. 2014. Does the Golem Feel Pain? Moral Instincts and Ethical Dilemmas Concerning Suffering and the Brain. *Pain practice: the official journal of World Institute of Pain*.
doi:10.1111/papr.12207.
- Gervais, Will M. 2014. Good for god? Religious motivation reduces perceived responsibility for and morality of good deeds. *Journal of experimental psychology. General*.
doi:10.1037/a0036678.
- Kim, Sunae & Paul L. Harris. 2014. Children prefer to learn from mind-readers. *British Journal of Developmental Psychology*.
doi:10.1111/bjdp.12044.
- Lamis, Dorian A, Christina K Wilson, Nicholas Tarantino, Jennifer E Lansford & Nadine J Kaslow. 2014. Neighborhood disorder, spiritual well-being, and parenting stress in African American women. *Journal of family psychology*.
doi:10.1037/a0036373.
- Okun, Morris A, Holly P O'Rourke, Brian Keller, Kathryn A Johnson & Craig Enders. 2014. Value-Expressive Volunteer Motivation and Volunteering by Older Adults: Relationships With Religiosity and Spirituality. *The journals of gerontology. Series B, Psychological sciences and social sciences*.
doi:10.1093/geronb/gbu029.
- Pelletier-Baldelli, Andrea, Derek J Dean, Jessica R Lunsford-Avery, Ashley K Smith Watts, Joseph M Orr, Tina Gupta, Zachary B Millman & Vijay A Mittal. 2014. Orbitofrontal cortex volume and intrinsic religiosity in non-clinical psychosis. *Psychiatry research*.
doi:10.1016/j.psychresns.2014.03.010.
- Sablosky, Roy. Does religion foster generosity? *The Social Science Journal*.
doi:10.1016/j.sosci.2014.03.012.
- Schreiber, Jill C & Michael J Culbertson. 2014. Religious socialization of youth involved in child welfare. *Child abuse & neglect*.
doi:10.1016/j.chiabu.2014.03.021.
- Todd, Nathan R., Jaclyn D. Houston & Charlynn A. Odahl-Ruan. 2014. Preliminary validation of the sanctification of social justice scale. *Psychology of Religion and Spirituality*.
doi:10.1037/a0036348.

4.2 SPIRITUALITY & HEALTH RESEARCH

- Achour, Meguellati, Fadila Grine, Mohd Roslan Mohd Nor & Mohd Yakub Zulkifli Mohdyusoff. 2014. Measuring Religiosity and Its Effects on Personal Well-Being: A Case Study of Muslim Female Academicians in Malaysia. *Journal of religion and health*. doi:10.1007/s10943-014-9852-0.
- Attard, Josephine, Donia R Baldacchino & Liberato Camilleri. 2014. Nurses' and midwives' acquisition of competency in spiritual care: A focus on education. *Nurse education today*. doi:10.1016/j.nedt.2014.04.015.
- Biggar, Nigel. 2014. Why religion deserves a place in secular medicine. *Journal of medical ethics*. doi:10.1136/medethics-2013-101776.
- Bradshaw, Matt, Christopher G Ellison, Qijuan Fang & Collin Mueller. 2014. Listening to Religious Music and Mental Health in Later Life. *The Gerontologist*. doi:10.1093/geront/gnu020.
- Britton, Willoughby B., Nathaniel E. Lepp, Halsey F. Niles, Tomas Rocha, Nathan E. Fisher & Jonathan S. Gold. 2014. A randomized controlled pilot trial of classroom-based mindfulness meditation compared to an active control condition in sixth-grade children. *Journal of School Psychology*. doi:10.1016/j.jsp.2014.03.002.
- Brotto, Lori A & Rosemary Basson. 2014. Group mindfulness-based therapy significantly improves sexual desire in women. *Behaviour research and therapy* 57C. 43–54. doi:10.1016/j.brat.2014.04.001.
- Chang, Bei-Hung, Nathan R Stein & Lara M Skarf. 2014. Spiritual distress of military veterans at the end of life. *Palliative & supportive care*. 1–5. doi:10.1017/S1478951514000273.
- Connell, Alida, Liezl Koen, Dana Niehaus, Karen J Cloete, Esme Jordaan & Ulla Botha. 2014. Religious Delusions in a Xhosa Schizophrenia Population. *Journal of Religion and Health*. doi:10.1007/s10943-014-9860-0.
- Cramer, Holger, Paul Posadzki, Gustav Dobos & Jost Langhorst. Yoga for asthma: a systematic review and meta-analysis. *Annals of Allergy, Asthma & Immunology*. doi:10.1016/j.anai.2014.03.014.
- Escobar, Oscar S & Ellen L Vaughan. 2014. Public Religiosity, Religious Importance, and Substance Use Among Latino Emerging Adults. *Substance use & misuse*. doi:10.3109/10826084.2014.901384.
- Fegg, Martin, Sibylle L'hoste, Monika Brandstätter & Gian Domenico Borasio. 2014. Does the Working Environment Influence Health Care Professionals' Values, Meaning in Life and Religiousness? Palliative Care Units Compared With Maternity Wards. *Journal of pain and symptom management*. doi:10.1016/j.jpainsymman.2014.01.009.
- Fergus, Thomas A. & Wade C. Rowatt. 2014. Examining a purported association between attachment to god and scrupulosity. *Psychology of Religion and Spirituality*.

doi:10.1037/a0036345.

Garssen, Bert, Nicoline F Uwland-Sikkema & Anja Visser. 2014. How Spirituality Helps Cancer Patients with the Adjustment to their Disease. *Journal of Religion and Health*.
doi:10.1007/s10943-014-9864-9.

Gonzalez, Patricia, Sheila F Castañeda, Jennifer Dale, Elizabeth A Medeiros, Christina Buelna, Alicia Nuñez, Rebeca Espinoza & Gregory A Talavera. 2014. Spiritual well-being and depressive symptoms among cancer survivors. *Supportive care in cancer: official journal of the Multinational Association of Supportive Care in Cancer*.
doi:10.1007/s00520-014-2207-2.

Grabovac, Andrea. 2014. The stages of insight: Clinical relevance for mindfulness-based interventions. *Mindfulness*.
doi:10.1007/s12671-014-0294-2.

Guner, Senem & Fatma Inanici. Yoga therapy and ambulatory multiple sclerosis Assessment of gait analysis parameters, fatigue and balance. *Journal of Bodywork and Movement Therapies*.
doi:10.1016/j.jbmt.2014.04.004.

Hanley, Adam W., Gary W. Peterson, Angela I. Canto & Eric L. Garland. 2014. The relationship between mindfulness and posttraumatic growth with respect to contemplative practice engagement. *Mindfulness*.
doi:10.1007/s12671-014-0302-6.

Hassan, Siti Hasnah. 2014. Effects of Religious Behavior on Health-Related Lifestyles of Muslims in Malaysia. *Journal of Religion and Health*.
doi:10.1007/s10943-014-9861-z.

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

Heeren, G Anita, Larry D Icard, Ann O’Leary, John B Jemmott Iii, Zolani Ngwane & Xoliswa Mtose. 2014. Protective Factors and HIV Risk Behavior Among South African Men. *AIDS and behavior*.
doi:10.1007/s10461-014-0767-2.

Hill, Terrence D, Sunshine M Rote, Christopher G Ellison & Amy M Burdette. 2014. Religious Attendance and Biological Functioning: A Multiple Specification Approach. *Journal of aging and health*.
doi:10.1177/0898264314529333.

Höcker, A, A Krüll, U Koch & A Mehnert. 2014. Exploring spiritual needs and their associated factors in an urban sample of early and advanced cancer patients. *European journal of cancer care*.
doi:10.1111/ecc.12200.

Hybels, Celia F, Linda K George, Dan G Blazer, Carl F Pieper, Harvey J Cohen & Harold G Koenig. 2014. Inflammation and Coagulation as Mediators in the Relationships Between Religious Attendance and Functional Limitations in Older Adults. *Journal of aging and health*.
doi:10.1177/0898264314527479.

- Imamura, Yoshiomi, Yoshito Mizoguchi, Hiromi Nabeta, Jun Matsushima, Itaru Watanabe, Naoki Kojima, Toshiro Kawashima, Shigeto Yamada & Akira Monji. 2014. Belief in life after death, salivary 3-methoxy-4-hydroxyphenylglycol, and well-being among older people without cognitive impairment dwelling in rural japan. *International Journal of Geriatric Psychiatry*. doi:10.1002/gps.4135.
- Kim, Suk-Sun, R David Hayward & Pamela G Reed. 2014. Self-transcendence, spiritual perspective, and sense of purpose in family caregiving relationships: a mediated model of depression symptoms in Korean older adults. *Aging & mental health*. doi:10.1080/13607863.2014.899968.
- Lederer, Alyssa M & Susan E Middlestadt. 2014. Beliefs About Meditating Among University Students, Faculty, and Staff: A Theory-Based Salient Belief Elicitation. *Journal of American college health*. doi:10.1080/07448481.2014.907296.
- Mamier, Iris & Elizabeth Johnston Taylor. 2014. Psychometric Evaluation of the Nurse Spiritual Care Therapeutics Scale. *Western journal of nursing research*. doi:10.1177/0193945914530191.
- Monteiro, Lynette M., R.f. Musten & Jane Compson. 2014. Traditional and contemporary mindfulness: Finding the middle path in the tangle of concerns. *Mindfulness*. doi:10.1007/s12671-014-0301-7.
- Newham, James J., Anja Wittkowski, Janine Hurley, John D. Aplin & Melissa Westwood. 2014. Effects of antenatal yoga on maternal anxiety and depression: A randomized controlled trial. *Depression and Anxiety*. doi:10.1002/da.22268.
- Padela, Aasim I, Sohad Murrar, Brigid Adviento, Chuanhong Liao, Zahra Hosseinian, Monica Peek & Farr Curlin. 2014. Associations Between Religion-Related Factors and Breast Cancer Screening Among American Muslims. *Journal of immigrant and minority health / Center for Minority Public Health*. doi:10.1007/s10903-014-0014-y.
- Pakpour, Amir H, Thomas G Plante, Mohsen Saffari & Bengt Fridlund. 2014. The Santa Clara Strength of Religious Faith Questionnaire (SCSORF): A Validation Study on Iranian Muslim Patients Undergoing Dialysis. *Journal of Religion and Health*. doi:10.1007/s10943-014-9856-9.
- Pfeiffer, Jane Bacon, Carla Gober & Elizabeth Johnston Taylor. 2014. How Christian nurses converse with patients about spirituality. *Journal of clinical nursing*. doi:10.1111/jocn.12596.
- Ragsdale, Judith, Mary Ann Hegner, Mark Mueller & Stella Davies. 2014. Identifying Religious and/or Spiritual Perspectives of Adolescents and Young Adults Receiving Blood and Marrow Transplants: A Prospective Qualitative Study. *Biology of blood and marrow transplantation: journal of the American Society for Blood and Marrow Transplantation*. doi:10.1016/j.bbmt.2014.04.013.
- Reblin, Maija, Shirley Otis-Green, Lee Ellington & Margaret F Clayton. 2014. Strategies to Support Spirituality in Health Care Communication: A Home Hospice Cancer Caregiver Case Study. *Journal of holistic nursing: official journal of the American Holistic Nurses' Association*.

doi:10.1177/0898010114531856.

- Ruiz, Andrea L & Gabriel A Acevedo. 2014. True Believers? Religion, Physiology, and Perceived Body Weight in Texas. *Journal of Religion and Health*.
doi:10.1007/s10943-014-9859-6.
- Schreiber, Judith A & Jean Edward. 2014. Image of God, Religion, Spirituality, and Life Changes in Breast Cancer Survivors: A Qualitative Approach. *Journal of Religion and Health*.
doi:10.1007/s10943-014-9862-y.
- Seckin, Kerem D., Mahmut I. Yeral, Mehmet F. Karlı & Ismail B. Gultekin. Effect of maternal fasting for religious beliefs on fetal sonographic findings and neonatal outcomes. *International Journal of Gynecology & Obstetrics*.
doi:10.1016/j.ijgo.2014.02.018.
- Sharabi, Asaf. 2014. Deep healing: ritual healing in the teshuvah movement. *Anthropology & medicine*. 1–13.
doi:10.1080/13648470.2014.907023.
- Tadwalkar, Rigved, Dioma U Udeoji, Rabbi Jason Weiner, Father Lester Avestruz, Denise Lachance, Anita Phan, David Nguyen, Parag Bharadwaj & Ernst R Schwarz. 2014. The Beneficial Role of Spiritual Counseling in Heart Failure Patients. *Journal of Religion and Health*.
doi:10.1007/s10943-014-9853-z.
- Thomas, Elizabeth & Sarah Savoy. 2014. Relationships between traumatic events, religious coping style, and posttraumatic outcomes. *Traumatology: An International Journal*.
doi:10.1037/h0099380.
- Walker, Rheeda L, Temilola K Salami, Sierra E Carter & Kelci Flowers. 2014. Perceived Racism and Suicide Ideation: Mediating Role of Depression but Moderating Role of Religiosity among African American Adults. *Suicide & life-threatening behavior*.
doi:10.1111/slbt.12089.
- Watt, Melissa H, Sarah M Wilson, Mercykutty Joseph, Gileard Masenga, Jessica C. Macfarlane, Olola Oneko & Kathleen J Sikkema. 2014. Religious coping among women with obstetric fistula in Tanzania. *Global public health*. 1–12.
doi:10.1080/17441692.2014.903988.
- Wright, Judy M., David J. Cottrell & Ghazala Mir. Searching for religion and mental health studies required health, social science, and grey literature databases. *Journal of Clinical Epidemiology*.
doi:10.1016/j.jclinepi.2014.02.017.
- Young, William C, Sheeba R Nadarajah, Perry R Skeath & Ann M Berger. 2014. Spirituality in the context of life-threatening illness and life-transforming change. *Palliative & supportive care*. 1–8.
doi:10.1017/S1478951514000340.