

Guest Editorial

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Published online: 27 October 2011
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Scholarly discourse on the intersection of Judaism and health has a long history, dating to the beginnings of the rabbinic era. This includes Talmudic and midrashic writing and halakhic *responsa* on biomedical and health-related themes; rabbinic and secular academic writing on bioethics; decades of rabbinic and denominational health policy advocacy and community organizing efforts; the establishment of professional fields of Jewish healthcare chaplaincy and pastoral care; contemporary writing on Jewish spirituality and wellness, including works outlining Jewish perspectives on self-actualization, psychology, meditation, healing, and mysticism; and emergence of a contemporary Jewish healing movement advocating congregational and communal programming focused on issues related to health, aging, and well-being.

Most recently, parallel to the growth of research in the larger field of religion and health, empirical studies have begun to appear focused on the impact of Jewish identity and Jewish religious practice on indicators of physical and mental health, health behavior, and healthcare use. By now, considerable social, behavioral, epidemiologic, clinical, and health services research has studied Jewish populations or investigated health-related correlates of beliefs and practices related to Judaism, both in Israel and in the Jewish diaspora, including in the U.S. This literature may be larger than most people realize: a PubMed search of “(Judaism or Jews or Jewish) and (health or healing or healthcare or medicine),” at the time of this writing, turned up over 12,000 hits. Naturally, some of the citations were to things like *in vitro* studies of cells in Israeli labs, and such—not really what one would call studies of the health of Jewish people or of the health impact of Judaism—but most of this was indeed human health-related research.

Included in this growing literature are empirical studies of Jewish religious correlates and predictors of health and well-being outcomes, theoretical and conceptual papers, programmatic summaries and evaluations, and a small number of review articles. With establishment of the Kalsman Institute on Judaism and Health at the Hebrew Union College-Jewish Institute of Religion campus in Los Angeles, the time seems right to acknowledge that Judaism and health has attained the status of a scholarly field *qua* field,

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or at least an established subfield within religion and health, albeit one cobbled together from many disparate pieces. In celebration, this special issue of the *Journal of Religion and Health* was conceived. Interestingly, it has come to our attention that this is not the only such project that is forthcoming in the near term. The *CCAR Journal*, the official academic journal of the North American Reform rabbinic community, is also planning a special issue on Judaism and health, and the rabbinic and theological articles that will appear, one hopes, will provide a nice complement to the research papers published in the present issue.

This issue features eight articles, all of which underwent blinded peer-review according to the standards of the journal's regular submission process. The first article, by Levin and Prince, expands on the summary of the Judaism and health field presented above and outlines the work of the transdenominational Kalsman Roundtable on Judaism and Health Research. Baeke and colleagues provide a comprehensive overview of Jewish bioethical perspectives on euthanasia, surveying rabbinic and denominational statements across the major branches of Judaism. Pollak presents the results of a study Orthodox Jews in the New York area, identifying the presence of a disabled sibling or other family member as most instrumental in the decision to participate in premarital genetic counseling. Andrews uses a Q-sort method with a sample of Jewish American women across the religious spectrum, including unaffiliated Jews, to identify distinct maturity-driven, religion/cultural-driven, and esteem-driven types of modesty. In response to a new Israeli bill regulating ovum donation, Jotkowitz discusses maternal identity from traditional and contemporary Jewish ethical and legal perspectives, including Talmudic casuistry and its alternatives. Using data from a large-scale, stratified random sample of U.S. physicians, Stern and colleagues reveal that Jewish physicians tend to ascribe less importance to a role for religion/spirituality in health and are less likely to inquire about such issues clinically, a trend only partly mediated by lower levels of religiosity, on average, among Jewish physicians. Berry and colleagues describe the first phase—expert and focus-group review of prospective religious instruments—of a new longitudinal study of the impact of religiosity/spirituality on substance abuse, depression, and anxiety among Jewish, Christian, Muslim, and unaffiliated young adults. The final article, by the present guest editor, presents the analyses of data from the National Jewish Population Survey showing a salutary net health impact of Jewish religious observance primarily among Orthodox and Conservative Jews. This issue also features a thoughtful review of Rabbi William Cutter's new book, *Midrash and Medicine*, by Rabbi Samuel E. Karff, former president of the Central Conference of American Rabbis.

Our hope is that this special issue will serve both to advance scholarly study of the myriad substantive topics found at the intersection of Judaism and health and to expand the reach of the larger field of religion and health, which up to now has been so dominated by research and scholarship focused on the Christian faith. As noted, there are rich wellsprings of sophisticated academic rabbinic and biomedical writing on this subject of very long standing: the great medieval sage Maimonides, for one, was both a physician and a philosophical theologian and was noted for his timeless writing on both medical and rabbinic themes and on their overlap. As the field of Judaism and health evolves and matures, perhaps, God willing, there are new Jewish sages whose voices will emerge.