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**SPIRITUALITY VS RELIGION:
IMPLICATIONS FOR HEALTHCARE**

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Introduction

In spite of much talk in recent decades about the waning influence of religion, most Americans claim to be religious. In recent Gallup polls, 96% of Americans said they believed in God and 58% said that religion was very important in their lives. Only 9% said that it was not important. 90% of Americans believed in Heaven, 79% in miracles, 72% in angels, and 84% claimed to believe that Jesus is God or the son of God. In addition, 27% believed in reincarnation and 23% in astrology.¹

It is clear that we are in the midst of a resurgence of interest in spirituality both inside and outside of established religious faiths. The entertainment media, after a generation of portraying the religious as buffoons or charlatans, is now making films such as "The Preacher's Wife" and television series such as "Touched by an Angel" that portray religion in a positive light. Books on spiritual topics, such as Scott Peck's *The Road Less Traveled* or Thomas Moore's *Care of the Soul*, are constantly at the top of the New York Times Bestseller List. Casual observation in any bookstore reveals that New Age spirituality, Eastern religions and the occult have also captured the imagination of American readers.

Even Harvard Medical School's Department of Continuing Medical Education sponsored a conference in Boston on "Spirituality and Healing in Medicine" in 1996. Such an event would have been unthinkable only a few years ago. A thousand people, mostly medical professionals, attended the first conference, which proved so popular that it was repeated twice in 1997 to larger audiences on the East and West coasts. At the conferences, speakers presented research findings showing mostly positive mental and physical health effects of religion.

In the past 40 years more than 200 research articles have related health outcomes to various measures of religiosity,² but this literature was largely ignored and unknown to the medical community at large. Until now. Almost overnight it has become acceptable, even fashionable, to do health research using religious variables and to think of patients as having spiritual, as well as biological, psychological and social lives.

Religious commitment or behavior correlates positively with a large variety of beneficial health outcomes, including longevity,³ lower cancer rates,⁴ overall health,⁵ life satisfaction,⁶ lower blood pressure,⁷ decreased physical and psychological symptoms,⁸ lower rates of substance abuse,⁹ and increased survival after cardiac surgery.¹⁰ The latter study is especially striking. 232 open heart surgery patients were prospectively followed

to determine the factors that contributed to their recovery and survival. The most predictive factor was the amount of strength or comfort the patients reported deriving from their religious faith. Those reporting no strength or comfort from faith had more than 3 times the risk of death as those with faith. Those reporting neither faith nor social support system had 10 times the risk of dying.

In a group of women rehabilitating from hip fractures, patients who regarded God as a source of strength and who frequently attended religious services could walk a greater distance at discharge, even when data analysis was controlled for severity of fracture.¹¹

Men who attended church regularly had half the death rate from heart disease compared to non-attenders, even when the effects of smoking and socioeconomic status were controlled.¹² Frequent church attenders who rated religion as very important had diastolic blood pressures an average of 5 mm lower than infrequent church attenders who rated religion as low importance. The results were controlled for age, smoking, socioeconomic status and weight. Even smokers who rated religion as very important were 7 times less likely to be hypertensive than their smoking non-religious counterparts.¹³

Of the studies describing effects on mental health, one of the more interesting involved comparing rates of depression in over 900 medically hospitalized men with the degree to which the men depended on their religion as a means of coping. Patients who depended heavily on religious coping had less than half the incidence of depression as those who did not.¹⁴ Two hundred of these patients were followed for 6 months after discharge and assessed for degree of social support from family and friends, physical health status, age, marital and financial status, education level and 8 other characteristics. The only characteristic that predicted better mental health six months later was the extent to which the patients relied on their religious faith to cope.¹⁵ Many additional studies are reviewed in a recent book by Harold Koenig.¹⁶

Nearly all studies measured religious beliefs, commitment or behaviors, such as importance of faith in God, and frequency of church attendance or prayer. Most of the measures make sense mainly within a Judeo-Christian context and nearly all ignore personal spirituality that is detached from religious affiliations.

It is therefore unclear how to generalize from results based on studying religious beliefs and behaviors in largely Christian U.S. study samples to members of other religions or religiously unaffiliated persons who nevertheless consider themselves spiritual. Do the reported benefits derive from the religious behaviors themselves or from the effects of an underlying spirituality for which the behaviors serve as rough markers? Do unchurched spiritual persons also receive mental and physical health benefits from their "unattached" spirituality? Does content make any difference, or are all religious belief systems equal from a health perspective?

These questions have been mostly ignored, and the distinction between religion and spirituality has been blurred. Controversy arose over these issues at the Harvard

Conferences on Spirituality and Healing.¹⁷ At the conferences it was apparent that there were a number of different understandings and definitions of “religion” and “spirituality” and that it had become fashionable in some circles to not only differentiate spirituality from religion, but to disparage all organized religions in favor of a free-floating, individualistic spirituality.

To deal with these questions will require carefully defining the domains and exploring the functions of spirituality and religion. This essay does not attempt an exhaustive review of the literature on the relationship of spirituality to religion, but rather a brief exploration of some key issues and questions: what is spirituality and how does it differ from religion? Can a person have one without the other? What is the role of religion and how does it relate to spirituality? What are the implications of these issues for healthcare and the research on religion and health?

Spirituality

Spirituality is more frequently described than defined. The word derives from the Latin *spirare*, which means, to breathe. In modern usage it includes such a wide range of human experience--traditional religions, New Age teachings, personal mystical experience and the quest for meaning in life--that researchers have not been able to agree on a universal definition that can be measured. There is no one, clear comprehensive definition of spirituality in the literature. Partly for this reason, nearly all the research on spirituality and health in fact measures religious commitment or practices.

Spirituality appears to be a multidimensional construct in which a few core concepts repeatedly emerge.¹⁸ Spirituality implies that there is a deeper dimension to human life, an inner world of the soul. It assumes that humans are fundamentally spiritual beings living in a spiritual, as well as physical, universe. Spirituality is about “the inner life or spirit of each of us as it relates to the unseen world of Spirit or of God. It’s the name we give to the dimension of seeing and living that goes far beyond the material world to deeper truths and eternal values.”¹⁹ Thus it is about “the search for the sacred.”²⁰ To the 20th century mystic Thomas Merton, spirituality included at least 2 basic concepts: “union with God” and “transformation of consciousness.”²¹ The Desert Fathers experienced spirituality as the struggle for the divine encounter and for human identity.²² It has also been described as “that range of activities in which people cooperatively interact with God.”²³ The psychiatrist Andrew Sims proposes that spirituality includes at least 5 domains: meaning in life—what a person lives for, interrelatedness, wholeness, morality, and awareness of God.²⁴

The description of spirituality proposed in this paper is a simplification and adaptation of the model proposed by LaPierre, who sees 6 dimensions along which life can be experienced as a spiritual person: “journey, transcendence, community, religion, ‘the mystery of creation,’ and transformation.”²⁵ This paper will describe spirituality using the 5 core concepts of transcendence, connection, ultimate meaning, inner journey and encounter with God.

The most fundamental concept of spirituality is that there is a transcendent dimension to life, something or someone beyond our own ego and sense experience. The experience of connection to this larger, sacred reality is what gives our lives ultimate meaning.²⁶ Thus spirituality also has to do with a sense of connectedness and interrelatedness, and with the search for meaning and purpose in life.²⁷ Spirituality has been called “That which integrates everything else into meaning,”²⁸ and described as “Having to do with the quality of the relationship to what or who is most important to us.”²⁹

Finding ourselves part of a universe with over-arching meaning and values, we sense that our own lives partake of that deep meaning and significance, and may set out on a spiritual journey or quest in search of that meaning. This journey may take the form of a search for God or “Higher Power”.³⁰ From this perspective, spirituality is a process of “soulmaking,” an inner journey toward wholeness and toward God.³¹ The classic Christian writers, such as St. Augustine in his autobiography “Confessions,” and John Bunyan in “Pilgrim’s Progress,” describe their own spiritual journeys as encounter and growth in intimacy with God.

Religion

As the search for, encounter and response to God, spirituality is an inner, personal experience, universal and without boundaries. Religion, however, is communal, particular and defined by boundaries. It is spirituality incarnated at the social and cultural level. Religion takes the boundless and binds it into the limitations of language and culture, even as it may also transform culture.

“Religion” derives from *religio*, “to bind back.” Like “spirituality,” the term “religion” has suffered from a multiplicity of definitions. Historically, “religiosity” was used in ways that were indistinguishable from what we now call “spirituality.” Now, the term “religion” is increasingly used by scholars in the narrow or even pejorative sense of institutionally based dogma, rituals and traditions. Nevertheless, the eminent researcher on religious coping, Kenneth Pargament, after reviewing the various ways of defining and describing religion, argues for a broader definition of religion as “The search for significance in ways related to the sacred,” encompassing both the personal and social, traditional and non-traditional forms of the religious search.³² Pargament uses the term “spirituality” to describe what he calls the central function of religion—the search for the sacred.³³

Researcher on religion and healthcare Dale Matthews defines religion somewhat more narrowly as “An organized system of beliefs, practices, and symbols designed to facilitate closeness to God.”³⁴ The definition of religion to be used in this paper would fall in between that of Pargament and Matthews, such that religion is any set of beliefs and practices concerning our relationship with the sacred. It may or may not be connected with an organized religious group.

If spirituality is the journey, then a religious tradition functions as a map of the territory, containing in its beliefs and symbols the accumulated wisdom of those who have traveled the way before us. However, it is possible to spend all one's time mapmaking and never take the journey, or one may try to undertake the journey on one's own, and risk getting lost.

Religion without spirituality

Religion is not necessarily in and of itself spiritual. It is clear that the beliefs, rituals and institutions of religion can take on a life of their own and exist apart from their spiritual purpose. "Mapmaking" can take the place of going on the journey. Thus religion may exist without spirituality, leaving only the empty observance of rituals and traditions for secondary gain. Allport's concept of "extrinsic" religiosity refers to the form that religiosity takes without spirituality, in which religious practices such as going to church are done for external purposes (such as to gain social advantage or make business contacts), whereas "intrinsic" religiosity refers to the form that religion takes when infused with an internalized spirituality.³⁵ It appears that intrinsic spirituality is the type that is related to positive health outcomes.³⁶

Florence Nightingale believed that religion is not an end in itself, but the means of expressing and developing spirituality. She believed that religious beliefs and practices should be evaluated based on their effectiveness toward this end.³⁷

Spirituality without religion.

It is also possible to attempt the spiritual path without the map provided by a religious faith tradition. Although spirituality is usually nurtured within the framework of a faith tradition, in the modern world we are seeing numbers of individuals whose spirituality is either loosely or not at all affiliated with an established religion. Many of these spiritually homeless have little or no religious background; others have rejected the religion in which they grew up but nevertheless find that they have spiritual aspirations. Wanting to go on the journey, they have no map ready at hand. Feeling alienated from the organized religions, and finding that much that bills itself as religion is devoid of spirituality, they strike out on their own or search for spiritual help wherever they can find it. Although not identifying with any organized religious group, the spiritual life of such individuals would nevertheless contain elements of religion under our broad definition.

Even inner, private experience is not divorced from social and historical context. Indeed, raw experience is cognitively interpreted the instant we reflect on it. We do not invent out of thin air the framework of understanding and practices, however rudimentary, that we bring to our spirituality. These come out of our cultural and religious background. As soon as we think or speak about or act upon our spirituality in any way, even to pray or meditate silently, we are instantly thrust into the historical and social world of

language and praxis, and thus religion. A “pure” spirituality that is utterly without content or practice may not even exist, and if it did, it would be difficult to measure.

The problem of measurement

As a construct, spirituality can’t be measured directly. We measure its effects and associations. Spirituality has to be operationalized to be measured. But operationalized spirituality is religion. Since any measurement instrument will have to ask about some content-ful and measurable experience, attitude, ethic, belief or practice, none of which are free of cultural and historical context, what we end up measuring is religious beliefs and practices which we hope are markers for an underlying spirituality. A culture-free measure of spirituality is as problematic as a culture-free measure of intelligence.

The easiest approach is to measure specific religious beliefs and practices with measurement tools appropriate to the religious tradition of the target population. This is the approach taken by most of the studies in the religion and health literature, nearly all of which used mostly Christian target populations.

The major measurable dimensions of religiosity have been described by Koenig as “belief”—acceptance of doctrines of a religious tradition; “ritual”—religious practices of either an organizational or non-organizational nature; “experience”—including experiences of God’s presence, affectionate relationship to God, salvational experiences, answered prayer, and divine intervention; “religious knowledge”—knowledge about the beliefs, writings and rituals that compose one’s religious tradition; and “community”—the extent to which a religion constitutes a community to its members.³⁸

If the health benefits of the religious beliefs and behaviors measured in the studies are due mainly to an underlying spirituality, then these beliefs and behaviors must be functioning as rough markers for a living, “intrinsic” spirituality. As we have seen, spirituality can exist without an organizational religious home, and religion can exist without spirituality. However, in many sample populations, there is evidently enough overlap for religious practices to serve as a marker for spirituality and still yield statistically significant effects. In one study in which the subjects were asked to describe themselves as either religious, spiritual but not religious, or both spiritual and religious, 75 % of the sample described themselves as both spiritual and religious.³⁹

How is it possible to measure the spirituality of persons who do not identify with an organized religious group or any specific faith tradition? One can look for the presence of beliefs or practices that are generally accepted as spiritual by all faith traditions, or are generic to the living core of the great religious traditions. Frequency of prayer or meditation, or degree of importance of spirituality in one’s life might be useful, but imperfect ways of getting at this information.

In an attempt to directly measure religious or spiritual experiences, Kass et al. developed the Index of Core Spiritual Experiences (INSPIRIT).⁴⁰ In addition to asking about such

things as feelings of closeness to God and frequency of religious or spiritual practices, the 7-item instrument asks about whether the subjects have experienced any of a list of 13 different occurrences such as experiences of God's presence, presence of angels, or complete joy and ecstasy. The questionnaire was careful to ask the subjects to use their own definition of God or "Higher Power". Although the instrument could not be considered religion-free, it cast a broad net. INSPIRIT scores were statistically related to increases in Life Purpose and Satisfaction and to decreases in the average frequency of medical symptoms.

The spectrum of religion

As "religion" can refer to any belief or practice arising from belief in a sacred dimension of life, under its label we can find a whole spectrum of people from the generically religious to the sectarian. At the generic end of the spectrum we find "unattached" spiritual individuals who may have had numinous experiences in nature or sense a transcendent meaningfulness to life, but identify with no specific faith tradition. Then there are "eclectic" individuals who consciously borrow concepts and practices from a variety of religious traditions but identify exclusively with none. This phenomenon has been described as "Quest" spirituality by Bateson.⁴¹

Next on the spectrum is the broad category of "attached" religiosity, beginning with those who identify with a broad religious tradition such as Christianity, using its core concepts and practices, but who claim no denominational loyalties. Next are loyal members of specific denominations, and finally, exclusivistic sects.

A high level of involvement in a specific faith community does not necessarily connote exclusivistic attitudes, however. Many individuals who enter deeply into the life of a specific faith community, adhere rigorously to its traditions and practice its spiritual disciplines, nevertheless maintain non-exclusive attitudes and an open mind to learn from those of other faith communities. Many have discovered that by entering profoundly into their own faith tradition, they discover the deep roots that connect to other traditions.

The two extremes of the religious spectrum may be unstable. At the sectarian end of the spectrum, James Fowler has described the stages by which individual members of narrowly defined faith communities tend to develop more accepting attitudes as they mature.⁴²

On the other hand, those at the generic end of the spectrum who are serious about developing their spiritual potential may discover that the spiritual teachings and disciplines of a historic faith tradition are helpful in the spiritual journey. Such individuals, having experienced a spiritual awakening, but lacking vital contact with an underlying faith tradition, may find that "the process of interpreting such an experience and investing it with rich, enduring meaning will be very difficult to sustain. That process is not at its best when it is 'solo.' The meanings proper to spiritual experience are deeper than can be accumulated in one generation."⁴³ Memorizing the map won't do a bit

of good if you don't take the journey. But if you take the journey, then the map is very helpful.

Spirituality divorced from religion would be practical if we were totally spiritual beings, but we are not. We are embodied, living in culture and community. We need language and some framework of interpretation to give our spirituality connection to the real world of people and culture in which we live. Spirituality sooner or later calls us to give the inner life expression in the outer world, enriching both the world and ourselves as we give our spirituality a home in which it can be nurtured and grow. This expression most commonly takes the form of the beliefs and practices of the religious faith community with which we are most familiar and comfortable.

Role of religious faith traditions

A religious faith tradition provides a social and conceptual setting for the personal encounter with God. It connects the inner world of spirituality to the outer world of culture and history by providing, **community, language and spiritual tools**.

Most religious traditions are embodied in a historic faith **community**, which provides social support and reinforcement for the values and practices of the religion and a sense of significance for otherwise isolated individuals. By bringing inner spiritual experience out into the world of people, it prevents other-worldly introversion at the expense of relationships and society. Otherwise there is danger of ending up with a privatized experience unconnected to the social dimension. Usually a "Sacred Text" provides the community with identity and its main teachings and stories. In turn, the community acts as the guardian of the text, and sees that it is preserved, copied and passed down to succeeding generations.

The community provides a blueprint for how life should be well-lived. It challenges our egocentricity, providing a laboratory for testing and practicing our beliefs in an environment where we are regularly brought up against the needs and shortcomings of others. As a fireplace sets limits on a fire, so that it warms the house instead of burning it down, the faith community also functions as a "fireplace" to contain the fire of the spirit, so that it does not burn harmfully out of control. The community hopefully corrects, with its collective wisdom, destructive religiosity such as was seen at Waco, or the out-of-control spirituality manifested in the Heaven's Gate mass suicide.

Religions also provide **language** and concepts for speaking about God and spiritual things. This language is of two types. The first is that of rational discourse. In its theological and philosophical teachings, a religion provides a structure that ties all of life together into a coherent framework of meaning.

But religion provides us not only with a theology, a language to communicate with the mind, but a "mythology," a language to communicate with the soul—rituals, symbols, and stories that provides the backdrop of meaning for our lives. It is through the "master

story” that the outer world of history is connected with the inner world of symbolic meaning. In master stories such as Creation, the Exodus, and the stories of Jesus, we learn who we are and what our role is in the larger scheme of things.

We are affected deeply by story and ritual because the inner person or soul speaks the non-rational, highly symbolic language of the dream and stories, ritual, drama, music, art, architecture, dance, poetry and worship. This second type of language, when it uses words at all, uses them as an artist uses paint, to paint word pictures for the imagination, to communicate concepts and experiences that are beyond words. This is why worship is full of music, poetic liturgy, stories, and rituals such as baptism and the communion service.

These means of knowing complement, rather than contradict, science and reason. Religion deals with themes that can't be answered in the domain of science and logic alone. It grapples with both the positive and negative mysteries of life, such as love, beauty and joy, as well as death, tragedy, pain, evil and injustice. It tells me that I am part of something larger than myself, something that I can't control. It gives me an appreciation of the limitations of human agency, but at the same time depicts a meaningful world and stimulates me to find and live by this meaning.

Religions provide a set of spiritual tools, “spiritual disciplines” that are helps for nurturing growth in the spiritual journey. Spiritual disciplines are structured practices which progressively bring an individual into relationship with their inner self and with God. “If farmers use farming tools to cultivate their land, practitioners use prayer and meditation to cultivate their consciousness.”⁴⁴ The disciplines are “activities of the mind and body purposefully undertaken, to bring our personality and total being into effective cooperation with the divine order.”⁴⁵

In addition to the classic Christian spiritual disciplines of prayer, meditation and devotional study of the scriptures, there are acts of service, participation in the sacraments, attendance at public worship, Sabbath-keeping, setting aside a regular devotional time, making a retreat, solitude, silence and fasting.⁴⁶ The spiritual disciplines are not a way of earning merit points with God, but prepare the heart for the divine encounter.

Thus religious faith traditions not only provide through teachings and symbols their versions of the map for the spiritual journey, but also furnish through the faith community traveling companions who help us stay on the path, and spiritual disciplines to train for the journey.

Content of belief systems

Does the content of religious belief systems make a difference in health outcomes? Although denominational affiliation appears to have little or no effect in many studies of health outcomes, this does not mean that religious content is irrelevant. All religious

groups have fewer alcohol abusers than are found in the nonreligious population; however, religious groups with more antialcohol norms produce fewer abusers.

An additional finding is that the relationship between religiousness and less alcoholism holds only for a nurturing and supportive religiousness, and not for a restrictive and punitive religiousness.⁴⁷ Of the various religious coping styles, spiritual support from positive religious beliefs, benevolent reframing of the stressful situation, seeing oneself as a collaborator or partner with God, and receiving support from clergy or church members are generally related to positive health outcomes. Discontent and anger directed at the church and God or negatively reframing the event as divine punishment for one's sins was related to negative outcomes. Both positive or negative outcomes have been associated with the use of religious rituals, passive deferring of control to God, and self-directive religious coping styles, depending on the circumstances of the studies.⁴⁸

It is thus clear that the content of the religious belief system may influence health-related behaviors that are specifically included within the belief system, and that the positive or negative "tone" of an individual's understanding of their religion may exert a non-specific positive or negative effect on outcomes. Religion may aid or inhibit health, depending on how it is appropriated.

Mechanisms

The beneficial health effects of religion may be mediated through at least 3 pathways: reductions in health risk behaviors, greater social support, and reduction of the harmful effects of stress, including less depression and anxiety.⁴⁹

The health benefits that would derive from religious prohibition of unhealthy practices, such as smoking or drinking, or promotion of healthy habits, such as vegetarianism in Seventh-day Adventists, and the social support provided by membership in a local church are fairly obvious. These factors, however, do not appear to account for all the health benefits of religion. Many studies have shown favorable outcomes, even when health practices have been factored out, and now there is also a study that controls for social support. In a 16-year prospective study of mortality in 3,900 men and women in 11 religious and 11 matched secular Israeli Kibbutzim, age-adjusted mortality in men was 1.67 times higher and in women was 2.67 times higher in the secular kibbutzim.⁵⁰ Israeli kibbutzim are egalitarian collective communities highly similar in their social and economic structure and function. Both religiously observant and secular kibbutzim are cohesive, supportive communities and had similar levels of perceived social support. In this remarkably homogeneous sample, the observed mortality differences persisted across the major causes of death, in both sexes, at all ages, and consistently throughout the 16 year period of observation, even when expected mortality differences due to health habits were factored out. The authors hypothesize that some factor due to living in a religious, as opposed to secular social environment, induces less stress, enhances health resistance, promotes overall well-being and a positive health status.

In a study of 1,902 female twins in Virginia, personal religious devotion, but not personal or institutional conservatism, was found to buffer the depressogenic effects of stressful life events.⁵¹ Severe stress and depressive symptoms are known to be associated with decreases in measures of immune system function.^{52, 53} Thus spiritual individuals, having an underlying sense of meaning and purpose for their lives, and access to spiritual methods of coping with stress, including prayer, may have greater resistance to stress-related health breakdown and heightened resistance to diseases-causing agents and environments.⁵⁴ It may even be possible that by strengthening the healthy functioning and cohesiveness of collective bodies such as families, congregations and communities, spiritually healthy individuals may confer a sort of “herd immunity” on the groups to which they belong.⁵⁵

Summary

Spirituality is all that pertains to the inner journey toward meaning, wholeness and encounter with God. The spiritual life is the encounter itself. Religion is the social and conceptual container for that encounter. A religious faith tradition provides structure and language that connects into one coherent and congruent whole the outer world of people and culture with the inner world of spiritual experience, as well as a set of spiritual tools to promote our growth on the spiritual path. It can provide the setting for the encounter with God, but it is not itself that encounter. The practice of a religion may be an invaluable aid to the spiritual journey or it can become an idolatrous substitute for spirituality.

A large body of research has shown that the practice of a religion is usually associated with a variety of favorable health outcomes. It is unclear as to what extent the benefits derive from positive health teachings, social support, the salutary effects of an underlying spiritual approach to life, or some combination of these three. Much of the confusion in talking about spirituality, religion and health lies in failing to appreciate the broad spectrum of usage of the terms and how religion and spirituality relate to each other. Research on health effects of spirituality and religion will need to carefully define what is being measured to yield an accurate understanding of the effects of spirituality and religion on health and the ways in which they may promote or inhibit positive health outcomes.

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