# CROSSROADS…

Exploring research on religion, spirituality and health

Newsletter of the Center for Spirituality, Theology, and Health Volume 15 Issue 5 Nov 2025

This newsletter provides updates on research, news and events related to spirituality and health, including educational resources and funding opportunities. Please forward to colleagues or students who might benefit. Our goal is to create a community of researchers, clinicians, clergy, and laypersons interested in spirituality and health and keep them informed and updated. An EVENTS CALENDAR concludes the newsletter and describes spirituality and health related presentations happening at Duke and around the world. This is your newsletter and we depend on you to let us know about research, news, and events in this area.

All e-newsletters are archived on our website. To view previous issues (July 2007 through October 2025) go to: https://spiritualityandhealth.duke.edu/index.php/publications/crossroads/

## LATEST RESEARCH

### World Health Organization's 2025 Definition of Health

Fabian Winiger, who holds the Professorship for Spiritual Care on the Faculty of Theology at University of Zurich, Switzerland, reviews the historical treatment of "faith" and "spirituality" in discussions at the World Health Organization on the definition of health (throughout its 70 years of existence). The author concludes: "The shift from the language of 'spirituality' to that of 'faith' in WHO discourse was accompanied by a change in how the 'missing' aspect in the organization's activities was framed. As evident in the historical episodes outlined above, proponents of a 'spiritual dimension' of health were often established figures within the organization, concerned, at least overtly, with the conceptualization of health on the basis of which the organization conducted its activities."

*Citation*: Winiger, F. (2025). Thinking faith engagement beyond faith: The spiritual dimension in the World Health Organization: Policy and Practice Note. Religion and Development, *3*(2), 248-265.

*Comment*: As of this date (November 2025), the definition of health by the WHO is as it was in 1948: "Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity." In this official definition, there is no "spirituality" or "faith" despite numerous attempts in the past to include this in WHO's definition of health.

### The Global Role of Faith-Based Organizations in Leveling the Playing Field of Healthcare

Authors from the United Kingdom emphasize that the COVID-19 pandemic underscored any inequities in healthcare needs, which were influenced by socioeconomic inequalities, cultural barriers, and poor access to health-care services. They indicate that faith-based organizations have always played an important role in health-care delivery in low to middle income countries that have helped to bridge these inequities. The authors stress that religious organizations can provide a critical role in increasing health-care access and improving outcomes especially among marginalized populations. They emphasize that religious leaders and their organizations have often provided front-line assistance and spiritual support to these marginalized and uninformed communities, helping to "reduce fear, combat misinformation, and prevent stigma."

*Citation*: Ala, A., Touray, M. M., Shafi, S., Egan, B., Dar, O., Essa, F., ... & Zumla, A. (2025). Harnessing faith-based organizations for global health equity. The Lancet, 405(10472), 10-13.

*Comment*: This opinion article underscores the role that religious leaders and faith-based organizations play in reducing healthcare inequalities. The mere publication of such an article in a journal like *The Lancet* indicates that attention to this area is now being given by mainstream publications in medicine and healthcare.

### Childhood Religiosity and Learning Motivation in Indonesia

Researchers in the department of humanities at COMSATS University Islamabad, Lahore, Pakistan, analyzed data on 338 university students (mean age 20) from Islamic and general universities (50% from each university type). The 11-item Islamic Religiosity Scale (Tiliouine) was used to assess current religiosity (religious practice and religious altruism). Childhood religiosity was assessed by two questions: "Did you study Islam?" and "Do you perceive that your religiosity decreased since your childhood?" Learning motivation was assessed by five scales: (1) motivation toward science learning by a 7-item self-efficacy scale; (2) active learning strategy by an 8-item scale; (3) learning motivation to outperform competitors by a 4-item scale; (4) achievement goals by a 5-item-scale; and (5) learning environment stimulation by a 6-item scale. Analyses were not controlled for confounders. **Results**: Childhood religiosity was significantly associated with two of the five learning motivation outcomes: self-efficacy ($r=0.12$, $p<0.01$) and active learning strategies ($r=0.15$, $p<0.01$). Current religious practice was significantly associated with self-efficacy ($r=0.24$, $p<0.001$), active learning strategies ($r=0.33$, $p<0.001$), achievement goals ($r=0.20$, $p<0.001$), and learning environment stimulation ($r=0.37$, $p<0.001$). Likewise, current religious altruism was associated with these four indicators of learning motivation (with r's ranging from .26 to .42, $p<0.001$). Religious altruism in the presence of religious practices mediated the associations with childhood religiosity. There were stronger associations found for participants from Islamic universities than for participants in general universities. Researchers concluded: "Taken together, the results emphasize the significance of childhood religiosity, as well as adult religious altruism and religious practice as positive resources to enhance the learning motivation of university participants."

*Citation*: Sulalah, Fatima, S., & Rohman, M. (2025). Does childhood religiosity enhance learning motivation? Testing the role of Islamic religiosity using moderated mediation model. Archive for the Psychology of Religion, *47*(1), 3-19.

*Comment*: The associations between both childhood religiosity and adult religiosity with enhanced learning motivation are consistent with other research showing that those who are more religious do better academically (have higher grade point averages, are more

likely to graduate from high school, and more likely to go to college).

## Religiosity, Self-Control, and Online Gambling Addiction in Indonesia

Researchers from universities in Indonesia analyzed data on 141 online gamblers in Indonesia. Participants were all members of the Facebook social media group "Rehabilitation of Victims of Online Gambling Addiction." Religiosity was assessed by the Huber & Huber scale that measures ideology, intellectual, public practice, private practice and religious experiences. Self-control was assessed by a 13-item scale. Online gambling was measured by an online gambling addiction scale (Aprilla, 2023), which assessed salience, mood change, tolerance, withdrawal, conflict, and relapse. **Results**: Religiosity and self-control were inversely related to the severity of online gambling addiction, explaining 38.4% and 23.8%, respectively, of the variance in online gambling addiction severity. Researchers concluded: "It can be concluded that religiosity has a more dominant and effective contribution to online gambling addiction [compared to self-control] in online gambling players."

*Citation*: Billah, M. A., Sofiah, D., & Arifiana, I. Y. (2025). The relationship between religiosity and self-control with online gambling addiction in online gamblers. Journal of Scientific Research, Education, and Technology (JSRET), *4*(1), 279-288.

*Comment*: The findings are not surprising given that most participants were likely to be Muslim in a country where 87% of the population is of this religious faith. It is also likely that religiosity was strongly correlated with self-control, although this was not examined.

## Islamic Cognitive Behavioral Therapy for Muslims with Anxiety or Depression

Researchers from the department of psychology at Monash University, Jeffrey Cheah School of Medicine and Health Sciences, conducted a systematic review of published studies on Islamic-modified CBT (iCBT) for Muslims. They searched multiple online databases, identifying articles up through April 25, 2022. The focus was on studies that examined CBT with Islamic elements. A total of 2,091 articles were identified during the initial search, of which nine studies met inclusion criteria (including 622 participants). Of those nine studies, seven were randomized controlled trials and two were single-case studies. Mental health outcomes were assessed by the Hamilton Anxiety Rating Scale, Hamilton Depression Rating Scale, and Beck Anxiety Inventory, among others. **Results**: Islamic CBT interventions incorporating religious aspects into treatment demonstrated significant benefits, reducing symptoms and improving functioning among religious Muslims with mood and anxiety disorders. Islamic CBT involved the integration of Muslim patients' own Islamic beliefs, practices, and resources into their therapy. Researchers concluded: "Our findings indicated that modifying CBT by adding religious/Islamic aspects may be suitable management for religious Muslims with mental health issues. The results are promising but require confirmation and refinement by further research."

*Citation*: Munawar, K., Ravi, T., Jones, D., & Choudhry, F. R. (2025). Islamically modified cognitive behavioral therapy for Muslims with mental illness: A systematic review. Spirituality in Clinical Practice, *12*(2), 161–178.

*Comment*: This is a very helpful review of Islamic CBT interventions for religious Muslims with depression and anxiety, demonstrating that such an approach is helpful.

## Randomized Controlled Trial of Religious vs. Non-Religious Self-Compassion Intervention among Infertile Women in Iran

Investigators at several universities in Iran conducted a randomized controlled trial involving 78 infertile women living in the Yazd province of Iran. Participants were randomized to two experimental groups and one control group. Those in the first experimental group (n=26) received 8 sessions of a self-compassion-focused religious intervention based on verses from the Qur'an (particularly from Al-Baqarah and Al-Ma'idah); those in the second experimental group (n=26) received 8 sessions of a non-religious self-compassion intervention; and those in the control group (n= 26) were put on a wait-list. Outcomes included quality of life (using the Quality of Life in Infertile Couples Questionnaire) and anxiety (using the Beck Anxiety Inventory). Outcomes were assessed pre-intervention, post-intervention, and at 2-month follow-up. **Results**: Compared to the control group, boththe quality of life and anxiety of infertile women increased and decreased, respectively, across both experimental groups ($p<0.001$). When comparing the 2 active intervention groups, improvements of quality of life and decreases and anxiety were significantly greater in the religious intervention group. Researchers concluded: "These findings indicate that given the religious background of infertile women, religious self-compassion intervention can be relatively more effective in improving the quality of life and anxiety of infertile women than non-religious intervention."

*Citation*: Rezapour-Mirsaleh, Y., Abolhasani, F., Amini, R., Rezai, M. J., Choobforoushzadeh, A., & Shameli, L. (2025). Effects of religious versus non-religious self-compassion interventions on anxiety and quality of life of Iranian infertile women: A randomized controlled trial. Journal of Religion and Health, *64*(1), 305-329.

*Comment*: This was a relatively well done RCT, with both interventions well described and the data analyzed appropriately. The findings are important for infertile women in Muslim countries.

## Big 5 Personality Traits and Religiosity in Pakistan

Researchers at the Universiti Tun Onn Malaysia, Malaysia, and Hailey College of Commerce, University of Punjab, Pakistan, analyzed data collected from 314 students at two business schools in the public sector at the University of Punjab. Religious variables included a 4-item Gratitude to God scale and a 3-item Religious Orientation Scale (assessing intrinsic religiosity, extrinsic-personal religiosity, and extrinsic-social religiosity). Big Five Personality (BFP) traits were assessed with a 10-item scale capturing the core dimensions of the Big Five personality inventory. Well-being was assessed by a 4-item scale assessing subjective happiness (the Subjective Happiness Scale). Only bivariate correlations were provided. **Results**: Intrinsic religiosity was significantly correlated with psychological well-being ($r= 0.33$, $p<0.05$), as was gratitude to God ($r= 0.40$, $p<0.05$). Agreeableness and conscientiousness were both significantly related to intrinsic religiosity, and all Big Five trait dimensions were related to gratitude to God. Researchers concluded: "The findings underlined the importance of integrating psychological and religious dimensions when studying socio-psychological mechanisms. The positive relationship between gratitude to God and well-being suggests that thankfulness enhances mental contentment."

*Citation*: Ismail, F. B., Aamir, M., Manzoor, F., & Jaes, L. B. (2025). Big Five personality, religiosity, gratitude to God and well-being: A preliminary investigation. Pakistan Journal of Life and Social Sciences (PJLSS), *23*(1).

*Comment*: This is a quite modest study (cross-sectional, no control for confounders), but it is one of the few studies examining personality and religious characteristics in Pakistan.

## Moderating Effect of Social Participation (including Religious Participation) on the Relationship between Health and Depression among Older Adults in Taiwan

Investigators at the National Taiwan University in Taipei, Taiwan, analyzed data on 2,731 participants age 65 or older from the Taiwan National Health Interview Survey. The goal was to examine the moderating effect of social participation on the relationship between health status and depressive symptoms. Health status was measured by activities of daily living (physical disability) and perceived health status (from very bad to very good). Depressive symptoms were assessed by the 10-item CES-D. Social participation included volunteering, grandparenting, community participation, *and religious participation*, which were added up to produce a total score for greater social participation. **Results** of regression analyses controlling for gender, living arrangement, marital status, perceived financial status, physical disability, and perceived health status indicated that social participation moderated the relationship between perceived health status and depressive symptoms (b= 0.269, p=0.001) (unfortunately religious participation was not singled out for analysis). In other words, among those with greater social participation, the relationship between perceived health status and depression was weaker. Researchers concluded: "The findings highlight the role of social participation in moderating the effect of perceived health status on depressive symptoms and suggest that promoting social participation among older adults may be helpful for reducing depressive symptoms."

*Citation*: Ow, Y. S. Y., Wei, C. S., & Li, Y. T. (2025). Moderating effect of social participation on the relationship between health status and depressive symptoms in older adults. Frontiers in Public Health, *13*, 1458961.

*Comment*: Although religious participation was not examined separately, the authors noted that "religious participation is an imperative aspect of life for many older adults," which apparently applies to Taiwan as well.

## Patterns of Religiosity in the United Kingdom

Investigators from the Center for Academic Child Health, Population Health Sciences, University of Bristol Medical School conducted latent class analysis to identify classes of belief and non-belief among 12,429 mothers and 9, 953 partners (Avon Longitudinal Study of Parents and Children). A range of religious belief indicators were used to make these classifications (belief in God or divine power, belief that God or divine power has helped, appealing to God for help if in trouble, length of religious faith, attendance at religious services, and seeking help and support from religious leaders). **Results**: A total of 4 different classes of religiosity were identified – Class 1: highly religious (consistent endorsement of religious beliefs, regular church attendance, and likelihood of obtaining help from religious leaders); Class 2: moderately religious (share many of the characteristics of highly religious, but unlikely to visit church regularly or receive help from religious leaders); Class 3: agnostic (expressing uncertainty about existence of God, uncertain of whether would ask for help from God if in trouble, or if God helped them previously); and Class 4: atheist (strong disbelief in the existence of God, disagreement with statements about appealing to God for help or whether they had received help previously from God). With regard to class share, among mothers, 11% were in Class 1, 30% in Class 2, 38% in Class 3, and 21% in Class 4. Among partners, 8% were in Class 1, 23% in Class 2, 34% in Class 3, and 35% in Class 4. Class membership was associated with several socioeconomic factors: highly religious individuals had higher education, were more likely to be in the non-manual social class, and were less likely to report financial hardship. The atheist class had the highest proportion of those with less education (only a certificate of secondary school education, vocational, or no education). Researchers concluded: "…the existence of large Agnostic and Atheist classes in our sample is novel, which may be attributable to the focus in previous research on samples with at least a modest level of religiosity, rather than the general public… the Moderately religious class may be a UK equivalent to a spiritual but not religious class, in which they identify as believing in god, but not perform behaviors associated with being religious."

*Citation*: Halstead, I., Heron, J., & Joinson, C. (2025). Identifying patterns of religiosity in adults from a large UK cohort using latent class analysis. Wellcome Open Research, *7*, 192.

*Comment*: Although health outcomes were not examined in this study, this article provides a preliminary description of this cohort, potentially for future analysis with health outcomes.

## Religion/Spirituality and Cognitive Health in the U.S.

Investigators in the departments of nursing at the University of Iowa, University of Pennsylvania, and School of Public Health at Johns Hopkins University conducted a cross-sectional analysis of 1,041 community-dwelling older adults participating in the Philadelphia Healthy Brain and Aging cohort study. The purpose was to examine aspects of religion/spirituality (R/S) and cognitive scores separately by gender and race to determine gender/race-specific variations. R/S was assessed using the 4-item Lukwago Religiosity Scale (e.g., "I am often aware of the presence of God in my life") and 5 items related to R/S behaviors (e.g., "I often read religious books, magazines, or pamphlets"). Items were categorized into non-organizational religiosity (NORA: praying, often read religious books, magazines, and pamphlets), religious/spiritual coping (RSC: aware of presence of God in life, have personal relationship with God, spiritual beliefs are the foundation of my whole approach to life), and religious healing (RH: "When I am ill, I pray for healing"). Cognitive functioning was assessed by the MoCA. **Results**: The majority of participants were Black (55%), women (56%), and had a mean age of 69 years. The average MoCA score was 25.0. In models adjusting for race, age, gender, educational level, financial constraints, and multiple chronic conditions, non-organizational R/S was inversely related to cognitive function (b=-0.153, p<0.05); R/S coping was positively associated with cognitive function (b=0.278, p<0.01), and R/S healing was unrelated to cognitive function (b=-0.177, p=ns). When analyses were stratified by gender, significant effects were found only in women (NORA: b=-0.17, p<0.05; RSC: b=0.454, p<0.01; and RH: b=-0.32, p<0.05). When analyses were stratified by race, effects in African-Americans were stronger (NORA: b=-0.123, p=ns; RSC: b=0.443, p<0.01; and RH: -0.393, p<0.05) compared to Whites (NORA: b=-0.139, n=ns; RSC: b=0.226, p<0.01; and RH: b=-0.223, p=ns). Researchers concluded: "Associations between religious and spiritual facets and cognitive health differ across gender and race; longitudinal studies are needed."

*Citation*: Britt, K. C., Boateng, A. C. O., Nwadiogbu, C., Ashida, S., Tranel, D., Thorpe Jr, R. J., & Dahodwala, N. (2025). Facets of religion/spirituality and cognitive health: association variations across gender and race among older adults. Religions, *16*(9), 1204.

*Comment*: This initial cross-sectional report is an important one, from which longitudinal associations will ultimately be reported.

## Church-Academia Model

Authors from Yale University and other local institutions describe their development and implementation of the Church and Academia Model, which was a collaborative research project designed to examine the role of devotional practices and their potential use as tools to enhance the coping skills of patients with chronic pain. The team included theologians, researchers, and healthcare providers, including clinical pain psychologists. These researchers have developed a new psychometric measure of pain

titled the Pain-related PRAYER scale (PPRAYERS), which was designed for use at the bedside. The authors concluded: "In this report, we describe a novel collaborative prototype of pastoral workers and clinical researchers that is faithful to the principles of participatory research. We have coined the term Church and Academia Model to describe what we consider an ideal fit within the emergent arena of the knowledge exchange paradigm."
*Citation*: Illueca, M., Meints, S. M., Miller, M. M., Osaji, D., & Doolittle, B. R. (2025). The church and academia model: New paradigm for spirituality and mental health research. Religions, *16*(8), 998.
*Comment*: This is an interesting description of a collaborative project designed to assess and address chronic pain through collaboration of a team of professionals from a variety of disciplines.

### Cognitive Therapy for Moral Injury

Psychologists in the United Kingdom describe how to adapt cognitive therapy for PTSD (CT-PTSD) to treat religious persons presenting with moral injury-related PTSD. Detailed case examples are provided to show how to adapt CT-PTSD so as to integrate patient's religious beliefs in order to address moral conflicts and transgressions. The authors concluded: "Using 'downward-arrowing' and Socratic questioning skills can help therapists to identify and formulate when a patient's religious beliefs and practices may interact with trauma-related negative appraisals and cognitive/behavioral coping strategies. Using a curious stance, therapists can support patients to learn and draw on religious information of importance to them and integrate this into their treatment."
*Citation*: Wakelin, K. E., & El-Leithy, S. (2025). Cognitive therapy for moral injury in post-traumatic stress disorder: integrating religious beliefs and practices. The Cognitive Behaviour Therapist, *18*, e2.
*Comment*: This is one of the first reports from the United Kingdom to acknowledge moral injury and present a therapeutic approach for addressing it in the setting of PTSD.

## NEWS

### Duke University's Monthly Spirituality and Health Webinar via Zoom

Our Center's monthly spirituality and health research seminars are now being held by Zoom, and should be assessable to participants wherever they live in the world that supports a Zoom platform. All persons who receive our E-newsletter will be sent a link to join the seminar approximately one week before the seminar is held. When you receive this link, please save the link and forward it to your colleagues and students. This month's seminar will be held on Tuesday, November 11, 2025, at 12:00-1:00 EST (New York time), and will be delivered by **Jennifer Wortham, Dr.PH, Harvard University Program on Human Flourishing, & Kathryn Kraft, PhD, Global Research Technical Director, World Vision**. The title of their presentation is: **"Hope as a measure of God's love in children."** In addition, on Tuesday, November 18, 2025, at 12:00-1:00 EST (New York time), **Anthony N. Galanos, M.D., Professor of Medicine, Duke University Medical Center**, will give a presentation titled **"Grief 101: Supporting the Clinician."** PDFs of the Power Point slides for download and full video recordings of most past webinars since July 2020 are available at https://spiritualityandhealth.duke.edu/index.php/education/seminars/.

## SPECIAL EVENTS

### Online Integrating Spirituality into Patient Care Workshop (Nov 8, 2025)

We will be holding a workshop on Integrating Spirituality into Patient Care via Zoom on **Saturday, Nov 8,** open to anyone in the world with online access. Similar to the in-person workshop held in August of each year, this program is designed specifically for those health professionals, chaplains, and clergy from all faith traditions who wish to integrate spirituality into the care of patients or enhance the health of congregants, or to integrate spirituality into their work or job (even if not in the healthcare area). As indicated above, we are conducting this workshop to comprehensively deal with the why, how, and when of integrating spirituality into the care of patients and other work settings. For more information, contact Dr. Koenig at Harold.Koenig@duke.edu or go to https://sites.duke.edu/csth/files/2025/08/11-8-25-Integrating-Spirituality-into-Patient-Care-Workshop.pdf.

### Online Faith and Flourishing in Marriage Workshop (Nov 22, 2025)

Register now for our 8-hour Faith & Flourishing in Marriage workshop to be held on **Saturday**, **Nov 22,** by Zoom. This workshop is intended for those who want to improve their marital relationship, whether there are problems in the relationship or whether couples simply want to improve the quality of an already good marriage. Married or engaged couples, life coaches, counselors, chaplains, clergy, and others who provide care to those who are married or who are planning to be married will find practical, useful tools to enhance the marital relationship. The content is based on time-tested psychological, social, behavioral, and spiritual principles that have led to long-lasting and flourishing marriages, despite the many obstacles that often stand in the way. The health of a society depends on the health of the family, and the health of the family depends on the health of the marriage. This workshop promises to provide insights that will help to improve a marriage, while at the same time avoiding the issues of confidentiality and confrontation involved in counseling that prevent many couples from seeking help. The workshop is also an excellent first step that may lead to in-person counseling if needed, or may may be sufficient on its own. For more information, contact Dr. Koenig at Harold.Koenig@duke.edu or go to https://sites.duke.edu/csth/files/2025/08/11-22-25-Faith-Flourishing-in-Marriage-Workshop.pdf.

### Online Spirituality and Health Research Workshop (Dec 6, 2025)

For those who cannot come to Durham, North Carolina, to attend our 5-day research workshop, we are providing an 8-hour online spirituality and health research workshop via Zoom that researchers from anywhere in the world can attend. Modeled after our 5-day summer research workshop, we will be holding this 1-day workshop on **Saturday, Dec 6**. This workshop is designed for healthcare professionals (physicians, nurses, social workers, rehabilitation therapists, etc.), chaplains (healthcare and military), mental health professionals (counselors, psychologists, pastoral counselors), students of every type (high school, undergraduate, graduate, etc.), community clergy, and anyone else interested in learning about, designing, conducting, and/or publishing research on religion, spirituality and health. For more information, contact Dr. Koenig at Harold.Koenig@duke.edu or go to https://sites.duke.edu/csth/files/2025/08/Duke-University-SH-Research-Workshop-12-6-25.pdf.

### Online Moral Injury Update Workshop (Feb 7, 2026)

We will be updating the topic of moral injury (MI) in a workshop to be held on **Saturday**, **Feb 7**. There is a rapidly growing volume of information about and interest in this clinical syndrome, which involves the internal emotional distress experienced as a result of transgressing moral values. While initially received attention in active-duty military and veterans following combat operations, MI has now been recognized in first responders, healthcare professionals, and others exposed to severe trauma. This 8-hour workshop is designed for chaplains (healthcare and military), healthcare professionals (physicians, nurses, social workers, rehabilitation therapists, etc.), community clergy, mental health professionals (counselors, psychologists, pastoral counselors), students of every type (high school, undergraduate, graduate, etc.), and anyone else interested in the topic of moral injury, the distressing emotions associated with it, and the devastating consequences that can result. For more information, contact Dr. Koenig at Harold.Koenig@duke.edu.

### Online Faith and Human Flourishing Workshop (May 16 and June 20, 2026)

Human Flourishing is the abundant life that is possible, but so difficult to experience on a consistent basis. Sign up now for this 2-day workshop (Saturday, May 16, and Saturday, June 2026) and learn about eight practices that lead to the abundant life. This workshop provides knowledge about and tools on how to create *flourishing lives* (characterized by happiness/life satisfaction, meaning and purpose, character and virtue, healthy social connections, and mental and physical health) and *flourishing communities* (healthcare, school/college, church, etc.). The workshop is intended for mental health professionals (life coaches, counselors, psychologists), chaplains (military, VA, and hospital), clergy (Christian primarily, but those from other faith traditions as well), health professionals (physicians, nurses, social workers, rehabilitation specialists), students in the health professions, and anyone interested in the practices that lead to a flourishing life. This workshop is designed to equip those in the helping professions with the skills necessary to live the abundant life themselves and guide others to do so in the midst of trial, trauma, and loss. For more information, contact Dr. Koenig at Harold.Koenig@duke.edu.

### Spirituality and Health Research Workshop (Aug 10-14, 2026, on-site)

Still time to register for our 22nd annual 5-day Duke University summer research workshop to be held in-person in Durham, North Carolina. For more information, see https://spiritualityandhealth.duke.edu/index.php/5-day-summer-research-course/). For an article on how to obtain research training on religion, spirituality and health, specifically with regard to this workshop, go to: https://rdcu.be/ceFH4.

### Integrating Spirituality into Patient Care Workshop (Aug 15, 2026, on-site)

Register for our 1-day Duke University workshop on Integrating Spirituality into Patient Care to be held in-person in Durham, North Carolina, on **Saturday, August 15** (following our 5-day Spirituality And Health Research Workshop on August 10-14). Because our 5-day research workshop focuses on conducting research and career development in the area of religion, spirituality and health, we do not have sufficient time during that workshop to address clinical issues and applications. Therefore, we are holding a separate day to comprehensively deal with why, how, and when to integrate spirituality into the care of patients and other work settings. For more information, contact Dr. Koenig at Harold.Koenig@duke.edu or go to https://sites.duke.edu/csth/files/2025/08/8-15-26-Integrating-Spirituality-into-Patient-Care-Workshop.pdf.

## RESOURCES

Books

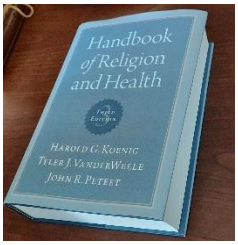
### When Hurting People Come to Church: How People of Faith Can Help Solve the Mental Health Crisis

(Tyndale Refresh publishers, September 2025)

From the publisher: "People are hurting at a scale we've never seen. They're dealing with an onslaught of issues like anxiety, grief, mental illness, family troubles, and hopelessness. Pastors and counselors can't see everyone in need. This book can help. Based on national research with more than 2,000 church leaders, social researcher and bestselling author Shaunti Feldhahn and psychologist and professor Dr. James Sells show how this is the church's moment –and present a tested vision that is already thriving in churches of every size across the country! We have an incredible opportunity to bring healing to the hurting, take the load off of the already-too-busy pastor and counselor, and grow healthy church communities of care—for now and many years to come. Today, we face a dramatic rise in every psychological and spiritual need, just as affordable counseling solutions are more difficult to find. For perspective, 25 million people—more than the population of Florida—are not getting help for severe anxiety alone. Enter the church and millions of Christian lay people who understand brokenness, grace, and the power of relationship. In every community, the church has the opportunity to be a key place people go for help. In fact, church growth experts describe this type of church care ministry as the evangelism, discipleship, and church growth method of the 21st century. This book will share how this works, and equip you as a busy leader to: understand the mental health crisis in your community; raise up motivated lay people within the church to help address the spiritual and emotional needs of the hurting; partner with counselors and other mental health professionals most effectively; organize the church's time and resources to reach the most people, while freeing you to step in where you are most needed; and grow your outreach to your community. Don't miss this opportunity to meet people's needs, grow your people, and grow your church." Available for $18.78 (hardcover) or $12.99 (Kindle) at https://www.amazon.com/When-Hurting-People-Come-Church/dp/B0DYYQ36XP/.

### Faith in Motion: How Religion Inspires Physical Activity (Wipf & Stock, 2025)

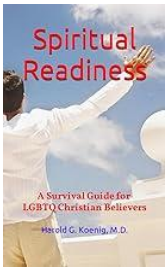
*Faith in Motion* examines how faith, values, and practices influence patterns of physical activity and health. Based on original mixed-methods research with Seventh-day Adventists in the United Kingdom, Dr Ottey demonstrates how everyday movements, walking, stretching, caregiving, recreation, and Sabbath rest, are imbued with spiritual meaning and function as embodied disciplines. These practices not only enhance physical well-being but also cultivate resilience, deepen community bonds, and integrate body, mind, and spirit. The book situates empirical findings within a broader dialogue between theology, spirituality, and health sciences, offering a fresh perspective on how religion shapes health behaviours. By bridging the gap between belief and behaviour, *Faith in Motion* provides evidence-based insights for health professionals, faith leaders, and scholars seeking to understand the role of spirituality in holistic wellbeing. Available for $23.00 (paperback) at https://www.amazon.com/dp/B0FT1JRP9F/.



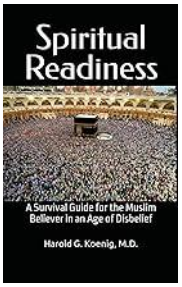

**Handbook of Religion and Health, 3rd Edition**
(Oxford University Press, 2024, 1086 pages)
From the publisher: "The Handbook of Religion and Health has become the seminal research text on religion, spirituality, and health, outlining a rational argument for the connection between religion and health. For the past two decades, this handbook has been the most cited of all references on religion and health. This Third Edition is the most scientifically rigorous edition to date, covering the best research published through 2021 with an emphasis on prospective studies and randomized controlled trials. This volume examines research on the relationship between religion and health outcomes, surveys the historical connections between religion and health, and discusses the distinction between the terms "religion" and "spirituality" in research and clinical practice. It reviews research on religion and mental health, literature on the mind-body relationship, and develops a model to explain how religious involvement may impact physical health through the mind-body mechanisms. It also explores the direct relationships between religion and physical health, covering such topics as immune and endocrine function, heart disease, hypertension and stroke, neurological disorders, cancer, and infectious diseases; and examines the consequences of illness including chronic pain, disability, and quality of life. Additionally, most of its 34 chapters conclude with clinical and community applications making this text relevant to both health care professionals and clergy. This book is the most insightful and authoritative resource available to anyone who wants to understand the relationship between religion and health." Available for $183.50 (hardcover new) at https://www.amazon.com/Handbook-Religion-Health-Harold-Koenig/dp/0190088850/.

## Spiritual Readiness Series

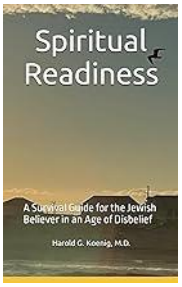

**Spiritual Readiness: A Survival Guide for the Christian Believer in an Age of Disbelief**
(Amazon Kindle, 2023, updated March 25, 2024, 165 pages)
For Christian believers (Protestant, Catholic, Orthodox). Available for $8.99 (paperback and Kindle) at https://www.amazon.com/Spiritual-Readiness-Survival-Christian-Disbelief/dp/B0CP42X91N/.



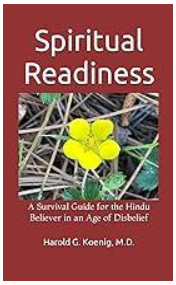

**Spiritual Readiness: A Survival Guide for LGBTQ Christian Believers**
(Amazon Kindle, published March 25, 2024, 183 pages)
For LGBTQ Christian believers (Protestant, Catholic, or Orthodox). Available for $7.99 (paperback and Kindle) at https://www.amazon.com/dp/B0CZ3S6SZ1/.



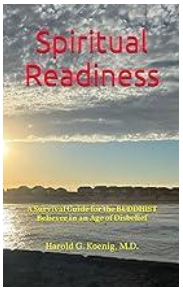

**Spiritual Readiness: A Survival Guide for the Muslim Believer in an Age of Disbelief**
(Amazon Kindle, 2024, updated March 1, 2024, 163 pages)
For Muslim believers (Sunni, Shia, Sufi, Ibadi). Available for $8.99 (paperback and Kindle) at https://www.amazon.com/Spiritual-Readiness-Survival-Believer-Disbelief/dp/B0CR6TM4W3/.



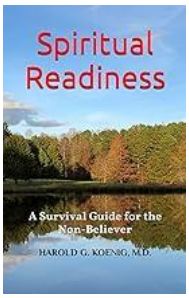

**Spiritual Readiness: A Survival Guide for the Jewish Believer in an Age of Disbelief**
(Amazon Kindle, updated March 1, 2024, 166 pages)
For Jewish believers (Reform, Conservative, Orthodox). Available for $8.99 (paperback and Kindle) at https://www.amazon.com/Spiritual-Readiness-survival-believer-disbelief/dp/B0CRQG7Y8K/.




**Spiritual Readiness: A Survival Guide for the Hindu Believer in an Age of Disbelief**
(Amazon Kindle, 2024, updated March 1, 2024, 178 pages)
For Hindu believers based on the Bhagavad-Gita. Available for $7.84 (paperback/Kindle) at https://www.amazon.com/dp/B0CVQ59D4N/.




**Spiritual Readiness: A Survival Guide for the Buddhist Believer in an Age of Disbelief**
(Amazon Kindle, 2024, published March 7, 2024, 197 pages)
For Buddhist believers (*Mahayana, Theravada, Vajrayana, and Western Buddhists*). Available for $8.99 (paperback/Kindle) at https://www.amazon.com/dp/B0CXHZ1DF7/.




**Spiritual Readiness: A Survival Guide for the Non-Believer**
(Amazon Kindle, 2024, published January 26, 112 pages)
For non-believers (atheists, agnostics, humanists). Available for $7.00 (paperback and Kindle) at https://www.amazon.com/Spiritual-Readiness-Survival-Guide-Non-Believer/dp/B0CTC27JNF/.

Others

**Spiritual Readiness: A Survival Guide for Pastors**
(Amazon Kindle, October 2023, 216 pages)
For Christian pastors (Protestant, Catholic, Orthodox). Available for $9.99 (paperback and Kindle) at https://www.amazon.com/dp/B0CLGD5C9K.

**Spiritual Readiness: Essentials for Military Leaders and Chaplains**
(Amazon Kindle, 2022, 286 pages)
For military leaders and chaplains seeking to build the spiritual readiness of active-duty service members. Available on Amazon Kindle for $0.99 and paperback for $7.22 at https://www.amazon.com/Spiritual-Readiness-Essentials-Military-Chaplains/dp/B0BBY2JLXB.

**Moral Injury: A Handbook for Military Leaders and Chaplains**
(Amazon Kindle, 2023, 344 pages)
Moral Injury (MI) is a term used to describe a constellation of persistent symptoms that result from transgressing moral and ethical boundaries. MI involves painful and often disabling emotions that are manifested by psychological, spiritual, and religious symptoms. This book with a diagnosis of major depression and generalized anxiety disorder provides preliminary criteria for MI as a disorder for future inclusion in DSM and ICD diagnostic classification systems. In this book, we provide information for military leaders and chaplains about the diagnosis, prevention, and treatment of MI. Warrior readiness for combat operations and for reintegration into society after departure from the military, is dependent on the role that military and VA chaplains play. Available on Amazon Kindle for $0.99 and paperback for $8.67 at: https://www.amazon.com/dp/B0BRJK1PVB.

**Religion and Mental Health: Research and Clinical Applications**
(Academic Press, 2018) (Elsevier)
This 384 page volume summarizes the latest research on how religion helps people cope with stress, covering its relationship to depression, anxiety, suicide, substance abuse, well-being, happiness, life satisfaction, optimism, generosity, gratitude and meaning and purpose in life. It integrates research findings with best practices for treating mental health disorders in religious clients with depression, anxiety, posttraumatic stress disorder, and other emotional (and neuropsychiatric) problems. Available for $55.23 (paperback, used) at https://www.amazon.com/Religion-Mental-Health-Research-Applications-dp-0128112824/dp/0128112824/

## Religion and Mental Health Series

**Protestant Christianity and Mental Health:** Beliefs, Research and Applications
(part of the Religion and Mental Health Book Series; Amazon: CreateSpace Platform, 2017)
Available for $7.50 at: https://www.amazon.com/dp/1544642105/

**Catholic Christianity and Mental Health:** Beliefs, Research and Applications
(part of the Religion and Mental Health Book Series; Amazon: CreateSpace Platform, 2017)
Available for $7.50 at: https://www.amazon.com/Catholic-Christianity-Mental-Health-Applications/dp/1544207646

**Islam and Mental Health:** Beliefs, Research and Applications
(part of the Religion and Mental Health Book Series; Amazon: CreateSpace Platform, 2017)
Available for $7.50 at: https://www.amazon.com/Islam-Mental-Health-Research-Applications/dp/1544730330.

**Hinduism and Mental Health:** Beliefs, Research and Applications
(part of the Religion and Mental Health Book Series; Amazon: CreateSpace Platform, 2017)
Available for $7.50 at: https://www.amazon.com/dp/1544642105/

**Judaism and Mental Health:** Beliefs, Research and Applications
(part of the Religion and Mental Health Book Series; Amazon: CreateSpace Platform, 2017)
Available for $7.50 at: https://www.amazon.com/Judaism-Mental-Health-Research-Applications/dp/154405145X/

**Buddhism and Mental Health:** Beliefs, Research and Applications
(part of the Religion and Mental Health Book Series; Amazon: CreateSpace Platform, 2017)
Available for $7.50 at https://www.amazon.com/dp/1545234728/

Research
**Spirituality & Health Research: Methods, Measurement, Statistics, & Resources**
(Templeton Press, 2011)
This book summarizes and expands the content presented in the Duke University's Annual Summer Research Workshop on Spirituality and Health. Available for $44.76 (paperback, used) at: http://www.amazon.com/Spirituality-Health-Research-Measurements-Statistics/dp/1599473496/

## Integrating Spirituality into Patient Care

### CME/CE Videos

Five professionally produced 45-minute videos on **why and how** to "integrate spirituality into patient care" are now available on our website (*for free*, unless CME/CE is desired). Videos are targeted at physicians, nurses, chaplains, and social workers in an effort to help them form **spiritual care teams** to provide "whole person" healthcare that includes the identifying and addressing of spiritual needs. Go to: https://spiritualityandhealth.duke.edu/index.php/cme-videos/.

DukeHealth

**In support of improving patient care, the Duke University Health System Department of Clinical Education and Professional Development is accredited by the American Nurses Credentialing Center (ANCC), the Accreditation Council for Pharmacy Education (ACPE), and the Accreditation Council for Continuing Medical Education (ACCME), to provide continuing education for the health care team.**

JOINTLY ACCREDITED PROVIDER™
INTERPROFESSIONAL CONTINUING EDUCATION

**Category 1**: Duke University Health System Department of Clinical Education and Professional Development designates this CME activity for a maximum of 3.75 *AMA PRA Category 1 Credit(s)*™. Physicians should claim only credit commensurate with the extent of their participation in the activity.
**Nurse CE:** Duke University Health System Department of Clinical Education and Professional Development designates this activity for up to 3.75 credit hours for nurses. Nurses should claim only credit commensurate with the extent of their participation in this activity.

## TRAINING OPPORTUNITIES

### Full Scholarships to Attend Research Training on Religion, Spirituality and Health

A new Templeton scholarship program is now active (2025-2029) that provides full scholarships to promising graduate students (**post-doctoral students or pre-doctoral students in PhD program**). Eligible for these full scholarships to attend our 5-day Spirituality and Health Research Workshop in **2026** (August 10-14) will be **graduate students living in third-world underdeveloped countries** in Africa, Central and South America (including Mexico), Eastern Europe and North Asia (Russia and China), and portions of the Middle East, Central and East Asia. These scholarships cover the $1300 tuition, up to $1500 in international travel costs, $500 in hotel expenses, and $400 in living expenses (total $3700). For more information, go to https://spiritualityandhealth.duke.edu/files/2025/08/2026-Full-Scholarship-Application.pdf or contact Dr. Koenig at harold.koenig@duke.edu.

### Certificate in Health Ministry

The Meros Center Community Health Ministry certificate is now approved to earn up to 60 hours of nursing continuing education. This online certificate will give you the theory and skills to conduct community assessments and design a community health ministry strategy for your organization or church. Through this certificate, you will learn how to engage with community, church, and health leaders exploring practical community engagement concepts, social, economic, and behavioral determinants of health, and motivational interviewing. Using a participatory learning approach, you will discover and master community-centered health strategies, broaden your understanding of cultures, and sharpen your ability to engage with communities while addressing serious health concerns. The content is formatted into three online self-study courses. Certification requires use and demonstration of some of the tools you will learn. Sign up for the CHM certificate program here: https://wlc-meros.catalog.instructure.com/programs/community-health-ministry-certificate-program.
For any questions, please contact: training@meroscenter.org.

### Winter 2026 Round of Online Support Program for Chaplains, Congregational Clergy, and Mental Health Professionals (Albert and Jessie Danielsen Institute, Boston University)

Are you feeling lonely? Burnt out? Longing for something more than just "self-care"? Join a free, empirically based personal and professional formation space for current religious leaders. Building on support groups offered in partnership with the Chaplaincy Innovation Lab during the pandemic, Boston University's Danielsen Institute has developed an 8-week online program—with group and individual formats—that offers a transitional space for reflection, respite, connection, and growth. Interested? Click here [bostonu.qualtrics.com] to complete a brief interest form, and someone from the team will be in touch with you. The program is set to run late-January through March 2026.

### Theology, Medicine, and Culture Initiative

TMC's hybrid Certificate in Theology and Health Care (CTHC) offers robust and practical theological formation for clinicians seeking to inhabit contemporary medicine and health care faithfully and creatively. Through two residential weeks of study at Duke (one in August, one in January) and two semesters of online learning with TMC faculty, clinicians discover manifold ways that Christian faith matters for health care while remaining embedded in their local contexts.

The hybrid CTHC has two tracks: the Health Care Track and the Mental Health Track. Through graduate coursework, formation seminars, and mentorship, the CTHC Mental Health Track will engage mental health clinicians in any discipline who desire to deepen and to strengthen their practice by connecting their healing work to the resources of Christian faith. Specifically, the program will appeal to clinical psychologists (PhD, PsyD), clinical social workers (LCSW or equivalent), marriage and family therapists (LMFT or equivalent), licensed professional counselors (LPC or equivalent), psychiatric nurse practitioners or physician assistants, psychiatrists (MD or DO), and licensed substance use counselors. For more information on both these programs, go to: https://tmc.divinity.duke.edu/

## Templeton Foundation Online Funding Inquiry

The OFI (online funding inquiry) deadline for grants is **August 14, 2026**. The Foundation will communicate their decision (rejection or invitation to submit a full proposal) for all OFIs by October 9, 2026. Full proposals will be due January 15, 2027, with notification of a decision on July 9, 2027. Therefore, researchers need to think "long-term," perhaps collecting pilot data in the meantime, with or without funding support. JTF's current interests on the interface of religion, spirituality, and health include: (1) support the continued integration of religion, spirituality, or faith within the practice of healthcare (including mental health and social services); (2) facilitate community-based research designs that expand our understanding of religion and spirituality as a social determinant of health; and (3) examine the impact of faith-based organizations on the health of communities. For more information, go to: https://www.templeton.org/project/health-religion-spirituality and https://www.templeton.org/funding-areas/religion-science-and-society.

## 2025 CSTH CALENDAR OF EVENTS…

### November

11/3-5 **Global Positive Prime Summit**
Boston, Massachusetts (live, in-person)
**Title**: Religion, Spirituality and Health: The Key to Human Flourishing
**Speaker: Dr. Koenig, Dr. Post, and many others**
**Contact:** Mayumi Kazu (mayumi@positiveprime.com)

11/8 **Integrating Spirituality into Patient Care Workshop**
8:45A-5:15P EST (New York time, online by Zoom)
**Title**: Integrating Spirituality into Patient Care
**Speaker: Dr. Koenig**
**Contact:** Harold G. Koenig (Harold.Koenig@duke.edu)

11/11 **Spirituality and Health Research Seminar**
12:00-1:00 EST (New York time, online by Zoom)
**Title**: Hope as a measure of God's love in children
**Speakers: Jennifer Wortham, Dr.PH**, Harvard University Program on Human Flourishing, & **Kathryn Kraft, PhD**, Global Research Technical Director, World Vision
**Contact:** Harold G. Koenig (Harold.Koenig@duke.edu)

11/17 **Continuing Professional Development, Department of Psychiatry, Western University, London**
London, Canada (online by Zoom)
**Title**: Religion, Spirituality and Mental Health: Research and Clinical Applications
**Speaker: Dr. Koenig**
**Contact:** Varinder Dua (Varinder.Dua@sjhc.london.on.ca)

11/18 **Spirituality and Health Research Seminar**
12:00-1:00 EST (New York time, online by Zoom)
**Title**: Grief 101: Supporting the Clinician
**Speaker: Anthony Galanos, MD,** Professor of Medicine, Duke University Medical Center
**Contact:** Harold G. Koenig (Harold.Koenig@duke.edu)

11/22 **Faith and Flourishing in Marriage Workshop**
8:00A-5:15P EST (New York time, online by Zoom)
**Title**: Faith and flourishing in marriage
**Speaker: Dr. Koenig**
**Contact:** Harold G. Koenig (Harold.Koenig@duke.edu)


**PLEASE Partner with us to help with this work:**
https://spiritualityandhealth.duke.edu/index.php/partner-with-us/