



(Photo by Sgt. Jon E. Dougherty, 203rd Engineer Battalion)

Members of the South Dakota Army National Guard's 211th Engineer Company, attached to the 203rd Engineer Battalion, Missouri Army National Guard, bow their heads in prayer prior to departing on a route clearance mission 30 November 2009 in Sharana, Afghanistan.

Religious Participation The Missing Link in the Ready and Resilient Campaign

Chaplain (Maj.) Brian Koyn, U.S. Army

Imagine you are taking command of a battalion. Your selection for command is the culmination of many years of hard work, dedication, and accomplishment. You feel it a great privilege to receive the opportunity to serve at the battalion-level as leader of some of America's best and brightest. However, your elation quickly dims as the heavy burden of command begins to present unwelcome challenges.

In your first month of command, myriad problems raise their nasty heads, and not one seems remotely related to tactical decision making or combat leadership. The first problem occurs within the first week when an early morning phone call startles you awake with the bad news that a sergeant in Bravo Company has taken his own life. The memorial service is hardly complete when another company



(U.S. Air Force photo by Staff Sgt. Kevin Iinuma)

A Combined Joint Task Force–Horn of Africa chaplain looks through his Bible prior to a Catholic service 28 March 2015 at Camp Lemonnier, Djibouti. The chaplain's priorities are to enhance service members' readiness by preparing them with spiritual resiliency, engaging them through a ministry of presence and spiritual care, and ensuring worship and religious education opportunities are available to all.

Spiritual Fitness Outcomes

- Values-based behavior
- Strength of will
- Resilience
- Purpose and meaning in life
- Uplifting relationships
- Openness and acceptance
- Quest for knowledge and truth
- Enhanced motivation to leverage skills to realize potential
- Greater satisfaction and commitment
- Increased happiness

Adapted from Patrick J. Sweeney, Sean T. Hannah, and Don M. Snyder, "The Domain of the Human Spirit," in *Forging the Warrior's Character: Moral Precepts from the Cadet Prayer*, ed. Don M. Snyder and Lloyd J. Matthews (Boston: McGraw Hill, 2008)

reports an attempted suicide. Within the next two weeks, late night phone calls notify you of a domestic violence allegation against one of your soldiers, the arrest of two others for getting into a fight while downtown during a night of drinking, and the detention of an officer from Alpha Company for driving under the influence of alcohol. Your command tour appears to be off to a bad start, and the battalion has not even gone to the field yet.

After consulting with your command sergeant major and investigating the incidents with your staff and affected subordinate commanders, it seems as if the chain of command has done everything right. Command-climate surveys indicate a generally positive climate in the companies; required instruction is current; master resilience trainers are appointed and active, and other required programs seem to be in place.

In a moment of exasperation, you pull out the Ready and Resilient Execution Order (EXORD) and subsequent campaign documents to see if there is anything you may have missed. However, you are disappointed. You discover that although the Army has devoted much time, talent, and money to the Ready and Resilient Campaign, you find barely a mention in campaign documents of one definitive way to help improve resilience and personnel readiness.

What you will not find in any of the Ready and Resilient literature is the vast body of research (identified throughout this article) that reveals active participation in religious communities leads to better overall physical, emotional, and mental health. Unfortunately, the EXORD appears to provide minimal acknowledgment of the power of such participation in religious groups to build and sustain personal as well as unit readiness and resilience.

Ready and Resilient Campaign

When the chief of staff of the Army established his strategic priorities in 2013, the priorities included goals under the heading "Soldiers Committed to Our Army Profession." One goal was to "build the comprehensive physical, mental, emotional, and spiritual resiliency of our soldiers, civilians, and their families to enable them to thrive personally and professionally."¹ Yet, in the subsequent EXORD, which outlines the specific actions necessary to attain

this goal, there is only one passing mention of spirituality. There is no direct reference to involvement in organized religious groups even though the need to build physical, mental, and emotional resilience appears numerous times. The Comprehensive Soldier and Family Fitness (CSF2) sub-component of the program nominally incorporates a spiritual aspect to overall fitness, but the resulting definitions and associated questions on the Global Assessment Tool do not ask about religious faith; they instead employ language seemingly adapted to the tastes of secular humanists that avoids direct reference to religion.²

Should the complete absence of religion be troubling to Army professionals interested in strengthening the resilience of their troops?

Absolutely. Failure to include religious observance as a tool for building individual and unit resilience should be very troubling since the body of peer-reviewed research on the positive link between active participation in religious observance and overall physical and mental health is abundant and compelling.³ Leaving out religion from efforts to build and sustain resilience is comparable to leaving out nutrition in discussions about physical fitness.

Moreover, omission of such references seems to run counter to the EXORD directive itself, which states, "Evidence-based health promotion programs are those that are founded on the best available research and are recommended on the basis of a systematic review of the published, peer-reviewed research."⁴ Setting aside the asserted validity of research on the efficacy of Master Resilience Training, which is still the subject of lively debate, the drafters

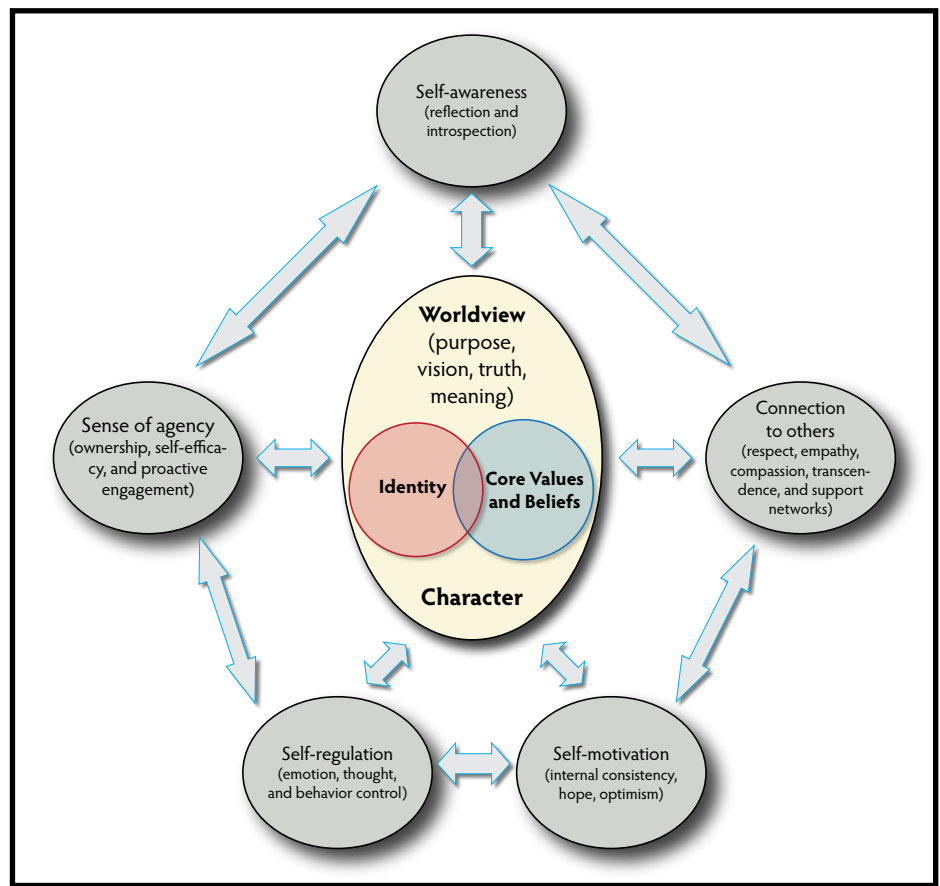


Figure. Conceptualization of the Domain of the Human Spirit

of the EXORD in question seem to have been either unaware of, or to have simply disregarded, overwhelming research showing the strong correlation between active involvement in religion and its beneficial effects on all aspects of health.⁵

With the above in mind, the point of this article is certainly not to disparage or criticize other program initiatives of the resilience campaign but to protest exclusion of what can fairly be called a historically recognized key component of military resilience that has recently gone missing in action. It is also fair to observe that if any other component of resilience development had a similarly compelling body of research, in the same quantity, validating its record of salutary effects on the health of soldiers, the Army would be unabashedly trumpeting the information far and wide in an effort to widely promote the advantages detailed in the research findings. Downplaying religious influence in the

EXORD is no doubt a by-product of contemporary hypersensitivity to all things having the word *religion* attached to them, which is now all too often considered politically incorrect—to the detriment of those who would most benefit from them.

The above noted, it is exceptionally important to observe that religion matters to the Army as an organization because a majority of its members claim some level of religious identification and practice, and that marshalling such to achieve the Army’s readiness and resilience objectives is not only prudent and appropriate, it is also very cost effective.⁶

Benefits of Religion

In an effort to encourage those in the Army responsible for building resilience to closely examine and publicize the readiness advantages that stem from individual involvement in religious activity, this article provides an overview of research that appears to establish a strong link between involvement in religious activities and improved levels of mental, emotional, relational, and physical fitness. It touches upon some especially salient examples of research in the areas of suicide prevention, mitigating substance abuse, and promoting marital stability.

Among the more notable examples of research are those found in the landmark editions of the *Handbook of Religion and Health*, collected by Dr. Harold Koenig and colleagues. These collections comprehensively examine peer-reviewed research

studies relating to religion and health dating from the 1800s to 2010. The results may be surprising to some. According to this research, “at least two-thirds of these studies report that religious/spiritual people experience more positive emotions (well-being, happiness, life satisfaction), fewer emotional disorders (depression, anxiety, suicide, substance abuse), more social connections (social support, marital stability, social capital), and live healthier lifestyles (more exercise, better diet, less risky sexual activity, less cigarette smoking, more disease screening, better compliance with treatment).”⁷ It is also worth noting that the research is not limited to one particular faith; similar findings are reported among many disparate religious groups.

Obviously, the beneficial effects attributable to becoming actively involved in religious groups are exactly what the Army is attempting to achieve with the Ready and Resilient Campaign. Unfortunately, I am unaware of any mention of the results of such comprehensive and easily obtainable research in any of the information promulgated through the current campaign.

Religion vs. Spirituality

This article focuses solely on the overall health benefits from participation in organized religion and not on the broader subject of health-related aspects of the more nebulously defined spirituality. This is not

Faith Group	Active	%	ARNG	%	USAR	%	Total	%
Atheist	3,283	0.7	1,775	0.5	935	0.5	5,993	0.6
Buddhist	2,231	0.4	942	0.3	949	0.5	4,122	0.4
Protestant	270,458	53.6	166,995	47.2	93,069	47.6	530,522	50.3
Catholic	96,012	19.0	56,292	15.9	34,752	17.8	187,056	17.8
Othodox	731	0.1	394	0.1	318	0.2	1,443	0.1
Hindu	673	0.1	193	>0.1	283	0.1	1,149	0.1
Jewish	1,806	0.4	862	0.2	755	0.4	3,423	0.3
Muslim	1,867	0.4	647	0.2	725	0.4	3,239	0.3
Other religions	3,820	0.8	9,201	2.6	870	0.4	13,891	1.3
No preference or unknown	123,449	24.5	116,771	33.0	62,782	32.1	303,002	28.8
Total	504,330		354,072		195,438		1,053,840	

(Data sourced from Dr. Betty Maxfield, chief, Office of Army Demographics)

Table. Fiscal Year 2014 Army Religious Affiliations



(Photo by Sgt. Arlenia Billingslea, 145th Mobile Public Affairs Detachment, Oklahoma Army National Guard)

Maj. Brad Hanna, chaplain for the 45th Infantry Brigade Combat Team, Oklahoma Army National Guard, opens a farewell ceremony with a prayer 16 February 2011 in the Oklahoma City Arena, Oklahoma City, Oklahoma, prior to the unit's deployment to Afghanistan.

to assert that spirituality unrelated to involvement with organized religion—whatever this is interpreted to be in practice—has no health benefits. Only that, currently, the research is abundant with regard to the link between health-related issues and involvement in organized religion, while research on the connection between health and practice of individually defined spirituality unrelated to organized religion is harder to find. Obviously, one obstacle to such research is building consensus on how such spirituality is described and defined, which would be the first necessary step to formulating a legitimate research hypothesis.

Currently the Comprehensive Soldier and Family Fitness (CSF2) program definition of the spiritual dimension is “solidifying one’s purpose, beliefs, values, identity, and life vision in order to live with integrity, persevere in responsibilities, create a life of meaning, and grow through adverse experiences.”⁸ Obviously, spirituality under this definition may not necessarily involve membership in an established religious denomination.

In contrast, most researchers distinguish the broad definition of spirituality from the narrower concept of religion, which is defined as “a system of spiritual beliefs, practices, or both, typically organized around the worship of an all-powerful deity and involving such practices as prayer, meditation, and participation in public rituals.”⁹

Simply put, spirituality may be a part of religious action, but organized religion is not necessarily a part of spirituality. It is important to note that an expanded definition of spirituality by CSF2 includes the mention of religion as one way to achieve spiritual fitness. However, this definition is not easy to find in any literature or even on the CSF2 website.¹⁰

A quick look at the figure depicting the framework of the “Domain of the Human Spirit” developed by the staff at the United States Military Academy (who were among the original proponents of what has become CSF2) will show that religion



(Photo by Sgt. Michael J. MacLeod, 82nd Airborne Division PAO)

Sgt. Jerry Franklin and his wife Catherine complete an exercise on the different ways people express love 14 May 2011 during a Strong Bonds Retreat at Myrtle Beach, South Carolina. "Whether your marriage is in trouble or not, it will do you some good," said Franklin, a communications specialist with 1st Battalion, 504th Parachute Infantry Regiment, 1st Brigade Combat Team, 82nd Airborne Division.

actually fits neatly over this humanist construct and provides an answer to the needs promulgated in the Ready and Resilient Program.¹¹

Specific Examples of Positive Links

Dr. Koenig and his colleagues collected and analyzed hundreds of published studies demonstrating the positive link between religion and health. This is true across numerous categories, including lower rates of depression, better physical health, and lower overall youth delinquency.¹² Since the number of studies is overwhelming, I have limited examples of the positive benefits of religious participation to a selection of studies in three specific categories: suicide ideations and gestures, marital stability, and substance abuse.

Suicide ideations and gestures. At this point in time, no one in the Army should need any more education or motivation as to why we need to deal with this problem. Far too many of our soldiers have taken their own lives, devastating their comrades and families. The question before us is, "How

do we reduce these tragic losses?" Current research shows that 75 percent of peer-reviewed, quantitative studies found lower suicidal ideations and attempts among those who were more religious.¹³

One study is illustrative of the type of research summarized above. A team looked at 15,034 adolescents over a six-year period and found that those who claimed religion was either very or fairly important were 57 percent less likely to make a suicide attempt that required medical care.¹⁴ Another study of young adults in Utah found that between the ages of twenty and twenty-four, the rate of suicide for those who were less religious or nonreligious was more than five times higher than that of their more religious peers.¹⁵

How does religion act as a protective buffer against suicidal behaviors? Primarily, religious communities provide adherents with a sense of belonging and value to the group that discourages suicide on theological grounds. Lack of belonging, feelings of burdensomeness, and overcoming the resistance to self-harm are the key reasons why people end their

own lives.¹⁶ Communities of faith can serve as powerful protectors against this behavior.

Marital stability. Marital stability can be loosely defined as less divorce and separation, greater commitment to the marriage, less spousal abuse, and less infidelity. As an Army, we have appropriately spent millions of dollars on programs like Strong Bonds, which provides research-based training on healthy marital relationship skills. Strong Bonds, as valuable as it has been to the force, is neither a religious program in form or function nor a cure-all for relational resiliency. What follows is a sampling of some of the helpful effects of religiosity on marital stability.

Since 2000, 87 percent of higher-quality studies found significant positive correlation between participation in religious communities and marital stability.¹⁷ (The major exception appears to be when a husband and a wife are from very different beliefs or levels of religious involvement.) These studies strongly suggest that participation in religious communities leads to a much lower rate of infidelity, less domestic violence, less marital conflict, and less frequent instances of behaviors that lead to instability and divorce.¹⁸ Among the many possible explanations for this correlation is that religious affiliation often provides a community of faith, which provides support during stressful times, including increased emotional and physical support, encouragement of conflict-reducing behaviors, and peer group discouragement of divorce.

Substance abuse. Abuse of both alcohol and illegal drugs is a constant source of concern for Army leaders. The Department of the Army reported that “soldiers who abuse alcohol or other drugs are more likely to have financial, marital, legal, and social problems. More than 50 percent of the soldiers discharged for misconduct for other than drugs or alcohol actually had a drug- or alcohol-related incident within the year prior to discharge.”¹⁹ These astounding effects on Army readiness and retention should further encourage us to figure out ways to apply the results of research on religion to substance-abuse prevention and treatment.

The highest quality original research reports prior to 2010 appear to support this contention. These reports show that 90 percent of research subjects

reported that as religious involvement increased, alcohol abuse decreased; 86 percent found the same correlation for drug abuse. Many studies since then continue to report similar findings. Again and again, the research strongly suggests that those involved in religion were more likely to stop drinking heavily, less likely to drink underage, less likely to self-report frequent intoxication, and, in general, less likely to have substance abuse problems.²⁰

Why Religion?

“Why look at religion in the first place?” some may ask. “Despite the positive effects, is this focusing on a small minority at the expense of everyone else?” Nothing could be further from reality. A quick look at the latest Army demographics depicted in the table shows that a vast majority—more than 74 percent of the active-duty force—claims a definite religious preference; up to 8 percent of those in the “no preference or unknown” category are actually unknown and could fall anywhere on the spectrum (see table for numbers of all Army components on page 7).²¹ Given that up to three-fourths of the force claim some sort of religious affiliation or predilection, common sense would indicate that the institution should provide them at least the same level of promotional information, notification of opportunities, and encouragement as if this research were about opportunities for medical or behavioral health treatment.

While this particular research does not directly address the members of the force who claim atheism, humanism, or agnosticism, it does have immediate impact on those who claim religious affiliation.

In no way does this research seek to authorize commanders or any other member of the Army to proselytize or coerce soldiers into participation in any specific religious activity or denomination. However, the fact remains that the U.S. Army is composed of a large number of religious people who would most likely see great benefit from significant increases in funding for religious education and programs—as identified by a large body of persuasive research over a long period of time.

Constitutional Issues

As those who have sworn an oath to support and defend the Constitution of the United States against

all enemies, we must be careful to appropriately exercise the great power of leadership entrusted to us, especially as it relates to religion. The Establishment Clause in the First Amendment states very clearly that the federal government will not pass any laws promoting the establishment of a state religion.²² Subsequent constitutional jurisprudence has interpreted the Establishment Clause as to prohibit any action of the government favoring one religion over another or even the elevation of religion over non-religion. The Army must therefore proceed carefully on any action dealing with the convergence of government and religion. However, as demonstrated by previous legal challenges, the courts have consistently viewed the military as a unique institution, regulated under congressional war powers authority, and given some latitude to, among other things, ensure the free exercise of religion by every soldier.²³ Given the unique needs of soldiers as they relate to resilience and readiness, together with the apparent positive impact organized religion has on mitigating social problems within the military, providing information and supplementing current programs would be a prudent accommodation to allow soldiers the full free exercise of their particular religions.

Recommendations

More research. The Army Research Institute, Walter Reed Institute of Research, and Research and Facilitation Teams are all tasked to conduct research in order to inform Army leaders, facilitate policy decisions, and refine programs.

In many cases, existing research results, which appear to demonstrate a strong positive correlation between religious involvement and positive personal resilience, do not adequately attempt to explain why there is such a positive correlation. Is the reason purely divine influence, or does the beneficial involvement in religion relate more to the positive effects of a community that calls a person to a higher level, that offers encouragement as well as accountability, and that provides models of positive suffering? Once these issues are researched, the results may indeed be applied to nonreligious communities as well, which ultimately will benefit the religious and the nonreligious alike.

On the other hand, some studies do show a negative effect on various aspects of health as a

result of participating in religious events. While we can speculate that negative effects may result from participation with religious groups that foster crime, terrorism, or abuse, not enough research is available to understand exactly what behaviors cause lesser degrees of harm.

As a matter of interest in contributing to the study of human sociology in general, thorough research on religious issues can be expected to benefit nonreligious communities as well by contributing to the knowledge base that all may use for developing understanding of the psychology of soldiers. Much more research is therefore required in the field of religion as it impacts health and, specifically, as it relates to the Army community.

Reinforce existing religious support efforts. On every post in the Army, people from multiple faiths gather regularly in chapels under the leadership of chaplains. Given the great correlation between active participation in communities of faith and greater resilience, it would only make sense to devote more time, money, and personnel to these services.

Every garrison in the Army provides a robust system of faith-group-specific religious support. Although many of these congregations gather in buildings designed to accommodate their grandparents, or even their great-grandparents, the religious landscape has changed in the country over the last forty years, and resources should be provided to ensure facilities and services are able to meet the needs of our soldiers and their families.

Just as other garrison support activities, such as Family, Morale, Welfare, and Recreation or Army Community Services, have evolved and expanded over the years, so too the chapel system must be resourced to allow it to adapt. One example of how to quickly respond is to authorize and fund the Army Chief of Chaplains to write central contracts to provide services such as music support and child care to chapels—services that are critical to many faith groups but currently funded locally from chapel tithes and offerings.

Personnel resources are always an indicator of what the Army believes is important. Current Army chaplains perform a myriad of functions in their units, leaving little time for providing religious support to garrison ministries, and most Army congregations are led by part-time chaplains on loan from their



(Photo courtesy of the New York National Guard PAO)

Col. Frank Kestler, United States Army Reserve, of Shelter Island, New York, prays 29 October 2012 at a field near Arif Kala, Afghanistan. The field was where his stepson, 1st Lt. Joseph Theinert, was killed in combat in June 2010. In addition to saying a prayer with the other soldiers there, Kestler gathered some earth and blessed the ground with holy water given to him by Chrys Kestler, Theinert's mother.

units. Reinforcing the number of chaplains providing dedicated religious support to chapels and ensuring those chaplains have the right skill sets will serve to build a system, regardless of religious denomination, where the organization lives up to the Army Family Covenant and enhances resilience across the force.

The great advantage that Army chaplains have over their civilian counterparts is the ability to take prudent risks in order to meet the needs of their congregants. Civilian congregations are pragmatically tied to filling pews in order to pay salaries and to keep the lights on. For example, an Army chaplain could look at the demographics of a community and could cater a service to the youngest and lowest paid members of our culture without worrying that they will not donate enough to take care of the overhead.²⁴ The

Army Chaplain Corps can develop great programs, evaluate their effectiveness, and quickly adapt to meet the needs of the military community.

Provide medical treatment. Medical providers should implement procedures that enable them to consider the effect of religion on both individual treatment plans and the various programs managed by the U.S. Army Medical Command. The Medical Command and the Office of the Surgeon General are tasked in the EXORD to coordinate the effort to provide data to target specific health-and-wellness needs in the community. Incorporating religion into this data collection picture would allow for better treatment and programs for soldiers and their families.

When entering an Army medical facility, it is now normal to hear questions about smoking and drinking

habits, depression, and posttraumatic experiences. If our providers ask about these important health issues, then why do we not ask about the nature of a patient's religious observance? It is not just the purview of the hospital chaplain to deal with religion; it is a health issue that has a bearing on mental and physical treatment across the board.

However, one study found that 45 percent of physicians surveyed stated it was inappropriate to even inquire about a patient's spiritual history. This does not seem to meet the common-sense test since a great deal of research appears to show that religion greatly affects overall health, behavior, and even adherence to treatment plans.²⁵ A change in policy, and in the medical culture itself, should be made to accommodate such questions for research and diagnostic purposes.

A provider asking about religious involvement is not fostering religious observance in the treatment room. The provider is inquiring about a significant dimension of patient behavior that affects health issues; moreover, we know through surveys of religious preference that religion is very likely to be already present. If a patient describes himself or herself as religious, then the provider should definitely consider this factor in patient care and treatment. Consequently, the medical community must train and encourage providers in the proper and ethical use of this valuable information with direct relevance to whatever behavioral-health steps a physician might consider prescribing.

Educate the force. Many soldiers and family members have no idea of the copious research on religion and health that exists. While it is unethical to coerce or manipulate individuals into religious observance, it is ethical to provide them the same sort of research-based information on the positive effects of religious practice that we provide about depression, nutrition, and other categories of wellness.

Unfortunately, the Global Assessment Tool, a key mechanism used to educate and assess the force, no longer uses any questions that relate to religion; instead, it uses insipid, politically correct language

in reference to a respondent's spirituality. If this assessment, as stated by CSF2, is really "a survey tool through which individuals are able to confidentially assess their physical and psychological health based the five dimensions of strength: social, emotional, spiritual, family, and physical," then specific questions should be included that will enable each soldier and family member to confidentially assess if religion is an area in his or her life that needs reinforcement to affect overall fitness and resilience.²⁶

Conclusion

The recommendations noted are not offered as a panacea to solve all the Army's human-dimension ills. As stated in the Ready and Resilient EXORD, "Science will improve our understanding of resilience and assist us in determining best practices for developing and maintaining resilience, but it cannot, by itself, create or sustain resilience."²⁷ At the end of the day, people will make the difference in the lives of our soldiers. There is great work being performed by so many in researching the effects of religion; their findings appear to have corroborated the many positive effects of religious activities. Soldiers should be made aware of such to enable them to make informed life choices with a totality of information. In the rest of the Army, proven research leads to more resources, time, and personnel, yet just the opposite has occurred at the intersection of religion and health.

When a new battalion commander opens the Ready and Resilient Campaign documents, the commander should be able to read about the scientific research that strongly correlates the positive effects of religion on resilience; thus, he or she will immediately see the opportunities available for the command's soldiers to strengthen their resilience and well-being through their personal faith. The command would be enabled, through readily available resources, to provide robust religious support to those who conclude they need and want it. ■

Chaplain (Maj.) Brian Koyn, U.S. Army, is the deputy chaplain, 7th Infantry Division, at Joint Base Lewis-McChord, Washington. He holds a BS in military history from West Point and a Master of Divinity from Columbia International University. His assignments include the 75th Ranger Regiment, 82nd Airborne Division, and the United States Military Academy.

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