

## **CHAPTER VIII: INTRODUCTION**

DR. STEPHEN STRAUS: Good afternoon. My name is Steve Straus. I'm director for the National Center for Complementary and Alternative Medicine. One of the very gratifying parts of my job, of which there are many, is the opportunity to come to this podium twice a year and introduce people with really scintillating backgrounds, knowledge, and abilities to articulate important thoughts. And today is going to be no exception. In fact, it's going to be a special treat. With us today we have Dr. Anne Harrington, who I've heard speak on several occasions, and can tell you now that if you want somebody to distill a complex subject with gem-like lucidity, it's Anne. And she comes to it honestly. Having taken degrees at Oxford in the history of science, been on the faculty at Harvard University for the past 7 or 8 years, and now ascending to the Loeb Harvard College Professor in the Department of the History of Science, she has all the academic credentials. But Anne studies things that are often so difficult for us to contemplate. Her topic today is an example of that. Who could disagree that spirituality is a common human experience? That it feels good? That it has a place in our culture and our families and our value system? The question is, does it have a medicinal value? So, prepare yourself for something that's going to be enlightening as well as controversial. And that's very much our job to understand all of the areas that are subsumed within complementary and alternative medicine that add to normative medical practice and procedures, and the like, that hold traction to society and to established communities. And I look forward to being educated and provoked by Anne for the coming hour and she'll reserve some time for your thoughtful questions. Dr. Harrington. Thank you.

DR. HARRINGTON: Thank you very much for the kind introduction. So, is spirituality good for your health? Do spiritual and religious people live longer than secular people—non-religious people? Do spiritual practices like prayer and meditation help people recover more quickly from illnesses or better from illnesses? Do people who believe in God have a health edge over people who don't--over atheists? Twenty years ago, it would never have occurred—at least I want to argue-- it would not have occurred to

people to ask questions like these. Certainly not in medicine or in the sciences. Twenty years ago, we had a civic consensus. Spirituality was ultimately a private matter; a private matter of either collective or individual beliefs and experience. Medicine was a public matter. You had to answer to tax payers, to internal regulatory bodies, to the peer review process of science, to government. Now, it's true that 20 years ago we had pastors and religious counsellors who had a modest but respected place on some hospital staffs as religious chaplains. But the services that they offered to patients in the context of a hospital setting--no one assumed that what they did with those patients was of any interest--of any value to the working practices of modern medicine itself. Spirituality wasn't medicine itself. But today, a lot of the old understandings seem to be changing. Today, we live in a world where monks meditate in MRI machines, where epidemiologists compare the health effects of going to church with the health effects of giving up smoking, where prayer is considered not a private conversation with one's own hopes and anxieties or with God, but--at least according to some--a CAM practice, a form of alternative medicine, and in fact as you'll see here on this slide, it's the top alternative medical practice of all. So, what's happened to our old consensus? How did we arrive in this new space? The short answer is that we're here because a growing body of medical research that's partly riding on the back of a wave of more general interest in the so-called mind-body connection has begun to insist, as Dr. Straus said in his introductory remarks, that there are medically significant consequences to spiritual practices and commitments, that church-going might be good for your immune system, that contemplative practices might reduce stress and might help manage disorders like cardiac disease, that a strong faith in a higher force might have the capacity to change one's brain biochemistry, and in this fashion, accelerate or kick-start various kinds of healing processes. Now, as you might imagine, the research underlying these claims is controversial. The quality of the data is uneven. The real clinical implications are a subject of lively dispute. But the idea, broadly speaking, that spirituality is good for your health has, over the past 10 or so years, taken on the force of a kind of a movement. There have been over the last several years a series of conferences. "Psychoneuroimmunology and the 'Faith Factor'," this was a conference held at Duke University in 1999. There's one coming up at Georgetown University in about 2 weeks--

some of you might even be planning to attend--that takes a different angle: "The Science and Clinical Applications of Meditation." So there's conferences. The popular press is excited by and broadly reporting on these data. *Newsweek*, November 10<sup>th</sup>, 2003, "Is Religion Good Medicine? Why Science Is Starting To Believe." There have been similar articles that I won't show you pictures of, you know, cover articles in *Psychology Today*, the *Atlantic Monthly*, *Reader's Digest*. All the sectors, levels of the sectors of the popular press have been interested. If you go into any good-sized bookstore, you'll find books like these written by the same--many of the same clinical researchers that are--the researchers that are involved in the clinical work, but have also then been active now in putting the word out to the general public. "The Healing Power of Faith," "Is Religion Good for your Health?" "Timeless Healing," "The Faith Factor," "Prayer is Good Medicine." These are the titles that we're seeing in our bookstores today.

And even that isn't all. The research efforts here have been further organized, coordinated, and accelerated forward by the establishment in the last 5 or 10 years of a series of research centers, some of them based at top-tier universities, that are dedicated to pursuing the research, to sharpening the agenda, to--in a sense--giving a sense of academic integrity and public visibility to the effort. And partly in response to that medical schools have been responding--now, at least 70 and possibly even more of the nation's 125 medical schools offer courses on the spirituality-health connection--either standard courses for the medical students or continuing medical education courses. One of the first and still most visible is Herb Benson's series of courses on spirituality and health that I actually have spoken at a couple of times.

So we've got a phenomenon. But here's the rub, or at least what I think the rub is. We say that all this work is directed towards answering the question whether spirituality is good for your health, but it's not really true. Or at least it's misleading to put the matter that way. What we really have--or the way this field really works is it breaks down into four discreet claims, each of which bears in a different way on the so-called spirituality-health link but does so in a very different way. Each of these four claims, also has a history. And not just because I'm an historian of science, but because I genuinely believe

this, the history here really matters. Because each of these four claims comes from somewhere and is complexly intertwined with larger historical forces, it sits in a very specific relationship to the larger project in ways that if you want to be able to evaluate it with some nuance and care and clarity, you need to understand. So history, I want as my first argument, history can, I'd like to say, history can help us. History can help us be smarter about how to think about the spirituality-health link. And so I see my job here today, in part, as being to arm all of you just a little bit with a bit of histo