

PREFACE

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The interface between religiosity and medicine is not a novel trend, but a reencounter after a long time of separation. For most of the last millennia, there was no distinction between caring for spiritual issues and restoring the physical health, both functions performed by shamans or clergymen. With the emergence of the first universities, the erudite “doctors” were versed at the same time in medicine and theology. A few centuries ago, there was a separation between the more objective disciplines (such as biological health) and the more subjective ones (such as spiritual matters). An opposite movement came through the last 100 years, when some scholars, at first timidly, have shown it is unnatural to separate so intertwined elements. Finally, by the last 3 decades, consistent scientific research has proved that the spiritual-religious dimension is strongly related to human health.

Since then, this field and its applications are progressively growing and developing. The research about mind-body relationships reveals the existence of important psycho-neuro-immunological-endocrine pathways. Several medical colleges around the world begin to have curricular disciplines or academic study leagues on this subject. The bio-psycho-social-spiritual approach is currently standard for a patient-centered integrative healthcare. Complementary therapies derived from spiritual traditions, such as meditation, are now valuable allies to conventional treatment for many clinical conditions. Hospitals wishing quality certification are encouraged to develop policies that respect the diversity of spiritual values and necessities. Faith-based interventions have shown great potential to cooperate with psychosocial initiatives. Each of these movements meets the patients’ demands for a comprehensive healthcare with a human approach.

However, most healthcare professionals were not educated within the view derived from recent research associating religiosity and health. At the other hand, clergymen tend to receive little or none information about health issues during their theological graduation. For both these groups, it may be difficult to get out of their comfort zones, where old concepts of mind and matter separation insist to keep place. Notwithstanding progress in including the religious dimension in the clinical context, there are still many significant obstacles for a real transformation.

In this context, “*An Examination of Religiosity - Influences, Perspectives and Health Implications*” aspires to disseminate the ideal form of clinical healthcare, based on the best available scientific evidence. This work does not

PREFACE

have the goal of being exhaustive, but rather aims to be a reliable reference to accompany a paradigm shift. The chapters are original manuscripts of high-standard methodological quality, selected among authors from Austria, Brazil, Egypt, Poland, and the United States.

The book starts with a historical trajectory and the current state-of-the-art of spirituality-religiosity as a clinical therapeutic resource. The following chapters explore the relationships between spirituality and religiosity in the areas of physical and mental health in many populations and groups: the general population, college students, older adults, cancer patients, and bereaved parents. The final chapters bring intriguing and challenging models about phenomena involving the nonlocal mind and the brain-independent consciousness.

The target audience includes professionals, students and researchers on the fields of clinical healthcare (physicians, nurses, psychologists, among others), multi-professional patient care (social workers, hospital managers, among others), and pastoral support for ill people (professional chaplains, community clergymen, among others). As editors, we thank the contributing authors for their exquisite work, and we congratulate Nova Science Publishers for its openness to the subject. For you, the readers, we hope to match the trust you put on this project, and we hope you find this work useful and pleasant.

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