Dunlop, Walker et al. (2012); Neff and Pommier (2012); Prazak, Critelli et al. (2012); Saslow, Miller et al. (2012); Taylor, Marshall et al. (2012); Vail, Juhl et al. (2012)


Research examining the characterization of moral excellence has been conducted almost exclusively at the variable level of analysis. Such an approach precludes a consideration of personality composition and, as a result, does not provide a complete understanding of moral exemplarity. In the current project, a person-level analysis was adopted to assess the viability of a personality configuration distinctive of care-based moral excellence across adulthood. In Study 1, a cluster analysis revealed that young-adult moral exemplars and demographically matched comparison participants were strongly distinguished on the basis of personality composition. This segregation was largely a result of a heightened level of motivational variables and advanced socio-cognitive development on the part of exemplars. In Study 2, which considered moral excellence in mid- and late-adulthood, these results were replicated. These findings indicate that patterns of care-based moral action are more likely to be evidenced if motivation and socio-cognitive maturity are fostered in tandem.


The present study examined the link between self-compassion and concern for the well-being of others. Other-focused concern variables included compassion for humanity, empathetic concern, perspective taking, personal distress, altruism and forgiveness. Participants included 384 college undergraduates, 400 community adults, and 172 practicing meditators. Among all participant groups, higher levels of self-compassion were significantly linked to more perspective taking, less personal distress, and greater forgiveness. Self-compassion was linked to compassion for humanity, empathetic concern, and altruism among community adults and mediators but not college undergraduates. The strength of the association between self-compassion and other-focused concern also varied according to participant group and gender. The strongest links tended to be found among meditators, while women tended to show weaker associations than men.


(Free full text available) This study examined the relationships of mindfulness, a form of focused self-awareness, with physical and psychological health. Mindfulness was measured in terms of four stable forms of awareness: Observe, an awareness of internal and external stimuli; Describe, an ability to verbally express thoughts clearly and easily; Act with Awareness, the tendency to focus on present tasks with undivided attention; and Accept without Judgment, the tendency to take a nonjudgmental stance toward thoughts and feelings that board into consciousness. These aspects of mindfulness were explored in relation to both physical health, which consisted of heart rate variability, a measure of overall cardiovascular health, and psychological health, which consisted of flourishing, existential well-being, negative affect, and social well-being in a sample of 506 undergraduate students. Individuals high in mindfulness showed better cardiovascular health and psychological health.


Past research argues that religious commitments shape individuals’ prosocial sentiments, including their generosity and solidarity. But what drives the prosociality of less religious people? Three studies tested the hypothesis that, with fewer religious expectations of prosociality, less religious individuals’ levels of compassion will play a larger role in their prosocial tendencies. In Study 1, religiosity moderated the relationship between trait compassion and prosocial behavior such that compassion was more critical to the generosity of less religious people. In Study 2, a compassion induction increased generosity among less religious individuals but not among more religious individuals. In Study 3, state feelings of compassion predicted increased generosity among economic task payoffs, economic task tax burdens, and economic task payoffs but not among more religious individuals. These results suggest that the prosociality of less religious individuals is driven to a greater extent by levels of compassion than is the prosociality of the more religious. MedicalXpress - http://medicalxpress.com/news/2012-04-highly-religious-people-compassion-non-believers.html - comments "‘Love thy neighbor’ is preached from many a pulpit. But new research from the University of California, Berkeley, suggests that the highly religious are less motivated by compassion when helping a stranger than are atheists, agnostics and less religious people. In three experiments, social scientists found that compassion consistently drove more generous people to be more generous. For highly religious people, however, compassion was largely unrelated to how generously they were, according to the findings which are published online in April in the journal Social Psychological and Personality Science. The results challenge a widespread assumption that acts of generosity and charity are largely driven by feelings of empathy and compassion, researchers said. In the study, the link between compassion and generosity was found to be stronger for those who identified as being non-religious or less religious. “Overall, we find that for less religious people, the strength of their emotional connection to another person is critical to whether they will help that person or not,” said UC Berkeley social psychologist Robb Willer, a co-author of the study. “The more religious, on the other hand, may ground their generosity less in emotion, and more in other factors such as doctrine, a communal identity, or reputational concerns.” Compassion is defined in the study as an emotion felt when people see the suffering of others which then motivates them to help, often at a personal risk or cost. While the study examined the link between religion, compassion and generosity, it did not directly examine the reasons for why highly religious people are less compelled by compassion to help others. However, researchers hypothesize that deeply religious people may be more strongly guided by a sense of moral obligation than their more non-religious counterparts. "We hypothesized that religion would change how compassion impacts generous behavior," said study lead author Laura Saslow, who conducted the research as a doctoral student at UC Berkeley. Saslow, who is now a postdoctoral scholar at UC San Francisco, said she was inspired to examine this question after an altruistic, nonreligious friend lamented that he had only donated to earthquake recovery efforts in Haiti after watching an emotionally stirring video of a woman being saved from the rubble, not because of a logical understanding that help was needed. “I was interested to find that this experience – an atheist being strongly influenced by his emotions to show generosity to strangers – was replicated in three large, systematic studies," Saslow said. In the first experiment, researchers analyzed data from a 2004 national survey of more than 1,300 American adults. Those who agreed with such statements as “When I see someone being taken advantage of, I feel kind of protective towards them” were also more inclined to show generosity in random acts of kindness, such as loaning out belongings and offering a seat on a crowded bus or train, researchers found. When they looked into how much compassion
motivated participants to be charitable in such ways as giving money or food to a homeless person, non-believers and those who rated low in religiosity came out ahead: “These findings indicate that although compassion is associated with pro-sociality among both less religious and more religious individuals, this relationship is particularly robust for less religious individuals,” the study found. In the second experiment, 101 American adults watched one of two brief videos, a neutral video or a heartrending one, which showed portraits of children afflicted by poverty. Next, they were each given 10 “lab dollars” and directed to give any amount of that money to a stranger. The least religious participants appeared to be motivated by the emotionally charged video to give more of their money to a stranger. “The compassion-inducing video had a big effect on their generosity,” Willer said. “But it did not significantly change the generosity of more religious participants.” In the final experiment, more than 200 college students were asked to report how compassionate they felt at that moment. They then played “economic trust games” in which they were given money to share – or not – with a stranger. In one round, they were told that another person playing the game had given a portion of their money to them, and that they were free to reward them by giving back some of the money, which had since doubled in amount. Those who scored low on the religiosity scale, and high on momentary compassion, were more inclined to share their winnings with strangers than other participants in the study. “Overall, this research suggests that although less religious people tend to be less trusted in the U.S., when feeling compassionate, they may actually be more inclined to help their fellow citizens than more religious people,” Willer said.


Background In primary care frequent attenders with medically unexplained symptoms (MUS) pose a clinical and health resource challenge. We sought to understand these presentations in terms of the doctor–patient relationship, specifically to test the hypothesis that such patients have insecure emotional attachment. Method We undertook a cohort follow-up study of 410 patients with MUS. Baseline questionnaires assessed adult attachment style, psychological distress, beliefs about the symptom, non-specific somatic symptoms, and physical function. A telephone interview following consultation assessed health worry, general practitioner (GP) management and satisfaction with consultation. The main outcome was annual GP consultation rate. Results Of consecutive attenders, 18% had an MUS. This group had a high mean consultation frequency of 5.24% compared to 1.97–5.06% for those without an MUS. The prevalence of insecure styles was 33% (95% CI 30.3–33) %. A significant association was found between insecure attachment style and frequent attendance, even after adjustment for sociodemographic characteristics, presence of chronic physical illness and baseline physical function [odds ratio (OR) 1.96 (95% CI 1.05–3.67)]. The association was particularly strong in those patients who believed that there was a physical cause for their initial MUS [OR 9.52 (95% CI 2.67–33.93)]. A possible model for the relationship between attachment style and frequent attendance is presented. Conclusions Patients with MUS who attend frequently have insecure adult attachment styles, and their high consultation rate may therefore be conceptualized as pathological care-seeking behaviour linked to their insecure attachment. Understanding frequent attendance as pathological help seeking driven by difficulties in relating to caregiving figures may help doctors to manage their frequently attending patients in a different way.

Vail, K. E., J. Juhl, et al. (2012). "When death is good for life: Considering the positive trajectories of terror management." Personality and Social Psychology Review. http://psr.sagepub.com/content/early/2012/04/05/1088868312440046.abstract

Research derived from terror management theory (TMT) has shown that people’s efforts to manage the awareness of death often have deleterious consequences for the individual and society. The present article takes a closer look at the conceptual foundations of TMT and considers some of the more beneficial trajectories of the terror management process. The awareness of mortality can motivate people to enhance their physical health and prioritize growth-oriented goals; live up to positive standards and beliefs; build supportive relationships and encourage the development of peaceful, charitable communities; and foster open-minded and growth-oriented behaviors. The article also tentatively explores the potential enriching impact of direct encounters with death. Overall, the present analysis suggests that although death awareness can, at times, generate negative outcomes, it can also function to move people along more positive trajectories and contribute to the good life. "When death is good for life" – http://www.medicalexpress.com/news/20120424(04):855-864.

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work, Vail says, is that we should “turn attention and research efforts toward better understanding of how the motivations triggered by death awareness can actually improve people’s lives, rather than how it can cause malady and social strife.” Write the authors: “The dance with death can be a delicate but potentially elegant stride toward living the good life.”