Chapter 11
The Spiritual Dimension of Coping: Theoretical and Practical Considerations

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Abstract In this chapter, I suggest that religion is designed first and foremost to facilitate spirituality—that is, to help people achieve spiritual goals. Building on this premise, I maintain that attempts to understand religion in purely biological, psychological, or social terms can provide, at best, an incomplete picture and, at worst, a distorted view of religious life. In this chapter, I present a model for understanding spirituality as a natural and normal part of life. I then examine the spiritual dimension of coping with life stressors within the context of this larger model of spirituality. I conclude the chapter with a discussion of the practical implications of spiritual coping.

Introduction

As with many maxims, the old saying that there are no atheists in foxholes is not particularly accurate. In fact, many people do not believe in God before a crisis, hold to their religious unbelief throughout their ordeal, and remain disbelievers after (Brenner, 1980). Yet, like many maxims, this old saying contains a grain of truth. Empirical studies do reveal a link between religion and major life crises. In some groups, religion is the first resource drawn on in stressful times (Conway, 1985–1986). Some experiences are so stressful that they elicit a religious response in a large majority of individuals. Following the 9/11 terrorist attacks, 90% of a sample of people in the United States reported that they turned to religion for solace and support (Schuster et al., 2001).

Theorists and practitioners have long tried to explain the "quickening" of religion in times of stress. Freud (1927/1961) viewed religion as a response to the child-like need for protection and security from the destructive forces in nature and within oneself. Other social scientists have attempted to explain religion in less pejorative psychological and social terms. Geertz (1966), for example, maintained that religion

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provides its adherents with a sense of meaning in life. "The effort is not to deny the undeniable," he wrote, "that there are unexplained events, that life hurts, or that rain falls upon the just – but to deny that there are inexplicable events, that life is unendurable, and that justice is a mirage" (pp. 23–24). Durkheim (1915) argued that religion is designed to unite its followers into a single moral community. More recently, Kirkpatrick (2005) has asserted that religion is a by-product of evolution.

Although these theories offer very different explanations for the connection between religion and life stress, they rest on a common assumption—that religion is best explained by a factor that is nonreligious in nature, be it anxiety reduction, meaning in life, community solidarity, or evolution. Certainly, we can find people who look to their faith for psychological or social purposes. Consider some examples drawn from our interviews with people from the community. One college student describes her images of God and Jesus in a manner consistent with the writings of Freud: "I view God as a loveable, protective, compassionate, generous father that loves to hold me in His arms and set me on His lap. Jesus I see as a shepherd and I envision myself as a little white lamb who is always following him around, who loves to be held by him and who sleeps next to him." A priest recounts the funeral of his mother and the feeling of community he experienced in a way reminiscent of Durkheim: "The funeral was astounding . . . The whole church, everybody was there. Many, many friends were there. Students from here, and the liturgy was a real experience of the resurrection. It was terrific. My blind niece played the piano . . . And my best friend David gave the homily . . . So there were so many powerful religious expressions and family expressions. It is hard to separate one from the other." In yet another example, a quadriplegic accident victim talks about the meaning he has derived from his faith in language supportive of Geertz: "Well, I'm put in this situation to learn certain things, 'cause nobody else is in this situation.' It's a learning experience; I see God's trying to put me in situations, help me learn about Him and myself and also how I can help other people" (Bulman & Wortman, l977, p. 358).

These anecdotes illustrate the variety of psychological and social roles religion can play in stressful situations. But do they tell the full story? To frame the question in another way, is religion simply a means of attaining psychological, social, or physical ends?

The Meaning of Spirituality

The concept of spirituality, as used in this chapter, does not refer to a fixed set of beliefs or practices. It is, instead, a process; a part of life that develops, shifts, and changes over the course of the lifespan. Spirituality is defined as "a search for the sacred" (Pargament, 1999, p. 12). Two terms are key to this definition: sacred and search. By sacred, I am referring not only to concepts of God or higher powers but also to other aspects of life that take on divine character and significance by virtue of their association with, or representation of, divinity (Pargament

& Mahoney, 2002, 2005). Many life domains can be perceived as manifestations of God or as imbued with divine attributes, such as transcendence, boundlessness, and ultimacy. For example, love and the products of love—marriage, sexuality, and family—can be perceived as sacred. Human virtues such as forgiveness, gratitude, justice, compassion, and courage can be understood as "signals of transcendence," signs of a reality that goes beyond the immediate situation (Berger, 1969). Time too can be elevated to sacred status as we hear in the words of theologian Abraham Heschel (1986): "Six days a week we live under the tyranny of things of space; on the Sabbath we try to become attuned to holiness in time. It is a day on which we are called upon to share in what is eternal in time, to turn from the results of creation to the mystery of creation; from the world of creation to the creation of the world" (p. 304). By focusing on the sacred as the central phenomena of interest, we are able to expand the subject matter of spirituality beyond traditional religious concerns, such as church attendance, prayer, religious affiliation, and dogma, to a wider range of domains, for virtually any aspect of life can become a sacred matter. It is important to add that perceptions of sacredness are not unusual. In a recent survey of Americans, 78% agreed that they "see evidence of God in nature and creation"; 75% agreed that they "see God's presence in all of life"; and 68% agreed that they sense that their spirit "is part of God's spirit" (Doehring et al., 2009).

The second key term in the definition of spirituality is "search." By search, I am referring to what people do to discover the sacred, develop and sustain a relationship with the sacred, and when necessary, transform their relationship with the sacred (Pargament, 2007). The search for the sacred is perhaps best illuminated by a case example.

The Story of Cindy

Cindy is a 40-year-old married mother of four children who agreed to share her spiritual story in an interview (see Pargament, 2007, for complete story). Though she dressed like a young woman, she had more than her fair share of wrinkles and it was clear that she had seen some hard times. Nevertheless, she spoke with energy, honesty, and deep feeling. For almost as long as she can remember, Cindy said, she felt a hunger for God. At the age of four, she had a life-changing spiritual experience: "I was sitting in a field behind our house, and the sun was going down, and I just felt like God had His arms around me." Cindy believed that this experience was a gift from God: "I think he knew . . . that I would need that [gift] to carry me through some of the hard times." Important as it was, Cindy kept her spiritual experience to herself. Her father, a cold and distant man, had been embittered by what he felt was rejection from his church and would have little to do with religion. Her mother kept a bible at home but never broached the subject of religion and never encouraged Cindy to go to church. Cindy would occasionally accompany a friend to her small Protestant church, but there she learned about a divine figure quite different from the God she had encountered in the field. This was a God "sitting up on a throne

someplace, and all He ever really did was throw fire balls down on people." Cindy moved into adolescence believing that her relationship with God depended on her ability to live a sin-free life. The stage was set for failure. "The first time I screwed up, I thought, 'That's it,' I blew it, and had nobody to tell me any different. What happened after that was my life really took a downward spiral."

Feeling that she'd lost her "Christian God," Cindy began to search for the sacred elsewhere. Over the next 15 years, she experimented with astrology, tarot card reading, witchcraft, the occult, and Eastern mysticism. She also married four times, gave birth to four children, became addicted to cocaine, and moved out leaving her children behind with her mother.

A turning point in Cindy's life occurred when her mother died 10 years ago. Returning home for the funeral, Cindy discovered that a former "partying" friend had become Christian. Cindy's friend recounted her conversion with the story now popularized in the "footprints poster." The poster depicts two sets of footprints in the sand that then become a single set of footprints in difficult times. The individual in the poster complains: "Lord, I thought that when things are rough you would never leave me." And the Lord responds, "Those were the times that I carried you, and that's why you only saw one set of footprints." Cindy was powerfully affected by the story: "I felt like that was written for me. And when she told me that, I just thought, my God, He's been there with me this whole time. He never left. Jesus has been standing right by me."

Over the next 10 years, Cindy made significant changes in her life. She was treated for her chemical addiction, returned home, regained custody of her children, and developed a new, more compassionate understanding of God: "[He] accepts you just the way you are. You don't have to attain a level of perfection ever. He doesn't expect that from you." Cindy's view of the sacred also broadened. "Now I see [God] more in people and how He affects people's lives."

Currently, Cindy tries to deepen her relationship with God by daily prayer, active involvement in her church, and her new vocation—working with chemically dependent adolescent girls. Though she feels more rooted and stable, she does not believe that her spiritual journey is over. Cindy continues to have some spiritual questions and concerns: "I'd like to know why God let me fall down that shaft with the drugs and the occult and all that. I don't understand why he didn't send anybody into my life at that point. There was nobody, and I don't understand why." However, Cindy is now able to place these questions into a more benevolent spiritual perspective. "[Maybe] He thought I needed the experience to make me a more capable counselor now. It's hard to tell. I mean you're dealing with God. He's a big guy. He knows what He's doing." Asked about the legacy she would like to pass on to her children, Cindy responds in a way reminiscent of her own childhood spiritual experience: "I'd want them to realize that they're not alone . . . that we don't walk this walk ourselves. Once we reach out, Jesus grabs your hand. He's always right there with you."

Cindy's spiritual journey is filled with drama, highs and lows, and critical moments. It is not a one-act play, but rather a series of unfolding episodes. It is not a one-person play, but instead a narrative involving a cast of protagonists set against a larger cultural backdrop. And like any good tale, it contains a plot that

lends coherence to the story. It is not hard to discern the driving force in Cindy's story. From her first spiritual experience as a 4-year-old to the security in God's hand she hopes to pass on to her children, Cindy has been engaged in a search for the sacred. Of course, other motivating forces are at play in Cindy's journey. Her hunger for a warm, embracing God could have been a compensation for the coldness she felt in her father or an effort to find relief from the emptiness she felt in her mother. Yet, to reduce her spiritual quest to purely psychological or social factors would fail to explain fully her spiritual persistence in the face of numerous obstacles. It would also leave us with a story devoid of "soul," a story Cindy herself would find unrecognizable.

Cindy's story is only one of many. There is tremendous diversity in the pathways people take to the sacred as well as in the nature of their sacred destinations. How do we make sense of the diversity in the search for the sacred? We turn now to a theoretical model of spirituality (see Fig. 11.1 for a diagrammatic representation; Pargament, 2007).

We will briefly review the model as a whole, highlighting key terms, and then focus in greater detail on the role of spiritual coping in the context of this larger model.

A Theoretical Model for Understanding and Evaluating Spirituality

The search for the sacred begins with the process of *discovery*. People experience the discovery of the sacred in different ways. Cindy perceived that God came to her as young child. While some feel that they have been touched by the sacred, others reach out to something beyond themselves, as we hear in the words of one child's letter: "Dear God, how is it in heaven? How is it being the Big Cheese" (Heller, 1986, p. 31). These experiences are not rare. Moreover, they are consistent with recent work in cognitive-developmental psychology which suggests that children come into this world already equipped with a propensity to seek out, think about, and experience the sacred (Johnson & Boyatzis, 2006). However, the discovery of the sacred can also occur later in life, as Parker Palmer described:

> One night, in the middle of one of my depressions, I heard a voice I'd never heard before, and haven't heard since. The voice said, "I love you, Parker." This was not a psychological phenomenon, because my psyche was crushed. It was 'the numinous.' It was "mysterium tremendum". . . . That rare experience taught me that the sacred is everywhere, that there is nothing that is not sacred, therefore worthy of respect (Palmer, 1998, p. 26).

As Palmer's experience suggests, the discovery of the sacred has certain consequences. The encounter with the sacred elicits a wave of emotions—what Rudolf Otto (1928) described as the mysterium tremendum—made up of feelings of attraction, including emotions of gratitude, humility, and reverence, and feelings of repulsion, fear, and dread. Haidt (2003) demonstrated how emotions of elevation and awe can be induced spiritually. He exposed one group of participants to video
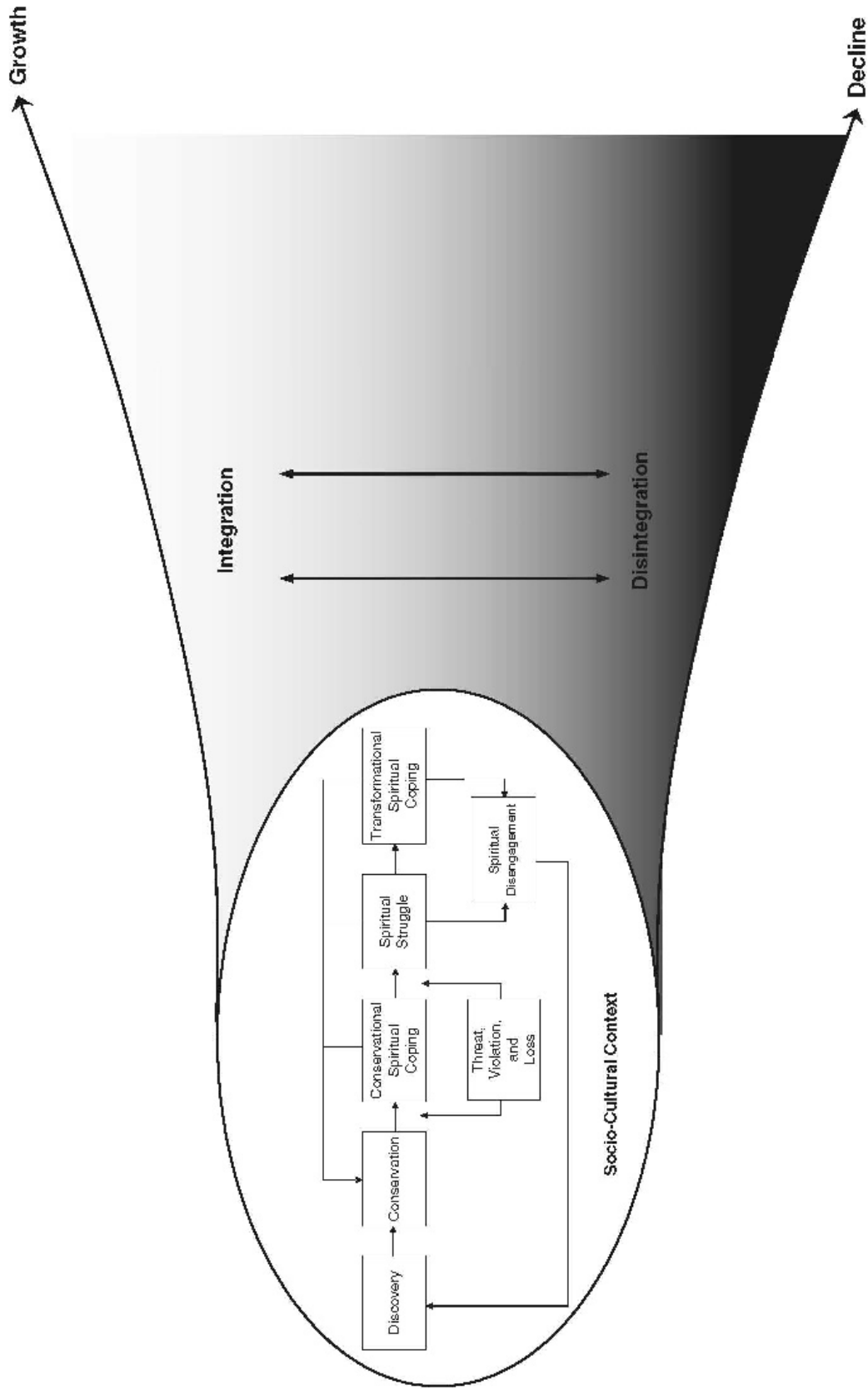
Fig. 11.1 The spiritual process

clips about the life of Mother Teresa. Other participants watched video clips from a neutral documentary and from a comedy sketch. People who watched the clips about Mother Teresa reported more warm, pleasant, and "tingling" feelings in their chests as well as a greater desire to help others and improve themselves. As the source of powerful emotions, the sacred becomes for many a passion and a priority, and as a result, they begin to invest more of themselves in sacred pursuits. For instance, in a study of a national sample of Presbyterians, we found that people who perceive the environment as sacred are more likely to invest their personal funds in environmental causes (Tarakeshwar, Swank, Pargament, & Mahoney, 2001).

Over time, the sacred becomes an organizing and directive force for many people, synthesizing their lives into a larger whole (Emmons, 1999). As Eliade (1957) noted, people want to remain in the sacred realm as long as possible. It is "the place to be." People take a number of pathways to develop and *conserve* their relationship with whatever they hold sacred. Bible study, religious rituals, relationships with clergy and church members, prayer, and meditation are a few of the diverse, traditionally religious ways people try to sustain and deepen their ties to the sacred. Yet, people can also form or follow nontraditional pathways to the sacred, including anything from scientific pursuits to quilting to volunteer services. Cindy, for example, experimented with astrology, witchcraft, and tarot card reading, in her effort to recapture a sense of God's presence in her life.

Empirical studies indicate that by and large people are quite successful in sustaining their relationship with the sacred over time. For instance, in a national survey in the United States, Gallup and Lindsay (1999) found that 97% of those who read the Bible stated that it helped them feel closer to God. Similarly, 95% of those who pray indicated that their prayers had been answered.

And yet, there are times when the search for the sacred may be put to test by trauma or transition. During these times of *threat*, *violation*, or *loss*, people may become spiritually "disoriented" and find it difficult to follow well-worn spiritual pathways. There are, however, a number of *conservational spiritual coping* methods that individuals can draw on to help them sustain their spirituality. These methods are quite effective in general, but not invariably so. Some life events throw the individual's spiritual world into turmoil and the individual then enters a period of *spiritual struggle*. For example, Cindy experienced an internal conflict between her desire to live a life of perfection and her natural adolescent impulses. Her sense of herself as a "child of God" was fundamentally shaken by her adolescent misdeeds that left her convinced that she was an "unforgiveable sinner." Spiritual struggles can be relatively short-lived experiences, followed by a return to established spiritual pathways. But they can also lead either to *spiritual disengagement* from the sacred quest, temporary or permanent, or fundamental *spiritual transformation* in the person's understanding and experience of the sacred. In Cindy's case, the death of her mother and exposure to the "footprint" poster, led to a profound transformation in her understanding of God. In essence, she re-discovered God. Once the sacred has been re-discovered, the task shifts once again to conservation and efforts to deepen a relationship with the sacred as it is now understood. Cindy, for one, is now involved in a variety of pathways, traditional and nontraditional, that help

her build an ongoing connection with the divine. The search for the sacred is not time-limited; it continues over the lifespan in the context of situational, cultural, and psychological forces that both shape and are shaped by the nature of the search.

Spirituality as it is defined here is a natural and normal part of life. It is neither inherently good nor inherently bad. In Cindy's story, we can hear spirituality at both its best and worst. How do we distinguish between the highest and lowest forms of spirituality? Elsewhere, I have proposed process-based criteria for evaluating spirituality (Pargament, 2007). From a process point of view, the value of spirituality does not lie in a single belief, practice, affiliation, trait, or experience. It is instead a quality of a person in interaction with situations and his/her larger context. An effective spirituality is a *well-integrated spirituality*:

> At its best, spirituality is defined by pathways that are broad and deep, responsive to life's situations, and oriented toward a sacred destination that is large enough to encompass the full range of human potential and luminous enough to provide the individual with a powerful guiding vision. At its worst, spirituality is dis-integrated, defined by pathways that lack scope and depth, fail to meet the challenges and demands of life events, clash and collide with the surrounding social system, change and shift too easily or not at all, and misdirect the individual in the pursuit of spiritual value (Pargament, 2007, p. 136).

For much of her life, Cindy's spirituality lacked integration in several respects. As a child, her family and larger community were unable to provide her with the support and nurturance she needed to sustain her feeling of connectedness with God. Thus, the pathways she was able to take to the sacred were neither broad nor deep. She was exposed to a limited representation of God, a God who insisted on perfection and rejected those who failed to live up to this impossible standard. This was what Phillips (1997) has described as a "small god." In response to the spiritual vacuum in her life, Cindy's life spiraled down into drug use, promiscuity, and dabbling with witchcraft and the occult. In some sense, it might be said that she sought out "false gods" to fill the emptiness in her core. Following her transformational experience, however, Cindy's spirituality became more integrated. She was able to re-connect with a larger, more compassionate God and a sense of sacredness that expanded to include other people in her world. She developed a broader and deeper set of spiritual pathways to support and nourish her spiritual connection. And she has a newfound flexible understanding of spirituality as a process that is likely to continue to evolve as she moves forward in her life. Cindy does not downplay the challenges she is encountering. But she is now able to cope with these challenges more effectively by framing them within a larger, more benevolent spiritual perspective.

The Spiritual Dimension of Coping

With this theoretical model for understanding and evaluating spirituality in mind, we can now turn our attention more specifically to the role of spiritual coping in the search for the sacred. This discussion will focus on four processes that are central to

this topic: spiritual trauma, conservational spiritual coping, spiritual struggles, and transformational spiritual struggle.

Spiritual Trauma

Major life stressors affect people on a number of levels. Empirical studies have documented robust links between stressors and physiological and psychological distress, disruptions in social relationships, shattered assumptions about the world, and questions about meaning and purpose in life (see Janoff-Bulman, 1992; Rabkin & Streuning, 1976). There is, however, another dimension to trauma.

Major life events can be understood spiritually as well as psychologically, socially, and physically. Consider the case of clergy sexual abuse. Certainly all forms of sexual abuse are traumatic. Clergy sexual abuse, however, adds another dimension to the abuse, for it is perpetrated by someone who is imbued with spiritual significance (Pargament, Murray-Swank, & Mahoney, 2008). Thus, clergy sexual abuse is likely to be perceived as a spiritual violation or a "desecration." First, it is a violation of the most sensitive parts of the individual's identity, the soul, or that which makes the person uniquely human. As one survivor of clergy sexual abuse wrote: "This guy had my soul in his hand. It was devastating to know that someone would step out of the powers of spiritual liberty to take over someone else's soul . . . I still have anger about a lot of that and I think more of the anger is about the spiritual loss than anything to do with the sexual abuse" (Fater & Mullaney, 2000, p. 290). Second, clergy sexual abuse is a violation of a sacred role and relationship, one that has been set apart from others. Perhaps for this reason, sexual abuse perpetrated by fathers and father figures has been linked to greater trauma than abuse committed by other perpetrators (e.g., Browne & Finkelhor, 1986). Third, it is a violation of a sacred institution that legitimated the cleric, possibly cloaking the acts of the perpetrator, and failing to come to the aide of the survivor. Fourth, clergy sexual abuse is a violation of a set of rituals and symbols that were intertwined with the offending clergy and institutions. One woman who had been abused by her minister at the age of 14 described her alienation from the rituals of her church: "I began to have dreams of communion wafers crawling with insects, of pearls oozing mucous, of the pastor blowing up the church just as I was about to serve communion for the first time" (Disch & Avery, 2001, p. 214). Finally, clergy sexual abuse can be perceived as a violation of the individual's understanding of God as a loving being who insures that bad things will not happen to good people.

The spiritual character of clergy sexual abuse is rather obvious. But other seemingly secular life events can also be perceived as threats to, violations, or losses of the sacred. For example, in one recent study of a community sample, my colleagues and I asked participants to describe a negative event they had experienced in the past 2 years, and then rate the event on the degree to which they perceived it as a desecration or a sacred loss (Pargament, Magyar, Benore, & Mahoney, 2005). The life events included personal illness, personal injury, death of a close family member, job loss, and divorce/separation. Approximately 25% of the sample perceived their

event as a desecration and 38% of the sample perceived it as a sacred loss. Similarly, following the 9/11 terrorist attacks, we surveyed college students in New York and Ohio and found that 50% of the two samples agreed that the attacks were a desecration (e.g., "The event was both an offense against me and against God") (Mahoney et al., 2002).

Major life events that are perceived as spiritual threats, violations, or losses appear to have especially powerful implications for health and wellbeing. For example, perceptions of desecration have been tied to higher levels of anger, post-traumatic symptoms, and depression (Mahoney et al., 2002; Pargament, Magyar, et al., 2005). In the 9/11 study, students who perceived the attacks as a desecration were also more likely to endorse extremist reactions, such as the use of nuclear and biological weapons on countries harboring terrorists (Mahoney et al., 2002). Perceptions of sacred loss have also been associated with higher levels of depression and symptoms of post-traumatic stress (Pargament, Magyar, et al., 2005).

In addition, it is important to emphasizes that crises can affect the spiritual well-being of people. Cindy believed that she had "lost her Christian God." Similarly, we can find anecdotal accounts of the powerful negative spiritual effects of clergy sexual abuse on the individual's relationship with the church and God. As one survivor commented: "I don't think I'll ever step foot in a church again . . . I lost my religion, faith, and ability to trust adults and institutions" (Matchan, 1992, p. 8). Other studies have shown that women with a history of childhood sexual abuse are more likely to report negative characterizations of God (Doehring, 1993). College students who report physical and emotional abuse as children are also less likely to maintain the religious beliefs of their families (Webb & Whitmer, 2003). Thus, spiritual traumas impact people, not only psychologically, socially, and physically, but also spiritually.

Conservational Spiritual Coping

Not everyone is devastated by major life stressors. In fact, many people are able to maintain their equilibrium and even thrive in the face of the most challenging of life situations (e.g., Goertzel & Goertzel, 1962). Whether critical life events lead to serious problems appears to depend, at least in part, on the resources the individual is able to bring to bear to these crises. Empirical studies have identified a number of forms of coping that are tied to less vulnerability and greater resilience to major life events (Lazarus & Folkman, 1984).

Spirituality is one potential resource to people grappling with their most difficult life situations. Pargament (1997, 2007) has identified and studied a variety of spiritual coping methods (see Table 11.1).

These methods of coping can help people sustain themselves psychologically and socially. For example, people can find meaning in negative events by reappraising them from a benevolent spiritual perspective, as we hear in the words of a woman who had been paralyzed in a car accident: "I know God doesn't screw up. He doesn't make mistakes. Something very beautiful is going to come out of this" (Baker

Table 11.1 Conservational methods of spiritual coping

Benevolent spiritual reappraisals:	Redefining a stressor through religion or spirituality as potentially beneficial
Seeking spiritual support:	Searching for love and care from the sacred
Seeking support from clergy/congregation members:	Seeking love and care from congregation members and clergy
Seeking spiritual connection:	Searching for a sense of connectedness with transcendent or immanent forces
Spiritual helping:	Attempting to provide spiritual support to others
Collaborative spiritual coping:	Seeking a partnership with the divine in problem solving
Spiritual purification:	Searching for spiritual cleansing through ritual

From Pargament (2007)

& Gorgas, 1990, p. 5A). Spiritual support can also be a source of psychological strength and empowerment. One older man with HIV/AIDS said: "I'm speaking to my higher power, my God. And I give thanks to that power. It has been a source of strength. You know, it's like tapping in to some sort of power source that I can recharge my batteries" (Siegel & Scrimshaw, 2002, p. 95).

These anecdotal accounts are not unusual. Moreover, they are supported by a number of empirical studies that tie spiritual coping methods to better psychosocial and physical health outcomes (see Ano & Vasconcelles, 2005). Consider a few recent examples. Murphy, Johnson, and Lohan (2007) reported that parents who made more use of religious coping methods following the violent death of their child were able to find greater meaning in the death five years later. Krause (2006) found that older church members who offered more spiritual support to fellow members were less vulnerable to the effects of financial strain on mortality. Working with a sample of patients undergoing major cardiac surgery, Ai, Peterson, Bolling, and Rodgers (2006) reported that pre-operative spiritual coping was associated with better post-operative, short-term, global functioning. These studies highlight the important role spiritual resources can play in sustaining people psychologically, socially, and physically when they are going through hard times.

Most importantly, however, these spiritual coping methods are designed to conserve spirituality itself. Many people in crisis speak to the vital spiritual function of these resources. For example, one Hindu woman disabled from birth with a neuromuscular disorder described how her benevolent spiritual perspective helped her not only psychologically but also spiritually: "I was told by the swamis early in my study of Vedanta that disability was present in my life so that I could grow in new ways and progress along the path to God consciousness. I have always had rebellious tendencies, and I am sure that, had I not had a disability, I would have easily succumbed to the temptations of the 60s. . . . This life is riddled with physical frustrations but wealthy with opportunities for spiritual growth" (Nosek, 1995, pp. 174–175).

Are spiritual methods of coping effective in conserving spirituality? A number of studies suggest that they are. For instance, in one investigation of medically ill, hospitalized elders, those who made more use of the conservational methods of

spiritual coping (e.g., benevolent religious reappraisals, seeking spiritual support, spiritual helping, spiritual purification) reported strong increases in their feelings of closeness to God, their sense of spirituality, and their closeness to their church over the following 2 years (Pargament, Koenig, Tarakeshwar, & Hahn, 2004). Other studies have shown that spirituality is generally quite resilient to the effects of major life crises. Brenner (1980) conducted a retrospective survey of Jewish Holocaust survivors and found that 61% reported no change in their religious behavior before the Holocaust, after the Holocaust, and at the time of the study.

Spiritual Struggles

Although spirituality is generally quite capable of withstanding the effects of major life events, there are times when an individual's spiritual resources are not capable of dealing effectively with the demands raised by internal transitions or external situations. During these times, the individual's system of spiritual beliefs, practices, relationships, experiences, and strivings may be shaken or shattered, and the individual undergoes a spiritual struggle—a period of spiritual uncertainty, tension and conflict.

We can distinguish among three types of spiritual struggle (Pargament, Murray-Swank, Magyar, & Ano, 2005). Interpersonal spiritual struggles involve conflicts among families, friends, tribes, and nations. For instance, in a study of older adults, Krause, Chatters, Meltzer, and Morgan (2000) identified several types of negative interactions among church members, including cliquishness, hypocrisy by clergy and members, and gossiping. One woman complained: "They get off in a corner and talk about you and you're the one that's there on Saturday working with their children and ironing the priest's vestments and doing all that kind of thing. . . . But they don't have the Christian spirit" (p. 519). These kinds of interpersonal conflicts are not uncommon. Nielsen (1998) reported that 65% of an adult sample voiced some sort of religious conflict in their lives, most of which were interpersonal in nature.

Intrapsychic spiritual struggles are defined by questions and doubts about matters of faith. These doubts may focus on one's own ultimate value or purpose in life, or on the claims of religious traditions, as we hear in the painful questions raised by one adolescent: "Is Christianity a big sham, a cult? If an organization were to evolve in society, it would have to excited people emotionally, it would have to be self-perpetuating, it would need to be a source of income, etc. Christianity fits all of these. How do I know that I haven't been sucked into a giant perpetual motion machine" (Kooistra, 1990, p. 95). In one study of a national sample of Presbyterians, only 35% indicated that they had never had any religious doubts (Krause, Ingersoll-Dayton, Ellison, & Wulff, 1999). Exline (2003) identified another intrapsychic spiritual struggle that deserves note—the tension between the desire to cultivate and pursue elevated ends and the temptations to satisfy more

basic human appetites. This is the kind of struggle that Cindy experienced as an adolescent.

Perhaps most painful of all are struggles with the divine. These struggles include emotional expressions of abandonment and punishment by God as well as anger and fear toward God. One articulate 14-year-old illustrates this kind of struggle:

> Many times I wonder how there can be a God – a loving God and where He is . . . I don't understand why He lets little children in Third World countries die of starvation . . . I believe in God and I love Him, but sometimes I just don't see the connection between a loving God and a suffering hurting world. Why doesn't He help us – if He truly loves us? It seems like He just doesn't care? Does He? (Kooistra, 1990, pp. 91–92).

Again, this type of struggle is not unusual. Survey research indicates that 10–50% of various samples report divine spiritual struggles (Exline & Rose, 2005; Fitchett, Rybarczyk, DeMarco, & Nicholas, 1999).

Spiritual struggles appear to be a fork in the road to decline or growth. A number of studies among a variety of samples have linked higher levels of spiritual struggles to declines in mental health, physical health, and even greater risk of mortality (e.g., Ano & Vasconcelles, 2005; Burker, Evon, Sedway, & Egan, 2005; Pargament, Koenig, Tarakeshwar, & Hahn, 2001; Trevino et al., in press). For example, working with a large national sample of college students, Bryant and Astin (2008) found that intrapsychic and divine spiritual struggles were associated with significant increases in psychological distress and declines in self-reported health from freshman to junior years. In addition to their psychological and physiological effects, spiritual struggles can lead to problems or disengagement in the spiritual dimension. A survivor of childhood sexual abuse describes the impact of spiritual struggles this way:

> The death of our God-images causes us pain because we enter a period which is void of any image. Before a new one emerges, we reside in darkness and emptiness. We find it very difficult to pray, and we sense little comfort. We struggle intellectually and emotionally; we yearn for some felt experience of God, yet god is silent. Finally, we begin to wonder if there even is a God because our felt experience seems to be part of the past (Flaherty, 1992, p. 126)

Although spiritual struggles are clearly a source of significant distress for many people, there is some evidence that they may also be a source of personal and spiritual growth. A few investigators have reported that higher levels of spiritual struggle are associated with higher levels of post-traumatic growth. For instance, in a study of people who lived near the site of the 1998 Oklahoma bombing, those who indicated more spiritual struggle also reported greater stress-related growth (Pargament, Smith, Koenig, & Perez, 1998). What determines whether spiritual struggles lead to decline or growth? Certainly, many factors contribute to the direction people take at this fork in the road. One crucial determinant may be whether the individual engages in transformational spiritual coping efforts.

Transformational Spiritual Coping

As Piaget (1954) noted, people generally resist fundamental change. Only after their tried-and-true methods have proven to be less-than-effective are most people willing to entertain the possibility of transformation. This general point holds true for the spiritual domain. Here too people generally prefer to remain with what is familiar than venture off into new paths. Yet, critical life events and the spiritual struggles that follow may insist on change by pointing to the limitations in the individual's understanding of or approach to the sacred.

People can transform their spirituality in a number of ways (see Pargament, 2007). For example, in response to major life transitions such as childbirth, coming of age, marriage, and death, the religions of the world provide their adherents with a variety of rites of passage to mark and facilitate the movement toward new roles and identities. Individuals can also re-vision the sacred following critical life events, as Cindy did in shifting her view from a harsh divine figure that demanded perfection, to a Christian God who had abandoned her after her transgression, to a loving Jesus who had been with her throughout her life. Other people experience a spiritual conversion; a shift in the place of the sacred from the periphery to the very center of an individual's identity. This was the kind of transformation Gandhi was trying to foster in his encounter with a Hindu who confesses, "I am going to Hell. I murdered two Muslim children after the Muslims murdered my family." Gandhi replies, "You may indeed go to Hell. But there may be a way out. Find two orphaned Hindu children and raise them as Muslims" (Decker, 1993, p. 43). As this example also suggests, many people look to their faith for help in the process of forgiveness in which they seek a transformation from a life centered around anger, bitterness, and resentment to one of compassion, peace, and wholeness.

In spite of the central place of spiritual transformation in the narratives of major religious figures across diverse traditions and in the works of the founding figures in psychology, there has been relatively little research on this topic. Recently, however, researchers have begun to take a more serious look at spiritual transformation, including accounts of profound spiritual change (e.g., Miller & C'de Baca, 2001), forgiveness, (Worthington, 2005), and conversion (e.g., Zinnbauer & Pargament, 1998). These findings, preliminary as they are, suggest that people are capable of dramatic and long-lasting change in their spiritual lives. For example, in their study of people who had experienced transformation, what they call "quantum change," Miller & C'de Baca (2001) reported men and women experienced fundamental changes in their most five highly valued personal characteristics. Men changed from "wealth, adventure, achievement, pleasure, and be respected" to "spirituality, personal peace, family, God's will, and honesty." Women shifted in their values from "family, independence, career, fitting in, and attractiveness" before their quantum change to "growth, self-esteem, spirituality, happiness, and generosity" after. Similarly, in a retrospective study of three groups of college students, those who labeled themselves converts, more religious, and religiously unchanged over the past 2 years, Zinnbauer and Pargament (1998) found that the groups of converts and more religious students reported significant improvements in self-esteem, self-confidence,

and personal identity, unlike the religiously unchanged students who reported no changes in their sense of themselves.

It is important to add that spiritual transformations are not necessarily positive. Recall that Cindy initially sought out drugs, the occult, and multiple sexual partners following her adolescent transgression and sense of divine abandonment. She herself saw these activities as negative transformations—attempts to replace her lost Christian God with other, admittedly flawed sacred objects. Cindy's personal story may be representative of a broader process at play here. Caprini-Feagin and Pargament (2008) tested the notion that spiritual struggles create a spiritual vacuum in the lives of individuals who then become more likely to engage in addictive behaviors to fill this inner void. Working with a sample of college students, they found that those who reported higher levels of intrapsychic, interpersonal, and divine spiritual struggles were more likely to develop greater addictiveness over 2 months in several domains, including food starving, gambling, prescription drugs, recreational drugs, sex, tobacco, and work. These findings point to the importance of carefully delineating what the individual holds sacred. Whether spiritual transformations are positive will depend in part on the character of the sacred the individual is moving toward the center of his/her life, and the degree to which the newfound spirituality is well-integrated.

The Practical Implications of Spiritual Coping

Building on the growing body of literature on spirituality and coping, practitioners have begun to attend more explicitly to the spiritual dimension in their efforts to promote change (see Pargament, 2007, for review). One direction they have taken has been to help people draw on their spiritual coping resources. Another direction has been to help people address spiritual struggles in their lives.

Helping People Access Spiritual Coping Resources

Practitioners have developed and evaluated a variety of psychospiritual interventions to assist people in the general population dealing with various critical problems. For example, several programs have been designed to foster forgiveness in response to interpersonal hurt, mistreatment, and victimization (e.g., Worthington, 2005). Even though they are still in their early stages of development, these programs have shown some promising results. Rye and his colleagues compared the effects of a religious forgiveness program with a secular forgiveness program for college students who had been hurt in romantic relationships (Rye & Pargament, 2002) and for ex-husbands and ex-wives struggling with anger toward their former spouses (Rye et al., 2005). The only difference between the two groups was that spiritual resources were explicitly interwoven into the religious forgiveness groups while the secular groups made no mention of religion or spirituality. Both groups proved to be helpful in promoting forgiveness. However, an interesting and important finding

emerged when group participants were asked afterward what resources helped them the most in the forgiveness process. Members of the secular group indicated that two of the three most common resources they used to forgive were spiritual in nature (e.g., "I asked God for help and/or support as I was trying to forgive"). This finding suggests that even presumably secular approaches to change may have an implicitly spiritual character.

Other programs have helped people dealing with medical illness to draw on their spiritual coping resources. For example, Cole (2005) created and evaluated the efficacy of a manualized, spiritually focused therapy program for people diagnosed with cancer. The program, *Recreating Your Life*, encouraged participants to draw on their relationship with the transcendent for support in addressing four existential issues that people with cancer commonly face: the loss of control, loss of identity, loss of meaning, and loss of relationships. Over the course of the 6-week intervention, participants in a nontreatment control condition experienced significant increases in pain severity and depression; in contrast, those in the spiritually focused condition remained relatively stable. Working with a sample of college students with vascular headaches, Wachholtz and Pargament (2008) compared the effects of a spiritual mantra-based meditation to a secular meditation and progressive muscle relaxation. Participants were randomly assigned to the meditation groups which were taught to meditate in exactly the same way, with the exception of their mantras. Those in the spiritual group meditated to an explicit spiritual mantra (e.g., "God is peace" and "God is good"); those in the secular meditation groups meditated to internal or external secular phrases (e.g., "I am good " and "Sunshine is warm"). Measures were collected before the training, 1 month after the training, and 1 month later. The results were quite striking. In comparison to the other meditation and relaxation groups, those in the spiritual meditation group reported more significant declines in the frequency of headaches, negative mood, and trait anxiety, and more significant increases in existential wellbeing, mystical experiences, and pain tolerance as measured by the ability to keep their hands in ice water for longer periods of time.

Another set of programs has encouraged people with significant mental health concerns to access their spiritual resources. For instance, Richards, Berrett, Hardman, and Eggett (2006) developed and evaluated a spiritual treatment program for 122 women with eating disorders in an inpatient setting. They compared three groups: a spirituality group that read and discussed a spiritual workbook containing a variety of spiritual resources, a cognitive group that read and discussed a cognitive-behavioral self-help workbook, and an emotional support group that discussed nonspiritually related topics. Over the course of treatment, all three groups demonstrated positive changes, but the spiritual groups showed greater improvements in eating attitudes and spiritual wellbeing, and greater declines in symptom distress, relationship distress, and social role conflict. Avants, Beitel, and Margolin (2005) developed a spiritually integrated treatment to facilitate fundamental transformation among drug-dependent and HIV-at-risk clients. Spiritual Self-Schema (3-S) Therapy draws on Buddhist teachings and practices (e.g., self-affirmation, prayer, meditation, noble truths) to encourage clients to make a shift from an "addict self-schema" to a "spiritual self-schema". Initial evaluations of 3-S have been quite

encouraging. In one study of treatment-resistant cocaine- and opiate-dependent clients, participants demonstrated a significant change in their self-schemas from the addict self to the spiritual self. In addition, they demonstrated significant declines in drug use and increases in the percentages of drug-free urines, spiritual experiences, spiritual coping, church attendance, and private religious practices.

Helping People Address Spiritual Struggles

A few practitioners have created innovative programs to assist people who are experiencing spiritual struggles in their lives. Although these programs are still in their infancy, they represent an important direction, given the significant implications spiritual struggles hold for health and wellbeing. *Solace for the Soul: A Journey towards Wholeness* (Murray-Swank, 2003) illustrates one such program targeted to the spiritual struggles of female survivors of sexual abuse. As noted earlier, sexual abuse often elicits perceptions of spiritual desecration and struggle. In this nondenominational program, a trained therapist implements a spiritually integrated intervention with a client for 8 weeks. *Solace for Soul* includes prayers to enhance a spiritual connection, focusing breathing to increase the sense of personal control, benevolent spiritual imagery (e.g., God's love as a waterfall within), two-way journaling to God (e.g., expression of feelings of anger and abandonment), spiritual rituals to reduce feelings of shame and self-loathing, and discussion. Using an interrupted time-series design with two survivors of sexual abuse, Murray-Swank and Pargament (2005) demonstrated significant changes in positive religious coping, spiritual wellbeing, and positive images of God over the course of the intervention. At the end of the program, one survivor commented: "This program has really helped me to come together with God a little more. I might go back to church and try praying and listening to God. Although I haven't let go of the anger completely, I am working towards God. Every day . . . I notice the anger coming down. I see myself growing in that way. I know now that God is not the person to be angry at. I am angry at the person who's fault it is . . . *my dad*" (p. 197).

Lighting the Way is another program that has been designed to address the spiritual struggles of women who have been diagnosed with HIV (Pargament, McCarthy, et al., 2004). As with survivors of sexual abuse, people infected with HIV often report feelings of negative feelings toward God, conflicts with church, feelings of shame, guilt, and punishment by God, and questions and doubts about religious matters. *Lighting the Way* is an eight-session group program that normalizes spiritual struggles, encourages their expression, and offers spiritual resources (e.g., gratitude, finding hope, forgiveness, religious support, spiritual surrender) for those interested in spiritual development. In an evaluation of a comparable program among HIV-infected men and women, Tarakeshwar, Pearce, and Sikkema (2005) found that participants reported significant declines in spiritual struggles and depression, and significant increases in positive religious coping over the 8 weeks of the program. Following one session, a woman in *Lighting the Way* commented, "I felt like something was missing in my life. All my life I was looking for something to fill

that space. And I never found it. Friends, good friends, didn't fill that space. Drugs didn't fill it. And finally, I met God, and I feel like my whole chest is full of flowers" (Pargament, McCarthy, et al., 2004, p. 1204).

Conclusions

Spirituality has a dual character in the coping process: it can facilitate the process of change and it can interfere with human growth. In either case, as these programs have illustrated, there is much to be gained by attending more explicitly to the spiritual dimension in our efforts to facilitate health and wellbeing. Of course, these programs represent only a beginning. Exciting opportunities abound for the integration of spirituality into work with other populations as well. For example, spiritual struggles are commonplace and problematic among college students (Bryant & Astin, 2008). These struggles could be addressed more explicitly within the campus curriculum and student support services. Similarly, religious institutions could integrate spiritual struggles more formally in their educational programs, particularly as children move into adolescence when religious questions and doubts become more prominent. All too often religious education ends when it should be beginning, when adolescents are developing the cognitive abilities to grapple with the richness and complexity of spirituality. Efforts to normalize rather than stigmatize spiritual struggles and help young adults anticipate and deal with struggles *before* they occur would be particularly valuable.

In moving from theory to practice, it is vital to recognize that spiritual interventions are just that, spiritual in nature. They are not designed to meet exclusively psychological, social, or physical goals, but are tailored to foster the individual's relationship with the sacred. There is danger then in treating spirituality as merely a convenient tool to reach nonspiritual goals. At the same time, we have to be careful of distinguishing too sharply between spirituality and other spheres of life. Generally, change in one dimension is accompanied by change in another. Nevertheless, programs are likely to be more effective when they are based on a deeper understanding of spirituality itself—what it is, its distinctive function, how it develops and changes over the lifespan, how it can be helpful, how it can be harmful, and how it relates to other dimensions of life. Progress in this area will rest on more explicit attention to spirituality as a focus for change and as an outcome of the change process. This work will be undoubtedly challenging, not because spirituality is removed from everyday life, but because it is so deeply interwoven into human experience.

References

Ai, A. L., Peterson, C., Bolling, S. F., & Rodgers, W. (2006). Depression, faith-based coping, and short-term postoperative global functioning in adult and older patients undergoing cardiac surgery. *Journal of Psychosomatic Research, 60*, 21–28.

Ano, G. A., & Vasconcelles, E. B. (2005). Religious coping and psychological adjustment to stress: A meta-analysis. *Journal of Clinical Psychology, 61*, 1–20.

Avants, S. K., Beitel, M., & Margolin, A. (2005). Making the shift from "addict self" to "spiritual self": Results from a Stage I study of Spiritual Self-Schema (3-S) therapy for the treatment of addiction and HIV risk behavior. *Mental Health, Religion, and Culture, 8*, 167–178.

Baker, R., & Gorgas, J. (1990, July 19). Crash broke her back, but not her spirit. *News Journal* (Mansfield, OH), p. 5A.

Berger, P. L. (1969). *A rumor of angels: Modern society and the discovery of the supernatural.* Garden City, NY: Anchor Books.

Brenner, R. R. (1980). *The faith and doubt of holocaust survivors.* New York: Free Press.

Browne, A., & Finkelhor, D. (1986). Impact of child sexual abuse: A review of the research. *Psychological Bulletin, 99*, 66–77.

Bryant, A. N., & Astin, H. S. (2008). The correlates of spiritual struggle during the college years. *Journal of Higher Education, 79*, 18–27.

Bulman, R. J., & Wortman, C. B. (1977). Attributions of blame and coping in the "real world": Severe accident victims react to their lot. *Journal of Personality and Social Psychology, 35*, 351–363.

Burker, E. J., Evon, D. M., Sedway, J. A., & Egan, T. (2005). Religious and nonreligious coping in lung transplant candidates: Does adding God to the picture tell us more? *Journal of Behavioral Medicine, 28*, 513–526.

Caprini-Feagin, C. A., & Pargament, K. I. (2008). *Spiritual struggles as a risk factor for addiction.* Paper presented at American Psychological Society, Chicago, IL.

Cole, B. S. (2005). Spiritually-focused psychotherapy for people diagnosed with cancer: A pilot outcome study. *Mental Health, Religion, and Culture, 8*, 217–226.

Conway, K. (1985–1986). Coping with the stress of medical problems among black and white elderly. *International Journal of Aging and Human Development, 21*, 39–48.

Decker, L. R. (1993). The role of trauma in spiritual development. *Journal of Humanistic Psychology, 33*, 33–46.

Disch, E., & Avery, N. (2001). Sex in the consulting room, the examining room, and the sacristy: Survivors of sexual abuse by professionals. *American Journal of Orthopsychiatry, 71*, 204–217.

Doehring, C. (1993). *Internal desecration; Traumatization and representations of God.* Lanham, MD: University Press of America.

Doehring, C., Clarke, A., Pargament, K. I., Hayes, A., Hammer, D., Nikolas, M., et al. (2009). Perceiving sacredness in life: Correlates and predictors. *Archives for the Psychology of Religion, 31*, 55–73.

Durkheim, E. (1915). *The elementary forms of religious life.* New York: Free Press.

Eliade, M. (1957). *The sacred and the profane: The nature of religion.* New York: Harvest Books.

Emmons, R. A. (1999). *The psychology of ultimate concerns: Motivation and spirituality in personality.* New York: Guilford Press.

Exline, J. J. (2003). Stumbling blocks on the religious road: Fractured relationships, nagging vices, and the inner struggle to believe. *Psychological Inquiry, 13*, 182–189.

Exline, J. J., & Rose, E. (2005). Religious and spiritual struggles. In R. F. Paloutzian & C. L. Park (Eds.), *Handbook of the psychology of religion and spirituality* (pp. 315–330). New York: Guilford Press.

Fater, K., & Mullaney, J. A. (2000). The lived experience of adult male survivors who allege childhood sexual abuse by clergy. *Issues in Mental Health Nursing, 21*, 281–295.

Fitchett, G., Rybarczyk, B. D., DeMarco, G. A., & Nicholas, J. J. (1999). The role of religion in medical rehabilitation outcomes: A longitudinal study. *Rehabilitation Psychology, 44*, 1–22.

Flaherty, S. M. (1992). *Women, why do you weep?: Spirituality for survivors of childhood sexual abuse.* New York: Paulist Press.

Freud, S. (1961). *The future of an illusion.* New York: Norton. (Original work published 1927).

Gallup, G., Jr., & Lindsay, D. M. (1999). *Surveying the religious landscape: Trends in U.S. beliefs.* Harrisburg, PA: Morehouse.

Geertz, C. (1966). Religion as a cultural system. In M. Banton (Ed.), *Anthropological approaches to the study of religion* (pp. 1–46). London: Tavistock.

Goertzel, V., & Goertzel, M. G. (1962). *Cradles of eminence*. Boston: Little, Brown.

Haidt, J. (2003). Elevation and the positive psychology of morality. In C. L. M. Keyes & J. Haidt (Eds.), *Flourishing: The positive person and the life well lived* (pp. 275–289). Washington, DC: American Psychological Association.

Heller, D. (1986). *The children's God*. Chicago: University of Chicago Press.

Heschel, A. J. (1986). *The wisdom of Heschel*. New York: Farrar, Straus, and Giroux.

Janoff-Bulman, R. J. (1992). *Shattered assumptions: Toward a new psychology of trauma*. New York: Free Press.

Johnson, C. N., & Boyatzis, C. J. (2006). Cognitive-cultural foundations of spiritual development. In E. C. Roehlkepartain, P. E. King, L. Wagener, & P. L. Benson (Eds), *The handbook of spiritual development in childhood and adolescence* (pp. 211–223). Thousand Oaks, CA: Sage Publications.

Kirkpatrick, L. A. (2005). *Attachment, evolution, and the psychology of religion*. New York: Guilford Press.

Kooistra, W. P. (1990). *The process of religious doubting in adolescents raised in religious environments*. Unpublished doctoral dissertation, Bowling Green State University, Bowling Green, OH.

Krause, N. (2006). Church-based social support and mortality. *Journal of Gerontology: Social Sciences, 61B*, S140–S146.

Krause, N., Chatters, L. M., Meltzer, T., & Morgan, D. L. (2000). Negative interaction in the church: Insights from focus groups with older adults. *Review of Religious Research, 41*, 510–533.

Krause, N., Ingersoll-Dayton, B., Ellison, C. G., & Wulff, K. M. (1999). Aging, religious doubt, and psychological well-being. *The Gerontologist, 39*, 525–533.

Lazarus, R. S., & Folkman, S. (1984). *Stress, appraisal, and coping*. New York: Springer.

Mahoney, A., Pargament, K. I., Ano, G., Lynn, Q., Magyar-Russell, G., Tarakeshwar, N., et al. (2002, August). *The devil made them do it: Demonization and desecration of the 9/11 terrorist attacks*. Paper presented at the annual meeting of the American Psychological Association, Chicago, IL.

Matchan, L. (1992, June 8). Ex-priest's accusers tell of the damage. *Boston Globe*, pp. 1, 8.

Miller, W. R., & C'de Baca, J. (2001). *Quantum change: When epiphanies and sudden insights transform ordinary lives*. New York: Guilford Press.

Murphy, S. A., Johnson, L. C., & Lohan, J. (2007). Finding meaning in a child's violent death: A five-year prospective analysis of parents' personal narratives and empirical data. *Death Studies, 27*, 381–404.

Murray-Swank, N. (2003). *Solace for the soul: An evaluation of a psycho-spiritual intervention for female survivors of sexual abuse*. Unpublished doctoral dissertation, Bowling Green State University, Bowling Green, OH.

Murray-Swank, N., & Pargament, K. I. (2005). God, where are you?: Evaluating a spiritually-integrated intervention for sexual abuse. *Mental Health, Religion, and Culture, 8*, 191–204.

Nielsen, M. E. (1998). An assessment of religious conflicts and their resolutions. *Journal for the Scientific Study of Religion, 37*, 181–190.

Nosek, M. A. (1995). The defining light of Vedanta: Personal reflections on spirituality and disability. *Rehabilitation Education, 9*, 171–182.

Otto, R. (1928). *The idea of the holy: An inquiry into the nonrational factor in the idea of the divine and its relation to the relational*. (J. W. Harvey, Trans.). London: Oxford University Press. (Originally published in 1917).

Palmer, P. J. (1998, September). The grace of great things: Reclaiming the sacred in knowing, teaching, and learning. *The Sun*, Baltimore, Maryland, pp. 24–28.

Pargament, K. I. (1997). *The psychology of religion and coping: Theory, research, practice*. New York: Guilford Press.

Pargament, K. I. (1999). The psychology of religion and spirituality?: Yes and no. *The International Journal for the Psychology of Religion, 9*, 3–16.

Pargament, K. I. (2007). *Spiritually integrated psychotherapy: Understanding and addressing the sacred*. New York: Guilford Press.

Pargament, K. I., Koenig, H. G., Tarakeshwar, N., & Hahn, J. (2001). Religious struggle as a predictor of mortality among medically ill elderly patients: A two-year longitudinal study. *Archives of Internal Medicine, 161*, 1881–1885.

Pargament, K. I., Koenig, H. G., Tarakeshwar, N., & Hahn, J. (2004). Religious coping methods as predictors of psychological, physical, and spiritual outcomes among medically ill elderly patients: A two-year longitudinal study. *Journal of Health Psychology, 9*, 713–730.

Pargament, K. I., Magyar, G. M., Benore, E., & Mahoney, A. (2005). Sacrilege: A study of sacred loss and desecration and their implications for health and well-being in a community sample. *Journal for the Scientific Study of Religion, 44*, 59–78.

Pargament, K. I., & Mahoney, A. (2002). Spirituality: The discovery and conservation of the sacred. In C. R. Snyder & S. J. Lopez (Eds.), *Handbook of positive psychology* (pp. 646–659). New York: Oxford University Press.

Pargament, K. I., & Mahoney, A. (2005). Sacred matters: Sanctification as a vital topic for the psychology of religion. *The International Journal for the Psychology of Religion, 15*, 179–198.

Pargament, K. I., McCarthy, S., Shah, P., Ano, G., Tarakeshwar, N., Wachholtz, A., et al. (2004). Religion and HIV: A review of the literature and clinical implications. *Southern Medical Journal, 97*, 1201–1209.

Pargament, K. I., Murray-Swank, N., Magyar, G., & Ano, G. (2005). Spiritual struggle: A phenomenon of interest to psychology and religion. In W. R. Miller & H. Delaney (Eds.), *Judeo-Christian perspectives on psychology: Human nature, motivation, and change* (pp. 245–268). Washington, DC: APA Press.

Pargament, K. I., Murray-Swank, N., & Mahoney, A. (2008). Problem and solution: The spiritual dimension of clergy sexual abuse and its impact on survivors. *Journal of Child Sexual Abuse, 17*, 397–420.

Pargament, K. I., Smith, B. W., Koenig, H. G., & Perez, L. (1998). Patterns of positive and negative religious coping with major life stressors. *Journal for the Scientific Study of Religion, 37*, 710–724.

Phillips, J. B. (1997). *Your God is too small*. New York: Touchstone Books.

Piaget, J. (1954). *The construction of reality in the child*. New York: Basic Books.

Rabkin, J. G., & Streuning, E. L. (1976). Life events, stress, and illness. *Science, 194*, 1013–1020.

Richards, P. S., Berrett, M. E., Hardman, R. K., & Eggett, D. L. (2006). Comparative efficacy of spirituality, cognitive, and emotional support groups for treating eating disorder inpatients. *Eating Disorders: Journal of Treatment and Prevention, 41*, 401–415.

Rye, M. S., & Pargament, K. I. (2002). Forgiveness and romantic relationships in college: Can it heal the wounded heart? *Journal of Clinical Psychology, 58*, 419–441.

Rye, M., Pargament, K. I., Wei, P., Yingling, D. W., Shogren, K. A., & Ito, M. (2005). Can group interventions facilitate forgiveness of an ex-spouse?: A randomized clinical trial. *Journal of Consulting and Clinical Psychology, 73*, 880–892.

Schuster, M. A., Stein, B. D., Jaycox, L. H., Collins, R. L., Marshall, G. N., Elliott, M. N., et al. (2001). A national survey of stress reactions after the September 11, 2001 terrorist attacks. *New England Journal of Medicine, 345*, 1507–1512.

Siegel, K., & Scrimshaw, E. W. (2002). The perceived benefits of religious and spiritual coping among older adults living with HIV/AIDS. *Journal for the Scientific Study of Religion, 41*, 91–201.

Tarakeshwar, N., Pearce, M. J., & Sikkema, K. J. (2005). Development and implementation of a spiritual coping group intervention for adults living with HIV/AIDS: A pilot study. *Mental Health, Religion, and Culture, 8*, 179–190.

Tarakeshwar, N., Swank, A. B., Pargament, K. I., & Mahoney, A. (2001). The sanctification of nature and theological conservatism: A study of opposing religious correlates of environmentalism. *Review of Religious Research, 42*, 387–404.

Trevino, K. M., Pargament, K. I., Cotton, S., Leonard, A. C., Hahn, J., Caprini-Faigin, C. A., et al. (in press). *AIDS and Behavior*.

Webb, M., & Whitmer, K. J. O. (2003). Parental religiosity, abuse history, and maintenance of beliefs taught in the family. *Mental Health, Religion, and Culture, 6*, 229–239.

Wachholtz, A., & Pargament, K. I. (2008). Does spirituality matter?: Effects of meditative content and orientation on migraneurs. *Journal of Behavioral Medicine, 31*, 351–366.

Worthington, E. L., Jr. (Ed.). (2005). *Handbook of forgiveness*. New York: Routledge.

Zinnbauer, B. J., & Pargament, K. I. (1998). Spiritual conversion: A study of religious change among college students. *Journal for the Scientific Study of Religion, 37*, 161–180.