

# CROSSROADS...

Exploring research on religion, spirituality and health

Newsletter of the Center for Spirituality, Theology & Health

Volume 1

Issue 8

Feb 2012

This newsletter provides updates on research, news and events related to spirituality and health, including **funding opportunities (four in this issue)**. 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.

## LATEST RESEARCH OUTSIDE DUKE

### Appropriateness of Patient-initiated vs. Clinician-initiated Prayer in Advanced Cancer

Researchers at Harvard's Dana-Farber Cancer Institute did a multi-site survey of cancer patients (n=70), oncology physicians (n=206), and oncology nurses (n=115) at Beth Israel Deaconess Medical Center, Boston Medical Center, Brigham and Women's Hospital, and Dana-Farber Cancer Institute (Boston hospitals), asking questions about the appropriateness of patient-practitioner prayer. This study includes a relatively large sample of health professionals, and considers both patient-initiated prayer and practitioner-initiated prayer. The appropriateness of these two types of prayer (with health practitioner leading the prayer in both cases) was asked. Response options were never, rarely, occasionally, frequently, almost always, and always. With regard to *patient-initiated* prayer, 71% of patients (47% Catholic, average age 60 years, 51% female) said this was at least occasionally appropriate (and 38% always or almost always appropriate); 83% of nurses (63% Catholic, average age 46 years, 98% female) said it was at least occasionally appropriate (26% always or almost always appropriate); and 65% of physicians (24% Catholic, 26% Jewish, average age 41 years, 42% female) said it was at least occasionally appropriate (18% always or almost always appropriate, but 36% never or only rarely appropriate). With regard to *practitioner-initiated* prayer, 64% of patients said it was at least occasionally appropriate (30% always or almost always appropriate); 76% of nurses said it was at least occasionally appropriate (18% always or almost always appropriate); and 59% of physicians reported it was at least occasionally appropriate (15% always or almost always appropriate, but 41% never or rarely appropriate). Importance of religion to the respondent (patient, nurse or physician) was a strong predictor of feeling that prayer was appropriate regardless of whether patient or practitioner-initiated.

*Citation:* Balboni MJ, Babar A, Dillingier J, Phelps AC, George E, Block SD, Kachnic L, Hunt J, Peteet J, Prigerson HG, VanderWeele TJ, Balboni TA (2011). "It depends": viewpoints of patients, physicians, and nurses on patient-practitioner prayer in the setting of advanced cancer. *Journal of Pain and Symptom Management* 41(5):836-847

*Comment:* What is particularly significant about this study was that the question about the appropriateness of prayer was asked in a setting of advanced cancer and terminal illness, i.e., the situation in which prayer would be most likely considered appropriate. Of the three groups, oncology physicians were the least likely to feel

that either patient-initiated or clinician-initiated prayer was appropriate (41% indicating that the latter was rarely or never appropriate). However, the study did take place in an area of the country (the Northeast) considered to be less religious than other parts of the U.S., and religiosity was a strong predictor (for patients, nurses, and physicians) of believing that patient-practitioner prayer was appropriate.

### Supporting Patients Spiritual Needs and End-of-Life Health Care Costs

Harvard researchers report that failure to adequately support the spiritual needs of advanced cancer patients predicts significantly greater health care costs during the last week of life. In a prospective, multi-site study of 339 advanced cancer patients recruited from outpatient settings and followed to death, investigators found that patients whose spiritual needs were inadequately supported by clinic staff were less likely to receive a week or more of hospice (54% vs. 73%, p=0.01) and were more likely to die in an intensive care unit (5.1% vs. 1.0%, p=0.03). Costs in the last week of life were \$4,947 for the inadequately supported patients, compared to \$2,833 for patients who indicated that their health care team adequately supported their spiritual (p=0.03). This was especially true for minorities (\$6,533 vs. \$2,276, p=0.02) and for those who indicated high religious coping (\$6,344 vs. \$2,431, p=0.005). Researchers concluded that cancer patients whose spiritual needs are not well supported by the health care team incur higher medical costs towards the end of life.

*Citation:* Balboni T, Balboni M, Paulk ME, Phelps A, Wright A, Peteet J, Block S, Lathan C, VanderWeele T, Prigerson H (2011). Support of cancer patients' spiritual needs and associations with medical care costs at the end of life. *Cancer* 117(23): 5383-5391  
*Comment:* These findings are from well-designed and executed study conducted by a highly prestigious team of health care researchers. According to the Organization for Economic Co-operation and Development (OECD), healthcare expenditures in the U.S. exceed all other developed countries, over 50% higher per capita than the next highest per capita spender. The rate of increase in healthcare expenditures each year in the U.S. (from 9% of GDP in 1980 to 16% of GDP in 2008) is one of the highest among all OECD countries. With a national debt of over \$15.1 trillion (1/2/12), yearly federal deficits averaging 1.6 trillion (Oct 2008-Sept 2011), and an aging population living longer with more chronic illness and healthcare needs, findings such as those reported here are extremely important for the U.S. economy.

## NEWS

### Special Issue of *Depression Research & Treatment*: Call for Papers (Deadline Approaching)

Call for Papers for a special issue of the academic peer-reviewed journal *Depression Research and Treatment* (<http://www.hindawi.com/journals/drt/si/rsd/>). The focus of this issue (*Religious and Spiritual Factors in Depression*) is spiritual and religious factors in the development, course, and treatment of depression. Center will pay the \$1000 article processing fee for all accepted articles, so there will be no charge for authors. We

EXPLORE...in this issue

1 LATEST RESEARCH

1-2 NEWS

2 SPECIAL EVENTS

2-3 FUNDING Opportunities & CALENDAR

encourage investigators to submit their research for publication by the **February 3, 2012** due date.

### **Handbook of Religion and Health (Second Edition)**

According to Google Scholar, the 1<sup>st</sup> edition of the *Handbook*, published in 2001, is the most cited of any book or research article on religion and health in the past forty years (Google 2011). This new edition is completely re-written, and in fact, really serves as a second volume to the 1<sup>st</sup> edition. The 2<sup>nd</sup> edition focuses on the latest research published since the year 2000 and therefore complements the 1<sup>st</sup> edition that examined research prior to that time. Both volumes together provide a full survey of research published from 1872 through 2010 -- describing and synthesizing results from over 3,000 studies. The Second Edition covers the latest original quantitative scientific research, and therefore will be of greatest use to religion/spirituality-health researchers and educators. Together with the First Edition, this Second Edition will save a tremendous amount of time in locating studies done worldwide, as well as provide not only updated research citations but also explain the scientific rationale on which such relationships might exist. This volume will also be of interest to health professionals and religious professionals wanting to better understand these connections, and even laypersons who desire to learn more about how R/S influences health. Available February 29, 2012, at <http://www.amazon.com/Handbook-Religion-Health-Harold-Koenig/dp/0195335953> (\$128.50, now discounted from \$175.00)

### **Spirituality & Health Research: Methods, Measurement, Statistics, & Resources**

This book summarizes and expands the content presented in the *Duke Research Workshops on Spirituality and Health* (see below), and is packed full of information necessary to conduct research in this area. No researcher in spirituality and health should be without it. Now available at: <http://www.amazon.com/Spirituality-Health-Research-Measurements-Statistics/dp/1599473496> (\$36.04).

### **Journal of Health Care Chaplaincy** (issues available for free download)

Taylor & Francis publishers have made six articles on chaplaincy research available at the JHCC website for free download. See website <http://www.tandfonline.com/toc/whcc20/current> to download four articles from the current issue and <http://www.tandfonline.com/toc/whcc20/17/1-2> to download two articles by Kevin Flannelly and George Fitchett on use of case studies in chaplaincy.

## **SPECIAL EVENTS**

### **David B. Larson Memorial Lecture by Ken Pargament**

On March 8, 2012, Dr. Kenneth Pargament will be giving the 9th annual David B. Larson Memorial Lecture at Duke University Medical Center, Durham, North Carolina (Room 2001 Duke North). The title of his talk is *From Research to Practice: Envisioning an Applied Psychology of Religion, Spirituality, and Health*. The first part of this lecture will focus on why the movement from research to practice is especially challenging in the area of religion, spirituality and health. The second portion will present a brief rationale for conceptualizing religion, spirituality, and health as an applied field. Most of this lecture will be devoted to elaborating on a vision for an applied psychology of religion, spirituality and health. The lecture concludes with a discussion of future directions and challenges for our field. For more information, contact H. Koenig at [koenig@geri.duke.edu](mailto:koenig@geri.duke.edu). This lecture is supported by a generous grant from Dr. Jeff Levin ([www.religionandhealth.com](http://www.religionandhealth.com)). More information about Dr. Pargament, see website:

<http://www.spiritualityandhealth.duke.edu/resources/pdfs/KenPargament.pdf>.

### **Register now for 2012 Duke Spirituality & Health Research Workshops**

Register now to ensure a spot and choice of mentors in one of our research workshops on spirituality & health during the summer of 2012. Dates are July 16-20 and August 13-17. An abbreviated form of this workshop is also being offered in Switzerland on May 13-16. This is the last year that full **tuition scholarships** will be available for those with strong academic potential and serious financial hardships. For more information, see website: <http://www.spiritualityhealthworkshops.org/>.

### **2012 New Zealand Chaplains' Association Conference**

On September 3-7, the New Zealand Chaplain's Association is holding their biennial conference in Christchurch, NZ. A number of presentations will be given, including a keynote by Dr. Harold Koenig. For more information on the conference, see website: <http://www.nzhealthcarechaplains.org.nz/Conference-Conference.html>.

## **FUNDING OPPORTUNITIES**

### **Expanding the Science and Practice of Gratitude**

The Greater Good Science Center (GGSC) at the University of California at Berkeley together with Professor Robert Emmons of the University of California, Davis, announced on December 7, 2011, the launching of a \$5.9 million, three-year project to advance the study of gratitude that includes a research grant competition (funded by the John Templeton Foundation). The goals of this program are to deepen the scientific understanding of gratitude, promote evidence-based gratitude practice in schools and hospitals, and engage the public in a broader cultural conversation about the role of gratitude in society. In a \$3 million research initiative, GGSC is awarding grants for up to \$500,000 each. Researchers interested in applying will need to submit a 3-page, single-spaced letter of intent (LOI) by **February 15, 2012**. More information: <http://greatergood.berkeley.edu/expandinggratitude/>

### **New Directions in the Study of Prayer**

The Social Science Research Council re-opened their call for letters of intent on January 19. The original deadline was December 1, 2011. The new deadline is February 10. This competition is open to all disciplines for studies that will enhance knowledge of the social, cultural, psychological, and cognitive dimensions of prayer, and its origins, variations, and correlations in human life. Approximately 20 to 25 grants, ranging from \$50,000 to \$200,000 (2-year duration each) will be awarded (funded by the John Templeton Foundation). LOI (3 page) are now due **February 10, 2012**. More information: <http://www.ssrc.org/programs/new-directions-in-the-study-of-prayer/>

### **HealthCare Chaplaincy \$1.5 Million Call for Proposals**

The HealthCare Chaplaincy (HCC) in New York City has announced a call for proposals to: (1) develop and explore hypotheses about chaplains' contributions to palliative care, (2) team experienced health, behavioral and social scientists with chaplains to develop their research skills by becoming active participants in the research enterprise; and (3) involve aspiring chaplain-researchers not selected for funding in this competitive RFP, but who nonetheless show considerable promise as researchers. HCC will select, fund and support 6 to 10 interrelated and interdisciplinary research projects for up to \$1.5 million total (funded by the John Templeton Foundation). The deadline for applications is **March 15, 2012**. More information: <http://www.healthcarechaplaincy.org/templeton-research-project.html>.

### Templeton Foundation Online Funding Inquiry (OFI)

The Templeton Foundation is accepting letters of intent for research on spirituality and health (**Feb 1- Apr 16, 2012**). If the funding inquiry is approved (applicant notified by May 25, 2012), then the Foundation will ask for a full proposal that will be due May 26-Sept 4, 2012, with a decision on the proposal reached by Dec 21, 2012. More information:

<http://www.templeton.org/what-we-fund/our-grantmaking-process>

Published by the Center for Spirituality, Theology & Health  
DUMC Box 3400, Durham, NC 27710

Website: <http://www.spiritualityandhealth.duke.edu/>

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Website:  
<http://www.spiritualityandhealth.duke.edu/about/giving.html>

## 2012 CALENDAR OF EVENTS...

### February

- 9 **The Impact of Faith on Mental and Physical Health**  
Anne Borik, D.O.  
Harold G. Koenig, M.D.  
Church of the Beatitudes, 8:00A-2:00P  
555 W. Glendale Ave, Phoenix, AZ  
Parish/faith community nurses, clergy, physicians  
Contact: Denise Viker ([viker@duetaz.org](mailto:viker@duetaz.org))
- 9 **The role of faith and prayer in health and healing: What does Science have to say?**  
Harold G. Koenig, M.D.  
Pinnacle Presbyterian Church, 7:00-9:00P  
Phoenix, AZ (<http://pinnaclepres.org/>)  
Contact: Leslie "Cap" Dean ([CDean5000@aol.com](mailto:CDean5000@aol.com))
- 22 **Associations of Spirituality, Religiosity, and Spiritual Needs with Physiologic, Psychosocial and Emotional Distress in Women Undergoing Core Needle Breast Biopsy**  
Mary Scott Soo, M.D., Associate Professor, DUMC  
Division of Breast Imaging, Dept of Radiology  
DUMC Center for Aging, Durham, North Carolina, 3:30-4:30P  
Contact: Dr. Harold G. Koenig ([koenig@geri.duke.edu](mailto:koenig@geri.duke.edu))

### March

- 7 **Diagnosis and Treatment of Depression (and religious CBT)**  
Harold G. Koenig, M.D.  
Pickens Family Practice Clinic, classroom 020A  
DUMC, corner of Erwin Road and Trent Drive  
Contact: Sandy Curtin ([sandy.curtin@duke.edu](mailto:sandy.curtin@duke.edu))
- 8 **From Research to Practice: Envisioning an Applied Psychology of Religion, Spirituality, and Health**  
**The David B. Larson Memorial Lecture**  
Ken Pargament, Ph.D., Professor of Clinical Psychology  
Bowling Green State University, Bowling Green, OH  
Duke North, Room 2001, 5:00-6:30P  
Contact: Dr. Harold G. Koenig ([koenig@geri.duke.edu](mailto:koenig@geri.duke.edu))
- 28 **Pastoral Care and PTSD**  
John P. Oliver, D.Min., Chief of Chaplain Service,  
Durham Veterans Administration Hospital  
DUMC Center for Aging, Durham, North Carolina, 3:30-4:30P  
Contact: Dr. Harold G. Koenig ([koenig@geri.duke.edu](mailto:koenig@geri.duke.edu))
- 29-30 **Religion, Spirituality and Medicine**  
Harold G. Koenig, M.D.  
Cleveland Clinic, Cleveland, OH  
Contact: Dennis Kenny ([kennyd2@ccf.org](mailto:kennyd2@ccf.org))
- 31 **Spirituality and Medicine: Research and Applications**  
Evangeline Andarsio, M.D.  
Philip Diller, M.D.  
Harold G. Koenig, M.D.  
University of Dayton, Dayton, OH  
Contact: Kathleen Scheltens ([kscheltens1@udayton.edu](mailto:kscheltens1@udayton.edu))