



RESEARCH REVIEW

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

MARCH, 2015

INTRODUCTION

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

Articles for this issue were located by searching the following databases: H. W. Wilson Applied Science and Technology, ATLA Religion Database, H. W. Wilson General Science, PubMed, EBSCO Psychology and Behavioral Sciences Collection, PsycARTICLES, PsycINFO, ScienceDirect, and Web of Science. The search terms were altruism, god, goddess, meditat*, prayer, relig*, ritual, spiritu*, and yoga, tailored to the database being searched. Books were located on Amazon.com. Articles not directly relevant to the scientific study of religion were excluded, as were correspondence and reviews. From a universe of 760 articles, 96 articles have been retained from 70 journals. There are 51 pre-publication citations from 32 journals.

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PART 1: ARTICLES IN RELIGION, BRAIN, AND BEHAVIOR

1.1 SCIENTIFIC STUDY OF RELIGION: COGNITIVE NEUROSCIENCE

Good, Marie, Michael Inzlicht & Michael J. Larson. 2015. God will forgive: Reflecting on God's love decreases neurophysiological responses to errors. *Social Cognitive and Affective Neuroscience* 10(3). 357–363. doi:10.1093/scan/nsu096.

In religions where God is portrayed as both loving and wrathful, religious beliefs may be a source of fear as well as comfort. Here, researchers consider whether God's love may be more effective, relative to God's wrath, for soothing distress, but less effective for helping control behavior. Specifically, they assess whether contemplating God's love reduces the ability to detect and emotionally react to conflict between one's behavior and overarching religious standards. The study is carried out within a neurophysiological framework, by observing the effects of exposure to concepts of God's love vs. punishment on the error-related negativity (ERN), a neural signal originating in the anterior cingulate cortex that is associated with performance monitoring and affective responses to errors. Participants included 123 students at Brigham Young University, who completed a Go/No-Go task where they made "religious" errors (i.e. ostensibly exhibited pro-alcohol tendencies). Reflecting on God's love caused dampened ERNs and worse performance on the Go/No-Go task. Thinking about God's punishment did not affect performance or ERNs. Results suggest that one possible reason religiosity is generally linked to positive well-being may be because of a decreased affective response to errors that occurs when God's love is prominent in the minds of believers.

Hauswald, Anne, Teresa Übelacker, Sabine Leske & Nathan Weisz. 2015. What it means to be Zen: Marked modulations of local and interareal synchronization during open monitoring meditation. *NeuroImage* 108. 265–273. doi:10.1016/j.neuroimage.2014.12.065.

Experienced meditators are able to voluntarily modulate their state of consciousness and attention. In the present study, researchers took advantage of this ability and studied brain activity related to the shift of mental state.

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Electrophysiological activity, i.e. EEG, was recorded from 11 subjects with varying degrees of meditation experience during Zen meditation (a form of open monitoring meditation) and during non-meditation rest. On a behavioral level, mindfulness scores were assessed using the Mindfulness Attention and Awareness Scale (MAAS). Analysis of EEG source power revealed the so far unreported finding that MAAS scores significantly correlated with gamma power (30-250Hz), particularly high-frequency gamma (100-245Hz), during meditation. High levels of mindfulness were related to increased high-frequency gamma, for example, in the cingulate cortex and somatosensory cortices. Further, the authors analyzed the relationship between connectivity during meditation and self-reported mindfulness (MAAS). A correlation was found between graph measures in the 160-170Hz range and MAAS scores. Higher levels of mindfulness were related to lower small worldedness as well as global and local clustering in paracentral, insular, and thalamic regions during meditation. In sum, the present study shows significant relationships of mindfulness and brain activity during meditation indicated by measures of oscillatory power and graph theoretical measures. The most prominent effects occur in brain structures crucially involved in processes of awareness and attention, which also show structural changes in short- and long-term meditators, suggesting continuative alterations in the meditating brain. Overall, the study reveals strong changes in ongoing oscillatory activity as well as connectivity patterns that appear to be sensitive to the psychological state changes induced by Zen meditation.

Hernández, Sergio E., José Suero, Katya Rubia & José L. González-Mora. 2015. Monitoring the neural activity of the state of mental silence while practicing sahaja yoga meditation. *Journal of Alternative and Complementary Medicine* 21(3). 175–179. doi:10.1089/acm.2013.0450.

The objective of this study was to identify the neural correlates of the state of mental silence as experienced through Sahaja yoga meditation. Nineteen experienced meditators underwent functional magnetic resonance imaging during three short consecutive meditation periods, contrasted with a control relaxation condition. Relative to baseline, at the beginning of the meditation sessions there was a significant increase of activation in bilateral inferior frontal and temporal regions. Activation became progressively more reduced with deeper meditation stages and in the last meditation session it became localized to the right inferior frontal cortex/ right insula and right middle/ superior temporal cortex. Furthermore, right inferior frontal activation was directly associated with the subjective depth of the mental silence experience. The authors conclude that meditators appear to pass through an initial intense neural self-control process necessary to silence their mind. After this they experience relatively reduced brain activation concomitant with the deepening of the state of mental silence over right inferior frontal cortex, probably reflecting an effortless process of attentional contemplation associated with this state.

Luders, Eileen, Paul M. Thompson & Florian Kurth. 2015. Larger hippocampal dimensions in meditation practitioners: differential effects in women and men. *Frontiers in Psychology* 6. 186. doi:10.3389/fpsyg.2015.00186.

On average, the human hippocampus shows structural differences between meditators and non-meditators as well as between men and women. However, there is a lack of research exploring possible sex effects on hippocampal anatomy in the framework of meditation. Thus, researchers obtained high-resolution magnetic resonance imaging data from 30 long-term meditation practitioners (15 men/15 women) and 30 well-matched control subjects (15 men/15 women) to assess if hippocampus-specific effects manifest differently in male and female brains. Hippocampal dimensions were enlarged both in male and in female meditators when compared to sex- and age-matched controls. However, meditation effects differed between men and women in magnitude, laterality, and location on the hippocampal surface. Such sex-divergent findings may be due to genetic (innate) or acquired differences between male and female brains in the areas involved in meditation and/ or suggest that male and female hippocampi are differently receptive to mindfulness practices.

Menezes, Carolina B., Natalia R. Dalpiaz, Luiz Gustavo Kiesow, William Sperb, Juliana Hertzberg & Alcyr A. Oliveira. 2015. Yoga and emotion regulation: A review of primary psychological

outcomes and their physiological correlates. *Psychology & Neuroscience* 8(1). 82–101. doi:10.1037/h0100353.

Discovering and promoting ways that help regulate emotions has been a recurrent concern in the field of psychology, given that how one feels and reacts to and expresses emotions can have both short- and long-term effects on physical and mental health. Many psychological strategies that can influence this process, such as reappraisal, attention allocation, and suppression, have been previously investigated. The aim of the present work was to review the emotion regulation potential of yoga practice, given that it combines techniques that foster positive psychological outcomes. The results suggest that yoga produces improvements in emotional functioning in healthy subjects and people who suffer from some physical illnesses, particularly in psychological self-reported variables. Evidence regarding behavioral and neurophysiological correlates remains less well-established. Mechanisms that possibly mediate the relationship between yoga and emotion regulation are discussed and methodologies are considered, with suggestions for future studies. In summary, emerging evidence suggests that yoga may help foster healthier psychological responses, indicating its potential as an emotion regulation strategy.

Steinhubl, Steven R., Nathan E. Wineinger, Sheila Patel, Debra L. Boeldt, Geoffrey Mackellar, Valencia Porter, Jacob T. Redmond, et al. 2015. Cardiovascular and nervous system changes during meditation. *Frontiers in Human Neuroscience* 9. 145. doi:10.3389/fnhum.2015.00145.

A number of benefits have been described for the long-term practice of meditation, yet little is known regarding the immediate neurological and cardiovascular responses to meditation. Wireless sensor technology allows, for the first time, multi-parameter and quantitative monitoring of an individual's responses during meditation. The present study examined inter-individual variations to meditation through continuous monitoring of EEG, blood pressure, heart rate and its variability (HRV) in novice and experienced meditators. Participants were 20 experienced and 20 novice meditators involved in a week-long wellness retreat. Monitoring took place during meditation sessions on the first and last full days of the retreat. All participants wore a patch that continuously streamed ECG data, while half of them also wore a wireless EEG headset plus a non-invasive continuous blood pressure monitor. Meditation produced variable but characteristic EEG changes, significantly different from baseline, even among novice meditators on the first day. In addition, although participants were predominately normotensive, the mean arterial blood pressure fell a small (2-3 mmHg) but significant amount during meditation. The effect of meditation on HRV was less clear and influenced by calculation technique and respiration. No clear relationship between EEG changes, HRV alterations, or mean blood pressure during meditation was found.

1.2 SCIENTIFIC STUDY OF RELIGION: EVOLUTION

Cohen, Adam B., Morris A. Okun, Kathryn A. Johnson, Rabia Memon & Armeen Alladin. 2015. Who Helps the Samaritan? The Influence of Religious vs. Secular Primes on Spontaneous Helping of Members of Religious Outgroups. *Journal of Cognition and Culture* 15(1-2). 217–231. doi:10.1163/15685373-12342147.

There is a debate as to whether religion increases prosociality. Darley and Batson's (1973) classic Good Samaritan study provided evidence against religious prosociality because priming religion among Christian seminary students did not increase the likelihood of helping an ailing confederate. Conceptually replicating this study, researchers primed undergraduate Christians with benevolent verses attributed to the Bible, benevolent verses attributed to U.S. statesmen, or benevolent-irrelevant quotations. Participants were given the opportunity to pick up envelopes dropped by a confederate, who was or was not wearing a hijab. In the non-hijab condition, the rate of helping did not vary across conditions. However, in the hijab wearing condition, the odds of helping were significantly lower in the control group. These results suggest that reminders of benevolence may

play a role in mitigating some instances of discrimination, but that religion may be just one source of influence that can foster prosociality toward outgroups.

- Corriveau, Kathleen H., Eva E. Chen & Paul L. Harris. 2015. Judgments about fact and fiction by children from religious and nonreligious backgrounds. *Cognitive Science* 39(2). 353–382.
doi:10.1111/cogs.12138.

In two studies, 5- and 6-year-old children were questioned about the status of the protagonist embedded in three different types of stories. In realistic stories that only included ordinary events, all children, irrespective of family background and schooling, claimed that the protagonist was a real person. In religious stories that included ordinarily impossible events brought about by divine intervention, claims about the status of the protagonist varied sharply with exposure to religion. Children who went to church or were enrolled in a parochial school, or both, judged the protagonist in religious stories to be a real person, whereas secular children with no such exposure to religion judged the protagonist in religious stories to be fictional. Children's upbringing was also related to their judgment about the protagonist in fantastical stories that included ordinarily impossible events whether brought about by magic (Study 1) or without reference to magic (Study 2). Secular children were more likely than religious children to judge the protagonist in such fantastical stories to be fictional. The results suggest that exposure to religious ideas has a powerful impact on children's differentiation between reality and fiction, not just for religious stories but also for fantastical stories.

- Hone, Liana S. E. & Michael E. McCullough. 2015. Does religious cognition really down-regulate hand grip endurance in men? A failure to replicate. *Evolution and Human Behavior* 36(2). 81–85.
doi:10.1016/j.evolhumbehav.2014.08.007.

Researchers sought to perform an exact replication of a previously published experiment that indicated that religious cognition (manipulated via an implicit religious prime) reduced hand-grip endurance in men but not in women. Participants were 168 female and 159 male undergraduate students, and were randomly assigned to either a task in which they completed scrambled sentences interspersed with words that had religious meanings or a comparable task with words that had no consistent meaning. Researchers did not find an interaction between condition and sex: men who received the religious prime did not perform any worse on the hand-grip endurance task than did their peers who completed the control task. A sex difference was found in hand-grip endurance (favoring men), but this sex difference was not found in the original experiment. The authors explored potential explanations for this failure to replicate, including the possibility that different experimenters (who were ignorant of participants' condition assignments) produced different results by affecting participants' motivation in different ways. These latter analyses revealed that some experimenters produced larger sex differences than others did.

- McNamara, Patrick & Kelly Bulkeley. 2015. Dreams as a source of supernatural agent concepts. *Frontiers in Psychology* 6. 283.
doi:10.3389/fpsyg.2015.00283.

In this article, researchers present a theory of the creativity of dreams as well as psychopathology of religious delusions with respect to production of fundamental forms of religious cognition, specifically supernatural agent (SA) cognitions. The authors suggest that dream cognitions are particularly efficient at producing highly memorable and impactful experiences with SAs because dreams involve three processes that are prerequisites for the generation of god concepts: (1) mental simulations of alternative realities, (2) theory of mind attributions to the extra-natural dream characters and divine beings, and (3) attribution of ultimate value (exemplified by 'good spirit beings'), and dis-value (exemplified by demonic monsters) to the supernatural dream characters. Because prefrontal cortex is deactivated during rapid eye movements (REM) sleep, agentic impulses and internally generated ideas are not reliably attributed to Self or dreamer. Instead an exaggerated degree of agency is attributed to these supernatural dream characters who are then embedded in stories in dreams and in myths of waking life which explain their supernatural abilities. These dream-based SAs are salient characters that are processed in sleep-related memory systems according to rules of

Lleweelyn's ancient art of memory model and therefore more easily remembered and reflected upon during waking life. When REM sleep intrudes into waking consciousness, as is the case with some forms of schizophrenia, religious delusions are more likely to emerge.

Thomson, Nicholas D. 2015. Priming social affiliation promotes morality—Regardless of religion. *Personality and Individual Differences* 75. 195–200.
doi:10.1016/j.paid.2014.11.022.

While prior studies have shown how religious priming spurs prosocial behavior, there is little evidence that this is unique to religion. It could be that priming any social affiliation encourages prosocial behavior simply by representing, belonging, and being responsible to a group, as opposed to acting as an individual. The current study aims to test if priming social affiliation is associated with greater moral self-perception. Using a large sample (n=801), this study included an experimental manipulation to tease out if the previously-demonstrated priming effects that increase morality may be unique to religious affiliation or are general to any meaningful social affiliation. Results showed priming social affiliation had a unique influence on morality. This priming effect was not different for those with a religious affiliation when compared to people with a non-religious affiliation. Religious affiliates may see themselves as more moral, and priming their religious affiliation did indeed induce greater morality, but this was also true for other social affiliations. Therefore, religion is not fundamental to moral priming, and it is likely to be the perceived benefits of being in a group that enhances prosociality.

1.3 SCIENTIFIC STUDY OF RELIGION: PSYCHOLOGY AND CULTURE

Albertson, Bethany L. 2015. Dog-whistle politics: Multivocal communication and religious appeals. *Political Behavior* 37(1). 3–26.
doi:10.1007/s11109-013-9265-x.

This paper explores how multivocal appeals, meaning appeals that have distinct meanings to different audiences, work with respect to religious language. Religious language is common in politics, but there is great variation in its effectiveness. The author argues that multivocal appeals can resonate as religious with select audiences but have no religious content for other listeners. The effectiveness of multivocal and obvious religious appeals is tested experimentally with two national samples: an ingroup that understands the religious connotations in a multivocal appeal and a religiously diverse outgroup that does not. Religious appeals are persuasive for the ingroup, but an obvious religious appeal can be politically costly by triggering negative reactions among outgroup members, while the religious meaning in a multivocal appeal eludes them. Obvious religious appeals are costly in the diverse audience because of different preferences over the appropriate role for religion in political speech.

Bean, Lydia & Brandon C. Martinez. 2015. Sunday School teacher, culture warrior: The politics of lay leaders in three religious traditions. *Social Science Quarterly* 96(1). 133–147.
doi:10.1111/ssqu.12080.

Political theorists have praised civic organizations as spaces for open political deliberation. But their leadership structure privileges some voices over others. In congregations, clergy set the context for political discussion. In this article, the authors argue that volunteer religious leaders also shape political talk in local churches. Lay leaders serve as political opinion leaders within local churches, with the power to either deepen or bridge political polarization over religion and morality. Researchers therefore compare lay leaders across three religious traditions, using a unique measure from the 2005 Baylor Religion Survey. It is found that lay leaders in evangelical, mainline, and Catholic traditions are more politically active than other attenders, but evangelical lay leaders are also more morally conservative than others in their tradition. Comparing across traditions, the authors argue that evangelical lay leaders foster greater political cohesion within their tradition.

Blank, Joshua M. & Daron Shaw. 2015. Does partisanship shape attitudes toward science and public policy? The case for ideology and religion. *Annals of the American Academy of Political and Social Science* 658(1). 18–35.

doi:10.1177/0002716214554756.

Despite the apparent partisan divide over issues such as global warming and hydraulic fracturing, little is known about what shapes citizens' willingness to accept scientific recommendations on political issues. In this article, researchers examine the extent to which Democrats, Republicans, and independents are likely to defer to scientific expertise in matters of policy. The study draws on an October 2013 U.S. national survey of 2,000 respondents. It is found that partisan differences exist: data show that most Americans see science as relevant to policy, but that their willingness to defer to science in policy matters varies considerably across issues. While party, ideology, and religious beliefs clearly influence attitudes toward science, Republicans are not notably skeptical about accepting scientific recommendations. Rather, it seems that Democrats are particularly receptive to the advice and counsel of scientists, when compared to both independents and Republicans.

Calvillo, Jonathan E. & Stanley R. Bailey. 2015. Latino Religious Affiliation and Ethnic Identity. *Journal for the Scientific Study of Religion* 54(1). 57–78.

doi:10.1111/jssr.12164.

Despite the pervasiveness of Catholicism among Latinos, studies reveal an increasing shift toward Protestantism. Examining the relationship between religion and ethnicity, researchers explore homeland language use as a core ethnic marker using a survey from the Pew Hispanic Center. Results reveal that Catholic Latinos are significantly more likely to use Spanish at home, even after controlling for other key variables. In response, the researchers posit that Latino Catholicism and Protestantism entail significantly different religiosities in both home and host countries that impact Latino ethnic identification and its markers such as language use. Catholicism displays a higher level of inculturation in the sending country and greater overt institutional acceptance of ethnic culture in host countries. Protestantism in Latin America breaks with localized religiosity and traditions, and U.S. Protestant congregations may de-emphasize ethnic culture in their theologies and worship. Hence, Latino Catholicism acts as a bridge to homelands and reinforces ethnic salience, thereby supporting continued Spanish use at home. In contrast, Protestants embrace a reorienting religiosity that often presides over ethnic identification, decreasing the salience of homeland cultural markers.

Dollhopf, Erica J., Christopher P. Scheitle & John D. McCarthy. 2015. Initial Results from a Survey of Two Cohorts of Religious Nonprofits. *Journal for the Scientific Study of Religion* 54(1). 156–165.

doi:10.1111/jssr.12165.

Next to congregations, religious nonprofit organizations represent one of the most numerous categories of religious organizations in the United States. However, very few data exist that shed light on this sector. In this research note researchers introduce new data from a survey of two cohorts of religion-related public charities, also known as 501(c)(3)s or simply as religious nonprofits. The authors also present initial findings from these data. Specifically, they provide a descriptive profile of religious nonprofits' founders and how these individuals compare to leaders and founders of other organizations, including congregations.

Friesen, Justin P., Troy H. Campbell & Aaron C. Kay. 2015. The psychological advantage of unfalsifiability: The appeal of untestable religious and political ideologies. *Journal of Personality and Social Psychology* 108(3). 515–529.

doi:10.1037/pspp0000018.

Here, researchers propose that people may gain certain “offensive” and “defensive” advantages for their cherished belief systems (e.g., religious and political views) by including aspects of unfalsifiability in those belief systems, such that some aspects of the beliefs cannot be tested empirically and conclusively refuted. This may seem peculiar,

irrational, or at least undesirable to many people because it is assumed that the primary purpose of a belief is to know objective truth. However, past research suggests that accuracy is only one psychological motivation among many, and falsifiability or testability may be less important when the purpose of a belief serves other psychological motives (e.g., to maintain one's worldviews, serve an identity). In Experiments 1 and 2 researchers demonstrate the "offensive" function of unfalsifiability: that it allows religious adherents to hold their beliefs with more conviction and political partisans to polarize and criticize their opponents more extremely. Next the authors demonstrate unfalsifiability's "defensive" function: when facts threaten their worldviews, religious participants frame specific reasons for their beliefs in more unfalsifiable terms (Experiment 3) and political partisans construe political issues as more unfalsifiable ("moral opinion") instead of falsifiable ("a matter of facts"; Experiment 4). Researchers conclude by discussing how in a world where beliefs and ideas are becoming more easily testable by data, unfalsifiability might be an attractive aspect to include in one's belief systems, and how unfalsifiability may contribute to polarization, intractability, and the marginalization of science in public discourse.

Georgarakos, Dimitris & Sven Fürth. 2015. Household repayment behavior: The role of social capital and institutional, political, and religious beliefs. *European Journal of Political Economy* 37. 249–265. doi:10.1016/j.ejpoleco.2014.10.001.

Researchers examine the influence of social capital and various prevailing beliefs on household repayment behavior in Europe, after accounting for household-specific characteristics and country differences in institutions. Arrears are more common among households living in regions with dense corruption beliefs, low confidence in institutions and authorities, and a low fraction of religious people. Moreover, high stocks of social capital reduce the likelihood of arrears, net of the influence of various potentially relevant factors. Households in these communities face a higher hazard of losing standing in the group and access to the positive externalities of social capital.

Hu, Anning & Reid J. Leamaster. 2015. Intergenerational Religious Mobility in Contemporary China. *Journal for the Scientific Study of Religion* 54(1). 79–99. doi:10.1111/jssr.12168.

This study illustrates intergenerational religious mobility with the case of Chinese society. Using the quasi-symmetric log-linear model to separate structure mobility from exchange mobility, researchers examine the variation in religious identities between the reform era generation and their parents. Structure mobility results suggest that the encompassing social reform over the past decades in China has encouraged the structural growth of Islam and Christianity across generations, but traditional Chinese religions bear remarkable intergenerational disadvantages. Moreover, religious nones are growing across generations, at least relative to traditional Chinese religions. Exchange mobility findings indicate that individuals whose parents follow traditional Chinese religions are very likely to "convert" to Christianity. However, children of religious nones do not necessarily remain irreligious, possibly undermining the structural advantages of religious nones in the future. Finally, a comparison between cohort and period effects drives the authors to conclude that the major social force underpinning the revival of Chinese religion in the reform era is generational replacement instead of an increasingly religious transition of "old" generations.

Jung, Jong Hyun. 2015. Sense of Divine Involvement and Sense of Meaning in Life: Religious Tradition as a Contingency. *Journal for the Scientific Study of Religion* 54(1). 119–133. doi:10.1111/jssr.12170.

This study examines the association between sense of divine involvement and sense of meaning in life. Then it proceeds to assess how this association varies by religious tradition. Using a random and national sample from the 2007 Baylor Religion Survey, this study finds that sense of divine involvement is associated with greater odds of having a sense of meaning in life. In addition, religious affiliation modifies this association. Specifically, the positive association between sense of divine involvement and the odds of having a sense of meaning in life is observed only among evangelical Protestants, mainline Protestants, and Catholics, but not among other religionists and religious nones.

Lechner, Clemens M. & Thomas Leopold. 2015. Religious Attendance Buffers the Impact of Unemployment on Life Satisfaction: Longitudinal Evidence from Germany. *Journal for the Scientific Study of Religion* 54(1). 166–174.
doi:10.1111/jssr.12171.

This research used longitudinal data from the German Socio-Economic Panel Study (SOEP) to examine whether religious attendance buffers the impact of unemployment on life satisfaction. Fixed effects models following 5,446 individuals up to three years after the transition to unemployment yielded two central findings. First, higher frequency of religious attendance was associated with smaller drops in life satisfaction. Second, only those who attended religious services on a weekly basis adapted to unemployment. These results suggest that religious attendance on a weekly basis can mitigate the psychological impact of unemployment.

Mahasneh, Ahmad M., Nizar A. Shammout, Ziad M. Alkhazaleh, Ahmed F. Al-Alwan & Jawhara D. Abu-Eita. 2015. The relationship between spiritual intelligence and personality traits among Jordanian university students. *Psychology Research and Behavior Management* 8. 89–97.
doi:10.2147/PRBM.S76352.

This study was aimed at identifying the level of spiritual intelligence and its correlation with personality traits among a group of Jordanian undergraduate students. A purposive sample of 716 male and female students was chosen from different faculties at the Hashemite University. Two questionnaires on spiritual intelligence and personality traits were distributed to members of the sample during the academic year 2013-2014. Results illustrated a medium level of spiritual intelligence in students, and indicated a positive and statistically significant relationship between spiritual intelligence dimensions (critical existential thinking, personal meaning production, transcendental awareness, and conscious state expansion) and personality traits (neuroticism, extraversion, openness to experience, agreeableness, and conscientiousness), but no significant correlation between personal meaning production and transcendental awareness dimensions and neuroticism personality traits. Finally, regression analysis results indicate that critical existential thinking is the first predictor dimension of spiritual intelligence in terms of neuroticism, extraversion, openness to experience, agreeableness, and conscientiousness.

Mayer, Claude-Hélène, Sabie Surtee & Antoni Barnard. 2015. Women leaders in higher education: A psycho-spiritual perspective. *South African Journal of Psychology* 45(1). 102–115.
doi:10.1177/0081246314548869.

Demands on women in middle and senior leadership positions in higher education institutions inevitably challenge their well-being. How they manage these demands is strongly related to their sense of coherence and their spirituality, constructs that have demonstrated positive relations with general and work-related well-being. This study aims to explore the construction of sense of coherence and spirituality of women leaders in higher education institutions. It adopts a qualitative research approach, applying constructivist grounded theory. The sample comprises 13 academic and support services women working in higher education, who belong to the Higher Education Resource Services South Africa network, a non-profit organization that promotes leadership development and representation of women in senior positions in higher education. This study contributes to knowledge on gender-specific well-being concepts by presenting qualitative findings on women leaders' life-orientation in terms of sense of coherence and spirituality in a higher education institution in South Africa. Themes from the interview data provide key insights on three subcomponents of sense of coherence: manageability, comprehensibility, and meaningfulness. Spirituality furthermore emerged as constructed in inner-connectedness, trans-personality, and a coping resource in the work context. Meaningfulness emerged as central to the life-orientation and spirituality of women leaders in higher education. Finally, a core theoretical idea is presented in proposing an integrated psycho-spiritual perspective, with meaningfulness as central, grounded in a motivational and relational orientation, and facilitating the potential well-being of women leaders in higher education institutions.

McKay, Ryan & Harvey Whitehouse. 2015. Religion and Morality. *Psychological Bulletin* 141(2). 447–473.
doi:10.1037/a0038455.

The relationship between religion and morality has long been hotly debated. Does religion make us more moral? Is it necessary for morality? Do moral inclinations emerge independently of religious intuitions? These debates, which nowadays rumble on in scientific journals as well as in public life, have frequently been marred by a series of conceptual confusions and limitations. Many scientific investigations have failed to decompose “religion” and “morality” into theoretically grounded elements; have adopted parochial conceptions of key concepts—in particular, sanitized conceptions of “prosocial” behavior—and have neglected to consider the complex interplay between cognition and culture. The authors argue that to make progress, the categories “religion” and “morality” must be fractionated into a set of biologically and psychologically cogent traits, revealing the cognitive foundations that shape and constrain relevant cultural variants. The authors adopt this fractionating strategy, setting out an encompassing evolutionary framework within which to situate and evaluate relevant evidence. The goal of this is twofold: to produce a detailed picture of the current state of the field, and to provide a road map for future research on the relationship between religion and morality.

Pearce, Lisa D., Sarah R. Brauner-Otto & Yingchun Ji. 2015. Explaining religious differentials in family-size preference: Evidence from Nepal in 1996. *Population Studies* 69(1). 23–37.
doi:10.1080/00324728.2014.995695.

In this paper researchers examine how religio-ethnic identity, individual religiosity, and family members’ religiosity were related to preferred family size in Nepal in 1996. Analyses of survey data from the Chitwan Valley Family Study show that socio-economic characteristics and individual experiences can suppress, as well as largely account for, religio-ethnic differences in fertility preference. These religio-ethnic differentials are associated with variance in particularized theologies or general value orientations (like son preference) across groups. In addition, individual and family religiosity are both positively associated with preferred family size, seemingly because of their association with religious beliefs—beliefs that are likely to shape fertility strategies. These findings suggest the need for improvements in how scholars conceptualize and measure supra-individual religious influence in a variety of settings and for a range of demographically interesting outcomes.

Richardson, James T. 2015. Managing Religion and the Judicialization of Religious Freedom. *Journal for the Scientific Study of Religion* 54(1). 1–19.
doi:10.1111/jssr.12172.

Religious freedom is a highly valued goal for many citizens and political leaders around the world, especially in Western-oriented nations. Much ink has been spilled in defense of religious freedom and many have waxed eloquent about the virtues of promoting religious freedom. Most constitutions and other international documents around the world guarantee religious freedom even if those guarantees are sometimes honored in the breach. Why this focus on religious freedom is occurring and how it is being addressed are the focus of this article.

Scheitle, Christopher P. & Nicole Cornell. 2015. Hearing clergy speak about social and political issues: Examining the effects of religious tradition and personal interest. *Social Science Quarterly* 96(1). 148–160.
doi:10.1111/ssqu.12139.

The goal of this research is to identify factors that affect the likelihood that a congregational attendee will report hearing their clergy person speak about certain social or political issues. The data used for this research come from the 2010 Religion and Public Life Survey. Researchers examine three outcomes measuring whether the respondent reports hearing his or her clergy speak about abortion, homosexuality, or the environment. The authors find that an individual’s personal interest in particular social issues increases the likelihood of reporting hearing about those issues

from his or her clergyperson. There are also significant religious tradition effects, with Catholics being most likely to report hearing about abortion. Conclusion: These findings shed light on what congregational attendees say they are hearing from their clergy about key social and political issues, which could be very different from what clergy report they are saying, as attendees' reports will be shaped by their attention to, interest in, and interpretation of the clergy's messages.

- Vezzoni, Cristiano & Ferruccio Biolcati-Rinaldi. 2015. Church Attendance and Religious Change in Italy, 1968-2010: A Multilevel Analysis of Pooled Datasets. *Journal for the Scientific Study of Religion* 54(1). 100–118.
doi:10.1111/jssr.12173.

The debate over religious change in Italy is far from having reached unanimous conclusions: some scholars point to an unbroken trend toward a decrease of religiosity, while others highlight the signs of a religious revival, especially in younger generations. Besides difficulties with definitions, different conclusions are also due to a lack of information over a sufficiently long period of time. This problem is tackled here by developing a pooled analysis of repeated cross-section surveys that span over four decades. Using six different studies, the article analyzes the secularization trend in Italy on the basis of church attendance that, despite well-founded criticism, continues to be a crucial indicator of this phenomenon. The results, estimated using multilevel models, show that the trend of attendance at Mass in Italy has decreased since the 1960s until today, despite a period of stability at the turn of the 1980s and 1990s. The overall trend looks like a 'recumbent S' trend (decrease up to the 1970s, stability in the 1980s, decrease afterwards). Thus, the claims of a religious revival in Italy are not supported by these results.

- Yoon, John D., Jiwon H. Shin, Andy L. Nian & Farr A. Curlin. 2015. Religion, sense of calling, and the practice of medicine: findings from a national survey of primary care physicians and psychiatrists. *Southern Medical Journal* 108(3). 189–195.
doi:10.14423/SMJ.0000000000000250.

A sense of calling is a concept with religious and theological roots; however, it is unclear whether contemporary physicians in the United States still embrace this concept in their practice of medicine. This study assesses the association between religious characteristics and endorsing a sense of calling among practicing primary care physicians (PCPs) and psychiatrists. In 2009, researchers surveyed a stratified random sample of 2016 PCPs and psychiatrists in the United States. Physicians were asked whether they agreed with the statement, "For me, the practice of medicine is a calling." Primary predictors included demographic and self-reported religious characteristics, (e.g., attendance, affiliation, importance of religion, intrinsic religiosity) and spirituality. Among eligible respondents, the response rate was 63% (896/1427) for PCPs and 64% (312/487) for psychiatrists. A total of 40% of PCPs and 42% of psychiatrists endorsed a strong sense of calling. PCPs and psychiatrists who were more spiritual and/or religious as assessed by all four measures were more likely to report a strong sense of calling in the practice of medicine. Nearly half of Muslim (46%) and Catholic (45%) PCPs and the majority of evangelical Protestant PCPs (60%) report a strong sense of calling in their practice, and PCPs with these affiliations were more likely to endorse a strong sense of calling than those with no affiliation (26%, bivariate $P < 0.001$). Similar trends were found for psychiatrists.

1.4 SCIENTIFIC STUDY OF RELIGION: METHOD & THEORY

- Chadha, Monima. 2015. Meditation and unity of consciousness: A perspective from Buddhist epistemology. *Phenomenology and the Cognitive Sciences* 14(1). 111–127.
doi:10.1007/s11097-013-9316-0.

The paper argues that empirical work on Buddhist meditation has an impact on Buddhist epistemology, in particular their account of unity of consciousness. First, the Buddhist account of unity of consciousness is explained and then it is showed how it relates to contemporary philosophical accounts of unity of consciousness. The contemporary accounts

of unity of consciousness are closely integrated with the discussion of neural correlates of consciousness. The conclusion of the paper suggests a new direction in the search for neural correlates of state consciousness or creature consciousness.

MacDonald, Douglas A., Harris L. Friedman, Jacek Brewczynski, Daniel Holland, Kiran Kumar K. Salagame, K. Krishna Mohan, Zuzana Ondriasova Gubrij & Hye Wook Cheong. 2015. Spirituality as a scientific construct: Testing its universality across cultures and languages. *PLoS One* 10(3). e0117701.
doi:10.1371/journal.pone.0117701.

Using data obtained from 4004 participants across eight countries (Canada, India, Japan, Korea, Poland, Slovakia, Uganda, and the U.S.), the factorial reliability, validity and structural/measurement invariance of a 30-item version of Expressions of Spirituality Inventory (ESI-R) was evaluated. The ESI-R measures a five factor model of spirituality developed through the conjoint factor analysis of several extant measures of spiritual constructs. Exploratory factor analyses of pooled data provided evidence that the five ESI-R factors are reliable. Confirmatory analyses comparing four and five factor models revealed that the five dimensional model demonstrates superior goodness-of-fit with all cultural samples and suggest that the ESI-R may be viewed as structurally invariant. Measurement invariance, however, was not supported as manifested in significant differences in item and dimension scores and in significantly poorer fit when factor loadings were constrained to equality across all samples. Exploratory analyses with a second adjective measure of spirituality using American, Indian, and Ugandan samples identified three replicable factors which correlated with ESI-R dimensions in a manner supportive of convergent validity. The paper concludes with a discussion of the meaning of the findings and directions needed for future research.

Stroebe, Katherine, Tom Postmes, Susanne Täuber, Alwin Stegeman & Melissa-Sue John. 2015. Belief in a just what? Demystifying just world beliefs by distinguishing sources of justice. *PLoS One* 10(3). e0120145.
doi:10.1371/journal.pone.0120145.

People's Belief in a Just World (BJW) plays an important role in coping with misfortune and unfairness. This paper demonstrates that understanding of the BJW concept, and its consequences for behavior, is enhanced if researchers specify what (or who) the source of justice might be. The authors thus introduce a new scale, the 5-Dimensional Belief in a Just Treatment Scale (BJT5), which distinguishes five causal dimensions of BJW (God, Nature, Other People, Self, Chance). Researchers confirm the 5-factor structure of the BJT5, and then address whether the BJW should be considered a uni- and/or multi-dimensional construct and find support for our multi-dimensional approach. Finally, the authors demonstrate convergent and discriminant validity with respect to important correlates of BJW as well as action in response to important negative life events and societal attitudes. This work illustrates the importance of distinguishing causal dimensions with regard to who distributes justice.

Taves, Ann. 2015. Reverse Engineering Complex Cultural Concepts: Identifying Building Blocks of "Religion." *Journal of Cognition & Culture* 15(1/2). 191–216.

Researchers have not yet done an adequate job of reverse engineering the complex cultural concepts of religion and spirituality in a way that allows scientists to operationalize component parts and historians of religion to consider how the component parts have been synthesized into larger socio-cultural wholes. Doing so involves two steps: (1) distinguishing between (a) the generic elements that structure definitions and (b) the specific features used to characterize the generic elements as "religious" or "sacred" and (2) disaggregating these specific features into more basic cognitive processes that scientists can operationalize and that historians can analyze in situ. Three more basic processes that interact on multiple levels are proposed: perceiving salience, assessing significance, and imagining hypothetical, counterfactual content.

PART 2: ARTICLES IN SPIRITUALITY & HEALTH RESEARCH

2.1 SPIRITUALITY & HEALTH: GENERAL HEALTH & WELL-BEING

Agarwal, Ram P., Adarsh Kumar & John E. Lewis. 2015. A Pilot Feasibility and Acceptability Study of Yoga/Meditation on the Quality of Life and Markers of Stress in Persons Living with HIV Who Also Use Crack Cocaine. *Journal of Alternative and Complementary Medicine* 21(3). 152–158. doi:10.1089/acm.2014.0112.

Persons living with HIV (PLWH) who also use crack cocaine may have stressful, chaotic lives and typically do not engage in standard medical care that addresses a multitude of extenuating life circumstances. Yoga/meditation (YM) improves quality of life (QOL) and biomarkers of stress, but the effect of this intervention is almost unknown in PLWH, particularly those who use crack cocaine. Thus this pilot study sought to compare the feasibility and acceptability of 60-minute, twice-per-week sessions of YM for 2 months with those of no-contact control and to evaluate the effects of the intervention on QOL (according to the Short Form-36, Perceived Stress Scale [PSS], and Impact of Events Scale [IES]) and salivary cortisol and dehydroepiandrosterone sulfate (DHEA-S) among PLWH who use crack cocaine. Participants were randomly assigned to YM or no-contact control and were assessed at baseline, 2 months after the intervention, and 4 months' follow-up. Results indicate that the YM program was acceptable and feasible, with high overall attendance (89%) and individual participation in yoga sessions (83%). YM participants showed modest improvements on QOL. The PSS total score and the IES intrusion score improved significantly 2 months after the intervention, but cortisol and DHEA-S did not change.

Babbar, Shilpa & Suneet P. Chauhan. 2015. Exercise and yoga during pregnancy: a survey. *Journal of Maternal-Fetal & Neonatal Medicine* 28(4). 431–435. doi:10.3109/14767058.2014.918601.

The primary objective of this survey was to ascertain the opinions, practices and knowledge about exercise, including yoga, during pregnancy; the secondary objective to compare the responses among women with body mass index (BMI) < 30 kg/m² versus ≥ 30 kg/m². Survey consisted of 20 multiple choice questions assessing demographics and exercise practices, and five questions testing their knowledge about it during pregnancy. Of the 500 surveys distributed, 84% (422) responses were analyzed. While 86% of women responded that exercise during pregnancy is beneficial, 83% felt it was beneficial to start prior to pregnancy, and walking was considered the most beneficial (62%). The majority (64%) of respondents were currently exercising during pregnancy and 51% exercised 2-3 times/week. Among the five questions testing knowledge about prenatal exercise, majority (range 60 to 92%) were aware of ACOG recommendations. About half had a BMI ≥ 30. Knowledge about benefits of exercise during pregnancy did not differ significantly between obese and non-obese. Yoga was tried significantly more among non-obese, 65% believed it is beneficial, and 40% had attempted yoga before pregnancy.

Bai, Mei & Mark Lazenby. 2015. A systematic review of associations between spiritual well-being and quality of life at the scale and factor levels in studies among patients with cancer. *Journal of Palliative Medicine* 18(3). 286–298. doi:10.1089/jpm.2014.0189.

The purpose of this systematic review was to examine the literature for associations between spiritual well-being and quality of life (QOL) among adults diagnosed with cancer. A systematic literature search was conducted in the PubMed and CINAHL databases on descriptive correlational studies that provided bivariate correlations or multivariate associations between spiritual well-being and QOL. A total of 566 citations were identified; 36 studies were included in the final review. Thirty-two studies were cross-sectional and four longitudinal; 27 were from the United States. Sample size ranged from 44 to 8805 patients. A majority of studies reported a positive association (ranges from 0.36 to 0.70) between overall spiritual well-being and QOL, which was not equal among physical, social, emotional, and functional well-being. The 16 studies that examined the Meaning/Peace factor and its

association with QOL reported a positive association for overall QOL (ranges from 0.49 to 0.70) and for physical (ranges from 0.25 to 0.28) and mental health (ranges from 0.55 to 0.73), and remained significant after controlling for demographic and clinical variables. The Faith factor was not consistently associated with QOL.

- Battle, Cynthia L., Lisa A. Uebelacker, Susanna R. Magee, Kaeli A. Sutton & Ivan W. Miller. 2015. Potential for prenatal yoga to serve as an intervention to treat depression during pregnancy. *Women's Health Issues* 25(2). 134–141.
doi:10.1016/j.whi.2014.12.003.

This study examined the acceptability and feasibility of a gentle prenatal yoga intervention, as a strategy for treating depression during pregnancy. Researchers developed a 10-week prenatal yoga program for antenatal depression and an accompanying yoga instructors' manual, and enrolled 34 depressed pregnant women from the community into an open pilot trial. Researchers measured change in maternal depression severity from before to after the intervention. Results suggested that the prenatal yoga intervention was feasible to administer and acceptable to the women enrolled. No study-related injuries or other safety issues were observed during the trial. On average, participants' depression severity decreased significantly by the end of the intervention based on both observed-rated and self-report depression assessment measures. Thus, the current study suggests that prenatal yoga may be a viable approach to addressing antenatal depression, one that may have advantages in terms of greater acceptability than standard depression treatments.

- Bryan, Craig J., Eugena Graham & Erika Roberge. 2015. Living a life worth living: Spirituality and suicide risk in military personnel. *Spirituality in Clinical Practice* 2(1). 74–78.
doi:10.1037/scp0000056.

In the absence of conceptual models that explicitly incorporate protective factors for suicide, research focused on understanding the contributors and causes of suicide among military personnel and veterans has largely overlooked factors that may reduce risk in this population. One proposed protective factor is spirituality, but the mechanisms by which spirituality reduces risk remain unknown. Research suggests that existential aspects of spirituality such as meaning in life and the capacity to forgive oneself for perceived transgressions may reduce risk more so than explicitly religious aspects of spirituality such as belief in a higher power or deity. Preliminary evidence suggests that interventions and treatments that foster personal meaning and self-compassion in addition to reducing guilt, shame, and self-deprecation can reduce suicidal behavior among military personnel and veterans. Additional research is needed to understand why, how, and for whom spirituality influences suicide risk.

- Cramer, Holger, Romy Lauche, Heidemarie Haller, Gustav Dobos & Andreas Michalsen. 2015. A systematic review of yoga for heart disease. *European Journal of Preventive Cardiology* 22(3). 284–295.
doi:10.1177/2047487314523132.

This systematic review of randomized controlled trials (RCTs) aimed to evaluate the quality of evidence and the strength of recommendation for yoga as an ancillary intervention for heart disease. Databases were searched up to October 2013. Main outcome measures were mortality, nonfatal cardiac events, exercise capacity, health-related quality of life, and modifiable cardiac risk factors. Risk of bias, quality of evidence, and the strength of the recommendation for or against yoga were assessed according to the Cochrane Collaboration and GRADE recommendations. Seven RCTs with 624 patients comparing yoga to usual care were included. For coronary heart disease (four RCTs), there was very low evidence for no effect on mortality, for a reduced number of angina episodes, and for increased exercise capacity, and low evidence for reduced modifiable cardiac risk factors. For heart failure (two RCTs), there was very low evidence for no effect on mortality, and low evidence for increased exercise capacity, and for no effect on health-related quality of life. For cardiac dysrhythmias treated with implantable cardioverter-defibrillator (one RCT), there was very low evidence for no effect on mortality, and for improved quality, and low evidence for effects on nonfatal device-treated ventricular events. Three RCTs reported safety data and reported that no adverse events occurred.

Davis, James M., Alison R. Manley, Simon B. Goldberg, Kristin A. Stankevitz & Stevens S. Smith. 2015. Mindfulness training for smokers via web-based video instruction with phone support: a prospective observational study. *BMC Complementary and Alternative Medicine* 15(1). 95. doi:10.1186/s12906-015-0618-3.

Many smokers are unable to access effective behavioral smoking cessation therapies due to location, financial limitations, schedule, transportation issues or other reasons. Researchers report results from a prospective observational study in which a promising novel behavioral intervention, Mindfulness Training for Smokers was provided via web-based video instruction with telephone-based counseling support. Data were collected on 26 low socioeconomic status smokers. Participants were asked to watch eight video-based classes describing mindfulness skills and how to use these skills to overcome various core challenges in tobacco dependence. Participants received eight weekly phone calls from a smoking cessation coach who provided general support and answered questions about the videos. On the quit day, participants received two weeks of nicotine patches. Participants were a mean of 40.5 years of age, smoked 16.31 cigarettes per day for 21.88 years, with a mean of 6.81 prior failed quit attempts. Participants completed a mean of 5.55 of 8 online video classes with a mean of 23.33 minutes per login, completed a mean of 3.19 of 8 phone coach calls, and reported a mean meditation practice time of 12.17 minutes per day. Smoking abstinence was defined as self-reported abstinence on a smoking calendar with biochemical confirmation via carbon monoxide breath-test under 7 parts per million. Intent-to-treat analysis demonstrated 7-day point prevalence smoking abstinence at 4 and 6-months post-quit of 23.1% and 15.4% respectively. Participants showed a significant pre- to post-intervention increase in mindfulness as measured by the Five-Factor Mindfulness Questionnaire, and a significant pre- to post-intervention decrease in the Anxiety Sub-scale of the Depression Anxiety and Stress Scale. Results suggest that Mindfulness Training for Smokers can be provided via web-based video instruction with phone support and yield reasonable participant engagement on intervention practices and that intervention efficacy and mechanism of effect deserve further study.

Frias, Cindy M. de & Erum Whyne. 2015. Stress on health-related quality of life in older adults: The protective nature of mindfulness. *Aging & Mental Health* 19(3). 201–206. doi:10.1080/13607863.2014.924090.

The current study examined whether the link between stress and health-related quality of life was buffered by protective factors, namely mindfulness, in a sample of middle-aged and older adults. In this cross-sectional study, 134 healthy, community-dwelling adults (ages 50-85years) were recruited from Dallas, TX. The participants were screened for depressive symptoms and severity. All participants completed measures of self-reported health status, life stress (using the Elders Life Stress Inventory [ELSI]), and trait mindfulness (i.e. Mindful Attention Awareness Scale). Hierarchical regressions (covarying for age, gender, and education) showed that life stress was inversely related to physical and mental health. Mindfulness was positively related to mental health. The negative effect of life stress on mental health was weakened for those individuals with higher levels of trait mindfulness. The results suggest that mindfulness is a powerful, adaptive strategy that may protect middle-aged and older adults from the well-known harmful effects of stress on mental health.

Galbraith, Todd & Bradley T. Conner. 2015. Religiosity as a moderator of the relation between sensation seeking and substance use for college-aged individuals. *Psychology of Addictive Behaviors* 29(1). 168–175. doi:10.1037/adb0000037.

Substance use has been identified as a major problem on college campuses across the country, with excessive use often leading to unintended and unwanted negative health outcomes. Sensation seeking has been shown to be a consistent predictor of engagement in various health risk behaviors, including substance use. Religiosity has been shown to negatively predict substance use. However, there is mixed evidence on the relations among these risk and protective factors. This may be due to the operational definitions of religiosity in previous research. The current study investigated

religiosity as a moderator of the relation between sensation seeking and substance use using robust measures of religiosity. The primary hypotheses were (a) sensation seeking would be positively associated with higher levels of heavy episodic drinking and marijuana use; (b) religiosity would be negatively associated with higher levels of substance use; and (c) religiosity would moderate the relation between sensation seeking and substance use such that, when religiosity was high, there would be no association between sensation seeking and substance use, but at low and moderate levels of religiosity, there would be a positive association between them. Religiosity was a significant moderator of the relation between risk seeking and marijuana use, but it was less effective as a moderator between sensation seeking and heavy episodic drinking. Religiosity appears to have a stronger buffering effect for illegal drug use compared with alcohol use, perhaps in part because of the relative acceptance of alcohol consumption across major U.S. religious orientations.

Gaspar, Phyllis Meyer, Judith C. Bautch & Caritas M. Strodthoff. 2015. A longitudinal study of the health status of a community of religious sisters: addressing the advantages, challenges, and limitations. *Research in Gerontological Nursing* 8(2). 77–84.
doi:10.3928/19404921-20150109-01.

Longitudinal studies are recognized as contributing to understanding the complexity of aging and generating insights that cannot be gained using other research methods. However, conducting longitudinal studies is recognized as challenging, especially among older adults. The purpose of the current review is to describe how the authors addressed the limitations and challenges of longitudinal studies in a study of the health status of a community of religious sisters. Methods of this specific longitudinal study are presented to provide background to the discussion. Challenges, limitations, and advantages of the current longitudinal study are organized into three categories (i.e., sample, method, and data analysis) that have been addressed in the literature as contributing to the fidelity of longitudinal studies. The unique characteristics of the current study sample, particularly their access to health care, creates a comparison group for the study of older women in general.

Ghuman, S. & M. E. Hoque. 2015. Effect of Religious Beliefs on Substance Use Among South African High School Students. *Southeast Asian Journal of Tropical Medicine and Public Health* 46(2). 346–353.

Researchers conducted this study to determine whether religious beliefs influenced substance use among South African youth. A cross sectional study of 704 students from five high schools in South Africa was conducted. Researchers used a questionnaire to assess self-reported substance use and religious beliefs among the study subjects. Binary logistic regression analysis was used to evaluate the relationship between the subjects' religious beliefs and substance use. A third (36.6%) of students reported being very religious. More female students reported being very religious than male students. Half of the students (54%) had ever consumed alcohol. Comparing alcohol and drug use between religious and non-religious students, it was found that alcohol and drug use were more common among non-religious students (28.3%, 30.4%) than very religious students (8.4%, 11.5%). Those who considered themselves religious had lower odds of substance use. Religious beliefs had an influence on substance use among South African youth in our study.

Imamura, Yoshiomi, Yoshito Mizoguchi, Hiromi Nabeta, Jun Matsushima, Itaru Watanabe, Naoki Kojima, Toshiro Kawashima, Shigeto Yamada & Akira Monji. 2015. Belief in life after death, salivary 3-methoxy-4-hydroxyphenylglycol, and well-being among older people without cognitive impairment dwelling in rural Japan. *International Journal of Geriatric Psychiatry* 30(3). 256–264.
doi:10.1002/gps.4135.

Research has found that spirituality/religiosity has a salutary association with mental/physical health. However, the association of belief in life after death with well-being has rarely been studied, and the same is true of its association with biological indices, such as monoamine transmitters. Therefore, researchers examined the associations between well-being and religiosity, salivary 3-methoxy-4-hydroxyphenylglycol (sMHPG), and demographic characteristics.

The participants were 346 community-dwelling people, aged 65 years or older, without cognitive or mental deficits, in rural Japan. Measures of religiosity consisted of belief in life after death, attachment to life, and experiences related to death and religion. The measures were assessed by scales specifically suited for Japanese religious orientations. Participants' well-being was assessed by a life satisfaction scale containing two subscales. Researchers also measured sMHPG, a major metabolite of noradrenaline that is thought to reflect certain psychological states, such as psychomotor retardation and effortful attention. One subscale of life satisfaction was positively associated with belief in life after death and sMHPG, and the other life satisfaction subscale was positively associated with education and death/religion-related experiences (e.g., visiting family graves or loss of a friend). Gender differences were found in afterlife beliefs and each life satisfaction subscale. These results suggest that religiosity, including belief in life after death and death/religion-related experiences, is salubriously associated with mental health among older people, especially women, living in rural Japan. The basal level of sMHPG was positively associated with life satisfaction, but not with belief in life after death.

Kim-Spoon, Jungmeen, Michael E. McCullough, W. K. Bickel, Julee P. Farley & Gregory S. Longo. 2015. Longitudinal Associations Among Religiousness, Delay Discounting, and Substance Use Initiation in Early Adolescence. *Journal of Research on Adolescence* 25(1). 36–43. doi:10.1111/jora.12104.

Prior research indicates that religiousness is related negatively to adolescent health risk behaviors, yet how such protective effects operate is not well understood. This study examined the longitudinal associations among organizational and personal religiousness, delay discounting, and substance use initiation (alcohol, cigarette, and marijuana use). The sample comprised 106 early adolescents (10-13 years of age, 52% female) who were not using substances at Time 1. Path analyses suggested that high levels of personal religiousness at Time 1 were related to low levels of substance use at Time 2 (2.4 years later), mediated by low levels of delay discounting. Delay discounting appears to be an important contributor to the protective effect of religiousness on the development of substance use among adolescents.

Labelle, Laura E., Linette Lawlor-Savage, Tavis S. Campbell, Peter Faris & Linda E. Carlson. 2015. Does self-report mindfulness mediate the effect of Mindfulness-Based Stress Reduction (MBSR) on spirituality and posttraumatic growth in cancer patients? *The Journal of Positive Psychology* 10(2). 153–166. doi:10.1080/17439760.2014.927902.

This longitudinal waitlist-controlled study evaluated the effects of Mindfulness-Based Stress Reduction (MBSR) on spirituality, posttraumatic growth (PTG), and mindfulness in cancer patients. The study also assessed whether increased mindfulness mediated the effects of MBSR on spirituality and PTG. Patients were either registered for immediate participation in MBSR (n=135), or were naturally waiting for the next program (n=76). Participants completed questionnaires pre-, mid-, and post-MBSR, or waiting period. Hierarchical linear modeling (HLM) was employed to assess changes over time as a function of condition (MBSR vs. waitlist). Mediation was tested using linear regression and bootstrapping. MBSR participants demonstrated increased spirituality, PTG, and mindfulness, relative to controls. Change in all mindfulness facets mediated the effect of MBSR on spirituality and PTG. The development of mindfulness skills through MBSR may facilitate a sense of meaning, peacefulness, connectedness, and personal growth in cancer patients.

López-Sierra, Héctor E. & Jesús Rodríguez-Sánchez. 2015. The supportive roles of religion and spirituality in end-of-life and palliative care of patients with cancer in a culturally diverse context: a literature review. *Current Opinion in Supportive and Palliative Care* 9(1). 87–95. doi:10.1097/SPC.0000000000000119.

This is a literature review of the supportive roles of religion and spirituality (R/S) in end-of-life (EoL) and palliative care of patients with cancer in a culturally diverse context. This review examines 26 noteworthy articles published

between August 2013 and August 2014 from five well supported databases. Current evidence shows that R/S evokes in patients the sources to find the necessary inner strengths, which includes perspective thinking, rituals for transcending immediate physical condition and modalities of coping with their oncological illnesses. R/S are not a monolithically experience for they always manifest themselves in diverse cultural settings. As such, R/S provide the individual and their families with a practical context and social memory, which includes traditions and social family practices for maintaining meaning and well-being. Nonetheless, although various dimensions of R/S show a link between cancer risk factors and wellbeing in cancer patients, more specific dimensions of R/S need to be studied taking into account the individuals' particular religious and cultural contexts, so that R/S variables within that context can provide a greater integrative structure for understanding and to move the field forward.

- Lucchetti, Giancarlo, Alessandra L. G. Lucchetti & Mario F. Prieto Peres. 2015. Religiousness and headache: is there a relation? Results from a representative sample of adults living in a low-income community. *Cephalalgia* 35(3). 240–247.
doi:10.1177/0333102414539054.

The objective of this article is to investigate the relation between religiousness (organizational, non-organizational and intrinsic) and headache disorders in a representative sample of adults living in a low-income community. In 2005, researchers conducted door-to-door interviews with 439 people, aged more than 18 years, randomly selected from a low-income community in Brazil. Four regression models were created to explain the relationships between religious involvement and headache, controlling for demographics, depression/anxiety and alcohol use and smoking. Of the 439 households contacted, at least one member from 383 (87.2%) households participated. Researchers interviewed more women (74.4%) and more subjects aged 18-39 years. The mean age was 41.7 years. Bivariate analysis shows that high religious attendance, non-organizational religiousness and intrinsic religiousness were associated with presence of headache and presence of migraine. After the logistic regression models, only high non-organizational religiousness remained associated with presence of headache. All other religious variables were unrelated to the presence of headache and its types.

- McKenzie, Monica M., Naomi N. Modeste, Helen Hopp Marshak & Colwick Wilson. 2015. Religious involvement and health-related behaviors among Black Seventh-Day Adventists in Canada. *Health Promotion Practice* 16(2). 264–270.
doi:10.1177/1524839914532812.

Most studies that involve Black Seventh-Day Adventists (SDAs) have been conducted in the United States. Researchers sought to examine the association between religious involvement and lifestyle practices among Black SDAs in Canada. A convenience sample of 509 Black SDA church members 18 years and older completed a self-administered questionnaire, assessing religious involvement and seven lifestyle practices promoted by the SDA church: diet, physical activity, water intake, exposure to sunlight, alcohol use, caffeine and tobacco use, and rest. Compliance with lifestyle practices ranged from a low of 10% meeting fitness guidelines to a high of 99% abstaining from tobacco products. Religious involvement and lifestyle were positively related. Multivariate analyses indicated that private religious practice, importance of the health principles, and acceptance of health principles significantly predicted the number of behaviors practiced.

- Meize-Grochowski, Robin, George Shuster, Blake Boursaw, Michelle DuVal, Cristina Murray-Krezan, Ron Schrader, Bruce W. Smith, Carla J. Herman & Arti Prasad. 2015. Mindfulness meditation in older adults with postherpetic neuralgia: A randomized controlled pilot study. *Geriatric Nursing* 36(2). 154–160.
doi:10.1016/j.getinurse.2015.02.012.

This parallel-group, randomized controlled pilot study examined daily meditation in a diverse sample of older adults with postherpetic neuralgia. Block randomization was used to allocate participants to a treatment group (n=13) or control group (n=14). In addition to usual care, the treatment group practiced daily meditation for six weeks. All

participants completed questionnaires at enrollment in the study, two weeks later, and six weeks after that, at the study's end. Participants recorded daily pain and fatigue levels in a diary, and treatment participants also noted meditation practice. Results at the 0.10 level indicated improvement in neuropathic, affective, and total pain scores for the treatment group, whereas affective pain worsened for the control group. Participants were able to adhere to the daily diary and meditation requirements in this feasibility pilot study.

Mills, Paul J., Laura Redwine, Kathleen Wilson, Meredith A. Pung, Kelly Chinh, Barry H. Greenberg, Ottar Lunde, et al. 2015. The role of gratitude in spiritual well-being in asymptomatic heart failure patients. *Spirituality in Clinical Practice* 2(1). 5–17.
doi:10.1037/scp0000050.

Spirituality and gratitude are associated with well-being. Few if any studies have examined the role of gratitude in heart failure (HF) patients or whether it is a mechanism through which spirituality may exert its beneficial effects on physical and mental health in this clinical population. This study examined associations between gratitude, spiritual well-being, sleep, mood, fatigue, cardiac-specific self-efficacy, and inflammation in 186 men and women with Stage B asymptomatic HF. In correlational analysis, gratitude was associated with better sleep, less depressed mood, less fatigue, and better self-efficacy to maintain cardiac function. Patients expressing more gratitude also had lower levels of inflammatory biomarkers. The authors further explored relationships among these variables by examining a putative pathway to determine whether spirituality exerts its beneficial effects through gratitude. They found that gratitude fully mediated the relationship between spiritual well-being and sleep quality and also the relationship between spiritual well-being and depressed mood. Gratitude also partially mediated the relationships between spiritual well-being and fatigue and between spiritual well-being and self-efficacy. In sum, gratitude and spiritual well-being are related to better mood and sleep, less fatigue, and more self-efficacy, and that gratitude fully or partially mediates the beneficial effects of spiritual well-being on these endpoints.

Pavlov, Sergei V., Natalia V. Reva, Konstantin V. Loktev, Vladimir V. Korenyok & Lyubomir I. Aftanas. 2015. Impact of long-term meditation practice on cardiovascular reactivity during perception and reappraisal of affective images. *International Journal of Psychophysiology* 95(3). 363–371.
doi:10.1016/j.ijpsycho.2015.01.002.

Meditation has been found to be an efficient strategy for coping with stress in healthy individuals and in patients with psychosomatic disorders. The main objective of the present study was to investigate the psychophysiological mechanisms of beneficial effects of meditation on cardiovascular reactivity. Researchers examined effects of long-term Sahaja Yoga meditation on cardiovascular reactivity during affective image processing under “unregulated” and “emotion regulation” conditions. Twenty two experienced meditators and 20 control subjects participated in the study. Under “unregulated” conditions participants were shown neutral and affective images and were asked to attend to them. Under “emotion regulation” conditions they down-regulated negative affect through reappraisal of negative images or up-regulated positive affect through reappraisal of positive images. Under “unregulated” conditions while anticipating upcoming images meditators vs. controls did not show larger pre-stimulus total peripheral resistance and greater cardiac output for negative images in comparison with neutral and positive ones. Control subjects showed TPR decrease for negative images only when they consciously intended to reappraise them (i.e. in the “emotion regulation” condition). Both meditators and controls showed comparable cardiovascular reactivity during perception of positive stimuli, whereas up-regulating of positive affect was associated with more pronounced cardiac activation in meditators. The findings provide some insight into understanding the beneficial influence of meditation on top-down control of emotion and cardiovascular reactivity.

Renz, Monika, M. Schuett Mao, A. Omlin, D. Bueche, T. Cerny & F. Strasser. 2015. Spiritual experiences of transcendence in patients with advanced cancer. *American Journal of Hospice & Palliative Medicine* 32(2). 178–188.
doi:10.1177/1049909113512201.

Spirituality encompasses a wide range of meanings between holistic wellbeing and mysticism. Researchers explored advanced cancer patients' spiritual experiences of transcendence. A total of 251 patients with advanced cancer were included and observed over 12 months by a psycho-oncologist/music-therapist. She recorded and documented patients' spontaneously expressed spiritual experiences during hospitalization. Interpretative Phenomenological Analysis was applied. 135 patients communicated a spiritual experience, as expressed by altered body-awareness, less pain, less anxiety, higher acceptance of illness/death, new spiritual identity. Spiritual experiences were communicated by patients across different religious affiliations/attitudes.

Rohani, Camelia, Heidar-Ali Abedi, Ramesh Omranipour & Ann Langius-Eklöf. 2015. Health-related quality of life and the predictive role of sense of coherence, spirituality and religious coping in a sample of Iranian women with breast cancer: A prospective study with comparative design. *Health and Quality of Life Outcomes* 13(1). 40.
doi:10.1186/s12955-015-0229-1.

There is disagreement among studies of health-related quality of life (HRQoL) changes in breast cancer patients over time. Reportedly, assessment of HRQoL prior to diagnosis may be crucial to provide a clear point of comparison for later measurements. The aims of this study were (1) to investigate changes in HRQoL, sense of coherence (SOC), spirituality and religious coping in a group of women with breast cancer from the pre-diagnosis phase to 6 months later in comparison with a control group, and (2) to explore the predictor role of SOC, spirituality, and religious coping within the breast cancer group at the 6-month follow-up. Thus a sample of women with breast cancer (n=162) and a matched control group (n=210) responded to the following instruments on both occasions: the European Organization for Research and Treatment of Cancer QLQ-C30, the SOC Scale, the Spiritual Perspective Scale and the Brief Religious Coping Scale. A series of General Linear Model (GLM) Repeated Measures was used to determine changes between the groups over time. Also, Multiple Linear Regression analyses were applied to each of the HRQoL dimensions, as dependent variable at the 6 months follow-up. Results indicate that physical and role function, fatigue, and financial difficulties were rated worse by the women with breast cancer during the first 6 months in comparison to the controls, which was both a statistically and clinically significant difference. Women had better scores for global quality of life, and emotional functioning during the same period of time. The degree of SOC and baseline ratings of several dimensions of HRQoL were the most important predictors of HRQoL changes.

Tull, Eugene S., Willa M. Doswell & Malcolm A. Cort. 2015. Spirituality moderates the relationship of psychosocial stress to metabolic risk factors among Afro-Caribbean immigrants in the US Virgin Islands. *Journal of Racial and Ethnic Health Disparities* 2(1). 132–138.
doi:10.1007/s40615-014-0056-9.

The objective of this study was to test the hypothesis that spirituality attenuates the association of psychosocial stress to stress-associated metabolic risk factors among foreign-born Caribbean blacks living in a US jurisdiction. Data on demographic factors, anthropometric measurements (height, weight and waist), fasting glucose and insulin, lifestyle behaviors (smoking and alcohol use), psychosocial stress and spirituality were collected from a population-based sample of 319 Afro-Caribbean immigrants, ages 20 and older, who were recruited between 1995 and 2000 in the Virgin Islands of the United States (USVI). Glucose and insulin measurements were used to estimate insulin resistance by the homeostasis model assessment (HOMA-IR) method. Participants were classified into three levels of spirituality, "low", "medium" and "high" based on the distribution of spirituality scores. Stepwise regression analyses were used to identify the significant predictors of waist circumference and HOMA-IR within each level of spirituality. The predictors of waist circumference and HOMA-IR varied across the levels of spirituality. Psychosocial stress was an independent predictor of waist and HOMA-IR only among participants with a low level of spirituality. The authors conclude that spirituality appears to attenuate the association of psychosocial stress to waist circumference and insulin resistance among Afro-Caribbean immigrants in the USVI.

Weiss de Souza, Isabel Cristina, Viviam Vargas de Barros, Henrique Pinto Gomide, Tassiana Cristina Mendes Miranda, Vinicius de Paula Menezes, Elisa Harumi Kozasa & Ana Regina Noto. 2015. Mindfulness-Based Interventions for the Treatment of Smoking: A Systematic Literature Review. *Journal of Alternative and Complementary Medicine* 21(3). 129–140. doi:10.1089/acm.2013.0471.

Smoking is a chronic process in which craving and negative affect are considered the main barriers to maintaining abstinence in patients who have gone through treatment. Mindfulness-based interventions have presented encouraging preliminary results in follow-up lasting up to 6 months. The aim of this study was to perform a systematic literature review on the effects of mindfulness-based interventions for the treatment of smoking. After a literature review, of 198 articles on mindfulness and smoking, 13 controlled empirical studies were selected for the analysis. Results indicate that scientific interest on mindfulness-based interventions for the treatment of smoking has increased over the past decade. All articles reported promising results, especially for smoking cessation, relapse prevention, number of cigarettes smoked, the moderation of mindfulness on the strength of relationship between craving and smoking, and the development of coping strategies to deal with triggers to smoke. Most of the articles corresponded to pilot or feasibility randomized controlled trials with low risk of bias regarding random sequence generation, attrition, and reporting. However, few articles reported sufficient data on selection, performance, and detection bias.

Yagli, Naciye Vardar, Gul Sener, Hulya Arikan, Melda Saglam, Deniz Inal Ince, Sema Savci, Ebru Calik Kutukcu, et al. 2015. Do Yoga and Aerobic Exercise Training Have Impact on Functional Capacity, Fatigue, Peripheral Muscle Strength, and Quality of Life in Breast Cancer Survivors? *Integrative Cancer Therapies* 14(2). 125–132. doi:10.1177/1534735414565699.

The aim of the study was to compare the effects of aerobic exercise training and yoga on the functional capacity, peripheral muscle strength, quality of life (QOL), and fatigue in breast cancer survivors. A total of 52 patients with a diagnosis of breast cancer were included in the study. The patients were randomly assigned to 2 groups: aerobic exercise (n=28) and yoga added to aerobic exercise (n=24). Both groups participated in submaximal exercise 30 minutes/day, 3 days/week for 6 weeks. The second group participated in a 1-hour yoga program in addition to aerobic exercise training. Functional capacity was assessed by the 6-Minute Walk Test (6MWT). Peripheral muscle strength was evaluated with a hand-held dynamometer. The fatigue severity level was assessed with the Fatigue Severity Scale (FSS). The QOL was determined by the European Organisation for Research and Treatment of Cancer Quality of Life Questionnaire. Following intervention, there were statistically significant increases in peripheral muscle strength, the 6MWT distance, and the perception of QOL in both groups. Additionally, the group with aerobic exercise and yoga showed marked improvement compared with the aerobic exercise group in fatigue perception. The authors conclude that, according to the data from this study, aerobic exercise training and yoga improved the functional capacity and QOL of breast cancer patients. Aerobic exercise programs can be supported by body mind techniques, such as yoga, in the rehabilitation of cancer patients for improving functional recovery and psychosocial wellness.

2.2 SPIRITUALITY & HEALTH: MENTAL HEALTH

Cheadle, Alyssa C. D., Christine Dunkel Schetter, Robin Gaines Lanzi, Maxine Reed Vance, Latoya S. Sahadeo, Madeleine U. Shalowitz & Community and Child Health Network (CCHN). 2015. Spiritual and Religious Resources in African American Women: Protection from Depressive Symptoms Following Birth. *Clinical Psychological Science* 3(2). 283–291. doi:10.1177/2167702614531581.

Many women experience depressive symptoms after birth, and rates among African Americans are as high as 40 percent. Spirituality and religiosity are valued in African American communities, but their relevance to new mothers

has not been empirically tested. Researchers examined effects of religiosity and spirituality on trajectories of depressive symptoms during the year following childbirth. Data were collected by the Eunice Kennedy Shriver NICHD Community and Child Health Network (CCHN) focused on maternal-child health disparities. The sample consisted of 702 low SES African American predominantly Christian women. Participants were interviewed in their homes throughout the year following a birth. Spirituality and religiosity each independently predicted changes in depressive symptoms with low levels predicting increases over time. Effects of religiosity were mediated by a woman's spirituality. Religiosity and spirituality functioned as significant, interrelated protective factors in this study which provides novel insight about lower income African American women following birth.

- Foster, Kirk A., Sharon E. Bowland & Anne Nancy Vosler. 2015. All the pain along with all the joy: spiritual resilience in lesbian and gay Christians. *American Journal of Community Psychology* 55(1-2). 191–201.
doi:10.1007/s10464-015-9704-4.

Resilience among lesbian and gay (LG) Christians has received limited attention. In this paper, researchers present results from a qualitative study of 27 LG Christians, for whom religion had high salience. The study explored the process of integrating sexual orientation with spirituality. Moving from recognition of incongruence between faith and sexual orientation to integration was found to be a resilience-building process. Through descriptive and process approaches, the researchers identified three primary pathways individuals used to integrate their faith and sexual orientation: transforming theological meaning; finding a safe-enough congregation; and, finding an affirming congregation. Some worked for social justice within congregations as part of the resilience-building process.

- Greeson, Jeffrey M., Moria J. Smoski, Edward C. Suarez, Jeffrey G. Brantley, Andrew G. Ekblad, Thomas R. Lynch & Ruth Quillian Wolever. 2015. Decreased Symptoms of Depression After Mindfulness-Based Stress Reduction: Potential Moderating Effects of Religiosity, Spirituality, Trait Mindfulness, Sex, and Age. *Journal of Alternative and Complementary Medicine* 21(3). 166–174.
doi:10.1089/acm.2014.0285.

Mindfulness-based stress reduction (MBSR) is a secular meditation training program that reduces depressive symptoms. Little is known, however, about the degree to which a participant's spiritual and religious background, or other demographic characteristics associated with risk for depression, may affect the effectiveness of MBSR. Therefore, this study tested whether individual differences in religiosity, spirituality, motivation for spiritual growth, trait mindfulness, sex, and age affect MBSR effectiveness. As part of an open trial, multiple regression was used to analyze variation in depressive symptom outcomes among 322 adults who enrolled in an 8-week, community-based MBSR program. As hypothesized, depressive symptom severity decreased significantly in the full study sample. After adjustment for baseline symptom severity, moderation analyses revealed no significant differences in the change in depressive symptoms following MBSR as a function of spirituality, religiosity, trait mindfulness, or demographic variables. Paired t tests found consistent, statistically significant reductions in depressive symptoms across all subgroups by religious affiliation, intention for spiritual growth, sex, and baseline symptom severity. After adjustment for baseline symptom scores, age, sex, and religious affiliation, a significant proportion of variance in post-MBSR depressive symptoms was uniquely explained by changes in both spirituality and mindfulness. These findings suggest that MBSR, a secular meditation training program, is associated with improved depressive symptoms regardless of affiliation with a religion, sense of spirituality, trait level of mindfulness before MBSR training, sex, or age. Increases in both mindfulness and daily spiritual experiences uniquely explained improvement in depressive symptoms.

- Jain, Felipe A., Roger N. Walsh, Stuart J. Eisendrath, Scott Christensen & B. Rael Cahn. 2015. Critical analysis of the efficacy of meditation therapies for acute and subacute phase treatment of depressive disorders: a systematic review. *Psychosomatics* 56(2). 140–152.
doi:10.1016/j.psych.2014.10.007.

Recently, the application of meditative practices to the treatment of depressive disorders has met with increasing clinical and scientific interest, owing to a lower side-effect burden, potential reduction of polypharmacy, and theoretical considerations that such interventions may target some of the cognitive roots of depression. In this study, researchers aimed to determine the state of the evidence supporting this application. Randomized controlled trials of techniques meeting the Agency for Healthcare Research and Quality definition of meditation, for participants having clinically diagnosed depressive disorders, not currently in remission, were selected. Meditation therapies were separated into praxis (i.e., how they were applied) components, and trial outcomes were reviewed. 18 studies meeting the inclusion criteria were identified, encompassing 7 distinct techniques and 1173 patients. Mindfulness-Based Cognitive Therapy comprised the largest proportion of studies. Studies including patients having acute major depressive episodes (n=10 studies), and those with residual subacute clinical symptoms despite initial treatment (n=8), demonstrated moderate to large reductions in depression symptoms within the group, and relative to control groups. There was significant heterogeneity of techniques and trial designs. The authors conclude that a substantial body of evidence indicates that meditation therapies may have salutary effects on patients having clinical depressive disorders during the acute and subacute phases of treatment. Owing to methodologic deficiencies and trial heterogeneity, large-scale, randomized controlled trials with well-described comparator interventions and measures of expectation are needed to clarify the role of meditation in the depression treatment armamentarium.

- Joshanloo, Mohsen & Fatemeh Daemi. 2015. Self-esteem mediates the relationship between spirituality and subjective well-being in Iran. *International Journal of Psychology: Journal International De Psychologie* 50(2). 115–120.
doi:10.1002/ijop.12061.

Self-esteem appears to play a central role in the spiritual life and ethical behavior of the typical Iranian. For example, for many Iranians, humankind is believed to be the crown of creation, and each person is believed to be individually valued by God. Previous empirical studies also indicate that in Iran spirituality is positively associated with self-esteem. On this basis, it was hypothesized that self-esteem would be one of the mechanisms through which spirituality leads to increased mental well-being. Mediation analysis showed that self-esteem was a partial mediator of the spirituality-well-being relationship. Moreover, results of moderated mediation analysis revealed that this mediation was not significantly moderated by gender, and that the indirect path through self-esteem was significant in both genders. Implications of the results and their relevance to other western and eastern religions (e.g. Christianity and Buddhism) are discussed.

- Kinsler, Patricia & Saba Masho. 2015. “I Just Start Crying for No Reason”: The Experience of Stress and Depression in Pregnant, Urban, African-American Adolescents and Their Perception of Yoga as a Management Strategy. *Women’s Health Issues* 25(2). 142–148.
doi:10.1016/j.whi.2014.11.007.

Perinatal health disparities are of particular concern with pregnant, urban, African-American (AA) adolescents, who have high rates of stress and depression during pregnancy, higher rates of adverse pregnancy and neonatal outcomes, and many barriers to effective treatment. The purpose of this study was to explore pregnant, urban, AA teenagers’ experience of stress and depression and examine their perceptions of adjunctive nonpharmacologic management strategies, such as yoga. This community-based, qualitative study used nontherapeutic focus groups to allow for exploration of attitudes, concerns, beliefs, and values regarding stress and depression in pregnancy and nonpharmacologic management approaches, such as mind–body therapies and other prenatal activities. The sample consisted of pregnant, AA, low-income adolescents (n=17) who resided in a large urban area in the United States. The themes that arose in the focus group discussions were that 1) stress and depression symptoms are pervasive in daily life, 2) participants felt a generalized sense of isolation, 3) stress/depression management techniques should be group based, interactive, and focused on the specific needs of teenagers, and 4) yoga is an appealing stress management technique to this population. Findings from this study suggest that pregnant, urban, adolescents are highly stressed; they interpret depression-like symptoms to be signs of stress; they desire group-based, interactive activities; and they

are interested in yoga classes for stress/ depression management and relationship building. It is imperative that health care providers and researchers focus on these needs, particularly when designing prevention and intervention strategies.

- Kopacz, Marek S. 2015. Spirituality and suicide prevention: Charting a course for research and clinical practice. *Spirituality in Clinical Practice* 2(1). 79–81.
doi:10.1037/scp0000062.

Although a considerable body of literature has been devoted to examining the physical, psychological, and social needs of veterans after their return from deployment, relatively little is known about the spiritual struggles some veterans face. In this article, researchers review what is known about this spiritual struggle, highlight the relevance of spirituality in clinical practice, and show examples of how a veteran's spiritual struggle may simultaneously present alongside different suicide risk factors. Suggestions for handling this spiritual struggle are then made.

- Mosqueiro, Bruno Paz, Neusa Sica da Rocha & Marcelo Pio de Almeida Fleck. 2015. Intrinsic religiosity, resilience, quality of life, and suicide risk in depressed inpatients. *Journal of Affective Disorders* 179. 128–133.
doi:10.1016/j.jad.2015.03.022.

Religiosity is inversely related to depression and is directly associated with positive psychological outcomes. Nonetheless, there is no consensus on whether or how religiosity could impact and protect against depression. The present study evaluated the association between intrinsic religiosity and resilient psychological characteristics in depressed inpatients. A sample of 143 depressed patients was prospectively evaluated in an inpatient psychiatric treatment in South Brazil. High Intrinsic Religiosity (HIR) and Low Intrinsic Religiosity (LIR) patients were compared across socio-demographic information, clinical measures, religiosity, resilience and quality of life. Intrinsic religiosity was found to be associated with resilience, quality of life, and fewer previous suicide attempts. These findings support the relevance of religiosity assessments in mental health practice and support the hypothesis that resilient psychological characteristics may mediate the positive effects of intrinsic religiosity in depression.

2.3 SPIRITUALITY & HEALTH: METHOD AND THEORY

- Aamar, Rola O., Angela L. Lamson & Doug Smith. 2015. Qualitative trends in biopsychosocial-spiritual treatment for underserved patients with Type 2 diabetes. *Contemporary Family Therapy: An International Journal* 37(1). 33–44.
doi:10.1007/s10591-015-9326-x.

In this study, completed at a community health center for underserved populations in Eastern North Carolina, a qualitative design was used to explore biopsychosocial-spiritual concerns, strengths, and goals from 294 patients with uncontrolled diabetes. The study focused on understanding biological, psychological, social, spiritual concerns, strengths and treatment goals reported by patients. Researchers found that the most commonly reported concern for patients included managing A1c levels, weight, other medical conditions, depressive symptoms, family and financial stressors. The goals reported were related to these concerns. Common strengths included spirituality, social supports, willingness to change, and knowledge about diabetes. This article also highlights commonly reported collaborative therapeutic interventions and recommendations for approaches to care. The use of a collaborative-care team with a holistic approach to health care may provide patients with more comprehensive care. Patients reported strengths, concerns, and goals that were related to multiple aspects of their health (i.e., biological, psychological, social, and spiritual), therefore, to promote best practices in treating diabetes, providers should focus on each of these areas of health during treatment planning.

- Adams, Christopher M., Ana Puig, Adrienne Baggs & Cheryl Pence Wolf. 2015. Integrating religion and spirituality into counselor education: Barriers and strategies. *Counselor Education and Supervision* 54(1). 44–56.

doi:10.1002/j.1556-6978.2015.00069.x.

Despite a professionally recognized need for training in religion/spirituality, literature indicates that religious and spirituality issues continue to be inconsistently addressed in counselor education. Ten experts were asked to identify potential barriers to integrating religion and spirituality into counselor education and indicate strategies for overcoming these obstacles. Barriers included a lack of information and a lack of personal interest or relevance, and strategies included continuing education, heightened awareness of self and others, and curriculum-specific recommendations. Implications for counselor training and recommendations for future research are discussed.

Askeland, Gurid Aga & Elsa Døhlie. 2015. Contextualizing international social work: Religion as a relevant factor. *International Social Work* 58(2). 261–269.
doi:10.1177/0020872813482958.

The focus of this article is how can people's religious practice be a resource in international social work? The question will be discussed in relation to pre-modern, modern and postmodern societies. The article will contain a description of religious activity in two different cases and related to international social work. The article concludes that from a postmodern view, international social work will profit from opening up and seeing religion as a contextual factor. What needs to be discussed further is whether a reason for the relative absence of religion and religious practice in international social work textbooks might be the lack of distinction between acknowledgement and acceptance of religion.

Biggar, Nigel. 2015. Why religion deserves a place in secular medicine. *Journal of Medical Ethics* 41(3). 229–233.
doi:10.1136/medethics-2013-101776.

As a science and practice transcending metaphysical and ethical disagreements, "secular" medicine should not exist. "Secularity" should be understood in an Augustinian sense, not a secularist one: not as a space that is universally rational because it is religion-free, but as a forum for the negotiation of rival reasonings. Religion deserves a place here, because it is not simply or uniquely irrational. However, in assuming his rightful place, the religious believer commits himself to eschewing sheer appeals to religious authorities, and to adopting reasonable means of persuasion. This can come quite naturally. For example, Christianity (theo)logically obliges liberal manners in negotiating ethical controversies in medicine. It also offers reasoned views of human being and ethics that bear upon medicine and are not universally held—for example, a humanist view of human dignity, the bounding of individual autonomy by social obligation, and a special concern for the weak.

Callahan, Ann M. 2015. Key concepts in spiritual care for hospice social workers: How an interdisciplinary perspective can inform spiritual competence. *Social Work & Christianity* 42(1). (Religion and Spirituality in Competency-Based Social Work Practice). 43–62.

It is important for hospice social workers to understand research on spiritual care, particularly when hospice patients rely on spirituality and/or religion to cope. Spiritual competence is essential for hospice social workers to be sensitive to a patient's spiritual worldview. Research across disciplines provides guidance in defining what it means for hospice social workers to be spiritually competent. As such, the following article describes research that defines spiritual care, spiritual needs, spiritual pain, spiritual wellbeing and other concepts related to hospice social work. Examples are provided to help consider one's level of spiritual competence and ways to address patient spiritual needs. It is this type of information that empowers Christian social workers to integrate faith in practice and, ultimately, advance an interdisciplinary dialogue on spiritual care to ensure patient spiritual needs are met.

Campbell, Elizabeth L. 2015. Utilizing the Serenity Prayer to Teach Psychology Students About Stress Management. *Journal of Psychology & Theology* 43(1). 3–7.

This paper is a response to requests from Christian psychologists for subject-specific class activities that integrate Christianity and psychology. Although Christian/psychology integration is highly valued by many as an overarching pedagogical goal, few examples are available of how to achieve such integration in specific class activities. This paper describes an example of a subject-specific, Christian/psychology integration class activity by utilizing the serenity prayer to teach psychology students about stress management. The activity is described for the purpose of justification and replication.

Chan, Roxane Raffin, Nicholas Giardino & Janet L. Larson. 2015. A pilot study: mindfulness meditation intervention in COPD. *International Journal of Chronic Obstructive Pulmonary Disease* 10. 445–454.
doi:10.2147/copd.S73864.

Living well with chronic obstructive pulmonary disease (COPD) requires people to manage disease-related symptoms in order to participate in activities of daily living. Mindfulness practice is an intervention that has been shown to reduce symptoms of chronic disease and improve accurate symptom assessment, both of which could result in improved disease management and increased wellness for people with COPD. A randomized controlled trial was conducted to investigate an 8-week mindful meditation intervention program tailored for the COPD population and explore the use of breathing timing parameters as a possible physiological measure of meditation uptake. Results demonstrated that those randomized to the mindful meditation intervention group (n=19) had a significant increase in respiratory rate over time as compared to those randomized to the wait-list group (n=22). It was also found that the mindful meditation intervention group demonstrated a significant decrease in level of mindfulness over time as compared to the wait-list group. When examining participants from the mindful meditation intervention who had completed six or more classes, it was found that respiratory rate did not significantly increase in comparison to the wait-list group. Furthermore, those who completed six or more classes (n=12) demonstrated significant improvement in emotional function in comparison to the wait-list group even though their level of mindfulness did not improve. This study identifies that there may be a complex relationship between breathing parameters, emotion, and mindfulness in the COPD population. The results describe good feasibility and acceptability for meditation interventions in the COPD population.

Chang, Edward C., Zunaira Jilani, Tina Yu, Erin E. Fowler, Jiachen Lin, Jon R. Webb & Jameson K. Hirsch. 2015. Fundamental dimensions of personality underlying spirituality: Further evidence for the construct validity of the RiTE measure of spirituality. *Personality and Individual Differences* 75. 175–178.
doi:10.1016/j.paid.2014.11.027.

This study examined the construct validity of the RiTE as a multidimensional measure of spirituality in relation to the five-factor model of personality in a sample of 325 college students. Results of correlational and regression analyses provided support for the notion that the dimensions of ritualistic, theistic, and existential spirituality tapped by the RiTE, are empirically distinguishable. Overall, these findings provide further evidence for the construct validity of the RiTE and for the potential value of measuring spirituality as a multidimensional phenomenon in the study of religious processes.

Currier, Joseph M., Shane Kuhlman & Phillip N. Smith. 2015. Empirical and ethical considerations for addressing spirituality among veterans and other military populations at risk for suicide. *Spirituality in Clinical Practice* 2(1). 68–73.
doi:10.1037/scp0000057.

Given troubling suicide rates among military veterans and active duty personnel, there is increasing interest in the possible clinical utility of incorporating spirituality in prevention efforts. However, there has been limited empirical research and discussion of ethical challenges involved in integrating spirituality into preventive and treatment

interventions with military populations. As such, the purpose of this commentary is to (a) briefly summarize supporting evidence for addressing spirituality in preventive and treatment interventions with military populations and (b) introduce several ethical concerns that providers may need to consider as they attempt to attend to spiritual concerns among veterans and other military personnel who might be at risk for prematurely ending their lives.

- Dedeli, Ozden, Emel Yildiz & Safak Yuksel. 2015. Assessing the spiritual needs and practices of oncology patients in Turkey. *Holistic Nursing Practice* 29(2). 103–113.
doi:10.1097/HNP.0000000000000070.

The purpose of this study was to assess the oncology patients' spiritual needs and activities. Besides, the study was to provide clinical evaluation of the feasibility and usefulness of the Patients Spiritual Needs Assessment Scale. This descriptive and cross-sectional study was performed by using a demographic and spiritual practices questionnaire, the Turkish version of the Patients Spiritual Needs Assessment Scale. The results of this study demonstrated that the most common spiritual needs of patients with cancer were "to address issues before death and dying" (100%), "feel a sense of peace and contentment" (94.8%), and "for companionship" (93.5%). Spiritually assessing a patient with cancer requires knowledge of how spiritual needs may manifest and how to talk with a client about his or her spiritual needs. These findings can help nurses to begin this process of providing spiritual care for patients with cancer.

- Delva, Jorge, Fernando Andrade Adaniya, Guillermo Sanhueza & Yoonsun Han. 2015. Associations of maternal and adolescent religiosity and spirituality with adolescent alcohol use in Chile: Implications for social work practice among Chilean social workers. *International Social Work* 58(2). 249–260.
doi:10.1177/0020872813497382.

To inform social work practice with adolescents who may consume alcohol, researchers examined if alcohol use among Chilean adolescents varied as a function of their mothers' and their own religiosity and spirituality. Data were from 787 Chilean adolescents and their mothers. Adolescent spirituality was a protective factor against more deleterious alcohol use. Parental monitoring and alcohol using opportunities mediated the associations. The practice of religious behaviors by themselves without meaningful faith were not associated with alcohol use among adolescents. Implications for social work practice are discussed.

- Etengoff, Chana & Colette Daiute. 2015. Clinicians' perspective of the relational processes for family and individual development during the mediation of religious and sexual identity disclosure. *Journal of Homosexuality* 62(3). 394–426.
doi:10.1080/00918369.2014.977115.

Although the psychological literature regarding gay men from religious families is continually expanding, it is also limited in that few studies focus on the use of therapy in the negotiation of the interrelated systems of religion, sexuality, and family. Utilizing a cultural historical activity theory-based process of analysis, this study focuses on the narratives of 12 clinicians discussing 230 conflicts and how those conflicts are mediated in both productive (e.g., seeking secular support) and unproductive ways (e.g., bringing one's son to an exorcist) by gay men and their religious families independent of and at the advice of their therapists.

- Gauthier, Tina, Rika M. L. Meyer, Dagmar Grefe & Jeffrey I. Gold. 2015. An On-the-Job Mindfulness-based Intervention For Pediatric ICU Nurses: A Pilot. *Journal of Pediatric Nursing* 30(2). 402–409.
doi:10.1016/j.pedn.2014.10.005.

The feasibility of a 5-minute mindfulness meditation for PICU nurses before each work-shift to investigate change in nursing stress, burnout, self-compassion, mindfulness, and job satisfaction was explored. Thirty-eight nurses completed measures (Nursing Stress Scale, Maslach Burnout Inventory, Mindfulness Attention Awareness Scale

and Self-Compassion Scale) at baseline, post-intervention and 1 month after. The intervention was found to be feasible for nurses on the PICU. A repeated measures ANOVA revealed significant decreases in stress from baseline to post intervention and maintained 1 month following the intervention. Findings may inform future interventions that support on-the-job self-care and stress-reduction within a critical care setting.

Haugan, Gørill. 2015. The FACIT-Sp spiritual well-being scale: An investigation of the dimensionality, reliability and construct validity in a cognitively intact nursing home population. *Scandinavian Journal of Caring Sciences* 29(1). 152–164.
doi:10.1111/scs.12123.

Spiritual well-being has been found to be a strong individual predictor of overall nursing home satisfaction and a fundamental dimension of global as well as health-related quality-in-life among nursing home patients. Therefore, access to a valid and reliable measure of spiritual well-being among nursing home patients is highly warranted. The aim of this study was to investigate the dimensionality, reliability and construct validity of the Functional Assessment of Chronic Illness Therapy Spiritual Wellbeing scale in a cognitively intact nursing home population. A cross-sectional design was applied, selecting two counties in central Norway from which 20 municipalities representing 44 different nursing homes took part in this study. Long-term care was defined as 24-hour care with duration of 6 months or longer. Participants were 202 cognitively intact long-term nursing home patients fulfilling the inclusion criteria. Approval by all regulatory institutions dealing with research issues in Norway and the Management Unit at the 44 nursing homes was obtained. Explorative and confirmative factor analyses as well as correlation with selected construct were used. Though three items loaded very low indicating low reliability, the three-factor model for the FACIT-Sp spiritual well-being scale provided an acceptable fit for older nursing home patients, demonstrating acceptable measurement reliability. Construct validity was supported by significant correlations in the hypothesised direction with the selected constructs.

Johnson, Brian D., Jill E. Bormann & Dale Glaser. 2015. Validation of the Functional Assessment of Chronic Illness Therapy–Spiritual Well-Being Scale in veterans with PTSD. *Spirituality in Clinical Practice* 2(1). (Suicide and Spirituality in the Military). 25–35.
doi:10.1037/scp0000052.

The purpose of this study was to examine the factor structure of 2 versions of the Functional Assessment of Chronic Illness Therapy–Spiritual Well-Being (FACIT-Sp) scale in a sample of Veterans diagnosed with posttraumatic stress disorder (PTSD). The FACIT-Sp has 12- and 23-item versions that have been factor analyzed in other populations with mixed factor solutions. Spiritual well-being is of growing interest in military and veteran populations; valid and reliable measures are needed for research with these groups. A sample of 146 Veterans diagnosed with PTSD was selected for this analysis. Confirmatory factor analysis was used to test competing factorial structures for the 12-item FACIT-Sp. Both a 2-factor and 3-factor model were compared. For the 12-item FACIT-Sp, a more plausible model of spiritual well-being was found with the 3-factor model, separating Meaning from Peace and including Faith subscales. The addition of 11 more items in the 23-item FACIT-Sp did not improve model fit to any substantial degree. Therefore, the 12-item FACIT-Sp with a 3- rather than 2-factor solution (e.g., subscales of Peace, Meaning, and Faith) is recommended as the most accurate representation of the spiritual well-being components in this study of veterans with PTSD

Korang-Okrah, Rose. 2015. ‘It’s only by God’s grace’: Capturing Ghanaian (Akan) widows’ perspectives on risk and resilience. *Social Work & Christianity* 42(1). (Religion and Spirituality in Competency-Based Social Work Practice). 7–27.

This article, part of a larger ethnographic study, describes the ways in which spiritual themes and rituals become sources of resilience for Ghanaian (Akan) widows who face the immediate trauma of bereavement and complex trauma resulting from human rights violations. The violation of property rights and gendered-structured customary rituals are challenges facing many Akan

widows. In-depth interviews and participant observations were conducted with 20 widows from four towns in two regions in Ghana. All 20 widows, seventeen Christians and three Muslims, reported active involvement in spiritual and religious activities and practices. They combine both intrinsic and extrinsic religious activities in their quest for meaning, purpose and survival. Understanding pre-existing sources of resilience for vulnerable individuals and groups, like the Akan widows, provides important clues and starting points for effective culturally-competent interventions. Implications for Christians in social work are discussed.

Krakow, Melinda M., Jakob D. Jensen, Nick Carcioppolo, Jeremy Weaver, Miao Liu & Lisa M. Guntzville. 2015. Psychosocial Predictors of Human Papillomavirus Vaccination Intentions for Young Women 18 to 26: Religiosity, Morality, Promiscuity, and Cancer Worry. *Women's Health Issues* 25(2). 105–111.
doi:10.1016/j.whi.2014.11.006.

The objective of this study was to determine whether five psychosocial variables, namely, religiosity, morality, perceived promiscuity, cancer worry frequency, and cancer worry severity, predict young women's intentions to receive the human papillomavirus (HPV) vaccination. Female undergraduate students (n=408) completed an online survey. Questions pertaining to hypothesized predictors were analyzed through bivariate correlations and hierarchical regression equations. Regressions examined whether the five psychosocial variables of interest predicted intentions to vaccinate above and beyond controls. Proposed interactions among predictor variables were also tested. Study findings supported cancer worry as a direct predictor of HPV vaccination intention, and religiosity and sexual experience as moderators of the relationship between concerns of promiscuity reputation and intentions to vaccinate. One dimension of cancer worry (severity) emerged as a particularly robust predictor for this population.

Manincor, Michael de, Alan Bensoussan, Caroline Smith, Paul Fahey & Suzanne Bouchier. 2015. Establishing key components of yoga interventions for reducing depression and anxiety, and improving well-being: a Delphi method study. *BMC Complementary and Alternative Medicine* 15(1). 85.
doi:10.1186/s12906-015-0614-7.

Previous research suggests benefits of yoga in reducing depression and anxiety. However, common concerns in reviews of the research include lack of detail, rationale and consistency of approach of interventions used. Issues related to heterogeneity include amount, types and delivery of yoga interventions. This study aims to document consensus-based recommendations for consistency of yoga interventions for reducing depression and anxiety. The Delphi method was used to establish consensus from experienced yoga teachers. Thirty-three eligible teachers were invited to participate, from four different countries. Two rounds of an online survey were sent to participants. The first round sought initial views. The second round sought consensus on a summary of those views. Survey questions related to frequency and duration (dosage) of the yoga, approaches and techniques to be included or avoided, and training and experience for yoga teachers. Twenty-four teachers agreed to participate. Eighteen completed the second round (n=18). General consensus (>75% of participants in agreement) was achieved on parameters of practice (dosage): an average of 30 to 40 minutes, to be done 5 times per week, over a period of 6 weeks. Numerous recommendations for yoga techniques to include or avoid were collected in the first round. The second round produced a consensus statement on those recommendations. Breath regulation and postures were considered very important or essential for people with depression; and relaxation, breath regulation and meditation being very important or essential for people with anxiety. Other recommended components also achieved consensus. There was also general consensus that it is very important or essential for teachers to have a minimum of 500 training hours over 2 years, at least 2 years teaching experience, training in developing personalized yoga practices, training in yoga for mental health, and professional supervision or mentoring.

- Moore, Kelsey, Victoria Talwar & Linda Moxley-Haegert. 2015. Definitional ceremonies: Narrative practices for psychologists to inform interdisciplinary teams' understanding of children's spirituality in pediatric settings. *Journal of Health Psychology* 20(3). 259–272. doi:10.1177/1359105314566610.

In pediatric settings, parents and children often seek spiritual and religious support from their healthcare provider, as they try to find meaning in their illness. Narrative practices, such as definitional ceremonies, can provide a unique framework for psychologists to explore children's spirituality and its role in the midst of illness. In addition, definitional ceremonies can be used as a means for psychologists to inform interdisciplinary teams' understanding of children's spirituality and its relevance in pediatric treatment settings. In this article, our objectives are to (a) provide a brief overview of the literature on children's spirituality, (b) review some of the literature on childhood cancer patients' spirituality, (c) highlight the importance of whole-person care for diverse pediatric patients, and (d) introduce definitional ceremonies as appropriate narrative practices that psychologists can use to both guide their therapy and inform interdisciplinary teams' understanding of children's spirituality.

- Mundle, Robert. 2015. A narrative analysis of spiritual distress in geriatric physical rehabilitation. *Journal of Health Psychology* 20(3). 273–285. doi:10.1177/1359105314566609.

Drawing upon narrative data generated in a semi-structured interview with an 82-year-old female patient in geriatric physical rehabilitation, this clinical case study provides a detailed example of recognizing, assessing, and addressing spiritual distress as a symptom of physical pain. Data analysis focused on narrative content as well as on the interactive and performative aspects of narrating spiritual health issues in a close reading of two "attachment narratives." Results support the "narrative turn" in healthcare, including the therapeutic benefits of empathic listening as "narrative care" in geriatric rehabilitation and in healthcare in general.

- Pearce, Michelle J., Harold G. Koenig, Clive J. Robins, Bruce Nelson, Sally F. Shaw, Harvey J. Cohen & Michael B. King. 2015. Religiously integrated cognitive behavioral therapy: A new method of treatment for major depression in patients with chronic medical illness. *Psychotherapy* 52(1). 56–66. doi:10.1037/a0036448.

Intervention studies have found that psychotherapeutic interventions that explicitly integrate clients' spiritual and religious beliefs in therapy are as effective, if not more so, in reducing depression than those that do not for religious clients. However, few empirical studies have examined the effectiveness of religiously (vs. spiritually) integrated psychotherapy, and no manualized mental health intervention had been developed for the medically ill with religious beliefs. To address this gap, researchers developed and implemented a novel religiously integrated adaptation of cognitive-behavioral therapy (CBT) for the treatment of depression in individuals with chronic medical illness. This article describes the development and implementation of the intervention. First, the authors provide a brief overview of CBT. Next, they describe how religious beliefs and behaviors can be integrated into a CBT framework. Finally, Religiously Integrated Cognitive Behavioral Therapy (RCBT) is described. It is a manualized therapeutic approach designed to assist depressed individuals to develop depression-reducing thoughts and behaviors informed by their own religious beliefs, practices, and resources. This treatment approach has been developed for 5 major world religions (Christianity, Judaism, Islam, Buddhism, and Hinduism), increasing its potential to aid the depressed medically ill from a variety of religious backgrounds.

- Perriam, Geraldine. 2015. Sacred spaces, healing places: Therapeutic landscapes of spiritual significance. *Journal of Medical Humanities* 36(1). 19–33. doi:10.1007/s10912-014-9318-0.

Understandings of the relationship between space, culture and belief are formative in the experience of seeking healing. This paper examines the relationship between place, healing and spirituality in the context of interdisciplinary

perspectives (particularly those of the medical humanities) on healing and well-being. The paper examines places of spiritual significance and their relationship to healing in the 'uncertain' quest for alleviation or cure, exploring these thematics in the context of the work on the geographies of "therapeutic landscapes." Through a discussion of fieldwork at two sites in Perthshire, Scotland, a framework is proposed for the investigation of therapeutic sites of spiritual significance, detailing features such as connection, renewal, reproduction, participation, alleviation and expectation. A deeper examination of sites of healing with spiritual significance, it is proposed, has the potential to develop greater understandings of the ways in which people experience illness and well-being.

Philo, Chris, Louisa Cadman & Jennifer Lea. 2015. New energy geographies: A case study of yoga, meditation and healthfulness. *Journal of Medical Humanities* 36(1). 35–46.
doi:10.1007/s10912-014-9315-3.

Beginning with a routine day in the life of a practitioner of yoga and meditation and emphasizing the importance of nurturing, maintaining and preventing the dissipation of diverse 'energies', this paper explores the possibilities for geographical health studies which take seriously 'new energy geographies'. It is explained how this account is derived from in-depth fieldwork tracing how practitioners of yoga and meditation find times and spaces for these practices, often in the face of busy urban lifestyles. Attention is paid to the 'energy talk' featuring heavily in how practitioners describe the benefits that they perceive themselves to derive from these practices, and to claims made about 'energies' generated during the time-spaces of these practices which seemingly flow, usually with positive effects, into other domains of their lives. The paper then discusses the implications of this energy talk in the context of: (a) critically reviewing conventional approaches to studying 'energy geographies'; (b) identifying an alertness to the likes of 'affective energies' surfacing in recent theoretically-attuned works of human geography (and cognate disciplines); and (c) exploring differing understandings of energy/energies extant in geographical studies of health and in step with the empirical research materials presented about yoga, meditation and healthfulness. While orientated towards explicitly geographical inquiries, the paper is intended as a statement of interest to the wider medical humanities.

Rakhshani, Abbas, Raghuram Nagarathna, Ahalya Sharma, Amit Singh & Hongasandra Ramarao Nagendra. 2015. A holistic antenatal model based on yoga, ayurveda, and vedic guidelines. *Health Care for Women International* 36(3). 256–275.
doi:10.1080/07399332.2014.942900.

The prevalence of pregnancy complications are on the rise globally with severe consequences. According to the World Health Organization, every minute at least one woman dies and 20 are affected by the complications related to pregnancy or childbirth. While the root cause of pregnancy complications is unclear, it likely has physical, psychological, social, and spiritual aspects. The Vedas are a rich source of antenatal health care guidelines in all these aspects. The primary objective of the authors was to compile the scriptural and scientific evidence for a holistic antenatal model of yoga with emphasis on sociocultural Indian practices.

Reese, Hannah E., Zayda Vallejo, Jessica Rasmussen, Katherine Crowe, Elizabeth Rosenfield & Sabine Wilhelm. 2015. Mindfulness-based stress reduction for Tourette syndrome and chronic tic disorder: A pilot study. *Journal of Psychosomatic Research* 78(3). 293–298.
doi:10.1016/j.jpsychores.2014.08.001.

In this pilot study researchers sought to develop and test a modified form of mindfulness-based stress reduction (MBSR-tics) for the treatment of Tourette Syndrome (TS) and Chronic Tic Disorder (CTD). Specific aims were: 1) To determine the feasibility and acceptability of an 8-week trial of MBSR-tics in individuals 16 and older with TS or CTD and 2) To determine the efficacy of an 8-week trial of MBSR-tics in individuals 16 and older with TS or CTD. Thus 18 individuals age 16-67 completed an uncontrolled open trial of MBSR-tics. The intervention consisted of 8 weekly 2-hour classes and one 4 hour retreat in the fifth or sixth week of the program. Symptomatic assessments were performed at baseline, post-treatment, and one-month follow-up. It was found that MBSR-tics proved to be a feasible and acceptable intervention. It resulted in significant improvement in tic severity and tic-

related impairment. 58.8% of subjects were deemed treatment responders. Therapeutic gains were maintained at 1-month follow-up. Improvements in tic severity were correlated with increases in self-reported levels of mindfulness.

- Sharma, Sonya & Sheryl Reimer-Kirkham. 2015. Faith as social capital: Diasporic women negotiating religion in secularized healthcare services. *Women's Studies International Forum* 49. 34–42.
doi:10.1016/j.wsif.2015.01.005.

In an era of unprecedented global migration and neoliberal entrenchments, the phenomenon of transnational gendered caregiving is increasingly being recognized as an outcome of today's global economic system. Concurrently, religion is re-entering what has been assumed to be a secularized public sphere. Drawing on research on the negotiation of religious and cultural plurality in healthcare, researchers examine how faith—sometimes as personalized expressions, other times as codified, structured and collective—shapes caregiving and illness experiences in the context of healthcare services. Demonstrating the salience of intersectional theorizing, they explore how the racialization, gendering, and classing of religion operate for diasporic women seeking and providing healthcare services in the publically-funded Canadian healthcare system that carries the marks of neoliberal ideologies, and is still largely driven by secular ideals. Rather than silencing their faith perspectives in such contexts, many express agency and civic engagement through their religiosity, mobilizing religion as social capital.

- Smyre, Chris L., John D. Yoon, Kenneth A. Rasinski & Farr A. Curlin. 2015. Limits and responsibilities of physicians addressing spiritual suffering in terminally ill patients. *Journal of Pain and Symptom Management* 49(3). 562–569.
doi:10.1016/j.jpainsymman.2014.06.016.

Many patients experience spiritual suffering that complicates their physical suffering at the end of life. It remains unclear what physicians' perceived responsibilities are for responding to patients' spiritual suffering. To investigate U.S. physician opinions about the impact patients' unresolved spiritual struggles have on their physical pain, physicians' responsibilities for treating patients' spiritual suffering compared with patients' physical pain, and the number of patients in the past 12 months whose suffering the physician was unable to relieve to an acceptable point. The study was based on a mailed survey to 2016 practicing U.S. physicians from clinical specialties that care for significant numbers of dying patients. Of 1878 eligible physicians, 1156 (62%) responded. Most physicians agreed that patients with unresolved spiritual struggles tend to have worse physical pain (81%) and that physicians should seek to relieve patients' spiritual suffering just as much as patients' physical pain (88%). Compared with physicians who strongly disagreed that physicians should seek to relieve patients' spiritual suffering just as much as patients' physical pain, those who strongly agreed were less likely to report being unable to relieve patients' suffering to a point the physician found acceptable (27% vs. 54% reported three or more such patients in the previous 12 months.)

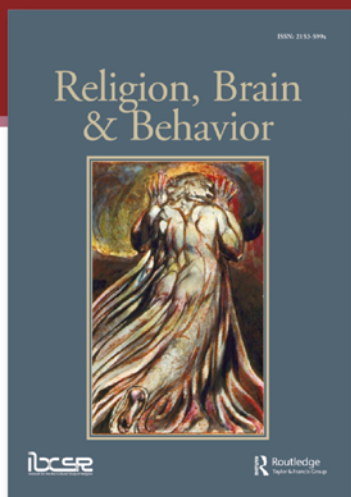
- Sperry, Len. 2015. Effective spiritually-oriented psychotherapy practice is clinically sensitive practice. *Spirituality in Clinical Practice* 2(1). 3–4.
doi:10.1037/scp0000064.

This brief essay suggests that effective spiritually-oriented psychotherapy practice is clinically sensitive practice. Conversely, ineffective spiritually-oriented psychotherapy practice tends to be clinically insensitive practice. Clinical sensitivity is first described and is then illustrated with clinical examples.

- Waters, Lea, Adam Barsky, Amanda Ridd & Kelly Allen. 2015. Contemplative education: A systematic, evidence-based review of the effect of meditation interventions in schools. *Educational Psychology Review* 27(1). 103–134.
doi:10.1007/s10648-014-9258-2.

Schools need reliable evidence about the outcomes of meditation programs before they consider if and how such programs can influence learning agendas, curriculum and timetables. This paper reviewed evidence from 15 peer-reviewed studies of school meditation programs with respect to three student outcomes: well-being, social competence

and academic achievement. In total, there were 76 results where effect sizes could be calculated. The overall number of participants in the effect size analyses was 1,797. Of the 76 effect sizes calculated, 61% were statistically significant. Sixty-seven per cent of the results had small effects on student outcomes, 24% of the results had medium effect strength and 9% showed a large effect of meditation upon student outcomes. Transcendental meditation programs had a higher percentage of significant effects than mindfulness-based and other types of meditation programs, but this may be to do with the settings and program delivery rather than the technique itself. Program elements such as duration, frequency of practice and type of instructor influenced student outcomes. A conceptual model is put forward based on two propositions. Proposition 1: meditation positively influences student success by increasing cognitive functioning. Proposition 2: meditation positively influences student success by increasing emotional regulation.



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PART 3: BOOKS

3.1 SCIENTIFIC STUDY OF RELIGION, BRAIN, AND BEHAVIOR

Bowker, John. 2015. *Why Religions Matter*. New York: Cambridge University Press.

Fowers, Blaine J. 2015. *The Evolution of Ethics: Human Sociality and the Emergence of Ethical Mindedness*. (Palgrave Studies in the Theory and History of Psychology). New York: Palgrave Macmillan.

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3.2 SPIRITUALITY & HEALTH RESEARCH

Offit, Paul. 2015. *Bad Faith: When Religious Belief Undermines Modern Medicine*. New York: Basic Books.

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PART 4: ARTICLES IN PRESS

4.1 SCIENTIFIC STUDY OF RELIGION, BRAIN, AND BEHAVIOR

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