



RESEARCH REVIEW

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

AUGUST, 2014

INTRODUCTION

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

Articles for this issue were located by searching the following databases: H. W. Wilson Applied Science and Technology, ATLA Religion Database, H. W. Wilson General Science, PubMed, EBSCO Psychology and Behavioral Sciences Collection, PsycARTICLES, PsycINFO, ScienceDirect, and Web of Science. The search terms were altruism, god, goddess, meditat*, prayer, relig*, ritual, spiritu*, and yoga, tailored to the database being searched. Books were located on Amazon.com. Articles not directly relevant to the scientific study of religion were excluded, as were correspondence and reviews. From a universe of 591 articles, 87 articles have been retained from 42 journals. There are 63 pre-publication citations from 36 journals.

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PART 1: ARTICLES IN RELIGION, BRAIN, AND BEHAVIOR

1.1 SCIENTIFIC STUDY OF RELIGION: COGNITIVE NEUROSCIENCE

Kopal, Jakub, Oldřich Vyšata, Jan Burian, Martin Schätz, Aleš Procházka & Martin Vališ. 2014. Complex continuous wavelet coherence for EEG microstates detection in insight and calm meditation. *Consciousness and Cognition* 30C. 13–23.
doi:10.1016/j.concog.2014.07.015.

Complex continuous wavelet coherence (WTC) can be used for non-stationary signals, such as electroencephalograms. Areas of the WTC with a coherence higher than the calculated optimal threshold were obtained, and the sum of their areas was used as a criterion to differentiate between groups of experienced insight-focused meditators, calm-focused meditators and a control group. This method demonstrated the highest accuracy for the real WTC parts in the frontal region, while for the imaginary parts, the highest accuracy was shown for the frontal occipital pairs of electrodes. In the frontal area, in the broadband frequency, both types of experienced meditators demonstrated an enlargement of the increased coherence areas for the real WTC parts. For the imaginary parts unaffected by the volume conduction and global artefacts, the most significant increase occurred for the frontal occipital pair of electrodes.

1.2 SCIENTIFIC STUDY OF RELIGION: EVOLUTION

Brañas-Garza, Pablo, Antonio M. Espín & Shoshana Neuman. 2014. Religious pro-sociality? Experimental evidence from a sample of 766 Spaniards. *PLoS One* 9(8). e104685.
doi:10.1371/journal.pone.0104685.

This study explored the relationship between several personal religion-related variables and social behavior, using three paradigmatic economic games: the dictator (DG), ultimatum (UG), and trust (TG) games. A large carefully designed sample of the urban adult population in Granada (Spain) was employed (n=766). From

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participants' decisions in these games researchers obtained measures of altruism, bargaining behavior and sense of fairness/equality, trust, and positive reciprocity. Three dimensions of religiosity were examined: (i) religious denomination; (ii) intensity of religiosity, measured by active participation at church services; and (iii) conversion out into a different denomination than the one raised in. The major results are: (i) individuals with "no religion" made decisions closer to rational selfish behavior in the DG and the UG compared to those who affiliate with a "standard" religious denomination; (ii) among Catholics, intensity of religiosity is the key variable that affects social behavior insofar as religiously-active individuals are generally more pro-social than non-active ones; and (iii) the religion raised in seems to have no effect on pro-sociality, beyond the effect of the current measures of religiosity. Importantly, behavior in the TG is not predicted by any of the religion-related variables. While on the one hand the results partially support the notion of religious pro-sociality, on the other hand they also highlight the importance of closely examining the multidimensional nature of both religiosity and pro-social behavior.

Fink, Bernhard & Robert Trivers. 2014. Cognitive simplicity and self-deception are crucial in martyrdom and suicide terrorism. *Behavioral and Brain Sciences* 37(4). 366–367.
doi:10.1017/S0140525X13003385.

Suicide attacks and terrorism are characterized by cognitive simplicity, which is related to self-deception. In justifying violence in pursuit of ideologically and/or politically driven commitment, people with high religious commitment may be particularly prone to mechanisms of self-deception. Related megalomania and glorious self-perception are typical of self-deception, and are thus crucial in the emergence and expression of (suicide) terrorism.

Gervais, Will M. 2014. Good for God? Religious motivation reduces perceived responsibility for and morality of good deeds. *Journal of Experimental Psychology. General* 143(4). 1616–1626.
doi:10.1037/a0036678.

Many people view religion as a crucial source of morality. However, 6 experiments (1,078 total participants) revealed that good deeds are perceived as less moral if they are performed for religious reasons. Religiously motivated acts were seen as less moral than the exact same acts performed for other reasons (Experiments 1-2 and 6). Religious motivations also reduced attributions of intention and responsibility (Experiments 3-6), an effect that fully mediated the effect of religious motivations on perceived morality (Experiment 6). The effects were not explained by different perceptions of motivation orientation (i.e., intrinsic vs. extrinsic) across conditions (Experiment 4) and also were evident when religious upbringing led to an intuitive moral response (Experiment 5). Effects generalized across religious and nonreligious participants. When viewing a religiously motivated good deed, people infer that actually helping others is, in part, a side effect of other motivations rather than an end in itself. Thus, religiously motivated actors are seen as less responsible than secular actors for their good deeds, and their helping behavior is viewed as less moral than identical good deeds performed for either unclear or secular motivations.

Grotuss, Jason. 2014. Cooperation and emergence: The missing elements of the Darwin machine. *Behavioral and Brain Sciences* 37(04). 426–426.
doi:10.1017/S0140525X1300318X.

The author of the present essay finds in the target article a compelling argument for a science of intentional change by unifying evolutionary psychology (EP) with the standard social science model. However, since its inception, traditional EP models have not held up well to empirical scrutiny. Further, in the target article the authors address the importance of cooperation in individuals and social systems, but the Darwin machine they propose does not adequately stress fundamental aspects of evolutionary processes.

Sela, Yael & Todd K. Shackelford. 2014. The myth of the myth of martyrdom. *Behavioral and Brain Sciences* 37(4). 376–377.
doi:10.1017/S0140525X13003488.

Lankford asserts that suicide terrorism is attributable to suicidality. The present authors argue instead that this assertion is not well supported theoretically or empirically. In addition, they suggest that failure to acknowledge religious beliefs as motivationally causal for suicide terrorism may place innocent people at risk of murder in the service of political correctness and multiculturalism.

1.3 SCIENTIFIC STUDY OF RELIGION: PSYCHOLOGY AND CULTURE

Benefiel, Margaret, Louis W. Fry & David Geigle. 2014. Spirituality and religion in the workplace: History, theory, and research. *Psychology of Religion and Spirituality* 6(3). 175–187.

The role of spirituality and religion in the workplace (SRW) is a relatively new area of inquiry that has emerged from scholarly fields not typically associated with the study of the psychology of religion and spirituality. This article explores the underlying assumptions and history as well as the state of current theory and empirical research regarding SRW. Researchers first describe the history of the efforts to integrate spirituality and religion into the workplace, with their foundational roots in the Protestant Work Ethic and their emergence through the Faith at Work movement. Next they review the major theoretical developments in this area that have established a domain of relevant definitions, constructs, frameworks, and models. Then the empirical research on spirituality in the workplace is reviewed, and it is concluded that 2 major streams have emerged that have, to date, discovered similar findings in regard to their significant impact on relevant individual and organizational outcomes. Finally, particular challenges associated with integrative work and future theory building and research are explored.

Berthold, Anne & Willibald Ruch. 2014. Satisfaction with life and character strengths of non-religious and religious people: it's practicing one's religion that makes the difference. *Frontiers in Psychology* 5. 876.
doi:10.3389/fpsyg.2014.00876.

According to systematic reviews, religious beliefs and practices are related to higher life satisfaction, happiness, and positive affect. The present research extends previous findings by comparing satisfaction with life and character strengths of non-religious people, religious people, who practice their religion and people that have a religious affiliation but do not practice their religion. Researchers assessed life satisfaction (SWLS), character strengths (VIA-IS) and the orientations to happiness (OTH) in a sample of 20538 participants. People with a religious affiliation that also practice their religion were found to be more satisfied with their life and scored higher on life of meaning than those who do not practice their religion; they also scored higher than non-religious people. Religious people who practice their religion differed significantly from those who do not practice their religion and non-religious people regarding several character strengths; they scored higher on kindness, love, gratitude, hope, forgiveness, and on spirituality. There were no substantial differences between people who had no religious affiliation and those with a religious affiliation that do not practice their religion. Altogether, the present findings suggest that people profit from a religious affiliation if they also actively practice their religion.

Bhalotra, Sonia, Irma Clots-Figueras, Guilhem Cassan & Lakshmi Iyer. 2014. Religion, politician identity and development outcomes: Evidence from India. *Journal of Economic Behavior & Organization* 104. (Economics, Religion, and Culture). 4–17.
doi:10.1016/j.jebo.2013.09.006

This paper investigates whether the religious identity of state legislators in India influences development outcomes, both for citizens of their religious group and for the population as a whole. Using an instrumental variables approach derived from a regression discontinuity, researchers find that increasing the political representation of Muslims improves health and education outcomes in the district from which the legislator is elected. No evidence of

religious favoritism was found: Muslim children do not benefit more from Muslim political representation than children from other religious groups.

- Dills, Angela K. & Rey Hernández-Julián. 2014. Religiosity and state welfare. *Journal of Economic Behavior & Organization* 104. (Economics, Religion, and Culture). 37–51.
doi:10.1016/j.jebo.2014.01.003

The Catholic sex abuse scandals reduced both membership and religiosity in the Catholic Church. Because government spending on welfare may substitute for the religious provision of social services, the authors consider whether this plausibly exogenous decline in religiosity affected several measures of the public taste toward government and spending on welfare between 1990 and 2008. In places where there were more scandals, individuals state a preference for less government provision of social services. In contrast, a higher level of abuse is also associated with an increase in voting for Democratic candidates for President, state legislatures, and the US House of Representatives, and an increase in per capita government welfare spending, although this increase is insufficient to replace the decrease in Catholic-provided charity.

- Hungerman, Daniel M. 2014. The effect of education on religion: Evidence from compulsory schooling laws. *Journal of Economic Behavior & Organization* 104. (Economics, Religion, and Culture). 52–63.
doi:10.1016/j.jebo.2013.09.004

For over a century, social scientists have debated how educational attainment impacts religious belief. In this paper, the author uses Canadian compulsory schooling laws to identify the relationship between completed schooling and later religiosity. It is found that higher levels of education lead to lower levels of religious affiliation later in life. An additional year of education leads to a 4-percentage-point decline in the likelihood that an individual identifies with any religious tradition. This is a reasonably large effect: extrapolating the results to the broader population would suggest that increases in schooling could explain most of the large rise in non-affiliation in Canada in recent decades.

- Kelly, Kimberly. 2014. Evangelical underdogs: Intrinsic success, organizational solidarity, and marginalized identities as religious movement resources. *Journal of Contemporary Ethnography* 43(4). 419–455.

The evangelical crisis pregnancy center (CPC) movement demonstrates both low rates of success and robust support from evangelicals. The author draws upon three theoretical frameworks—subcultural identity, organizational solidarity, and doing religion—to explain this seeming paradox. Data stem from a study of this pro-life/antiabortion movement and include fieldwork observations in seven CPCs, thirty-eight semi-structured interviews, and analysis of primary and secondary documents. Empirically, evangelicals' commitment to CPCs is tied to three aspects of subcultural identity: emphasis on intrinsic meanings of success, solidarity among evangelical organizations, and understandings of activism as an identity marker. These findings suggest that evangelicals are doing religion through their activism, making action and identity mutually reinforcing, and insulating activists from forces that might otherwise hinder religious identity. Theoretically, these results indicate that subcultural identity theory should be modified to acknowledge organizational solidarity as a form of religious action and the mutually reinforcing relationship between action and identity as the process of doing religion.

- Landor, Antoinette M. & Leslie Gordon Simons. 2014. Why Virginity Pledges Succeed or Fail: The Moderating Effect of Religious Commitment Versus Religious Participation. *Journal of Child and Family Studies* 26(3). 1102–1113.
doi:10.1007/s10826-013-9769-3.

Over the past two decades, virginity pledges have proliferated in the US, despite mixed results regarding their effectiveness. Few studies have examined possible mechanisms that may shed light on why pledges work for some

individuals but not others. Using a sample of emerging-adults aged 18-24 years old (n=1,380), the authors examine the influence of religiosity on pledge signing and adherence, specifically whether the effectiveness of pledges is moderated by religiosity. Findings show that while religious participation is positively associated with signing a pledge, there is a moderating effect of religious commitment. That is, when religious commitment is high, adherence to the pledge is greater. However, for pledge signers with low religious commitment, there are unintended negative consequences with regard to increased participation in risky sexual behaviors, whether compared to other people who signed the pledge who are equally committed to their religion or to individuals who have never taken such a pledge.

Miller, Monica K., Jonathan Maskaly, Clayton D. Peoples & Alexandra E. Sigillo. 2014. The relationship between mock jurors' religious characteristics and their verdicts and sentencing decisions. *Psychology of Religion and Spirituality* 6(3). 188–197.

Two mock jury studies investigated whether jurors' religious characteristics relate to verdicts and sentencing decisions. In Study 1, adding religious characteristics to a model with only demographics and authoritarianism increased the model's explanatory power. Scoring high on devotionism was significantly related to not guilty verdicts; scoring high on fundamentalism was significantly related to guilty verdicts. In both studies, being on a religious quest was significantly related to pro-defendant legal decisions. Further, authoritarianism was a mediator of the relationship between some religious variables and legal decisions, helping explain the underlying reasons for such relationships.

Pazhoohi, Farid & Masoud Hosseinchari. 2014. Effects of Religious Veiling on Muslim Men's Attractiveness Ratings of Muslim Women. *Archives of Sexual Behavior* 43(6). 1083–1086.
doi:10.1007/s10508-014-0259-5.

Hijab and other Islamic veiling clothing are important social and political symbols for Muslim women's identity. Although recently there has been a large body of literature on the social and political aspects of hijab in Western countries, there has been no investigation of the origin and function of veiling itself. This article hypothesized that religious veiling, which eliminates the estrogen-induced body curves of reproductive age women, decreases men's perceptions of women's physical attractiveness, thereby serving mate guarding functions against rival men. To test this hypothesis, measures of the motivational appeal and self-reported perceived attractiveness of women exhibiting different degrees of veiling were obtained from 80 Muslim male participants. The results showed that men were more motivated to view women exhibiting the less veiling and rated them more attractive than those women whose bodily curves were less apparent. These results support veiling serving a mate guarding function and reinforcing the marital bond.

Ramsburg, Jared T. & Robert J. Youmans. 2014. Meditation in the higher-education classroom: Meditation training improves student knowledge retention during lectures. *Mindfulness* 5(4). 431–441.

The cognitive skills required for successful knowledge retention may be influenced by meditation training. The current studies examined the effects of meditation on the knowledge retention of students. In three experimental studies, participants from three introductory psychology courses randomly received either brief meditation training or rest, listened to a class lecture, then took a post-lecture quiz that assessed students' knowledge of the lecture material. The results indicated that meditation improved students' retention of the information conveyed during the lecture in each of the three experiments. Mood, relaxation, and class interest were not affected by the meditation training.

Steffen, Patrick R. 2014. Perfectionism and life aspirations in intrinsically and extrinsically religious individuals. *Journal of Religion and Health* 53(4). 945–958.
doi:10.1007/s10943-013-9692-3.

Religiosity is related to positive health and life satisfaction but the pathways through which this occurs have not been clearly delineated. The purpose of this study was to examine potential mediators of the relationships between intrinsic and extrinsic religiosity and negative affect and life satisfaction. Perfectionism and life aspirations are two possible pathways through which religious orientation is related to outcome. It was hypothesized that adaptive perfectionism and intrinsic life aspirations would act as mediators between intrinsic religiosity and negative affect and life satisfaction, and that maladaptive perfectionism and extrinsic life aspirations would act as mediators between the extrinsic religiosity and negative affect and life satisfaction. Two consecutive samples of religious college students (n=540 and n=485) completed measures of the Age Universal Religious Orientation Index, the Frost Multi-Dimensional Perfectionism Scale, the Aspiration Index, the Beck Depression Inventory-II, the Spielberger State-Trait Anxiety Inventory, and the Satisfaction with Life Scale. Intrinsic religiosity had a direct negative relationship with negative affect and positive relationship with life satisfaction. Contrary to the hypotheses, intrinsic religiosity had its strongest indirect effect via maladaptive perfectionism such that increased intrinsic religiosity was related to decreased maladaptive perfectionism which in turn lead to better negative affect and life satisfaction. Extrinsic religiosity was related to increased maladaptive perfectionism and thereby indirectly contributed to worse negative affect and life satisfaction. Interestingly, when the effects of maladaptive perfectionism were controlled, the direct effects of extrinsic religiosity were related to reduced negative affect and increased life satisfaction. Overall, the strongest mediator in this study of both intrinsic and extrinsic religiosity was maladaptive perfectionism, with intrinsic religiosity related to decreased maladaptive perfectionism and extrinsic religiosity related to increased maladaptive perfectionism.

Swami, Viren, Junsara Miah, Nazerine Noorani & Donna Taylor. 2014. Is the hijab protective? An investigation of body image and related constructs among British Muslim women. *British Journal of Psychology* 105(3). 352–363.
doi:10.1111/bjop.12045.

Previous studies have reported equivocal findings concerning the impact of wearing a hijab, or Islamic head-and body-cover, on Muslim women's body image. Here, researchers sought to examine that impact using a larger sample of Muslim women than has been relied upon and a wider range of body image measures. A total of 587 British Muslim women completed a battery of scales assessing their frequency and conservativeness of hijab use, body image variables, attitudes towards the media and beauty ideals, importance of appearance, and religiosity. Preliminary results indicated that 218 women never used the hijab and 369 women used some form of the hijab at least rarely. Controlling for religiosity, women who wore the hijab had more positive body image, lower internalization of media messages about beauty standards, and placed less importance on appearance than women who did not wear the hijab. Among women who wore the hijab, hijab use significantly predicted weight discrepancy and body appreciation over and above religiosity. These results are discussed in terms of the possible protective impact among British Muslim women of wearing the hijab.

Xiaojuan Jing. 2014. Nonbelievers' Beliefs About Religion in China. *Social Behavior & Personality: an international journal* 42(7). 1221–1231.
doi:10.2224/sbp.2014.42.7.1221

In China nonbelievers are showing an increasing interest in religion whereas believers in the rest of the world are being less influenced by religion. The author investigated what nonbelievers know about religion within Chinese society. Data collection was via random sampling among university students across 16 provinces in China. Data from 638 respondents about their self-reported beliefs was evaluated using the religiosity subscale of the Social Axiom Survey. The results indicated that Chinese nonbelievers take a neutral stance as to the existence of a Supreme Being or the positive consequences of having religious beliefs. The neutrality of nonbelievers' beliefs about religion may be affected by the coincidence of the development of religion and Chinese religious culture.

Zhang, Kaili Chen, C. Harry Hui, Jasmine Lam, Esther Yuet Ying Lau, Shu-Fai Cheung & Doris Shui Ying Mok. 2014. Personal spiritual values and quality of life: evidence from Chinese college students. *Journal of Religion and Health* 53(4). 986–1002.
doi:10.1007/s10943-013-9686-1.

Values are guiding principles in our life. While some studies found spiritual values to be “healthier,” others showed that people holding non-spiritual values were higher on affective well-being. Researchers examined the predictive power of these two types of values with a longitudinal data set collected from Chinese students mainly in Hong Kong. Structural equation modeling revealed that spiritual values (as well as family income) positively predicted quality of life a year later. Non-spiritual, self-enhancement values, did not show any association. Results suggest that developing spiritual values may promote well-being through enabling individuals to find meaning and purpose in life.

Zussman, Asaf. 2014. The effect of political violence on religiosity. *Journal of Economic Behavior & Organization* 104. (Economics, Religion, and Culture). 64–83.
doi:10.1016/j.jebo.2013.10.006

This paper studies how politically motivated violence associated with the Israeli-Palestinian conflict and the wider Arab-Israeli conflict affects religiosity among Jews and Muslims in Israel. In order to explore this relationship the author links data from the Israeli Social Surveys to information on Israeli conflict-related fatalities by date and location of survey interviews. The analysis, which covers the period 2002–2010, yields robust evidence that violence makes both Jewish and Muslim Israelis self-identify as more religious.

1.4 SCIENTIFIC STUDY OF RELIGION: METHOD & THEORY

Lazar, Aryeh. 2014. The structure and validity of the Multidimensional Prayer Inventory among Israeli Jewish pray-ers. *Psychology of Religion and Spirituality* 6(3). 237–244.

Most prayer research has been based on predominantly North American Christian samples. In the present research, the structure of the Multidimensional Prayer Inventory was examined on the basis of responses from 1,172 Jewish Israelis. Confirmatory factor analysis indicated that the structure of the Multidimensional Prayer Inventory was valid for this sample and that a detailed 5-factor structure—Adoration, Confession, Thanksgiving, Supplication, and Reception—was superior to alternative simpler factor structures examined. The author integrated a new dimension of Habitual prayer into this measure, and confirmatory factor analysis provided support for the 6-factor structure. Group differences were also examined. Men scored higher on Confession and Habitual prayer, whereas women scored higher on Supplication and Thanksgiving prayer. Individuals self-identifying as religious scored higher on all 6 prayer scales than did those identifying as traditional. Individuals identifying as secular had the lowest scores on all prayer scales.

PART 2: ARTICLES IN SPIRITUALITY & HEALTH RESEARCH

2.1 SPIRITUALITY & HEALTH: GENERAL HEALTH & WELL-BEING

Badr, Lina Kurdahi, Asma Taha & Vivien Dee. 2014. Substance abuse In Middle Eastern adolescents living in two different countries: spiritual, cultural, family and personal factors. *Journal of Religion and Health* 53(4). 1060–1074.
doi:10.1007/s10943-013-9694-1.

The primary goal of this study was to determine whether there are differences in factors contributing to substance abuse in adolescents from Lebanon versus the U.S.A. and to decipher the role of spirituality, religion, and culture among other factors that may influence substance abuse. A correlational cross-sectional design was used with adolescents living in two different countries: Los Angeles, California and Beirut, Lebanon. Muslim adolescents had significantly less rates of alcohol and substance use than Christians in both Lebanon and Los Angeles. More years lived in the U.S.A. increases the likelihood of abuse for both Muslims and Christians.

DeWall, C. Nathan, Richard S. Pond, Evan C. Carter, Michael E. McCullough, Nathaniel M. Lambert, Frank D. Fincham & John B. Nezlek. 2014. Explaining the relationship between religiousness and substance use: Self-control matters. *Journal of Personality and Social Psychology* 107(2). 339–351.
doi:10.1037/a0036853.

Religiousness is reliably associated with lower substance use, but little research has examined whether self-control helps explain why religiousness predicts lower substance use. Building on prior theoretical work, our studies suggest that self-control mediates the relationship between religiousness and a variety of substance-use behaviors. Study 1 showed that daily prayer predicted lower alcohol use on subsequent days. In Study 2, religiousness related to lower alcohol use, which was mediated by self-control. Study 3 replicated this mediational pattern using a behavioral measure of self-control. Using a longitudinal design, Study 4 revealed that self-control mediated the relationship between religiousness and lower alcohol use 6 weeks later. Study 5 replicated this mediational pattern again and showed that it remained significant after controlling for trait mindfulness. Studies 6 and 7 replicated and extended these effects to both alcohol and various forms of drug use among community and cross-cultural adult samples. These findings offer novel evidence regarding the role of self-control in explaining why religiousness is associated with lower substance use.

Escobar, Oscar S. & Ellen L. Vaughan. 2014. Public Religiosity, Religious Importance, and Substance Use Among Latino Emerging Adults. *Substance Use & Misuse* 49(10). 1317–1325.
doi:10.3109/10826084.2014.901384.

This study examined the relationship between religiosity (religious importance and public religion) and substance use (binge drinking and marijuana use) among Latino emerging adults. The study utilized data (n=2,442) from wave 3 of the National Longitudinal Study of Adolescent Health (Add Health). Only public religion was found to be a protective factor for both binge drinking and marijuana use. The study results suggest the potential for public forms of religion, such as attendance to services and activities, to act as a protective factor for substance use.

Evans, Subhadra, Kirsten C. Lung, Laura C. Seidman, Beth Sternlieb, Lonnie K. Zeltzer & Jennie C. I. Tsao. 2014. Iyengar Yoga for Adolescents and Young Adults With Irritable Bowel Syndrome. *Journal of Pediatric Gastroenterology and Nutrition* 59(2). 244–253.
doi:10.1097/MPG.0000000000000366.

Irritable bowel syndrome (IBS) is a chronic, disabling condition that greatly compromises patient functioning. The aim of this study was to assess the impact of a 6-week twice per week Iyengar yoga (IY) program on IBS

symptoms in adolescents and young adults (YA) with IBS compared with a usual-care waitlist control group. Assessments of symptoms, global improvement, pain, health-related quality of life, psychological distress, functional disability, fatigue, and sleep were collected pre- and posttreatment. Weekly ratings of pain, IBS symptoms, and global improvement were also recorded until 2-month follow-up. A total of 51 participants completed the intervention (yoga=29; usual-care waitlist=22). On average, the yoga group attended 75% of classes. Analyses were divided by age group. Relative to controls, adolescents (14-17 years) assigned to yoga reported significantly improved physical functioning, whereas YA (18-26 years) assigned to yoga reported significantly improved IBS symptoms, global improvement, disability, psychological distress, sleep quality, and fatigue. Although abdominal pain intensity was statistically unchanged, 44% of adolescents and 46% of YA reported a minimally clinically significant reduction in pain following yoga, and one-third of YA reported clinically significant levels of global symptom improvement. Analysis of the uncontrolled effects and maintenance of treatment effects for adolescents revealed global improvement immediately post-yoga that was not maintained at follow-up. For YA, global improvement, worst pain, constipation, and nausea were significantly improved postyoga, but only global improvement, worst pain, and nausea maintained at the 2-month follow-up.

Fletcher, Jason & Sanjeev Kumar. 2014. Religion and risky health behaviors among U.S. adolescents and adults. *Journal of Economic Behavior & Organization* 104. (Economics, Religion, and Culture). 123–140.
doi:10.1016/j.jebo.2014.03.018.

In this paper, researchers analyze the effects of a broad set of measures of religiosity—religious attendance, prayer frequency, and self-reported importance of religion—on risky health behaviors at different stages of the life course. Using the National Longitudinal Study of Adolescent Health (Add Health), Researchers estimate the contemporaneous as well as medium- and longer-term effects of religiosity during the adolescence years on the use of both licit and illicit substances—cigarette, binge drinking, marijuana, cocaine, methamphetamine, ecstasy, inhalants, LSD, heroin, PCP, and other illegal drugs. Using sibling fixed effects models, the authors find novel evidence that intrinsic religiosity—self-reported importance of religion—during adolescence has the most significant effects on reducing dependence on use and abuse of addictive substances.

Lago-Rizzardi, Camilla Domingues, Jose Tadeu T. de Siqueira & Silvia Regina D. T. de Siqueira. 2014. Spirituality of chronic orofacial pain patients: case-control study. *Journal of Religion and Health* 53(4). 1236–1248.
doi:10.1007/s10943-013-9768-0.

The objective of this study was to investigate spirituality and blood parameters associated with stress in patients with facial musculoskeletal pain. Twenty-four women with chronic facial musculoskeletal pain (CFMP) and 24 healthy women were evaluated with a protocol for orofacial characteristics, research diagnostic criteria for temporomandibular disorders and the Spiritual Perspective Scale. Blood samples were collected to analyze blood count, cortisol, ACTH, C3, C4, thyroid hormones, total immunoglobulin, C-reactive protein and rheumatoid factor. The study group was more spiritualized than control group. Individuals with a high score of spirituality had less myofascial pain, less bruxism and fewer complaints. They also had lower levels of ACTH and IgE. Spirituality was higher in the study group and can be considered an important tool for coping with CFMP.

McAloney, Kareena. 2014. “Mixed” religion relationships and well-being in Northern Ireland. *Journal of Religion and Health* 53(4). 1036–1045.
doi:10.1007/s10943-013-9701-6.

Religion plays a pivotal role in intergroup and interpersonal relationships in Northern Ireland, and individuals traditionally marry within their own religious group. However, ‘mixed’ marriages between Catholics and Protestants do occur and present an interesting, yet under-researched, dynamic within this divided society. Both religion and committed relationships have been associated with physical and psychological health, but little is

known about how divergence in religious beliefs within relationships impacts on health. A secondary data analysis of the Northern Ireland cohort of the Understanding Society: the UK Household Longitudinal Study was conducted to investigate the impact of mixed religion relationships on physical and psychological well-being in Northern Ireland. Less than 10% of relationships were mixed religion relationships, and being in a mixed relationship was associated with poorer mental health but not with physical health.

- Osafo, Joseph, Emmanuel Asampong, Sussan Langmagne & Clement Ahiedeke. 2014. Perceptions of parents on how religion influences adolescents' sexual behaviours in two Ghanaian communities: implications for HIV and AIDS prevention. *Journal of Religion and Health* 53(4). 959–971.
doi:10.1007/s10943-013-9689-y.

To understand the role of religion in the sexual behaviors of adolescents, the views of parents who are key agents of socialization were examined from two south-eastern communities in Ghana. Focus Group interviews were conducted with mothers (and female caregivers) of adolescents and one with fathers (and male caregivers) of adolescents. Thematic analysis was used to analyze the data. Findings indicated that parents from one community perceived religion as playing a double-edged role in adolescents' sexual behaviors. On one hand it played a protective role by restraining adolescents from risky sexual behaviors; on the other hand it disparaged the existing traditional measures that regulated adolescents' sexual behavior. However, parents from the other community found a collaborative interface between the existing social control measures-communal socialization and proscriptive morality with religious ethics. Religious socialization, social capital theory and the concept of social suffering are used to explain some of the findings of this study.

- Pimenta, Filipa, João Maroco, Catarina Ramos & Isabel Leal. 2014. Menopausal symptoms: Is spirituality associated with the severity of symptoms? *Journal of Religion and Health* 53(4). 1013–1024.
doi:10.1007/s10943-013-9696-z.

The aim of this study was to explore whether spirituality was associated with menopausal symptoms. Menopausal symptoms, spirituality, health and menopausal status, and socio-demographic variables were assessed in a community sample of 710 peri- and postmenopausal women. A structural model was explored using structural equation modeling. The results evidence spirituality as a significant contributor regarding the severity of most menopausal symptoms. Among others, spirituality had a significant weight in depressive mood, anxiety, cognitive impairment, aches/pain, vasomotor and sexual symptoms. Some socio-demographic variables, as well as perceived health, also predicted the menopausal symptoms' severity. Therefore, spirituality can have a positive impact on the menopausal symptoms' reporting.

- Schütze, Robert, Helen Slater, Peter O'Sullivan, Jennifer Thornton, Amy Finlay-Jones & Clare S. Rees. 2014. Mindfulness-Based Functional Therapy: A preliminary open trial of an integrated model of care for people with persistent low back pain. *Frontiers in Psychology* 5. 839.
doi:10.3389/fpsyg.2014.00839.

This pilot study investigated the feasibility and clinical utility of implementing a novel, evidence-informed, interdisciplinary group intervention-Mindfulness Based Functional Therapy (MBFT)-for the management of persistent low back pain (LBP) in primary care. MBFT aimed to improve physical and psychological functioning in patients with persistent LBP. A single-group repeated measures design was utilized to gather data about feasibility, effect sizes, clinically significant changes and patient satisfaction. Participants were 16 adults, mean age 47, with mean pain duration of 8 years. Following intervention, 85% of participants were highly satisfied with MBFT. Clinical significance analysis and effect size estimates showed improvements in a number of variables, including pain catastrophizing, physical functioning, role limitations due to physical condition, and depression, although these may have occurred due to non-intervention effects.

Shaw, Stacey A. & Nabila El-Bassel. 2014. The influence of religion on sexual HIV risk. *AIDS and behavior* 18(8). 1569–1594.
doi:10.1007/s10461-014-0714-2.

This systematic review examines the relationship between religion and sexual HIV risk behavior. It focuses primarily on how studies have conceptualized and defined religion, methodologies, and sexual risk outcomes. Researchers also describe regions where studies were conducted and mechanisms by which religion may be associated with sexual risk. Researchers included 137 studies in this review, classifying them as measuring: (1) only religious affiliation (n=57), (2) only religiosity (n=48), and (3) both religious affiliation and religiosity (n=32). A number of studies identified lower levels of sexual HIV risk among Muslims, although many of these examined HIV prevalence rather than specific behavioral risk outcomes. Most studies identified increased religiosity to be associated with lower levels of sexual HIV risk. This finding persists but is weaker when the outcome considered is condom use. The paper reviews ways in which religion may contribute to increase and reduction in sexual HIV risk, gaps in research, and implications for future research on religion and HIV.

Tharp, Andra Teten, C. Nathan DeWall, Stephanie B. Richman & Rita K. Noonan. 2014. Effect of religiosity and dysfunctional dating attitudes on youth substance use. *Journal of Addiction* 2014. 143709.
doi:10.1155/2014/143709.

The current investigation examined the interactive effect of dysfunctional dating attitudes and religiosity on substance use in a large sample of youth (n=1,357) from the YouthStyles survey. Based on past research, researchers explored the possibility that religiosity buffered the association between dysfunctional dating attitudes and substance use. Because age was significantly associated with all study variables, the authors included age in the analyses. In support of the hypothesis, an attitude by religiosity by age interaction among youth with moderate levels of dysfunctional dating attitudes was found. Among these youth, the buffering effect of religiosity increased with age. For youth with low and high dysfunctional dating attitudes, religiosity did not buffer the association. The results of this study are in line with past work that suggests that the association between relationship characteristics and substance use is complex. It also identifies religiosity as a protective factor for the effect of dating attitudes on substance use but suggests that these effects may be the most important for youth with moderate levels of dysfunctional dating attitudes.

Trevino, K. M., M. Balboni, A. Zollfrank, T. Balboni & H. G. Prigerson. 2014. Negative religious coping as a correlate of suicidal ideation in patients with advanced cancer. *Psycho-Oncology* 23(8). 936–945.
doi:10.1002/pon.3505.

The purpose of this study is to examine the relationship between negative religious coping (NRC) and suicidal ideation in patients with advanced cancer, controlling for demographic and disease characteristics and risk and protective factors for suicidal ideation. Participants were 603 adult patients with advanced cancer (life expectancy ≤6 months). Trained raters verbally administered the examined measures to patients upon study entry. Multivariable logistic regression analyses regressed suicidal ideation on NRC controlling for significant demographic, disease, risk, and protective factors. Negative religious coping was associated with an increased risk for suicidal ideation after controlling for demographic and disease characteristics, mental and physical health, self-efficacy, secular coping, social support, spiritual care received, global religiousness and spirituality, and positive religious coping. The authors conclude that negative religious coping is a robust correlate of suicidal ideation.

Velasco-Gonzalez, Lucy & Liliane Rioux. 2014. The spiritual well-being of elderly people: a study of a French sample. *Journal of Religion and Health* 53(4). 1123–1137.
doi:10.1007/s10943-013-9710-5.

The aim of this research was to identify predictors of the spiritual well-being of elderly people. More specifically, the researchers postulated that subjective well-being and its components would be predictors of spiritual well-being, and more so than age and health status. Researchers invited 133 people aged 60-95 to complete questionnaires rating personal well-being. The results only partially confirm the hypothesis, because only satisfaction with life as a whole and two items in "Life Satisfaction in the Elderly Scale" make it possible to predict the spiritual well-being of elderly people. Moreover, neither health status nor age was found to be a significant predictor of spiritual well-being. This research highlights the links between the concept of spiritual well-being and that of subjective well-being of elderly people and could contribute to the development of a tool that could take into account the spiritual well-being of elderly people, whether they be believers, agnostic, or atheist.

Vinci, C., M. R. Peltier, S. Shah, J. Kinsaul, K. Waldo, M. A. McVay & A. L. Copeland. 2014. Effects of a brief mindfulness intervention on negative affect and urge to drink among college student drinkers. *Behaviour Research and Therapy* 59. 82–93.
doi:10.1016/j.brat.2014.05.012.

Several theories have proposed that negative affect (NA) plays a large role in the maintenance of substance use behaviors. It has been demonstrated that mindfulness meditation can improve the regulation of NA, suggesting that mindfulness may be very beneficial in treating problematic substance use behavior. The current study tested whether a brief mindfulness meditation would lower levels of NA, increase willingness to experience NA, lower urges to drink, and increase time to next alcoholic drink in a sample of at-risk college student drinkers (n=207). Participants were randomized to one of three brief interventions (mindfulness, relaxation, or control) followed by an affect manipulation (negative or neutral stimuli). Affect and urge were measured prior to intervention (Time 1 [T1]), after intervention but prior to affect manipulation (Time 2 [T2]), and immediately after the affect manipulation (Time 3 [T3]). Levels of mindfulness and relaxation were assessed from T1–T3. The additional measures of willingness to continue watching NA images and time to next alcoholic drink were examined at T3. Results indicated that the mindfulness intervention increased state mindfulness and relaxation, and decreased NA immediately following the mindfulness intervention. However, the mindfulness intervention did not influence responses to NA induction on any of the outcome variables at T3. One potential explanation is that the mindfulness intervention was not robust enough to maintain the initial gains made immediately following the intervention.

2.2 SPIRITUALITY & HEALTH: MENTAL HEALTH

Allen, G. E. Kawika & Kenneth T. Wang. 2014. Examining religious commitment, perfectionism, scrupulosity, and well-being among LDS individuals. *Psychology of Religion and Spirituality* 6(3). 257–264.

This study examined the relationships and interactions between religious commitment, perfectionism, scrupulosity, and psychological well-being among Latter-Day Saints (LDS or Mormons). The results showed a positive association between religious commitment and satisfaction with life. Scrupulosity partially mediated the relationship between maladaptive perfectionism and depression, anxiety, and satisfaction with life. The sample majority was classified as adaptive perfectionists, reporting higher intra- and interpersonal religious commitment, self-esteem, and satisfaction with life, and lower levels of anxiety and depression than the maladaptive and non-perfectionists.

Amtul, Zareen, Amanda Arena, Hussein Hirjee, Zaineb U. Khan, Pramudith M. Maldeniya, Ronnie I. Newman, Amer M. Burhan, Stephen Wetmore & Akshya Vasudev. 2014. A randomized controlled longitudinal naturalistic trial testing the effects of automatic self transcending

meditation on heart rate variability in late life depression: study protocol. *BMC complementary and alternative medicine* 14(1). 307.
doi:10.1186/1472-6882-14-307.

The prevalence and socioeconomic cost of late life depression (LLD) is on the rise, while the response rate to antidepressant trials remains poor. Among the mind-body therapies currently in practice, the results of our pilot study have shown that a particular meditation technique called Sahaj Samadhi Meditation, which belongs to the category of meditation termed automatic self-transcending meditation (ASTM) may have some promise in improving cardiovascular autonomic disturbances associated with LLD as well as ameliorating symptoms of depression and anxiety. In this proposed study, patients between the ages of 60 and 85 with LLD will be randomized either to ASTM plus treatment as usual (TAU) or TAU alone to assess changes in cardiovascular autonomic parameters, neuropsychological symptoms of depression and anxiety as well as quality of life. The instructional phase of the intervention consists of 4 consecutive days of meditation training, after which participants are encouraged to meditate twice daily for twenty minutes each time at home. The intervention also includes once weekly follow up sessions for the subsequent 11 weeks. The planned study has one and a half year recruitment period. Participants will be assessed at baseline and at 4, 8, 12 and 24 weeks post intervention. The study should provide a unique data source from a randomized, controlled, longitudinal trial to investigate the effects of a form of ASTM on cardiovascular autonomic and neuropsychological health in LLD.

Baldacchino, Donia R., Lilian Bonello & Clifford J. Debattista. 2014. Spiritual coping of older persons in Malta and Australia (part 2). *British Journal of Nursing (Mark Allen Publishing)* 23(15). 843–846.
doi:10.12968/bjon.2014.23.15.843.

Part 1 presented the research methodology and the quantitative findings of this descriptive sequential explanatory study. Part 2 will discuss the qualitative findings that explain the impact of the use of spiritual coping strategies on institutionalized older persons. Participants (n=137) were recruited from six institutions in Malta and Australia. All were Roman Catholics, mobile, and with a minimal residence of 6 months. The qualitative data generated three main themes, namely: self-empowerment through connectedness with God, self, others and nature; belongingness to the residence; and the finding of meaning and purpose in life or the perceived afterlife.

Casella, Caio Borba & Alexandre Andradade Loch. 2014. Religious affiliation as a predictor of involuntary psychiatric admission: a brazilian 1-year follow-up study. *Frontiers in Public Health* 2. 102.
doi:10.3389/fpubh.2014.00102.

The aim of this study was to analyze factors associated with the legal status at psychiatric admission of individuals with psychosis or bipolar disorder in a Latin-American cultural setting. Prospective observational study was conducted in São Paulo, Brazil. Researchers analyzed 169 individuals with bipolar or psychotic disorder in need of hospitalization. Eighty-eight patients (52%) had a voluntary admission and 81 (48%) had an involuntary admission (IA). The average length of admission was similar in both groups. It was significantly more common for IA patients to be admitted because of other-directed aggressiveness. The percentage of individuals that needed physical restraint during hospital stay among IA patients was also significantly higher. Having any religious affiliations was significantly related to an IA status as well. Results suggest that cultural factors related to religious affiliations might play an important role in determining psychiatric hospitalization legal status. Religion might possibly influence someone's judgment and insight about his/her psychiatric disorder. This study restates the importance of dealing with the subject of religion with patients.

Clark, Cari Jo, Angela Lewis-Dmello, Deena Anders, Amy Parsons, Viann Nguyen-Feng, Lisa Henn & David Emerson. 2014. Trauma-sensitive yoga as an adjunct mental health treatment in group

therapy for survivors of domestic violence: A feasibility study. *Complementary Therapies in Clinical Practice* 20(3). 152–158.

doi:10.1016/j.ctcp.2014.04.003

This study is a feasibility test of whether incorporating trauma-sensitive yoga into group therapy for female victims of partner violence improves symptoms of anxiety, depression, and posttraumatic stress disorder (PTSD) beyond that achieved with group therapy alone. Seventeen (9 control, 8 intervention) adult female clients seeking group psychotherapy were enrolled. A 12-week trauma-sensitive yoga protocol was administered once weekly for 30–40 min at the end of each group therapy session. The control group received typical group psychotherapy. Feasibility was assessed through recruitment and retention rates as well as participants' self-reported perceptions of the safety and utility of the study. The study enrolled 85% (17/20) of those screened eligible. Loss to follow-up was 30% (5/17). No one reported emotional or physical harm. All of the respondents reported that the study was personally meaningful and that the results would be useful to others.

Dengah, H. J. Francois. 2014. How religious status shapes psychological well-being: Cultural consonance as a measure of subcultural status among Brazilian Pentecostals. *Social Science & Medicine* 114. 18–25.

doi:10.1016/j.socscimed.2014.05.028.

Research on subjective social status has long recognized that individuals occupy multiple social hierarchies, with socioeconomic status (SES) being but one. The issue, as such, has been to identify culturally meaningful measures of social status. Through cognitive anthropological theory and methods, the author shows that it is possible to identify multiple cultural models of “status,” and objectively measure an individual’s level of adherence, or consonance, with each effectively placing them within the multidimensional space of social hierarchies. Through a mixed qualitative and quantitative study of 118 Brazilian Pentecostals carried out from 2011 to 2012, it is shown that dominant and limitedly-distributed cultural models of status operate simultaneously and concurrently in the lives of those who hold them. Importantly, each marker of cultural status moderates the other’s association with psychological well-being. The author argues that the importance of a given social hierarchy is framed by cultural values. For Brazilian Pentecostals, their limitedly distributed model of religious status alters the influence of more dominant societal indicators on psychological well-being. The interaction between religious and secular lifestyle statuses on psychological health is stronger than the association of SES, effectively explaining 51% of the variance. This finding suggests that among some populations, limitedly distributed cultural models of status may be a dominant force in shaping measures of well-being.

Fergus, Thomas A. & Wade C. Rowatt. 2014. Examining a purported association between attachment to God and scrupulosity. *Psychology of Religion and Spirituality* 6(3). 230–236.

Scrupulosity is a moral/religious subtype of obsessive–compulsive disorder (OCD) that remains understudied within the extant literature. Drawing from separate lines of research suggesting that attachment insecurities underlie OCD and that God functions psychologically much like other attachment figures, researchers examined a purported association between attachment to God and scrupulosity. A large sample of community adults (n=450) completed self-report measures assessing for scrupulosity, obsessive–compulsive symptoms, attachment to God, and related covariates. Results showed that attachment to God significantly correlated with scrupulosity. Moreover, attachment to God evidenced incremental specificity in the concurrent prediction of scrupulosity beyond variance shared with religiosity, negative affect, OCD-relevant dysfunctional beliefs, and attachment insecurities in close interpersonal relationships. Attachment to God did not evidence this level of specificity in the concurrent prediction of obsessive–compulsive symptoms. Among the attachment to God dimensions, attachment anxiety shared a particularly robust association with scrupulosity.

Freeze, Tracy A. & Enrico DiTommaso. 2014. An examination of attachment, religiousness, spirituality and well-being in a Baptist faith sample. *Mental Health, Religion & Culture* 17(7). 690–702.

doi:10.1080/13674676.2014.899569.

The purpose of this research was to examine a mediational model of attachment, religiousness and spirituality in predicting well-being in people of Christian faith. One hundred and eighty-five participants were recruited from Baptist churches and 19 from a Baptist-based university. Whereas no support was found for a mediational model of attachment, religiousness and spirituality in predicting well-being, support was found for a path model whereby greater levels of insecure attachment to God were associated with lower levels of religious spirituality (RS). In turn, lower levels of RS were associated with greater levels of emotional distress (ED). Therefore, for this sample of Baptists, having a secure attachment to God was related to an increase in religious behaviors, fulfilment with one's prayer life and belief in a purpose for life. It seems that increases in these religious and spiritual variables are related to less ED. This suggests that heightened connection with God, both through religious behaviors and heightened spirituality, is a beneficial pursuit for people of Christian faith.

Gordon, William Van, Edo Shonin, Alex Sumich, Eva C. Sundin & Mark D. Griffiths. 2014. Meditation Awareness Training (MAT) for psychological well-being in a sub-clinical sample of university students: A controlled pilot study. *Mindfulness* 5(4). 381–391.

Mindfulness has been practiced in the Eastern world for over twenty-five centuries but has only recently become popular in the West. Today, interventions such as "Mindfulness-Based Cognitive Therapy" are used within the Western health setting and have proven to be successful techniques for reducing psychological distress. However, a limitation of such interventions is that they tend to apply the practices of mindfulness in an "out of context" manner. To overcome this, a newly formed Meditation Awareness Training (MAT) program focusses on the establishment of solid meditative foundations and integrates various support practices that are traditionally assumed to effectuate a more sustainable quality of well-being. The aim of this pilot study was to assess the feasibility and effectiveness of MAT for improving psychological well-being in a sub-clinical sample of higher education students with issues of stress, anxiety, and low mood. Utilizing a controlled design, participants of the study (n=14) undertook an 8-week MAT program and comparisons were made with a control group (n=11) on measures of self-assessed psychological well-being (emotional distress, positive affect, and negative affect) and dispositional mindfulness. Participants who received MAT showed significant improvements in psychological well-being and dispositional mindfulness over controls. MAT may increase emotion regulation ability in higher education students with issues of stress, anxiety, and low mood. Individuals receiving training in mindfulness meditation may benefit by engendering a broader, more ethically informed, and compassionate intention for their mindfulness practice.

Granqvist, Pehr, Anders G. Broberg & Berit Hagekull. 2014. Attachment, religiousness, and distress among the religious and spiritual: links between religious syncretism and compensation. *Mental Health, Religion & Culture* 17(7). 726–740.

doi:10.1080/13674676.2014.906394

Using the Adult Attachment Interview, researchers explored differences in attachment, distress, and religiousness among groups of traditionally religious, New Age spiritual, and religiously syncretistic (high on both) participants (Ps) (n=75). Religiously syncretistic Ps showed a preponderance of insecure attachment and were raised by non-religious parents, who were estimated as relatively insensitive. Moreover, religiously syncretistic Ps perceived a personal relationship with God and had experienced increased religiousness/spirituality during difficult life periods, but did not suffer elevated distress. New Agers often mirrored the religiously syncretistic, but had a more even secure–insecure attachment distribution, typically did not perceive a personal relationship with God, and did suffer elevated distress. Traditionally religious Ps were low on distress and raised by religious parents, estimated as

relatively sensitive. Researchers conclude that religious syncretism may often express religion/spirituality as compensation. Finally, they speculate that a perceived relationship with God may attenuate distress among those at risk.

Jain, Felipe A., Nora Nazarian & Helen Lavretsky. 2014. Feasibility of Central Meditation and Imagery Therapy for dementia caregivers. *International Journal of Geriatric Psychiatry* 29(8). 870–876. doi:10.1002/gps.4076.

Family dementia caregivers are at high risk of depression and burnout. Researchers assessed the feasibility of Central Meditation and Imagery Therapy for Caregivers (CMIT-C), a novel 8-week group meditation and guided imagery group therapy program, for dementia caregivers reporting stress because of caregiving responsibilities. Twelve family dementia caregivers enrolled in CMIT-C. Primary outcomes included depression and anxiety, and secondary outcomes included insomnia, quality of life, and mindfulness. Changes over the study and 3 month follow-up were analyzed with non-parametric related samples tests. Correlations of feeling state changes from meditation diaries at 1 week were made with symptom changes post meditation training. Ten participants completed the study. Completers came to an average of 7 +/- 1 sessions out of a possible 8 sessions, and turned in home practice logs of 90 +/- 10% of the time. Anxiety, depression, and insomnia symptoms decreased, and mindfulness ratings improved with large effects. Gains were stable at 3 months. Early response during the first week of meditation practice was associated with subsequent home meditation practice, anxiety change at 8 weeks, and endpoint satisfaction with CMIT-C.

Johnson, Douglas C., Nathaniel J. Thom, Elizabeth A. Stanley, Lori Haase, Alan N. Simmons, Pei-an B. Shih, Wesley K. Thompson, Eric G. Potterat, Thomas R. Minor & Martin P. Paulus. 2014. Modifying Resilience Mechanisms in At-Risk Individuals: A Controlled Study of Mindfulness Training in Marines Preparing for Deployment. *American Journal of Psychiatry* 171(8). 844–853. doi:10.1176/appi.ajp.2014.13040502.

Military deployment can have profound effects on physical and mental health. Few studies have examined whether interventions prior to deployment can improve mechanisms underlying resilience. Mindfulness-based techniques have been shown to aid recovery from stress and may affect brain-behavior relationships prior to deployment. The authors examined the effect of mindfulness training on resilience mechanisms in active-duty Marines preparing for deployment. Eight Marine infantry platoons (n=281) were randomly selected. Four platoons were assigned to receive mindfulness training (n=147) and four were assigned to a training-as-usual control condition (n=134). Platoons were assessed at baseline, 8 weeks after baseline, and during, and after a stressful combat training session approximately 9 weeks after baseline. The mindfulness training condition was delivered in the form of 8 weeks of Mindfulness-Based Mind Fitness Training (MMFT), a program comprising 20 hours of classroom instruction plus daily homework exercise's. MMFT emphasizes interoceptive awareness, attentional control, and tolerance of present-moment experiences. The main outcome measures were heart rate, breathing rate, plasma neuropeptide Y concentration, score on the Response to Stressful Experiences Scale, and brain activation as measured by functional MRI. Marines who received MMFT showed greater reactivity and enhanced recovery after stressful training; lower plasma neuropeptide Y concentration after stressful training; and attenuated blood-oxygen-level-dependent signal in the right insula and anterior cingulate. The results show that mechanisms related to stress recovery can be modified in healthy individuals prior to stress exposure.

Koenig, Harold G., Lee S. Berk, Noha S. Daher, Michelle J. Pearce, Denise L. Bellinger, Give J. Robins, Bruce Nelson, Sally F. Shaw, Harvey Jay Cohen & Michael B. King. 2014. Religious involvement is associated with greater purpose, optimism, generosity and gratitude in persons with major depression and chronic medical illness. *Journal of Psychosomatic Research* 77(2). 135–143. doi:10.1016/j.jpsychores.2014.05.002.

Religious involvement may help individuals with chronic medical illness cope better with physical disability and other life changes. Researchers examined the relationships between religiosity, depressive symptoms, and positive emotions in persons with major depression and chronic illness. Participants were 129 persons who were at least somewhat religious/spiritual were recruited into a clinical trial to evaluate the effectiveness of religious vs. secular cognitive behavioral therapy. Reported here are the relationships at baseline between religious involvement and depressive symptoms, purpose in life, optimism, generosity, and gratefulness using standard measures. Although religiosity was unrelated to depressive symptoms and did not buffer the disability-depression relationship, strong relationships were found between religious indicators and greater purpose, optimism, generosity, and gratefulness. Although unrelated to depressive symptoms in the setting of major depression and chronic medical illness, higher religious involvement is associated with positive emotions, a finding which may influence the course of depression over time.

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* 31(8). 631–640.
doi:10.1002/da.22268.

Antenatal depression and anxiety are associated with adverse obstetric and mental health outcomes, yet practicable non-pharmacological therapies, particularly for the latter, are lacking. Yoga incorporates relaxation and breathing techniques with postures that can be customized for pregnant women. This study tested the efficacy of yoga as an intervention for reducing maternal anxiety during pregnancy. Fifty-nine primiparous, low-risk pregnant women completed questionnaires assessing anxiety and depression, and were randomized to either an 8-week course of antenatal yoga or treatment-as-usual (TAU); both groups repeated the questionnaires at follow-up. The yoga group also completed pre- and postsession state anxiety and stress hormone assessments at both the first and last session of the 8-week course. Results indicate that a single session of yoga reduced both subjective and physiological measures of state anxiety (STAI-S and cortisol); and this class-induced reduction in anxiety remained at the final session of the intervention. Researchers conclude that antenatal yoga seems to be useful for reducing women's anxieties toward childbirth and preventing increases in depressive symptomatology.

Ng, Yin-ling Tabitha. 2014. Spirituality and differentiation of self of parents living in the “City of Sadness.” *Mental Health, Religion & Culture* 17(7). 655–664.
doi:10.1080/13674676.2014.894008.

Tin Shui Wai is a new town situated in the remote district of Hong Kong. Tin Shui Wai is dubbed the “City of Sadness” by the media after the occurrence of a number of family tragedies involving child abuse, domestic violence, mental illness, homicide and suicide. According to the Bowen Family Theory, differentiation of self is a very important factor in determining our way of functioning, resilience and ways of dealing with problems. This study is a quantitative research study with a cross-sectional design and a survey approach. It examines the relationship between differentiation of self and spirituality of parents living in Tin Shui Wai. The results of the research suggested that more daily spiritual experience among parents could predict higher level of differentiation of self.

Pepping, Christopher A., Analise O'Donovan & Penelope J. Davis. 2014. The differential relationship between mindfulness and attachment in experienced and inexperienced meditators. *Mindfulness* 5(4). 392–399.

Several recent studies have examined the association between mindfulness and attachment. However, close inspection of these studies suggests that the strength of this association may differ based on participants' experience in mindfulness meditation. The aim of the present research was to examine a possible differential relationship between mindfulness and attachment in experienced and inexperienced mindfulness meditators. Results revealed that mindfulness and attachment were significantly related in both groups, but attachment anxiety and avoidance together accounted for more than twice the variance in mindfulness in experienced meditators compared with their

inexperienced counterparts. The relationship between attachment anxiety and mindfulness was significantly stronger in the group of experienced meditators, such that this association was moderated by mindfulness meditation experience. This stronger association between attachment anxiety and mindfulness may reflect the beneficial effects of mindfulness training on both mindfulness and attachment anxiety and provides some evidence that mindfulness interventions may enhance secure attachment.

- Pirutinsky, Steven, Elizabeth Midlarsky, Ariel Kor & David Pelcovitz. 2014. The impact of religious conflict within orthodox Jewish families in Israel. *Mental Health, Religion & Culture* 17(7). 665–679.
doi:10.1080/13674676.2014.898629.

While prior research suggests that religion influences relationships positively, it may also be a source of conflict. This may be particularly relevant in religion-centric cultures and in families with individuating adolescent children. The current research analyzed data from 789 orthodox Jewish couples residing throughout Israel. Researchers hypothesized that religious conflict is related to lower family functioning and higher parenting stress, and that it is more frequent among couples with insecure attachment. Results of a structural equation model indicated that religious conflict was significantly associated with outcome variables within various religious subgroups, and that attachment insecurity was related to higher levels of conflict and was fully or partially mediated by religious conflict. This suggests that within the orthodox community, religious conflict is an important correlate, and perhaps cause, of family dysfunction.

- Popova, Olga. 2014. Can religion insure against aggregate shocks to happiness? The case of transition countries. *Journal of Comparative Economics* 42(3). 804–818.
doi:10.1016/j.jce.2014.05.003.

This paper examines the effects of reforms and religion on happiness in transition economies. Earlier literature suggests that religiosity insures happiness against various individual stressful life events. This phenomenon is well-explored in developed countries but rarely studied in post-communist countries, where religion was officially suppressed for a long period. These countries have undergone considerable economic transformations over the past two decades. Using cross-sectional Life in Transition Survey data and historical data on religions, the author examines if religion insures against economic reforms. The endogeneity of religion is taken into account. The findings suggest that economic reforms may have both positive and negative effects on happiness. Religiosity indeed insures happiness and perceptions of economic and political situations against economic reforms.

- Seppälä, Emma M., Jack B. Nitschke, Dana L. Tudorascu, Andrea Hayes, Michael R. Goldstein, Dong T. H. Nguyen, David Perlman & Richard J. Davidson. 2014. Breathing-based meditation decreases posttraumatic stress disorder symptoms in U.S. military veterans: A randomized controlled longitudinal study. *Journal of Traumatic Stress* 27(4). 397–405.
doi:10.1002/jts.21936.

Given the limited success of conventional treatments for veterans with posttraumatic stress disorder (PTSD), investigations of alternative approaches are warranted. Researchers examined the effects of a breathing-based meditation intervention, Sudarshan Kriya yoga, on PTSD outcome variables in U.S. male veterans of the Iraq or Afghanistan war. Researchers randomly assigned 21 veterans to an active (n=11) or waitlist control (n=10) group. Laboratory measures of eye-blink startle and respiration rate were obtained before and after the intervention, as were self-report symptom measures; the latter were also obtained 1 month and 1 year later. The active group showed reductions in PTSD scores, anxiety symptoms, and respiration rate, but the control group did not. Reductions in startle correlated with reductions in hyperarousal symptoms immediately postintervention and at 1-year follow-up. This longitudinal intervention study suggests there may be clinical utility for Sudarshan Kriya yoga for PTSD.

2.3 SPIRITUALITY & HEALTH: METHOD AND THEORY

Alijani Renani, Houshang, Fatemeh Hajinejad, Esmaeil Idani & Maryam Ravanipour. 2014. Children with asthma and their families' viewpoints on spiritual and psychological resources in adaptation with the disease. *Journal of Religion and Health* 53(4). 1176–1189.
doi:10.1007/s10943-013-9782-2.

Recognition of the spiritual and psychological needs of children and their families with chronic asthma disease may be helpful in a successful coping with their problems in order to control over the condition. In a qualitative content analysis study, nine children with moderate to severe asthma and 10 parents were studied in order to discover the resources of compatibility of them. The participants were chosen purposefully and they were asked some semi-structure questions about their experiences. The spiritual and psychological experiences of the participants were divided into two main categories as follows: (1) contrive to religious-belief consisting of three sub-categories known as “religious rituals, believe in a divine predestination, and Islamic-based patience,” and (2) psycho-intellectual management that includes the five sub-categories of “psycho-intellectual attention, maintaining family’s mental peace, reduction in negative burden of disease, satisfaction from optimal treatment, and matching internal desires with disease conditions.”

Anshel, Mark H. & Mitchell Smith. 2014. The role of religious leaders in promoting healthy habits in religious institutions. *Journal of Religion and Health* 53(4). 1046–1059.
doi:10.1007/s10943-013-9702-5.

The growing obesity epidemic in the West, in general, and the U.S.A., in particular, is resulting in deteriorating health, premature and avoidable onset of disease, and excessive health care costs. The religious community is not immune to these societal conditions. Changing health behavior in the community requires both input from individuals who possess knowledge and credibility and a receptive audience. One group of individuals who may be uniquely positioned to promote community change but have been virtually ignored in the applied health and consulting psychology literature is religious leaders. These individuals possess extraordinary credibility and influence in promoting healthy behaviors by virtue of their association with time-honored religious traditions and the status which this affords them—as well as their communication skills, powers of persuasion, a weekly (captive) audience, mastery over religious texts that espouse the virtues of healthy living, and the ability to anchor health-related actions and rituals in a person’s values and spirituality. This article focuses on ways in which religious leaders might promote healthy habits among their congregants. By addressing matters of health, nutrition, and fitness from the pulpit and in congregational programs, as well as by visibly adopting the tenets of a healthier lifestyle, clergy can deliver an important message regarding the need for healthy living. Through such actions, religious leaders can be effective agents in promoting critical change in these areas.

Brito, Gonzalo. 2014. Rethinking mindfulness in the therapeutic relationship. *Mindfulness* 5(4). 351–359.

Mindfulness in the Buddhist context does not stand alone as a tool or technique to reduce and relieve stress. On the contrary, mindfulness is seen as a part of a contextualized set of attitudes, exercises, and practices that are employed to facilitate a deeper understanding of the illusion of a solid and separate self, which is believed to be a fundamental source of suffering. This paper explores how a contextually embedded and culturally informed understanding of mindfulness and the spiritual nature of this practice may help enhance therapeutic presence and the therapeutic relationship. First, it presents a review of the empirical literature discussing therapists’ mindfulness and the therapeutic relationship with an emphasis on the therapists’ presence. Second, it offers a critique of how mindfulness has often been understood in a reductionist fashion as an attentional technique instead of a mode of being. Third, it articulates a contextually embedded view of mindfulness, including its inherent transformational aspects. This paper argues for a revision of the current understanding of mindfulness in mainstream psychology, particularly in relation to the therapeutic relationship.

Bruin, Esther I., Bonne J. H. Zijlstra & Susan M. Bögels. 2014. The meaning of mindfulness in children and adolescents: Further validation of the Child and Adolescent Mindfulness Measure (CAMM) in two independent samples from The Netherlands. *Mindfulness* 5(4). 422–430.

Factor structure, internal consistency, and construct validity of the Dutch version of the Child and Adolescent Mindfulness Measure (CAMM) were studied in two samples of school children and adolescents (n=275, 10–12 years; n=560, 13–16 years) from The Netherlands, using principle factor analysis. In both samples, a single component showed a good fit. However, evidence was also found for a solution with two components in both samples. That is, for children as well as adolescents, a main component referring to “present-moment non-judgmental awareness” arose, but for children a second component of “suppressing or avoiding thoughts and feelings” arose whereas for adolescents “distractibility or difficulty paying attention” became apparent as a second component. The ten-item CAMM showed satisfactory internal consistency. As hypothesized, researchers found significant, moderate to strong positive correlations for the child and adolescent samples between the CAMM and measures of happiness, healthy self-regulation, and quality of life. Researchers further found significant, moderate to strong negative correlations with stress, rumination, self-blame, and catastrophizing. Only the expected positive correlation with acceptance was not found. There was no difference between children with or without meditation experience on the CAMM; however, adolescents with meditation experience showed a significantly lower score on the CAMM than those without this experience. Overall, good psychometric properties were demonstrated and were comparable with the original CAMM. Mindful awareness and being non-judgmental appears a measurable concept in children and adolescents and can be considered an important protective construct in the mental health of not only adults, but also of children and adolescents.

Elwy, A. Rani, Erik J. Groessl, Susan V. Eisen, Kristen E. Riley, Meghan Maiya, Jennifer P. Lee, Andrew Sarkin & Crystal L. Park. 2014. A Systematic Scoping Review of Yoga Intervention Components and Study Quality. *American Journal of Preventive Medicine* 47(2). 220–232.
doi:10.1016/j.amepre.2014.03.012.

This review aimed to systematically assess all studies of yoga interventions in order to (1) determine yoga intervention characteristics; (2) examine methodological quality of the subset of RCTs; and (3) explore how well these interventions are reported. Searches were conducted through April 2012 in electronic database and handsearching journals. Original studies were included if the intervention (1) consisted of at least one yoga session with some type of health assessment; (2) targeted adults aged ≥18 years; (3) was published in an English-language peer-reviewed journal; and (4) was available for review. Of 3,062 studies identified, 465 studies in 30 countries were included. Analyses were conducted through 2013. Most interventions took place in India (n=228) or the U.S. (n=124), with intensity ranging from a single yoga session up to two sessions per day. Intervention lengths ranged from one session to 2 years. Asanas (poses) were mentioned as yoga components in 369 (79%) interventions, but were either minimally or not at all described in 200 (54%) of these. Most interventions (74%, n=336) did not include home practice. Of the included studies, 151 were RCTs. RCT quality was rated as poor. This review highlights the inadequate reporting and methodological limitations of current yoga intervention research, which limits study interpretation and comparability.

Exline, Julie J., Kenneth I. Pargament, Joshua B. Grubbs & Ann Marie Yali. 2014. The Religious and Spiritual Struggles Scale: Development and initial validation. *Psychology of Religion and Spirituality* 6(3). 208–222.
doi:10.1037/a0036465.supp

Many people experience struggle around religious and spiritual aspects of life, as shown in a steadily growing body of research. A need now exists for more comprehensive, reliable, concise measurement of religious and spiritual (r/s) struggles through a scale that covers multiple domains. This article describes the development and initial validation of a 26-item measure, the Religious and Spiritual Struggles (RSS) Scale. The measure assesses six

domains of r/s struggle: divine (negative emotion centered on beliefs about God or a perceived relationship with God), demonic (concern that the devil or evil spirits are attacking an individual or causing negative events), interpersonal (concern about negative experiences with religious people or institutions; interpersonal conflict around religious issues), moral (wrestling with attempts to follow moral principles; worry or guilt about perceived offenses by the self), doubt (feeling troubled by doubts or questions about one's r/s beliefs), and ultimate meaning (concern about not perceiving deep meaning in one's life). Study 1 used factor analytic techniques in two adult samples (n=400 and n=483) to refine the item pool for the RSS. Study 2, which sampled 1141 undergraduates, showed very good fit for a six-factor model using confirmatory factor analysis. Study 2 also provided evidence of convergent, discriminant and predictive validity by relating RSS scores to measures of religiousness, r/s struggle and mental health. Several potentially important demographic differences emerged on the RSS. For example, undergraduates without committed romantic relationships and those who self-identified as homosexual reported greater r/s struggles across multiple domains.

Freund, Anat, Miri Cohen & Faisal Azaiza. 2014. The doctor is just a messenger: beliefs of ultraorthodox Jewish women in regard to breast cancer and screening. *Journal of Religion and Health* 53(4). 1075–1090.

doi:10.1007/s10943-013-9695-0.

Screenings for the early detection of breast cancer greatly improve survival odds. Studies of minority groups have shown lower attendance of screenings; however, these studies seldom focused on religious minorities. This study examines perceptions of cancer and cancer screening among healthy ultraorthodox women in order to gain insight about ways to promote screening. In this qualitative-phenomenological study of two focus groups, three main themes were found: faith in God; the Rabbi as a guide; one's relationship with the community. The study's findings point to the importance of studying the unique needs of members of certain religious groups.

Hall, Sue & Sharon Beatty. 2014. Assessing spiritual well-being in residents of nursing homes for older people using the FACIT-Sp-12: a cognitive interviewing study. *Quality of Life Research* 23(6). 1701–1711.

doi:10.1007/s11136-014-0627-6.

This research was carried out in order to detect any problems with completion of the Functional Assessment of Chronic Illness Therapy Spiritual Well-being Scale (FACIT-Sp-12), to analyze the causes of such problems, and to propose solutions to overcome them. Researchers audio-recorded face-to-face interviews with 17 older people living in one of three nursing homes in London, UK, while they completed FACIT-Sp-12. Researchers used cognitive interviewing methods to explore residents' responses. Analysis was based on the Framework approach to qualitative analysis. Researchers developed the framework of themes a priori. These comprised: comprehension of the question; retrieval from memory of relevant information; decision processes; and response processes. Ten residents completed the FACIT-Sp-12 with no missing data. Most problems involved comprehension and/or selecting response options. Twelve residents had problems with comprehension of at least one question, particularly with abstract concepts (e.g., harmony, productivity), or where there were assumptions inherent in the questions (e.g., they had an illness). When residents had problems comprehending the question, they also found it difficult to select a response. Thirteen residents had difficulties selecting responses (e.g. categories did not reflect their views or were not meaningful in the context of the statement). Some chose not to respond, others responded to the question as they understood it. The FACIT-Sp-12 could provide valuable insights into the spiritual concerns of nursing home residents; however, data may be neither valid nor reliable if they do not comprehend the questions as intended and respond appropriately. Providing clear and detailed instructions, including definitions of abstract concepts, may improve the validity of this measure for this population.

Harris, J. Irene, Christopher R. Erbes, Ann Marie Winskowski, Brian E. Engdahl & Xuan V. Nguyen. 2014. Social support as a mediator in the relationship between religious comforts and strains and trauma symptoms. *Psychology of Religion and Spirituality* 6(3). 223–229.

Recent research shows that religious and spiritual variables are related to adjustment among those who have experienced trauma. It is also known that social support influences posttraumatic adjustment. Critics have argued that religious and spiritual variables primarily serve as a proxy for social support because individuals in spiritual communities access higher levels of social support than those with no such community. Researchers sought to explore the interrelationships among these 3 domains by studying church members with histories of trauma exposure. It was found that social support and religious comforts and strains are distinguishable. Social support, religious comfort, and religious fear and guilt make independent contributions to posttraumatic adjustment, whereas social support partially mediates the relationship between alienation from one's higher power, religious rifts, and trauma symptoms.

Hodge, David R. & Robert J. Wolosin. 2014. American Indians and spiritual needs during hospitalization: developing a model of spiritual care. *Gerontologist* 54(4). 683–692.
doi:10.1093/geront/gnt042.

Although spirituality is typically intertwined with health in Native cultures, little research has examined the relationship between American Indians' spiritual needs and overall satisfaction with service provision during hospitalization. This study examined this relationship, in tandem with the effects of 8 potential mediators, to develop a model of spiritual care for older hospitalized American Indians. Structural equation modeling was used with a sample of American Indians (n=860), aged 50 and older, who were consecutively discharged from hospitals across the United States over a 12-month period. As posited, addressing spiritual needs was positively associated with overall satisfaction with service provision. The relationship between spiritual needs and satisfaction was fully mediated by 4 variables: nursing staff, the discharge process, physicians, and visitors.

Jankowski, Peter J. & Steven J. Sandage. 2014. Meditative prayer and intercultural competence: Empirical test of a differentiation-based model. *Mindfulness* 5(4). 360–372.

The present study involved the examination of a theoretical model of the relationship between meditative prayer and intercultural competence with dispositional gratitude and differentiation of self as mediator variables. Results supported the proposed model. A significant total indirect effect was observed between meditative prayer and intercultural competence. Significant specific indirect effects were observed between meditative prayer and intercultural competence with differentiation of self as the mediator, and through both gratitude and differentiation of self in a multiple-mediated association. Discussion focused on the construct of meditative prayer as a mindfulness practice and the unifying mechanisms among variables within the proposed model.

Kelly-Hanku, Angela, Peter Aggleton & Patti Shih. 2014. “We call it a virus but I want to say it’s the devil inside”: Redemption, moral reform and relationships with God among people living with HIV in Papua New Guinea. *Social Science & Medicine* (1982) 119C. 106–113.
doi:10.1016/j.socscimed.2014.08.020.

There is growing recognition of the importance of religion and religious beliefs as they relate to the experience of HIV, globally and in Papua New Guinea in particular. Based on 36 in-depth qualitative interviews conducted with people living with HIV receiving HIV antiretroviral therapy in 2008, this paper examines the cultural etiology of HIV in Papua New Guinea, the country with the highest reported burden of HIV in the Pacific. Narratives provided drew upon a largely moral framework, which viewed HIV acquisition as a consequence of moral failing and living an un-Christian life. This explanation for suffering viewed the individual as responsible for their condition in much the same way that neo-liberal biomedical discourses do. Moral reform and re-establishing a relationship with God were seen as key actions necessary to effect healing on the material body

infected with HIV. Religious understandings of HIV drew upon a pre-existing cultural etiology of dis-ease and misfortune widespread in Papua New Guinea. Understanding the centrality of Christianity to explanations of disease, and subsequently the actions necessary to bring about health, is essential in order to understand how people with HIV in receipt of antiretroviral therapies internalize biomedical perspectives and reconcile these with Christian beliefs.

Keshet, Yael & Ido Liberman. 2014. Coping with illness and threat: why non-religious Jews choose to consult rabbis on healthcare issues. *Journal of Religion and Health* 53(4). 1146–1160.
doi:10.1007/s10943-013-9711-4.

Whereas modern and advanced medical services are available and accessible to all citizens of Israel, the phenomenon of consulting Orthodox rabbis (Jewish clerics) on healthcare issues is gaining ground among populations that do not identify themselves as religious. The objective of the research was to enquire why non-religious Jews choose to consult rabbis on medical issues. Fifty semi-structured open-ended interviews were conducted during 2009-2011 in northern Israel. The article presents the respondents' main motives, expectations, beliefs, and modes of consulting both physicians and rabbis. This study aims to contribute to discussion about conflating modern medicine with spiritual-religious beliefs in modern-secular society.

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* 62(6). 360–369.
doi:10.1080/07448481.2014.907296.

Stress impacts college students, faculty, and staff alike. Although meditation has been found to decrease stress, it is an underutilized strategy. This study used the Reasoned Action Approach (RAA) to identify beliefs underlying university constituents' decision to meditate. Participants were 96 students, faculty, and staff at a large midwestern university during spring 2012. A survey measured the RAA global constructs and elicited the beliefs underlying intention to meditate. Thematic and frequency analyses and multiple regression were performed. Quantitative analyses showed that intention to meditate was significantly predicted by attitude, perceived norm, and perceived behavioral control. Qualitative analyses revealed advantages (e.g., reduced stress; feeling calmer), disadvantages (e.g., takes time; will not work), and facilitating circumstances (e.g., having more time; having quiet space) of meditating.

Lightfoot, Alexandra F., Tamara Taggart, Briana A. Woods-Jaeger, Linda Riggins, Melvin R. Jackson & Eugenia Eng. 2014. Where is the faith? Using a CBPR approach to propose adaptations to an evidence-based HIV prevention intervention for adolescents in African American faith settings. *Journal of Religion and Health* 53(4). 1223–1235.
doi:10.1007/s10943-014-9846-y.

African American adolescents are at increased risk for HIV/AIDS. Using a community-based participatory research approach, Researchers engaged three black churches in adapting an evidence-based HIV prevention intervention, Focus on Youth (FOY)+ImPACT, for faith settings. To identify potential adaptations to increase FOY's relevance, utility, and efficacy for faith settings, Researchers conducted eight focus groups pre- and post-intervention. Recommendations for maintaining FOY's core elements and enhancing its cultural authenticity include the following: incorporating faith tools, building pastor capacity, strengthening parent-child communication skills, and expanding social support for parents and youth. Engaging faith communities in adapting and implementing evidence-based HIV prevention programs could reduce HIV/AIDS disparities.

Liu, Yi-Jung. 2014. Religious coping methods of Taiwanese folk religion. *Journal of Religion and Health* 53(4). 1138–1145.
doi:10.1007/s10943-013-9709-y.

The purpose of this study was to explore religious coping methods employed by Taiwanese folk religious believers. This study applied qualitative research methods in data collection and data analysis by conducting semi-structured interviews with participants and analyzing the interview contents. Researchers have identified fourteen coping methods that can be categorized into five different religious dimensions: belief, ritual, ethical, emotional and material. The findings not only expanded our knowledge about how believers of Taiwanese folk religion employ the religion to cope with difficulties but also discovered that some coping methods employed by them are also reported in Western countries, only in different forms.

- Lomas, Tim, Tina Cartwright, Trudi Edginton & Damien Ridge. 2014. A religion of wellbeing? The appeal of Buddhism to men in London, United Kingdom. *Psychology of Religion and Spirituality* 6(3). 198–207.
doi:10.1037/a0036420.

Against a backdrop of increasing secularization, the number of Buddhists in Britain continues to rise. However, few studies have explored the reasons people are drawn toward Buddhism, with none focusing on men specifically. Uniquely, the present researchers conducted in-depth narrative interviews with 30 male meditators in London, United Kingdom, to explore the appeal Buddhism held for them. Buddhism was portrayed as a nexus of ideas and practices that improved men's lives. Analyzed through the prism of a multidimensional biopsychosocial model of wellbeing, Buddhism appeared to have the potential to promote wellbeing in biological terms (e.g., health behaviors), psychological terms (e.g., generating subjective wellbeing), and social terms (e.g., offering a supportive social network). From a gendered perspective, Buddhism offered men the opportunity to rework their masculine identity in ways that enhanced their wellbeing. This was a complex development, in which traditional masculine norms were upheld (e.g., Buddhism was constructed as a 'rational' framework of ideas/practices), yet also challenged (e.g., norms around alcohol abstinence).

- McEvoy, Mimi, William Burton & Felise Milan. 2014. Spiritual versus religious identity: A necessary distinction in understanding clinicians' behavior and attitudes toward clinical practice and medical student teaching in this realm. *Journal of Religion and Health* 53(4). 1249–1256.
doi:10.1007/s10943-014-9844-0.

Social sciences view spirituality and religion separately; medicine views them together. Researchers identified distinctions regarding clinical practice and teaching among clinician educators based on their self-identified spirituality versus religiosity. Researchers emailed a 24-item survey on spiritual/religious (S/R) issues to clinician educators (n=1067) at the authors' institution. Three summary scales were created. Responses to statements, 'I consider myself to be spiritual' and 'I consider myself to be religious' generated four comparison groups: 'spiritual only,' 'religious only,' 'both spiritual and religious' and 'neither.' Analyses employed ANOVA and T tests. A total of 633 (59%) surveys were completed. Four percentage self-identified as 'religious only'; remaining respondents divided evenly, about 30% into each of the other categories. Groups differed from one another on all summary scales. Using T tests, the 'spiritual only' group differed from the 'religious only' group regarding teaching. The 'spiritual and religious' group had the highest mean ratings for all summary scales. The 'neither' and 'religious only' group had the lowest mean ratings. Clinicians' spiritual versus religious identity is associated with differences in behavior/attitudes regarding S/R toward clinical practice and medical student teaching. These findings elucidate opportunities for faculty development to explore effects of beliefs on behavior and attitudes within this realm.

- Moon, Hellena. 2014. Genealogy of the Modern Theological Understanding of Han. *Pastoral Psychology* 63(4). 419–435.
doi:10.1007/s11089-013-0574-0.

The author provides a genealogy and critique of the Korean theological concept of suffering, han. A critique is provided as to how the concept has been a formative part of the cultural-postcolonial nationalist narrative of

Korean spirituality. The author looks at the historiography of the politicization of han and locate its current theological understanding within the colonial period of Korea (1910-1945). To argue that han forms the core of Korean spirituality is to internalize the beliefs of the colonizers that Koreans suffer from 'the beauty of sorrow' due to the unfortunate geopolitical situation of their country. This idea of sorrow as an aesthetic guiding principle for Koreans was part of the justification for colonizing Korea. This acceptance of han reinforces colonialist opinions about colonized subjects. The article thus problematizes the paradigm of han as a theological concept that is unique to Korean culture and argues for a more complex Korean theological discourse.

Nørager, Troels. 2014. Religion, morality, and democratic virtues: A liberal theological approach to pastoral care. *Pastoral Psychology* 63(4). 393–404.

Starting from a general definition of pastoral care and politics, it is argued that pastoral care can have nothing to do with party politics. Instead, the theme of pastoral care and politics should be regarded as a sub-set of the larger issue of religion and politics in a democratic society. Adopting the view that political philosophy is at bottom an exercise in moral reflection, this article focuses on two interrelated issues: the compatibility of religion and democracy, and the connection between religion and morality. The argument proceeds in three steps. In the first section, it is demonstrated why and how major political philosophers deem it necessary to impose certain limitations on the role of religion in the public square. In the second section, Kierkegaard's interpretation of the biblical story of Abraham's near-sacrifice of Isaac (Gen. 22) is treated as a problematic tradition in Christian theology of admiring authoritarian faith. Finally, as a means of overcoming these difficulties, a plea is made for returning to the tradition of liberal theology and its emphasis on the internal connection between religion and morality, and on developing conscience and civic virtues by way of self-culture.

Peteet, John R. 2014. What is the place of clinicians' religious or spiritual commitments in psychotherapy? A virtues-based perspective. *Journal of Religion and Health* 53(4). 1190–1198. doi:10.1007/s10943-013-9816-9.

Value neutrality in psychotherapy is widely acknowledged to be a myth, and a majority of US physicians report that their religious faith influences their practice. Most attention to therapists' religious and spiritual commitments has focused on ethical boundaries, transference/countertransference dynamics and questions about how to relate religious and psychological truth. No consensus exists about the legitimate place in psychotherapy of clinicians' differing value commitments. Therapists' virtues are vitally important in psychotherapy, not least in the relational and aspirational process by which the patient identifies with the therapist as they engage together in confronting obstacles which the patient has been unable to surmount alone. Among the individual and cultural factors that shape a therapist's virtues are spiritual traditions, which encourage preferred or characteristic virtues. Arguably, for Jews these include communal responsibility and critical thought; for Christians, love and grace; for Muslims, reverence and obedience; for Buddhists, equanimity and compassion; for Hindus, appreciation of Dharma and Karma; and for secularists, respect for scientific evidence and intelligibility. These have differing implications for treatment, as illustrated through the use of a hypothetical case. Attention to differing spiritual and religious virtues in a pluralistic culture offers opportunities for creative dialogue, collaborative teaching and interdisciplinary research.

Ramakrishnan, P., A. Dias, A. Rane, A. Shukla, S. Lakshmi, B. K. M. Ansari, R. S. Ramaswamy, et al. 2014. Perspectives of Indian traditional and allopathic professionals on religion/spirituality and its role in medicine: Basis for developing an integrative medicine program. *Journal of Religion and Health* 53(4). 1161–1175. doi:10.1007/s10943-013-9721-2.

Allopathic medical professionals in developed nations have started to collaborate with traditional, complementary, and alternative medicine (TCAM) to enquire on the role of religion/spirituality (r/s) in patient care. There is scant evidence of such movement in the Indian medical community. Researchers aim to understand the perspectives

of Indian TCAM and allopathic professionals on the influence of r/s in health. Using RSMPP (Religion, Spirituality and Medicine, Physician Perspectives) questionnaire, a cross-sectional survey was conducted at seven (five TCAM and two allopathic) pre-selected tertiary care medical institutes in India. Findings of TCAM and allopathic groups were compared. Majority in both groups (75% of TCAM and 84.6% of allopathic practitioners) believed that patients' spiritual focus increases with illness. Up to 58% of TCAM and allopathic respondents report patients receiving support from their religious communities; 87% of TCAM and 73% of allopaths believed spiritual healing to be beneficial and complementary to allopathic medical care. Only 11% of allopaths, as against 40% of TCAM, had reportedly received formal training in r/s. Both TCAM (81.8%) and allopathic (63.7%) professionals agree that spirituality as an academic subject merits inclusion in health education programs. Inclusion of spirituality in the health care system is a need for Indian medical professionals as well as their patients, and it could form the basis for integrating TCAM and allopathic medical systems in India.

Rowland, Michael L. & E. Paulette Isaac-Savage. 2014. As I see it: A study of African American pastors' views on health and health education in the black church. *Journal of Religion and Health* 53(4). 1091–1101.
doi:10.1007/s10943-013-9705-2.

The Black Church is the only institution that has consistently served the interest of African Americans, and there is no other institution in the African American community that rivals its influence. The spiritual well-fare, social support, health, and well-being of its people have been one of its main goals. With health disparities of African Americans still at an alarming rate, the Black Church has used informal education as a means to impart knowledge on health, as well as other non-religious and religious topics. One of the avenues least researched within the Black Church is the pastor's perception of his or her educational role in health and wellness and its efforts to reduce health discrimination and health disparities between African American and European Americans in the U.S. Since social justice appears as a theme and concern in the traditions of many churches, it is only appropriate that, among other things, the Black Church should address the issue of health education and interventions. The purpose of this study was to explore African American pastors' perceptions of the role of the Black Church in providing health care, health education, and wellness opportunities to African Americans. Many pastors reported their church provided some form of health education and/or health screenings. Their perceptions about the important issues facing their congregants versus African Americans in general were quite similar.

Saffari, Mohsen, Harold G. Koenig, Ghader Ghanizadeh, Amir H. Pakpour & Donia R. Baldacchino. 2014. Psychometric properties of the Persian spiritual coping strategies scale in hemodialysis patients. *Journal of Religion and Health* 53(4). 1025–1035.
doi:10.1007/s10943-013-9700-7.

This study sought to investigate the validity and reliability of the Persian version of the spiritual coping strategies (SCS) scale among Iranian hemodialysis patients. A convenience sample of 204 hemodialysis patients was recruited to participate in the study. A forward-backward translation method was used to produce the Persian version of the scale. Internal consistency was assessed by Cronbach's alpha and item-total score correlation. Two-week test-retest reliability was also assessed. The convergent and divergent validity of the scale was evaluated using the Duke University Religion Index and a visual analogue scale for health status. Exploratory and confirmatory factor analyses were used to assess the factor structure. Participants consisted of 113 males and 91 females (mean age 57.2). Cronbach's alpha was acceptable (0.87). Researchers found two underlying factors similar to the original scale. The correlations between the study scales confirmed the convergent and divergent validity of the SCS. Confirmatory factor analysis showed a good fit to the data. The Persian version of the SCS has sound psychometric properties in Iranian hemodialysis patients.

Shenefelt, Philip D. & Debrah A. Shenefelt. 2014. Spiritual and religious aspects of skin and skin disorders. *Psychology Research and Behavior Management* 7. 201–212.

doi:10.2147/PRBM.S65578.

Skin and skin disorders have had spiritual aspects since ancient times. Skin, hair, and nails are visible to self and others, and touchable by self and others. The skin is a major sensory organ. Skin also expresses emotions detectable by others through pallor, coldness, “goose bumps”, redness, warmth, or sweating. Spiritual and religious significances of skin are revealed through how much of the skin has been and continues to be covered with what types of coverings, scalp and beard hair cutting, shaving and styling, skin, nail, and hair coloring and decorating, tattooing, and intentional scarring of skin. Persons with visible skin disorders have often been stigmatized or even treated as outcasts. Shamans and other spiritual and religious healers have brought about healing of skin disorders through spiritual means. Spiritual and religious interactions with various skin disorders such as psoriasis, leprosy, and vitiligo are discussed. Religious aspects of skin and skin diseases are evaluated for several major religions, with a special focus on Judaism, both conventional and Kabbalistic.

Shinall, Myrick C., Jesse M. Ehrenfeld & Oscar D. Guillaumondegui. 2014. Religiously affiliated intensive care unit patients receive more aggressive end-of-life care. *Journal of Surgical Research* 190(2). 623–627.

doi:10.1016/j.jss.2014.05.074.

Previous studies among cancer patients have demonstrated that religious patients receive more aggressive end-of-life (EOL) care. Researchers sought to examine the effect of religious affiliation on EOL care in the intensive care unit (ICU) setting. Researchers conducted a retrospective review of all patients admitted to any adult ICU at a tertiary academic center in 2010 requiring at least 2 days of mechanical ventilation. EOL patients were those who died within 30 days of admission. Hospital charges, ventilator days, hospital days, and days until death were used as proxies for intensity of care among the EOL patients. A total of 2013 patients met inclusion criteria; of which, 1355 (67%) affirmed a religious affiliation. The EOL group had 334 patients, with 235 (70%) affirming a religious affiliation. The affiliated and nonaffiliated patients had similar levels of acuity. Controlling for demographic and medical confounders, religiously affiliated patients in the EOL group incurred 23% more hospital charges, 25% more ventilator days, 23% more hospital days, and 30% longer time until death than their nonaffiliated counterparts. Among all included patients, survival did not differ significantly among affiliated and nonaffiliated patients, neither was religious affiliation associated with a difference in survival on multivariate analysis.

Silvia, Paul J., Emily C. Nusbaum & Roger E. Beaty. 2014. Blessed are the meek? Honesty–humility, agreeableness, and the HEXACO structure of religious beliefs, motives, and values. *Personality and Individual Differences* 66. 19–23.

doi:10.1016/j.paid.2014.02.043.

Reviews of personality and religion have suggested that high agreeableness and high conscientiousness are associated with higher religiosity. Using the HEXACO model as a framework, the present work examined the recent suggestion that religion is rooted in honesty–humility rather than agreeableness. A sample of 137 young adults from a relatively conservative and predominantly Christian region of the United States completed the 100-item HEXACO-PI-R and a wide range of measures related to religion (general religiosity, intrinsic and extrinsic religious orientations, Biblical fundamentalism, rejection of Christian institutions and practices) and to broader values and ideologies that shed light on the character of religiosity (political liberalism and conservatism, right-wing authoritarianism, humanitarian–egalitarian values, and Protestant Work Ethic values). The findings offered strong support for the HEXACO approach: honesty–humility significantly predicted nearly all of the religion outcomes, but the effects of agreeableness were significantly smaller and essentially zero. Honesty–humility and agreeableness were not significantly related to the broader values and ideologies. Facet-level analyses suggested that the H-Fairness facet uniquely predicted higher religiosity, whereas the A-Patience facet tended to predict lower

religiosity. Taken together, the findings strongly support the HEXACO analysis of religiosity and the broader value of distinguishing between honesty–humility and agreeableness as interpersonal traits.

- Sullivan, Steve, Jeffrey M. Pyne, Ann M. Cheney, Justin Hunt, Tiffany F. Haynes & Greer Sullivan. 2014. The pew versus the couch: Relationship between mental health and faith communities and lessons learned from a VA/clergy partnership project. *Journal of Religion and Health* 53(4). 1267–1282.
doi:10.1007/s10943-013-9731-0.

The history of the relationship between religion and mental health is one of commonality, conflict, controversy, and distrust. An awareness of this complex relationship is essential to clinicians and clergy seeking to holistically meet the needs of people in our clinics, our churches, and our communities. Understanding this relationship may be particularly important in rural communities. This paper briefly discusses the history of this relationship and important areas of disagreement and contention. The paper moves beyond theory to present some current practical tensions identified in a brief case study of VA/ Clergy partnerships in rural Arkansas. The paper concludes with a framework of three models for understanding how most faith communities perceive mental health and suggests opportunities to overcome the tensions between “the pew” and “the couch.”

- 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* 6(3). 245–256.

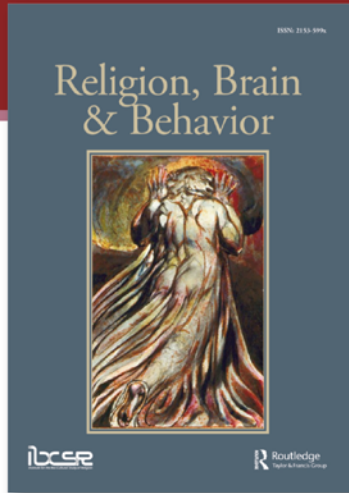
This study presents psychometric results for the initial validation of the Sanctification of Social Justice Scale (SSJS). Researchers conceptualized the sanctification of social justice as how strongly individuals connect working for social justice to an expression of God’s will and what it means to be Christian. Across 4 studies including over 1,200 Christian college students, an exploratory factor analysis, confirmatory factor analysis, internal consistency, and convergent validity results all provide psychometric support for the 1-factor 5-item SSJS. This study extends sanctification theory to the previously unexamined domain of working for social justice and provides preliminary validation of a scale for use in research, intervention, and collaboration with Christian individuals and organizations.

- Vidyardhi, Jay & Bernhard E. Riecke. 2014. Interactively mediating experiences of mindfulness meditation. *International Journal of Human-Computer Studies* 72(8-9). (Designing for Emotional Wellbeing). 674–688.
doi:10.1016/j.ijhcs.2014.01.006.

Sonic Cradle is a human–computer interaction paradigm designed to foster meditative attentional patterns. A user’s body is suspended comfortably in a completely dark sound chamber while the interaction paradigm subtly encourages them to focus on their breathing to summon and progressively shape an abstract immersive sound experience. Basic interpretive qualitative methods with a purposive sample of 39 participants were used to systematically analyze interview data after a 15-min experience of the system. Results suggest that this persuasive medium can pleasantly encourage an experience comparable to mindfulness by consistently inducing a calm mental clarity and loss of intention. Surprisingly, participants also reported perceptual illusions, feelings of floating, and emotional responses. Mounting evidence implies mindfulness meditation as an effective practice for self-regulation; this study represents a first step toward realizing technology’s potential to increase wellbeing by introducing people to this psychologically beneficial contemplative practice.

- Webb, Jon R., Loren Toussaint & Chris S. Dula. 2014. Ritualistic, theistic, and existential spirituality: Initial psychometric qualities of the RiTE measure of spirituality. *Journal of Religion and Health* 53(4). 972–985.
doi:10.1007/s10943-013-9697-y.

An expanded model to conceptualize sacred human experiences is discussed wherein the term Spirituality is broadened to include: (1) Ritualistic Spirituality, (2) Theistic Spirituality, and (3) Existential Spirituality. However, a measure incorporating this expanded model does not yet exist. A 67-item self-report questionnaire was developed and data were collected from 1,301 undergraduate students. A series of factor analytic procedures yielded a three-factor structure consistent with the guiding theoretical model and refinement produced three 10-item subscales. Evidence for construct validity and sound psychometric properties was indicative of a reliable, valid, and unique tool to assess the multidimensional nature of spirituality.



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PART 3: BOOKS

3.1 SCIENTIFIC STUDY OF RELIGION, BRAIN, AND BEHAVIOR

- Beit-Hallahmi, Benjamin. 2014. *Psychological perspectives on religion and religiosity*. New York: Routledge.
- Czachesz, István & Risto Uro (eds.). 2014. *Mind, morality and magic: cognitive science approaches in biblical studies*. (BibleWorld). New York: Routledge.
- Davies, Jim. 2014. *Riveted: The science of why jokes make us laugh, movies make us cry, and religion makes us feel one with the universe*. New York: Palgrave Macmillan.
- Geertz, Armin W. & Jeppe Sinding Jensen (eds.). 2011. *Religious narrative, cognition, and culture: Image and word in the mind of narrative*. (Religion, Cognition, and Culture). New York: Routledge.
- Hubert, Sandra. 2014. *The impact of religiosity on fertility: A comparative analysis of France, Hungary, Norway, and Germany*. Springer VS.
- Kim-Prieto, Chu (ed.). 2014. *Religion and spirituality across cultures*. (Cross-Cultural Advancements in Positive Psychology). New York: Springer.
- Martin, Craig & Russell T. McCutcheon (eds.). 2012. *Religious experience: A reader*. (Critical Categories in the Study of Religion). New York: Routledge.
- McCorkle, William W. & Demetres Xygalatas (eds.). 2013. *Mental culture: Classical social theory and the cognitive science of religion*. (Religion, Cognition and Culture). New York: Routledge.
- Sutcliffe, Steven & Ingvild Sælid Gilhus (eds.). 2014. *New age spirituality: Rethinking religion*. New York: Routledge.

3.2 SPIRITUALITY & HEALTH RESEARCH

- Martins, Carla. 2014. *Mindfulness-based interventions for older adults: evidence for practice*. Jessica Kingsley Publishing.
- Sears, Richard W. & Alison Niblick (eds.). 2014. *Perspectives on spirituality and religion in psychotherapy*. Sarasota, FL: Professional Resource Press.

PART 4: ARTICLES IN PRESS

4.1 SCIENTIFIC STUDY OF RELIGION, BRAIN, AND BEHAVIOR

- Butz, David A. & Jayson D. Carvalho. 2014. Examining the Psychological Separation of Church and State: The American–Christian Effect. *Psychology of Religion and Spirituality*.
- Chan, Melissa, Kim M. Tsai & Andrew J. Fuligni. 2014. Changes in Religiosity Across the Transition to Young Adulthood. *Journal of Youth and Adolescence*.
doi:10.1007/s10964-014-0157-0.
- Cragun, Ryan T. & J. Edward Sumerau. 2014. The Last Bastion of Sexual and Gender Prejudice? Sexualities, Race, Gender, Religiosity, and Spirituality in the Examination of Prejudice Toward Sexual and Gender Minorities. *Journal of Sex Research*. 1–14.
doi:10.1080/00224499.2014.925534.
- Cui, Jinhua, Hoje Jo & Manuel G. Velasquez. 2014. The influence of christian religiosity on managerial decisions concerning the environment. *Journal of Business Ethics*.
- Du, Xingqiang, Wei Jian, Shaojuan Lai, Yingjie Du & Hongmei Pei. 2014. Does religion mitigate earnings management? Evidence from china. *Journal of Business Ethics*.
- Eriksson, Cynthia B., Jason M. Holland, Joseph M. Currier, Leslie M. Snider, Alastair K. Ager, Reinhard E. R. Kaiser & Winnifred S. Simon. 2014. Trajectories of Spiritual Change Among Expatriate Humanitarian Aid Workers: A Prospective Longitudinal Study. *Psychology of Religion and Spirituality*.
- Ferguson, Todd W., Brita Andercheck, Joshua C. Tom, Brandon C. Martinez & Samuel Stroope. Occupational Conditions, Self-Care, and Obesity among Clergy in the United States. *Social Science Research*.
doi:10.1016/j.ssresearch.2014.08.014.
- Hardy, Sam A., Zhiyong Zhang, Jonathan E. Skalski, Brent S. Melling & Chauncy T. Brinton. 2014. Daily Religious Involvement, Spirituality, and Moral Emotions. *Psychology of Religion and Spirituality*.
- Jing, Xiaojuan. 2014. Religiosity of Nonbelievers in China. *Psychological Reports*.
doi:10.2466/17.PR0.115c20z1.
- Johnson, Kathryn A., Morris A. Okun & Adam B. Cohen. 2014. The Mind of the Lord: Measuring Authoritarian and Benevolent God Representations. *Psychology of Religion and Spirituality*.
- Kanagaretnam, Kiridaran, Gerald J. Lobo & Chong Wang. 2014. Religiosity and earnings management: International evidence from the banking industry. *Journal of Business Ethics*.
- Kirby, Brenda J. & Christina Michaelson. 2014. Comparative Morality Judgments About Lesbians and Gay Men Teaching and Adopting Children. *Journal of Homosexuality*.
doi:10.1080/00918369.2014.957120.
- Lechner, Clemens M., Rainer K. Silbereisen, Martin J. Tomasik & Jacek Wasilewski. 2014. Getting going and letting go: Religiosity fosters opportunity-congruent coping with work-related uncertainties. *International Journal of Psychology*.
doi:10.1002/ijop.12093.

- Palasinski, Marek & Kyoung O. K. Seol. 2014. Examination of Religious Identity Metastereotypes When Defying Its Relevant Source Through Out-Group Helping. *Psychology of Religion and Spirituality*.
- Pavlov, S. V., V. V. Korenyok, N. V. Reva, A. V. Tumyalis, K. V. Loktev & L. I. Aftanas. 2014. Effects of long-term meditation practice on attentional biases towards emotional faces: An eye-tracking study. *Cognition & Emotion*. 1–9.
doi:10.1080/02699931.2014.945903.
- Shonin, Edo & William Gordon. 2014. Managers' experiences of meditation awareness training. *Mindfulness*.

4.2 SPIRITUALITY & HEALTH RESEARCH

- Agli, Océane, Nathalie Bailly & Claude Ferrand. 2014. Spirituality and religion in older adults with dementia: a systematic review. *International psychogeriatrics / IPA*. 1–11.
doi:10.1017/S1041610214001665.
- Alzyoud, Sukaina, Khalid A. Kheirallah, Kenneth D. Ward, Noha M. Al-Shdayfat & Abd Albaset Alzyoud. 2014. Association of Religious Commitment and Tobacco Use Among Muslim Adolescents. *Journal of Religion and Health*.
doi:10.1007/s10943-014-9921-4.
- Baruth, Meghan, Melissa Bopp, Benjamin L. Webb & Jane A. Peterson. 2014. The Role and Influence of Faith Leaders on Health-Related Issues and Programs in their Congregation. *Journal of Religion and Health*.
doi:10.1007/s10943-014-9924-1.
- Bickerton, Grant R., Maureen H. Miner, Martin Dowson & Barbara Griffin. 2014. Incremental Validity of Spiritual Resources in the Job Demands-Resources Model. *Psychology of Religion and Spirituality*.
- Carey, Lindsay B., Mark A. Willis, Lillian Krikheli & Annette O'Brien. 2014. Religion, Health and Confidentiality: An Exploratory Review of the Role of Chaplains. *Journal of Religion and Health*.
doi:10.1007/s10943-014-9931-2.
- Chevalier, Lydia, Elizabeth Goldfarb, Jessica Miller, Bettina Hoepfner, Tristan Gorrindo & Robert J. Birnbaum. 2014. Gaps in Preparedness of Clergy and Healthcare Providers to Address Mental Health Needs of Returning Service Members. *Journal of Religion and Health*.
doi:10.1007/s10943-014-9917-0.
- Combs, Martha A. & Beverly E. Thorn. Barriers and facilitators to yoga use in a population of individuals with self-reported chronic low back pain: A qualitative approach. *Complementary Therapies in Clinical Practice*.
doi:10.1016/j.ctcp.2014.07.006.
- Crane, Catherine, Rebecca S. Crane, Catrin Eames, Melanie J. V. Fennell, Sarah Silverton, J. Mark G. Williams & Thorsten Barnhofer. The effects of amount of home meditation practice in Mindfulness Based Cognitive Therapy on hazard of relapse to depression in the Staying Well after Depression Trial. *Behaviour Research and Therapy*.
doi:10.1016/j.brat.2014.08.015.
- Das, Aniruddha & Stephanie Nairn. 2014. Religious Attendance and Physiological Problems in Late Life. *The Journals of Gerontology. Series B, Psychological Sciences and Social Sciences*.

doi:10.1093/geronb/gbu089.

Ferraro, Kenneth F. & Seoyoun Kim. Health benefits of religion among black and white older adults? Race, religiosity, and C-Reactive protein. *Social Science & Medicine*.
doi:10.1016/j.socscimed.2014.08.030.

Fung, Kenneth. 2014. Acceptance and Commitment Therapy: Western adoption of Buddhist tenets? *Transcultural Psychiatry*.
doi:10.1177/1363461514537544.

Gattis, Maurice N., Michael R. Woodford & Yoonsun Han. 2014. Discrimination and Depressive Symptoms Among Sexual Minority Youth: Is Gay-Affirming Religious Affiliation a Protective Factor? *Archives of Sexual Behavior*.
doi:10.1007/s10508-014-0342-y.

Goodman, Fallon R., Todd B. Kashdan, Travis T. Mallard & Mary Schumann. 2014. A Brief Mindfulness and Yoga Intervention With an Entire NCAA Division I Athletic Team: An Initial Investigation. *Psychology of Consciousness: Theory, Research, and Practice*.

Hamren, Kidist, Holendro Singh Chungkham & Martin Hyde. 2014. Religion, spirituality, social support and quality of life: measurement and predictors CASP-12(v2) amongst older Ethiopians living in Addis Ababa. *Aging & Mental Health*. 1–12.
doi:10.1080/13607863.2014.952709.

Hindman, Robert K., Carol R. Glass, Diane B. Arnkoff & David D. Maron. 2014. A comparison of formal and informal mindfulness programs for stress reduction in university students. *Mindfulness*.

Hirsch, Jameson K., Sheri A. Nsamenang, Edward C. Chang & Nadine J. Kaslow. 2014. Spiritual Well-Being and Depressive Symptoms in Female African American Suicide Attempters: Mediating Effects of Optimism and Pessimism. *Psychology of Religion and Spirituality*.

Homan, Kristin J. & Valerie A. Lemmon. 2014. Attachment to God and Eating Disorder Tendencies: The Mediating Role of Social Comparison. *Psychology of Religion and Spirituality*.

Inman, Mary L. 2014. The Effects of Religious-Body Affirmations and Religious Commitment on Men's Body Esteem. *Psychology of Religion and Spirituality*.

Johns, Shelley A., Linda F. Brown, Kathleen Beck-Coon, Patrick O. Monahan, Yan Tong & Kurt Kroenke. 2014. Randomized controlled pilot study of mindfulness-based stress reduction for persistently fatigued cancer survivors. *Psycho-Oncology*.
doi:10.1002/pon.3648.

Kattimani, Shivanand, Siddharth Sarkar, Balaji Bharadwaj & Ravi Philip Rajkumar. 2014. An Exploration of the Relationship Between Spirituality and State and Trait Anger Among Medical Students. *Journal of Religion and Health*.
doi:10.1007/s10943-014-9933-0.

Khanna, Surbhi & Bruce Greyson. 2014. Daily Spiritual Experiences Before and After Near-Death Experiences. *Psychology of Religion and Spirituality*.

Labelle, Laura E., Tavis S. Campbell, Peter Faris & Linda E. Carlson. 2014. Mediators of Mindfulness-Based Stress Reduction (MBSR): Assessing the Timing and Sequence of Change in Cancer Patients. *Journal of Clinical Psychology*.
doi:10.1002/jclp.22117.

- Larkey, Linda K., Denise J. Roe, Karen L. Weihs, Roger Jahnke, Ana Maria Lopez, Carol E. Rogers, Byeongsang Oh & Jose Guillen-Rodriguez. 2014. Randomized Controlled Trial of Qigong/Tai Chi Easy on Cancer-Related Fatigue in Breast Cancer Survivors. *Annals of Behavioral Medicine: A Publication of the Society of Behavioral Medicine*.
doi:10.1007/s12160-014-9645-4.
- Larouche, M., G. Côté, D. Bélisle & D. Lorrain. 2014. Kind attention and non-judgment in mindfulness-based cognitive therapy applied to the treatment of insomnia: State of knowledge. *Pathologie-Biologie*.
doi:10.1016/j.patbio.2014.07.002.
- Latzer, Yael, Sarah L. Weinberger-Litman, Barbara Gerson, Anna Rosch, Rebecca Mischel, Talia Hinden, Jeffrey Kilstein & Judith Silver. 2014. Negative Religious Coping Predicts Disordered Eating Pathology Among Orthodox Jewish Adolescent Girls. *Journal of Religion and Health*.
doi:10.1007/s10943-014-9927-y.
- Luquis, Raffy R., Gina M. Brelsford & Miguel A. Pérez. 2014. Exploring Latino College Students' Sexual Behaviors in Relation to Their Sexual Attitudes, Religiousness, and Spirituality. *Journal of Religion and Health*.
doi:10.1007/s10943-014-9929-9.
- McGeorge, Christi R., Thomas Stone Carlson & Russell B. Toomey. 2014. The intersection of spirituality, religion, sexual orientation, and gender identity in family therapy training: An exploration of students' beliefs and practices. *Contemporary Family Therapy: An International Journal*.
- Moore, Erin W. 2014. Assessing God Locus of Control as a Factor in College Students' Alcohol Use and Sexual Behavior. *Journal of American college health: J of ACH*. 0.
doi:10.1080/07448481.2014.947994.
- Pérez, John E. & Amy Rex Smith. 2014. Intrinsic religiousness and well-being among cancer patients: the mediating role of control-related religious coping and self-efficacy for coping with cancer. *Journal of Behavioral Medicine*.
doi:10.1007/s10865-014-9593-2.
- Pop, Cristina A. 2014. Cervical cancer narratives: invoking "God's will" to re-appropriate reproductive rights in present-day Romania. *Culture, Health & Sexuality*. 1–15.
doi:10.1080/13691058.2014.948491.
- Raghuram, Nagarathna, Venkateshwara Rao Parachuri, M. V. Swarnagowri, Suresh Babu, Ritu Chaku, Ravi Kulkarni, Bhagavan Bhuyan, Hemant Bhargav & Hongasandra Ramarao Nagendra. Yoga based cardiac rehabilitation after coronary artery bypass surgery: One-year results on LVEF, lipid profile, psychological states – A randomized controlled study. *Indian Heart Journal*.
doi:10.1016/j.ihj.2014.08.007.
- Abu-Raiya, Hisham & Kenneth I. Pargament. 2014. Religious Coping Among Diverse Religions: Commonalities and Divergences. *Psychology of Religion and Spirituality*.
- Schneider, Kirk J. 2014. The case for existential (spiritual) psychotherapy. *Journal of Contemporary Psychotherapy*.
- Shepperd, James A., Wendi A. Miller, Colin Tucker Smith & James Algina. 2014. Does Religion Offer Worldviews That Dissuade Adolescent Substance Use? *Psychology of Religion and Spirituality*.

- Shonin, Edo, William Gordon, Thomas J. Dunn, Nirbhay N. Singh & Mark D. Griffiths. 2014. Meditation awareness training (mat) for work-related wellbeing and job performance: A randomised controlled trial. *International Journal of Mental Health and Addiction*.
- Siddall, Philip J., Melanie Lovell & Rod MacLeod. 2014. Spirituality: What is Its Role in Pain Medicine? *Pain Medicine* (Malden, Mass.).
doi:10.1111/pme.12511.
- Skomakerstuen Ødbehr, Liv, Kari Kvigne, Solveig Hauge & Lars Johan Danbolt. 2014. A qualitative study of nurses' attitudes towards' and accommodations of patients' expressions of religiosity and faith in dementia care. *Journal of Advanced Nursing*.
doi:10.1111/jan.12500.
- Smyre, Chris L., John Yoon, Kenneth Rasinski & Farr Curlin. 2014. Limits and Responsibilities of Physicians Addressing Spiritual Suffering in Terminally Ill Patients. *Journal of Pain and Symptom Management*.
doi:10.1016/j.jpainsymman.2014.06.016.
- Snipes, Daniel J., Amy J. Jeffers, Eric G. Benotsch, Jessica McCauley, Dana Bannerman, Catherine Granger & Aaron M. Martin. 2014. Religiosity in the non-medical use of prescription medication in college students. *The American Journal of Drug and Alcohol Abuse*. 1–7.
doi:10.3109/00952990.2014.939755.
- Szczesniak, Rhonda D., Yuanshu Zou, J. Denise Wetzal, Neal Krause & Daniel H. Grosseohme. 2014. Increased Congregational Support for Parents of Children with Cystic Fibrosis. *Journal of Religion and Health*.
doi:10.1007/s10943-014-9928-x.
- Vassiliou, Andreas. 2014. Obsessive-Compulsive Symptomatology, Religiosity Levels and the Illusion-of-Control Paradigm in a Non-Clinical Undergraduate Sample. *Journal of Religion and Health*.
doi:10.1007/s10943-014-9922-3.
- Vincensi, Barbara Baele & Lisa Burkhart. 2014. Development and Psychometric Testing of New Instruments to Assess Nurse Practitioners' Provision of Spiritual Care. *Journal of Holistic Nursing: Official Journal of the American Holistic Nurses' Association*.
doi:10.1177/0898010114544302.
- Vitillo, Robert J. 2014. Discerning the Meaning of Human Suffering Through the Discourse of Judeo-Christian Scriptures and Other Faith Teachings. *Journal of Pain and Symptom Management*.
doi:10.1016/j.jpainsymman.2014.06.018.
- Wang, Zhizhong, Y. Rong & Harold G. Koenig. 2014. Psychometric Properties Of A Chinese Version Of The Duke University Religion Index In College Students And Community Residents In China. *Psychological Reports*.
doi:10.2466/08.17.PR0.115c19z8.
- Williams, Anna-Leila, Jane Dixon, Richard Feinn & Ruth McCorkle. 2014. Cancer family caregiver depression: are religion-related variables important? *Psycho-Oncology*.
doi:10.1002/pon.3647.
- Woods-Jaeger, Briana A., Mamie Carlson, Tamara Taggart, Linda Riggins, Alexandra F. Lightfoot & Melvin R. Jackson. 2014. Engaging African American Faith-Based Organizations in Adolescent HIV Prevention. *Journal of Religion and Health*.

doi:10.1007/s10943-014-9932-1.

Ziebarth, Deborah. 2014. Evolutionary Conceptual Analysis: Faith Community Nursing. *Journal of Religion and Health*.

doi:10.1007/s10943-014-9918-z.