



7th Annual Breast Health Summit
October 20-21, 2011

Rev. Gerald J. DeSobe, Ph.D.

Religious coping methods as predictors of psychological, physical and spiritual outcomes among medically ill elderly patients: a two-year longitudinal study.

“Generally, positive methods of religious coping (e.g. seeking spiritual support, benevolent religious reappraisals) were associated with improvements in health. Negative methods of religious coping (e.g. punishing God reappraisal, interpersonal religious discontent) were predictive of declines in health. Patients who continue to struggle with religious issues over time may be particularly at risk for health-related problems.”

K.I. Pargament, et.al

Journal of Health Psychology (2004)

Positive and negative religious coping and well-being in women with breast cancer.

“Negative religious coping methods predict worse mental health and life satisfaction in women with breast cancer.”

R. Hebert, et al.
Journal of Palliative Medicine (2009)

Self-forgiveness, spirituality, and psychological adjustment in women with breast cancer.

“Both a self-forgiving attitude and spirituality were unique predictors of less mood disturbance and better quality of life (p 's < 0.001). These results are consistent with previous research that has demonstrated a positive relationship between spirituality and well-being. The findings also suggest that self-forgiveness should be explored experimentally to determine whether it can protect against the psychological effects of breast cancer-related stress.”

C. Romero, et al.

Journal of Behavioral Medicine (2006)

Image of God: effect on coping and psychospiritual outcomes in early breast cancer survivors

“The belief in an engaged God is significantly related to increased psychological well-being, decreased psychological distress, and decreased concern about recurrence.”

J.A. Schreiber

Oncology Nursing Forum Journal (2011)

The New Front in Breast Cancer: After Treatment Ends

“The second-hardest phase—after the initial diagnosis—is the minute your treatment ends.”

“Nearly 90% of respondents said they had at least one physical, psychological or social problem that was moderate to severe. Mentioned most frequently were fatigue, sexual dysfunction and sleep issues. What’s more, 24% of those surveyed (almost all women, with an average age of 55 and averaging 5.6 years since diagnosis) reported being depressed—about twice the national rate.”

Melinda Beck

The Wall Street Journal

October 11, 2011

Narcissistic Personality Disorder

A pervasive pattern of grandiosity (in fantasy or behavior), need for admiration, and lack of empathy, beginning by early adulthood and present in a variety of contexts, as indicated by five (or more) of the following:

- 1) Has a grandiose sense of self-importance (e.g., exaggerates achievements and talents, expects to be recognized as superior without commensurate achievements)
- 2) Is preoccupied with fantasies of unlimited success, power, brilliance, beauty, or ideal love
- 3) Believes that he or she is “special” and unique and can only be understood by, or should associate with, other special or high-status people (or institutions)
- 4) Requires excessive admiration
- 5) Has a sense of entitlement, i.e., unreasonable expectations of especially favorable treatment or automatic compliance with his or her expectations
- 6) Is interpersonally exploitive, i.e., takes advantage of others to achieve his or her own ends
- 7) Lacks empathy; is unwilling to recognize or identify with the feelings and needs of others
- 8) Is often envious of others or believes that others are envious of him or her
- 9) Shows arrogant, haughty behaviors or attitudes

Obsessive-Compulsive Personality Disorder

A pervasive pattern of preoccupation with orderliness, perfectionism, and mental and interpersonal control, at the expense of flexibility, openness, and efficiency, beginning by early adulthood and present in a variety of contexts, as indicated by four (or more) of the following:

- 1) Is preoccupied with details, rules, lists, order, organization, or schedules to the extent that the major point of the activity is lost
- 2) Shows perfectionism that interferes with task completion (e.g., is unable to complete a project because his or her own overly strict standards are not met)
- 3) Is excessively devoted to work and productivity to the exclusion of leisure activities and friendships (not accounted for by obvious economic necessity)
- 4) Is overconscientious, scrupulous, and inflexible about matters of morality, ethics, or values (not accounted for by cultural or religious identification)
- 5) Is unable to discard worn-out or worthless objects even when they have no sentimental value
- 6) Is reluctant to delegate tasks or to work with others unless they submit to exactly his or her way of doing things
- 7) Adopts a miserly spending style toward both self and others; money is viewed as something to be hoarded for future catastrophes
- 8) Shows rigidity and stubbornness

Histrionic Personality Disorder

A pervasive pattern of excessive emotionality and attention seeking, beginning by early adulthood and present in a variety of contexts, as indicated by five (or more) of the following:

- 1) Is uncomfortable in situations in which he or she is not the center of attention
- 2) Interaction with others is often characterized by inappropriate sexually seductive or provocative behavior
- 3) Displays rapidly shifting and shallow expression of emotions
- 4) Consistently uses physical appearance to draw attention to self
- 5) Has a style of speech that is excessively impressionistic and lacking in detail
- 6) Shows self-dramatization, theatricality, and exaggerated expression of emotion
- 7) Is suggestible, i.e., easily influenced by others or circumstances
- 8) Considers relationships to be more intimate than they actually are

Dependent Personality Disorder

A pervasive and excessive need to be taken care of that leads to submissive and clinging behavior and fears of separation, beginning by early adulthood and present in a variety of contexts, as indicated by five (or more) of the following:

- 1) Has difficulty making everyday decisions without an excessive amount of advice and reassurance from others
- 2) Needs others to assume responsibility for most major areas of his or her life
- 3) Has difficulty expressing disagreement with others because of fear of loss of support or approval. **Note:** Do not include realistic fears of retribution.
- 4) Has difficulty initiating projects or doing things on his or her own (because of a lack of self-confidence in judgment or abilities rather than a lack of motivation or energy)
- 5) Goes to excessive lengths to obtain nurturance and support from others, to the point of volunteering to do things that are unpleasant
- 6) Feels uncomfortable or helpless when alone because of exaggerated fears of being unable to care for himself or herself
- 7) Urgently seeks another relationship as a source of care and support when a close relationship ends
- 8) Is unrealistically preoccupied with fears of being left to take care of himself or herself