36 mindfulness & compassion relevant abstracts: november '15 newsletter

(Atzil-Slonim, Bar-Kalifa et al. 2015; Bach and Guse 2015; Bawa, Mercer et al. 2015; Breinholst, Esbjørn et al. 2015; Camilleri, Méjean et al. 2015; Foulk, Woolum et al. 2015; Fraley, Hudson et al. 2015; Gardner 2015; Gino, Kouchaki et al. 2015; Hafen, Allen et al. 2015; Haslam, Cruwys et al. 2015; Hilbig, Thielmann et al. 2015; Jacobson and Newman 2015; Janz, Pepping et al. 2015; Jonason, Strosser et al. 2015; Kerns, Mathews et al. 2015; Kiken, Garland et al. 2015; Lougheed, Koval et al. 2015; Manczak, DeLongis et al. 2015; Morelli, Lee et al. 2015; Muñoz-Reyes, Fernández et al. 2015; Nissen-Lie, Rønnestad et al. 2015; O'Connor, Rangan et al. 2015; Riskin, Erez et al. 2015; Schäfer, Haun et al. 2015; Sherman, Lerner et al. 2015; Stavrova and Ehlebracht 2015; Suvilehto, Glerean et al. 2015; Tang, Poon et al. 2015; Thomas, Bangen et al. 2015; Valdmanis 2015; van der Zwan, de Vente et al. 2015; Verspaandonk, Coenders et al. 2015; Wayment, Bauer et al. 2015; Wayment, Collier et al. 2015; Yan and Bonanno 2015; Zedelius and Schooler 2015)

Atzil-Slonim, D., E. Bar-Kalifa, et al. (2015). *"Therapeutic bond judgments: Congruence and incongruence."* J Consult Clin Psychol 83(4): 773-784. http://www.ncbi.nlm.nih.gov/pubmed/25664641
OBJECTIVE: The present study had 2 aims: (a) to implement West and Kenny's (2011) Truth-and-Bias model to simultaneously assess the temporal congruence and directional discrepancy between clients' and therapists' ratings of the bond facet of the therapeutic alliance, as they cofluctuate from session to session; and (b) to examine whether symptom severity and a personality disorder (PD) diagnosis moderate congruence and/or discrepancy. METHOD: Participants included 213 clients treated by 49 therapists. At pretreatment, clients were assessed for a PD diagnosis and completed symptom measures. Symptom severity was also assessed at the beginning of each session, using client self-reports. Both clients and therapists rated the therapeutic bond at the end of each session. RESULTS: Therapists and clients exhibited substantial temporal congruence in their session-by-session bond ratings, but therapists' ratings tended to be lower than their clients' across sessions. Additionally, therapeutic dyads whose session-by-session ratings were more congruent also tended to have a larger directional discrepancy (clients' ratings being higher). Pretreatment symptom severity and PD diagnosis did not moderate either temporal congruence or discrepancy at the dyad level; however, during sessions when clients were more symptomatic, therapist and client ratings were both farther apart and tracked each other less closely. CONCLUSIONS: Our findings are consistent with a "better safe than sorry" pattern, which suggests that therapists are motivated to take a vigilant approach that may lead both to underestimation and to attunement to fluctuations in the therapeutic bond.

Bach, J. M. and T. Guse (2015). *"The effect of contemplation and meditation on 'great compassion' on the psychological well-being of adolescents."* J Posit Psychol 10(4): 359-369.
http://www.tandfonline.com/doi/full/10.1080/17439760.2014.965268
This study aimed to evaluate the effect of contemplation and meditation (CM) training, with a focus on developing great compassion, on the psychological well-being (PWB) of adolescents. Participants (N = 51, mean age = 15.8) were randomly allocated to either CM training (n = 26) or a comparison group (n = 25). Both groups completed measures of PWB before and after the intervention. Adolescents who received CM training showed statistically significant increases in environmental mastery and personal growth, as well as decreased negative affect compared to the comparison group. Girls in the experimental group also showed a significant decrease in negative affect compared with boys in the experimental group. Both the experimental and comparison groups demonstrated increased life satisfaction, environmental mastery, self-acceptance, autonomy, and purpose in life. There were no changes in positive affect and positive relations with others for both groups.

Bawa, F. L. M., S. W. Mercer, et al. (2015). *"Does mindfulness improve outcomes in patients with chronic pain? Systematic review and meta-analysis."* British Journal of General Practice 65(635): e387-e400.
http://bjgp.org/bjgp/65/635/e387.full.pdf
Background Chronic pain and its associated distress and disability are common reasons for seeking medical help. Patients with chronic pain use primary healthcare services five times more than the rest of the population. Mindfulness has become an increasingly popular self-management technique. Aim To assess the effectiveness of mindfulness-based interventions for patients with chronic pain. Design and setting Systematic review and meta-analysis including randomised controlled trials of mindfulness-based interventions for chronic pain. There was no restriction to study site or setting. Method The databases MEDLINE®, Embase, AMED, CINAHL, PsycINFO, and Index to Theses were searched. Titles, abstracts, and full texts were screened iteratively against inclusion criteria of: randomised controlled trials of mindfulness-based intervention; patients with non-malignant chronic pain; and economic, clinical, or humanistic outcome reported. Included studies were assessed with the Yates Quality Rating Scale. Meta-analysis was conducted. Results Eleven studies were included. Chronic pain conditions included: fibromyalgia, rheumatoid arthritis, chronic musculoskeletal pain, failed back surgery syndrome, and mixed aetiology. Papers were of mixed methodological quality. Main outcomes reported were pain intensity, depression, physical functioning, quality of life, pain acceptance, and mindfulness. Economic outcomes were rarely reported. Meta-analysis effect sizes for clinical outcomes ranged from 0.12 (95% confidence interval [CI] = −0.05 to 0.30) (depression) to 1.32 (95% CI = −1.19 to 3.82) (sleep quality), and for humanistic outcomes 0.03 (95% CI = −0.66 to 0.72) (mindfulness) to 1.58 (95% CI = −0.57 to 3.74) (pain acceptance). Studies with active, compared with inactive, control groups showed smaller effects. Conclusion There is limited evidence for effectiveness of mindfulness-based interventions for patients with chronic pain. Better-quality studies are required.

Breinholst, S., B. H. Esbjørn, et al. (2015). *"Effects of attachment and rearing behavior on anxiety in normal developing youth: A mediational study."* Personality and Individual Differences 81: 155-161.
http://www.sciencedirect.com/science/article/pii/S019188691400467X
A few studies have examined the relative contribution of insecure attachment and negative parental rearing behaviors on childhood anxiety, but none have examined if insecure attachment mediates the association between negative parental rearing behavior and anxiety. The present study investigated the direct, as well as the indirect, relation between attachment to parents, parental rearing behaviors and anxiety symptoms in a sample of 1134 normal developing children and adolescent. Attachment relation was measured by the Security Scale (SEC), negative parental rearing behavior was measured by the Rearing Behavior Questionnaire (RBQ), and anxiety was assessed using the Screen for Anxiety Related Emotional Disorders-Revised (SCARED-R). We found, in accordance with previous research, that insecure attachment, maternal rejection and overprotection, each accounted for a significant proportion of the variance of anxiety symptoms. Another result was that insecure attachment was found to mediate the relationship between maternal psychological control and rejection, and anxiety symptoms. Findings are discussed with respect to future directions.

Camilleri, G. M., C. Méjean, et al. (2015). ***"Association between mindfulness and weight status in a general population from the nutrinet-santé study."*** <u>PLoS ONE</u> 10(6): e0127447. <u>http://www.ncbi.nlm.nih.gov/pmc/articles/PMC4454654/</u>

  (Available in free full text) BACKGROUND: Mindfulness is defined as non-judgmental awareness of the present moment. There is some evidence of the efficacy of mindfulness-based interventions in weight loss. However, this psychological concept has only been rarely explored in observational studies, and no study to date has examined the association between dispositional mindfulness and weight status in a large population-based sample. OBJECTIVE: We aimed to examine the relationship between mindfulness scores and weight status in a large sample of the adult general population in France. DESIGN AND METHODS: A total of 14,400 men and 49,228 women aged ≥18 y participating in the NutriNet-Santé study were included in this cross-sectional analysis. We collected mindfulness data using the Five Facet Mindfulness Questionnaire as well as self-reported weight and height. The association between weight status and dispositional mindfulness, as well as its subscales (observing, describing, acting with awareness, non-judging and non-reactivity), was assessed using multinomial logistic regression models adjusted for socio-demographic and lifestyle factors. RESULTS: Women with higher dispositional mindfulness scores were less likely to be overweight (excluding obesity) (OR quartile 4 vs. 1 = 0.84, 95% CI: 0.79-0.90) and obese (OR quartile 4 vs. 1 = 0.71, 95% CI: 0.65-0.78). In addition, overall, in this group, all subscales were inversely associated with weight status, with the strongest association found for the "observing" subscale. In men, higher mindfulness was associated only with lower odds of obesity (OR quartile 4 vs. 1 = 0.81 (0.69, 0.96)), and only the "observing" and "non-reactivity" subscales were significantly inversely associated with weight status. CONCLUSION: Results support the interest of a shift in perspective that takes into account positive psychological and cognitive factors such as dispositional mindfulness in the investigation of obesity and its associated factors.

Foulk, T., A. Woolum, et al. (2015). ***"Catching rudeness is like catching a cold: The contagion effects of low-intensity negative behaviors."*** <u>J Appl Psychol</u>. <u>http://www.ncbi.nlm.nih.gov/pubmed/26121091</u>

  In this article we offer a new perspective to the study of negative behavioral contagion in organizations. In 3 studies, we investigate the contagion effect of rudeness and the cognitive mechanism that explains this effect. Study 1 results show that low-intensity negative behaviors like rudeness can be contagious, and that this contagion effect can occur based on single episodes, that anybody can be a carrier, and that this contagion effect has second-order consequences for future interaction partners. In Studies 2 and 3 we explore in the laboratory the cognitive mechanism that underlies the negative behavioral contagion effect observed in Study 1. Specifically, we show that rudeness activates a semantic network of related concepts in individuals' minds, and that this activation influences individual's hostile behaviors. In sum, in these 3 studies we show that just like the common cold, common negative behaviors can spread easily and have significant consequences for people in organizations. (The excellent BPS Digest - <u>http://digest.bps.org.uk/2015/07/how-rudeness-spreads-like-contagion.html</u> - comments University of Florida researchers have finally put a long-standing hypothesis about rudeness to the test. The history to this is a study published in 1999 [pdf] that showed rudeness can create a vicious circle between individuals – if you're rude to someone, they're more likely to be rude back at you. What the authors of that paper also speculated though, and the new research investigates, is that an initial act of rudeness creates a "secondary spiral" where offended parties end up dumping on the innocent – meaning, effectively, that rudeness can spread like a contagion. For the new research, Trevor Foulk and his team began by studying the interactions of 90 graduate students during negotiation training, which was conducted in pairs. After each negotiation, students rated the rudeness and likability of their negotiation partner and then played a series of nine trials that each involved splitting a cash sum with that same partner, either fairly, selfishly, or spitefully accepting a poor prize in order to deny the other any cash at all. Each participant then repeated the same procedure – negotiation followed by financial game – with ten more partners. To walk through the main finding, let's take a rude student called Alan. The data showed that if Bella interacted with rude Alan, she would find him less likeable and be likelier to spite him financially. But furthermore, in Bella's next negotiation session with Carl, he would more likely find her rude, unlikeable and in need of spiting. In other words, one person's rudeness could spread through many negotiation pairs. A second study suggested why rudeness has this effect. Here, during a "word-or-nonword" recognition task, the student participants were especially fast at recognising rude-related words, such as boorish or pushy, but only when the start of the experiment had been marred by the experimenter rudely humiliating a latecomer (actually another experimenter undercover). This shows how experiencing rudeness brings it to the front of our minds, which may colour how we interpret other people's behaviours, thus influencing our own behaviour. A final study demonstrates this principle, and highlights how these biased interpretations thrive in ambiguous situations. Again, one set of participants witnessed a rude event: a video of an altercation between co-workers in the fictional bookshop within which the tasks were set. Participants then completed a version of the cash allocation task used in the first study: this time sharing proceeds with a customer who'd emailed the bookshop with a query about an undelivered book. When the query was written in a neutral tone, participants were fair with the cash, but other participants who received an overtly hostile query chose to spite the customer in roughly one in four trials. Whether they'd experienced prior rudeness didn't sway these choices. A third query version was rude but ambiguously hostile: "I REALLY need those books. I hope this isn't asking too much!!??????" When dealing with this ambiguous customer, participants who hadn't experienced rudeness gave them the benefit of the doubt, treating them comparably to the neutral customer. But participants who had viewed the earlier rude encounter opted for spite, as if they were dealing with a hostile customer. Serious workplace problems such as workplace bullying have been shown to act like contagion, systemically infecting organisations if unchecked. This study shows us that smaller behaviours can also make the rounds, and much like the common cold, require only one moment of exposure to kick things off. The difference is that we can't fully control whether we pass on a cold, but we always have a choice with rudeness: when Bella opts for civility, the secondary spiral spins its last.)

Fraley, R. C., N. W. Hudson, et al. (2015). ***"Are adult attachment styles categorical or dimensional? A taxometric analysis of general and relationship-specific attachment orientations "*** <u>Journal of Personality and Social Psychology</u> 109(2): 354-368. <u>http://psycnet.apa.org/journals/psp/109/2/354/</u>

  One of the long-standing debates in the study of adult attachment is whether individual differences are best captured using categorical or continuous models. Although early research suggested that continuous models might be most appropriate, we revisit this issue here because (a) categorical models continue to be widely used in the empirical literature, (b) contemporary models of individual differences raise new questions about the structure of attachment, and (c) methods for addressing the types versus dimensions question have become more sophisticated over time. Analyses based on 2 samples indicate that individual differences appear more consistent with a dimensional rather than a categorical model. This was true with respect to general attachment representations and attachment in specific relationship contexts (e.g., attachment with parents and peers). These findings indicate that dimensional models of attachment style may be better suited for conceptualizing and measuring individual differences across multiple levels of analysis.

Gardner, C. (2015). ***"Medicine's uncanny valley: The problem of standardising empathy."*** <u>The Lancet</u> 386(9998): 1032-1033. <u>http://dx.doi.org/10.1016/S0140-6736(15)00161-0</u>

(Available in free full text) A month after my father died of heart failure in a cardiac intensive-care unit in my hometown, I flew back to Baltimore to finish my final year of medical school. Although I was apprehensive about returning to the hospital, I knew that the full schedule would be a welcome distraction. Still, I was surprised how easily I fell back into the old routine of attending morning rounds, admitting patients, writing progress notes, and presenting cases to the head physician. My second rotation back was internal medicine, where we saw many patients with chronic and acute heart failure. Almost every morning I listened to patients' lungs for the crackles of pulmonary oedema, checked for pitting in their feet and legs, and asked them to lean back and turn their heads to the left while I searched with my penlight for the elusive biphasic flutter of the internal jugular vein. It was not so much seeing the disease itself that, from time to time, transported me back to the days I spent with my father in the intensive-care unit. Rather, it was moments that often seemed fairly mundane and nondescript: a doctor's gesture, a nurse's expression, a worried relative's tone of voice. A few weeks into the rotation, I attended a lecture on breaking bad news and having goals-of-care discussions with families in the critical care setting. The presentation was like many I had seen before: strategies for conveying empathy and assessing comprehension were offered, together with an acronym or mnemonic device to remind us when to speak, listen, and offer some gesture of understanding or solidarity, such as an empathic statement or verbal identification of observed emotion. I remember one slide in particular that showed a pie chart of the optimum speaking to listening ratio; the listening section, as the presenter pointed out, was larger. When I first arrived at medical school, this kind of formulaic approach to patient communication seemed somewhat misguided, but I was also aware that, at that point, I had never had to be on the receiving end ... The afternoon my father's supportive care was to be withdrawn, I found an empty conference room on the unit and called the same cardiologist who was away for the weekend. I understood the situation, I said, but I wanted him to explain it to me one last time. He told me, instead, to explain it to him, and he listened as I struggled to make sense of things. When I finished, he told me about the first time he met my father and how much he had grown to admire and care about him over the years, and finally how he knew that what was happening was the best thing for his patient and his friend. As he spoke, unhurried and affectionately, I realised what it means to be a good doctor. Caregiving, it has been said, is a moral act with unique power to enrich and give meaning to the lives of both giver and receiver. In the end, time is short and the stakes are high with every word and every gesture. What health-care providers say (and how we say it) and what we do (and how we do it) matters, and this should be a source of inspiration for our profession. The worst thing we can do is try to circumvent the recognisable, yet unquantifiable, struggle for real human connection and steer medicine further in the direction of becoming a massive customer service agency ...

Gino, F., M. Kouchaki, et al. (2015). ***"The moral virtue of authenticity: How inauthenticity produces feelings of immorality and impurity."*** Psychological Science 26(7): 983-996. http://pss.sagepub.com/content/26/7/983.abstract
     The five experiments reported here demonstrate that authenticity is directly linked to morality. We found that experiencing inauthenticity, compared with authenticity, consistently led participants to feel more immoral and impure. This link from inauthenticity to feeling immoral produced an increased desire among participants to cleanse themselves and to engage in moral compensation by behaving prosocially. We established the role that impurity played in these effects through mediation and moderation. We found that inauthenticity-induced cleansing and compensatory helping were driven by heightened feelings of impurity rather than by the psychological discomfort of dissonance. Similarly, physically cleansing oneself eliminated the relationship between inauthenticity and prosocial compensation. Finally, we obtained additional evidence for discriminant validity: The observed effects on desire for cleansing were not driven by general negative experiences (i.e., failing a test) but were unique to experiences of inauthenticity. Our results establish that authenticity is a moral state—that being true to thine own self is experienced as a form of virtue.

Hafen, C. A., J. P. Allen, et al. (2015). ***"Conflict with friends, relationship blindness, and the pathway to adult disagreeableness."*** Personality and Individual Differences 81: 7-12.
http://www.sciencedirect.com/science/article/pii/S0191886915000434
     The ability to form and maintain relationships with friends and romantic partners is a major developmental task for adolescents. Disagreeable youth are likely to struggle with this task, yet little is known about how they maintain their oppositional style from adolescence to adulthood. The current study examines the long-term implications of disagreeableness in a diverse sample of 164 adolescents assessed repeatedly across a 10-year period along with their friends and romantic partners. Disagreeableness at age 14 and 15 was assessed in observation with friends. Disagreeableness was then examined as a predictor of both future relationship quality with friends at age 16 and romantic relationships at age 21. The results indicate that although disagreeable youth do not report any relationship struggles, both their friends and romantic partners see their relationships as being low in quality. Findings suggest a developmental process by which disagreeable adolescents maintain their oppositional style through a mechanism of relationship blindness, as they simply are unable to see the relationship issues that their friends and partners clearly perceive.

Haslam, C., T. Cruwys, et al. (2015). ***"Group ties protect cognitive health by promoting social identification and social support."*** Journal of Aging and Health. http://jah.sagepub.com/content/early/2015/06/09/0898264315589578.abstract
     Objective: Social relationships are protective of cognitive health as we age and recent findings show that social group ties (e.g., with community and peer groups) are especially important. The present research examines this relationship further to explore (a) the contribution of group, relative to interpersonal, ties and (b) underlying mechanism. Method: Two cross-sectional survey studies were conducted. Study 1 was conducted online (N = 200) and Study 2 involved face-to-face interviews (N = 42). Results: The findings confirmed group ties as a stronger predictor of cognitive health than individual ties. It also supported our proposed sequential mediation model suggesting that the benefits of group ties arise from their capacity to enhance a sense of shared social identification and this, in turn, provides the basis for effective social support. Discussion: Both studies provided evidence consistent with claims that group ties were especially beneficial because they cultivated social identification that provided the foundation for social support.

Hilbig, B. E., I. Thielmann, et al. (2015). ***"From honesty–humility to fair behavior – benevolence or a (blind) fairness norm?"*** Personality and Individual Differences 80: 91-95.
http://www.sciencedirect.com/science/article/pii/S0191886915001257
     Recent research has identified trait Honesty–Humility as a vital determinant of a variety of cooperative, fair, or pro-social behaviors. However, it is less clear what drives the link between Honesty–Humility and the tendency to exhibit fair behavior which we first demonstrate in a meta-analysis of prior work using the dictator game. To close this gap, we test two potential explanations, namely benevolence versus an internalized (blind) fairness norm. In a redistribution paradigm, we implemented an unfair situation in which participants and their hypothetical counterparts received asymmetric rewards for the same performance in a quiz. The asymmetry was either to the participants' advantage or disadvantage, manipulated experimentally. Finally, participants were empowered to redistribute all rewards at will. In line with the benevolence account, individuals high in Honesty–Humility established a fair distribution if they themselves were advantaged (thus making sure they do not exploit others) whereas they refrained from rectifying the asymmetry (by taking points from the other) if they were

disadvantaged. Vice versa, the pattern cannot be accommodated by the idea of a (blind) fairness norm which would have implied that individuals high in Honesty–Humility establish an equal distribution irrespective of who is advantaged.

Jacobson, N. C. and M. G. Newman (2015). ***"Perceptions of close and group relationships mediate the relationship between anxiety and depression over a decade later "*** Depression and Anxiety: n/a-n/a.
http://dx.doi.org/10.1002/da.22402
　　　　Background Previous research has demonstrated that anxiety reliably predicts later depression, but little has been uncovered about the mechanism underlying this connection. Interpersonal relationships appear to be a viable mechanism of the association as anxiety has been shown to predict later deficits in both close (e.g., "best friendships") and group relationships (e.g., classroom peer groups), and deficits in both close and group relationships have been linked to later depressive symptoms. The current study examined close and group relationships as potential mediators between anxiety and depression 12–14 years later. Methods In a nationally representative sample of adolescents (N = 6,504), anxiety was measured at baseline, perceptions of close relationships (i.e., feeling loved) and perceptions of group relationships (i.e., feeling part of a group) were measured 6 months later, and depression levels and diagnosis were measured 12–14 years later. Results Using structural equation models, the results showed that adolescent perceptions of both close and group relationships significantly mediated the relationship between adolescent anxiety and adult levels of depression. Furthermore, perceptions of not being accepted/loved in close relationships significantly mediated the relationship between adolescent anxiety and clinical depression in adulthood. Conclusions These results suggest that a perception of not being accepted in group relationships may be a mechanism by which heightened anxiety in adolescents leads to heightened nonclinical depression in adulthood. On the other hand, adolescent perceptions of not feeling loved or accepted in close relationships may be a mechanism by which heightened anxiety in adolescence leads to clinical depression—in adulthood.

Janz, P., C. A. Pepping, et al. (2015). ***"Individual differences in dispositional mindfulness and initial romantic attraction: A speed dating experiment."*** Personality and Individual Differences 82: 14-19.
http://www.sciencedirect.com/science/article/pii/S0191886915001336
　　　　Initial romantic attraction has important implications for the development of romantic relationships. Much research demonstrates that physical attractiveness predicts initial romantic attraction. However, less is known about the influence of individual difference characteristics on initial romantic attraction. Here we examined whether dispositional mindfulness predicted initial romantic attraction beyond the effects of physical attractiveness in a speed-dating experiment. Women were more attracted to men higher in dispositional mindfulness, beyond the effects of physical attractiveness. Men were more attracted to women who were more physically attractive, but female mindfulness did not influence male initial attraction. This is the first study to examine the role of dispositional mindfulness in predicting initial romantic attraction.

Jonason, P. K., G. L. Strosser, et al. (2015). ***"Valuing myself over others: The dark triad traits and moral and social values."*** Personality and Individual Differences 81: 102-106.
http://www.sciencedirect.com/science/article/pii/S0191886914006254
　　　　In samples from America and Germany (N = 1353), we examined how the Dark Triad traits related to different value systems as measured by Moral Foundations and Social Values. Psychopathy was linked to diminished concerns for all Moral Foundations, Machiavellianism was linked to a moral flexibility, and narcissism was linked to a socially desirable form of morality. Machiavellianism and psychopathy scores were associated with a devaluing of collective interests, whereas narcissism was associated with a valuing of individual interests through the value of Self-Enhancement. Individual differences in a variety of values mediated part of the sex differences in the Dark Triad traits. We contend that what makes the Dark Triad traits unique and interesting is that they share a unique complex of values that might run counter to societal expectations for selflessness.

Kerns, K. A., B. L. Mathews, et al. (2015). ***"Assessing both safe haven and secure base support in parent–child relationships."*** Attachment & Human Development 17(4): 337-353. http://dx.doi.org/10.1080/14616734.2015.1042487
　　　　Although the attachment construct refers to a child's tendency to use an attachment figure both as a safe haven in times of distress as well as a secure base from which to explore, approaches to assessing attachment at older ages have focused on safe haven behavior. We tested modified versions of the Friends and Family Interview and the Security Scale Questionnaire to examine separately the correlates of safe haven and secure base support from parents. The main study (n = 107 children, 10-14-year-olds) included both interview and questionnaire assessments of safe haven and secure base support from mothers and fathers. The two methods converged in expected ways, and both showed associations with narrative coherence. Children reported greater safe haven support from mothers and greater secure base support from fathers, suggesting secure base support is a key aspect of father-child attachment. Both mother-child and father-child relationships were related to children's school adjustment and coping.

Kiken, L. G., E. L. Garland, et al. (2015). ***"From a state to a trait: Trajectories of state mindfulness in meditation during intervention predict changes in trait mindfulness."*** Personality and Individual Differences 81: 41-46.
http://www.sciencedirect.com/science/article/pii/S0191886914007727
　　　　Theory suggests that heightening state mindfulness in meditation practice over time increases trait mindfulness, which benefits psychological health. We prospectively examined individual trajectories of state mindfulness in meditation during a mindfulness-based intervention in relation to changes in trait mindfulness and psychological distress. Each week during the eight-week intervention, participants reported their state mindfulness in meditation after a brief mindfulness meditation. Participants also completed pre- and post-intervention measures of trait mindfulness and psychological symptoms. Tests of combined latent growth and path models suggested that individuals varied significantly in their rates of change in state mindfulness in meditation during the intervention, and that these individual trajectories predicted pre-post intervention changes in trait mindfulness and distress. These findings support that increasing state mindfulness over repeated meditation sessions may contribute to a more mindful and less distressed disposition. However, individuals' trajectories of change may vary and warrant further investigation. [Comment: "state" mindfulness was assessed using the Toronto Mindfulness Scale and "trait" mindfulness assessed using the Five Facet Mindfulness Scale].

Lougheed, J. P., P. Koval, et al. (2015). ***"Sharing the burden: The interpersonal regulation of emotional arousal in mother–daughter dyads."*** Emotion. http://psycnet.apa.org/index.cfm?fa=buy.optionToBuy&id=2015-39676-001
　　　　According to social baseline theory (Beckes & Coan, 2011), load sharing is a feature of close relationships whereby the burden of emotional distress is distributed across relationship partners. Load sharing varies by physical closeness and relationship quality. We investigated the effect of load sharing on emotional arousal via galvanic skin response, an indicator of sympathetic nervous system arousal, during a social stressor. Social stress was elicited in 66 adolescent girls (Mage = 15 years) using a spontaneous public-speaking task. Mother–daughter dyads reported their relationship quality, and physical closeness was manipulated by having mothers either touch or not touch their daughter's hand during the performance. We found evidence

of load sharing among dyads who held hands, independent of relationship quality. However, without physical contact, load sharing was only evident among dyads with higher relationship quality. Thus, high relationship quality buffers against threat in a similar way to the physical comfort of a loved one.

Manczak, E. M., A. DeLongis, et al. (2015). *"Does empathy have a cost? Diverging psychological and physiological effects within families."* Health Psychology. http://psycnet.apa.org/psycinfo/2015-40297-001/
   Objective: Parental empathy is associated with a host of beneficial psychosocial outcomes for children. However, less is known about the effects of being empathic for parents. The current study tested the hypothesis that, although parental empathy may be beneficial to children both psychologically and physiologically, it may take a physiological toll on parents. Method: The current study examined psychological and physiological correlates of parental empathy in 247 parent–adolescent dyads. During a baseline laboratory visit, parents and adolescents provide blood samples from which markers of systemic inflammation, including interleukin 1-ra, interleukin 6, and C-reactive protein, were assayed. Parents completed self-report questionnaires of empathy, well-being, and self-esteem, and also reported on their child's emotion regulation. Following the laboratory visit, adolescents completed 2 weeks of daily diary reporting on their emotion regulation abilities. Results: In adolescents, parental empathy was significantly associated with both better emotion regulation and with less systemic inflammation. For parents, being empathic was associated with greater self-esteem and purpose in life, but also with higher systemic inflammation. Conclusions: These findings reinforce the importance of simultaneously considering both psychological and physical health-related effects of psychosocial traits and suggests that empathy may have diverging effects across providers and recipients of empathy.

Morelli, S. A., I. A. Lee, et al. (2015). *"Emotional and instrumental support provision interact to predict well-being."* Emotion 15(4): 484-493. http://www.ncbi.nlm.nih.gov/pubmed/26098734
   Individuals in close relationships help each other in many ways, from listening to each other's problems, to making each other feel understood, to providing practical support. However, it is unclear if these supportive behaviors track each other across days and as stable tendencies in close relationships. Further, although past work suggests that giving support improves providers' well-being, the specific features of support provision that improve providers' psychological lives remain unclear. We addressed these gaps in knowledge through a daily diary study that comprehensively assessed support provision and its effects on well-being. We found that providers' emotional support (e.g., empathy) and instrumental support represent distinct dimensions of support provision, replicating prior work. Crucially, emotional support, but not instrumental support, consistently predicted provider well-being. These 2 dimensions also interacted, such that instrumental support enhanced well-being of both providers and recipients, but only when providers were emotionally engaged while providing support. These findings illuminate the nature of support provision and suggest targets for interventions to enhance well-being.

Muñoz-Reyes, J. A., A. M. Fernández, et al. (2015). *"Fighting ability influences mate value in late adolescent men."* Personality and Individual Differences 80: 46-50. http://www.sciencedirect.com/science/article/pii/S0191886915001348
   Several studies have demonstrated the relationship between handgrip strength (HGS) and fighting ability in men, which is a relevant trait for intrasexual competition to increase the probability of obtaining a mate. However, few studies have determined a relationship between fighting ability and men's self-perceived capacity to find, attract and retain a mate. This capacity is a complex compound of several traits that evolutionary psychology has called mate value. In the present study, in a population of late adolescent men from Chile (M ± SD = 16.94 ± .89 years), we explored the relationship between fighting ability, estimated by both HGS and a self-perceived fighting ability questionnaire, and mate value, assessed with a self-perceived mate value components questionnaire. The results show a strong influence of fighting ability on mate value. This influence affects the subscales of "views from the opposite sex", "sociality" and "relationship history". However, we did not find an effect on the subscales of "wealth", "parenting" or "fear to failure". The relationship between mate value and fighting ability indicates that fighting ability is a relevant component in understanding men's reproductive behaviour, including intrasexual competition and intersexual selection. This effect was observed in adolescents, who have less mating experience than adults.

Nissen-Lie, H. A., M. H. Rønnestad, et al. (2015). *"Love yourself as a person, doubt yourself as a therapist?"* Clinical Psychology & Psychotherapy: n/a-n/a. http://dx.doi.org/10.1002/cpp.1977
   Objective There are reasons to suggest that the therapist effect lies at the intersection between psychotherapists' professional and personal functioning. The current study investigated if and how the interplay between therapists' (n = 70) professional self-reports (e.g., of their difficulties in practice in the form of 'professional self-doubt' and coping strategies when faced with difficulties) and presumably more global, personal self-concepts, not restricted to the professional treatment setting (i.e., the level of self-affiliation measured by the Structural Analysis of Social Behaviour (SASB) Intrex, Benjamin,), relate to patient (n = 255) outcome in public outpatient care. Method Multilevel growth curve analyses were performed on patient interpersonal and symptomatic distress rated at pre-, post- and three times during follow-up to examine whether change in patient outcome was influenced by the interaction between their therapists' level of 'professional self-doubt' and self-affiliation as well as between their therapists' use of coping when faced with difficulties, and the interaction between type of coping strategies and self-affiliation. Results A significant interaction between therapist 'professional self-doubt' (PSD) and self-affiliation on change in interpersonal distress was observed. Therapists who reported higher PSD seemed to evoke more change if they also had a self-affiliative introject. Therapists' use of coping strategies also affected therapeutic outcome, but therapists' self-affiliation was not a moderator in the interplay between therapist coping and patient outcome. Conclusion A tentative take-home message from this study could be: 'Love yourself as a person, doubt yourself as a therapist'. Key Practitioner Messages * The findings of this study suggest that the nature of therapists' self-concepts as a person and as a therapist influences their patients' change in psychotherapy. * These self-concept states are presumably communicated through the therapists' in-session behaviour. * The study noted that a combination of self-doubt as a therapist with a high degree of self-affiliation as a person is particularly fruitful, while the combination of little professional self-doubt and much positive self-affiliation is not. * This finding, reflected in the study title, 'Love yourself as a person, doubt yourself as a therapist', indicates that exaggerated self-confidence does not create a healthy therapeutic attitude. * Therapist way of coping with difficulties in practice seems to influence patient outcome. * Constructive coping characterized by dealing actively with a clinical problem, in terms of exercising reflexive control, seeking consultation and problem-solving together with the patient seems to help patients while coping by avoiding the problem, withdrawing from therapeutic engagement or acting out one's frustrations in the therapeutic relationship is associated with less patient change.

O'Connor, L., R. Rangan, et al. (2015). *"Empathy, compassionate altruism and psychological well-being in contemplative practitioners across five traditions."* Psychology 6: 989-1000. http://www.scirp.org/journal/PaperInformation.aspx?paperID=57476
   (Available in free full text) In an online anonymous study we compared 2409 contemplative practitioners to 450 non-meditators on measures of psychological functioning. The meditators followed five traditions: Tibetan and Theravada Buddhism,

Centering Prayer, Yoga and Mindfulness. Meditators were lower in depression, neuroticism, empathic distress, and types of empathy-based guilt, and higher in empathy (cognitive and emotional), agreeableness, conscientiousness, openness, resilience, and compassionate altruism towards strangers. Comparing traditions found Tibetans and Centering Prayer higher in altruism towards strangers and Centering Prayer lower in neuroticism. In all traditions, intensity and duration of practice predicted positive outcomes. Meditators whose goal was benefit to others, compared to those whose goal was benefit to the self, were lower in depression, empathic distress, and neuroticism, and higher in cognitive empathy, resilience, and altruism towards strangers. Religion-based practitioners were lower in guilt, empathic distress, depression and neuroticism, and higher in conscientiousness, resilience, and altruism towards others compared secular meditators.

Riskin, A., A. Erez, et al. (2015). ***"The impact of rudeness on medical team performance: A randomized trial."*** Pediatrics 136(3): 487-495. http://pediatrics.aappublications.org/content/136/3/487.short

BACKGROUND AND OBJECTIVES: Iatrogenesis often results from performance deficiencies among medical team members. Team-targeted rudeness may underlie such performance deficiencies, with individuals exposed to rude behavior being less helpful and cooperative. Our objective was to explore the impact of rudeness on the performance of medical teams. METHODS: Twenty-four NICU teams participated in a training simulation involving a preterm infant whose condition acutely deteriorated due to necrotizing enterocolitis. Participants were informed that a foreign expert on team reflexivity in medicine would observe them. Teams were randomly assigned to either exposure to rudeness (in which the expert's comments included mildly rude statements completely unrelated to the teams' performance) or control (neutral comments). The videotaped simulation sessions were evaluated by 3 independent judges (blinded to team exposure) who used structured questionnaires to assess team performance, information-sharing, and help-seeking. RESULTS: The composite diagnostic and procedural performance scores were lower for members of teams exposed to rudeness than to members of the control teams (2.6 vs 3.2 [P = .005] and 2.8 vs 3.3 [P = .008], respectively). Rudeness alone explained nearly 12% of the variance in diagnostic and procedural performance. A model specifying information-sharing and help-seeking as mediators linking rudeness to team performance explained an even greater portion of the variance in diagnostic and procedural performance (R(2) = 52.3 and 42.7, respectively). CONCLUSIONS: Rudeness had adverse consequences on the diagnostic and procedural performance of the NICU team members. Information-sharing mediated the adverse effect of rudeness on diagnostic performance, and help-seeking mediated the effect of rudeness on procedural performance.

Schäfer, M., D. B. M. Haun, et al. (2015). ***"Fair is not fair everywhere."*** Psychological Science 26(8): 1252-1260. http://pss.sagepub.com/content/26/8/1252.abstract

Distributing the spoils of a joint enterprise on the basis of work contribution or relative productivity seems natural to the modern Western mind. But such notions of merit-based distributive justice may be culturally constructed norms that vary with the social and economic structure of a group. In the present research, we showed that children from three different cultures have very different ideas about distributive justice. Whereas children from a modern Western society distributed the spoils of a joint enterprise precisely in proportion to productivity, children from a gerontocratic pastoralist society in Africa did not take merit into account at all. Children from a partially hunter-gatherer, egalitarian African culture distributed the spoils more equally than did the other two cultures, with merit playing only a limited role. This pattern of results suggests that some basic notions of distributive justice are not universal intuitions of the human species but rather culturally constructed behavioral norms.

Sherman, G. D., J. S. Lerner, et al. (2015). ***"Perceiving others' feelings: The importance of personality and social structure."*** Social Psychological and Personality Science 6(5): 559-569. http://spp.sagepub.com/content/6/5/559.abstract

Recent research has explored the relationship between social hierarchy and empathic accuracy—the ability to accurately infer other people's mental states. In the current research, we tested the hypothesis that, regardless of one's personal level of status and power, simply believing that social inequality is natural and morally acceptable (e.g., endorsing social dominance orientation, or SDO) would be negatively associated with empathic accuracy. In a sample of managers, a group for whom empathic accuracy is a valuable skill, empathic accuracy was lower for managers who possessed structural power and also for managers who endorsed social dominance, regardless of their structural power. Moreover, men were less empathically accurate than women, a relationship that may be explained by men's higher SDO and greater structural power. These findings suggest that for empathic abilities, it matters just as much what you think about social hierarchies as it does where you stand within them.

Stavrova, O. and D. Ehlebracht (2015). ***"A longitudinal analysis of romantic relationship formation: The effect of prosocial behavior."*** Social Psychological and Personality Science 6(5): 521-527. http://spp.sagepub.com/content/6/5/521.abstract

In line with the sexual selection for altruism hypothesis, research has shown that men and women typically prefer hypothetical partners who are described as prosocial to otherwise similar individuals. In this study, we consider this hypothesis in the real world by examining whether prosocial behavior conveys actual benefits in terms of real-life mating success. Using a nationally representative annual panel data set, we examine the impact of single individuals' prosocial behavior on their probabilities of finding a steady partner in the course of the following year. Our results show that single individuals who frequently engaged in prosocial behavior had substantially higher chances of being in a stable relationship the following year. The effect persisted even after accounting for individual differences in the Big Five personality traits and the degree of social involvement.

Suvilehto, J. T., E. Glerean, et al. (2015). ***"Topography of social touching depends on emotional bonds between humans."*** Proceedings of the National Academy of Sciences. http://www.pnas.org/content/early/2015/10/21/1519231112.abstract

(Available in free full text) Significance: Touch is a powerful tool for communicating positive emotions. However, it has remained unknown to what extent social touch would maintain and establish social bonds. We asked a total of 1,368 people from five countries to reveal, using an Internet-based topographical self-reporting tool, those parts of their body that they would allow relatives, friends, and strangers to touch. These body regions formed relationship-specific maps in which the total area was directly related to the strength of the emotional bond between the participant and the touching person. Cultural influences were minor. We suggest that these relation-specific bodily patterns of social touch constitute an important mechanism supporting the maintenance of human social bonds. Abstract: Nonhuman primates use social touch for maintenance and reinforcement of social structures, yet the role of social touch in human bonding in different reproductive, affiliative, and kinship-based relationships remains unresolved. Here we reveal quantified, relationship-specific maps of bodily regions where social touch is allowed in a large cross-cultural dataset (N = 1,368 from Finland, France, Italy, Russia, and the United Kingdom). Participants were shown front and back silhouettes of human bodies with a word denoting one member of their social network. They were asked to color, on separate trials, the bodily regions where each individual in their social network would be allowed to touch them. Across all tested cultures, the total bodily area where touching was allowed was linearly dependent (mean r^2 =

0.54) on the emotional bond with the toucher, but independent of when that person was last encountered. Close acquaintances and family members were touched for more reasons than less familiar individuals. The bodily area others are allowed to touch thus represented, in a parametric fashion, the strength of the relationship-specific emotional bond. We propose that the spatial patterns of human social touch reflect an important mechanism supporting the maintenance of social bonds.

Tang, V., W. S. Poon, et al. (2015). **"Mindfulness-based therapy for drug-resistant epilepsy: An assessor-blinded randomized trial."** Neurology 85(13): 1100-1107.
http://www.neurology.org/content/early/2015/09/02/WNL.0000000000001967.abstract
OBJECTIVE: To investigate the effectiveness of mindfulness-based therapy (MT) and social support (SS) in patients with drug-resistant epilepsy. METHODS: We performed an assessor-blinded randomized control trial. Sixty patients with drug-resistant epilepsy were randomly allocated to MT or SS (30 per group). Each group received 4 biweekly intervention sessions. The primary outcome was the change in the total score of the Patient-Weighted Quality of Life in Epilepsy Inventory (QOLIE-31-P). Secondary outcomes included seizure frequency, mood symptoms, and neurocognitive functions. The assessors were blinded to the patient's intervention grouping. Results were analyzed using general linear model with repeated measure. RESULTS: Following intervention, both the MT (n = 30) and SS (n = 30) groups had an improved total QOLIE-31-P, with an improvement of +6.23 for MT (95% confidence interval [CI] +4.22 to +10.40) and +3.30 for SS (95% CI +1.03 to +5.58). Significantly more patients in the MT group had a clinically important improvement in QOLIE-31-P (+11.8 or above) compared to those who received SS (11 patients vs 4 patients). Significantly greater reduction in depressive and anxiety symptoms, seizure frequency, and improvement in delayed memory was observed in the MT group compared with the SS group. CONCLUSIONS: We found benefits of short-term psychotherapy on patients with drug-resistant epilepsy. Mindfulness therapy was associated with greater benefits than SS alone in quality of life, mood, seizure frequency, and verbal memory. CLASSIFICATION OF EVIDENCE: This study provides Class II evidence that mindfulness-based therapy significantly improves quality of life in patients with drug-resistant epilepsy.

Thomas, M. L., K. J. Bangen, et al. (2015). **"Development of a 12-item abbreviated three-dimensional wisdom scale (3d-ws-12): Item selection and psychometric properties."** Assessment. http://www.ncbi.nlm.nih.gov/pubmed/26209513
Wisdom has been reported to be associated with better mental health and quality of life among older adults. Over the past decades, there has been considerable growth in empirical research on wisdom, including the development of standardized measures. The 39-item Three-Dimensional Wisdom Scale (3D-WS) is a useful assessment tool, given its rigorous development and good psychometric properties. However, the measure's length can prohibit use. In this article, we used a sample of 1,546 community-dwelling adults aged 21 to 100 years (M = 66 years) from the Successful AGing Evaluation (SAGE) study to develop an abbreviated 12-item version of the 3D-WS: the 3D-WS-12. Balancing concerns for measurement precision, internal structure, and content validity, factor analytic methods and expert judgment were used to identify a subset of 12-items for the 3D-WS-12. Results suggest that the 3D-WS-12 can provide efficient and valid assessments of Wisdom within the context of epidemiological surveys.

Valdmanis, V. G. (2015). **"Factors affecting well-being at the state level in the united states."** Journal of Happiness Studies 16(4): 985-997. http://dx.doi.org/10.1007/s10902-014-9545-0
United States (US) policy makers often rely on economic indicators in order to determine citizens' well-being. Authors of other research in the area of well-being have reported that well-being is a function of other factors beyond just income including health indicators such as physical and mental health, social interactions such as employment and productivity, and politics. Therefore, inclusion of these other factors would better capture variations in well-being. In this paper, well-being in each of the fifty states in the US is assessed using a mixed panel model approach (2009–2011) including typical economic and political measures. The findings from the empirical analysis reveal higher level of equality, as measured by the Gini coefficient, was the strongest indicator of well-being. Conversely, in states considered as politically conservative, an inverse relation was shown to exist between higher levels of state conservative politics and levels of average well-being by state. Finally, per capita income growth was difficult to measure as it related to well-being due to the fluctuations attributed to the recession of 2008. Therefore, state policies focused only on economic measures could not be verified whereas the income equality and/lower levels of income disparity would benefit the state population, as a whole, in terms of well-being.

van der Zwan, J., W. de Vente, et al. (2015). **"Physical activity, mindfulness meditation, or heart rate variability biofeedback for stress reduction: A randomized controlled trial."** Applied Psychophysiology and Biofeedback: 1-12. http://dx.doi.org/10.1007/s10484-015-9293-x
(Available in free full text) In contemporary western societies stress is highly prevalent, therefore the need for stress-reducing methods is great. This randomized controlled trial compared the efficacy of self-help physical activity (PA), mindfulness meditation (MM), and heart rate variability biofeedback (HRV-BF) in reducing stress and its related symptoms. We randomly allocated 126 participants to PA, MM, or HRV-BF upon enrollment, of whom 76 agreed to participate. The interventions consisted of psycho-education and an introduction to the specific intervention techniques and 5 weeks of daily exercises at home. The PA exercises consisted of a vigorous-intensity activity of free choice. The MM exercises consisted of guided mindfulness meditation. The HRV-BF exercises consisted of slow breathing with a heart rate variability biofeedback device. Participants received daily reminders for their exercises and were contacted weekly to monitor their progress. They completed questionnaires prior to, directly after, and 6 weeks after the intervention. Results indicated an overall beneficial effect consisting of reduced stress, anxiety and depressive symptoms, and improved psychological well-being and sleep quality. No significant between-intervention effect was found, suggesting that PA, MM, and HRV-BF are equally effective in reducing stress and its related symptoms. These self-help interventions provide easily accessible help for people with stress complaints.

Verspaandonk, J., M. Coenders, et al. (2015). **"The role of the partner and relationship satisfaction on treatment outcome in patients with chronic fatigue syndrome."** Psychological Medicine 45(11): 2345-2352. http://dx.doi.org/10.1017/S0033291715000288
Background Cognitive behaviour therapy (CBT) for chronic fatigue syndrome (CFS) leads to a significant decrease in CFS-related symptoms and disability. The primary objective of this study was to explore whether partners' solicitous responses and patients' and partners' perceived relationship satisfaction had an effect on treatment outcome. Method The treatment outcome of a cohort of 204 consecutively referred patients treated with CBT was analysed. At baseline, CFS patients completed the Maudsley Marital Questionnaire. The Checklist Individual Strength subscale Fatigue and the Sickness Impact Profile total scores completed by CFS patients post-treatment were used as measures of clinically significant improvement. Partners completed the Family Response Questionnaire, the Maudsley Marital Questionnaire, the Brief Illness Perception Questionnaire, and the Causal Attribution List. Logistic regression analyses were performed with clinically significant improvement in fatigue and disability as dependent variables and scores on questionnaires at baseline as predictors. Results Solicitous responses of the partner were associated with less clinically significant improvement in fatigue and disability. Partners more often reported

solicitous responses when they perceived CFS as a severe condition. Patients' relationship dissatisfaction was negatively associated with clinically significant improvement in fatigue. Conclusions Partners' solicitous responses and illness perceptions at the start of the therapy can negatively affect the outcome of CBT for CFS. We emphasize the importance of addressing this in therapy.

Wayment, H. A., J. J. Bauer, et al. (2015). *"The quiet ego scale: Measuring the compassionate self-identity."* Journal of Happiness Studies 16(4): 999-1033. http://dx.doi.org/10.1007/s10902-014-9546-z
    (Available in free full text) The quiet ego refers to a self-identity that transcends egoism and identifies with a less defensive, balanced stance toward the self and others. Study 1 establishes and confirms the 14-item Quiet Ego Scale (QES) as a higher-order latent factor (capturing the theoretical intersection of four first-order factors: detached awareness, inclusive identity, perspective taking, and growth). In studies 2–4 we examined the association of QES with 25 psychological constructs. Results demonstrate that QES is related to a wide range of characteristics and suggest that the QES measures an identity that strikes a balance between a strong sense of agency (but not egoism) and a strong concern for the welfare of others. Although QES was correlated with a number of related characteristics (e.g., self-compassion, self-determination, authenticity, self-transcendence), it was a distinct predictor of outcomes such as resilience, coping efficacy, and indices of well-being that could aid investigations of human happiness.

Wayment, H. A., A. F. Collier, et al. (2015). *"Brief quiet ego contemplation reduces oxidative stress and mind-wandering."* Front Psychol 6: 1481. http://www.ncbi.nlm.nih.gov/pmc/articles/PMC4588101/
    (Available in free full text) Excessive self-concern increases perceptions of threat and defensiveness. In contrast, fostering a more inclusive and expanded sense of self can reduce stress and improve well-being. We developed and tested a novel brief intervention designed to strengthen a student's compassionate self-identity, an identity that values balance and growth by reminding them of four quiet ego characteristics: detached awareness, inclusive identity, perspective taking, and growth. Students (N = 32) in their first semester of college who reported greater self-protective (e.g., defensive) goals in the first 2 weeks of the semester were invited to participate in the study. Volunteers were randomly assigned to one of three conditions: quiet ego contemplation (QEC), QEC with virtual reality (VR) headset (QEC-VR), and control. Participants came to the lab three times to engage in a 15-min exercise in a 30-days period. The 15-min QEC briefly described each quiet ego characteristic followed by a few minutes time to reflect on what that characteristic meant to them. Those in the QEC condition reported improved quiet ego characteristics and pluralistic thinking, decreases in a urinary marker of oxidative stress, and reduced mind-wandering on a cognitive task. Contrary to expectation, participants who wore the VR headsets while listening to the QEC demonstrated the least improvement. Results suggest that a brief intervention that reduces self-focus and strengthens a more compassionate self-view may offer an additional resource that individuals can use in their everyday lives.

Yan, O. H. and G. A. Bonanno (2015). *"How self-enhancers adapt well to loss: The mediational role of loneliness and social functioning."* J Posit Psychol 10(4): 370-382. http://www.ncbi.nlm.nih.gov/pubmed/25972912
    OBJECTIVE: The tendency toward unrealistically optimistic self-serving biases, known as trait self-enhancement, has been associated with both adaptive benefits and negative social consequences. This study explored these potential benefits and costs in the context of conjugal bereavement. METHOD: The study included 94 individuals who had experienced the death of a spouse 1.5-3.0 years prior. The sample (62 female, 32 male) ranged in age from 37 to 60 (M = 51.45, SD = 6.08). To examine benefits, we used relatively objective measures of overall adjustment: structured clinical interviews and ratings from participants' close friends and relatives. To examine social adjustment, we examined friends'/relatives' ratings of the quality of social interactions and the possible mediating roles of perceived loneliness and friend/relative ratings. RESULTS: Trait self-enhancement was uniformly associated with positive adjustment: relatively lower symptom totals, and friend/relative ratings of both overall better adjustment and better social adjustment. Self-enhancers' low loneliness was found to mediate reduced symptoms. Also, friends'/relatives' ratings of social functioning appeared to mediate self-enhancers' reduced loneliness. CONCLUSIONS: These findings provide further empirical data to challenge the longstanding assumption that inaccurate self-perception is inherently maladaptive. Authentic benefits may result from mistaken perceptions of oneself by influencing the experience of loneliness and how one is seen by close friends/relatives. Self-enhancement may be an adaptation that provides clinically relevant advantages.

Zedelius, C. M. and J. W. Schooler (2015). *"Mind wandering "ahas" versus mindful reasoning: Alternative routes to creative solutions."* Frontiers in Psychology 6.
http://www.frontiersin.org/Journal/Abstract.aspx?s=194&name=cognition&ART_DOI=10.3389/fpsyg.2015.00834
    (Available in free full text) Based on mixed results linking both mindfulness and its opposing construct mind wandering to enhanced creativity, we predicted that the relationship between mindfulness and creativity might depend on whether creative problems are approached through analytic strategy or through "insight" (i.e., sudden awareness of a solution). Study 1 investigated the relationship between trait mindfulness and compound remote associates problem solving as a function of participants' self-reported approach to each problem. The results revealed a negative relationship between mindfulness and problem-solving overall. However, more detailed analysis revealed that mindfulness was associated with impaired problem solving when approaching problems with insight, but increased problem solving when using analysis. In Study 2, we manipulated participants' problem-solving approach through instructions. We again found a negative relationship between mindfulness and creative performance in general, however, more mindful participants again performed better when instructed to approach problems analytically.